

Bemidji Area Indian Health Service  
Division of Environmental Health Services  
**Special Injury Prevention Projects – 2025**

**Background**

By authority of the Indian Health Service (IHS) **Director's Health Initiatives** Program; and the **Indian Health Manual, Chapter 11** – Environmental Health, Section 3-11.6D – Community Injury Control, the Bemidji Area Indian Health Service (BAIHS) is pleased to invite tribes to submit proposals for 2025 Injury Prevention (IP) Projects.

**Project Components**

The BAIHS IP program focuses on assisting tribes in developing their capacity to implement public health strategies to reduce injury risks and the incidence of injury in their communities. Projects shall be directly related to capacity building initiatives, especially those that lead to future sustainability. Projects can include the following emphases:

- Implementation of evidence-based proven or promising injury prevention interventions with the aim of future local sustainability;
- Development of internal and external partnerships/coalitions to implement community-based injury prevention initiatives;
- Injury Prevention training to develop the knowledge and skills of persons to support community-based injury prevention initiatives;
- Development of injury data systems to better define the incidence of injury, injury risks, and community attitudes and knowledge of injury related issues; and
- Assessment of community needs, knowledge, or perceptions of injury risks and protective factors.

**RFP Deadline/Funding Amount/Appropriate Expenses**

***Requests for funding must be received by COB February 14, 2025.*** Awards will be announced by March 21, 2025.

- The maximum award for individual initiatives is \$15,000. We are anticipating funding three or four projects.
- While not required, higher consideration will be given to initiatives leveraging in-kind, cash matches or attempting to access other outside funding sources.
- Any tribal or IHS entity is eligible to apply as long as the proposed initiative meets the criteria described in this solicitation.
- Funds may be used for education materials, supplies, printing, dissemination, outreach expenses, and other items as agreed upon.
- Ineligible costs include entertainment, food and beverages, gift cards, electronic devices, and mileage.

This is a non-recurring project. No more than one project per applicant will be funded at any one time. Applicants who have received past BAIHS IP Special Projects funding will be considered only if they have fulfilled all reporting requirements. The funding cycle for projects should not exceed 12 months from the date of the project award. Funds to support projects will be provided via purchase order or contract modification upon receipt of invoices or requisitions for products/services.

## Funding Priorities

Injury is a major public health concern facing American Indian communities in the Bemidji Area IHS (BAIHS). Prevention of many injury types requires the use of comprehensive, multi-factorial strategies at multiple levels. The Prevention Institute's Spectrum of Prevention illustrates the various levels at which interventions can be targeted. The most comprehensive strategies employ combinations of these levels, the strongest of which are listed at the top of the Spectrum. Priority in funding IP Special Project proposals will be in alignment with this concept.

LEVEL OF SPECTRUM	DEFINITION OF LEVEL
<b>6 . Influencing Policy and Legislation</b>	Developing strategies to change laws and policies to influence outcomes
<b>5 . Changing Organizational Practices</b>	Adopting regulations and shaping norms to improve health and safety
<b>4 . Fostering Coalitions and Networks</b>	Convening groups and individuals for broader goals and greater impact
<b>3 . Educating Providers</b>	Informing providers who will transmit skills and knowledge to others
<b>2 . Promoting Community Education</b>	Reaching groups of people with information and resources to promote health and safety
<b>1 . Strengthening Individual Knowledge and Skills</b>	Enhancing an individual's capability of preventing injury or illness and promoting safety

CDC data show the following external causes of injury have the highest mortality and morbidity in our area; these will receive priority for special Injury Prevention funding:

1. **Motor Vehicle Crash injury prevention** aimed at increasing occupant restraint usage and reducing drinking and driving. Proposals submitted must incorporate recommended, evidence-based strategies, for example, as described in CDC's "Tribal Motor Vehicle Injury Prevention Programs for Reducing Disparities in Motor Vehicle-Related Injuries". These strategies include: laws and enforcement, multi-faceted, community-based programs, enhanced enforcement, and sobriety checkpoint <https://www.cdc.gov/mmwr/preview/mmwrhtml/su6301a6.htm>
2. **Violence prevention** (suicide, assaultive violence, and homicide) capacity building. Violence is a complex public health challenge in which the BAIHS desires to fund demonstration projects to assist tribes in building capacity in implementing evidence-based public health strategies to reduce the risk and incidence of violence-related injury.

Proposals to BAIHS for violence prevention must be directly related to capacity building initiatives that include one or more of the following components:

- *Public Health Assessment:* Development of data collection systems to better define the incidence of violent injury, injury risks, protective factors, etc. in the community.
- *Coalition and Collaboration Development:* Developing partnerships to implement community-based violence prevention initiatives.
- *Training:* Developing the knowledge and skills of persons to support community based violence prevention initiatives.

- *Projects*: Developing and implementing effective or promising strategies to prevent or reduce violent injury.

A suggested framework for developing comprehensive violence prevention programs using the public health approach is outlined by CDC at [Violence Technical Package](#)

Tribes are encouraged to research evidence-based strategies for violence prevention, such as the Technical Packages for Violence Prevention

3. ***Elder Fall Prevention*** The literature suggests that effective elder fall prevention programs are multi-factorial. The CDC recommends programs that include the following components:
  - Screening of elders to identify those at high risk;
  - Intervention targeted at high risk elders, including:
    - Group or individual exercise that includes strengthening and balance. Tai Chi has been noted to be especially effective in strengthening postural balance.
    - Education aimed at increasing elder’s knowledge of fall risk factors and prevention strategies.
    - Vision assessment and correction.
    - Medication review by a pharmacist or healthcare professional with medication adjustments as needed.
    - Home safety assessment including home modifications as needed.

Proposals for elder fall prevention must include the components of screening, exercise, and locally feasible interventions such as education, medication review, vision checks, and home safety assessments. An example of this includes <https://www.cdc.gov/steady/index.html>. Proposals solely for home safety assessments and modification will not be funded, as the literature has shown this to be ineffective in reducing elder falls.

## Project Proposal Elements

1. Proposal Cover Sheet (Attachment 1)
2. Proposal:
  - a. Background & Need Statement (10 points):
    - Identify and briefly describe the community and any specific target population served by the project;
    - Describe the injury problem to be addressed by the project, how the problem was identified (i.e., data sources assessments), and as applicable, data documenting the extent of the injury problem in the community or target populations.
  - b. Goals & Objectives and Implementation (40 points):
    - ***Goal statement*** that indicates what is anticipated to be accomplished by the end of the project period.
    - ***Objectives statements*** that relate directly to the project’s goal(s) and align with the Spectrum of Prevention concept. The Objectives should be:
      1. Specific
      2. Measurable
      3. Achievable

4. Realistic
5. Time-framed – when will the objectives be achieved?

- Description of the major activities necessary to achieve each objective and the persons that will be responsible for these activities. Each goal should be listed separately, with a description of specific objectives and activities that will be done to achieve those goals.
- Narrative description of how the proposed project is based on evidence based/proven or promising injury prevention strategies or accepted public health practice.

c. Capacity & Support (15 points):

- Describe the primary programs involved in implementing the project and their respective roles. Participation from the local IHS or tribal environmental health specialist and the tribal community is **required**.
- Include a letter of support from primary programs involved in the project. Letters of support from key partners/collaborators should include a statement from the partner as to their commitment to fulfill their specified role(s) in the project.

d. Budget (10 points):

- Provide a detailed budget and narrative justification consistent with stated objectives and activities.

e. Evaluation (25 points):

- Include a detailed evaluation plan that is directly linked to the goals, objectives, and activities of the project.
- Describe the methods by which the project's progress and effects will be measured and documented.
- Identify and describe which evaluation methods will be used, including process and/or outcome evaluation strategies. The following are examples of these evaluation methods:

- **Process:** numbers of smoke alarms, car seats, safety devices, meetings, educational materials installed/given
- **Outcome:** reductions in injuries or injury deaths over time

- For Process evaluation, the data are focused on the implementation of the intervention. Examples of the data being collected include:

- Number and description of the trainings conducted; and the number and demographics of the people who were trained
- Number and description of products and services provided; and the number and characteristics of the people who received those products and services
- Number and forms of educational events provided; and the number and demographics of people who participated
- The costs for trainings, products, services, or education
- And a measure of how well the trainings, products, services, or education satisfied the participants or recipients. This helps determine if the implementation was appropriately adapted or tailored to the clientele.

As an example, for an intervention conducted to increase child passenger safety seat use, this might include documenting how many individuals were trained, how many seats were distributed, and/or how much funding was used to support the effort.

- For Outcome evaluation the focus is on the effect the intervention has in the priority population. This could be changes in people’s knowledge, attitudes, behaviors, or changes in the physical environment, or changes in the social realm of policies. And, of course, the ultimate outcomes would be the injuries experienced by people.

Examples of the data being collected include:

- Awareness
- Knowledge, skill, attitude
- Individual or group behavior
- Environmental conditions
- Policy enactment and enforcement
- Engineering/technological conditions
- Community norms
- Health outcomes and disparities
- Injury/violence morbidity and mortality (for example, incidence, prevalence, rates of injury events or deaths)

If we continue our example of increasing child safety seat use, our outcome evaluation might document any changes in parents’ knowledge or skill to properly install a seat. It might also document the observable changes in child safety seat use when vehicles are stopped at check points.

## **Reporting Requirements**

Each awardee must submit to the BAIHS a final report upon the completion of the contract. The report due date will be described in the award notification letter. Additional reporting may be required depending on the nature of the project. Ten percent of the total award amount may be retained until the final report has been submitted and accepted by the BAIHS Division of Environmental Health.

Project reports must describe the following:

- Summary of project accomplishments;
- Summary of project barriers and lessons learned;
- Description of key project partners and their contributions to the project;
- Itemized listing of project expenditures to date;
- Summary of project evaluation, including applicable process, impact, and outcome data.

## **Proposal Instructions**

Please submit the following documents:

1. Proposal Cover Sheet (see Attachment 1)
2. Proposal narrative with the following sections:
  - Background & Need
  - Goals & Objectives and Implementation
  - Capacity & Support
  - Budget
  - Evaluation

Proposals are **due by close of business on February 14, 2025** and will receive verification of receipt. Awards will be announced no later than March 21, 2025. Proposals should be emailed to:

Ryan Wheeler, Injury Prevention Specialist  
129 North Brown St.  
Rhinelander, WI 54501  
715-365-5125  
[Ryan.wheeler@ihs.gov](mailto:Ryan.wheeler@ihs.gov)

Attachment 1				<b>PROPOSAL COVER SHEET</b> <b>Injury Prevention Special Projects</b> <b>Bemidji Area Indian Health Service</b> <b>Environmental Health Services Section</b>			
<b>1. Applicant Information:</b>							
Tribe Name:				Organizational Unit/Department:			
Applicant Point of Contact:				Address:			
				Street:			
Phone Number: (        )        -		Fax Number: (        )        -		City:			
Email:				State:		Zip Code:	
I am authorized to commit staff time and resources to accomplish the scope of work of this project should it be selected for funding. I understand that the project will be implemented in partnership with the technical assistance of a designated Bemidji Area IHS or Tribal Environmental Health Specialist and/or Injury Prevention Program representative.							
Applicant Point of Contact Signature:						Date	
<b>2. Project Description:</b>							
Project Title:				Proposed Begin Date		Proposed End Date	
Summary of Broad Project Goals							
<b>3. Estimated Funding:</b>							
Amount Requested from Injury Prevention Program:						\$                    .00	
Have you accessed or applied for any of the following sources of funding for this project (check all that apply – and indicate amount of funds received):  <input type="checkbox"/> Area Equalized IP Shares <input type="checkbox"/> BIA Traffic Safety Grant <input type="checkbox"/> DEHS EHSA funds transferred via mod in 2025 <input type="checkbox"/> IHS Headquarters Tribal Injury Prevention Co-operative Agreements Program <input type="checkbox"/> Other: _____							