Critical Access Hospital and Emergency Medical Services Partner Improvement Project Grant

The Oregon Office of Rural Health (ORH) is pleased to offer a grant opportunity for Oregon Critical Access Hospitals (CAHs) and their partner Emergency Medical Services (EMS) agencies (both internal and external).

Interested CAH and EMS partners should propose projects targeted to improve patient outcomes by strengthening the coordination and partnerships between the EMS and CAH staff and/or departments.

Proposals should aim to drive team-oriented care improvement; improve service integration; reduce barriers to care or capacity gaps; and/or advance the use of policy or program tools to improve outcomes for patients transferred from pre-hospital to hospital environments. Work may also target EMS-based care, such as a Community Paramedic or Mobile Integrated Health program.

Applicants may propose to expand an existing program or implement a new project.

Overall Grant Budget: $10,000:
Number of awards: One (1) $10,000 award **OR** Two (2) $5,000 awards – applicants may choose what option works best for their proposed project.

Important Dates:
Grant applications due: March 4, 2022
Notification of award: March 15, 2022
Mid-cycle status report due: May 31, 2022
Final report due: August 31, 2022

Grantee Requirements:
- Identify a minimum of two target improvement measures that include baseline benchmarking and end of project outcome results.
- Submit a written mid-cycle status summary report by May 31, 2022 (1-2 page).
- Submit a final summary and evaluation report by 08/31/2022 highlighting data and outcome of target improvement measures.
- Provide final budget and spending tracking for all funded activities.

Grant project submission will be reviewed and scored based on the following criteria:
- Overall project proposal (30 points)
- Overall innovation and ability to improve patient care and/or experience (20 points)
- Project proposal to improve or enhance service integration (20 points)
- Inclusion of quality improvement techniques for identifying and tracking targets. (i.e. PDSA/PDCA, Lean techniques, etc.) (15 points)
- Overall thoroughness of grant application (15 points)

Application Instructions:
Please submit proposals _including the items in the order listed below_. Please use the titles provided for each section and use 12-point font for text. The proposal should be submitted in a single PDF document via email to

Stacie Rothwell at rothwels@ohsu.edu by 5:00 pm on Friday, March 4, 2022. All received submissions will be confirmed.

I. Project Description (maximum 2 pages)

  a. Identify the CAH and EMS partner organizations.
  b. Provide a description of the proposed project, including the identified need, plan and activities to address the need. Please also include the anticipated results of the project.
  c. Clearly state the project goal(s) and identify two or more outcome measures that will be targeted by the work, including baseline scores/measures or benchmarks;
  d. Detail the activities proposed to strengthen the targeted measures; and
  e. Person(s) responsible for the project (names, titles, contact information) and their proposed roles.

II. Project Targets, Measurable Indicators and Timeline

  For each project goal please describe:
  a. The measurable metric and target/deliverable for each objective (outcome indicator);
  b. A general anticipated timeline for when targets/deliverables will be achieved.
  c. Tracking method to be used to identify if change/improvements are occurring.

III. Budget

  Please provide a budget (up to $5,000 or $10,000) in the format you choose outlining the anticipated use of the grant funds. Also include, if applicable, a notation of any matching funds obtains from other sources.

  Budgets may include, but are not limited to:
  • Personnel cost including person(s), role(s) and hours assigned to project;
  • Materials and supplies;
  • Travel expenses;
  • Meeting expenses; and
  • Additional sources of funding for project, if any, including funding source and amount.

  Examples of allowable funding use include:
  • Project supplies/materials;
  • Consultants or trainers; and
  • Staff travel to complete projects, including attending training, peer mentoring or related education.

  Funds may not be used for:
  • Food/catering or alcohol.
  • Providing individuals with services that are already funded via Medicare, Medicaid and/or CHIP.
  • Lobbying or advocacy efforts to change in Federal and/or State law.
  • Marketing or advertising to promote recipient's organization.
  • Payment for patient encounters.
  • Equipment or supplies for patient care or hospital operation.