ABOUT THE RITA & ALEX HILLMAN FOUNDATION
The Rita & Alex Hillman Foundation’s mission is to improve the lives of patients, families, and communities through nursing-driven innovation. To this end, the Foundation cultivates nurse leaders, supports nursing research, and promotes new models of care that are critical to making the U.S. health care system more patient-centered, accessible, equitable, and affordable.

PURPOSE
The goal of the Hillman Innovations in Care Program is to advance leading edge, nursing-driven models of care that will improve the health and health care of vulnerable populations, including the economically disadvantaged, racial and ethnic minorities, LGBTQ people, the homeless, rural populations, and others.

We seek bold, evidence-based, patient- and family-centered approaches that challenge conventional strategies, improve health outcomes, lower costs, and show potential for national replicability.

AREAS OF INTEREST AND TYPES OF GRANTS
The Rita & Alex Hillman Foundation specifically seeks proposals that address the health care needs of vulnerable populations in the following areas:

- Maternal and Child Health
- Care of the Older Adult
- Chronic Illness Management

The Hillman Innovations in Care grants will consider support for two types of proposal:

1. The adaptation of well-established, nursing-driven delivery models to new settings or patient populations.

   Example: A highly successful nurse home-visitation program targeting first-time mothers and their children is adapted to serve the needs of chronically-ill elderly patients and their family caregivers. After a promising pilot phase, the program is poised for expansion.
2. The expansion of emerging, nursing-driven delivery models that have generated promising evidence suggesting a strong potential for broad scalability.

*Example: A Type 2 diabetes prevention program targeting low-income Hispanic families in Arizona shows promising outcomes after 5 years of operation. The project team that administers the program seeks to expand the intervention to similar communities in other states.*


Priority consideration will be given to proposals that include one or more of the following:

- Engagement of patients, families, caregivers, and community organizations
- Inter-professional or multidisciplinary collaboration
- Institutional and community partnerships
- Provision of care in non-hospital settings
- Strong preliminary evidence
- Measurable goals and outcomes

We will not consider:

- White papers, literature reviews, or support for publishing
- Basic science or research
- Development of stand-alone technology including medical devices and mobile apps not integral to the overall design of the program
- Capital projects or improvements
- Projects outside the United States and its territories

**SIZE AND LENGTH OF GRANTS**
The program will award at least two grants of up to $600,000 each, distributed over a 36-month period. Projects are expected to begin January 1, 2019, and end December 31, 2021.

**WHO SHOULD APPLY**
We believe that transformative ideas are as likely to come from community health clinics as they are from major academic research centers.
We welcome applications from institutions and care settings from across the spectrum of care, and from practitioners representing a diverse range of backgrounds.

AWARD EVALUATION CRITERIA

Health Impact: Will the project have a significant impact on the health of vulnerable populations? Does the proposal clearly explain the pathway to impact, including how it will improve health and the provision of care?

Boldness and Creativity: Does the proposal present creative solutions that address significant health and health care problems in a new way? Does the proposed intervention have the potential to leapfrog conventional approaches?

Nursing Driven: Is the proposed intervention rooted in nursing’s strengths and holistic approach to care? Is a nursing approach especially well-suited to address the defined health/health care problem?

Scalability: Can the innovation and delivery mechanisms be readily implemented in systems and/or communities to improve health or health care? What are the barriers to scaling up?

Sustainability: Does the proposal outline a realistic, specific course for developing a path to sustainability in the three-year timeframe?

Evidence/Execution Plan: Are the proposed concept and approach based on sound analysis and evidence? Are feasible activities and reasonable measurable outcomes set out for the 36-month timeline of the grant?

Leadership: Do the leaders and key team members demonstrate the commitment, skills, and leadership necessary to bring solutions to scale?

Institutional Support: How does the host organization bring demonstrable support and commitment to the proposed project? How does it align with institutional priorities?

ELIGIBILITY CRITERIA

Who is eligible?

- U.S. 501(c)(3) nonprofit organizations that are not classified as private foundations. (The Foundation will consider only organizations that can provide proof of qualifying non-profit status, including a tax-exempt determination letter from the Internal Revenue Service.)
- International organizations that are the equivalent of U.S. 501(c)(3) organizations that are submitting a project that focuses within the United States
• Government entities
• Faith-based organizations that welcome and serve all members of the community regardless of religious belief

Who is not eligible?

• Individuals
• Organizations that discriminate on the basis of race, color, religion, gender, national origin, citizenship status, age, disability, sexual orientation, or veteran status

APPLICATION INSTRUCTIONS
The application consists of three parts: (1) project profile, (2) letter of intent, and (3) supporting materials.

1. **Project Profile**
   Please provide:
   • Organization/Institution contact information
   • Primary Investigator contact information
   • Brief description of your organization or institution (500 words maximum)
   • Executive summary of your project (250 words maximum)

2. **Letter of Intent** (1,000 words maximum)
   While the substance and style of narratives will vary depending on the nature of the proposal, all letters of intent should accomplish the following:
   • Describe the main issue, problem, or subject and why it is important
   • Identify the target vulnerable population or populations
   • Describe the proposed intervention/model of care/approach being taken and any evidence it has generated
   • Explain how the proposed intervention relates to other models in the field and why it is special
   • Identify the PI and other key participants including collaborating organizations
   • Explain why you, your organization and your collaborators are uniquely qualified to address the issue or subject
   • Explain briefly the anticipated measurable outcomes and benefits of the project, including potential long-term impact

3. **Supporting Materials**
   Documents include:
   • Short bios (½ – 1 page) of the project team. Full CVs are discouraged.
   • Up to two (2) letters of support
Up to two (2) items that provide additional evidence/information to support the application, which may include a link to a brief video (no more than two minutes), published articles or brochures.

Applications must be filled out and submitted online at http://www.rahf.org/grants. Please note that the grant portal will be open January 29, 2018.

Program staff will contact you via phone or email should we require more information about your application. If your project is selected to move forward in the review process, we will request a full proposal. You will receive an email with instructions for completing a full proposal for our review. Organizations that are selected for a site visit will be contacted by phone or email; visits will be scheduled by mutual convenience.

A copy of this RFP can be downloaded on the Rita and Alex Hillman Foundation website at: http://www.rahf.org/grant-programs/hillman-innovations-in-care-program/RFP

ACTIVITIES AND DELIVERABLES
The project leaders funded under this effort will be expected to engage in the activities and provide the specific deliverables listed below, which will help to demonstrate project progress and success:

- Progress reporting, including conversations via teleconference, site visits, and annual written reports
- Dissemination of knowledge through publications in peer-reviewed literature, etc.
- Provision of a final report that captures a clear assessment of the impact of the project. This report will also identify social, cultural and other barriers to expanded implementation, and an initial plan for scaling the intervention that addresses these barriers

In addition to engaging in investigative activities related to their proposed project, grantees will be expected to:

- Actively participate in meetings or workshops that bring together grantees to share learning and best practices
- Participate in public engagement activities

REVIEW PROCESS
The HIC Advisory Committee – a diverse group of 5-6 health care leaders representing a broad range of expertise – will review the proposals along with Hillman staff and consultants.
APPLICATION SCHEDULE*

Grant Portal Opens  Monday, January 29, 2018
Applications due  Monday, March 5, 2018
Finalists invited for full proposal  Monday, April 16, 2018
Full proposals due  Monday, June 4, 2018
Awards announced  Monday, November 5, 2018

* Schedule and dates are subject to change. Changes will be announced to applicants via email and posted to the RAHF website.

ALLOWABLE COSTS
Grant funds may be used for the following cost categories:

1. Personnel
2. Travel
3. Consultants
4. Direct Supplies
5. Equipment: Please note, partial or full support for equipment may be requested. Funding for infrastructure will be limited.
6. Other Research Costs
7. Sub-grants/ Subcontracts
8. Indirect costs: Please note, the Rita & Alex Hillman Foundation will provide a limited amount of indirect costs, based on the nature of the applicant organization, to a maximum of 15% of direct costs of the grantee’s administered grant value (Items 1–7 outlined above). This amount will be included in the $600,000 of direct costs (i.e., total value of the grant will be $600,000).

Proposals with thoughtful and efficient use of resources will be preferred over proposals representing comparable efforts that do not have the same value for the investment. In some circumstances (e.g., rapidly changing technologies), subcontracting specific project activities to an outside institution with the infrastructure and expertise to deliver results may be considered advantageous over establishing in-house capacity.

PRIVACY NOTICE
To help us in the evaluation and analysis of projects, all proposals, documents, communications, and associated materials submitted to the Rita & Alex Hillman Foundation (collectively, “Submission Materials”) will become the property of the Foundation and will be shared with other members of the Advisory Committee, Board of
Directors, and other funding partners or potential funding partners. We will report publicly on the number of applications received.

The proposals, in addition to analysis by our staff and consultants, may be subject to confidential external review by independent subject-matter experts, potential co-funders, and (for educational purposes only) participants in the Hillman Scholars Program for Nursing Innovation. Please carefully consider the information included in the Submission Materials. If you have any doubts about the wisdom of disclosure of confidential or proprietary information, we recommend you consult with legal counsel and take any steps you deem necessary to protect your intellectual property. You may wish to consider whether such information is critical for evaluating the submission, and whether more general, non-confidential information may be adequate as an alternative for these purposes.

We respect confidential information we receive. Nonetheless, notwithstanding your characterization of any information as being confidential, we may publicly disclose all information contained in Submission Materials to the extent as may be required by law and as is necessary for potential co-funders and external reviewers to evaluate them and the manner and scope of potential funding, consistent with appropriate regulations and their internal guidelines and policies.