



2025 Advancing Healthy Births: Request for Proposals

Improving equity, reducing disparate outcomes, and ensuring healthy births for Michigan families is at the center of all efforts supported by the Michigan Perinatal Quality Collaborative (MI PQC)* and the Region 1 UP Perinatal Quality Collaborative. Achieving these goals is not feasible without input and feedback from families, nor without the efforts of community organizations and programs that address local needs and provide care and support for families in our respective region.

In October 2023, the Michigan Department of Health and Human Services released the newest version of its strategic plan for improving birth outcomes. This plan, *Advancing Healthy Births: An Equity Plan for Michigan Families and Communities**, is written to be actionable and meant to be used by community partners, local stakeholders and all individuals working to improve birth outcomes for Michigan families.

To facilitate alignment with the Advancing Healthy Births plan and encourage collaborative efforts with the MI PQC and individual RPQCs, mini awards will be available through a request for proposal process. Community-based organizations and local programs within the Region whose efforts are focused on improving birth outcomes, reducing health disparities, and addressing root causes of these disparities, will be eligible to apply.

The Region 1 PQC is expecting to award \$63,292 total, via 3-5 mini grants in the amount of \$12,000-\$16,000 per award. Interested organizations and/or programs will need to complete the application to be considered for a mini grant. Mini grants will be awarded to successful applicants in January 2025 and all funds will need to be spent by September 30, 2025. Additional information can be found below.

*For more information on the MI PQC, individual RPQCs, and the *Advancing Healthy Births: An Equity Plan for Michigan Families and Communities*, please visit the MDHHS Division of Maternal & Infant Health website: www.michigan.gov/MIH.

Award Overview

Through a request for proposal process, one-time funding received through the Michigan Department of Health and Human Services will be available to local organizations and programs in Region 1 to support community-led efforts in improving disparate birthing outcomes and ensuring healthy births.

Interested entities must [apply](#) and budget, inclusive of items detailed below, by December 8, 2024. Applicants will be notified of funding decision via email by December 18th.

Activities eligible for funding include, but are not limited to:

- Supporting childbirth education classes/certification through implementation or expansion of evidence-based curriculum. Education does not need to occur through a health system/hospital, but can be provided through community-based organizations, Doulas, home visiting programs, etc. *A minimum of 20% of the available funding will be allocated to support these educational efforts.*
- Implementation of recommendation or activity in alignment with the priority areas found within the [Advancing Healthy Births](#) plan or [FIMR/MMMS Aligned Recommendations](#) document.
- Supporting efforts aimed at improving breastfeeding rates (initiation and duration) in the region.
- Providing infant safe sleep education and supplies to vulnerable populations.
- Outreach initiatives that increase access for pregnant/postpartum people who face significant barriers to consistent healthcare (e.g., people experiencing homelessness, people affected by substance use disorder, people who are not U.S. citizens).
- Supporting efforts related to perinatal substance use disorder (e.g., implementing universal screening protocols at perinatal appointments; utilization of non-pharmacological care of infants born substance-exposed, as appropriate; support peer navigator program, etc.).
- Assuring care coordination and access to supportive services in prenatal and postpartum periods for the pregnant/birthing person and the infant (e.g., home visiting programs; substance use treatment; WIC, and etcetera).

Advancing Healthy Births RFP Timeline	
RFP Release Date	November 8, 2024
Proposal Submission Deadline	December 8, 2024
Awards Announced	December 19, 2024
Grant Period Begins	January 1, 2025
End of Grant Period	September 30, 2025
Progress Report Due to RPQC	October 15, 2025

Eligibility Criteria

To be eligible to receive a mini award, applicants must meet the following eligibility criteria:

- Be based within the 15 counties of the UP and/or serve mothers and/or infants in the UP.

- Represent a non-profit organization, local tribal organization, community-based organization, local/county level agency, or business focused on birthing persons and/or birth workers.
- Be a member of the Region 1 (UP) Perinatal Quality Collaborative as evidenced by representative attendance at bi-monthly meetings.
- Currently serving one or more underserved populations or populations affected by disparate birth outcomes, as shown in available data.

Unallowable Costs

- Capital expenditures such as building or land purchase or construction.
- Advertising unless those that are solely for program outreach and specific purposes necessary to meet goals of the project.
- Alcoholic Beverages.
- Entertainment except where it has a programmatic purpose.
- Fundraising activities.
- Goods or services for personal use.
- Projects, programs, or activities that are duplicative of existing state resources or efforts.
- Lobbying

Award Amount

Successful applicants will receive mini grant awards in amounts ranging between \$12,000 - \$16,000 for efforts focused on reducing disparate birth outcomes and ensuring healthy births for families in Region 1. Up to 5 Region 1 mini grants will be awarded.

The funds allocated with each mini grant will need to be fully expended by September 30, 2025.

Application Process

Those who wish to be considered for a mini-grant award must submit an online [application](#) by December 8, 2024. The application contains the following components (a copy of the questions can be found on page 5-7 of this document):

1. Organization Information

- a. Organization Information
 - i. Contact Name, phone number and email address
 - ii. Applicant Organization Name
 - iii. Complete address
- b. Counties Served
- c. Is this organization a non-profit?

- d. Are you a member of the Region 1 Perinatal Quality Collaborative?
- e. Does your organization currently provide services or care to an underserved population or population at risk for disparate birth outcomes?
- f. IRS W-9 Form (<https://www.irs.gov/pub/irs-pdf/fw9.pdf>)

2. Project Information

- a. Project Name
- b. Amount Requested
- c. Identify the population served by this project/effort. Please explain why this is a population of interest to your organization or program.
- d. How will this project address disparate outcomes and/or improve healthy births in the region or county of focus?
- e. How will success of the project/effort be measured? Include the goals/expected outcomes of the project and the measurable outcomes that will be tracked.
- f. How will this award enhance the work that you are already doing and/or serve the population of focus?

3. Project Budget and Budget Narrative

- a. Please complete the budget section

Please submit your [application](#) by **December 8, 2024**.

Questions

Contact info@uphcs.org for assistance with your proposal or any questions.

Considerations

Funding decisions will be at the sole discretion of the Region 1 (UP) Perinatal Collaborative fiduciary organization – Upper Peninsula Health Care Solutions, Inc. (UPHCS).

Proposals will be scored on the strength of their responses but consideration will be given to the intent to provide equitable access to resources throughout the region. UPHCS may contact organizations who submit similar proposals for potential collaboration. UPHCS will retain all proposals for future funding consideration and for potential integration into existing UP Perinatal Collaborative initiatives.

Organization Information

Contact Name: *

First Name Last Name

Phone Number *

Please enter a valid phone number.

Email *

example@example.com

Organization Name *

Address *

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code

Counties Served: *

Entire UP	Alger	Baraga	Chippewa
Delta	Dickinson	Gogebic	Houghton
Iron	Keweenaw	Luce	Mackinac
Marquette	Menominee	Ontonagon	Schoolcraft

Is this organization a non-profit? *

Yes No

Are you a member of the Region 1 Perinatal Quality Collaborative? *

Yes No

Does your organization currently provide services or care to an underserved population or population at risk for disparate birth outcomes? *

Yes No

Please upload IRS W9 (<https://www.irs.gov/pub/irs-pdf/fw9.pdf>)

Browse Files

Drag and drop files here

If awarded, we will need a completed W9 on file to process your grant award.

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Project Information

Project Name: *

Amount Requested: *

Identify the population served by this project/effort. Please explain why this is a population of interest to your organization or program. *

Applicants are welcome to include data, anecdotal stories, etc. to demonstrate why this is a population of focus for this project/effort. If the population of focus is in a certain area of the region (i.e., specific county or location) please include those details in this response.

How will this project address disparate outcomes and/or improve healthy births in the region or county of focus? *

How will success of the project/effort be measured? Include the goals/expected outcomes of the project and the measurable outcomes that will be tracked. *

How will this award enhance the work that you are already doing and/or serve the population of focus? *

Additional Materials

Browse Files

Drag and drop files here

Organization brochures, flyers, additional information, etc.

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Budget

Please complete the section below. Include budget explanation/details in the text field. Total direct costs and total indirect costs fields will auto populate.

A. Salaries & Wages

Amount

Ex: Project Manager Salary

\$

B. Fringe Benefits

Amount

\$

C. Contracts/Consulting

Amount

Ex: Trainings expenses

\$

D. Travel/Trainings/Meetings

Amount

Ex: Travel (x2) in-person meetings

\$

E. Supplies & Materials

Amount

Ex: Flyers, Class Handouts, Manuals, Program

\$

F. Other

Amount

Ex: Zoom Subscription

\$

Total Direct Costs *

\$

Sum of A-F

G. Indirect Costs

Amount

\$

Total Project Costs *

\$

Sum of A-F & G

Applicant has personnel, infrastructure, and financial resources in place to successfully implement proposed strategies *

Yes

No

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