

**AMERICAN DENTAL HYGIENISTS' ASSOCIATION  
INSTITUTE FOR ORAL HEALTH**

**THE ROSIE WALL  
COMMUNITY SPIRIT GRANT**



**2012-2013**

**444 North Michigan Avenue, Suite 3400  
Chicago, Illinois 60611-3980  
Phone: (312) 440-8900  
Fax: (312) 467-1806**

This grant program is made available through generous private donations to the ADHA Institute of Oral Health in memory of Rosie Wall, an ADHA member and dental hygienist.



# ADHA Institute Rosie Wall Community Spirit Grant

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## ***Background***

Rosie Wall was a dental hygienist who advanced the profession of dental hygiene, encouraged others to get involved, and discovered and initiated new territories of community service opportunities for dental hygiene professionals, inspiring and encouraging all dental hygienists she met to participate in their professional organization and to serve their communities. While a leader and a driving force behind the Hawaii Dental Hygienists' Association for nearly 30 years, she served at the component, constituent, and national levels, including numerous years as an ADHA Delegate and as the ADHA District XIII Trustee.

**THIS GRANT WILL BE AWARDED TO UP TO SIX APPLICANTS: ONE FROM HAWAII, ONE STUDENT APPLICANT, AND FOUR APPLICANTS FROM OTHER AREAS OF THE UNITED STATES.**

## ***Purpose***

The Rosie Wall Community Spirit Grant, in an amount ranging from **\$1,000-\$3,000** per grantee, will be presented to up to six applicants (dependent on funding) who are involved in a specific community health or research project. Applicants will need to demonstrate that the project is in harmony with the American Dental Hygienists' Association (ADHA) Institute for Oral Health mission and vision (page 8 of application packet). The project should demonstrate its capacity to improve the public's overall health. **The project may relate to dental, medical, or mental health.**

The purpose of the Rosie Wall Community Spirit Grant is to foster awareness of and intervention in community health concerns. This grant program is designed to encourage dental hygienists to design and implement community health or research projects.

## ***Eligibility Requirements***

Applicants who are licensed dental hygienists or students pursuing a dental hygiene degree are eligible. Current ADHA Institute Board of Directors and ADHA Board of Trustees may not apply for the Rosie Wall Community Spirit Grant. Members of the Research Grant Review Committee may not apply as principal investigators, but may do so in another capacity (i.e., secondary investigators, mentors, etc.).

Eligibility for this grant would allow a practicing dental hygienist, group of hygienists, or an interdisciplinary team of professionals including a dental hygienist and/or a dental hygiene student to apply with these considerations:

- Demonstrate involvement in outstanding activities with a community health program or project, which may include dental, medical and/or mental health enhancement.
- Illustrate that health education is one element of the project.
- Show that these activities enhance the public view of the professional role dental hygienists play in health improvement.



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## ***Selection Criteria***

The ADHA Institute for Oral Health Research Grant Review Committee will use the following unweighted selection criteria to evaluate applications:

## ***Significance***

The proposed project will be reviewed for its significance by determining the extent to which the project -

- a. Clearly describes and documents the need for or supports an on-going/established project.
- b. Identifies specific needs in the current delivery of community services and addresses how the proposed project will fill the identified needs.
- c. Offers a creative approach to increasing the public's oral and general health.

## ***Outcome Measures***

The proposed project will be reviewed by evaluating the extent to which the project -

- a. Identifies appropriate outcome measures that will provide a means for evaluating how the project is meeting its stated objectives.
- b. Has an ongoing evaluation system that can provide quantitative or qualitative evidence to all parties of interest, the benefits obtained by participants as a result of participating in the project.
- c. Demonstrates sustainability once the grant has come to an end.

## ***Feasibility***

The proposed project will be reviewed in terms of feasibility to the extent which the project -

- a. Exhibits a logical and sound planning process as a means toward implementing the project.
- b. Follows a timeline appropriate to the goals and outcomes to be achieved.
- c. Involves key personnel (i.e., community dental hygienists, faculty, researchers) who are qualified to undertake project activities.
- d. The requested budget adequately supports the proposed activities.
- e. If the project includes a research component, protocol is consistent with state and federal laws regulating research with human subjects and infection control procedures.

## ***Selection Procedures***

The ADHA Institute for Oral Health Research Grant Review Committee will evaluate applications using unweighted criteria. Unweighted criteria is most appropriate, because it will allow the reviewers maximum flexibility to apply their professional judgment in determining the strengths and weaknesses of individual applications. Up to six awards will be presented each year or as funds are available. One award will be granted to a recipient in the state of Hawaii and the other awards shall be granted to recipients in any of the other 49 states.



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2012-2013 ROSIE WALL COMMUNITY SPIRIT GRANT APPLICATION INSTRUCTIONS  
PLEASE READ ALL INSTRUCTIONS CAREFULLY **BEFORE** COMPLETING APPLICATION  
ALL APPLICATIONS MUST BE TYPED

## **SPECIFIC ELIGIBILITY REQUIREMENTS**

- Applicant must be a United States citizen who is either a licensed dental hygienist or a student pursuing a dental hygiene degree.
- Applicant must be a member of the American Dental Hygienists' Association.
- Current ADHA Institute Board of Directors and ADHA Board of Trustees may not apply, nor may members of the Research Grant Review Committee apply as principal investigators.

## **APPLICATION DEADLINE AND AVAILABILITY**

**The application deadline for the 2012-2013 grant cycle is February 28, 2012. The application must be postmarked or received by the Institute by that date for consideration. *The mailing address for the grant competition is listed below:***

Rosie Wall Community Spirit Grant  
ADHA Institute for Oral Health  
444 N. Michigan Ave., Ste. 3400  
Chicago, IL 60611-3980

All materials sent to the ADHA Institute Rosie Wall Community Spirit Grant competition must be typed in either Arial or Times New Roman font at 10 or 12 point size. Only the material requested will be allowed. Additional items such as video cassette tapes, brochures, and photographs will be discarded and not returned.

Each project may be submitted only once during the course of the year, and if not funded, may not be resubmitted until the following grant competition. More than one entry from an applicant will be allowed, but only if each application shows merit, and if they are not deemed duplicates.

**For each grant cycle, projects that are allowable will be those either continuing in the year previous to the date in which the award is given (e.g., a project which began in 2011, but which is continuing through the year 2012 would be eligible for the 2012-2013 grant cycle) or one which begins in the year before the date in which the award is given (e.g., a project which began in 2011).**

The decision of the Research Grant Review Committee will be final, and is not something which may be appealed by an applicant.

The ADHA Institute for Oral Health reserves the right to not distribute grant monies if qualified applicants cannot be found, or if funding is not available.



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## A. General Information

Name \_\_\_\_\_  
Last (Include Titles) First Middle Maiden

Permanent Mailing Address \_\_\_\_\_  
Number & Street City State Zip Code

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Member ID # \_\_\_\_\_ Birth Date \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Degree(s) Received \_\_\_\_\_  
 And Location(s) \_\_\_\_\_

## B. Project Information

Project Name \_\_\_\_\_

Project Location \_\_\_\_\_  
(could be name of building, school, hospital, etc.)

Project Mailing Address \_\_\_\_\_  
Number & Street City State Zip Code

Project Start Date \_\_\_\_\_ Project End Date \_\_\_\_\_  
(Approximate Month and Year) (Approximate Month and Year)

Have you applied previously for a Rosie Wall Community Spirit Grant?     Yes     No

Have you received any type of funding from the ADHA Institute?         Yes     No

Is this a new project?     Yes     No                      Is this a continuing project?     Yes     No

Brief Project Description (under 100 words)

Name(s) of Participant(s)

Brief Project Goal Description (under 30 words)



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## Program Description

In **no more than three** typewritten, double-spaced pages, describe the project in detail. Include how the project was conducted; the specific goals of the project; evidence that your objectives were or will be achieved; both long and short-term effects on the community; etc.

*Do not include personal information such as job descriptions, resumes and/or curricula vitae.*

*Use the "POARE" model included on page 7 as a guide: Problem, Objectives, Actions, Resources, Evaluation.*

## Project Rationale

In **no more than one** typewritten, double-spaced page, describe your reasons for beginning the project, and why you decided upon this particular project. Do not include job descriptions, resumes and/or curricula vitae of yourself or other members of the project.

## Records and Information

In **no more than one** typewritten, double-spaced page, list any articles written about your project, awards received, grants received, publications created by your project, laws or rules changed by your project, etc.

## Persons Involved

In **no more than one** typewritten, double-spaced page, list and describe the participants of the project, including members of the project and a general description of those helped by them.

While this may include some of the information that may be included in a job description, resume or curricula vitae, the purpose of this space is only to describe the types of participants and general biographical information of them.

## Preliminary Budget

In no more than one typewritten page, briefly describe the costs of the project, particularly focusing on how the Rosie Wall Community Spirit Grant would help defray project expenses. It is suggested that you use a common budget format such as a spreadsheet for this task. **Please provide a realistic budget and list any in-kind support.**

***Please note! The maximum number of type-written pages that may be submitted is seven. This does not include the application sheet on page 5. If an application numbers more than these pages, it will be disqualified and not considered for the award.***



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## Project Planning and Review

To write a clear and useful examination of your project, you can use the “POARE” model. This model is recommended as both a planning and review tool for your project.

**Problem**  
**Objectives**  
**Actions**  
**Resources**  
**Evaluation**

**Problem:** *For planning* - Decide which oral health care problems are of the greatest concern in your community. You can do this by asking people in your community to define the greatest oral health care problems or targeting a subgroup of the population. These surveys may already exist. State or county health departments can be a great resource and potential partner in the problem.

*For review* - Write a brief statement of the problem that you have tried to resolve, and why this problem is important to your community.

**Objectives:** *For planning* - For the problem(s) that you have decided to address in your oral health care plan, write one or more objectives that address what you can realistically achieve. Objectives should be measurable results expected from the proposed intervention. An example might be to apply sealants to 90% of children in “X” school who are eligible for free or reduced lunch programs.

*For review* - What were your objectives for the project? What measurable outcomes were you trying to reach? Who were you trying to help, and what were you trying to do for them?

**Actions:** What actions will/did you take to reach your objectives? Does/did the project include innovative, creative, and scientifically-sound activities? Can the project be replicated? Are/were other health care workers and community members involved? These activities could include programs such as educating parents or implementing a sealant program for low-income children.

**Resources:** How much money and other resources will/did you need to achieve your plan? Identify both resources you have/had access to, and resources you will need or needed to acquire. Identify or list possible sources you don't/didn't have.

**Evaluation:** Put simply, this is how you know if you've met your objectives. Keep evaluation simple and measurable. Evaluation is the tool for identifying the strengths or weaknesses of your intervention and is helpful for future efforts: yours and those of others who learn from your experience.



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## ***Institute Mission Statement***

To advance the profession of dental hygiene through scholarship, research and service in collaboration with ADHA.

## ***Institute Vision Statement***

Leading the way through professional excellence in dental hygiene education and research.

## **NOTES**

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