

Funding Opportunity

Community Oral Health Priorities

Issue Date:	October 24, 2024
Submission Deadline:	December 5, 2024, by 11:59 p.m. ET
Grant Funding Decisions:	Expected early April 2025
Contact:	Daijah Street Davis Director, Oral Health Blue Cross and Blue Shield of North Carolina Foundation info@bcbsncfoundation.org

Opportunity Overview

Summary

Community perspectives, particularly from those who are not currently accessing, or who have had negative experiences seeking or receiving oral health care are a critical part of designing an oral health care system that increases access for everyone in North Carolina.

This funding opportunity will invest in organizations who serve and are trusted by communities known to experience oral health access or outcomes disparities, to spend time understanding and amplifying their oral health needs and experiences. We are specifically seeking to support North Carolina-based organizations that serve and have trusted relationships with groups known to have oral health access and/or outcomes disparities, such as, American Indian, Black, Latino, and other people of color; rural communities; low-income communities; people with disabilities; LGBTQ communities; immigrant communities; older adults, and/or communities whose primary language is not English.

Funding will prioritize organizations whose primary focus is not providing clinical care. Experience with community engagement and advocating for change within communities is highly desired and no experience in oral health is required.

Grant funding of up to \$100,000 per year, for two years is available. Funding may support, among other things, staff time, training, compensation for community member time, materials, language support, and other tools for community engagement and uplifting community voice.

Grant Activities

Organizations receiving funding will work over the grant period to achieve the following:

- Develop and implement a plan to explore the experiences, needs, and challenges related to oral health in their community. Develop a 'community data sketch,' which is a one-to-two-page representation of the findings.
- Participate in the creation and execution of a communications initiative that uplifts the findings to spark new conversations on community oral health perspectives statewide.
- Identify ongoing community priorities to support the improvement of oral health access and outcomes.

Learning and Technical Assistance

Organizations receiving grant funding will be supported by the following:

- Shared learning opportunities with the full cohort of grantees funded as part of this initiative, including an in-person kick off convening in Summer 2025.
- Regular technical assistance opportunities to support the grantees' understanding of the oral health system and oral health policies, exploration plan development, implementation, analysis, data-sketch development, and opportunity identification.
- Language access accommodations, which will be utilized as needed throughout these activities to support the full engagement of all grantee participants.

Eligibility Requirements

In order to be considered for grant funding, organizations must meet the following:

- Non-profit organization or fiscally sponsored program that serves a population known to experience oral health access or outcomes disparities.
- Not clinical, meaning that the services or supports the applicant organization provides are **not** direct clinical care.
- An interest in including community support for oral health access into existing scope. Experience in oral health is not required.
- Some prior experience and continued interest in growing their skills for community engagement and advocating for change to meet their community's needs.

Application Process

Part 1: Submit an Application by December 5th.

Organizations seeking funding through this opportunity must complete an online application, which includes a project narrative, as well as providing additional basic organizational information and uploading a project budget. The application is currently available in both English and Spanish; other languages are available upon request. To assist in proposal development, applicants will have the opportunity to submit questions or attend 'office hours' sessions with program staff prior to the application deadline.

Part 2: Finalist Conversation (Virtual) by February 28:

A smaller group of organizations (finalists) will be selected to participate in a follow-up virtual conversation (such as by Zoom) to dive deeper into the organization's programming and capacity, community context, and the proposed work. Specific questions will be shared before these conversations.

Part 3: Notification

Applicants will be notified by early April 2025 whether their proposal has been approved for funding.

See pages to follow for additional detail and context related to this funding opportunity, as well as specifics on how to apply.

Opportunity Detail

Oral health and overall health and well-being are inextricably connected, and data tying oral health outcomes to chronic diseases, such as diabetes and heart disease, mental health, pregnancy outcomes, employment opportunities, school performance, and other quality of life indicators, continues to surface. Despite the importance of oral health, access to and experience with oral health care is a challenge for many in North Carolina. For example:

- North Carolina ranks 32nd in the nation for the percentage of adults who have visited the dentist in the past year, and 13% of North Carolinians have not had a dental visit in more than five years.
- North Carolinians visit the emergency department for oral health concerns at more than twice the national average.
- Only 40% of North Carolina's dentists accept people covered by Medicaid insurance.
- Poor oral health indicators and outcomes are pervasive across all populations in the state, and there are significant disparities based on race, income, geography, and insurance type:
 - 42% of American Indians, 49% of Hispanics, and 37% of African Americans have not visited a dentist in the past year, compared to 31% of whites.
 - 59% of American Indian and 57% of African Americans have had at least one permanent tooth removed, compared to 43% of whites.
 - 55% of American Indian and 52% of Hispanic children have untreated tooth decay, compared to 30% of white children.
 - Adult Medicaid dental utilization rates are lower in western and northeastern North Carolina.
 - Of North Carolina's 100 counties, 97 are designated as Dental Health Provider Shortage Areas, and most of North Carolina's dentists are highly concentrated in only nine counties.

Culture, processes, and policies shape outcomes and disparities; improving them requires perspectives from a diverse group of those closest to the problem. Different people may engage with the exact same system (in this case the oral health system) yet have drastically varying experiences and opinions as a result of their individual context, values, and vantage point. When differing perspectives are left out of solution development and implementation, opportunities to address challenges more holistically are lost.

Currently, the most visible advocates for the improvement of North Carolina's oral health system work or have worked in oral health care. They have a perspective that leans heavily on their experience as a provider rather than that of a patient. This vantage point is critical, but incomplete. Those who experience the oral health system from the perspective of a patient or a potential patient provide key input for developing solutions to change or improve the system.

This funding opportunity is aimed at expanding the perspectives that inform oral health system change priorities and increase diversity in oral health advocacy, by supporting community-based nonprofits to:

- Explore and uplift the oral health needs, attitudes, and experiences of community members.

- Engage in oral health advocacy through education, focused on practice and policy change.
- Identify ongoing community priorities to support the improvement of oral health access and outcomes for their community.

This opportunity aligns with our Foundation’s organizational priority to increase access to quality, affordable oral health services for everyone in North Carolina and to grow the network of organizations working toward this goal.

Eligibility and Selection Criteria

This opportunity is designed to support nonprofit organizations to understand and uplift community experiences, needs, and narratives related to oral health. We are specifically seeking North Carolina-based organizations who serve and have trusted relationships with groups known to have oral health access and/or outcomes disparities, such as, American Indian, Black, Latino and other people of color; rural communities; low-income communities; people with disabilities; LGBTQ communities; immigrant communities; older adults, and/or communities whose primary language is not English. Organizations serving groups with intersecting identities (e.g., Latino communities in rural eastern North Carolina) are eligible and encouraged to apply, sharing this level of specificity.

This funding will prioritize organizations and communities that do not often lead oral health advocacy initiatives. Applicant organizations should be entities whose primary focus is not providing clinical care. They should also have some experience with community engagement and advocating for change within communities; however, no experience in oral health is required.

We recognize entities that fall outside of the scope of this eligibility, such as federally qualified health centers, free and charitable clinics, public health departments, colleges/universities, dental practices, among others may have interest and excitement about this type of initiative. We encourage these entities to position themselves as a source of support for the organizations that meet the funding opportunity’s eligibility criteria while allowing leadership from these organizations and communities to emerge. If you are interested in engaging with applicants, please complete this [form](#). We will connect you with applicants who align with your work and interests after grantees are selected.

Organization Size

- There is no minimum requirement in terms of operational budget. Organizations of all sizes are eligible to apply.

Organization Type

Non-clinical – applicant organization’s primary aim is to provide a service or support that is not clinical care. *Organizations who refer individuals to clinical entities or collaborate with clinical entities to provide on-site services (e.g., medical or dental bus) are eligible to apply.*

-AND-

- **Nonprofit organization** that is exempt under Section 501(c)(3) of the Internal Revenue Code and is classified as “not a private foundation” under Section 509(a).

- OR-

- **Fiscally sponsored program** – A group or project with a nonprofit 501(c)(3) organization acting as a fiscal sponsor. Please note that the fiscal sponsor is responsible for all legal aspects of the organization or project. The fiscal sponsor is considered the grantee and agrees to be accountable to the Foundation for the programmatic and financial outcomes of the grant.

-OR-

- **Coalitions** – Applications involving more than one group or organization are welcome; however, one organization will be the recipient of the grant and must be an established 501(c)(3) nonprofit or fiscally sponsored organization. Organizations and coalitions of any size are eligible to apply if the other eligibility criteria have been met.

**If applying as a coalition - a clear vision for the roles, engagement, and equitable division of funding amongst coalition partners.*

Organization Characteristics

This funding prioritizes organizations that can be a catalyst for strengthening a grassroots dialogue on oral health. To that end, the following are required to be considered for funding:

- Applicants should serve a community that is known to experience oral health access or outcomes disparities, and have developed deep connections and trust with said community, as demonstrated by:
 - a. Organizational priorities and practices that center the expressed needs of the community in which they are working.
 - b. Inclusion of community members in the organization's decision-making processes. For example, engaging a community advisory board to support programmatic or operations decisions.
 - c. Level of connectedness and general engagement and integration within the community beyond the specific support they offer, with the understanding that this may look different in practice for each organization and the community they serve. For example, some organizations may provide support that is considered sensitive and take approaches to connection that are less public out of respect for those they serve.
- While having experience in oral health is not required, organizations should have an interest in promoting oral health access into their existing community-serving initiative scope. Non-clinical organizations with some experience in oral health are also welcome to apply.
- Organizations should have some prior experience and continued interest in growing their skills for community engagement and acting as advocates for health or the social determinants of health over the grant period. They must demonstrate community connection and change-making as a priority in their work.

Examples of Eligible Applicants

Please note, the following examples shared are intended to be illustrative and not exhaustive.

- Your organization has never worked on oral health before but has well-established relationships in the community through your work in a different area of focus. Your organization has regular and intentional community interactions, and the people you work with welcome collaboration. You have been hearing from community members that they are facing challenges accessing oral health services, and you would like to understand more about the barriers they are facing and want to be a part of crafting the solution.
- Your organization often provides a direct service but also directly engages community members in understanding their needs and uplifting solutions. You have an interest in broadening your scope of work to include advocacy and/or more structured community engagement to improve oral health outcomes.

Description of the Funded Work

The first phase of the grant period (approximately one year) includes developing and implementing a plan to explore these concepts in partnership with community stakeholders and constituents. The second phase (likely year two) includes developing a ‘community data sketch’ – a one-to-two-page representation of the findings – and participating in the development and execution of a communications initiative that leverages them to spark new conversations on community oral health perspectives statewide. Grantees will identify practice and policy change priorities to improve oral health access and outcomes and make relevant connections to support future action.

Grantee Experience

In addition to funding, grantees will be invited to participate in additional opportunities for the purposes of peer support, learning, and collaboration. Examples include:

- Shared learning opportunities with the full cohort of grantees funded as part of this initiative, including an in-person kick off convening in Summer 2025.
- Regular technical assistance opportunities to support the grantees’ understanding of the oral health system and oral health policies, exploration plan development, implementation, analysis, data-sketch development, and opportunity identification. Frequency of engagement will be determined with the technical assistance provider, Community Catalyst, based on grantee preferences, but will likely include a monthly call.
- Collaboration with the [North Carolina Oral Health Collaborative](#) to host regional community events focused on oral health advocacy.

Language access accommodations will be utilized as needed throughout these activities to support the full engagement of all grantee participants.

Anticipated Outcomes

There are three primary anticipated outcomes for which funded organizations will report progress toward throughout the grant period. These include:

- Develop a 1–2-page data sketch, outlining the learnings from community exploration to better understand experiences and perceptions with North Carolina’s oral health system.

- Increase organizational capacity to engage in conversations around oral health, health policy, and health equity as well as contribute significantly to broader oral health systems change efforts in North Carolina.
- Identify future actions to improve oral health experiences in the represented communities and make connections with other stakeholders to support implementation of actions.

Funding Partnership Commitment

As a partner with our grantees throughout this work, our Foundation commits to:

- Active engagement with grantees with a focus on listening to understand.
- Support grantees to achieve their goals and to adapt to new or unexpected circumstances.
- Solicit, and be open to, direct, constructive feedback about our approach to, and implementation of, this project and specific opportunities to change course and adapt.
- Provide timely communication about any changes or updates that might impact grantees.
- Operate in consistency with our organizational values, working to assure that everyone in North Carolina has the opportunity to be as healthy as possible.

How to Learn More

Ask Questions (optional): Organizations interested in this opportunity are encouraged to submit questions about the funding opportunity **by November 7th** to Daijah Street Davis at info@bcbsncfoundation.org. An FAQ in English and Spanish will be posted to the Foundation website by November 15th.

Register for and attend an office hour session to discuss the opportunity (optional).

- Session 1 – October 30, 2024, at 10:00 am ([register here](#))
- Session 2 – November 7, 2024, at 2:00 pm ([register here](#))

How to Apply

Part 1:

Submit an Application by December 5th: Organizations seeking funding through this opportunity must complete an [Online Application](#), including answering the questions outlined below as well as providing additional basic organizational information and uploading a project budget.

For a step-by-step guide on how to navigate the grants portal and submit your grant application, please click [here](#).

This application is currently available in both English and Spanish; other languages are available upon request. To request application materials (this Request for Proposals document, project narrative form, organizational budget narrative form, and project budget form) in another language, please complete this [form](#). The turnaround time for these materials is 3-5 days, and requests will be executed as they are received. The last day to make this request is November 26th.

Application Questions: Answers to the following will be submitted as part of the online application process. Responses are limited to four total pages. Please use the proposal narrative template ([linked here](#) and within the online application), placing each response under its corresponding question.

Applicants may format responses to each question as a list or in paragraph form, based on their preference.

1. Provide an overview of your organization's work and experience relevant to this initiative, including a description of the communities you serve and your relationship with or role within them.
2. Share a past example of your organization working with those you serve to impact a community problem, including details on how your organization understands and centers the needs and priorities of communities you serve, and operational practices you have implemented to support a community-centered approach, in this example or beyond.
3. Describe how exploring oral health inequities aligns with your organization's work, and what oral health needs, attitudes, and experiences you have already heard from the community you serve.
4. What approaches would you consider for gathering and synthesizing community perspectives on oral health needs? What key stakeholders, stakeholder groups, organizations, coalitions, and/or agencies inside or outside of your community do you think could be important to engage during this initiative and beyond? What could their role be? *Note: We recognize plans will evolve throughout the initiative; if selected, your organization is not bound to this approach. We are looking to understand your current perspective on what is possible.*
5. Is there anything else you would like to share? (Optional)

Budget Information: Grant funding of up to \$100,000 per year, for two years is available. Funding may support, among other things, staff time, training, compensation for community member time, materials, language support, and other tools for community engagement and uplifting community voice. Data sketch production and state-wide communications activities with oral health stakeholders will be supported by the initiative's technical assistance provider and do not need to be included in individual grantee project budgets.

Please note: Blue Cross NC Foundation funding cannot be earmarked for, or directly support, lobbying*, lobbying related activities, and/or partisan activities.

Reviewing Emphasis: Applications from eligible organizations will be reviewed by Foundation staff and external reviewers with particular attention focused on a clear explanation of your organization's work, its role in the community that it serves, and the degree of alignment between communities who have disparate oral health access and outcomes. Reviewers will also examine the degree in which community interests are represented in your organization's work along with its history of collaborating with community members to identify problems and potential solutions, as well as specific ideas for implementation and the stakeholders/partners who may be engaged.

Part 2:

Finalist Conversation (Virtual) by February 28: A smaller group of organizations (finalists) will be selected to participate in a follow-up virtual conversation (such as by Zoom) to dive deeper into the organization's programming and capacity, community context, and the proposed work. Specific questions will be shared before these conversations.

Part 3:

Notification: Applicants will be notified by early April 2025 whether their proposal has been approved for funding.

Timeline

Deadline or Activity	
Funding opportunity released and application open	October 24
Questions due	November 7
Deadline for application materials translation requests	November 26
Applications due	December 5
Notification of next steps to applicants	Early February 2025
Invited finalist conversations	Mid-Late February 2025
Grantees selected and notified	By early April 2025

Questions

For questions about this funding opportunity, contact Daijah Street Davis at info@bcbsncfoundation.org

For questions about the application submission process or to discuss alternate submission arrangements other than the Foundation’s online application portal, contact Cindy Alvarado at info@bcbsncfoundation.org.

About the Foundation

The Blue Cross and Blue Shield of North Carolina Foundation is a private, charitable foundation established as an independent entity by Blue Cross and Blue Shield of North Carolina in 2000. Over the past two decades, the organization has worked with - and supported - nonprofit organizations, government entities, and community partnerships across the state, investing \$220 million into North Carolina through more than 1,400 grants, collaborations, and special initiatives. Within its focus areas of early childhood, healthy communities, healthy food, and oral health, the Foundation strives to address the key drivers of health, taking a flexible approach designed to meet identified needs in partnership with the community.

Learn more at bcbsncfoundation.org

Key Terms

Advocacy: In the context of this RFP, advocacy means making a case for changes to a system. Advocacy can take many forms that are legally permissible for nonprofits, including community organizing, public education, research, litigation, and lobbying (see note below on lobbying).

Community: In the context of this RFP, community means a group or groups of people who live in the same area (such as a county, city, town, or neighborhood), or have common interests who come together with a sense of belonging such as occupational, linguistic, national origin, or others.

Geographic Focus: In the context of this RFP, this refers to the organization's geographical area of influence. For example, an organization may be located in one county and have a network they can mobilize in other parts of the state.

Lobbying: The IRS defines lobbying as communication with a legislator that expresses a view about specific legislation. Grassroots lobbying is defined as communication with the public that expresses a view about specific legislation and includes a call to action. Foundations are limited by the IRS in supporting lobbying, and grant dollars may not be earmarked for lobbying in your budget.

North Carolina's Oral Health System: In the context of this RFP, "*North Carolina's Oral Health System*" is a blanket term for the delivery of oral health care, the laws, rules, and policies that govern it, along with other systems that impact it, such as training programs, insurance reimbursement, in North Carolina.

Social Drivers of Health: Social drivers of health are non-medical, social, and environmental conditions that impact health. The conditions in which people are born, grow, live, work, and age significantly influence their health outcomes. These include income, safe and adequate housing, education, employment, access to transportation, healthy foods, and social connection/support. (*Source: The Physicians Foundation - abbreviated*)