



American Academy of Family Physicians Foundation

REQUIREMENTS AND GUIDELINES for EXISTING CLINICS

The Family Medicine Cares (FMC) USA program is a reimbursement grant for the purchase of durable medical equipment and instruments for the diagnosis and treatment of primary care patients. While the focus is to support brand new clinics just opening their doors, when funds are available, existing clinics can apply for grants up to \$10,000.

Please note: This award is intended to provide support to one clinic location only. Therefore, if your organization has multiple clinic sites, the application should reflect how funds will be used at one specific clinic in need within your organization.

ELIGIBILITY REQUIREMENTS

Grants are available to all existing free health clinics that:

- Are providing services at no cost to uninsured and medically underserved patients. Clinics that explicitly solicit patient fees or request patient donations, do not qualify for this grant.
- Have an AAFP member family physician who maintains ongoing involvement with patient care at the clinic.
- Exhibits a primary care focus.
- Are open to all members of the community. Note: Clinics that target a specific sub-set of the population or a specific disease are not eligible to apply.
- Serve adults (and children if SCHIP program is not available).
- Use active/retired family physicians, residents, or medical students as volunteers in addition to paid staff.
- Hasn't received an FMC USA award within the last three years.

Additional considerations are given to clinics that have partnerships/collaborations with hospitals, residency programs, medical schools, AAFP Chapters and/or Chapter Foundations and is collaborating with other non-medical community organizations (e.g., food pantries, schools, health departments etc.). While all applications will be reviewed, existing clinics in areas with high (5.0 and above) Area Deprivation Index (ADI) score (<https://www.neighborhoodatlas.medicine.wisc.edu/mapping>) will be given priority. Refer to section 3a in application for instructions on obtaining your ADI score.

GRANT GUIDELINES

- **Award Amount:** FMC USA Awards are available up to \$10,000 and vary based upon approved needs, number of applicants, and funds available. The funds provided must be used for the purposes outlined in the clinic's application.
- **Online Application Submission:** The Deadline is July 15, 7 p.m. Central.
- **Applications must provide descriptions where requested:** Applications directing the reviewers to "see attachments," rather than a written response, will not be accepted as a complete application.
- **Allowable Items:** The grant is intended to be used to purchase durable, sustainable equipment and instruments necessary for diagnosis and treatment related to primary care, and no other specialty care (e.g., dental exams, eye exams, etc.). Disposable supplies up to \$500 (vaccines, gloves, speculums, diabetic test strips, lancets, disposable probe covers, tab electrodes, cotton swabs, etc.).
- **Non-allowable Items:** The AAFP Foundation does not provide grant funds for indirect or overhead costs (e.g., rent, phone, utility bills, salaries etc.) software upgrades, monthly subscriptions (e.g. hosting management and data connectivity fees), office supplies, waiting room furniture or equipment for the care and diagnosis of specialty care patients (e.g., dental, vision etc.)
- **Applicant Notifications:** Awards are announced the end of September.
- **Award Process:** For the initial distribution of funds, the following documents are to be returned within 30 days of award notice:
 - An **Acceptance Letter** written and signed by the awarded clinic indicating their acceptance of the award and proposed use of funds.
 - Completed **990 Information Form**
 - Signed and dated **Application Agreement**
- **Distribution of Funds:** Please note: This is a reimbursement grant. Only the 'actual' cost of the items requested will be reimbursed. Initially, 80% of the FMC USA award is distributed. The remaining amount of the award (up to 20%) will be distributed upon receipt of a completed reconciliation form. Documentation of all expenditures must be provided within 6 months (180 days) of receiving the award notice unless an extension is approved by the Foundation.
- **Progress Report/Documentation Requirements:** For up to three years following distribution of the award, grant recipients will be expected to complete and return a brief survey on a yearly basis documenting the number of Family Medicine volunteers and other general information about the clinic and patients served. This input will help AAFP Foundation donors better understand the impact of their support.
- **Media/Communication** information will be provided upon follow-up of the grant award. Grant recipients are requested to provide clinic event photos and media coverage, as well as recognition acknowledgement of the AAFP Foundation.

APPLICATION INFORMATION

Section 1. Clinic Contact Information

Note: The **Primary Clinic Contact** should be a person who can easily be reached and available to answer any application or administrative inquiries.

Section 2. Family Physician (FP) Clinic Champion

The FP listed should be an AAFP member and a "champion" of the clinic who maintains active,

ongoing involvement with the patient care provided. Clearly state the FP's leadership role in the clinic and the extent of his/her involvement. Provide the FP's name, AAFP membership ID, cell phone or best contact number, email, and indicate the FP role(s) in the clinic.

Section 3. Clinic Overview

Supporting documentation (e.g., organizational chart, a list of board members and their affiliations, summarized business plan) is recommended to help reviewers have a clear understanding of your clinic and the population served. Describe clearly and concisely the following:

- a. **Geographic Area.** Information to include a description of the patient population you serve or will be serving (e.g., include race, ethnicity, gender, age, and poverty and unemployment rates, etc.); estimated clinic hours and the numbers of hours of direct patient care by volunteer Family Physician's per month. Include in your description your clinic's Area Deprivation Index (ADI) score (<https://www.neighborhoodatlas.medicine.wisc.edu/mapping>) based on the location of your clinic. **NOTE:** To obtain your ADI score, select your state and enter in "search" the address of your clinic or a zip code where most of your patients come from.
- b. **Services Offered:** Free Clinics can often provide a range of services. Please indicate, in addition to Primary Medical Care, all services that are available at this free clinic.
- c. **Organizational/Governing structure.** Provide information on how each of your Board members and their affiliations within the community support the clinic. If volunteers are in or will be in roles of leadership, what will that look like? It is recommended to upload an organizational chart to support your description.
- d. A **Sustainability Plan** is used to help your clinic achieve its goals. Your description should include other types of resources, such as in-kind support, volunteer staff, or shared resources from other organizations that will help sustain the clinic long-term.
- e. **Partnerships/Collaborations** with the local community organizations (e.g., food pantries, schools, emergency services, health alliances, etc.) and the health organizations (e.g., public health department, hospitals, residency programs, medical schools, etc.) help increase a community's recognition of the clinic. Describe your existing or potential collaborations/partnerships and how they are/will be helping to enhance clinic sustainability. Include in your description whether your clinic is a member of the National Association of Free and Charitable Clinics.
- f. **Family Medicine Volunteers.** Indicate the type of Family Medicine volunteers and provide clear examples of how residents, medical students, active and retired family physicians will support the clinic. What are or will be their roles and responsibilities in the clinic? If your clinic is in an area where there are no residency programs or medical schools close by, explain how you will recruit volunteers for your clinic.

Section 4. Budget

Budget and budget description is to be item specific with estimated amounts rounded to the nearest dollar. Budget description should list the item, detail the clinic's need for this item and explain how it will be used to enhance patient care. [Download Budget Worksheet and upload with the online application.](#)

Section 5. Letters of Support

Two letters of support are required. At least one letter of support from community or medical partners (e.g., health department, local hospitals, food banks, etc.) and one letter of support

from the clinic's physician champion. Support letters are to be dated, addressed to the AAFP Foundation, written on an organization's or community partner's letterhead, and signed. Please upload the letter(s) of support to the online application.

REVIEW PROCESS

The applications are reviewed and scored by the Family Medicine Cares Work Group, a subgroup of the Foundation's Board of Trustees. Applications can receive a maximum of 70 points. The following key criteria is considered when scoring the applications:

- Clinic Overview (Maximum 40 points): Applicant clearly defines the geographic area, patient population and day/hours of clinic operation; organizing and government structure; sustainability plan; partnerships/collaborative efforts with community organizations, hospitals, residency programs or medical schools; volunteer involvement. The need in your community for primary care is clearly stated and indicated by your ADI score.
- Applicant Family Physician (Maximum 10 points): The applying family physician has a lead role such as the Medical Director, Board President, or active volunteer in the clinic. The role and level of FP involvement is adequately described.
- Budget (Maximum 10 points): Budget requests are appropriate, and items are considered durable medical instruments and equipment for the treatment of primary care.
- Application Quality (Maximum 10 points): Application is well written, cohesive, and easy to read. Letters of support are appropriate and relevant. If appendices are provided, they are organized and easy to understand.

Questions?

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The American Academy of Family Physicians Foundation advances family medicine through philanthropy, using humanitarian, educational, and scientific programming to improve health.