

Application

Public Profile

Collaborate 0

Non-Ambulance Transport Program

Process: Greenville Women Giving 2023

Contact Info

Request

Applicant:
 Dr. Thomas Harold Blackwell
 thblackwell@greenvillecounty.org
 864-467-7004

[Contact Email History](#)

Organization:
 Greenville County EMS
 57-6000356
 864-467-7004
 301 University Ridge Suite 1100
 Greenville, SC 29601

If your organization information does not appear correct, please contact the funder. Thank you.

- Application

Document Viewer

Application Packet

Question List

- Due by 11/28/2022 12:00 AM EST.
- Fields with an asterisk (*) are required.

✓ Applicant Instructions

Grant applications will open on November 1, 2022 and will close at midnight on November 28, 2022. Greenville Women Giving (GWG) will fund grants that have potential for high impact and provide an opportunity for significant positive change in the community. Funding will be provided for general operating support, establishment of new programs, continuation or expansion of existing programs, and for capital improvements. All grant requests must outline why funds are needed, define the anticipated impacts and provide specifics on clear action steps and timelines to achieve measurable and sustainable results. Grant awards in 2023 will

range from \$50,000 to \$100,000 and be for either a one-year or two-year period.

See our grant guidelines for more information.

∨ Grant Overview

Grant Title*

Please limit Grant Title to 5 - 6 words.

Non-Ambulance Transport Program

Amount Requested*

Amount must be a minimum of \$50,000 and a maximum of \$100,000.

\$ 99,597.00

Total Grant Budget*

\$ 109,597.00

Total Organization Budget*

\$ 24,857,687.00

Grant Begin Date*

Must be after May 2023.

📅 05/01/2023

Grant End Date*

One year grants must complete by June 30, 2024. Two year grants must complete by June 30, 2025.

📅 06/29/2024

∨ Grant Details

Prior Funding from GWG*

Please include all funding from GWG received under current and/or prior name.

- Yes
- No

Focus Area of Grant*

Select one category that best applies to the grant for which you are requesting funding (see FAQ for descriptions of each category. Please note that we reserve the right to adjust categories as necessary to maintain consistency with internal guidelines.)

Health



Type of Grant*

Check category that best describes your grant request.

New Program ▼

Length of Grant*

Is this a one or two year request?

- 1 year grant must be completed by June 30, 2024
- 2 year grant must be completed by June 30, 2025

- 1 Year
- 2 Year

Services in Greenville County*

Does your organization provide services in Greenville County?

- Yes
- No

▼ Narrative

Organization Details*

Briefly summarize the history and purpose of your organization (please include your Vision and Mission Statements). State how long your Executive Director has been serving in this capacity and, if less than three years, provide the individual's prior position either with your organization or another organization.

Greenville County Emergency Medical Services provides all 9-1-1 requests for emergency medical care and transport, covers 795 square miles, and serves a population over 540,396 citizens and visitors. In 2021, the department received 80,580 requests for service that resulted in 104,010 responses and 55,164 hospital transports. The Vision is "To serve the community as a high performance system with dedicated and committed employees." The Mission is "Excellence in prehospital healthcare for Greenville County through service, innovation, and leadership." The

2 characters left of 750

Grant Details*

Describe in detail the grant for which funding is sought including the area served, number of people impacted, evidence of need, and what additional resources may be needed to ensure a successful outcome. If applicable, outline major partnerships and collaborations providing support for your grant.

Greenville County EMS periodically implements system refinements to improve medical care delivery and operational performance. Increasing call volume, workforce deficiencies, and hospital overcrowding often result in ambulances and first responders being unavailable for 9-1-1 calls. Offering alternative, non-ambulance transport options for low-acuity patients may be a solution. The department has developed a protocol for identifying low acuity patients and believes that a shuttle service would be safe, low risk, and economical, as there would be no charge to the patient. Importantly, this strategy

1 characters left of 1,250

Planned Outcomes*

List the 1 – 3 specific planned outcomes for your grant request. For each planned outcome listed, indicate below what you expect to accomplish, by when and how you will measure your success. Make sure that your success indicators are clear, reasonable and measurable. You will be expected to have successfully completed your Performance Success Indicators by June 30, 2024 for a one-year grant and by June 30, 2025 for a two-year grant.

1. Vehicle procurement

Finalize design, order, and purchase the vehicle; apply graphics; and install communications equipment. Completion: first 3 months.

2. Driver selection, training, and operationalization

Advertise, interview, hire, orient, and train drivers in required courses including CPR and driver training. Completion: first 6 months.

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Success Management*

Describe the methods and resources you will use to track your community impact.

After determining metrics, will use electronic patient reports to collect data.

- Number/type of events
- Number of patients agreeing to alternative transport and successfully being transported
- Adverse events or complications
- Financial impact

3 characters left of 250

Continue beyond GWG Funding*

Describe how your funding needs will be met beyond GWG funding.

Program sustainment funding will be provided by Greenville County. This will include all salaries and benefits for drivers, vehicle oil and fuel and maintenance, liability insurance, ongoing driver training, and vehicle depreciation/replacement.

3 characters left of 250

What makes this grant compelling? What is its greatest impact?*



The primary impact will be the increase availability of ambulances and firefighter first responders to respond to new 9-1-1 medical or fire calls. Equally important includes the cost savings for patients transported by shuttle as there will be no charge, and less workload on employees who already work under austere conditions. Seemingly, this will ultimately improve recruitment and retention of the existing workforce which secondarily preserves operations and reduces costs for onboarding and training new employees. Decreasing fuel costs and wear on vehicles will also be realized. This is

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Attachments

Most Recent 990*

Upload a file [3 MiB allowed]

Form 990 Exemption.docx [76.7 KiB]  

Copy of IRS determination letter (one page)*

Upload a file [3 MiB allowed]

County of Greenville IRS Determination Letter - Tax Status.pdf [132.1 KiB]  

Grant Evaluation Template*

Must use GWG Template found here.

Upload a file [3 MiB allowed]

Grant-Evaluation-Template_2023.docx [14.8KiB]  

Listing of Board Members and Affiliations (one page)*

Upload a file [3 MiB allowed]

Board Members and Affiliations.pdf [5.2 KiB]  

Grant Budget Template*



Must use GWG budget template linked here.

Upload a file [3 MiB allowed]

Budget-Template-2023-GRC-Application_FINAL.xlsx [12.1 KiB]  

Overall Organizational Budget*



Upload a file [3 MiB allowed]

Organizational Budget 104160 - EMS - FY2023 Budget.pdf [125.3 KiB]  

Graphic A

Optional maps/renderings

Upload a file [3 MiB allowed]

Vehicle Specifications.pdf [198.9 KiB]  

Graphic B

Optional maps/renderings

Upload a file [3 MiB allowed]

Electronic Signature

Potential Conflicts of Interest*

GWG values the transparency of the disclosure of potential conflicts of interest. Please identify and explain any potential personal or financial benefit that could be gained by any of your organization's staff or Board, or their immediate families, were this grant to be awarded. If none, please so indicate.


Greenville County Emergency Medical Services fully discloses that the department or Greenville County has no conflicts of interest associated with this grant proposal.

333 characters left of 500

Digital Signature (insert full name, title, date)*

I confirm that everything included in this grant application is true and accurate to the best of my ability.

Thomas H. Blackwell, MD

 Due by 11/28/2022 12:00 AM EST.

Abandon Request

Save Application

Submit Application