

Loss Prevention Grant Fund Proposal Application Instructions

The following outline and instructions should be used to prepare the proposal. The proposal narrative shall **not exceed 5 pages**, followed by the project budget and any relevant references. Please provide the information requested below, answering each item in order, and labelling each response with the appropriate number.

***** Grants are awarded for a one-year period and may not be used to cover ongoing operational expenses, or to fund permanent positions.***

A. Proposal Narrative:

1. Title of Project
2. Principal Investigator/Applicant and Project Team
3. Introduction/definition of the Problem: Describe the potential loss exposure(s) and why this represents a risk to Brown University Health. Include frequency of incident, frequency of claims, cost of past losses, and any other relevant data.
4. Project Description: Your proposal should clearly explain how funding would be used, what will be accomplished, and the results expected. State the objectives for the project and how they will be monitored (how success will be determined). Include specific activities that will take place, responsible staff, and timelines (not to exceed 12 months). Projects with the potential for ongoing or long-term gains are strongly encouraged.
 - Improving medication reconciliation
 - Improving transitions of care communication
 - Decreasing falls
 - Improving care communication/teamwork/escalation of care
 - Reducing diagnostic/treatment errors, omissions, or delays
 - Improving professional wellness
 - Decreasing burnout
 - Reducing readmissions
 - Improving sepsis care
5. Baseline Metrics- Please identify current or recent organizational or practice data supporting the need or gap to be addressed by this project. We are most interested in your specific experience but will also consider national data that supports the project.
6. Outcomes: The proposal should contain a clear statement of outcomes that will be achieved. There must be an identifiable and quantifiable loss prevention benefit resulting from the grant. The expenditure associated with the project should ultimately contribute to the protection of the assets of Brown University Health. In addition to the narrative, applicants must include a table outlining the project plan such as the one below:

Specific What needs to be accomplished? Who is responsible? What are the action steps?	Measurable How will success toward meeting the goal be measured?	Achievable Are goals realistic and achieved in specified amt of time?	Relevant Are goals aligned with project?	Time Bound Goals have a clearly defined timeframe.	Data Source Where is data obtained from?
1.					
2.					
3.					

7. Sustainability- Describe how the work and/or impact will be supported and sustained by the organization after the grant project has concluded. For instance, what strategy will be used to sustain and/or improve the goals achieved as part of the project, and as applicable, the continued financial support for the work?

8. Dissemination of Results- Describe how results from project will be shared with key stakeholders. For example, plan to raise awareness and understanding or change practice.

B. Budget: The budget should reflect all project-related expenses, including salaries by position type, applicable fringe benefits, and itemized costs for consultants, supplies, and equipment. Grants may not be used to support permanent positions; salary costs for temporary staff are permitted only during the grant period. Include any in-kind resources contributed to the project.

Budget items requiring clarification must be justified and approved by the departmental chief or VP in a budget narrative. If salary expenses are proposed, describe how those costs will be sustained after the grant period, if applicable.

Grant funds may be used only for approved budget items on the budget form and solely for the designated project purposes. All expenses must be reasonable, necessary, and directly related to the project. Expenditures outside the approved budget are not allowed.

A completed Budget Form is required by **May 29, 2026**.

C. References (optional): You may wish to include a brief description of any relevant research and/or standard practices that highlight the problem you intend to address or that supports the methods you are proposing. Include applicable reference(s) or citation(s).

D. Principal Investigator/applicant must obtain a signed Acknowledgement Form from their Department/Foundation Chief, Vice President, CMO, or CNO.

- All additional departments participating in the grant must also obtain a signed Acknowledgement Form from their Department/Foundation Chief, Vice President, CMO, or CNO.

E. Acknowledgement Form must be included in your submission by **May 29, 2026**.

F. For all projects requiring Brown University Health IS support:



Risk Services

BROWNHealth
UNIVERSITY

15 LaSalle Square
Providence, RI 02903
Tel 401-444-4595
Fax 401-444-8963

- Request an IS Consultation to discuss the needed IT services by using the following link: [IS Consultation Request / Service Catalog / IS Self Service Portal](#).
- An IS Project Request Form must be submitted to request IS support with a project. To Access Project Request Form click: [IS Project Request Form \(PRF\) / Knowledge Base / IS Self Service Portal](#).