EQUITY IN OC

Social Determinants of Health Implementation Grant Request for Proposals (RFP)

(As of July 29, 2022, updates and corrections noted in pink)

<u>Social Determinants of Health Implementation Grant</u>: OVERVIEW & RATIONALE

The Orange County Health Care Agency (HCA) Office of Population Health and Equity (OPHE) received nearly $23 million in grant funding from the Centers for Disease Control and Prevention (CDC) National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities (CDC-RFA-OT21-2103). The long-term strategies of this two-year initiative for health equity in Orange County (Equity in OC Initiative) will:

- Expand existing and/or develop new mitigation and prevention resources
- Increase or improve data collection, reporting, and infrastructure
- Build, leverage, and expand capacity and infrastructure of local health departments
- Mobilize partners and collaborators to advance health equity & address social determinants of health (SDOH)

The Equity in OC Initiative will provide funding to support up to 15 Implementation Partnerships to improve health equity in Orange County communities by developing and implementing a project that seeks to reduce health equity gaps and address SDOH affecting their communities. Grants awarded will focus on at least one of the following areas:

- Improve SDOH by impacting a neighborhood, population or community; clinical care delivery for a priority population or chronic health condition;
- Address the impact of systemic and/or structural racism on health;
- Increase community capacity to maintain and improve health; or
- Improve community-centered interventions and/or social conditions that influence health.

Grants will be awarded up to $500,000 per project over an 18-month period beginning on October 1, 2022 to March 31, 2024 with a maximum disbursement of $6,000,000 for the Equity in OC Initiative.
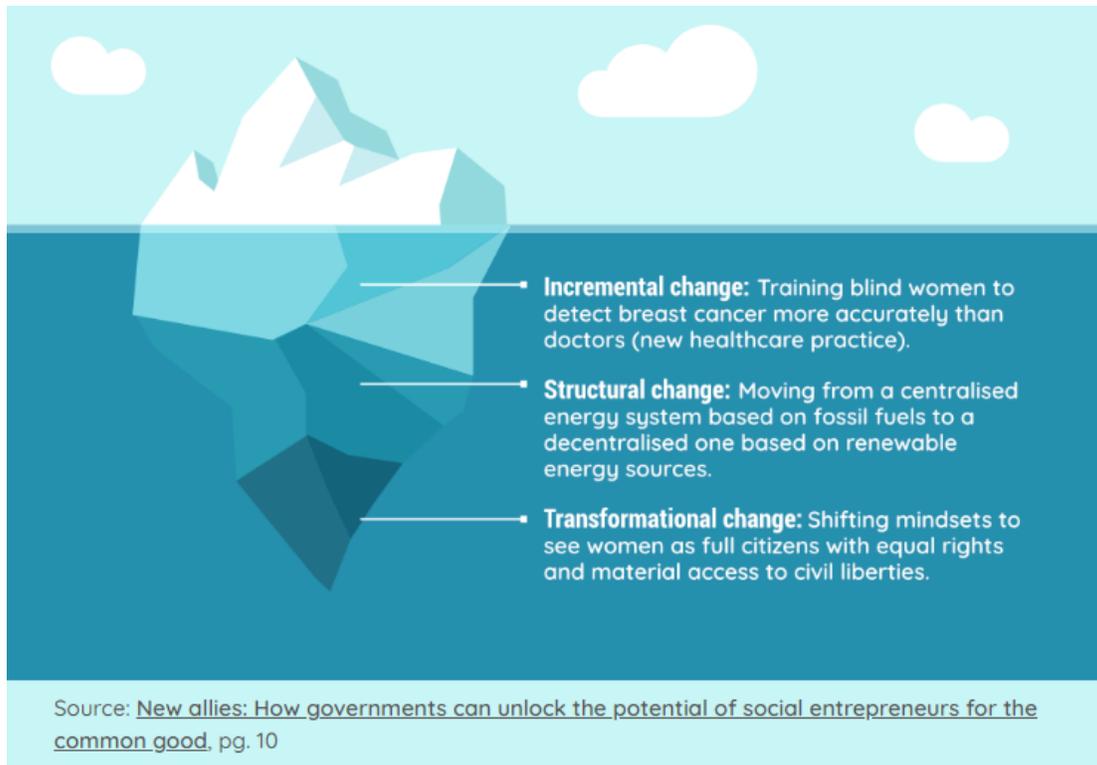
The purpose of this grant is to provide **funding support to collaborative systems change efforts** that create positive change in the three (3) identified SDOH Action Areas: **1) Housing is Health** *(formerly Housing)***; 2) Food as Medicine** *(formerly Nutrition & Basic Medical Care)***; and 3) Health & Healing** *(Formerly Health & Wellness, currently including Basic Medical Care)*. By focusing on these SDOH Action Areas, communities will build resilience to not only recover from the impacts of the COVID-19 pandemic, and will become better positioned to adapt to future public health crises.

Recipients of this grant will **develop and implement systems change projects while participating in activities and learning opportunities** designed to increase their capacity by participating in: including the Community Health Improvement and Leadership Academies (CHILAs), Equity Action Labs, improvement coaching calls, webinars and other activities. Implementation partnership will need to provide measurable results for each project.

Systems Change Defined:
According to Catalyst 2030's New Allies Report, **systems change** captures the idea of addressing the causes, rather than the symptoms, of a societal issue by taking a holistic (or systemic) approach. Systemic change is understood to require adjustments or transformations in the policies, practices, power dynamics, social norms or mindsets that underlie the societal issue at stake.

The iceberg illustration demonstrates the various levels where systemic change can take place:

Incremental change: Training blind women to detect breast cancer more accurately than doctors (new healthcare practice).

Structural change: Moving from a centralised energy system based on fossil fuels to a decentralised one based on renewable energy sources.

Transformational change: Shifting mindsets to see women as full citizens with equal rights and material access to civil liberties.

Source: New allies: How governments can unlock the potential of social entrepreneurs for the common good, pg. 10

PROPOSAL REQUIREMENTS:

UPDATED - KEY DATES include:

- **RFP Release Date:** June 22, 2022
- **Access to e-CImpact:** July 1, 2022
- **Bidder's Workshop:** July 18, 2-3 p.m., email EquityInOC@UnitedWayOC.org to register
- **Submissions Due: September 7th, 2022 by 12 p.m./Noon Pacific Time**
- **Grant Review Period: September 14th to October 7th**
- **Proposal Presentations: October 3rd to October 7th**
- **Award Notifications: On or around October 14th**
- **Grant Period: November 1, 2022 to April 30, 2024**

PROPOSAL PRESENTATIONS: Proposals will undergo an initial committee review. Applicants whose proposals are recommended for the second round of review will be invited for presentations during the week of October 3rd to October 7th. Additional clarifying questions may be asked at this time. Timing for the presentation will be scheduled with each applicant

individually. Questions will be provided at least one-week in advance. The inability to participate in the proposal presentations will affect application reviews.

ELIGIBILITY CRITERIA

To be eligible for funding, a Social Determinant of Health (SDOH) Implementation Partnership can be a new or existing collaborative or coalition that is comprised of multiple organizations (*one **anchor/backbone organization** and **at least one other organization**) and **at least 3-5 community residents/members.** Additional funding of up to $7,000 may be awarded to selected project recipients to support their community residents'/members' engagement and participation. The additional funding is to be disbursed by the partnership as a stipend to participating community resident/members. Participating organizations must meet **ALL** of the following criteria:

1. Organizations must be a 501(c)3 nonprofit organization or public agency based in Orange County and/or provide direct services and/or advocate alongside Orange County residents. All organizations within the Partnership must be based in Orange County **and/or** provide programs or services to Orange County residents.

2. Organizations should be primarily focused on programs, policies and partnerships that impact at least one of the identified SDOH: **1) Housing is Health; 2) Food as Medicine; and 3) Health & Healing.**

3. Organizations should collaborate with other organizations to form new or foster existing and expanded relationships:
    - *New* – new partnerships include any organization that the recipient has not worked with in the past in funded or unfunded capacities
    - *Existing* – existing partnerships include organizations that recipients are currently working with or have worked with previously to address health disparities and inequities
    - *Expanded* – expanded partnerships include those that recipients are currently working with or have worked with previously and will enhance through increased membership, mission, or funding

4. Organizations must not discriminate based upon age, gender, gender identity, race, disability, religion, national origin, sexual orientation, or an individual's ability to pay.

5. The SDOH Implementation Partnership must identify **one anchor/backbone organization** for the Partnership, who commits to:
    - Serve as financial administrator for the Implementation/Improvement team (processing and track program's expenses)
    - Demonstrate fiscal strength (must have audited financial statements with no material weaknesses or deficiencies identified)
    - Serve as the point of contact for all grant-related matters
    - Serve as the lead liaison for continuous communications among partners and grantor
    - Being responsible for coordinating with the EiOC evaluation team and ensure key program measures are progressing
    - Supporting the development of leaders who will generate and contribute to solutions that impact all levels of the community
    - Investing in a change process that is dynamic and enhances multi-sector engagement, relationships, capacity, and intention for change

IMPORTANT NOTE: This fund is independent of other EiOC funding opportunities (e.g., Community Organizational Participation Grants, etc.) and organizations are **allowed to receive multiple grants simultaneously, contingent organizations meet eligibility criteria**.

ALLOWABLE EXPENSES

These are program funds to be used by the awarded organization to conduct activities and strategies related to their project plan, see Project Budget & Narrative (page 8) for more details. Per CDC guidelines there are certain **unallowable** costs, as follows:

- Medical or scientific research
- Medical or clinical care
- Scholarships or fellowships
- Purchase, construction, or renovation of facilities, property, or land
- Furniture, equipment, or artwork
- Political campaigns, lobbying, or propaganda
- Fundraising or fund matching
- Endowments
- Debt reduction or loans
- Reimbursement of pre-award costs

TO APPLY

After attending the June CHILA, you will be provided with a link and access to submit a full proposal via email; you need to create an account the first time you visit e-CImpact using the organization code, and a user guide to help you navigate will be provided.

EXPECTATIONS

SDOH Implementation Partnerships selected to receive funding agree to:
1. Design and implement a comprehensive systems change strategy that impacts at least one primary SDOH (***Note:** Additional determinants may be included in the plan, but all partnerships must identify their primary SDOH action area).*

2. Conduct community partnership assessment tool at baseline and ongoing (e.g., Community Transformation Map, Assessment for Advancing Community Transformation)

3. Attend three Community Health Improvement and Leadership Academies (CHILAs) conducted by HCA and Institute for Health Improvement (IHI) through the EiOC Initiative. (***Note:** The first CHILA will be held June 28-30 in Fountain Valley, CA).*

4. Participate and engage in additional Action & Learning Community activities such as Action Periods, Equity Action Labs, coaching and technical assistance calls, webinars and other related activities as suggested.

5. Report on progress of improvement projects to your peers within the EiOC Initiative and the community at large throughout the Action & Learning Community Phase.

6. Collect health and quality improvement data to measure outcomes and demonstrate the progress and impact of your equity improvement project.

7. Send at least one representative to participate in the Equity in OC Initiative activities.

8. Provide responsive and timely submission of invoices, status updates, reports, and other requirements outlined in contracts or scopes of work.

9. Participate in evaluation and learning activities as requested (for example semi-annual reports, surveys, interviews, focus groups, feedback, and other activities).

10. Adopt and adhere to the Equity in OC Initiative Charter.

11. Grantees commit to understanding and engaging in systems change, as it is at the sole purpose of this grant.

PROPOSAL GUIDELINES & INSTRUCTIONS: To complete in e-CImpact

Screening Question:

❖ Did members from your SDOH Implementation Partnership attend the June CHILA?
  o Yes or No

Note: You will be asked to provide the email address you used to register for the June CHILA in e-CImpact.

Background Information - Backbone Agency Overview:

This section collects detailed information regarding the backbone organization. Please be prepared to provide in-depth information regarding your organization's background and structure.

- Organization Name
- Executive Director/CEO contact information
- Main point of contact (program contact)
- Fiscal Sponsor contact information (if applicable)
- # of Paid Full-Time and Part-Time Staff
- # of Volunteers
- Organization's Total Annual Budget
- Brief bios of key designated staff who will be primarily responsible for engaging in the Equity in OC Initiative

Implementation Partnership Overview - Program Narrative:

This section is an area for you to describe the partnership that will be responsible for addressing systems change for the particular social determinant(s) of health you have chosen.

1. Select the primary SDOH Action Area the partnership will address in this proposal:
   - Housing is Health
   - Food as Medicine
   - Health & Healing *(*Note: this includes, among other things, basic medical care)*

2. How many organizations are in your SDOH Implementation Partnership?
   - #XX

3. Does your SDOH Implementation Partnership have the ability and capacity to meaningfully engage (e.g., co-design, co-create and/or co-decision making) community residents in all aspects (e.g., planning, designing, implementation, etc.) of the proposed work?
   - Yes or No

4. Which organization from your Partnership will be the **backbone organization** and staff person dedicated to this work? Who else plays a significant role? Include brief (no more than one (1) page) bio(s) of at least one other organization and their key staff member.

5. Please share how the **organizations in your partnership** have either the experience or the expertise to address the SDOH Action Area(s) presented in this proposal.

6. How will your Partnership incorporate **community voice**, especially from community members with lived experience of being impacted by the SDOH you have identified? In particular, explain how they will be meaningfully involved in both the design and implementation of the work.

We will work together to develop solutions that do most or all of the following:

- ✓ Address one or more of these 3 Priority Areas
- Work to improve the **systems** involved
- Include working "**mid-stream**" and/or "**upstream**"
- 🔍 Apply an **equity lens**
- Are **designed with the people** that the effort is for
- Use **data** (identify need, track progress, guide decision-making)
- Increase **collaboration** (leverage and align)
- 👍 Are **actionable** and **feasible now**

Project Description & Work Plan:

This section is for you to provide a description of the project your Implementation Partnership will conduct during the 18-month period.

*Note: We understand that your work will likely evolve with your engagement in IHI's Action & Learning process. Nonetheless, we would like to have a clear proposal from you at this time, fully recognizing that your systems change strategies and tactics may change over time.

Social Determinants of Health	Examples of systems change solutions
Housing is Health	• Reduce housing overcrowding • Ensure no one in a priority neighborhood (or zip code) is evicted • Build a coordinated housing placement system for people experiencing homelessness and housing instability
Food as Medicine	• Increase access to healthy food • Develop/improve a neighborhood-based food security system
Health & Healing	• Neighborhood-level solutions for individuals at risk of poor health • Neighborhood practices that foster healthy activity to decrease rates of diabetes, obesity, hypertension, etc. • Increase access and use of preventative or basic medical care (specific populations, neighborhood)

*This table is for example purposes only; this is by no means a required list of possible interventions.

A. How would funding help to implement activities and strategies that will advance systemic change regarding your identified SDOH Action Area? In particular, what system(s) do you plan to affect to make your desired change(s)?

B. Address each of the four (4) following elements in your proposal:
1) How the partnership will **build community power** through meaningfully engaging individuals with lived experience(s) of health inequity during all phases of your project (e.g., planning, design, implementation, etc.).
2) How the partnership will **advance policy, systems or budgetary changes** that will have a direct impact on health equity in your identified community(ies).
3) How the partnership will **build, leverage or expand infrastructure and/or data system support** for population health equity to be achieved in Orange County.
4) How the partnership will cultivate and strengthen **collaborations among partners, nontraditional actors and/or public agencies** will be cultivated and strengthened during the grant period.

C. Complete the work plan in e-CImpact with information on what anticipated strategies, activities, and outcomes the partnership expects to achieve within the 18-month program period. There will be an online template similar to this example here:

Objective 3: Build, leverage or expand infrastructure and/or data systems			
STRATEGY/ACTIVITY	PERSON(S) RESPONSIBLE	OUTCOME *(what condition will be improved as a result of this activity)*	DATE(S)

The work plan must include the following objectives:

1. Build Community Power
2. Impact Policy & Systems
3. Build, Leverage or Expand Infrastructure and/or Data Systems
4. Cultivate & Strengthen Collaborations that Improve Health Equity

D. Include plans or strategies for sustaining the work beyond the grant period. Will other funds be leveraged for this work during the next 18 months? Are there other funders you plan to approach to continue to build on your systems change work in the future?

Project Budget & Narrative:
- Provide a detailed budget and budget narrative supporting the budget items proposed.
- Indirect costs are not allowed at this time, instead we are allowing for the Backbone/Anchor organization to receive up to 20% of the total amount requested to support their operating costs.
- Funds may be used for a wide range of items in support of the proposed SDOH Action Area(s) identified. However, funding for partner membership is not allowed. Partners included in the budget must have a clear and distinct role/purpose in supporting the proposed objectives, goals and strategies.
- Clearly explain how each budget line item will support the proposed objectives, goals, and strategies.

SUPPORTING DOCUMENTATION:

In addition, please upload and submit the following documents in support of the completed proposal.

From the OC Equity Map and OC Social Progress Index:
- Population or neighborhood-level data that supports your chosen social determinant(s) and relevant strategies.
- Data (quantitative and qualitative) must demonstrate a connection between the chosen SDOH and COVID-19 impacts (e.g., COVID-19 case and/or death rates)

Note: Other data sources are acceptable if the OC Equity Map does not have data available to support your proposal

From the June 2022 CHILA, submit the following items, as applicable:
- Change ideas to be tested
- Aim statement
- Driver diagrams
- Stakeholder asset or power maps

REQUIRED DOCUMENTS FROM THE BACKBONE ORGANIZATION:

1. **Proof of Non-Profit Status** – Include a copy of the determination letter from the Internal Revenue Service.
2. **Current Organizational/Operational Budget** – Include a copy of the most current Board-Approved Organizational Budget.
3. **Current and Signed W-9 Form** – If awarded, this form is required in order to issue grant payments.
4. **Current Roster of Organization's Board of Directors**
5. **Information regarding Key Program Leadership** – Include a resume or curriculum vitae of the organization's Executive Director, and project lead. Should be no more than three (3) pages long.
6. **Roster of Partners:** Include an excel spreadsheet of contact information (organization name, contact person, email and phone) from each partner organization.

OPTIONAL DOCUMENTS FROM THE BACKBONE ORGANIZATION:

- **Proof of Fiscal Strength:** Include a copy of the most current financial statements or a copy of your organization's most recent (2021) Tax Form 990. All financial statements must be prepared on an accrual basis according to the Generally Accepted Accounting Principles (GAAP) of the American Institute of Certified Public Accountants (AICPA) for non-profit agencies.
  - ❖ **NOTE:** IF awarded, backbone/anchor organizations will be required to submit a Board-approved independent audited financial statements within six (6) months after grantee's fiscal year end, unless otherwise requested by the grantor. Once awarded, full details this financial requirement are outlined in the grant agreement.

CONFIRMATION OF RECEIPT OF PROPOSAL:

Confirmation of receipt of proposal will be emailed to the Agency's Primary User or Main Point of Contact, via e-CImpact.

PROPOSAL SUPPORT: *Please allow up to two business days for an appropriate response to your inquiry*

- For questions about the RFP, email EquityInOC@UnitedWayOC.org
- Visit www.UnitedWayOC.org/EquityOC to access our Frequently Asked Questions (FAQs)
- For issues with e-CImpact, contact EquityInOC@UnitedWayOC.org and provide screenshots to help describe the issue.

OVERVIEW OF THE REVIEW PROCESS:

Each grant proposal will be reviewed by at least three reviewers. The criteria reviewers will use to select proposals includes but is not limited to impact, feasibility, capacity, collaboration and sustainability. Proposals are expected to speak to the following elements:

Impact: Will the proposed activities deliver quality, data-driven interventions that create systems change to advance health equity in Orange County?

Feasibility: Is the project informed by data and grounded in true community need? Can the objectives likely be achieved within 18 months? Is the project well planned? Are the budget and time allocated appropriately?

Capacity: Does the organization, its partners, key staff, and his/her team have the appropriate expertise and qualifications to implement the proposed plan? Does the proposal demonstrate organizational credibility?

Collaboration: Does the backbone organization enhance collaboration among community partners, organizations with similar or complementary goals? Are the roles of the partners appropriate and relevant? Does the organization foster collaborative relationships with public and private entities? Does the partnership include community voice meaningfully?

Sustainability: Is the partnership likely to sustain engagement beyond the initial grant period? Is the impact likely to be long-term?