

Massachusetts Community Health and Healthy Aging Funds - Funding Announcement Community Health Fund - Policy, Systems, and Environmental Change

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Presenters: Nineequa Blanding and Kevin Myers

Introduction and Objectives

Good morning and welcome. I'm Nineequa Blanding, Vice President at Health Resources in Action, also known as HRiA, and I'm pleased to welcome you to our webinar featuring the Community Health Fund, and our funding opportunity for policy, systems, and environmental change. I'm joined by my colleague, Kevin Myers, Program Officer for the Community Health Fund at HRiA. Here are the objectives for our webinar today. First, we'll be sharing more details about the funding opportunity, including its goals, key due dates, and technical assistance that we'll have available. Second, and importantly, we believe that in order to advance population health for everyone across Massachusetts, a racial and health equity lens must be used to guide our collective work to shift policies and systems-level practices that serve as barriers to advancing equity. And lastly, we also want to take the opportunity to hear from you to both inform and strengthen our collective work. Throughout this webinar we will ask you to share through polls your organization's existing work and interest in the funding opportunity, as well as technical assistance needs related to advancing population health in Massachusetts.

Poll Questions

Poll Question 1

We have a poll question now for you that we would like to ask you to participate in and this is a series of four questions that you will see. The first is: *Which type of organization do you represent?* And there are some options that fall right below. The options include: Community/Grassroots organization, Academia, Healthcare (Hospital/health center/long-term care facility), Government/municipality, Nonprofit, Coalition, Planning Agency, Elder service organization, or other.

Poll Question 2

The second question is: *Which EOHHHS, Executive Office of Health and Human Services, geographic regions does your organization support?* The options include: Western, Central, Northeast, Southeast, Metro West, and Boston.

Poll Question 3

The third is: *How many paid employees are in your organization?* The options include 1-25, 26-50, 51-100, 101-250, or 250+

And the numbers of responses are climbing. Thank you everyone who has currently participated in this poll question. We will give it just a moment to allow everyone to respond. Okay.

Great, so it looks like from the results here that there are 50% nonprofits, and the spread of the type of organizations are quite diverse. Thank you for participating. We have grassroots and community organizations, academia, healthcare, government and municipality organizations represented. This is wonderful, as well as elder-serving organizations and planning agencies. And we have quite a bit of a spread across Massachusetts which is great to see. This is wonderful. And a full range of organizations that vary by size.

Thank you all for sharing these results. This helps us to have a better sense of who has joined us on the call and it helps to share among all the participants so that we know who is currently participating in today's session. Thank you.

Agenda

The agenda for today is as follows. We will spend a total of 1 hour together. Our time will be organized in the following way. During the first half of the session we will share the background and rationale for further context regarding the Community Health Fund, as well as more details of the approaches that we're looking for. We will then spend the second half of the session led by my colleague Kevin Myers, who will discuss our vision for the grantmaking process and the opportunity, and the next steps to both apply and engage with us as we move forward with this funding opportunity.

Housekeeping Notes

Before we launch into the content, a few housekeeping notes. If you have any logistical questions related to the webinar, we absolutely want to hear from you. Please type them into the chat box. We also want to be sure to answer any content-related questions so please feel free to type them into the question box. Answers to all questions raised will be available on the frequently asked questions page on our website later this month. You'll hear more details about our website later in the session. And the webinar recording, slides and transcript will also be available. We are doing our best to make this webinar accessible to everyone so we will communicate all details on each of the slides during this presentation.

We will now begin with an overview of background and rationale.

Background and Rationale

This grantmaking opportunity to deploy resources via the Community Health & Healthy Aging Funds are made possible by way of a partnership established between the Massachusetts Department of Public Health, or DPH, and Health Resources in Action, also termed HRiA. DPH is the health department that serves the entire Commonwealth under the leadership of Commissioner Dr. Monica Bharel.

In January 2017, the Department of Public Health completed a landmark revision of the Determination of Need regulations, which led to the creation of the Community Health & Healthy Aging Funds. HRiA serves as the fiscal agent that is responsible for facilitating the planning and implementation of both funds. At HRiA, we are a Massachusetts-based nonprofit and public health institute that works under the leadership of President Steve Ridini at the intersection of policy, research, and practice to advance our mission towards catalyzing social change to create a world where social conditions and equitable resources foster healthy people and healthy communities.

Two Funds and Three Funding Opportunities

It's important to note here that there are two funds established and three funding opportunities. This is termed the Community Health Fund and the Healthy Aging Fund. Today's webinar is the first of a three-part series and Kevin will share further details on the upcoming webinars later this afternoon.

In 2019, two committees were established to develop a vision and guide the overall direction of the funds. For the Community Health Fund, the advisory committee was pulled together to develop a vision which is termed: *All Massachusetts residents have an equitable opportunity to achieve the highest possible quality of life*. This vision aligns with DPH's goal, which is led by Dr. Monica Bharel, to eliminate health inequities through addressing the social determinants of health. To work towards realizing this vision, the Community Health Fund will invest in community-centered approaches that are intentional in addressing root causes of inequitable health outcomes. The focus will be on populations that experience inequities and have been historically underserved. And we will focus in on geographic areas in Massachusetts that have not benefited from previous local Determination of Need funds.

Determination of Need (DoN) Program

What is the Determination of Need program? It's really the result of healthcare institutions such as hospitals who enter into an effort to expand or improve their facilities. Five percent of

the total expenditures of the overall cost for this project is then invested in Community Health Initiative funding, which now enables for the Community Health & Healthy Aging Funds to be established.

Projected Determination of Need (DoN) Dollars Map

This map of Massachusetts provides a visual of the projected local Determination of Need-related dollars over the course of the next 12 years. The green depicts places where there are expected activity and the shades of green represent the total amount of dollars to be invested. So darker shades of green represent greater levels of investment, whereas areas of white are where there are no projected activities. As you can see from this map the green is depicted in limited areas across Massachusetts. The creation of the Community Health & Healthy Aging Funds will allow for distribution of resources in Massachusetts to communities who have not historically benefited from Determination of Need investments.

Why are we doing this work?

So just returning to the overall intent of the Community Health & Healthy Aging Fund. The goal of this effort is to advance population health in Massachusetts and we know from research that 80% of what influences our life expectancy happens outside of the healthcare system. It further underscores the point that where we eat, live, and play have a huge impact on our ability to thrive.

The Health Tree: Connecting Health Outcomes to Root Causes

A visual that depicts this concept is one of a tree. This is the foundation behind what we are doing. Often when we look at a tree, our eyes are drawn immediately to the leaves and flowers. We might gauge the health of the tree or the beauty based on these features. The same is true when we think about our health and the health of our communities.

Imagine the leaves being depicted as negative or poor health outcomes. Here the visual displays the leaves as a number of poor health outcomes that we see in Massachusetts and across the country. We have injury, obesity, heart disease, depression, behavioral problems, asthma, stroke, cancer, COPD, hypertension, and diabetes. But we know that these outcomes do not stand alone and are not generated by themselves.

The next structure that supports these leaves are the branches. In this context the branches would represent the individual behaviors that can modify, reduce, or increase one's risk for developing poor health outcomes. These include behaviors such as lack of exercise, substance use, diet, levels of stress and being able to manage it, social connections, and smoking. But this is only one half of the picture.

We know that a tree consists of more than just the branches and the leaves, and is supported by other structures. In this context we see the trunk as representing what we would call the Social Determinants of Health - built environment, education, rates of violence and trauma, employment, housing, and your social environment. All these factors play a role in one's health.

And lastly, the roots. The roots are the foundation of the tree. In this context we see that structural and institutional barriers influence the distribution of resources across the social determinants of health, which then have huge impacts on the ability for an individual to thrive. These structures include racism, classism, poverty, ableism, heterosexism, ageism, prejudice, and xenophobia. So when we think about the health of the tree or the health of a community, it is important to look beyond the surface, beyond the leaves and the sum of the primary individual behaviors that we know influence health behaviors. It's very important to look at the root cause of the issues.

Defining Disparities versus Inequities

So, as we discussed all of the factors that influence one's ability to thrive, it is important to define what we term as disparities or inequities. And to make a distinction between the two.

We see disparities as *differences between individuals or population groups*. But we see inequities as *differences that are unnecessary and avoidable, but are also unfair and unjust*.

If we keep the visual of the tree in our minds, and think about the negative health outcomes that I just described to you. If the differences among certain groups of people for hypertension and COPD are a result of unequal or inequitable distribution of resources, we would consider those differences inequities. Things that go beyond genetics to describe the differences that we are seeing at the population health level.

Defining Health Equity

It is also important to define health equity. We see that health equity is a mechanism for addressing the root causes of things that are driving the inequities. So here is a term that the advisory committee for the Community Health Fund has also adhered to. The term health equity is defined as: *everyone has a fair and just opportunity to be as healthy as possible. To achieve this, we must remove obstacles towards health such as poverty, discrimination, and deep power balances. And their consequences, including lack of accessibility to good jobs with fair pay, quality education and housing, safe environments, and health care.*

It is important that as we consider advancing the health of populations and that health equity is at the center of our work. MLK defined it quite well when he made an address to the Human Rights Commission in the 1960s. He stated: *“of all the forms of inequality, injustice in health is the most shocking and the most inhuman. Because it often results in physical death.”*

Place and Life Expectancy

And based on current research, we do have examples of how life expectancy is influenced as a result of place. Here we have two graphics from two different areas in Massachusetts where we see that there are two cities that are just a short distance from one another, with a difference of roughly 12 to 13 years in life expectancy, and this is a result of many of the structural barriers that we named earlier.

Now I'm going to turn it over to my colleague Kevin Myers who will review the approach for us.

The Grantmaking Approach

Good afternoon everybody. Happy to be here with you today and to talk about the approach of this funding opportunity. One thing that makes this opportunity unique is its core tenet of policy, systems, and environmental approaches. This is really important because these approaches have the greatest potential to impact some of those root causes of health that Nineequa was mentioning through the visual of the tree and its roots, specifically structural and institutional racism.

Policy, Systems, and Environmental (PSE) Change Approaches

So what is on this slide is a comparison of the PSE change approach versus a more traditional public health programmatic approach. The programmatic approach is on the left hand side of the screen and there are two separate examples.

The first is hosting a community bike ride, which is a public health approach. This is seen as a one-off opportunity vs. the policy, systems, and environmental change approach which is implementing a complete streets policy to ensure that community roads are designed to be safe and accessible for all users. You can see with that example the PSE change approach is a more sustainable approach, and it also has the potential to impact more people.

Then if you look at the second example, which is having an open gym night at a local school. So again that's a one-night only opportunity versus the PSE change approach, which is implementing a town-wide joint use agreement enabling community members to have access to the school's gym and fields when school is not in session. So as we're thinking about this funding opportunity, we really want to focus on the right-hand side of the screen, which is the

PSE change approach and we want to do that with an equity lens as Nineequa was referencing. So we want to be doing this in communities and populations where there are high rates of inequities.

Focus, Strategies, and Outcomes

The Advisory Community for the Community Health Fund developed a focus of the funding opportunity as well as strategies and outcomes. We wanted to share that with you within this graphic. You will see here there is a blue box with a focus, which is: *activities that benefit communities outside of Boston that have not historically and routinely benefited from previous local Determination of Need (or DoN) community health funding and have high rates of health inequities*. So the first piece of that relates back to the map that Nineequa shared with you, the green and clear map of Massachusetts. And so what that map was conveying is where the dollars are projected to go from 2015 to 2027 and as you see on the map, there's a lot of concentration within the Boston area with that deep, deep green. You also see a lot of communities in Massachusetts that don't have any green at all. So that's really the rationale for that map. If we look at the historic and routinely benefited areas, there are similar patterns where we see a lot of the concentration of these funds in the Boston area and then some areas, specifically western Massachusetts, where there is not as many funds.

Also within this graphic, there are strategies which lead to our health outcomes and there's really three main strategies that are involved in the multi-year investments and capacity-building approaches. The first is related to this funding opportunity and that's policy, systems, and environmental change approaches. The second is community health improvement planning processes or CHIP processes, and we'll be running a webinar all about that opportunity this Thursday at 12 p.m. And then we want to also implement an evaluation process to ensure that there are improved Community Health initiatives. And after that, there's an orange arrow that leads to the outcome box with three main outcomes: a disruption of structural and institutional racism and other forms of oppression, improved population health outcomes, and improved cross-sector and community-centered collaboration.

Social Determinants of Health and Priority Health Outcomes

If we reflect back on the health tree that Nineequa shared, we had the trunk of the tree that were the social determinants of health, and so that's what you're seeing here on the left-hand side of the screen. These are the six common social determinants of health, so we're thinking about health from a very broad lens or broad approach, if you will. Those six determinants are the built environment, education, employment, social environment, housing, and violence. And we also think it's important to link those social determinants of health, within the applicant's ideas that are submitted to us, to those DPH Priority Health outcome issues. There are four

health outcome issues and those are in the orange boxes - substance use disorders, housing stability and homelessness, mental illness and mental health, and chronic disease.

Poll Questions

Poll Question 4

We wanted to get a sense from you all on the line today: *What areas do you operate within these six social determinants of health and the four DPH priority health outcome issues.*

So there's a poll question here so you can select all that apply on areas that your organization currently works. The options include: built environment, social environment, housing, violence and trauma, employment, education, chronic disease, housing stability/homelessness, mental illness and mental health, and substance use disorders.

Thanks to all those that have responded. I'll give you another 20 or 30 seconds. I see a lot of responses coming in, this is great. Okay I think we can go ahead and close the poll. Thank you very much.

So it looks like we can see the results here, and out of the six social determinants of health, we have a lot within the social environment. And then if we look down at the 4 outcome issues it looks like we have about half in all those categories. So thanks, that's really helpful to know where organizations are currently working and where there is current interest. Thank you.

Policy, Systems, and Environmental (PSE) Change Approaches

Okay so one thing we wanted to provide you is some examples or ideas as to what we were thinking as far as examples of policy, systems, or environmental change approaches within those SDOH areas, that also address racial equity. This is definitely a non-exhaustive list, we don't want this to limit your thinking at all. We want this to really spark some thinking as you're creating an idea for submission.

Within employment, we heard from folks about a lot of strategies to address increasing minimum wage, as well as approaches to support improved work conditions and health and safety regulations to reduce injury and illness. And within the housing and homelessness area, we heard of strategies to address eviction prevention, public housing, housing rehabilitation, and supportive housing. So really within those four areas, to ensure that people have their basic health needs met.

And then some of the other social determinants of health areas. One is early education, so we heard about strategies to address workforce development as well as retention, to address the shrinking and aging workforce in early education, the collection and analysis of better data and information to inform statewide policy and education, and ensuring that there are sufficient reimbursement rates to provide those high-quality services for early education, and to build parent advocacy and leadership. So PSE strategies to address all of those.

Then within violence and trauma, there's promoting and establishing trauma-informed care and the use of trauma or adverse child experiences (or ACES) response teams to address those immediate needs as well as potential long-term needs. And then promoting youth civic engagement and providing outreach, case management, workforce development, education, and mental health counseling.

Then within the built environment, we heard a lot about strategies to address transportation, planning, food security, all by involving multi-sector stakeholders through a health in all policies lens. And I would say throughout all these different examples of these determinants of health, really the importance of community engagement, as well as ensuring things are community-led processes, and that they encompass health and racial equity.

Grantmaking Process

Let's talk a little bit about the grant making process for this funding opportunity. There is a graphic on the screen that outlines this process. It is a 7 stage or 7-step process, so each of these blue dots represents one of the stages and they go around clockwise with an arrow in between.

So we are currently at the top of the clock with our outreach and this is the funding announcement, and then that will lead to idea-sharing where we hope that you will share your ideas with us. This will allow us to form an allocations committee to review the ideas that are submitted, which will allow us to identify a design phase cohort - a cohort of organizations we think have a great idea that will be able to be implemented in Massachusetts.

Within that cohort we will provide capacity enhancements and technical assistance to help you all refine your ideas and to really develop your strategies to ensure that you're addressing racial and health equity and that it's a true policy, systems, and environmental change approach. And then there will be opportunities for those that are selected within the cohort to present your full proposal to us. And again, that will go to an allocations committee or review committee,

which will be tasked with identifying the funding cohort - the organizations that will receive funding to implement their strategy.

And then throughout this process, there are really three core tenets here. So we have community engagement of the top of the orange circle. Our hope is that you will be engaging your community throughout the process from the idea formation to refining your idea and making sure that this is a process that is led by and informed by the community. Monitoring and evaluation is another core tenet of this process. We want to ensure that for future funding cycles, we can be improving upon this process and making it as easy for applicants to submit their ideas. And then some capacity building, so we will be providing that as well throughout this process. You can think of this as a two-step investment process where there's a chance to share your idea, and develop and refine that idea, and then present a full proposal.

Grant Award Length and Amount

The grant award length and amount. We expect to fund multiple awards between \$50,000 and \$200,000 per year for up to five years per award to advance those policies, systems, and environmental change approaches. Awards may support both planning and capital investments. For example, low-interest loans for new healthy retail within those policy, systems, and environmental change approaches.

Grant Eligibility

Let's talk about who is eligible to submit an idea for this funding opportunity. Those are Massachusetts based non-profit 501(c)3 organizations, as well as municipalities. For this first round of funding, the fund will prioritize support to communities outside of Boston that have not historically and routinely benefited from previous local DoN Health funding and have high rates of health inequities. And strategies may focus on geographic or population-based communities at the local, regional, or statewide level. The fund will also accept IOI's from agencies and organizations geographically based in Boston who are interested in doing health and racial equity work statewide or in communities outside of Boston.

If you are looking for more information about the local DoN Community Health initiatives within Boston, remember that's the percentage of the funds that are staying within the hospitals local jurisdiction, you can feel free to email us and we can get you connected to the appropriate resource. And we will be sharing our email addresses at the very end of this presentation.

Funding Timeline

Let's talk about our timeline for this funding opportunity. This is a table that outlines the activities with the dates on the right-hand side. So today is our funding announcement webinar and then the Inquiry of Ideas or IOIs are due **Wednesday, October 22nd, 2019**. Those applicants invited to submit proposals will be notified on **Friday, November 22nd, 2019** and then the full proposals will be due **Wednesday, January 8th, 2020**. Applicants can expect to hear notice of their awards on **Friday, February 28th, 2020**.

How to Apply

Let's talk about how to apply for this funding opportunity. First is to review the request for Inquiry of Ideas, or IOI. The second is to develop your idea with your partners and to engage your community. And then we ask that you attend two capacity-building webinars in September; we're going to have a little bit more detail about those in just a few slides. And then we encourage you to visit our website, where you can submit your idea through an online portal. And the idea submission is really in two different parts, the first being a cover form, where we'll ask for some very basic information about your organization and then there are a few questions that are categorized into three categories. We have background questions, some questions related to general approach or your idea, and questions related to resources.

Idea Assessment Criteria

Before we dive into those questions, we want to let you know how we are going to assess the ideas that come in, and what the allocations committee will be looking for when they review your ideas. There's four criteria. The first being **equity** - that's the demonstration that the idea is addressing a geography or population that is experiencing high rates of inequities and that the idea and approaches are community-led and supported by populations experiencing inequities. The second criteria is **impact**. We want you to be able to demonstrate the logic that's connecting your approach to addressing the root causes of health and those root causes or the roots within the tree to the trunk of the tree or the social determinants of health to the leaves of the tree so those are the four priority health outcomes. Making sure that you can adjust the linkage between those two things. The third is **collaboration**, so the demonstration of multi-sector partners with diverse perspectives. And the fourth is **feasibility**, which is the likelihood of resources supporting success of the idea.

There are four questions within the background section.

- Briefly describe your agency, organization, or collaborative.
- Describe the issue you want to address and its root cause.
- Describe the population harmed by this issue.

- List the data/information sources you use to understand health inequities that exist in your community.

The second category is approach, so we ask that you:

- Describe your idea for a PSE change approach that addresses the root cause.
- Briefly explain how this idea will address the SDOH area(s) and improve health outcomes(s).
- Define the community that will be impacted/benefit from this idea/approach and how they will, at a minimum, be engaged in the proposed work. Priority will be given to ideas that come from and are led by populations with lived experience related to the issue being addressed.
- Identify key partners you currently have for implementing your activities and the additional partners you will need to engage to make this process a success.

Resources

- List the approximate size of the financial investment you are seeking from the Community Health Fund to support this work on an annual basis, and the number of years for which you are seeking support.
- List any other resources you need to implement your idea, such as training, technical assistance, data/other information.

There are three different options on how to submit your application. You can answer these questions within a word document, you can answer them within a PowerPoint presentation, or you can also upload a video for us to review; but all of that information will be outlined in the Inquiry of Ideas (IOI) document.

Next Steps

Great, so let's talk about some next steps for the funding opportunity. As we mentioned before, we will be providing capacity building or capacity enhancing opportunities, and technical assistance. As far as capacity building, we have two save the dates for a couple of webinars we will be facilitating in early September. The first will be **Wednesday September 4th, 2019 from 11:00 am to 12:30 pm** and the second will be on **Thursday September 12, 2019 from 10:30 am to 12:00 pm**. And the capacity building topics will be selected after gathering feedback from you all today.

Technical Assistance

Before we launch the poll question, I want to switch gears to the other side of this screen and explain some technical assistance. So you can feel free to email any questions you have, in

addition to asking questions today in this webinar, to CHFUND@hria.org or HealthyAgingFund@hria.org. You can also visit our frequently asked questions webpage where we will host all the questions that are asked and provide our responses. Finally, you can sign up for a 15-minute phone session with a technical assistance provider to discuss additional questions, and the logistics and details of that will be forthcoming.

Poll Questions

But to gauge your interest in both of these opportunities, we wanted to ask another set of poll questions.

Poll Question 5

The first is: *In which topic areas would you like more support?* You can select as many as you would like. The options are: health equity, PSE change approaches, idea formation and communicating your idea, engaging community, collaboration and collective impact, using data to tell your story, evaluation, the six SDOH or priority health outcomes and there's also an "other" category. So if you select the other category, feel free to also type something in the chat box to let us know what areas you might want support in.

Poll Question 6

The next question is gauging: *Are interested in attending one of those two capacity building webinars.* The options are yes or no.

Poll Question 7

The next question is: *Are you interested in attending an office hours time slot?* The options are yes or no.

We'll give folks another few seconds to respond. Thanks to those that have already responded. Okay great, thanks everybody. So it looks like there's a lot of interest in idea formation and communicating your idea, as well as further exploring PSE change approaches, some interested in evaluation as well. We'll take all this in and start to form some ideas for these two webinars. And it looks like there's a lot of interest in these webinars so perfect, thank you everyone.

Website

We ask that you visit our website, which is coming soon. This is a one-stop shop where you can get all the information that is in our IOI or Inquiry of Ideas, as well as our frequently asked questions will be hosted on this website. There's also, as you can see here in the upper right-

hand side, there's a resources section. We'll have resources as well as information about health and racial equity, and this is also where you'll go to apply for the funding opportunity. And we definitely have all your emails, so we'll be sure to let you know as soon as it is available to use.

Webinars

We also have two other funding announcement webinars this week. We have one tomorrow that is outlining the Healthy Aging Fund. That is from 11 am to 12 pm and you can use this link to register. There's also the Community Health Improvement Planning or CHIP processes. That webinar will happen on Thursday at 12 pm and you can register using this link. Before we close out, we wanted to ask one final poll question.

Poll Question 8

That is gauging your interest in submitting a letter of ideas or inquiry of ideas, an IOI, to this funding opportunity. We'll leave that open for another 20 seconds or so. A lot of responses are already in. Okay, I think we're good. Alright so it looks like there's a lot of interest so that's fantastic. We look forward to working with you and answering any questions that you have.

Closing and Contact Information

Before we wrap up, we wanted to make sure you have contact information for us. We set up two general email accounts that you can submit your questions to. For this funding opportunity you would use the CHFUND@hria.org. And there's also some staff information there as well. So you've heard from Nineequa Blanding her email address is there as well. As well as our Program Officer for the Healthy Aging Fund, Jennifer Lee and then you have my contact information there as well.

Then of course our valued partners at the Department of Public Health. Ben Wood whose email address is there, as well as Liz Maffei from the DPH.

You can expect a further email from us letting you know when more resources are available. And we really just wanted to thank you today for participating and learning more about this funding opportunity. We look forward to working with you over the next few months. Thank you everybody, have a great day.