

# BIDMC Community-based Health Initiative Request for Proposals Information Session

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HARVARD MEDICAL SCHOOL  
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# RFP At-a-Glance

<b>Funding Available</b>	\$6.55 million over three years to address upstream social determinants of health by funding programs and initiatives that lead to more equitable and healthy communities
<b>Focus Neighborhoods</b>	Allston/Brighton, Bowdoin/Geneva, Chinatown, Fenway/Kenmore, Mission Hill, Roxbury
<b>Priority Areas</b>	Housing Affordability, Jobs and Financial Security, and Behavioral Health
<b>Funding Tracks</b>	<p><u>Track 1</u>: Cross-sector partnerships for systems change; maximum funding per grantee is \$1M (approx. 2 grantees)</p> <p><u>Track 2</u>: Focused investment; maximum funding per grantee is \$500K (approx. 8 grantees)</p> <p><u>Track 3</u>: Capacity building seed funding; maximum funding per grantee is \$100K (approx. 6 grantees)</p>
<b>Important Dates</b>	<p>Letter of Intent (LOI) Submission Deadline: August 28, 2020</p> <p>LOI applicants notified of invitation to submit full proposal: September 21, 2020</p>

# Community-based Health Initiative Background

# BIDMC New Inpatient Building

## Community-based Health Initiative (CHI)

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### Determination of Need (DoN)

- Required by the MA Department of Public Health (DPH) for major projects
- Funds are distributed to the community to address social determinants of health

### Community-based Health Initiative (CHI) Process

- Create a Community Advisory Committee to guide priority selection
- Community engagement throughout the process
- Form an Allocation Committee to guide fund awards (no conflicts of interest)
- Evaluate community engagement and impact
- Use an open and transparent process

Total available for granting over 6 years: **~\$18.4M**

Total available for first 3-year RFP cycle: **~\$6.55M**

# BIDMC Community Benefits Advisory Committee

- Formed in 2018 to inform and guide BIDMC's Community-based Health Initiative process
- Made up of local leaders and residents  
Members represent:
  - Local public health departments
  - Municipalities
  - Education
  - Housing
  - Social services
  - Regional planning and transportation agencies
  - Community health centers
  - The private sector
  - Community-based organizations



# Health Priority Selection Process

## Regional Collaboration

- The prioritization process was informed by the work of the Boston CHNA-CHIP Collaborative, of which BIDMC is a founding member
- The Boston Collaborative conducted 13 focus groups, 45 key informant interviews, and collected 2,404 surveys from Boston residents
- BIDMC's CBAC used findings from the Boston Collaborative CHNA to inform the selection of the CHI health priorities
- The selected priority areas intentionally align closely with the Boston CHNA-CHIP Collaborative's CHIP



# Health Priority Selection Process

## Identifying Needs and Assets

### Community Engagement

- To augment the robust community engagement done by the Boston Collaborative, BIDMC held public meetings in:
  - Allston/Brighton
  - Bowdoin/Geneva
  - Chinatown
  - Fenway/Kenmore
  - Roxbury/Mission Hill
- Residents had small group discussions led by an independent facilitator about community needs, assets, and priorities
- Oral and written public comments were accepted at CBAC meetings to allow community members to share their opinions on the direction of the CHI



**15**

oral and written public comments received



**4**

locally-owned restaurants catered meetings



**7**

languages were represented at community meetings

**180**

community members participated



**5**

community meetings held

Participant ages:

**under 18**  
to **over 75**  
years old



**146**

individuals signed up to receive updates on the Community-based Health Initiative

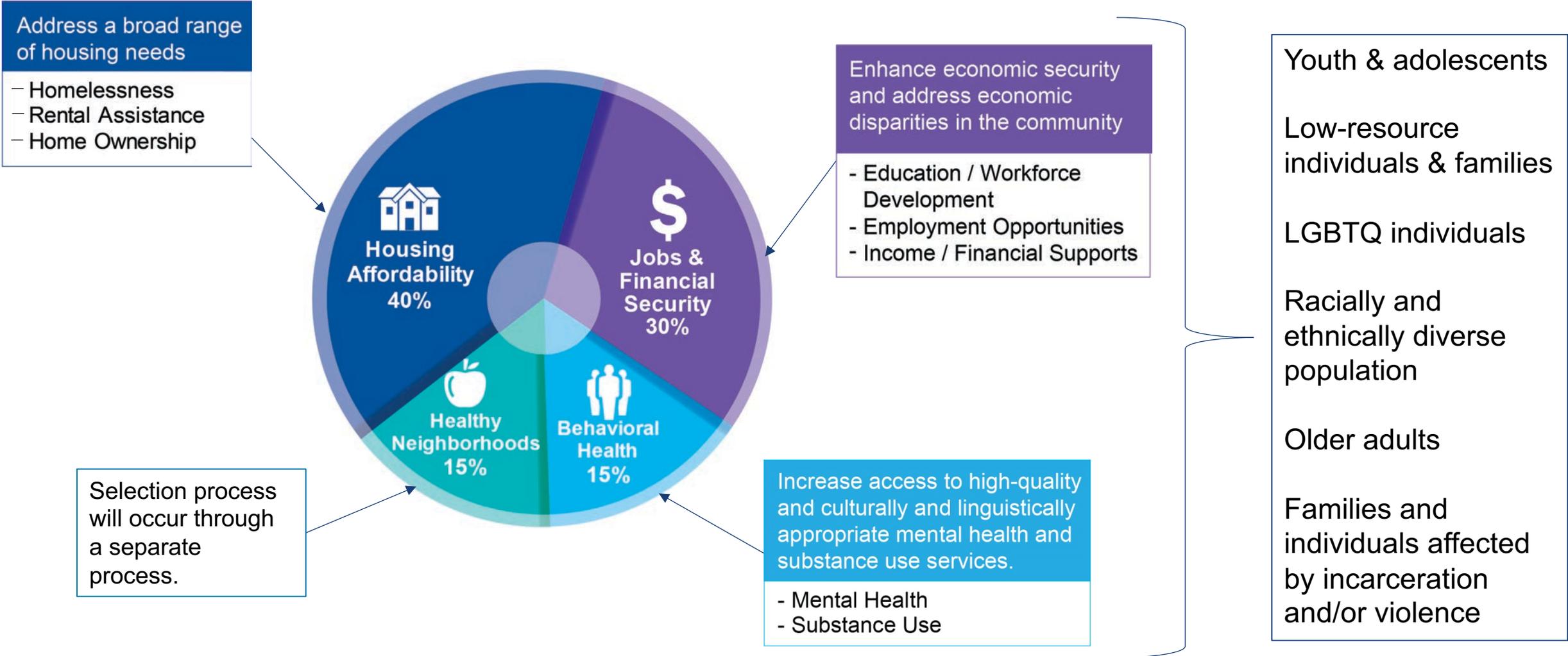


**18**

community stakeholder interviews



# Health Priorities and Focus Populations



# Request for Proposals (RFP) Details

# Core Principles and Key Concepts

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**HEALTH AND RACIAL EQUITY**: Use a health and racial equity lens to dismantle systems of oppression and work towards the systemic, fair and just treatment of people of all races, ethnicities, and communities so that all people are able to achieve their full health and overall potential.

**IMPACT**: Support evidence-based and evidence-informed strategies and programs that positively and meaningfully impact neighborhoods and populations in Boston that face the greatest health inequities.

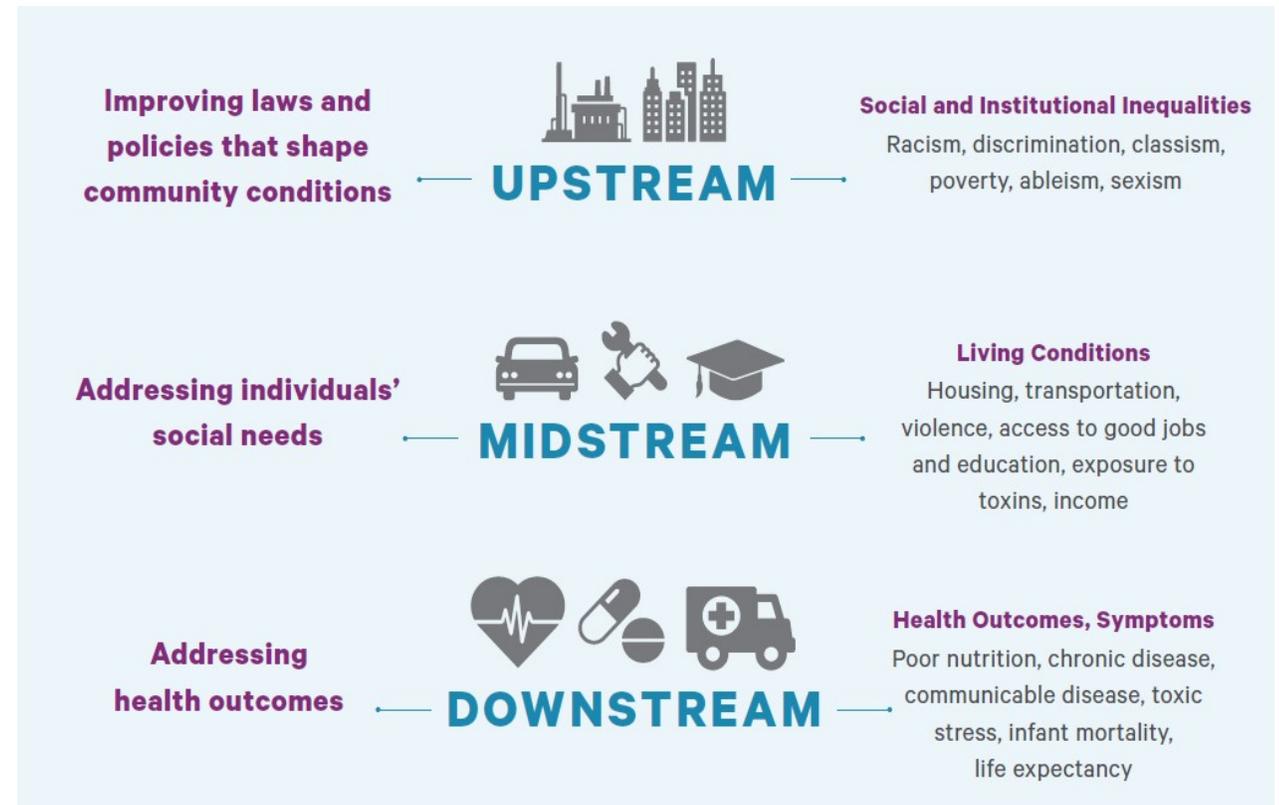
**COMMUNITY**: Build community cohesion and capacity by actively engaging with community residents and other stakeholders, including historically underserved or underrepresented populations.

**SUSTAINABILITY**: Encourage sustained program impact through strategies that may include: leveraging funding to continue program activities, strengthening organizational and community capacity, and forming innovative partnerships and/or cross-sector collaborations.

**MOVING UPSTREAM**: Address the fundamental causes, or upstream factors, of poor health and racial inequities.

# Moving Upstream

- Moving upstream means addressing disparities that impact the social determinants of health – conditions in which people are born, grow, live, work, and play
- BIDMC aims to fund programs that are more upstream and are sustainable after the funding period ends



Source: Massachusetts Budget and Policy Center

# RFP Eligibility

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- To apply: must be tax-exempt (organization with 501 (C) 3 status) or a public agency
- Organizations must currently serve residents in or across one or more of the following neighborhoods in Boston:
  - Allston/Brighton
  - Bowdoin/Geneva
  - Chinatown
  - Fenway/Kenmore
  - Mission Hill
  - Roxbury
- Lead organizations must have a strong history of working in one or more of the neighborhoods listed above.



# Funding Tracks

## Guidelines and Funding Information

	Track 1	Track 2	Track 3
Max. Funding Amount Per Grantee	\$1M (over 3 years)	\$500K (over 3 years)	\$100K (over 3 years)
Approx. # of Grants	2	8	6
Priority Areas	Select <u>two or more</u>	Select <u>one primary</u> (may indicate additional priority areas)	Select <u>only one</u>
Strategic Focus Areas	Select <u>up to three</u> for each priority area	Select <u>two or more</u> for the primary priority area	Select <u>only one</u>
Partnerships	Required	Encouraged but not required	Allowed but not required

# Strategic Focus Areas

Priority Area	Strategic Focus Area	Evidence-Based / Evidence-Informed Strategies
Housing Affordability	Homelessness	<ul style="list-style-type: none"> <li>• There are evidence-based and/or evidence-informed strategies for each strategic focus area</li> <li>• Applicants <b>must select</b> one or more of the listed strategies</li> <li>• Detailed descriptions provided in the full RFP</li> </ul>
	Home Ownership	
	Rental Assistance	
Jobs and Financial Security	Education/Workforce Development	
	Employment Opportunities	
	Income/Financial Supports	
Behavioral Health	Mental Health and Substance Use	

# Evaluation Process

## CO-DESIGN



- Evaluation (overarching and grantee-specific) will be co-designed with awardees

## BUILD CAPACITY



- Activities will be aimed at meeting awardees where they are to support:
- Data collection for evaluation
  - Future awardee evaluations

## ENHANCE DATA



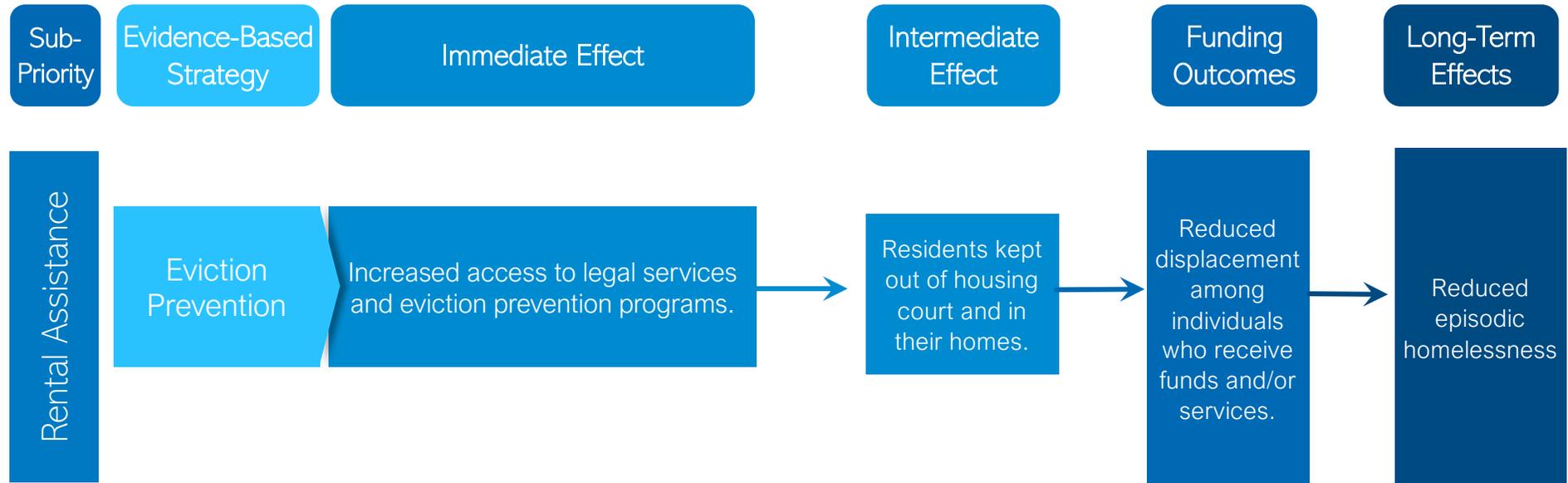
- Strengthen data collection about the populations served through the CHI
- Create opportunities for stronger data to inform future efforts

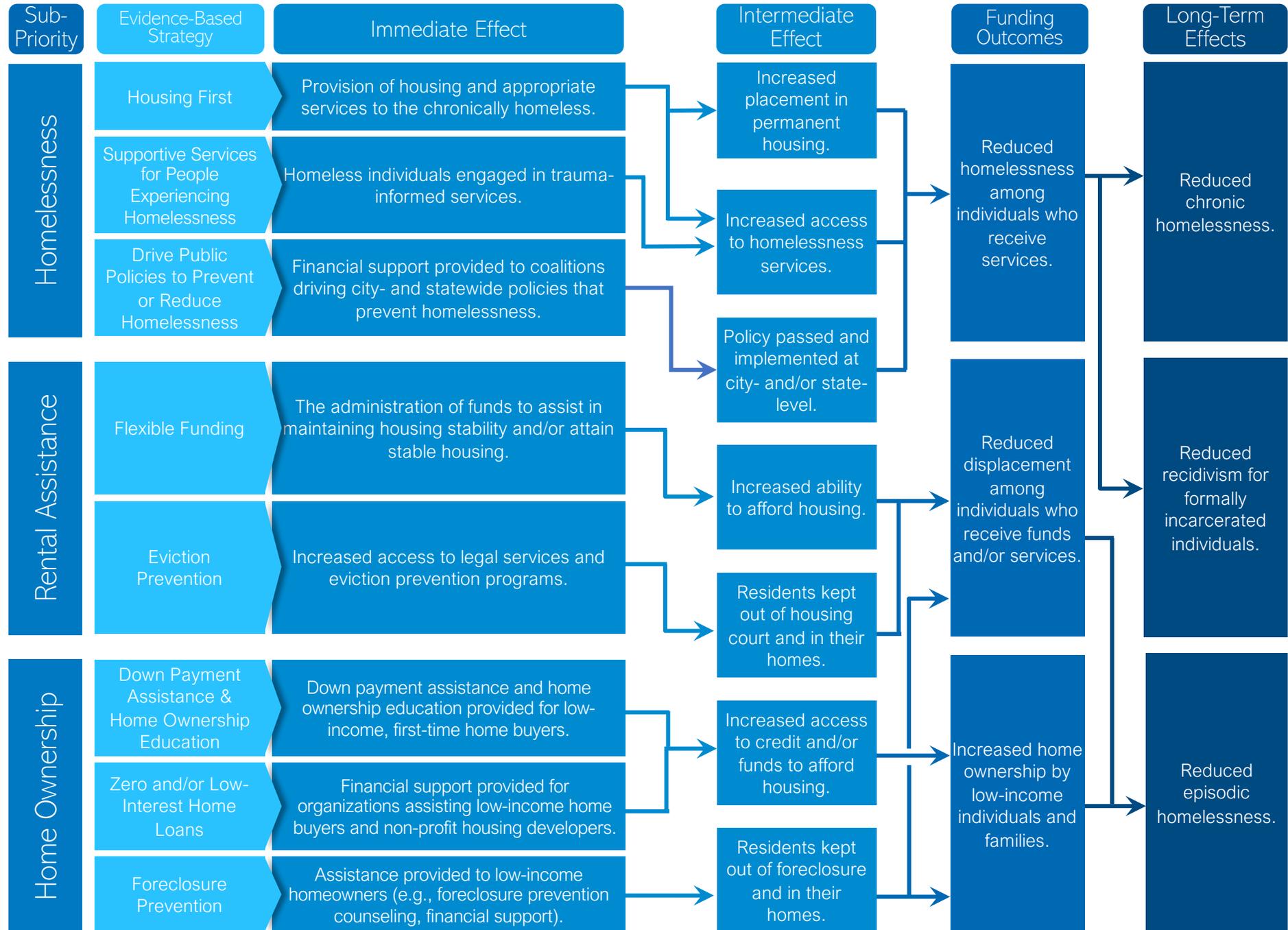
# Capacity Building and Evaluation

Purpose	Tracks 1 and 2	Track 3
Co-design individual and overarching evaluation plan	Participate in a <u>six-month planning process</u>	Participate in a <u>year-long</u> planning process
Assess evaluation capacity	Complete a monitoring and evaluation capacity assessment	Engage in conversation to assess monitoring and evaluation capacity
Check-in and build evaluation capacity	<ul style="list-style-type: none"> <li>• Participate in individual evaluation check-in meetings</li> <li>• Participate in bi-monthly one-hour learning collaborative conference calls or webinars</li> <li>• Attend bi-annual half-day learning collaborative</li> </ul>	<ul style="list-style-type: none"> <li>• Participate in individual evaluation check-in meetings</li> <li>• Optional: Participate in/attend learning collaboratives</li> </ul>

# Causal Pathway

## Housing Affordability





ASSUMPTION: The evidence-based strategies listed above are intended to be structured to direct funding to the CHI neighborhoods (Allston/Brighton, Bowdoin/Geneva, Chelsea, Chinatown, Fenway/Kenmore, Mission Hill and Roxbury) and target populations. Examples provided are not meant to be exhaustive representation of the target populations.

# Funding Guidelines and Budget

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Funds may be used for:	Funds may not be used to:
<ul style="list-style-type: none"><li>• Project staff salaries</li><li>• Data collection and analysis</li><li>• Meetings</li><li>• Supplies</li><li>• Related travel</li><li>• Other direct project-related expenses</li></ul>	<ul style="list-style-type: none"><li>• Provide medical services</li><li>• Support clinical trials</li><li>• Construct or renovate facilities or capital expenses, or as a substitute for funds currently being used to support similar activities.</li></ul>

Please note:

- Indirect expenses may not exceed 10% of the total budget
- BIDMC recommends that evaluation expenses total approximately 10% of an applicant's budget

# LOI Scoring Criteria

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- Organizational mission **aligns with core principles**
- History of working in **priority neighborhood(s)**
- Proposed project is **feasible**
- Proposed project meets a **demonstrated community need**
- Proposed project is **evidence-based or evidence-informed**
- **Goals are reasonable** and aligned with core principles
- Requested **funding is reasonable** for proposed activities
- Collaborators and/or partners listed would **increase the impact** of the project (if applicable)

# RFP Timeline and Q&A

# RFP Timeline

Date(s)	Action
August 28, 2020	Letter of Intent (LOI) submission deadline
September 21, 2020	LOI applicants notified of invitation to submit full proposal
September 30, 2020 (Tracks 1 & 2) October 1, 2020 (Track 3)	Evaluation information session for LOI applicants invited to submit full proposal to review RFP evaluation requirements and address questions.
October 19, 2020	Full proposal due (invitation only)
No later than December 4, 2020	Full proposal applicants notified of grant decisions
Early December 2020	Grantee convening
January 1, 2021	Three-year grant term begins
February 2021	Establish core set of shared evaluation measures for all grantees

# Frequently Asked Questions

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## 1. Can an organization apply in more than one track?

*As a Lead Organization:* Organizations can submit a maximum of two applications as a lead organization, though they must be for different funding tracks. Please note, an organization may only receive a maximum of one grant as a lead organization.

*As a Partner on Other Organizations' Application:* An organization can be listed as a partner in multiple applications across different tracks, though organizations should consider their capacity to complete their responsibilities as partners should multiple projects receive funding.

## 2. Can an organization choose alternative evidence based/evidence informed strategies for a strategic focus area?

No, an organization must select an evidence based/evidence informed strategy/ies identified in the RFP guidelines. These strategies have been approved by the Massachusetts Department of Public Health.

# Questions?

Please email any questions to the Community Benefits Team at [nibchi@bidmc.harvard.edu](mailto:nibchi@bidmc.harvard.edu) by August 17, 2020

Responses will be posted on [bidmc.org/chi](https://bidmc.org/chi) on August 19, 2020

# Thank you!