

Request for Applications

Promoting Place-Based Approaches to Building Healthy and Resilient Communities

Summary

Purpose: The Association of State and Territorial Health Officials (ASTHO), with support from the W.K. Kellogg Foundation, is assisting states to develop, implement, or refine efforts that focus on place-based, community-led approaches to improving child and family outcomes and promote health equity. The “Promoting Place-Based Approaches to Building Healthy and Resilient Communities” project will form a new ASTHO learning community based on the education and collaboration model of [Project ECHO](#). ASTHO invites state and territorial public health agencies to apply to be a part of this work and be part of a nine-month long project which will be referred to in this application as a [Place-based ECHO](#).

Request for Applications Released:

Applications Due: June 5 at 5PM

Selection Announcement: June 17, 2019

Project Period: August 2019 – April 2020

Number of Participants: Up to 5 state/territorial health agency (S/THA) teams (see below in project elements for team composition)

ASTHO Point of Contact: to [Melissa Lewis](#), Director, Health Equity and SDOH Director

Program Background

[Eighty percent](#) of our health is determined outside of the clinician’s office by our health behaviors and the socioeconomic and environmental factors in our communities.

Governmental public health and human service agencies have undertaken innovative work to develop community-led, place-based approaches to achieve population health improvements by implementing evidence-based strategies that are tailored to the needs, assets, and challenges of each community. Place-based approaches provide a deeper understanding of the complexity of health inequities within a certain geographic area or community. The goal is to concentrate investments in an under resourced geographic area (i.e. zip codes, neighborhoods, census tract, health professional shortage area, etc.) to foster improvements like community capacity building. These approaches take broad, cross-sector perspectives on creating needed

changes in local communities that impact health through policy, programming, and partnerships to advance and achieve health equity. In this project, states working in these areas will have a chance to share their experience, learn from each other, and contribute to developing tools based on their work that other states can use in developing similar approaches.

A few of the efforts across the country, such as the:

- [**Rhode Island Health Equity Zones \(RI\)**](#) - The Rhode Island Department of Health (RIDOH) supported the formation of 9 geographically-defined Health Equity Zone collaboratives. The HEZ are community-led, place-based initiatives that serve as a model for building healthy and resilient communities to advance health equity.
- [**The BUILD communities \(21 states and the District of Columbia\)**](#) - The BUILD Health Challenge distributes awards to multi-sector, community-driven partnerships that work to reduce health disparities by addressing system-based or social inequities. Thirty-seven communities participated from 2015-2019.
- [**Live Well San Diego \(CA\)**](#) – This movement is a regional approach in which local government, community partners and stakeholders take collective action to enable San Diego county residents to achieve the program’s vision *Building Better Health, Living Safely and Thriving*.

These [place-based](#) initiatives demonstrate that health can improve in communities when community residents, healthcare and public health leaders, social service organizations, and businesses all work together. These communities have implemented place-based approaches to address health disparities, drive services toward these areas, and invest in addressing the social determinants of health to increase health status.

Program Description

The goal of the project is for states to develop their leadership capacity and expert knowledge to implement place-based, community-led initiatives by highlighting the key design features of select case examples that focus on advancing health equity and building community capacity to achieve population health improvements. Participants will enhance their knowledge through didactic and case-based learning. ASTHO intends to use the ECHO as a forum to increase the awareness and readiness of states and localities by discussing the common barriers of implementing this type of strategy to address social, economic and environmental conditions in a community.

The objectives for S/THA teams include:

- Increasing the leadership capacity of state and territorial health agencies to support a community-led, place-based approach in their jurisdictions;
- Increasing the participating project team’s knowledge and skills of community engagement, cross-sector collaboration, and place-based strategies.

- Developing a state team implementation plan to identify how to address elements of the place-based initiative such as equity, workforce, partnerships, policies, funding, and sustainability.

Program Elements and Expectations

ASTHO will select five (5) state and territorial teams to participate in the project. The state teams will learn from subject matter experts (and each other) using the Project ECHO collaborative learning model.

ASTHO is seeking states/territories that meet the following criteria:

- **Currently overseeing a place-based initiative or has just started a place-based initiative.**
- Have interest in gaining or refining knowledge around working with and/or collaborating with local communities to leverage cross-sector community investments.
- Have actively partnered with other sectors.
- Have a [cross-sector](#) team that includes the following types of members: (ex. State/Territorial Health Official/ Senior Deputy, Health Equity or Minority Health Director, Maternal Child Health Director, healthcare/health system professionals, local health department staff, community-based organization lead/ consumer advocate, and representation from any sector that impacts health (transportation, education, housing, business, etc.). The core team will be the state health employees.

Program Commitments:

The core state team members are required to attend an in-person close-out meeting. In-person participation by other members of the collaborative is optional and based on funding; participate in monthly virtual modules from **August 2019 – April 2020**; present at least one case presentation; complete the 90-day challenge; Develop a team action plan and a written communication.

Project Incentives:

ASTHO will provide states/territories with financial support for purchase of camera equipment and to host a community activity.

Please complete the Request for Application, Registration and Statement of Collaboration forms below and submit to [Melissa Lewis](#), Director, Health Equity and Social Determinants of Health Director by close of business Wednesday, June 5, 2019.

Place-based ECHO: Promoting Place-based Approaches to Build Healthy and Resilient Communities

Application Form

Please complete the following form and return to Melissa Lewis (mlewis@astho.org).

State Health Agency Name:

Primary Contact/Applicant Name:

Title:

Phone:

Email:

Please complete the following box with information for each state health agency team member who will participate in the ASTHO Place-based ECHO.

State team members may include:

- ✓ State Health Official/ Senior Deputy
- ✓ Health Equity/ Minority Health Director
- ✓ Chronic Disease or Maternal Child Health Director
- ✓ Business sector
- ✓ Community advocate/ CBO representative
- ✓ Local coalition representative
- ✓ Local health agency representative

<i>Participant Name</i>	<i>Title</i>	<i>Email</i>	<i>Phone Number</i>
1.			
2.			
3.			
4.			
5.			

Statement of Collaboration

Description of ASTHO Place-based ECHO

Public health is moving toward high impact, place-based approaches focused on building healthier, more resilient communities so that everyone—in every community—has the opportunity to be as healthy as possible. ASTHO developed this Place-Based ECHO to align with the two goals of the ASTHO President's Challenge: Building Healthy and Resilient Communities by: 1) Equipping public health officials to mobilize community-led, place-based, cross-sector initiatives that have demonstrated readiness for investment and an ability to measure outcomes; 2) Connecting public health officials to business leaders and policymakers inclined to invest in these initiatives.

The goal of this nine-month ECHO project is to examine key elements of successful place-based initiatives and highlight evidence-based resources and promising practices through a shared learning model. ECHO sessions will include guided practice through real life place-based models with subject matter experts to facilitate learning loops and enhance knowledge, skills, and self-efficacy in the areas addressed in each of the sessions.

Commitment to Collaboration – ASTHO Place-based ECHO

In the spirit of collaboration, the ASTHO Place-based ECHO is committed to working with partners, and offers to do the following:

1. Provide technological and program support to partners, as requested.
2. Review cases presented by participants and provide timely, written recommendations.
3. Offer curricula and regular didactic presentations relevant to the specific ECHO.

Commitment to Collaboration – ASTHO Place-based ECHO Partner

In the spirit of collaboration, our state health agency is committed to working with the ASTHO Place-based ECHO and other partners. In this regard, our state health agency offers to:

1. Participate in at least seven (7) ASTHO Place-based ECHO sessions and present at least one case per state team, providing comments, and asking questions.
2. Fill out routine surveys to help us improve our services to you and other partners.
3. Adhere to the written logistics and participation etiquette provided for ASTHO Place-based ECHO sessions.
4. Allow ASTHO to feature tools, slides, or supporting materials developed during this project on ASTHO's website and to share with other states/territories.

State Health Department Representative:

Signature:

Date:

State Health Official:

Signature:

Date:

Applicant Information: (maximum 500 words per field)

1. Please provide a few statements on why your state/territory would like to participate in this project.
2. What current experience do you have leading or sponsoring community-driven place-based initiatives in your state/territory?
3. Describe the place-based initiative that you plan to use as your case example through the duration of this project (ex. new/existing program, geographic region, specific disparities being addressed, level of community engagement.)
4. Describe your team's goals, objectives and intentions to participate in this project that should be considered in review of your application.
5. What are some of the major actual or anticipated challenges you face in improving or advancing place-based/community led initiatives in your state/territory?
6. What new skills do you or your team need to be more effective in developing and/or implementing place-based, community-led initiatives for your state/territory?

Please note: You can attach up to 2 supporting documents that you view as essential to the review of your application (Ex. CHNA, CHIP)

APPENDIX: Frequently Asked Questions

What is Project ECHO?

Project ECHO is a guided-practice model that aims to increase workforce capacity by sharing knowledge and expertise.

What is the timeframe of the project?

The project will take place from August 2019 – April 2020.

What is the format and structure of the sessions?

ASTHO will host monthly, 75-minute sessions twice a month. At the start of each month, the session will focus on one of the eight module topics relevant to place-based approaches and will include a 25-minute didactic lecture along with a case presentation from a participating health agency. This presentation will share experiences and gain recommendations from other participants and subject matter experts. The second session will take place at the end of the month. This session will be unstructured and will allow the subject matter experts to provide technical assistance to the S/T teams and to bring in guest speakers. These monthly sessions are optional opportunities for the teams to take a deeper dive and ask more questions.

What is the required team structure?

Multi-sector teams should be comprised of 5-8 members representing various governmental, health care and human services focused entities, the business sector and community-based organizations that contribute to building healthy and resilient communities. These teams must have representation from governmental state/territory and local public health officials and/or staff, minority health/health equity leaders, and community members from local community health coalitions or health promoting non-governmental organizations. Having community and/or local representation will be essential for states and territories to develop local solutions to family and community health challenges.

What type of technology is required to participate?

Videoconferencing will be the modality of connecting regularly, with a free software that will be provided, sites will need internet and a video/audio input/output capability for each of the sessions. If they need a webcam it can be provided, etc. No, special types of technology are required to participate.

What are the roles and expectations of state teams?

Applicant State/Territory teams will:

- Have approval of the State or Territorial Health Official to participate in the [ECHO](#).
- Recruit a diverse interdisciplinary team to join the project.

- Identify in the application a specific area of inequity to make measurable progress that has been identified as a priority area by previous community assessments (ex. SHA or SHIP); build on existing community assets and networks.
- Use data-sets that are geographically referenced to identify specific geographies targeted for health equity interventions. Have representation during every session.
- Actively participate in the eight learning events over the nine months and present at least one case.
- Always participate using video during virtual meetings.
- Apply an equity lens to their cases/questions.
- Develop an implementation plan during the project time period.
- Use seed money to convene and/or engage with a local community collaborative by the project mid-point.
- Share what they have learned with their colleagues and community.

How will ASTHO support the state teams?

ASTHO will:

- Serve as the hub for the ASTHO ECHO on place-based models to advance health equity.
- Identify tools and resources that support states engaging in place-based initiatives (i.e. collective impact, staff development, etc.).
- Convene national partners to inform the work and review its outcomes.
- Customize, ongoing TA based on individual state or territory requests.
- Provide, in addition to the monthly all team session additional model state/faculty office hours with individual state/territory teams, as requested.