UChicago Medicine

Urban Health Initiative

Grant Funding

For

UChicago Medicine Liaisons in Care (LinC) Program

Request for Proposals (RFP)

Due Date for Letter of Intent (LOI): Tuesday, May 17, 2022, 5pm CST
Due Date for Applications: Wednesday, June 1, 2022, 5pm CST

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Notes for All Applicants:
The following grant guidelines will help you prepare your proposal and assemble the required documentation. Proposals for the Liaisons in Care (LinC) Program grant must be submitted by application due date.

Prior to submission, please review all information outlined in the table of contents including background, eligibility criteria, types of projects funded, instructions for completing the grant, the review process, and the submission and timeline.

Link to RFP and templates: https://www.uchicagomedicine.org/about-us/community/grants-sponsorships
Link to submit application: https://redcap.link/LinCGrant2022

Part I. Overview Information

Funding Organization: UChicago Medicine
Request for Proposal: UChicago Medicine LinC Program
Announcement Type: New
Date for Informational Webinar: Monday, May 16, 2022, 3pm CST
Due Date for Letter of Intent (LOI): Tuesday, May 17, 2022, 5pm CST
Due Date for Applications: Wednesday, June 1, 2022, 5pm CST

Executive Summary

UChicago Medicine (UCM) has a mission to provide superior health care in a compassionate manner. We believe that all community members should have the opportunity to attain their full health potential and that no one is disadvantaged from achieving this potential because of social position or structural circumstances. To that end, UChicago Medicine (UCM) will provide grants to community and faith-based organizations via a request for proposal (RFP) process. The goal of this funding, in alignment with the UCM Strategic Implementation Plan, is to improve health outcomes and reduce inequities. The grant aims to fund community and faith-based organizations to hire community health workers (CHW) to increase linkages to health and social service resources, conduct health education and provide healthcare navigation assistance to community members residing on the south side of Chicago.

Funding for one year (with potential to extend funding) will be awarded to up to three community and/or faith-based organizations.

Funding for the project will be awarded to organizations that implement programs or services to increase access to health care, address social determinants of health (SDOH) and provide access to social service resources within the UCM Service Area. The UCM Service Area (UCMSA) is comprised of the following 12 zip codes: 60609, 60653, 60636, 60621, 60615, 60637, 60620, 60619, 60649, 60643, 60628, 60617.

Grant awardees will be required to maintain continuous alignment to UCM's LinC Program by engaging their organization-based CHW in UCM's ongoing CHW training and education through participation in the LinC Learning Collaborative.

Applicants must align program service objectives with the following intended outcomes:
1. Increase access to social service resources.
2. Increase access to primary and specialty care services.
3. Increase target population knowledge.
4. Increase access to services addressing social determinants of health (SDOH) including but not limited to food access, employment, transportation, etc.
5. Improve self-management of chronic conditions.

A. **Range of Number of Awards:** up to 3 awards

B. **Average Award Amount:** $50,000

C. **Estimated Award Date:** July 2022

D. **Total Project Period Length:** 1 year with potential to extend funding

E. **Cost Sharing or Matching Requirement:** No
Cost sharing or matching funds are not required for applicants. Leveraging other resources and related ongoing efforts to promote sustainability is strongly encouraged.

Part II. Background

UChicago Medicine's (UCM) service area is significantly impacted by inequities caused by social determinants of health (SDOH). Many community members have trouble accessing medical services. All 12 UCM service area zip codes are classified by the Health Resources and Services Administration (HRSA) as health professional shortage areas for primary care and mental health. It is common for community residents to have inadequate access to healthy foods. The Greater Chicago Food Depository estimates that half (49.5%) of residents in the UCM service area experience food insecurity. Moreover, unemployment and underemployment can create financial instability, which can influence access to healthcare services. Unemployment rates for adults over age 16 in UCM service area (20.9%) is double the unemployment rate in the city of Chicago (10.9%). The current unemployment rate on the South Side more than quadruples the national rate. Thirty-one percent of community members receive Supplemental Nutrition Assistance Program (SNAP) aid. Residents suffer significantly higher rates of chronic health conditions, including asthma, diabetes, obesity, breast cancer, sexually transmitted infections, and HIV.

Amidst these poor chronic health outcomes, stark economic challenges, and high incidence of violence, data suggest that residents living in UCM's service area are not seeking or accessing behavioral health services at levels commensurate with national averages. Disproportionate rates of chronic health conditions, poor access to healthcare, low socioeconomic status, and hyper-segregation are the backdrop for what some have called an "epidemic of violence" on the South Side–and specifically among the communities that the UCM considers its service area. COVID-19 has further exacerbated the needs of community members. The pandemic itself, loss of jobs, loss of necessary resources for daily living, and the impact that it has had on the mental health of our community, has left individuals in a dire situation UCM's Urban Health Initiative is committed to addressing these social determinants of health. Inspired by its strategy to increase health equity, the UHI asserts that all community members should have the opportunity to attain their full health potential, regardless of social position or other socially determined circumstances.

UChicago Medicine's Liaisons in Care (LinC) program addresses health inequities by hiring and utilizing Community Health Workers (CHW) both in healthcare and community settings. CHWs are frontline public health workers who are trusted in the community and are an essential part of the multidisciplinary care team. This trusting relationship enables CHWs to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality of life for community members. CHWs can provide human navigation and become the glue to help communities access systems of care. Developing community and faith-based CHW collaborations can reduce health inequities, improve quality of life and empower community members.

Part III. Eligibility Criteria

Who Should Apply? Community and/or faith-based organizations serving community members on the South Side of Chicago are eligible to apply.

To be eligible for a grant from the UCM Urban Health Initiative, organizations must meet the following criteria:

A. Applicant must be a 501(c)(3) nonprofit
B. Community and/or faith-based organization
C. Applicant must deliver services within UCM's service area.

D. Applicant must develop or implement a CHW program, service, or project.
E. Applicants must agree to maintain continuous alignment to UCM's LinC program by engaging their organization-based CHW in UCM's ongoing CHW training and education through participation in the LinC Learning Collaborative.
F. Applicants must provide services to all regardless of race, religion, sex, gender identity, age, disability, national origin or sexual orientation. UCM is committed to building an inclusive, diverse and culturally competent community.
G. All proposals must include a work plan outlining activities, deadlines, person(s) responsible and status. Template has minimum information required. Applicants can add other information as desired. (**Applicants must use template provided by UCM. Attach to application under Appendix A**.)
H. All proposals should include an evaluation framework for the monitoring of program outcomes. Proposals must include SMART objectives (Specific, Measurable, Attainable, Realistic, and Time-Bound) that align with UCM defined metrics. (**Applicants must use template provided by UCM. Attach to application under Appendix B**.)
I. All proposals should use the provided worksheet templates to track progress of granted dollars, goals, target metrics, etc. noted to date, as aligned with the UCM strategic framework and evaluation measures outlined.

Part IV. Exclusions

Grants requesting the following types of support are excluded and will not be considered:

- Applications from partisan political organizations.
- Applications from for-profit organizations.
- Applications from hospitals.
- Applications requesting support for fund raising activities such as sponsorships, advertising or event tickets.
- Applications from individuals.
- Applications for memorials or endowments.

Part V. Instructions for Completing the Grant Application

Letter of Intent

Please provide a Letter of Intent to express your interest in applying for this grant. The letter should include the name of your organization, the contact person (title and phone) and a short description of your proposed program if you have identified them.

Please email the Letter of Intent to communitybenefit@uchospitals.edu by **Tuesday, May 17, 2022, 5pm CST**.

Application

For the grant application, please respond to the following in a separate document. Do not exceed page limits. Use 1" margins and 11 or 12-point font.

Section I: Applicant Information
1. Name of Organization:
2. Tax ID:
3. Tax Status:
4. Mailing Address, City, State, Zip:
5. Organization Website:
6. Contact Person and Title:

7. Contact Phone:
8. Contact Email:
9. Program Title:
10. Start Date of Program:
11. End Date of Program:
12. Brief Description of Proposed CHW Program (75-100 words):

Section II: Project Description
(4 page maximum)
1. Describe your organization's mission, organizational structure, major accomplishments, and stakeholder engagement. This will provide context for implementation of proposed program.

2. Provide a thorough description of the program and its intended outcomes (outcomes must include, but are not limited to, those listed in the executive summary section on p.3). Description should include the following components:
   - **Needs** – What specific aspect(s) of Social Determinants of Health will your program be addressing? Will your program contribute to increasing community linkages to health and social service resources, conducting health education and providing healthcare navigation assistance to community members?
   - **Goals** – What is/are the goal(s) of your program, based on the identified needs?
   - **Target Audience** – Which audience(s) will your program target to ensure progress? Provide detail with regard to zip codes and/or neighborhoods in the UCM Service Area, and with regard to populations served by the program.
   - **Objectives** – What are the program objectives?
   - **Activities** – What strategies and activities will be used to achieve program goals, objectives and outcomes?
   - **Resources/Inputs** – What additional inputs (e.g., supplies, staffing, materials, etc.) are needed from the larger environment for successful implementation of activities?
   - **Outcomes –** What outcomes does the applicant expect to achieve?
3. What is the current stage of your proposed program's development and/or implementation?
4. What factors and trends in the larger environment may influence the proposed programs success or failure?
5. **Attach work plan in Appendix A. (Applicants must use template provided by UCM.)**

Section III: Organizational Experience
(2 page maximum)
1. What are your experiences addressing health inequities, social determinants of health, providing social service referrals and assisting individuals with access to primary and specialty care appointments?
2. What is your experience and approach to components like program design and community outreach and engagement?
3. Please list any other key organizations you will be partnering with and their level of commitment to working with you on this initiative. (Please attach any letters of commitment from potential partners.)
4. Please add any additional information that you would like to share that was not already addressed.

Section IV: Budget
(*1 page maximum including Appendix C; 1 page maximum does NOT include the copy of the organization's annual budget*)

1. Applicants must include a budget narrative describing how funds will be utilized.
2. What amount of funding dollars are you requesting?
3. Please attach a complete description of the proposed project overall budget, anticipated funding and justification for each line item. **(Applicants must use template provided by UCM. Appendix C: Budget)**
4. Please provide a copy of your organization's annual budget **(Attach as Appendix F)**. Please also list major sources of revenue for your organization.

Section V: Evaluation
(*1 page maximum, not including separate Appendix B Evaluation Plan*)
To apply, you must provide a plan that shows how you will meet the requirements that are in the program description. This must include your methods, tools and the sources of information that will be used to track how you are meeting the requirements over time.

1. **Experience using research and community engagement for program development.** How have you used your own research and the advice of community members (the public) to develop plans and activities that have had a clear impact on the community? What methods have you used to show what impact your work and activities have had on the community?
2. **Experience with using evaluation and performance measurement for program growth and improvement.** How have you used evaluations and assessments to show your impact and progress? How have you used that process to support ongoing learning and program improvement?
3. **Program objective and evaluation plan as SMART goals.** Briefly tell us how your organization will measure how well your program is working and the impact of your work. Include the steps you will do to evaluate how effective it is (for example: case study reviews, interview protocols, progress reports). Make sure your goals and what you will do to achieve them are Specific, Measurable, Attainable, Realistic, and Time-Bound (SMART). **(Appendix B: Attach Evaluation Plan)**

If you currently have process or outcomes data to show your past performance and success, please include this in your brief summary*.*

Section VI: Staffing Plan
(2 page maximum)

1. What are your experiences working with CHWs or with individuals of a similar role (including patient advocates, patient navigators, community health advisors, violence recovery specialists, patient health coordinators, promotora, case managers, health coach, health educator, etc.)?
2. Describe the roles, responsibilities and qualifications of staff that are responsible for program monitoring, implementation and evaluation.

Part VI. Proposal Review Process
Proposals submitted by **June 1, 2022, 5pm CST** will be reviewed by the UCM Grant Review Workgroup, which will include leadership from UChicago Medicine, as well as community representation from the UCM's Community Advisory Council.

The UCM Grant Review Workgroup adheres to a strict conflict of interest policy and selects potential grantees based on the merits of each proposal.

Successful proposals must be submitted by the deadline and will be reviewed first to ensure eligibility criteria (page 5) and page limits are met. Proposals meeting the requirement will then be evaluated and scored on the following:

I.   **Project description (35 points total) 4 Page maximum**
   a. Describes in detail the project using goals and objectives that are SMART. Provides a clear overview of the organizational structure. The proposed program or service outlined in the work plan is detailed, strong, cohesive, and linked to intended outcomes. Clearly describes how CHWs will be utilized to address health inequities, increase knowledge, access social service resources, increase access to primary and specialty care appointments and address SDOH. Clearly explains potential impact of program and how it plans to address the issues mentioned above. Identifies appropriate proven or promising practice, framework, approach on which their model is based. (20 points)
   b. Clearly describes the organization's current stage of project development and/or implementation. (5 points)
   c. Recognition of external factors or trends that may impact program (5 points)
   d. Provides a clear, concise statement of the community problem(s) and how CHWs are integral to the project. (5 points)

II. **Organizational experience (25 points total) 2 Page maximum**
   a. Provides clear and concise details on experience working with under-resourced populations. The applicant may include examples or provide details on other programs their organization offers. (10 points)
   b. Describes in detail experience implementing programs geared towards addressing health equities and SDOH. The applicant may include examples or provide details on other programs their organization offers. (10 points)
   c. Provides details explaining the organization's experience and approach to partnering with the South Side community. (5 points)

III. **Budget (10 points total) 1 Page maximum**
   a. Describe in detail the proposed budget showing each line item and its cost. The budget must be cost-effective and aligned with the proposed work plan. (4 points)
   b. Provide a clear justification for each item listed in the budget. Budget supports stated objectives and activities of the project. Describe the organization's ability to sustain program activities over time. (6 points)

IV. **Evaluation Plan (20 points total) 2 Page maximum**
   a. Describes how evaluation will be embedded in the project plan. Clearly describes evaluation methods, tools, and proposed outcomes. Demonstrates experience using available data and community input to develop program objectives and activities that have had a clear impact on the community. Demonstrates methods used to show what impact work and activities have had on the community. Demonstrates experience using evaluation and performance measurement for

program growth and improvement. (10 points)

    b. Provides a clear and concise evaluation plan (Appendix B). Includes activities, indicators, targets and timeframes completed for each section. Plan shows how they will meet the requirements that are in the program description. Program objectives are clearly described and thoroughly documented (SMART Objective format). Demonstrates they will measure how well the program is working and its impact. Proposal identifies and includes methods to assess participant outcomes, evaluate program impact and progress towards meeting its objectives. Activities are well defined and linked to program objectives. Target service numbers and timeframes are realistic. (10 points)

V.   Staffing Plan (20 points total) 2 Page maximum

    a. Provides clear and concise description of the staffing plan that includes roles, responsibilities and qualifications of all staff contributing to the project. (10 points)

    b. Describes in detail the organizations experience working with CHWs and/or individuals of similar roles. The applicant may use examples and describe readiness and ability to implement program activities. (10 points)

Part VII: Letter(s) of Commitment from any Collaborating Organization

Applicants are not required to collaborate with community organizations however, if the applicant plans to partner with other organizations as a part of the UCM LinC program plan please attach Letters of Commitment.

Part VIII. Submission Process and Timeline

To apply, please read and review this RFP and submit the grant application and documentation (i.e., Appendices A-F) using this link: https://redcap.link/LinCGrant2022

Direct all question to the UCM Community Benefit program at communitybenefit@uchospitals.edu.

Grant recipient(s) selected for funding must abide by the following branding guidelines of the University of Chicago Medicine should your program use printed or online materials:

a. Please refer to UCM as the UChicago Medicine in all materials related to your program or initiative.
b. Display approved UCM logo on printed materials, internet sites which advertise event or program.
   • UCM will provide your organization with the appropriate logos.
   • All promotional materials using the UCM logos must be approved by UCM Marketing and Communications beforedistribution.

Reporting and Participation Activities

Applicants that are selected for funding will be required to adhere to a reporting process that will be communicated at the time funds are awarded which will include site visits, progress towards goals, successes/challenges, financial statement of funds granted, and data collected. Reporting requirements will include submission of no less than quarterly CHW program reporting and mid-point and end of grant reports on the progress and outcomes of their funded programs. Grantees may also be required to provide an oral presentation summarizing their program and outcomes.

Applicants that are selected for funding will meet with UCM communications staff to discuss the best ways to share the organization's story and the impact its project, program, or service has on improving community health. At no cost to the organization, UCM staff may create materials in the form of a written story, video package, and/or other digital storytelling that the organization can use to promote its work and secure additional funding. The materials may also be disseminated by UCM. The organization and UCM will review and approve all material before publishing.

Once applicants are selected, virtual site visits will be scheduled with select grantees (required).

Timeline
• Informational Webinar: Monday, May 16, 2022, 3pm CST
• Due Date for Letter of Intent (LOI): Tuesday, May 17, 2022, 5pm CST
• Grant submissions close: Wednesday, June 1, 2022, 5pm CST
• Announcement of final grantees: July 2022
• Funds awarded: July 2022
• Virtual site visits for selected candidates (required): Fall 2022

Part IX. Appendices

- **Appendix A** – Attach Work Plan (**Use work plan template provided by UCM**)

- **Appendix B** – Attach Evaluation Plan (**Use evaluation template provided by UCM**)

- **Appendix C** – Attach Budget (**Use budget template provided by UCM**)

- **Appendix D** – Attach Staffing Plan

- **Appendix E** – Attach Letters of Commitment (if applicable)

- **Appendix F** – Attach Organization's Annual Budget

Glossary

Activities–Activities refer to what are typically thought of as **process objectives**. These are the interventions delivered through program implementation in order to achieve the outcome objectives. What activities will your program and its staff deliver and how will these be delivered to move towards increasing community linkages to health and social service resources, conducting health education and providing healthcare navigation assistance to community appmembers residing on the south side of Chicago?

Food Insecurity– Food insecurity occurs when a household has limited or uncertain access to adequate food. Access to healthy foods is an important factor needed to support a healthy lifestyle.

Goal(s) – Broad statements about the impact to be achieved with your target audience, but generally apply to longer time periods such as five years. Goals do not typically include specific, measurable terms.

Indicators – Specific information that will be collected and used to measure your program's activities and objectives; performance benchmarks used to determine programmatic success.

Intended Outcomes–Broader statements describing the intended effects of the program in the program's target audience. Specific to UCM and this RFP, these are defined, high-level goals that align with the UCM Strategic Implementation Plan and guide programs to address a specific health priority issue.

Objectives – Objectives refer to **outcome objectives**. These are specific statements about outcomes to be achieved that are stated in measurable terms (i.e. SMART Objectives). The expected results to be achieved by the program.

Social Determinants of Health– Social, economic, and physical conditions in which people are born, live and work that affect their health and well-being.

Target audience – Those for whom a program and/or service is intended.