



# THE RAPIDES FOUNDATION

## Healthcare Access Initiative Healthcare Quality Improvement Grant Request for Proposals

**Online Proposal Submission Deadline:  
Tuesday, August 13, 2019; 5:00 p.m. CT**

### I. Introduction

The mission of The Rapides Foundation is to improve the health status of Central Louisiana. The Rapides Foundation focuses its work in three strategic areas:

- Healthy People, to improve access to healthcare and to promote healthy behaviors;
- Education, to increase the level of educational attainment and achievement as the primary path to improved economic, social, and health status; and
- Healthy Communities, to improve economic opportunity and family income, and enhance civic and community opportunities for more effective leaders and organizations.

The Healthcare Quality Improvement Grant supports efforts to improve access to quality healthcare and promote healthy behaviors by providing funds to eligible Federally Qualified Health Centers in our service area to build upon their efforts to improve the quality and value of care. The goal is for participating health centers to improve health outcomes for patients with chronic diseases and to support consistent preventive care within the nine parishes we serve (Allen, Avoyelles, Catahoula, Grant, LaSalle, Natchitoches, Rapides, Vernon, and Winn).

### II. Background

Access to quality patient-centered healthcare is important to reduce health disparities and improve health status. Factors limiting care include financial barriers, personal and cultural barriers, not knowing what to do or where to go, physical or geographic barriers, and shortages in healthcare professionals and facilities.

In 2016, The Rapides Foundation released a Request for Proposals to fund efforts to reverse the cycle of poor health outcomes and lack of healthcare access. The funding opportunity expanded access to healthcare services by supporting eleven access points through Federally Qualified Health Centers (FQHCs).

The Institute of Medicine defines healthcare quality as “the degree to which healthcare services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.”

FQHCs in the Foundation’s service area have made great strides in quality improvement efforts. In 2018, most clinics received recognition as Clinical Quality Improvers through the Health Resources & Services Administration’s (HRSA) Quality Improvement Awards meaning there was at least a 10% improvement in one or more clinical quality measure (CQM). As well, there are Health Center Quality Leaders operating in the nine parishes. Organizations recognized as Health Center Quality Leaders achieved the best overall clinical performance among all health centers and place in the top 30% of the adjusted quartile rankings for

CQMs.

HRSA's Health Center Program quality of care measures include perinatal health, preventive health screening and services, and chronic disease management. Although all clinics made improvements in their quality of care measures, every organization operating in the Foundation's service area is in the bottom quartile on at least one clinical quality measure in preventive health screening and services or chronic disease management.

Chronic diseases such as diabetes, asthma, COPD, congestive heart failure, and hypertension continue to be a serious health problem throughout the state, including The Rapides Foundation's service area, and are disproportionately present in communities served by FQHCs.

Together cardiovascular disease (heart disease and stroke) and cancers account for over half of all deaths in The Rapides Foundation's service area. Central Louisiana's rates for heart disease mortality have been stable for many years while Louisiana and the US have seen significant improvements in heart disease mortality. Stroke mortality rates in the Foundation's service area have increased in recent years, in contrast to the improving or stable rates statewide and nationally. Continued advances in cancer research, detection and treatment have resulted in a decline in both incidence and mortality rates for all cancers. Yet, cancer remains a leading cause of death in the US and Central Louisiana. The cancer mortality rate in the Foundation's service area is similar to Louisiana and the US but there are disparities between populations and geographic areas.

The risk of developing and dying from cardiovascular diseases and cancers can be improved by reducing or controlling risk factors. The Foundation's most recent Community Health Assessment shows 91% of adults in the service area report one or more cardiovascular risk factor, such as being overweight/obese (75%), smoking cigarettes (24%), having high blood pressure (47%) or high cholesterol (24%). Most of these risk factors also contribute to cancers.

Chronic diseases are among the most prevalent, costly, and preventable health problems. The management of chronic disease is a challenge for healthcare providers at the comprehensive, preventive, and primary care level.

### **III. Purpose for Request for Proposals (RFP)**

This Healthcare Quality Improvement Grant funding opportunity is to assist qualifying FQHCs in efforts to improve the following quality of care measures or health outcomes and disparities as measured and reported annually in the Uniform Data System (UDS). Choose one clinical quality measure from the list below.

- Quality of Care
  - Cervical Cancer Screening
  - Colorectal Cancer Screening
  - Ischemic Vascular Disease (IVD): Use of Aspirin or Another Anti-thrombotic
- Health Outcomes and Disparities
  - Diabetes Hemoglobin A1c Poor Control
  - Controlling High Blood Pressure

Organizations must identify a Project Implementation Team responsible for carrying out the activities of the grant and will be required to submit baseline, interim and final quality measures based on disaggregated UDS data for the clinics within the Foundation's service area.

## IV. Eligibility Requirements

The primary applicant (grant fiscal agent) must meet the following requirement:

- Grant-supported Federally Qualified Health Centers – public and private nonprofit healthcare organizations meeting criteria under the Medicare and Medicaid Programs (respectively, Sections 1861(aa)(4) and 1905(l)(2)(B) of the Social Security Act, and receive funds under Section 330, Health Center Program of the Public Health Service Act).

## V. Funding Guidelines and Grant Terms

Up to \$75,000 per year for up to a two-year period is available for quality improvement activities to address clinical quality measures in chronic disease management or preventive services and screenings. The Foundation will consider only one application per organization for clinics operating in our nine-parish service area.

Funding may be used for technology, training, technical assistance, chronic care coordination, and staffing as related to the chosen care measure. It may be used for, but is not limited to:

- Developing and improving health center EHR systems and infrastructure around the chosen measure of care – for example, developing an EHR registry to track the population of the chosen measure of care.
- Developing and improving chronic care coordination delivery systems (including case management and medication management).
- Developing and improving health information technology to enhance data analysis.
- Policy, process and procedure development around the chosen measure of care in order to support team-based care.

*Please note: only a percentage of technology and software costs will be permissible if the majority of the organization's sites are outside of the Foundation's service area.*

Grant funds may not be used for:

- Lobbying or political programs or events.
- Activities, projects, or programs exclusively benefitting members of sectarian or religious organizations.
- Biomedical, clinical or educational research.
- Direct support to individuals or endowments.
- Funding supplanting existing sources of support.
- Individuals, including patient assistance funds.
- Social events or similar fundraising efforts or telethons.
- Projects outside of the Foundation's service area.
- Direct funding for medical or social services already funded through existing third-party reimbursement sources.
- Operating expenses not used for significantly expanding the services of ongoing organizations.
- Vans or other vehicles.
- Building purchase or renovation.
- Technology and software supporting the whole organization, if the majority of the organization's sites are outside of the Foundation's service area.

These funding opportunities are limited and offered on a competitive basis; therefore, it is possible not all

applicants will receive funding. We reserve the right to award less than the amount requested.

## VI. Timeline for Submission

This Request for Proposal will be available for multiple funding cycles. Applicants should become familiar with the dates associated with the cycle for which they are seeking funding. Applicants whose proposals are not funded may submit a revised application for consideration in a subsequent cycle. In such cases, repeat applicants are advised to seek a consultation with program staff prior to submitting another proposal.

Proposals due	August 13, 2019	December 19, 2019
Notification of Selection	September 25, 2019	February 27, 2020
Grant Start Date	November 1, 2019	April 1, 2020

### Pre-submission Consultation

Prospective applicants are encouraged to schedule a call or a meeting with the Healthcare Access Initiative Program Officer to discuss alignment and feasibility of their proposal before submitting a proposal. Contact Trayce Snow, Senior Program Officer, at [trayce@rapidesfoundation.org](mailto:trayce@rapidesfoundation.org) or 318-443-3394 to request a meeting. Please schedule the meeting at least two weeks before the proposal is due.

### Proposal Deadline

Proposals are only accepted using the Foundation’s online application process. The application is located on the Foundation’s website at [www.rapidesfoundation.org](http://www.rapidesfoundation.org) under the “Grants” tab. Online deadline submission is no later than 5:00 p.m. Central Time, on the dates listed above. In fairness to all applicants, late or incomplete submissions will not be considered. *Please note, the grant proposal must be fully submitted by the deadline, therefore, you must begin uploading documents prior to 5:00 p.m. on the day of the deadline. We suggest you allow a minimum of three hours for the upload process.*

## VII. Proposal Requirements

ALL applicants must submit the following information in 12-point Calibri font with 1.5 line spacing and using templates provided (when referenced).

- 1. Cover page – completed online, a separate sheet is not required**
  - a. Applicant organization information (name, address, phone number, email, etc.).
  - b. Name, title, phone number and email address of the proposed project coordinator, or key contact person from the applicant organization.
  - c. Project title.
  - d. Name of the funding opportunity
  - e. Requested funding amount.
  - f. Proposed project period starting no sooner than the dates listed above.
  - g. Brief program description.
- 2. Project Development and Support (up to 3 pages)**
  - a. Describe the size and location of the population impacted by the project, include:
    - i. Name and location of target clinic(s).
    - ii. Size of the target population at each clinic(s).
    - iii. Demographics:
      - Age: young adults (18-34), middle aged (35-64), elderly (65-74), aged (75+)

- Sex: male, female
  - Ethnicity: African American, Hispanic/Latino, Caucasian (non-Hispanic)
  - Community Type: rural, urban
- iv If the project will address system processes or infrastructure at an organizational level, describe what percent of the organization's sites are within the Foundation's service area and what percent of the organization's patient population is from the Foundation's service area.

**3. Project Description: a full description of your proposed project (up to 12 pages)**

- a. Describe the problem or need to be addressed by your proposed project or program. Identify which clinical quality measure(s) will be targeted and explain why it was selected, include the baseline rate for each site.
- b. Describe the proposed project through a summary of the timeline, activities, partners and other factors necessary to consider in assessing the potential for effectively influencing the problem or issue described above.
- c. Describe the proposed results in measurable terms. Tell us how you will collect and measure the information and how often. Tell us what success looks like.
- d. Describe how the project will be sustained financially and organizationally after Foundation funding concludes.
- e. Describe evidence or research indicating the proposed approach has been effective in comparable settings.

**4. Work Plan – please use charts, spreadsheets or other depictions**

- a. Describe the activities and/or tasks to be performed from planning to implementation to project completion.
- b. List all the resources required to implement the project (examples: facilities, consultants, trainings, technology, staff, materials, financial, etc.).

**5. Resource Adequacy**

- a. List required resources, including funding, which are currently committed to the project and the source of those commitments.
- b. List other funders who have or will be solicited to fund this project, the amounts and current status of the requests.
- c. Describe your organization's plan to sustain the project upon conclusion of Foundation support.

**6. Applicant Qualifications (up to 2 pages)**

- a. Explain how the project is consistent with the mission of your organization and that of any project partners.
- b. Describe the institutional commitment of the applicant organization and any project partners.
- c. Describe the skills, expertise and experience your organization, and each project partner, will contribute. There must be a Project Implementation Team responsible for carrying out the project activities. List the project director and other Implementation Team members.

**7. Evaluation Plan**

- a. Describe the evaluation methods to be used to indicate project is on track, include the CQM(s) targets for one year and 18 months.
- b. Describe the evaluation methods to be used to measure long-term impact on clinical quality measure(s); include the CQM(s) target for the end of project.
- c. Name the evaluation resources and persons responsible for tracking the clinical quality measure(s).

**8. Budget Spreadsheet and Narrative (up to 2 pages)**

- a. A line item budget (up to \$75,000/year for up to 2 years) using the downloadable template.
- b. A budget narrative describing what you intend to purchase and how you propose to use the funds in each line item.
- c. A list of in-kind resources and/or support (if any) to be contributed by the applicant and/or partner organizations.

**9. Required Attachments**

- a. Audited financial statements, most recent internal financial statement and current operating budget. If audited financial statements are not available, a prior year financial statement certified by a governing board officer should be provided. Include the information for each fiscal agent or project partner.
- b. Letters of understanding/commitment between your organization and all partners, consultants or resource providers.
- c. Letter(s) of support from community members, clients and other interested community members – up to ONE page each; please upload all letters as a single document.
- d. A list of applicant organization’s board members. Include member name and address, professional/community affiliations and board tenure. This information should be included for each applicant organization, fiscal agent or project partner.
- e. Resumes and job descriptions of human resources listed in 6.c.

**VIII. Additional Considerations**

The Foundation reserves the right to:

- Request additional information from any or all applicants.
- Meet with applicants to ensure full understanding of, and responsiveness to, the application requirements.
- Request modifications to a respondent’s application prior to final award to ensure alignment of project elements with the core values, mission, and operating standards of the Foundation.
- Reject any or all applications submitted.

Funded organizations are required to submit a grant agreement (contract) and a board resolution affirming commitment to the grant funded project by the board of directors.

Contacts:

<p><b>For questions related to this funding opportunity:</b>          Trayce Snow, Senior Program Officer  <a href="mailto:trayce@rapidesfoundation.org">trayce@rapidesfoundation.org</a>          Direct: 318.767.3003</p>	<p><b>For assistance with submitting the online proposal:</b>          Rebecca Simoneaux, Grant Management Assistant  <a href="mailto:rebecca@rapidesfoundation.org">rebecca@rapidesfoundation.org</a>          Direct: 318.767.3013          Main lines: 318.443.3394 or toll-free 800.994.3394</p>
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