

GRFA1693-DPH

CDC Public Health Infrastructure Grant

Preparation for Voluntary Accreditation:
Mini-Grant Proposal for Wisconsin Local and Tribal
Health Departments

January 2012 to September 2012

Background:

The Centers for Disease Control and Prevention's (CDC) National Public Health Improvement Initiative awarded the state of Wisconsin a 5 year grant in 2010 to support improving performance management and public health impacts. Recently, the Wisconsin Public Health Improvement Initiative (WPHII) was awarded continuing funding of \$993, 662 for the 2011-2012 year. For the second year of funding the CDC developed four objectives focusing on:

- preparing for national accreditation
- implementation of performance or quality improvement efforts
- supporting evidence-based policies and laws
- identifying promising and best practices.

Of the roughly \$1 million awarded to the state, approximately \$300,000 will be distributed to local and Tribal health departments. This portion of the funds will be used to help the state meet the CDC objectives of preparing for national accreditation and supporting performance management and quality improvement efforts. During the 2011-2012 grant phase the Division of Public Health (DPH) regional offices will be taking a lead role in translating these objectives to the local level.

Purpose:

The purpose of this Request for Application (RFA) is to invite local and Tribal health departments to apply for funding to engage in the accreditation process and begin to understand or take action in the areas of performance management and quality improvement. The Public Health Accreditation Board (PHAB) requires agencies to have as prerequisites a (1) Community health assessment (CHA), (2) Community health improvement plan (CHIP), and (3) an organizational strategic plan (SP). As part of the accreditation process, an agency must show documentation and evidence that the PHAB Standards & Measures are being met. These standards are based on the ten national public health essential services as well as an administration and a governance component. The overall goal of accreditation is to "advance quality and performance within public health departments." More information on the accreditation process can be found at the PHAB website: <http://www.phaboard.org/>. Information on quality improvement is available at the NACCHO website: <http://www.naccho.org/topics/infrastructure/accreditation/quality.cfm>.

Applying for PHAB accreditation is not a grant requirement.

Project Criteria:

Expectations are that applicants will use this grant funding to complete activities related to the following focus areas:

- 1.) Understanding and demonstrating work toward voluntary national public health accreditation.
- 2.) Understanding performance management and/or implementing performance plans.
- 3.) Understanding quality improvement and/or implementing quality improvement projects or plans.

Depending on the current level of engagement in these focus areas applicants will fall into one of the following groups for funding.

Group 1.) Applicants who were awarded mini-grants during the previous cycle in 2011 *or* applicants who can document having started the accreditation process and engaged in performance management and quality improvement efforts either through the Wisconsin's Public Health Quality Initiative (WIQI) or other formats (see Applicant Group Screen on application). Applicants in this group will be expected to:

- Make concrete steps toward meeting PHAB standards & measures by completing prerequisites (CHA, CHIP, SP) or compiling or developing documentation. Funding may be used toward the accreditation fee.
- Make concrete steps toward becoming a performance-based organization by developing and/or implementing a performance management plan and/or a quality improvement plan.
- Participate in a learning community focused on sharing knowledge on accreditation, performance management and quality improvement.

Group 2.) Applicants who were *not* awarded mini-grants during the previous cycle in 2011 and who have *not* yet begun exploring accreditation, performance management and quality improvement. Applicants in this group will be expected to:

- Assess department capacity to provide ten essential services using the WIQI Self-Assessment Booklet or a comparable tool.
- Increase understanding of performance management and quality improvement by participating in a learning community.

Funding:

Depending on which funding group an applicant selects, the dollar amount and activities supported will differ. However, the focus remains on preparation for voluntary national accreditation, performance management and quality improvement.

Group 1 applicants will be eligible for up to \$10,000 to support preparing for PHAB accreditation, including the development and integration of performance management and quality improvement plans. We are anticipating funding 15-20 departments at this level.

Group 2 applicants will be eligible for up to \$5,000 to support exploring accreditation and understanding the ten essential services, performance management and quality improvement. We are anticipating 20-30 departments at this level.

The selected applicants will receive funding based on the category in which they apply for the period of January 1, 2012 to September 29th, 2012. Funding may be used for a variety of activities and materials such as personnel, travel, supplies, consultant services and accreditation fees.

Funding from this grant may not be used to supplant other funds. In essence this funding cannot be used to substitute funds for activities that are currently being supported by county, city or Tribal dollars that would then be returned to the original funder. You may use these funds to substitute city, county, Tribal dollars being used for activities that fit the mini-grant criteria and use local funds to complete additional related work.

Technical Support

A pre-application technical assistance call related to this RFA is tentatively scheduled for 8:30 to 9:30 AM on 11/8/11. Following the call a Q&A document will be available.

Eligible Applicants

Departments that are new to accreditation, performance management and quality improvement as well as departments that are actively engaged in these areas are encouraged to apply.

All local and Tribal health departments in the state are eligible to apply. Joint applications will be allowed to accommodate health departments that choose to share services. Only one application needs to be filled out if departments are sharing services. If departments are submitting a joint application, all departments represented in the application must be applying at the same funding level (Group 1 or 2). A multiplier will be applied to the highest possible funding amount. For example, a joint application

involving three departments who apply at the Group 1 funding level will be eligible for up to \$30,000. \$10,000 x 3 departments = \$30,000

Award Criteria

The awards will be granted competitively based on the Review Criteria and Scoring stated in this RFA. An evaluation committee will score and tabulate the applications and rank applications in each category according to the numerical score received. Recommendations for funding are based on the numeric rating of individual applications. The Division of Public Health Administrator will make the final decision to award the contracts. The Division reserves the right to reject any or all applications and to negotiate the award amount, the deliverables, the evaluation process and authorized budget items with the selected applicants prior to entering into a grant agreement. Anyone receiving a contract must comply with DHS affirmative action and civil rights compliance requirements (see <http://dhs.wisconsin.gov/civilrights/CRC/requirements.htm> for details). Should additional funding become available, we reserve the right to utilize the results of this process to award additional mini-grants.

Application Guidelines

Applications must be typed, using at least 12 point font, double-spaced on 8 ½ by 11 inch paper with at least one-inch margins. Proposals should not exceed 5 pages, excluding the cover page, budget/budget narrative pages and assurances. Applicants must number all pages and organize the application according to the application guidelines detailed in this document. Applications must be submitted via e-mail as a WORD document or PDF attachment. Please indicate “Infrastructure Mini Grant Application” in the subject. The CRC Letter of Assurance requires an original signature and needs to be mailed or faxed to the DPH Western Regional Office within two weeks of application submittal.

Application Deadline

Mini-grant applications are due on December 2, 2011 by 12:00 pm to gazi.husain@wisconsin.gov

CRC Letters of Assurance should be mailed to:

WI Division of Public Health
Western Regional Office
610 Gibson St., Suite 3.
Eau Claire, WI 54701-3687

This Request for Proposals will be available online in the near future. An email will be sent containing a link to the appropriate website.

Application Checklist

The grant application must include:

- cover page (Fillable)
- Application Group Screen (Fillable)
- Agency Capacity (no more than 2 pages, doubled-spaced)
- Project Description
- Joint Application Supplement (If applicable, no more than 2 pages, double-spaced)
- Budget form and budget narrative (no more than 1 page double-space narrative)
- Signed Assurances of Compliance form (Only 1 copy needed by mail)

Review Criteria and Scoring

GROUP 1.

A. Agency Capacity 30 Points

- Applicant clearly presents evidence that the department is actively working toward accreditation.
- Applicant clearly presents evidence that the department is engaged in performance management.
- Applicant clearly presents evidence that the department is engaged in quality improvement and provides examples of quality improvement efforts.
- Applicant describes adequate department capacity to engage accreditation, performance management and quality improvement.
- If applicable, proposer clearly presents evidence that the department made concrete steps toward achieving previous cycle objectives.
- Applicant provides a clear plan as to how work will continue once funding ends.

B. Project Description 30 Points

- Applicant describes ambitious, yet accomplishable deliverables.
- Applicant addresses accreditation and at least one other focus area.
- There is a logical connection between objectives, activities and deliverables.
- Objectives build upon previous work completed by the applicant as described in the agency capacity section.

C. Budget 30 Points

- Applicant completes the budget form with correct calculations.
- Applicant's indirect costs do not exceed 10% of wages/salaries (excluding fringe benefits).
- Applicant adequately describes budget line items in the budget narrative.

- The staff, supplies, and resources appear to be reasonable with respect to the project.

D. Overall Project Assessment 10 Points

- Applicant demonstrates a strong commitment to achieve voluntary accreditation.
- Applicant demonstrates the capacity, understanding of the project and possesses the skills to successfully complete the project.

GROUP 2.

A. Agency Capacity 30 Points

- Applicant identifies barriers to accreditation, performance management and quality improvement and clearly describes how funding will be used to address those barriers.
- Applicant presents a desire to begin work on accreditation, performance management and quality improvement.
- Applicant describes tangible benefits to engaging in accreditation, performance management and quality improvement.
- Applicant provides a clear plan as to how work will continue once funding ends.

B. Project Description 30 Points

- There is a logical connection between objectives, activities and deliverables.
- Activities address barriers described in the agency capacity section.

C. Budget 30 Points

- Applicant completes the budget form with correct calculations.
- Applicant's indirect costs do not exceed 10% of wages/salaries (excluding fringe benefits).
- Applicant adequately describes budget line items in the budget narrative.
- The staff, supplies, and resources appear to be reasonable with respect to the project.

D. Overall Project Assessment 10 Points

- Applicant demonstrates a strong commitment to achieve voluntary accreditation.
- Applicant demonstrates the capacity, understanding of the project and possesses the skills to successfully complete the project.

APPENDIX A: Glossary of Terms

All definitions are taken from the *Public Health Accreditation Board Acronyms and Glossary of Terms Version 1.0*.

Electronic version of this document is available at: <http://www.phaboard.org/wp-content/uploads/PHAB-Acronyms-and-Glossary-of-Terms-Version-1.0.pdf>

Accreditation

Accreditation for public health departments is defined as:

1. The development and acceptance of a set of national public health department accreditation standards;
2. The development and acceptance of a standardized process to measure health department performance against those standards;
3. The periodic issuance of recognition for health departments that meet a specified set of national accreditation standards; and
4. The periodic review, refining, and updating of the national public health department accreditation standards and the process for measuring and awarding accreditation recognition.

Capacity

Capacity consists of the resources and relationships necessary to carry out the core functions and essential services of public health; these include human resources, information resources, fiscal and physical resources, and appropriate relationships among the system components.

Community Health Assessment

Community health assessment is a systematic examination of the health status indicators for a given population that is used to identify key problems and assets in a community. The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation.

Community Health Improvement Plan

A community health improvement plan is a long-term, systematic effort to address public health problems on the basis of the results of community health assessment activities and the community health improvement process. This plan is used by health and other governmental education and human service agencies, in collaboration with community partners, to set priorities and coordinate and target resources. A community health improvement plan is critical for developing policies and defining actions to target efforts that promote health. It should define the vision for the health of the community through a collaborative process and should address the gamut of strengths, weaknesses,

challenges, and opportunities that exist in the community to improve the health status of that community

Domain

For the purposes of PHAB accreditation, Domains are groups of standards that pertain to a broad group of public health services. There are 12 domains; the first ten domains address the ten Essential Public Health Services. Domain 11 addresses management and administration, and Domain 12 addresses governance.

Evidence-Based Practice

Evidenced-based practice involves making decisions on the basis of the best available scientific evidence, using data and information systems systematically, applying program-planning frameworks, engaging the community in decision making, conducting sound evaluation, and disseminating what is learned.

Infrastructure

Infrastructure denotes the systems, competencies, relationships, and resources that enable performance of public health's core functions and essential services in every community. Categories include human, organizational, informational, and fiscal resources.

Performance Management System

A fully functioning performance management system that is completely integrated into health department daily practice at all levels includes: 1) setting organizational objectives across all levels of the department, 2) identifying indicators to measure progress toward achieving objectives on a regular basis, 3) identifying responsibility for monitoring progress and reporting, and 4) identifying areas where achieving objectives requires focused quality improvement processes.

Quality Improvement (QI)

Quality improvement in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act, which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community.

Strategic Plan

A strategic plan results from a deliberate decision-making process and defines where an organization is going. The plan sets the direction for the organization and, through a common understanding of the mission, vision, goals, and objectives, provides a template for all employees and stakeholders to make decisions that move the organization forward.