2018 Letter of Inquiry - Goal 2

Applicant Information

LETTER OF INQUIRY FOR:

Goal 2:

Activate communities by strengthening organizations and congregations to build health-promoting communities

Outcome 3:

Community and congregation members actively shape healthy communities and influence health systems to improve health equity

Remember to always save your application before exiting or printing a copy.

APPLICANT INFORMATION

Name of organization:
Fort Bend County

Mailing address:
Health and Human Services Clinical Health Services
301 Jackson St

City:	State:	Zip code:
Richmond	TX	77469

County:
Fort Bend

Website:
www.fortbendcountytx.gov

Federal tax ID number:
If your organization is a 501(c)(3) or 170(c), this is the number that is on your IRS Determination Letter and annual 990 Report.
If your organization is a governmental agency, please enter your EIN number. If your organization has another form of tax status
documentation, ***please provide that document as an attachment to this LOI.***
746001969

ABOUT YOUR EXECUTIVE DIRECTOR/CEO

Prefix: Mr.
First name: Ngombe
Middle name:
Last name: Bitendelo
Suffix: <None>
Title: Director of Clinical Health Services
Office phone: 281-238-3548
Extension:
E-mail: (Notifications regarding this application will be sent to this email address) ngombe.bitendelo@fortbendcountytx.gov

About the Organization

ABOUT THE ORGANIZATION

1.1 Year your organization was established
1837

1.2 Briefly describe your organization, including mission. (100 words)
The Department of Health & Human Services is Fort Bend County's principal agency for protecting the health of county residents and providing essential human services, for those who are least able to help themselves. The Department includes six subordinate departments. Fort Bend County by and through Clinical Health Services Department, one of the six subordinate departments, provides clinical services in the core public health areas. The Mission of CHS is to prevent, control and eliminate communicable diseases among the residents of Fort Bend County.

1.3 List the programs/services provided by your organization. (100 words)
The Clinical Health Services Department, one of the six subordinate departments, provides clinical services in the core public health areas of STD treatment; tuberculosis prevention, diagnosis and treatment; and provision of childhood and adult immunizations.

About the Proposal

ABOUT THE PROPOSAL

2.1 Choose the EHF strategy on which your proposal will focus: (select one)
S6: Raise Community Voices

2.2 Amount requested:
100000

2.3 Describe how funds will be utilized: (Remember we will fund: technical assistance, planning grants,

demonstration projects, matching funds (if aligned with EHF Goals); program evaluation, general operating;
system change approaches, etc.) (150 words)
The Clinical Health Services department is requesting funding for general operating costs, in order to build organizational capacity to advance health equity. The strategies include professional development and learning experiences to assess and understand how individual biases impact health status, modifying recruitment and interviewing practices to hire staff with an understanding of health equity, and fostering relationships with organizations that serve communities affected by health inequities. This funding will allow a new hire of a Health Equity Coordinator, a Community Health Assessment, a Health Equity Report, continuing education for the current 29 staff in the Clinical Health Services department, and 6 community listening sessions.

2.4 Dates this funding request will cover:

(mm/dd/yyyy)

Proposed start date:
10/1/2018

Proposed end date:
9/30/2019

Use of Funds

USE OF FUNDS

3.1 Provide a concise description of the grant purpose: (30 words)
Fort Bend County by and through the Clinical Health Services Department requests general operating support to build organizational capacity and community capacity to advance and sustain health equity.
3.2 From which county will this grant be administered? (Select one)
Fort Bend

3.3 What is the challenge or opportunity this proposal aims to solve for its participants, the community or the sector?
What critical unmet need is being addressed? (250 words)
The unmet need to be addressed is the lack of equity in access to health. In a community with health equity, everyone has the opportunity to attain their highest level of health. The conditions in which we live have a measurable impact on our health, including social, economic, and environmental factors that can either promote or inhibit healthy behaviors and outcomes. These factors are often unequally distributed across society, which put some people at greater risk of poor health than others. The unequal distributions of these conditions can be geographic (where we live and work), economic, or rooted in social and cultural beliefs, and are sometimes the result of public policies that favor some groups over others.

Moving toward health equity requires a focus on the unequal access to resources and opportunities in our community. Equity is about systematic differences between groups in the conditions that promote health and healthy lifestyles. This requires an examination of the systems that produce these inequities, and not just the health inequities themselves. Health equity means creating conditions where everyone has a fair chance at a long and healthy life. As a community, Fort Bend County should aim to eliminate unfair and preventable differences in health wherever we can. By creating a Health Equity Report, Clinical Health Services will have a guiding document to drive policies. The Community Health Assessment will support the Clinical Health Services department in

providing the additional areas of education to help address the issues.

3.4 Describe how this funding will be utilized and your projected outcome(s). (500 words)

Clinical Health Services will use this grant to build organizational and community capacity to advance health equity. Funding will support hiring a Health Equity Coordinator, a Community Health Assessment, a Health Equity Report, continuing education for the current 29 staff in the Clinical Health Services department, and 6 community listening sessions.

Clinical Health Services will implement 5 Strategies which incorporate health equity activities and outcomes.
1: Build organizational structures and supports to increase staff knowledge of health equity.
2: Identify the issues using both qualitative and quantitative data.
3: Promote leadership teams, coalitions, and community engagement to increase awareness of causes and impacts of inequities.
4: Design and implement strategies that increase service provision and reduce disparities across the county.
5: Evaluate and monitor health equity activities for effectiveness.

The long-term outcomes (which will be shaped in more specific terms once the Health Equity Report is completed) are:
1: Identify the gaps in health services, access to interventions and treatment.
2: Reach disparate subpopulations with culturally and linguistically appropriate outreach and enrollment strategies.
3: Improve the quality of care for racial, ethnic and LGBT populations.
4: Increase the capacities of staff and workforce to better address the needs of the disparate populations.

The new Health Equity Coordinator will develop clear annual goals for the agency's broader transformation. The first year's goals will include many foundational elements, such as creating a health equity framework and policy, developing staff training and a resource library, and building relationships with external experts, for example from academic institutions and the state health department.

As an initial step, staff will modify language used in employee recruitment, such as job postings, and employee training materials to emphasize the importance of an understanding of health equity as a core value among employees. Following staff participation in learning experiences focused on understanding and improving health equity, the department will build on that knowledge to develop ways to address barriers to health equity among Fort Bend County residents. Clinical Health Services will work closely with other service providers to ensure that access to community-based services is increased for the greatest possible number of residents. The work will focus on reducing the geographic, economic, and social barriers that often interfere with health equity, as well as examining and then addressing current public policies that may be limiting healthy outcomes for certain population groups.

Using the Bay Area Regional Health Inequities Initiative (BARHII) framework, the Health Equity Coordinator will develop a Fort Bend County–specific Health Equity Framework, which serves as the department's theoretical model for how health inequities occur and how to break that cycle. It will be completed with input from a cross-sectional staff project team formed to work on health equity. The framework is a loop rather than a linear chain, recognizing that "disproportionate downstream morbidities can essentially 'restart' root causes of health inequities by further disadvantaging populations from social and economic resources" (Shah, Hadayia, and Forys, 2016). The framework notes key public health actions that can break this cycle.

3.5 List 3 to 6 measurable deliverables for your proposed work? These are the success

metrics for your work.
They may be outputs such as the number of clients served, or units of service provided within the grant period.
They may also include outcomes such as observable behavior changes or shifts in a population you wish to serve.
(150 words)

Objectives of the 5 strategies:
1: Build organizational structures and supports to promote health equity.
Obj 1: By October 2018, hire a Health Equity Coordinator.
Obj 2: By 2019, all 29 employees will participate in Health Equity training along with targeted training for their specialty.
2: Identify the issues using both qualitative and quantitative data.
Obj 1: By 2019, a Community Health Assessment (CHA) and Health Equity Report (HER) will be completed.
Obj 2: By 2019, 6 community listening sessions will be completed.
3: Promote leadership teams, coalitions and community engagement.
see objective 1 & 2 of strategy 2.
4: Select, design and implement strategies that promote health equity and eliminate disparities across the county.
Obj 1: Once the CHA and HER are completed, the equity program development will be developed.
5: Evaluate health equity activities.
Obj 1: Develop evaluation questions to gauge the impact on health equity.

Additional comments/information?

(not required)
Attached please find the program budget and the conceptual model for incorporating health equity.

The Health Equity Report mentioned will answer the following questions:
1. Health Equity issues in our community
2. Conditions in our community that produce inequities
3. Who is addressing issues of health equity

Attachments

ATTACHMENTS

Attachments are not required.

Attachment
Conceptual Model that Incorporates Health Equity Activities.pdf

Attachment
Program Budget.pdf

Conceptual Model that Incorporates Health Equity Activities, Outcomes and Goals

Strategy 1 **Build organizational structures and supports to promote health equity.**

- Increase workforce diversity through recruitment, retention, promotion and training policies
- Increase the capacity of community based organization to do health equity work through community sessions.
- Hire a Health Equity Coordinator to ensure coordination, collaboration and opportunities for health equity are reached.

Strategy 2 **Identify the issues using both qualitative and quantative data.**

- Use tools such as Roots of Health Inequity, Bay Area Regional Health Inequities Inniative, and GIS to identify inequities in Fort Bend County. Complement quantative data collection with a variety of qualitative methods.
- Create a Health Equity Report highlighting the most striking inequities through clear, consistent and widespread messages to county officials.
- Collect data on social determinants of health by race, ethnicity and language, place, and education.
- Create a Community Health Assessment on health equity in Fort Bend County.

Strategy 3 **Promote leadership teams, coalitions and community engagement.**

- Invest in resources to build strong and trusting relationships with community partners
- Include voices of the populations identified as experieincing health inequities in all stages of program development.
- Build and support partnerships among public, nonprofit, and private entities to provide a comprehensive infrastructure that will increase awareness, drive action and ensure accountability in efforts to achieve health equity across the lifespan.

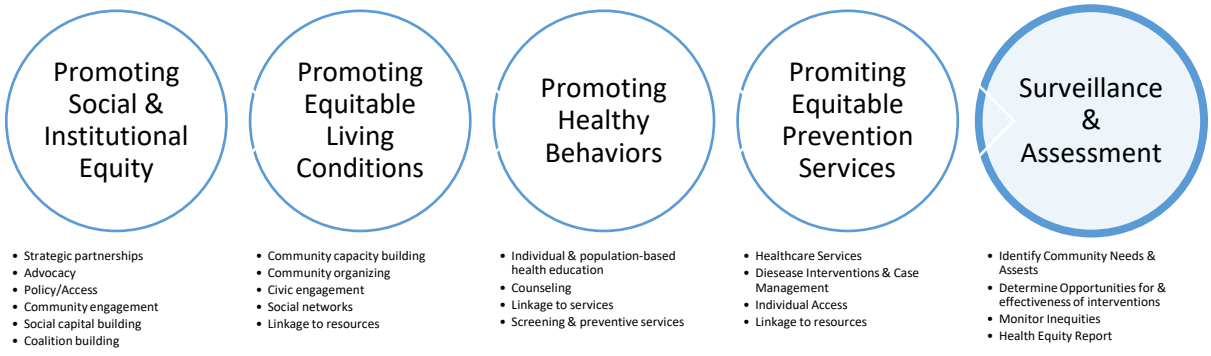
Strategy 4 **Select, design, and implement strategies that promote health equity and eliminate disparities across the county.**

- Work with targeted communities to choose evidence-based interventions that are effective for racial and ethnic populations as well as geographically isolated or low socioeconomic status populations, LGBT groups, and people with disabilities
- Promote higher quality, culturally competent public health and healthcare services for all populations.

Strategy 5 **Evaluate and monitor health equity activities for effectiveness**

- Create tools and add to current tools to measure whether strategies are having differential impact across the population groups and areas experiencing the greatest health disparities.
- Apply the following measures to evaluate whether Fort Bend county is reaching its goals: rates of high school graduation, home ownership versus renting, income gap narrowing, moves to mixed income neighborhoods, and policies that counter institutional racism.

Potential Health Equity Framework



Year 1 Funding for Organizational Capacity to Build Health Equity

Category	Amount Request to Foundation	Project Total
Salaries & Wages		
Health Equity Coordinator (New Hire)	$50,000	$50,000
Director of Clinical Services (5%of time)	$4,000	$4,000
Fringe Benefits		
Health Equity Coordinator (100% x 15% for benefits)	$7,500	$7,500
Director of Clinical Services (5% x 15% for benefits)	$600	$600
Consultant/Contracted Services		
Community Health Assessment	$10,000	$10,000
Health Equity Report	$10,000	$10,000
Materials & Supplies		
Marketing for community conversations 6 meetings x $483	$2,900	$2,900
Other		
Training (30 employees x $500 stipend for CEU a piece)	$15,000	$15,000
Total Expenses	**$100,000**	**$100,000**

This project has the potential for 3 years. Year 2 and 3 would not include the Community Health Assessment and the Health Equity Report. However, year 3 would need to include an update to the Health Equity Report. Years 2 and 3 would include other costs which would lead to long-term incorporation of health equity in policies and procedures.

At this time, the request is for year 1 funding.