



MGH Executive Committee on Community Health (ECOCH) Grants Program 2021 Request for Applications

Background

In 2014, The MGH General Executive Committee authorized the creation of the [Executive Committee on Community Health](#) (ECOCH) to promote community health improvement and ensure health equity while leveraging all components of the MGH mission: patient care, teaching, research, and community health. To improve health across populations and across the life course, ECOCH's strategic priorities focus on access to care, the social determinants of health, and advocacy for policy to advance community health priorities.

ECOCH supports MGH clinical departments in achieving their community health improvement goals by providing [guidelines](#), technical assistance, and grant funding. Since 2016, a total of 17 teams across 11 departments have received ECOCH grants. We are pleased to announce the availability of funds to support up to 5 new grants to continue to foster clinical departments' efforts to improve community health and advance health equity.

2021 ECOCH Grant Opportunity

Last year the ECOCH Access Subcommittee collaborated with Ambulatory Management (AM) within the MGPO to produce a [Health Equity/Access dashboard](#) that displays data on access to care based on patient race, ethnicity, preferred language, disability, and payer. For a tip sheet on how to navigate this dashboard, click [here](#).

For 2021 applications, we are specifically requesting proposals for projects to address disparities in access to care, with an interest in seeing grantees utilize the Health Equity/Access dashboard. **We will give preference to applicants that utilize this dashboard to inform their proposed intervention.** *For those unfamiliar with this tool, a Zoom informational session is scheduled for **Monday, April 26th, 2:30 – 4PM** ([click to register](#)) featuring a dashboard demonstration and opportunity to ask questions.*

Examples of types of projects might include identifying:

- Demographic (race, ethnicity, preferred language, disability, and insurance type ["payer"]) differences in scheduled specialty appointments and working to rectify such differences.
- Missed opportunities of care (those scheduled but do not show to appointments, left without being seen, same-day cancellation) and

proposing and/or demonstrating implementation of steps to reduce such loss.

- Type of virtual care accessed (i.e. telephonic versus video) and proposing a plan to address these disparities.
- Loss to follow up (those who needed a follow up appointment but never received one).
- Differences in referrals to specialty care and wait times (by race/ethnicity, preferred language, disability, payer) and developing plans to improve the representation of diverse patients in specialty care.

Description of funding

ECOCH is offering grants of up to \$30,000 total costs inclusive of indirect costs to be used within 1 year.

Eligibility

- Any MGH faculty, staff, or trainee may apply as individuals or teams.
- Applicants must identify which faculty or staff member will lead and provide direct oversight to the proposed project. [L]
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- Applicants must provide letters of support from Chiefs of any involved MGH departments.

Selection criteria [L] [SEP]

A multidisciplinary team of community health leaders will review all proposals. Projects must measurably enhance clinical departments' efforts to improve community health and advance health equity. Proposals may not seek to supplant funds already supporting current efforts but could expand or add new components to existing projects. Preference will be given to:

- Projects that focus on reducing disparities in access to care.
 - Priority will be given to funding projects that utilize the Health Equity/Access [dashboard](#) to identify gaps or disparities in care/access and develop and pilot an intervention addressing an access issue(s) identified through the dashboard.
 - While we recognize that the timeline for this grant may not permit collecting enough data to evaluate change, a measurement plan, rationale, and methodology for measures and benchmarks are required.
- Other submissions related to access will be considered, if they are actionable, measurable and likely to yield persistent incremental health equity benefits.
- Proposals engage departmental community health leaders and incorporate other suggestions described in the attached guidelines. [L]
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- Projects that demonstrate an inclusive planning process, ideally engaging multiple staff and, when relevant, members of the communities to be served.

- Proposals that provide robust measurement and evaluation plans, realistic timelines, and detailed sustainability plans.

Application requirements

- **Project title**
- **Project members and roles**, specifying one person who would be leading the project and providing oversight
- **Proposed plan** (single-spaced, 12-point font, one-inch margins, maximum 5 pages exclusive of references, budget, and chief letters) including:
 - **Specific aims and quantifiable goals**
 - **Population to be served**
 - **Project description**
 - How will this project address disparities in access (prioritized in this RFA) or, if not directed at access, advance other ECOCH goals?
 - How will this project engage the hospital department and departmental leadership in community health?
 - Please describe the project planning process (e.g., who was involved, how it was developed)
 - **Background and preliminary data** on the problem being addressed
 - **Methods**, including measurement and evaluation plan
 - **Timeline**, incorporating key milestones
 - **Sustainability plan**, describing how this project could continue benefiting the community once funding ends
 - **IRB submission**, if applicable (please note that funding will not start until IRB approval notice is provided)
 - **References**
- **Proposed budget and justification**, this cannot exceed \$30,000 total costs inclusive of indirect costs over 1 year. (Please download [budget template](#))
- **Letters of support**
 - By Chiefs of departments involved, stating their support and commitment to this project while describing the departmental structure in place to advance community health (for example, describing who their community health leader is and how this project will synergize with the department's community health improvement strategic plan)
 - By any community groups or agencies that your team will partner with to execute this proposal, stating their support and commitment to this project while describing their specific role

Please send complete applications electronically to Kim Lopez at klopez3@partners.org by 5 PM EST on Friday, June 11, 2021

All applicants will be notified of selection results by the ECOCH Grants leadership. If awarded, grantees will be expected to:

- Provide semi-annual updates on progress and expenditures documenting impact of the effort, both ^{1}_{SEP} within MGH and in the community. ^{1}_{SEP}

- Share a description of the effort, including lessons learned, with others at MGH and in the ^{[[L]]}_{[[SEP]]} community. ^{[[L]]}_{[[SEP]]}
- Collaborate with ECOCH on how to leverage their experience for impact across MGH. ^{[[L]]}_{[[SEP]]}
- Present to ECOCH. ^{[[L]]}_{[[SEP]]}
- Share code, data, data collection instruments and analyses with ECOCH.

Key dates and deadlines: ^{[[L]]}_{[[SEP]]}

Proposal Released	April 14
Demonstration Session – Please click to register in advance	April 26, 2:30 – 4PM
Applications Due	June 11, 5PM
Awards Announced	August 9
Grants Begin	October 1

Please note:

- The guest access to the Health Equity Dashboard will close June 12th. To obtain **full access to the Health Equity dashboard, you must complete this [request form](#)**.
- Once granted access, the full access version of the Health Equity Dashboard is located [here](#). The tip sheet for how to navigate the full access dashboard is located [here](#).

For issues or questions on navigating the MGPO/Ambulatory Management Health Equity/Access Dashboard, please reach out to Brigitte Buquez at bbuquez@mg.harvard.edu.