Learning and Action in Policy and Partnerships (LAPP)

DATA ACROSS SECTORS FOR HEALTH (DASH)

dashconnect.org

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Leveraging COVID-19 Relief Funding to Advance Sustainable Data-Sharing Policies for Improving Health, Equity and Well-Being

Award Opportunity - Request for Proposals

SUMMARY

With support from the Robert Wood Johnson Foundation (RWJF), Data Across Sectors for Health (DASH) in partnership with the Center for Health Care Strategies (CHCS), is pleased to launch a second round of the Learning and Action in Policy and Partnerships (LAPP) program.

DASH is granting $80,000 to five awardees to support sustainable efforts by local or state governments in collaboration with community partnerships to advance the use of COVID-19 relief funds to support data-sharing and data-integration efforts that aim to improve health, equity, and well-being in local communities and identify learnings for how states can support community data sharing through policy.

BACKGROUND

DASH is an initiative of the Robert Wood Johnson Foundation led by the Illinois Public Health Institute (IPHI) in partnership with the Michigan Public Health Institute (MPHI). Over the last six years, DASH has dedicated efforts to working with communities across the nation to build local capacity for multi-sector data sharing, while simultaneously building the evidence base to inform a national movement. DASH works to improve the health of communities by promoting health equity,[1] contributing to a culture of health,[2] strengthening information sharing systems, engaging additional sectors to address the social and structural determinants of health,[3] and building sustainable community capacity to advance the field

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[1] "Health equity means that everyone has a fair and just opportunity to be as healthy as possible. To achieve this, we must remove obstacles to health--such as poverty, discrimination, and deep power imbalances--and their consequences, including lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care." Citation: Braveman P, Arkin E, Orleans T, Proctor D, and Plough A. What Is Health Equity? And What Difference Does a Definition Make? Princeton, NJ: Robert Wood Johnson Foundation, 2017

[2] "A Culture of Health is broadly defined as one in which good health and well-being flourish across geographic, demographic, and social sectors; fostering healthy equitable communities guides public and private decision making; and everyone has the opportunity to make choices that lead to healthy lifestyles. This requires that society be free of systems and structures that perpetuate racial inequities. The exact definition of a Culture of Health can look very different to different people. A national Culture of Health must embrace a wide variety of beliefs, customs, and values. Ultimately it will be as diverse and multifaceted as the population it serves." Robert Wood Johnson Foundation, "What is a Culture of Health?" https://www.evidenceforaction.org/about-us/what-culture-health

[3]   Social Determinants of Health (SDOH) are the conditions in which people are born, grow, learn, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life, including economic policies and systems, development agendas, social norms, social policies, and political systems. World Health Organization. Social Determinants of Health. Available at:
https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1 Structural determinants of health

and improve health outcomes, especially for the most vulnerable and marginalized communities.

In recognition of the value of collaboration and to deepen the subject matter expertise for community and state awardees, DASH is partnering with the [Center for Health Care Strategies](#) (CHCS) to design and execute the LAPP program. CHCS is a nonprofit policy center dedicated to improving the health of low-income Americans. CHCS works with state and federal agencies, health plans, providers, and community-based organizations to advance innovative and cost-effective models for organizing, financing, and delivering health care services.

CENTERING EQUITY

DASH's focus on promoting multi-sector data sharing to advance health equity is embedded within a theory of change focused on aligning the efforts of the [public health, social services, and health care sectors](#) toward achieving the changes in policies, practices, and mindsets needed to make progress toward community health goals and health and racial equity.

DASH and CHCS believe that when equity is centered within a shared data ecosystem, sectors and communities can collaborate to address the structural and social determinants of health in multiple ways:

- Making information available to community residents and creating a mechanism to inform our analysis of data can support policy changes that are most responsive to communities;
- Granular and timely data (appropriately de-identified) is central to a strong public health foundation; and
- Multi-sector data exchange can support systems change to address systemic barriers to health, meet person and community-named goals, and establish accountability to community members most affected by inequitable systems.

Centering equity in the work requires careful attention to assessing risk and benefits to different populations, understanding and mitigating sources and implications of bias, data governance that honors privacy and engenders trust, and recognizing and supporting the role of community in telling their own stories. Failing to authentically include people with lived experience of inequity throughout the data life cycle risks harm to people and communities.[4]

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refers "interplay between the socioeconomic-political context, structural mechanisms generating social stratification and the resulting socioeconomic position of individuals." World Health Organization. A conceptual framework for action on the social determinants of health. Available at: https://www.who.int/social_determinants/corner/SDHDP2.pdf

[4] "Cross-sector data-sharing and integration enable the transformation of individual-level information into actionable intelligence that can be used to understand urgent and long-term community needs; improve services, systems, and practices; develop innovative policies and interventions; and, ultimately, build stronger communities. Yet, the way that cross-sector data are used can also reinforce legacies of racist policies and produce inequitable resource allocation, access, and outcomes." Centering Racial Equity Throughout Data Integration Toolkit. Available at: https://www.aisp.upenn.edu/wp-content/uploads/2020/08/AISP-Toolkit_5.27.20.pdf

CURRENT CONTEXT AND OPPORTUNITY

The current levels of federal funding provide a unique opportunity to dramatically accelerate investments into shared data systems that support communities to address health equity. Signed into law on March 11, 2021, The American Rescue Plan Act of 2021 (ARPA) invests $1.9 trillion in pandemic response and rebuilding, including direct funding for public health and health and human services programs. It also provides $350 billion in additional flexible "fiscal relief" funding for state and local governments. The Treasury Department interim rule on the fiscal relief money specifically identifies "improvements to data or technology infrastructure" as a permitted use for public health and economic relief programs. Further, the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) was passed by Congress on March 27, 2020. This bill also provides for payments to state, local, and tribal governments navigating the impact of the COVID-19 outbreak.

Even with the enhanced Federal funding, DASH and CHCS understand there are many challenges to be navigated when planning and implementing shared data systems. DASH has directly funded over 130 community collaborations to advance their capacity to share multi-sector community data. Challenges relate to nurturing shared vision and trust, engaging community members throughout the work, understanding the existing data ecosystem, overcoming technical challenges, navigating the vendor landscape, accessing data, negotiating legal agreements, attention to unequal power and data capacity across the collaboration, and implementing systems change.

As the evidence base for this work has grown, one of the most critical insights to emerge is that while community partners can achieve meaningful progress together, they are often hampered by the existence or lack of policy and systems factors beyond their control. To fully realize the benefits of local collaborations, action is often needed at the state level, for example, to adopt policy, establish standards, or align incentives.

PURPOSE

The purpose of this second round of funding for the Learning and Action in Policy and Partnerships (LAPP) grant is to support coordinated local or state government and community partnerships as they leverage COVID-19 relief funds to advance policies for data-sharing and data-integration efforts, improve a culture of health and advance equity, and, importantly, inform state policy development.

The LAPP program will support five awardees by providing grant funding, technical assistance, and a supported peer learning collaborative to help government and local community partners as they utilize the grant funding to advance data and policy goals.

Specifically, this program will support awardees to:
1. Support community engagement in local or state COVID-19 relief investment planning efforts.

2. Increase communities' capacity to collaborate across diverse sectors for the deployment of COVID-19 funds to address racial inequities through shared data.
3. Identify roles and opportunities for state policy to promote sustainable data sharing to improve health and equity.
4. Identify, develop, or advance new policies and practices that center equity and the voice of community members in cross-sector data-sharing and data-integration efforts to improve health and advance equity.
5. Learn from a community of peers' methods for addressing common data-sharing challenges.
6. Collectively learn from one another about what is needed to address a specific, equity-related priority through data-sharing and integration.

Through this opportunity, the LAPP program aims to maximize the chances that COVID-19 relief funds are invested in a shared data infrastructure among health care, social services, and public health that: centers equity, meets communities' self-determined needs, and supports systems change for community health and well-being. This may require:

Inclusive planning
Addressing harmful impacts to racial and social equity created by legacy data systems
Identifying a shared or aligned purpose
Building partnerships
Being mindful of power dynamics
Developing clear and equitable governance structures
Understanding policy goals and objectives
Engaging in peer learning
Sustainability and capacity building supports for longer-term impacts and planning

TOTAL AWARDS

DASH intends to make five awards of up to $80,000 each for seven months (January through July 2022).

USE OF FUNDING

Awarded activities should be clearly defined and completed in the period of the award. One or two specific products or deliverables are expected by the end of the award period. Activities that build on existing work or lay a foundation for embedding data sharing and data integration within systems are preferred.

To achieve the stated goals of this program, grantees could engage in the following types of activities. This list is not exhaustive, and other concrete proposals that reflect the overall goals of this program are also welcomed.
- Mapping their state and/or community data ecosystem to identify data-sharing opportunities for health, equity, and well-being initiatives.

- Identify and/or advance policy opportunities to help cross-sector data-sharing efforts between/among health care, social services, and public health to improve health and advance equity.
- Build capacity to engage community members beyond COVID-relief focused conversations in an ongoing, sustainable manner to inform and guide data-integration/data-sharing efforts.
- Develop data use cases (e.g., your key multi-sector data projects or priorities for the year ahead).
- Engage community members and other key stakeholders to:
    - Inform decisions about how health equity-focused data-sharing initiatives could be funded by ARPA/other federal COVID-19 relief and recovery funding (or otherwise bring community voices to existing planning processes);
    - Participate in a community-centered requirements analysis and vendor selection process; or
    - Plan for long-term sustainability

ELIGIBILITY CRITERIA

Applicant organizations must be:
- ❏ Public entities or nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and must not be private foundations
- ❏ Based in the United States or its territories
- ❏ A member of the *All In* online community, join here: https://community.allindata.org/home

Applications must include a:
- Description of the process for decision-making about the use of local or state ARPA and/or CARES Act funding, and evidence that the applicant and/or their partners are engaged in that process.
- Clearly defined health equity goal that requires shared multi-sector data to achieve
- Description of how the lead applicant is engaged in collaborative efforts (e.g., among health care, public health, and a community-based social services sector partner) around an existing or planned data-sharing or data-integration effort to improve health, reduce health disparities, and promote health equity.
- Focus on building the capacity of community collaborations to access, use, and integrate multi-sector data to improve health, well-being, and equity outcomes.
- Specific community engagement process for involving persons with lived experience or community-based organizations.
- Letters of support from the local or state agency committing to participate in the LAPP grant-funded activities that includes a willingness to create power-sharing opportunities with community members through a robust community engagement process.

A minimum of Two Letters of Support, for instance:
- **State government partner (required)**
- **Local government partner if applicable**
- **Community/ partners**
- **Persons with Lived Experience**

- If working on local COVID-19 relief planning, a letter from a state agency indicating support of the project, including and how it will use findings inform state policies that integrate local data-sharing or data-integration initiatives into systems design.

SELECTION CRITERIA

Successful applicants will demonstrate and be scored based on the following:

- Current Activities:
  - The applicant's description of how COVID-19 relief funding decisions are being made; description of their existing collaborative activities to promote health improvement and data sharing, existing partnerships including relationships between community collaborations and local or state government clearly defined; and experience with multi-sector data sharing.
- Proposed Approach
  - The applicant's proposed work under the LAPP initiative (i.e., expressed motivation for engaging in this work; articulation of the outcomes and implementation strategies that will advance the efforts to leverage COVID-19 relief funds toward data-sharing and/or data-   integration efforts; and a clear rationale for the proposed work).
- Leadership and Partner Commitment
  - The strength of the applicant's demonstrated leadership and partner commitment (i.e., the proposal should demonstrate a high degree of commitment and engagement by the applicant's leadership and other key stakeholders/project partners — as well as how community members will be meaningfully incorporated in shared decision-making throughout the design and implementation of project activities.
  - Role of Multi-Sector Data Sharing
  - The applicant's demonstrated understanding of how they would leverage the LAPP program award to advance data-sharing or data-integration policies and activities as part of COVID-19 relief funded efforts. (i.e., a clear description of the role of data sharing in its project goals, objectives, and strategies).
- Organizational Capacity
  - The capacity of the project team to implement the proposed strategies and participate in project activities (i.e., experience, proposed roles, and allocations of project staff and partners; and their ability to complete project activities within the seven-month award period).
- Budget and Project Timeline

o The feasibility of achieving project aims within the estimated timeline and budget (i.e., whether the proposal includes a reasonable timeline for completing proposed project activities; and appropriateness of the proposed use of funds).

LAPP PROGRAM SUPPORT AND LEARNING COLLABORATIVE

DASH and CHCS will offer selected awardees:
- Access to financial support $80,000 grants to five sites for seven months (January through July 2022).
- A learning community for awarded sites (involving state and/or local government and community partners) to facilitate peer exchange on planning, coordination, and community engagement around COVID-19 relief fund planning and investments.
- Technical assistance to support (a) effective community engagement practices that inform decision-making; and (b) decision-making on strategic investment of COVID-19 relief funds (e.g., ARPA and/or CARES Act), including layering on data-sharing and data-integration efforts to existing considerations.
- Project management support for sites (e.g., developing action plans; tracking milestones, etc.).
- Resources to share and leverage including relevant articles, materials, tools, and learnings through the *All In* network.
- Inclusion in DASH research, evaluation, and dissemination activities, including sharing information on projects on DASH websites, in DASH publications, and in other dissemination and learning strategies

Awardees will be expected to:
- Create or update their profile on the *All In* online community platform upon start of the award, complete the *All In* Capacity Assessment, and participate on the platform related to their funded project.
- Participate in short recurring check-in calls with the DASH team.
- Share their learnings and work with peers either during or after the award through online webinars and/or in a sharable format
- Host an in-person or virtual meeting with DASH program office staff.
- Submit a concluding report, documenting lessons learned and challenges overcome or not overcome from which others could benefit.
- Participate in an exit interview to discuss their successes and challenges.

HOW TO APPLY

Application Deadline: **November 12, 2021 at 3:30 EST**. ****Applications must be submitted via the [RWJF online system](#)**

Questions/Inquiries for the Learning and Action in Policy and Partnerships grant can be sent to info@dashconnect.org with the subject "LAPP Program."

All LAPP program information including FAQs, full LAPP project brochure/summary, and recorded informational webinar can be found on the **LAPP homepage**.

TIMELINE
- September 27, 2021, at 10 AM EST — Release Date
- September 27, 2021 — Informational webinar (pre-recorded release)
- **November 12, 2021, 3:30 PM EST — Application deadline**
- December 2021 — Awardees notified
- January-July 2022 — Learning Collaborative and project implementation
- July 2022 — Reporting and Outcomes

DASH is an initiative of the Robert Wood Johnson Foundation led by the Illinois Public Health Institute (IPHI) in partnership with the Michigan Public Health Institute. DASH is committed to building a Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. Achieving this goal requires focus on equity, diversity, and inclusion. To that end, we are committed to fostering diverse perspectives. We recognize that individuals' perspectives are shaped by a host of factors, such as their race, ethnicity, gender, physical and mental ability, age, socioeconomic status, gender identity and expression, sexual orientation, familial status, education, religion, legal status, military service, political affiliation, geography, and other personal and professional experiences. DASH seeks diversity in our team, partners, and grantees.