

» A Call for Collaboration

In the United States, more than 95 percent of health care spending is attributable to direct medical services; however, medical care accounts for only a fraction of our nation's health and well-being. A far greater share, as much as 70 percent, can be attributed to the interplay and influence of our social, physical, and economic environments. These upstream factors—often referred to as the social determinants of health—include influences as diverse as early childhood development, employment opportunities, food availability, air and water quality, transportation, educational attainment, public safety, housing and a myriad of others. No one organization in a community can address these alone.

Too often, efforts to improve community health are conducted in silos, seeking to address big picture problems with narrowly focused interventions. In 2015, the **BUILD Health Challenge** committed to supporting communities to change this, by investing in bold, locally-driven community partnerships that leveraged integrated data to create institutional change, promote health equity, and reduce downstream health care costs. For the communities that received funding and technical assistance, it required a fundamental reorientation of how local leaders in health care, public health, and community worked together to improve health and wellness. For most, it required re-imagining their roles in community health, sharing their data and resources, and partnering in new and creative ways. The challenges—logistical, financial, and strategic—were real, but offered opportunities to catalyze systematic change that is set to last well into the future.

True health transformation requires a broad network of national, state, and local support throughout the country. To that end, the BUILD Health Challenge is pleased to have new grantmaking organizations partnering in this effort, lending valuable regional and issue-specific expertise that is allowing this initiative to broaden its reach and impact into new communities nationwide. Joining Advisory Board, the de Beaumont Foundation, the Colorado Health Foundation, The Kresge Foundation, and the Robert Wood Johnson Foundation in support for the BUILD Health Challenge are the Blue Cross and Blue Shield of North Carolina Foundation, Episcopal Health Foundation, Interact for Health, Mid-lowa Health Foundation, New Jersey Health Initiatives, Telligen Community Initiative, and the W.K. Kellogg Foundation. This collaboration blends national perspective with issue-specific and regional expertise, and aims to inspire similar teamwork among organizations at the local level that will help to uncover tomorrow's best practices for community health.

About the **Awards**

The BUILD Health Challenge awards are designed to support the advancement of community collaborations that are ready to put their bold, upstream, integrated, local, data-driven plans into action. Organizations jointly applying for a BUILD Health Challenge award should have a strong track record of working together and have developed their joint priorities and implementation plans with strong levels of community engagement and leadership. The BUILD Health Challenge awards are most appropriate for collaborations that have already developed a well-defined action plan with clear roles, strategies, and goals, and where an infusion of philanthropic support could accelerate their work.

The BUILD Health Challenge plans to make the following award distributions:

21 Total Awards

\$250K Two-year period

- 11 Awards in cities of 150,000 residents or more *Three of these awards will be dedicated to proposals that support upstream solutions that influence maternal and child health, specifically breastfeeding initiation and duration among predominantly low income and populations of color. More information can be found in the FAQ section of our website.
- 3 Awards in Colorado
- 3 Awards in New Jersey

- Award in central lowa¹ that focuses on social determinants of children's health (age 0-21)
- Award in the 57 county service area of the Episcopal Diocese of Texas²
- 1 Award in North Carolina
- Award in the 20 county service area surrounding Cincinnati, Ohio³

Sample activities covered could include, but are not limited to:

- » Advancing local policy solutions that will create better opportunities for health
- » Expanding the range of committed partners to bring complementary sets of expertise, resources, and capacities to the table
- » Supporting staff to manage the initiative, organize the community, and keep all partners on track (sometimes referred to as the "backbone organization" or "quarterback")
- » Developing robust data-sharing agreements to inform intervention strategies and track results for continuous improvement
- » Engaging community members to inform strategy and guide activities
- » Strategic communications
- » Program evaluation

To be eligible for a BUILD Health Challenge award, the participating hospital(s) or health system(s) must demonstrate a 1:1 match met through direct cash support or a combination of cash and in-kind support. Innovative and transformative approaches to leveraging hospital community benefit investments in meeting the match requirement will strengthen the applicants' competitiveness. Matching commitments do not need to be in place by the Feb. 21 deadline for Round 1 proposals, but should be articulated by the time Round 2 proposals are due in May. More information about the hospital match is included in the FAQ section of buildhealthchallenge.org.

¹ Dallas, Polk, and Warren counties

² Anderson, Angelina, Austin, Bastrop, Bell, Brazoria, Brazos, Burleson, Burnet, Chambers, Cherokee, Colorado, Coryell, Falls, Fayette, Fort Bend, Freestone, Galveston, Gregg, Grimes, Hardin, Harris, Harrison, Houston, Jasper, Jefferson, Lampasas, Lee, Leon, Liberty, Limestone, Madison, Marion, Matagorda, McLennan, Milam, Montgomery, Nacogdoches, Newton, Orange, Panola, Polk, Robertson, Rusk, Sabine, San Augustine, San Jacinto, Shelby, Smith, Travis, Trinity, Tyler, Walker, Waller, Washington, Wharton, and Williamson Counties

³ Dearborn, Franklin, Ohio, Ripley, or Switzerland County in Indiana, Boone, Bracken, Campbell, Gallatin, Grant, Kenton, or Pendleton County in Kentucky, Adams, Brown, Butler, Clermont, Clinton, Hamilton, Highland, or Warren County in Ohio

Join the BUILD Health Challenge

The BUILD Health Challenge will support up to 21 communities in leveraging hospital-community-public health partnerships to address upstream problems, reduce downstream health care costs, and promote health equity. **B**old, **U**pstream, **I**ntegrated, **L**ocal, and **D**ata-driven strategies are cornerstones of the approach. In addition to funding, awardees will gain access to a robust array of coaching and support services, as well as a network of peer communities engaged in similar work that are sharing successes, learnings, and challenges along the way.

Who is eligible?

To be eligible for a BUILD Health Challenge award, the lead applicant must meet the following criteria:

- » Be a 501 (c)(3) nonprofit community organization;
- » Assemble a partnership including (at minimum) a hospital or health system, a local health department, and a nonprofit community organization or coalition of organizations;
 - » The participating hospital(s) or health system(s) must demonstrate a 1:1 match met through direct cash support or a combination of cash and in-kind support. For more information about the match, refer to the About the Awards section or visit the FAQs posted on buildhealthchallenge.org.
- » Focus activity within a delineated zip code(s), census tract(s), or neighborhood(s) experiencing significant health disparities within a city of 150,000 residents or more*:
 - *Applicants from Colorado, New Jersey, North Carolina, areas of central lowa, 20 counties surrounding Cincinnati, and 57 counties in Texas are exempt from this population requirement. For a comprehensive list of eligible counties, refer to the About the Awards section on page 3.
- » Be willing to participate in learning/evaluation activities and convenings, openly sharing challenges, results, and outcomes.

Is your partnership BUILD-ready?

Applications that clearly address the principles of the BUILD Health Challenge will be considered most competitive.

Does your partnership:

BOLD

Aspire toward a fundamental shift beyond short-term programmatic work to longer-term influences over policy, regulation, and systems-level change?

UPSTREAM

Focus on the social, environmental, and economic factors that have the greatest influence on the health of your community, rather than on access or care delivery?

INTEGRATED

Align the practices and perspectives of communities, health systems, and public health under a shared vision, establishing new roles while continuing to draw upon the strengths of each partner?

LOCAL

Engage neighborhood residents and community leaders as key voices and thought leaders throughout all stages of planning and implementation?

DATA-DRIVEN

Use data from both clinical and community sources as a tool to identify key needs, measure meaningful change, and facilitate transparency among stakeholders to generate actionable insights?

Taken together, do you believe the shifts your partnership is proposing can bring about improvements in community-level health outcomes? If you've answered yes to all of the above, **you're ready to take the BUILD Health Challenge!**

For a comprehensive list of FAQs, visit buildhealthchallenge.org

How Do I Apply?

The application portal will open on Jan. 10, 2017. All applications must be submitted via the BUILD Health Challenge portal at buildhealthchallenge.org no later than 5 p.m. ET on Tuesday, Feb. 21, 2017.

ROUND 1 APPLICATION QUESTIONS

1 Proposal Overview

In 100 words or less, describe the work you are proposing to carry out with the support of BUILD Health Challenge funding.

Responses to the questions below are limited to 4,000 characters or less (with spaces).

2 Community Profile

Describe the community or neighborhood at the focal point of your implementation plan, as well as the specific health disparities or inequities being addressed by this proposal. What methods or data were used to identify these priorities? Include relevant demographic and health disparity data, as well as community data, highlighting the specific social determinant(s) of health that contribute to this issue.

3 Partnership Profile

Describe the organizations that are partnering to address this challenge, as well as the history of collaboration between the partnering entities particularly on upstream factors that impact health. How are the complementary resources, expertise, and capacities of each organization being aligned to address the specific health priorities of focus in this community?

4 Implementation Plan

Provide a brief narrative description of the bold, upstream, integrated, local, data-driven strategies you are proposing. How will the BUILD Health Challenge opportunity enable you to implement these strategies? Why do you believe your proposed strategies will be effective?

5 Impact

Describe the anticipated short-term and long-term impacts on your community, recognizing that the long-term impacts may be realized beyond the term of a two-year award period. What new learning may result from the implementation of this work that may be of value to other communities tackling similar challenges?

Additional Documents/Letters of Support Required

Applicants that are invited to participate in Round 2 of the application process will be required to upload signed letters of support and commitment from the following key constituents:

- » Executive director of the lead nonprofit community-based organization (including a statement that affirms ability to be recipient of the funding)
- » CEO of the lead hospital or health system (including a statement that affirms commitment to match the \$250,000 award)
- » Local health department official

Key Dates and Deadlines

December 12, 2016 Informational webinars for prospective applicants

3 p.m.-4 p.m. ET (Visit buildhealthchallenge.org to register)

December 15, 2016

1 p.m-2 p.m. ET

January 31, 2017

1 p.m-2 p.m. ET

January 10, 2017 Application portal opens 9 a.m. ET

February 21, 2017 Round 1 application due 5 p.m. ET

April 4, 2017 Invitations extended to select applicants for Round 2

April 18, 2017 Informational webinar for Round 2 applicants 2 p.m–3 p.m. ET

May 23, 2017 Round 2 application due 5 p.m. ET

July 11, 2017 Successful Round 2 applicants notified

September 12, 2017 Public announcement of awardees in Washington, DC and first convening of sites with the coaching and supporting partners

FAQs

You've got questions? We have answers.

Visit buildhealthchallenge.org for a comprehensive list of frequently asked questions.

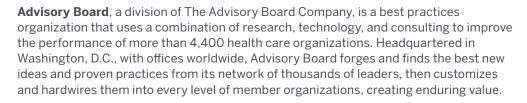
Don't see your question listed?

Submit it to info@buildhealthchallenge.org with the subject line FAQ and your question will be added to the FAQ list. While we welcome questions regarding the intent, design, or goals of the Challenge, please note that we will not be able to provide individual guidance on ideas for proposals.

About the **Funders**







The **Blue Cross and Blue Shield of North Carolina Foundation** is an independent, charitable foundation with the mission of improving the health and well-being of North Carolinians. Since its founding in 2000, BCBSNC Foundation has invested more than \$110 million in North Carolina communities through nearly 870 grants. BCBSNC Foundation grantmaking and special initiatives are focused in three key areas: improving health outcomes of populations served by safety net organizations through improved access to medical and dental care; increasing physical activity and access to healthy, local foods; and increasing the effectiveness of nonprofit organizations and their leaders. More information is available at www.bcbsncfoundation.org.



The **de Beaumont Foundation**'s mission is to transform public health in the United States by improving the effectiveness and capacity of local and state health departments. The de Beaumont Foundation believes that a strong public health system is essential. The Foundation works to transform the practice of public health through strategic and engaged grantmaking. Programs funded by the Foundation build the capacity and stature of the public health workforce, improve public health infrastructure, and advance the distribution and relevancy of information and data in the field. For more information, visit www.debeaumont.org.



The **Colorado Health Foundation** works to make Colorado the healthiest state in the nation by ensuring that all Colorado kids are fit and healthy and that all Coloradans achieve stable, affordable and adequate health coverage to improve their health with support from a network of primary health care and community services. To advance our mission, the Foundation engages the community through grantmaking, public policy and advocacy, private sector engagement, strategic communications, evaluation for learning and assessment and by operating primary care residency training programs. For more information, please visit www.ColoradoHealth.org.



The **Episcopal Health Foundation** (EHF) believes all Texans deserve to be healthy. EHF is committed to transform the health of our communities by going beyond just the doctor's office. By providing millions of dollars in grants, working with congregations and community partners, and providing important research, we're supporting solutions that address the underlying causes of poor health. EHF was established in 2013 and is based in Houston. With more than \$1.2 billion in estimated assets, the Foundation operates as a supporting organization of the Episcopal Diocese of Texas and works across 57 Texas counties. #HealthNotJustHealthcare



Interact for Health is building healthy communities for all people. We serve as a catalyst for health and wellness by promoting healthy living through grants, education, research, policy, and engagement. Interact for Health is an independent foundation that serves 20 counties in Ohio, Kentucky, and Indiana. For more information, visit www.interactforhealth.org.













The Kresge Foundation is a \$3.6 billion private, national foundation that works to expand opportunities in America's cities through grantmaking and social investing in arts and culture, education, environment, health, human services, and community development in Detroit. In 2015, the Board of Trustees approved 371 grants totaling \$125.2 million, and nine social investment commitments totaling \$20.3 million. For more information, visit kresge.org.

Strengthening the community's health has been the focus of the **Mid-lowa Health Foundation** (MIHF) since it began in 1984. The Foundation's mission is to serve as a catalyst and partner for improving the health of our community's most vulnerable people. MIHF's HealthConnect strategic priority strives to connect non-traditional partners with the mutual goal to create opportunities and reduce social barriers to ensure healthy development for our most vulnerable children and youth. Mid-lowa Health Foundation commits resources to improving health in greater Des Moines, lowa.

Recognizing a special commitment and responsibility to its community and to its state, the Robert Wood Johnson Foundation (RWJF) established the **New Jersey Health Initiatives** (NJHI) program more than 25 years ago to honor the philanthropic legacy of RWJF's founder, Robert Wood Johnson. Like the rest of the nation, New Jersey faces an array of challenges that prevent those working and residing in the state from living the healthiest life possible, and RWJF, through NJHI's grantmaking programs, is committed to supporting initiatives that address those problems in the state. NJHI's mission mirrors that of the Robert Wood Johnson Foundation — to improve the health and health care of all Americans. NJHI does this by striving to build a Culture of Health right here in New Jersey, the Foundation's home state, that will enable all to live longer, healthier lives now and for generations to come. For more information, visit www.njhi.org.

Telligen Community Initiative (TCI) works to provide financial support to projects and organizations that strive to improve the health of communities. TCI's overall goal is to ensure opportunities for health are available and accessible to everyone. Our vision is to empower organizations and citizens to improve their individual and overall community health. Our mission is to initiate and support innovative and forward-looking health-related projects aimed at improving health, social well-being and educational attainment. The foundation provides funding to health-related projects and organizations in Colorado, Illinois, lowa, and Oklahoma.

For more than 40 years the **Robert Wood Johnson Foundation** has worked to improve health and health care. We are working with others to build a national Culture of Health enabling everyone in America to live longer, healthier lives. For more information, visit www.rwjf.org. Follow the Foundation on Twitter at www.rwjf.org/twitter or on Facebook at www.rwjf.org/facebook.

The **W.K. Kellogg Foundation** (WKKF), founded in 1930 as an independent, private foundation by breakfast cereal pioneer, Will Keith Kellogg, is among the largest philanthropic foundations in the United States. Guided by the belief that all children should have an equal opportunity to thrive, WKKF works with communities to create conditions for vulnerable children so they can realize their full potential in school, work and life. The Kellogg Foundation is based in Battle Creek, Michigan, and works throughout the United States and internationally, as well as with sovereign tribes. Special emphasis is paid to priority places where there are high concentrations of poverty and where children face significant barriers to success. WKKF priority places in the U.S. are in Michigan, Mississippi, New Mexico and New Orleans; and internationally, are in Mexico and Haiti. For more information, visit www.wkkf.org.