

Texas Health Community Impact

# 2025-2026 Request for Proposals (RFP)



# Tarrant Region



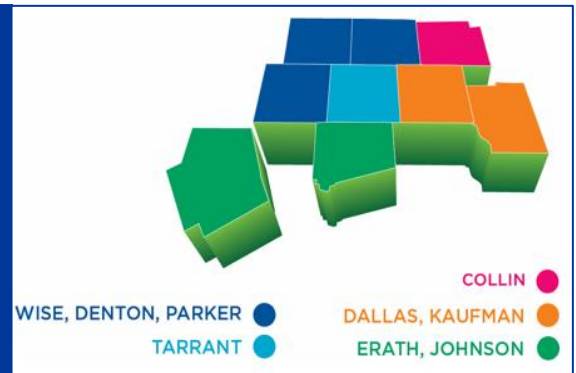
## ABOUT TEXAS HEALTH

As the health system that cares for more North Texans than any other provider, Texas Health Resources is committed to delivering support through programs and services that help lead to measurable and sustainable community improvements. We serve as a catalyst to transform lives by investing in the vision of a healthier future for our communities. We believe where you live should not play a major role in your health and well-being. Texas Health Community Hope works to proactively address health disparities and the social and environmental conditions that affect overall health.

Texas Health Community Impact (THCI), a division of Texas Health Community Hope, invests in local organizations that join forces to creatively tackle barriers impacting a community's health and well-being. This outcomes-focused approach seeks to address health disparities identified as social determinants of health in specific ZIP codes. THCI's aim is to help identify and innovatively address the root cause of health disparities before they develop into poor health outcomes. Considered upstream, these approaches combat health inequities by implementing solutions to reduce the negative impact of [social determinants of health](#).

**For the 2025-2026 grant cycle, THCI is investing a total of \$5 million in grants across its five regions, which spans nine counties.**

Groups seeking to work collaboratively on upstream approaches to address priorities identified in each region are encouraged to apply for this competitive funding opportunity.



**Proposed solutions should align with the Texas Health Community Health Improvement guiding principles:**

- View our communities through a health equity lens
- Use data to target underserved populations
- Meet people where they live, work, play, and pray
- Facilitate care for the whole person
- Innovate

## TEXAS HEALTH COMMUNITY IMPACT FUNDING OPPORTUNITY

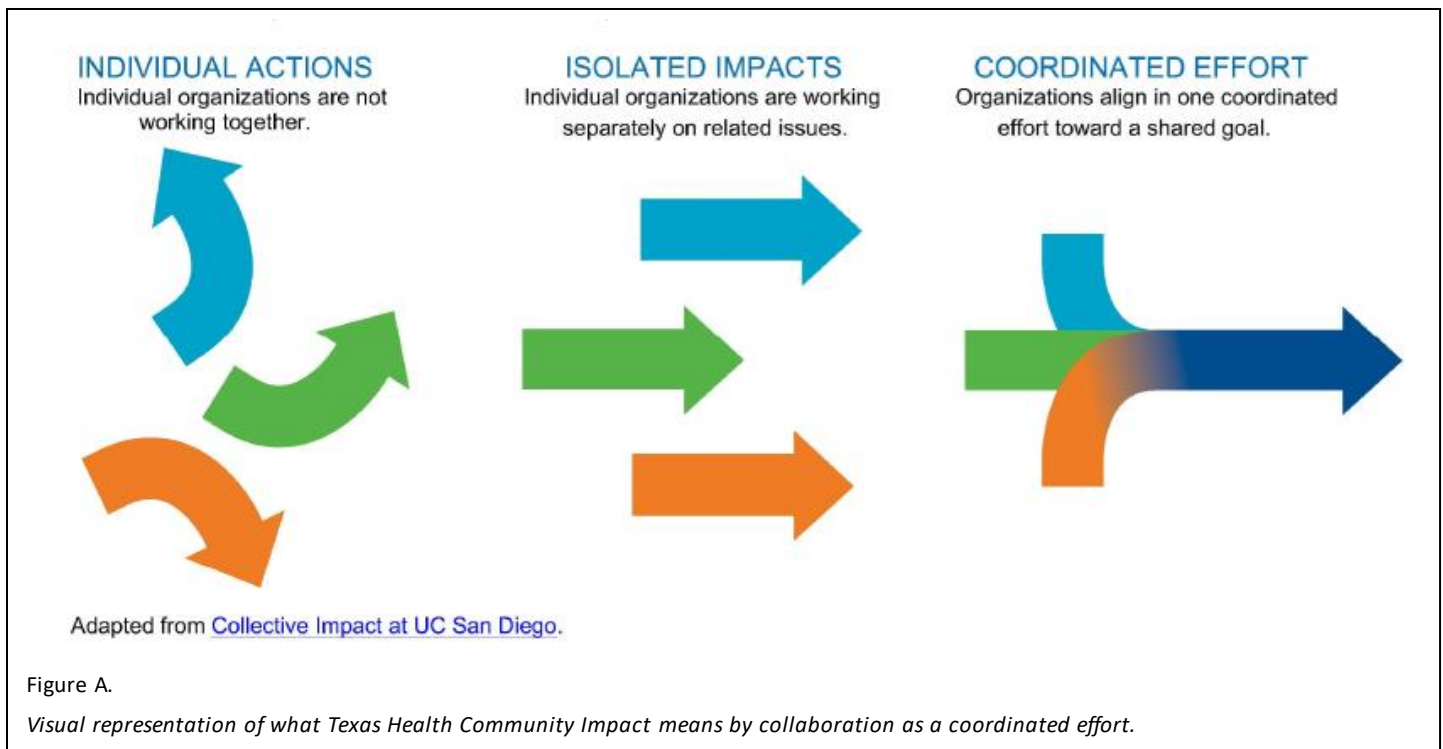
<b>Funding Opportunity:</b>	Texas Health Community Impact 2025-2026 Grant Cycle <b>Tarrant Region</b>
<b>RFP Release Date:</b>	June 15, 2024
<b>Deadline to Submit Questions:</b>	July 24, 2024, by 4 p.m. Central Daylight Time (CDT)
<b>Deadline to Submit Application:</b>	Aug. 1, 2024, by 3 p.m. CDT
<b>Total Funding Available:</b>	<b>Up to \$1,250,000</b>
<b>Estimated Number of Awards:</b>	3
<b>Project Period:</b>	Jan. 1, 2025, to Dec. 31, 2026

## KEY REQUIREMENTS

Applications must fulfill three key requirements: (1) Demonstrate a collaborative effort between two or more organizations, (2) Propose an innovative approach, and (3) Align with strategic priorities.

### Collaboration

Collaboration means working together to address systemic problems keeping the community and equity at the center. According to the National Network for Collaboration, approaches that “bring individuals, agencies, organizations, and community members” together to generate solutions for current and emerging problems collectively are at the core of collaboration. Collaborative approaches integrate service offerings, building meaningful connections between agencies to eliminate gaps in community services. As indicated in Figure A, collaboration involves multiple organizations aligning efforts and working collectively toward a shared goal.



Each proposed collaboration will identify a lead organization to submit the proposal for funding, coordinate project activities, manage budget / finances, oversee reporting, and serve as the primary point of contact with THCI.

Lead agencies are encouraged to partner with organizations that possess strong local ties to the community.

### Innovation

According to the Public Health National Center for Innovations (PHNCI), public health innovation is the development and/or implementation of a novel process, policy, product, or program leading to improvements that impact health and equity. Innovations can range from incremental to radical to disruptive and may involve:

- Repurposing of a service or process in a new environment or in a new way
- Addressing the needs of a target population segment with suitable resources
- Making incremental improvements to a program or process to reach more individuals
- A new model or idea to transform or revolutionize the sector

## Strategic Alignment

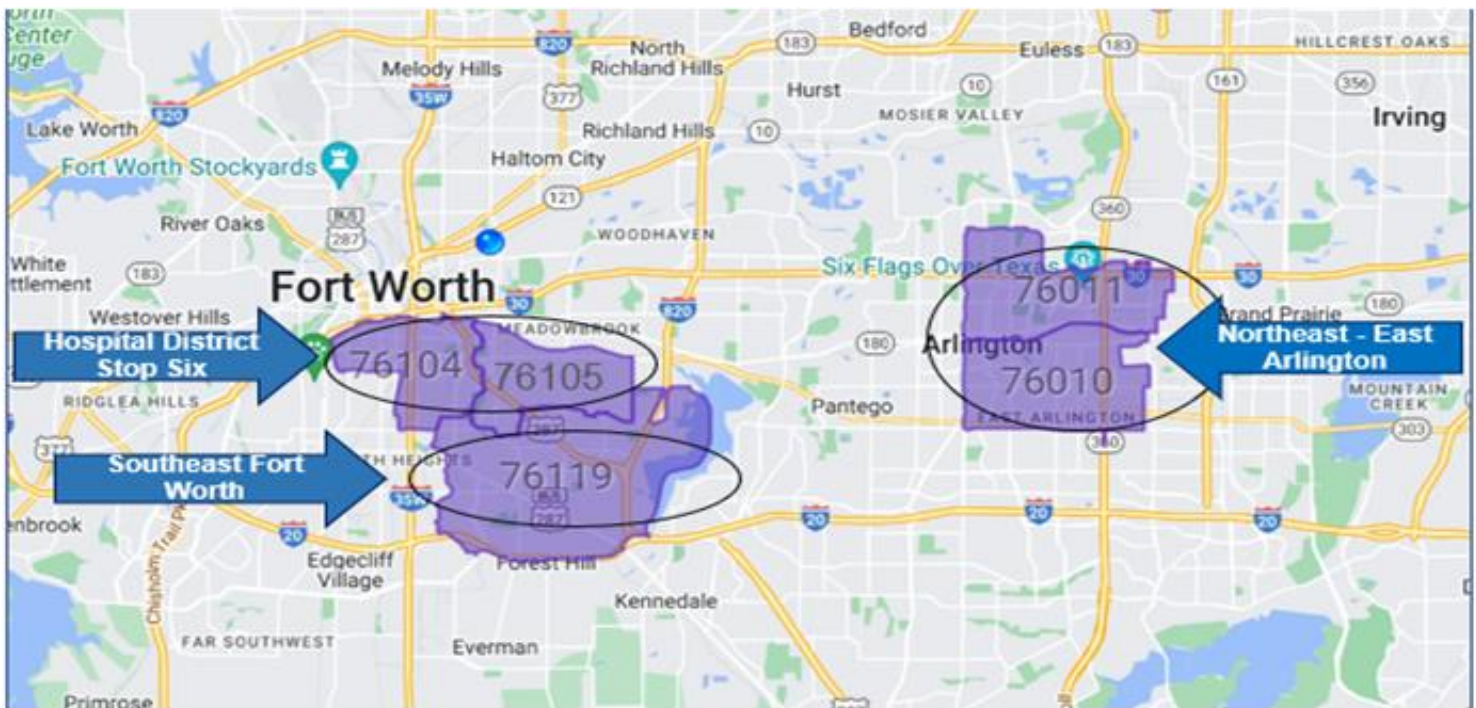
Applicants are expected to detail how the proposed project adequately responds to the strategic priorities identified in the region and fulfills the requirement to serve the target THCI ZIP code areas.

### Proposed projects should:

- Focus on reducing the negative impact of social determinants of health for the underserved
- Incorporate innovative solutions to improve health equity
- Have a solid implementation plan that considers cultural sensitivities and addresses community needs
- Clearly demonstrate the level of involvement and contributions from collaborators, including deliverables and budgetary commitments
- Identify opportunities for Texas Health to engage through volunteering, education, or other options

## TARRANT REGION-SPECIFIC CONTENT

High need ZIP codes in Tarrant County are plentiful, thus presenting many opportunities and challenges regarding health equity and quality of life. Texas Health Community Impact Tarrant Region is targeting five ZIP codes in the 2025-2026 funding cycle- three in Fort Worth and two in Arlington. ZIP codes are grouped into three clusters: Hospital District – Stop Six area (76104 and 76105); Southeast Fort Worth (76119); and East – Northeast Arlington (76010 and 76011). Applicants may select one or more clusters and apply for funding.



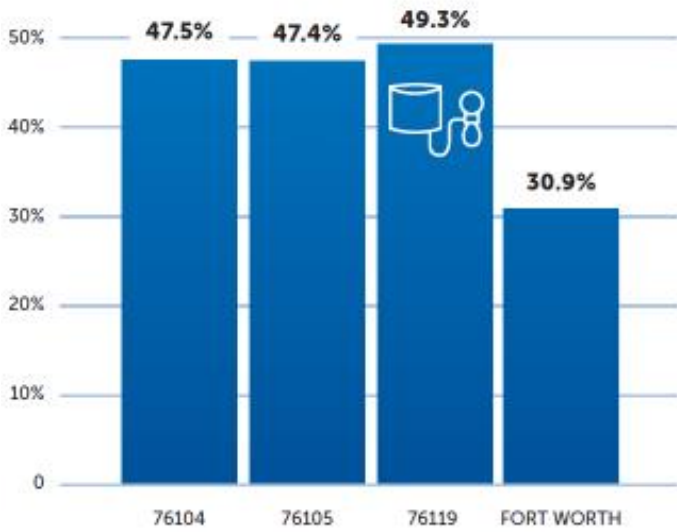
### Fort Worth Data Review

The percentage of residents living with diabetes and/or high blood pressure in the three Fort Worth target ZIP codes is staggering. Almost one in two people in 76119 are living with high blood pressure and prevalence in 76104 and 76105 ZIP codes is not far behind. Additionally, diabetes prevalence in these target ZIP codes is roughly double that of the City of Fort Worth. (See graphs below.)

## TARRANT REGION-SPECIFIC CONTENT (continued)

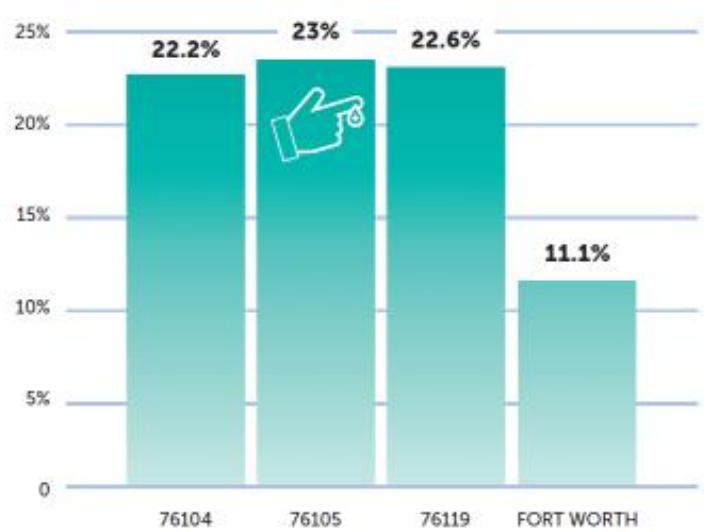
### High Blood Pressure Prevalence

for Targeted Fort Worth ZIP Codes



### Diabetes Prevalence

for Targeted Fort Worth Zip Codes

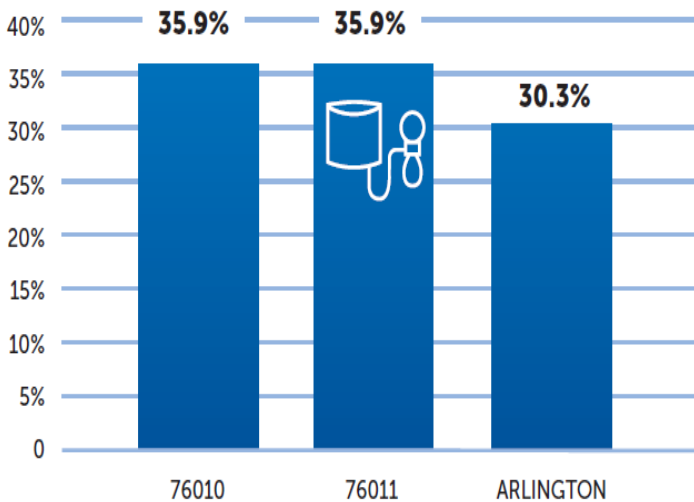


### Arlington Data Review

In Arlington the statistics are not much better. Approximately one in three residents of target ZIP codes 76010 and 76011 has high blood pressure and diabetes prevalence is about one and half times the rate of the City of Arlington. (See graphs below.) None of this data, for Fort Worth or Arlington, accounts for those who go undiagnosed annually.

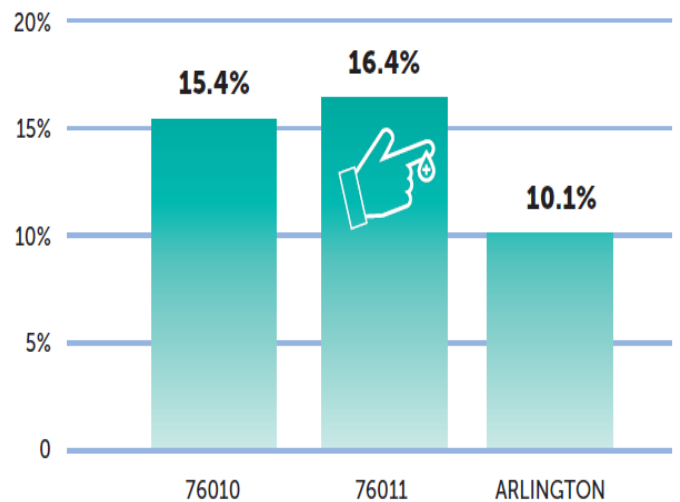
### High Blood Pressure Prevalence

for Targeted Arlington ZIP Codes



### Diabetes Prevalence

for Targeted Arlington Zip Codes



## TARRANT REGION-SPECIFIC CONTENT (continued)

In Tarrant County, the strategic priority is to address social determinants of health to positively impact health outcomes for low-income adults 18 and older living with high blood pressure and/or diabetes ultimately improving overall quality of life.

Please select one or both of the following goals:

### Program Goal 1



Improve health outcomes of low-income adults 18 and older living with diabetes and/or high blood pressure by addressing social determinants of health that contribute to uncontrolled chronic disease indicators in target ZIP code(s) by December 31, 2026.

### Program Goal 2



Reduce risk factors that contribute to chronic disease such as obesity, poor nutrition, stress, etc. in low-income adults 18 and older by addressing social determinants of health that contribute to uncontrolled chronic disease indicators in target ZIP code(s) by December 31, 2026.

### The measures of success for Tarrant Region are as follows:

Tarrant County grant recipients will need to demonstrate the effectiveness of comprehensive program referral and navigation services improving health outcomes for those living with chronic disease (specifically high blood pressure and/or diabetes) or reduce risk factors that contribute to chronic disease while removing barriers and improving access to services/healthcare among low-income adults. Targeted individuals include low-income community residents, especially minorities, who are at risk for chronic disease as identified by integrated screening efforts aimed at addressing social determinants of health that impact chronic conditions.

### Example 1

Provide consistent transportation options to chronic disease management programming as well as healthy food prescription. Year one of Grant: collect data and establish baseline for participants. Year two of grant: improved health outcomes as evidenced by 75% of enrolled individuals having biometric scores under control (blood pressure <140/90 and/or diabetes HbA1C<8 by December 2026.

### Example 2

Address built environment to create safe exercise options for those at risk for chronic disease as evidenced by improved physical fitness scores, biometric scores (increased HDL), improved blood pressure readings, reduction in stress levels etc. by December 2026.

### Hot Tip

We recommend setting educational achievements as well.

Ex: Verbalize correct use of blood pressure monitor and appropriate course of action; verbalize signs and symptoms of low/high blood sugar levels and appropriate course of action.

## TARRANT REGION-SPECIFIC CONTENT (continued)

Because services will target low-income individuals, it is expected that evaluation measures will point to individual-level outcomes, including participation in programmatic activities, completion of prescribed services, changes in clinical measures such as hypertensive blood pressure readings and/or HbA1c scores as well as reported changes in healthy behaviors. Some of these may be measured through surveys, collection of deidentified patient data, and other tracking mechanisms. Applicants must provide a clear and well-developed measurement plan that incorporates a strong data collection process and the necessary requisite tools.

### Tarrant Region Funding Allocation

SAMPLE BUDGET			
Estimated Budget Allocations by ZIP code cluster per goal/objective	FORT WORTH: Hospital District Stop Six (76104-76105)	FORT WORTH: Southeast Fort Worth (76119)	ARLINGTON: Northeast East Arlington (76010-76011)
<p><b>PROGRAM GOAL 1:</b> Improve health outcomes of low-income adults 18 and older living with diabetes and/or high blood pressure by addressing social determinants of health that contribute to uncontrolled chronic disease indicators in target ZIP code(s) by December 31, 2026.</p>	Up to \$415,000	Up to \$415,000	Up to \$415,000
AND/OR			
<p><b>PROGRAM GOAL 2:</b> Reduce risk factors that contribute to chronic disease such as obesity, poor nutrition, stress, etc. in low-income adults 18 and older by addressing social determinants of health that contribute to uncontrolled chronic disease indicators in target ZIP code(s) by December 31, 2026.</p>	Up to \$415,000	Up to \$415,000	Up to \$415,000
<b>Total Budget</b>			<b>\$1,250,000</b>

## EXPECTATIONS OF AWARD RECIPIENTS

**Fulfill MOU Requirements-** Lead applicants of awarded collaboratives and THCI will execute a Memorandum of Understanding (MOU) detailing the following:

- Project Goals, Deliverables, and Outcomes
- Data Sharing Agreement
- Payment Terms
- Reporting Requirements
- Terms and Conditions
- Texas Health Brand Use Agreement

**Engage with THCI-** Lead applicants and respective collaborators should be open to the following engagement opportunities with the THCI team:

- Receiving technical assistance from the THCI Program Manager—including but not limited to regular touch base calls (and as needed), guidance on budget changes or project adjustments, and connections to enhance outcomes
- Participating in learning opportunities either convened or facilitated by Texas Health
- Hosting at least one site visit to highlight progress to key stakeholders associated with THCI
- Presenting the collaborative approach and/or results at meetings convened by or with Texas Health
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## ELIGIBILITY

**Project Implementation-** Applicants must demonstrate the ability to begin implementing activities within four months of MOU execution. *Exceptions may be considered on a case-by-case basis.*

**Prior Applicants-** Organizations that applied for a previous THCI grant cycle and were not awarded are eligible to apply. Organizations previously funded as lead agency for two cycles are not eligible to apply under this funding opportunity.

***The following is a non-exclusive list of potential lead organizations that may be eligible to apply:***

- State, county, city, or township governments
- Independent school districts
- Public or state-controlled institutions of higher education
- Public housing authorities
- Nonprofits having a 501(c)(3) status with the IRS

*Of note: hospital systems can be part of a collaboration but cannot serve as the lead applicant.*

## FUNDING EXCLUSIONS

***The following expenses are not allowable:***

- Indirect costs exceeding 10% of the total collaborative direct costs. (Indirect costs are expenses that do not relate to a specific intervention or service such as overhead, utilities, accounting, and rent support.)
- Endowments or capital campaigns
- Capital expenses, construction projects, and purchase of large equipment. Mission critical equipment purchases may be considered and must be approved by THCI
- Fundraising activities or event sponsorships
- Direct delivery of reimbursable health care services
- Grants or scholarships to individuals
- Advertising reimbursement of pre-award costs



## FUNDING EXCLUSIONS (continued)

- Lobbying activities, including publicity or propaganda, preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body

## PROPOSAL SUBMISSION

All proposals must be submitted through:

<https://www.grantinterface.com/Home/Logon?urlkey=texashealthresources>.

*Late submissions will not be accepted.*

**Please note: The lead applicant will submit one proposal on behalf of the collaborative.**

### 2025-2026 Grant Cycle Proposal Timeline

Date(s)	Activity	Details
June 15, 2024	RFP Released	Proposals submitted through the Texas Health Resources Grants e-Portal at <a href="https://www.grantinterface.com/Home/Logon?urlkey=texashealthresources">https://www.grantinterface.com/Home/Logon?urlkey=texashealthresources</a> .
June 15, 2024 – July 24, 2024	Q&A Period	Questions will be accepted by the THCI team during this period via <a href="mailto:THCI-grants@texashealth.org">THCI-grants@texashealth.org</a> . Please include your proposal title and region in the subject line. Questions will not be accepted after 4 p.m. CDT on July 24, 2024. Webinars will also be available regionally. Additional information can be found at: <a href="https://www.texashealth.org/Community-Health/Community-Impact/2021-RFP-and-Application-FAQs">https://www.texashealth.org/Community-Health/Community-Impact/2021-RFP-and-Application-FAQs</a> .
August 1, 2024	Submission Deadline 3 p.m. CDT	The submission period will close at <b>3 p.m. CDT on Aug. 1, 2024</b> . Proposals will not be accepted after the deadline. <i>*Applicants are responsible for familiarizing themselves with the e-Portal to avoid missing the deadline.</i>
August 1, 2024 – November 1, 2024	Review Process	All submissions will be reviewed, and applicants may be asked to respond to clarifying questions about their proposals. Applicants may be asked to present at the October Leadership Council meeting.  <i>*Presenting to the Leadership Council does not guarantee funding</i>
December 6, 2024	Grant Award and Onboarding	Notification of grant awards is expected to occur by December 6, 2024. Recipients of grant awards will be required to attend an onboarding session and meet with their assigned THCI Program Manager in January of 2025.

### Frequently Asked Questions (FAQs)

- Questions regarding this RFP will be accepted via email to [THCI-Grants@TexasHealth.org](mailto:THCI-Grants@TexasHealth.org) until **4 p.m. CDT on July 24, 2024**. Please use the email subject line “*THCI RFP Questions*” and indicate which region(s) you are inquiring about.
- Information about previously funded projects can be found on our website: <https://www.texashealth.org/Community-Health/Community-Impact>

A Q&A section on the Texas Health Community Impact website will be updated **each Wednesday between June 15 and July 24**: <https://www.texashealth.org/Community-Health/Community-Impact/2021-RFP-and-Application-FAQs>

## Frequently Asked Questions (FAQs) continued

- On June 15, 2024 Texas Health will post the dates for informational webinars, which will provide an overview of the application process and requirements for the THCI 2025-2026 grant cycle.
- Region-specific live Question and Answer (Q&A) sessions will take place in July.

## PROPOSAL QUESTIONS

### 1. Quick Pitch (150 word maximum)

Please summarize your proposed project in 150 words. Be sure to connect the anticipated impact to the social determinants of health.

### 2. Responsiveness to Regional Priorities (300 word maximum)

Explain why your proposal is responsive to the priorities identified for the region in which you are applying. Please include relevant data points to support the need for your proposed project and describe who will benefit from your efforts (i.e., demographic details of target group(s) served, community descriptors).

### 3. Proposed Project (1,000 word maximum)

- a. Describe your proposed project and the anticipated impact on health equity.
- b. Which aspects are innovative (refer to the Innovation section on page 3). Explain how your proposed project will differ from what the collaborative organizations are currently doing. Consider also differences with relation to other organizations doing similar work.
- c. Comment on prior successes, if any, that may contribute to the viability of this project. If this is a new approach, not previously tested, provide concrete insights that support the viability of this project.
- d. Detail participant recruitment efforts (include potential relationships outside of the collaborative or others who may be involved) and describe opportunities and barriers to reaching the target population.

### 4. Collaborative Capacity & Qualifications (1,000 word maximum)

- a. Complete the chart indicating the role and responsibilities of each collaborative member. List the Key Personnel for each collaborator, indicate their time commitment (% of time), and their primary function. Key personnel are individuals who are essential to implementing and carrying out the responsibilities of the project. Key personnel roles may include project coordinator, director, and/or manager.
- b. Be explicit as to why the collaborative is uniquely qualified to do this work and why the chosen lead is the ideal choice to lead the collaborative.
- c. Indicate what actions will be taken to ensure collaborative members are responsive and working effectively toward common goals. Include communication methods and frequency.

### 5. Measures, Impact, & Sustainability (1,000 word maximum)

- a. State the goal(s) of the proposed project. Use the SMART (Specific, Measurable, Achievable, Relevant, Timely) or SMARTIE (Specific, measurable, Achievable, Relevant, Timely, Inclusive, Equitable) format.
- b. Provide proposed outputs and outcomes for each goal and explain how they will be measured.
- c. Describe how the collaborative will assemble the results of its collective work. Specify progress measurement plans and methods. *Note: If awarded, THCI's third-party evaluator will assist with identification of key metrics and collection methods for evaluation purposes.*
- d. Discuss how sustainability efforts will be integrated throughout the project.
- e. Comment on what is envisioned for this project in the future and the relationship with collaborators.

### 6. Project Promotion, & Funder Acknowledgment (500 word maximum)

- a. Detail efforts to promote the project and build awareness in your area and community. Include communication vehicles and/or outlets.
- b. Explain how the collaborators will acknowledge Texas Health's support. (Ex: a sign with "XYZ Program funded by Texas Health Resources.")
- c. Describe how Texas Health might engage with the project (i.e., volunteering, sharing expertise).

## PROPOSAL QUESTIONS (continued)

## 7. Attachments/Uploaded Items

- a. Workbook with budget templates for the lead applicant and the collaborators, and a logic model template to encompass all project elements for the collaborative:
  - *Download the template from the e-Portal.*
  - *Complete and upload to the application form on the e-Portal*
- b. Letter of Commitment – Include one letter of commitment with signatures from all collaborators.

## RESPONSIVENESS

Proposal responsiveness will be assessed using the following criteria:

### 1. Need and Opportunity Aligns with Priorities and is Collaborative (10%)

Strategic alignment with community needs and THCI priorities. Demonstrated engagement of diverse capable partners in the project plan. *A broad focus or an unclear connection to the region's priorities and inexperienced partners will not score highly.*

### 2. Potential for Impact (35%)

SMART or SMARTIE goals outline expected outputs, outcomes, and demonstrate potential to impact the target community(ies) served. The Management Center has some great resources on writing SMART and/or SMARTIE Goals. Please visit their site for more information and printable worksheets.

<https://www.managementcenter.org/resources/7-tips-getting-started-goal-setting/>

### 3. Innovation (25%)

Use of innovative or novel practices and approaches. *Proposals seeking to continue or simply expand existing services without any defined innovation will not score well.*

### 4. Soundness of Project (20%)

Strong, realistic implementation plan, targets, and timeline. Clear vision for how goals and outcomes will be achieved. Demonstrated capacity to launch proposed activities successfully within four months of an executed grant agreement. Evidence of appropriate staffing, partnerships, and budget.

### 5. Promotion of project and acknowledgement of funder (10%)

Proposal identifies several opportunities for funding acknowledgment and dissemination of results.

## RIGHT TO REJECT

Texas Health reserves the right to:

- Reject any or all proposals submitted.
- Request additional information from any or all applicant organizations.
- At their sole discretion, conduct discussions with any applicant organization to ensure full understanding of and responsiveness to the RFP requirements.

Applicant organizations will not be reimbursed for the cost of developing or presenting a proposal in response to this RFP. For administrative purposes, proposals must be submitted through Texas Health's e-Portal. Submission of the proposal does not constitute an obligation to fund. All proposals will be reviewed, and finalists determined solely as described in this RFP.

To routinely assess the outcomes and long-term sustainability of grant projects, Texas Health utilizes external grant evaluators to collect data from Grantees regarding their project. The MOU provided by Texas Health will contain a data sharing agreement further outlining the rights to own and access data arising out of your grant project. Please note that by accepting grant funding from Texas Health, you agree to cooperate with and facilitate transfer of Project related data to our external evaluator. Texas Health reserves the right to change or remove an external evaluator at any time with notice to the Grantee.