

Focus Area Description
Social Determinants of Health Implementation Applications

**** Instructions ****

Types of Applications that Must Include This Document	
<input type="checkbox"/>	Priority health area applications
<input type="checkbox"/>	Social determinants of health planning applications
<input checked="" type="checkbox"/>	Social determinants of health implementation applications

Enter a brief but fully responsive narrative in the blank boxes. These boxes will expand as you type. Use 12-point font.

The Focus Area Description Form should not exceed two pages.

Social Determinants of Health Description

Describe the social determinant problem(s) you are proposing to address.

Focus Area Description
Social Determinants of Health Implementation Applications

Social Determinants of Health Description
State the social determinant problem(s) you propose to address. Explain why you have chosen those social determinant problem(s) and why you think the people who will be affected support your choice. <i>(brief narrative)</i>
Describe the situations and issues you want to address with this proposal. <i>(brief narrative)</i>

**Focus Area Description
Social Determinants of Health Planning Applications**

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<input type="checkbox"/>	Priority health area applications
<input checked="" type="checkbox"/>	Social determinants of health planning applications
<input type="checkbox"/>	Social determinants of health implementation applications

Enter a brief but fully responsive narrative in the blank boxes. These boxes will expand as you type. Use 12-point font.

The Focus Area Description Form should not exceed two pages.

Social Determinants of Health Description

Describe what you know about the social determinant problem(s) in the racial/ethnic group(s) you are proposing to address.

Focus Area Description
Social Determinants of Health Planning Applications

Social Determinants of Health Description
Describe what you know about the social determinants of health in the racial/ethnic group(s) you propose to address. (<i>brief narrative</i>)
Describe the problems, situations, and issues you want to address with this proposal. (<i>brief narrative</i>)

Implementation Worksheet Social Determinants of Health Implementation Applications

** Instructions **

Types of Applications that Must Include This Document	
<input type="checkbox"/>	Priority health area applications
<input type="checkbox"/>	Social determinants of health planning applications
<input checked="" type="checkbox"/>	Social determinants of health implementation applications

This Implementation Worksheet is based on “Promoting Health Equity,” a workbook for community-based organizations seeking to affect the social determinants of health through community-based participatory approaches and nontraditional partnerships. You should refer to the workbook as you complete this Implementation Worksheet; it can be found at www.cdc.gov/nccdphp/dach/chaps/

Enter a brief but fully responsive narrative in the blank boxes. These boxes will expand as you type. Use 12-point font.

The Implementation Worksheet should not exceed 12 pages.

1. Description of Prior Work

Describe the organizations and individuals that participated in preparing your action plan, including how you meaningfully included community members in the planning and decision-making, the strategies you used to engage everyone in the discussion, and how you assessed and built on the group’s resources and capacity.

Describe how your planning group developed its focus on the social determinants of health, including conducting an assessment of the social determinants of health in your community, sharing the assessment with other members of the community, choosing the most important social determinant problem(s) to address first, and identifying a vision, a mission, goals, and objectives to address the selected social determinant problem(s).

Describe how your planning group prepared to address the social determinants of health, such as assessing or mapping the community’s capacity and assets to create change around the selected social determinant problem(s), determining how to use those assets to address the selected social determinant problem(s), and identifying missing skills, capacities, experiences, and resources.

Describe how your planning group developed your action plan to address the selected social determinant problem(s) through policy, systems, and environmental change, including identifying action steps and assigning responsibilities for completing them, letting others in the community know about the action plan, and identifying missing resources.

Clearly justify your action plan. Indicate whether it will build on or expand something that is already working, develop something that people have said they need or want, or use cultural traditions and practices known to work in other communities. Explain why you think your proposed activities will be more successful than past efforts have been.

2. Action Plan Implementation

Provide the indicated information about implementing your action plan.

3. Outcomes

Suggest at least one measure that could be used to indicate whether you were able to successfully implement the activities in your action plan. Examples:

- The number of high schools that contact parents regarding excessive absenteeism before it reaches the definition of truancy. (Based on a policy change to address education as the selected social determinant problem.)
- The number of county social service workers hired from populations of color and American Indians. (Based on a systems change to address racism and discrimination as the selected social determinant problem.)

Suggest at least one measure that could be used to indicate whether your activities had their desired outcome. Examples:

- The number of high school students who are suspended for truancy. (Based on an objective to increase the graduation rate to address education as the selected social determinant problem.)
- The percentage of survey respondents who report positive experiences with county social service programs. (Based on an objective to increase the number of county social service workers who treat populations of color and American Indians respectfully to address racism and discrimination as the selected social determinant problem.)

Note: Your action plan should be placed after this Activity Worksheet in your application. You may use the Three-Year Action Plan in this RFP, or you may include your action plan in another format.

Implementation Worksheet
Social Determinants of Health Implementation Applications

1. Description of Prior Work
Describe the planning group that participated in preparing your action plan. <i>(brief narrative)</i>
Describe how the planning group focused on the social determinants of health. <i>(brief narrative)</i>
Describe how the planning group prepared to address the social determinants of health. <i>(brief narrative)</i>
Describe how the planning group developed the action plan to address the selected social determinant problem(s). <i>(brief narrative)</i>
Explain why you believe your action plan will improve the community's health status in the selected social determinant problem(s). <i>(brief narrative)</i>
2. Action Plan Implementation
Describe what has already been done to implement your action plan. <i>(brief narrative)</i>
If there already are existing efforts related to your action plan, describe how your action plan will complement and not duplicate existing efforts. <i>(brief narrative)</i>
Describe how your community partners will provide input on the implementation of your action plan. <i>(brief narrative)</i>
Describe any technical assistance you will need to implement your action plan. <i>(brief narrative)</i>
3. Outcomes
Identify one or more measures that would indicate whether you were able to successfully implement the activities in your action plan. <i>(brief narrative)</i>
Identify one or more measures that would indicate whether your activities had their desired outcome. <i>(brief narrative)</i>

Intent to Apply Form

**** Instructions ****

Types of Applications that Must Include This Document
All potential applicants are requested to submit the Intent to Apply Form.

Submitting the Intent to Apply Form is not binding, if you decide later not to submit an application, or if you decide to submit a different type of application.

Enter the indicated information about the lead organization and the contact person.

Indicate which racial/ethnic groups you plan to work with by typing an X .

Indicate which of the three types of application you plan to submit by typing an X:

- Priority health area application
- Social determinants of health planning application
- Social determinants of health implementation application

If you plan to apply for a priority health area application, indicate which priority health area(s) you plan to work on by typing an X.

Type in a description of the geographic area of Minnesota in which you plan to work. This could include counties, cities, or neighborhoods.

**** ATTENTION: OMMH ****

**Minnesota
Eliminating Health Disparities Initiative**

Intent to Apply Form	
Lead Organization's Name	
Address	
Contact Person's Name	
Title	
Phone	
Fax	
E-mail address	
Racial/Ethnic Groups (check all that apply)	
We plan to work with the following population(s):	
<input type="checkbox"/>	African/African American
<input type="checkbox"/>	Asian/Pacific Islander
<input type="checkbox"/>	Hispanic/Latino
<input type="checkbox"/>	American Indian
Application Type (check one)	
<input type="checkbox"/>	We plan to apply for a priority health area grant, to work on the following priority health area(s) (check all that apply)
<input type="checkbox"/>	Breast and Cervical Cancer Screening
<input type="checkbox"/>	Diabetes
<input type="checkbox"/>	Heart Disease and Stroke
<input type="checkbox"/>	HIV/AIDS and Sexually Transmitted Diseases
<input type="checkbox"/>	Immunizations for Adults and Children
<input type="checkbox"/>	Infant Mortality
<input type="checkbox"/>	Teen Pregnancy Prevention
<input type="checkbox"/>	Unintentional Injury and Violence
<input type="checkbox"/>	We plan to apply for a planning grant to work on the social determinants of health.
<input type="checkbox"/>	We plan to apply for an implementation grant to work on the social determinants of health
We plan to work in the following geographic area(s) of Minnesota:	
<input type="checkbox"/>	

Other Funding Sources Form

** Instructions **

Types of Applications that Must Include This Document	
<input checked="" type="checkbox"/>	Priority health area applications
<input checked="" type="checkbox"/>	Social determinants of health planning applications
<input checked="" type="checkbox"/>	Social determinants of health implementation applications

There is no page limit for the Other Funding Sources Form. Use 12-point font.

1. Other Grants from the Minnesota Department of Health

Enter the indicated information about any other grants you currently receive from the Minnesota Department of Health. If you do not receive any, type “None” in the first row.

Additional rows for additional grants and funding sources can be added to the table by clicking in the last column in the last row of the table and hitting the tab key.

2. Other Funding Sources for Related Activities

Enter the indicated information about any other funding sources you have for related activities. If you do not have any, type “None” in the first row.

Additional rows for additional grants and funding sources can be added to the table by clicking in the last column in the last row of the table and hitting the tab key.

3. Grant Coordination

Describe how your proposed activities will expand on your current related activities. The box will expand as you type. If you do not already have any activities related to your proposed activities, enter “Not Applicable.”

Other Funding Sources Form

1. Other Grants from the Minnesota Department of Health			
Name of Grant	Grant Amount	Grant Purpose	MDH Grant Manager

2. Other Funding Sources for Related Activities			
Name of Funder	Grant Amount	Grant Purpose	Grant End Date

3. Grant Coordination
Explain how your proposed activities will expand on what you are already doing. (<i>brief narrative</i>)

Planning Worksheet Social Determinants of Health Planning Applications

** Instructions **

Types of Applications that Must Include This Document	
<input type="checkbox"/>	Priority health area applications
<input checked="" type="checkbox"/>	Social determinants of health planning applications
<input type="checkbox"/>	Social determinants of health implementation applications

This Planning Worksheet is based on “Promoting Health Equity,” a workbook for community-based organizations seeking to affect the social determinants of health through community-based participatory approaches and nontraditional partnerships. Refer to the workbook as you complete this planning worksheet; it can be found at www.cdc.gov/nccdphp/dach/chaps/. The five steps below are presented in sequential order, but your Planning Worksheet may have overlapping activities and completion dates.

Additional rows for additional activities can be added to the tables by clicking in the last column in the last row of the table and hitting the tab key; the boxes will expand as you type. Use 12-point font.

The Planning Worksheet should not exceed 12 pages.

Step 1. Forming Your Planning Group

See page 34 in the workbook.

Identify and describe activities that will answer the following questions:

- Who else needs to be at the table for your discussion? How will you expand the partnership list you have included on the Community Involvement, Collaboration, and Partnership Form? How will you ensure that your planning is reflective of the population being addressed?
- How will you meaningfully incorporate community members in the discussion?
- What strategies will you use to engage everyone in the discussion?
- How will you assess and build on the planning group’s resources and capacity?
- Will you revisit the planning group’s membership later on in your planning process?

Step 2. Focusing Your Planning Group on the Social Determinants of Health

See page 42 in the workbook.

Identify and describe activities that will answer the following questions:

- How will your planning group conduct an assessment of the social determinants of health in your community?
- How will you share your planning group's assessment with other members of the community?
- How will your planning group decide on the most important social determinant problem(s) to address first?
- How will your planning group use the assessment to identify a vision, a mission, goals, and objectives to address the selected social determinant problem(s)?

Step 3. Building Your Community's Capacity to Address the Social Determinants of Health

See page 54 in the workbook.

Identify and describe activities that will answer the following questions:

- How will you assess or map the community's capacity and assets to create change around the selected social determinant problem(s)?
- How will you ensure that cultural assets and strengths are considered?
- How will you determine how those assets can be used to address the selected social determinant problem(s)?
- What needed skills, capacities, experiences, and resources are missing? How could they be secured?

Step 4. Selecting Your Approach

See page 58 in the workbook.

Your planning group may choose from a number of approaches to address the selected social determinant problem(s), such as consciousness raising, community development, social action, health promotion, or media advocacy. However, you will only be eligible for EHDI funding to implement your action plan if you choose to address your selected social determinant problem(s) through policy, systems, and environmental change. (*See page 70 in the workbook.*) If your planning group chooses a different approach, you may still use your EHDI social determinants of health planning grant funds to develop an action plan (step 5) that you can implement with other funding sources.

Identify and describe activities that will answer the following questions:

- Which potential approaches are the most appealing, based on the intuition and experience of the planning group members?
- What are the benefits and drawbacks to the potential approaches?
- Which approaches fit best with the selected social determinant problem(s)?
- To which potential approaches would your planning group's and community's assets best contribute?

Step 5. Developing Your Action Plan

See page 76 in the workbook.

Identify and describe activities that will answer the following questions:

- What are your planning group's goals and objectives to address the selected social determinant problem(s)?
- What are the specific action steps?
- Who will be responsible for the completion of each action step?
- What is the timeframe for completing each action step?
- Who else in the community should know about the action plan?
- What resources are needed to implement the action plan?
- What resources do you have available and what resources will you need?
- How will you assess progress?
- How will you assess impact and outcomes?

Planning Worksheet
Social Determinants of Health Planning Applications

Step 1. Forming Your Planning Group		
What activity will be done?	Who will do the activity?	When will the activity be completed?
How will you know when this step is complete?		

Step 2. Focusing Your Planning Group on the Social Determinants of Health		
What activity will be done?	Who will do the activity?	When will the activity be completed?
How will you know when this step is complete?		

Step 3. Building Your Community's Capacity to Address the Social Determinants of Health		
What activity will be done?	Who will do the activity?	When will the activity be completed?
How will you know when this step is complete?		

Step 4. Selecting Your Approach		
What activity will be done?	Who will do the activity?	When will the activity be completed?
How will you know when this step is complete?		

Step 5. Developing Your Action Plan		
What activity will be done?	Who will do the activity?	When will the activity be completed?
How will you know when this step is complete?		

Staffing Narrative

** Instructions **

Types of Applications that Must Include This Document	
<input checked="" type="checkbox"/>	Priority health area applications
<input checked="" type="checkbox"/>	Social determinants of health planning applications
<input checked="" type="checkbox"/>	Social determinants of health implementation applications

TANF

If you are applying for a priority health area grant that includes both TANF funds (for teen pregnancy prevention) and general funds (for one or more of the other priority health areas), you must clearly indicate for each position you describe whether the staff person will be funded by TANF or by general funds.

Include a narrative that addresses the following topics. The Staffing Narrative should not exceed four double-spaced pages. Use 12-point font and at least one-inch margins.

1. Describe the qualifications of existing staff who will be working on EHDI activities. For each staff person, include the following elements:
 - role in working on your proposed activities
 - educational background and previous experiences with activities related to reducing health disparities
 - amount of time that will be spent on EHDI activities (i.e., the full-time equivalent)
2. Describe the plans to recruit and hire additional staff for this grant, including a timeline for hiring the new staff. For each position, include the following elements:
 - role in working on your proposed activities
 - the preferred qualifications for education and previous experience with activities related to reducing health disparities
 - amount of time that will be spent on EHDI activities (i.e., the full-time equivalent)
3. Indicate the position that will serve as the EHDI coordinator. This position does not need to be full-time, but will be responsible for acting as the primary contact for your grant, coordinating all grant activities, and working with us to carry out your proposed activities.
4. Identify your organization's staff who will be responsible for payroll, accounting, and administrative functions. Briefly describe their training and experience.

Target Population Narrative

**** Instructions ****

Types of Applications that Must Include This Document	
<input checked="" type="checkbox"/>	Priority health area applications
<input checked="" type="checkbox"/>	Social determinants of health planning applications
<input checked="" type="checkbox"/>	Social determinants of health implementation applications

EHDI grant funds must be used to address the health needs of the following racial/ethnic groups in Minnesota:

- African Americans and African immigrants and refugees,
- American Indians living on and off reservations,
- Asian Americans, including immigrants and refugees from Southeast Asia, and
- Hispanics/Latinos, including immigrants and refugees

Include a narrative that addresses the following topics. The Target Population Narrative should not exceed two double-spaced pages, except that data tables do not need to be double-spaced. Use 12-point font and at least one-inch margins.

1. Briefly describe the people you propose working with. Include where they live in Minnesota, what their lives are like, and any other information that will help the reviewers understand who you will work with and how you what you propose doing relates to the people. Identify the age group(s) you propose to work with.
2. Provide data/numbers on the total number of people in the community, their ages and gender, and to the extent available, information about their health status.
3. Describe the strengths and assets of the people and the community you propose to work with.

Three-Year Action Plan

** Instructions **

Types of Applications that Must Include This Document	
<input checked="" type="checkbox"/>	Priority health area applications
<input type="checkbox"/>	Social determinants of health planning applications
<input checked="" type="checkbox"/>	Social determinants of health implementation applications (optional)

If you are submitting a priority health area application, complete one Three-Year Action Plan for each activity you are proposing to implement and place it behind the Activity Worksheet for that activity in your application.

If you are submitting a social determinants of health implementation application, you may use the Three-Year Action Plan, or you may include your action plan in another format. Your action plan must address your selected social determinant problem(s) through policy, systems, and environmental changes.

The Three-Year Action Plan should not exceed four pages.

Identify the key action steps that will be needed to plan and implement your activity over the three-year grant period. Be as specific as possible as you identify major steps, but you do not need to include a detailed workplan for each major step. You should provide enough detail to demonstrate that you have thought through what it will take to successfully implement your proposed activity. Your plan should indicate that you will be ready to start delivering services or working towards a policy, systems, or environmental change within three months of receiving a grant award.

Additional rows for additional key action steps can be added to the table by clicking in the last column in the last row and hitting the tab key.

In the first column of the action plan, list each key action step and other related activities related to the key action step. Briefly explain what will be done.

In the second column, indicate who will do the steps and activities. This may be your staff, contractors, partners, groups, or others.

In the third column, specify the anticipated completion date(s) for the steps and activities.

In the fourth column, indicate the measure or documentation that will be used to indicate that the key action step has been completed. Examples of measures or documentation include: minutes from a critical meeting; reported findings from a community assessment; and number of people trained.

Three-Year Action Plan

Three-Year Action Plan			
What key action step and related activities will be done?	Who will do the key action step and related activities?	When will the key action step and related activities be completed?	How will the completion of the key action step be measured?