

DEVELOPING QUALITY APPLICATIONS for *Community Health Center Funding*



Rising healthcare costs, increasing numbers of the uninsured, and funding reductions each present a challenge to local health departments (LHDs) trying to meet their obligation to ensure access to care. Key to meeting people's needs and improving community health is the ability of an LHD to develop high-quality funding applications. Obtaining federal funds poses as much of a challenge as obtaining funds from private or other public sources. The competitive nature of most federal funding opportunities requires applicants to go above and beyond the defined grant guidelines.

The President's Initiative to Expand Health Centers is one such funding opportunity. It provides significant monetary resources to address access to care, but it is extremely competitive. This issue brief focuses on LHDs applying for Federally Qualified Health Center (FQHC) status and community health center, or 330, funding. Section 330 of the Public Health Service Act authorizes federal grant funding opportunities for organizations to provide care to underserved populations. This enormous program has been working since 2001 to increase by 1,200 the number of new or expanded FQHC sites and to serve six million additional people. FQHCs are uniquely eligible for various funding opportunities that require them to be located in or providing services to a designated medically underserved area or population, have a consumer board governance structure, and provide health services to people in various stages of the life cycle regardless of their ability to pay. There are several methods of receiving FQHC status:

- Apply to the Bureau of Primary Health Care to receive 330 funding as a new access point.
- Apply to be an FQHC look-alike and apply later for FQHC funding.

- Collaborate with an existing FQHC to apply as an expansion site.

The National Association of County and City Health Officials (NACCHO), with assistance from LHDs who have experienced success in obtaining federal funding, presents the following guidelines to assist health departments in successfully applying for federal grant opportunities. In addition to incorporating the experiences of successful applicants, NACCHO borrowed tips from other organizations' guidance documents (see the resource list at the end of this document).

WRITING THE APPLICATION

For LHDs, the 330 funding proposal should follow the natural progression of a needs assessment, inform the strategic planning, and lead to a solid health plan and service delivery model. The application should outline a rational business plan for implementing the particular service delivery model proposed, with all activities supported by a practical budget. Following this course should ensure a clearly written proposal. In addition, the following tips and strategies taken from various documents, presentations, and discussions with personnel at funded health departments offer further recommendations to strengthen your proposal.

1. *Organize and structure grant applications in accordance with the Program Information Notice or funding announcement.*

- Follow the guidance explicitly and pay attention to each piece of the application to ensure comprehensiveness. All pages need to be numbered and a table of contents should be included for all sections and attachments, with references to attachments clearly stated within the text.
- Successful applicants carefully follow all funding agency criteria.

This facilitates the reviewer's job and boosts application scores.

- Reviewers read multiple applications; assist them with a clear table of contents, pagination, section headers, and other details to ease them in identifying information.
- Refer the reader to specific graphs or visuals in appendixes and make sure to reference the page number.
- Think of each section individually. The reviewer should be able to make sense of each section alone without reading the entire application for context. Repetition across different sections of the application aids the reviewer in putting the pieces together.
- Refer to the corresponding goals and objectives in the health and business plans throughout the narrative so that the reviewer can see the correlations between the goals and implementation.
- Create a checklist for each section to make sure that all information is included for a thorough application.

2. *Have a plan for coordinating the various partners who could potentially contribute to drafting the application.*

Some LHDs use a "divide and conquer" approach, hiring a grant writer to coordinate the application with assistance from LHD staff. However the application preparation process is handled, it is critical to include LHD staff in describing the local perspective for the application.

3. *Garner crucial community support.*

Community stakeholders are a valuable asset and can provide support when conducting a needs assessment. Beyond the initial stages, these individuals can contribute input into developing the health plan and selecting board members. Community

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groups often have community-specific data or have focused their efforts on the needs of a particular group in the community, and this existing data can be incorporated into the application.

Applicants must gain community support prior to beginning the grant application process; involvement in the planning stages of the grant will enhance the health center's capacity to address the needs of the community. Letters of support from the community and CHC should be personalized and specific, rather than form letters that may be vague. The letters should demonstrate the health department's capacity to address the needs of the underserved populations in the community by overcoming such barriers as the daily hours services are provided, the proximity of services to public transportation, and issues of trust between marginalized populations and their potential caregivers.

When applying for Federally Qualified Health Center (FQHC) funding, if there is an existing community health center (CHC), collaborate with their board of directors and take advantage of their investment in the application process. Although the concept of a board of directors may be foreign to some LHDs, board members can provide contact with valuable community members, and can assist with letters of community support. The board can also serve as an external review committee for the application. Make sure to demonstrate how the existing CHC advisory board was involved during the strategic planning process.

4. *Begin the process early; time is of the essence.*

Successful applicants began the needs assessment—gathering community support and creating the basis for the health plan—prior to the release of the official guidance. They also formed a committee, and pre-selected the key players to take part in the process. LHD grant application coordinators can establish a timeline and assign the key participants a role in the development of the grant. For example, identify the one person responsible for writing the grant and pulling all of the components together, one person to convene a committee removed from the process to review

ADVICE from the field

“We worked with our management team to disseminate application requirements and deadlines and used one county health department author to write any missing pieces, as well as [to] edit and finalize the entire application.”

—*Hernando County (FL) Health Department*

and critique, and an individual responsible for requesting and coordinating letters of support.

5. *Clearly identify and demonstrate need.*

When identifying need and defining the service area and target population, make sure all goals and objectives of the application relate to health disparities, access to care, and barriers to care. Describe any special populations in

your community that would benefit from services, and focus on any recent changes that have increased the size of these specific populations and the associated health issues. It is important to demonstrate clear knowledge of the health of the target population in terms supported by qualitative and quantitative data.

6. *Realize that the Governance and Readiness sections are often the most challenging to both the grant writer and reviewer.*

The governing board must be in compliance with applicable 330 regulations and BPHC policies representing the target population in terms of income and ethnicity.

- Provide a detailed, ongoing plan for recruitment and retention and provide multiple opportunities during the year for training and recruitment.
- Demonstrate how the governance regulations will be met in combination with the co-applicant's board. Include a signed co-applicant agreement demonstrating who is responsible for what and how compliance is assured.
- Ensure that the budget clearly identifies what resources will be used for supporting board activities.
- Utilize your Primary Care Association (PCA) to provide you with technical assistance or to direct you to a health department that has previously applied.
- Provide a clear explanation to the federal reviewer. The reviewer is often not as clear about governance policies with relation to LHDs versus community governance structures.

7. *Utilize outside resources.*

There are a variety of external resources available for LHDs to assist them in preparing quality applications.

- Use the contact listed in the grant announcement if there is any uncertainty regarding what is expected in the application.
- Approach the state PCA for technical assistance during the

ADVICE from the field

“After we had applied four times ... we contacted [our] senators and had them lobby for us. They wrote letters of support. We also talked with our PCA, and contracted with a law firm recommended to us by the National Association of Community Health Centers that helped us with semantics and governance issues.”

—*Hennepin County (MN) Primary Care*

NACCHO is the national organization representing local public health departments. NACCHO supports efforts that protect and improve the health of all people and all communities by promoting national policy, developing resources and programs, seeking health equity, and supporting effective local public health practice and systems.



process. In some cases, PCAs are also useful after applications have been rejected to investigate reasons the LHD did not receive the grant, and to lobby for support the second or third time around. The PCA can

Other items to include in the business narrative are managed care arrangements in the community and their effect on the organization, as well as other factors that may influence access to care.

Some LHDs work with other FQHCs in their state when preparing their applications. Others utilize law firms or consulting groups that are familiar with the semantics and requirements for FQHC funding opportunities.

direct you to individuals in your state that have gone through the process and would be willing to act as a coach or mentor.

- Consider a workshop with the National Association of Community Health Centers (NACHC). NACHC coordinates 330 Proposal Writing Workshops. A number of applicants have found these three-day intensive workshops to be helpful. In addition to providing explicit guidance on every part of the application—from strategic planning to governance to budget and business plans—the workshops also give participants the

For Hernando County Health Department in Florida, the regional planning council, WellFlorida, “assisted in giving direction to the board on how to incorporate, complete written by-laws, and apply for 501(c)(3) status.”

opportunity to network with other applicants, and to learn from shared experiences and insights.

8. *Ensure that the budget requested clearly matches the grant activities.*

Pay special attention to the budget justification, making certain that everything requested in the budget is explained in the narrative. There should be no unexplained budget amounts, and a description of all other sources of funding. Doing the narrative and budget simultaneously is an effective strategy.

9. *Demonstrate how cultural competency is being achieved.*

Successful applicants demonstrate how cultural competency is being achieved within the governing board and staff. Applicants usually describe the various populations in the community that experience cultural barriers to care and provide a detailed plan for eliminating those barriers. Plans include the description of culturally and linguistically appropriate services to be provided, and staff recruitment and retention methods. Simply stating the importance of these concepts is not sufficient. A clear plan must indicate how these components will become an integral part of a clinic’s healthcare services.

10. *Contract with the regional planning council or similar entity for assistance in preparing your application.*

Contracting with the regional planning council has proved to be helpful in gathering and assessing local data, conducting focus groups, formulating the overall narrative, and collating the healthcare plan. Using an outside agency can provide a new and useful perspective.

11. *Acknowledge the reviewer’s perspective*

It is always helpful to acknowledge the federal grant reviewer’s perspective when putting together applications. In the *Guidebook For Federal Grant Reviewers*, reviewers are cautioned against applicants who try and make their “round” program fit into a “square”

HOW EVALUATORS THINK

- Provide evaluators exactly what the RFP asks for, no more and no less.
- Discuss the risk associated with your proposal and how you plan to mitigate it.
- Tailor everything you write to the RFP. All proposal content should be RFP-specific, including resumes and experience.
- Say it simply. Tightly organize the content and present it in simple, declarative sentences.
- Convey logical thinking and conclusions through careful organization of the proposal.
- Assume that the grant reviewer has no knowledge about your particular institution, program, competencies, or collections.

request for proposals. They also take into consideration the adequacy of the education and professional credentials of staff in key positions, applicants showing evidence of previous successful work with the target populations they will be serving, as well as the provision of quality care.

12. *Learn from your mistakes and improve subsequent applications.*

Keep in mind that applicants can apply multiple times before being awarded funding; try not to get discouraged. Detailed feedback on the weaknesses and strengths of the application is typically provided, and should be incorporated into subsequent efforts. For example, the comment, “applicant does not adequately identify population in need,” resulted in an applicant including visual representation of the data in the next application. The comment, “did not adequately address cultural appropriateness in the clinic staff,” resulted in a thorough description of a plan to address issues of cultural competency among staff members.

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13. *Overcome the barriers to a successful partnership.*

Collaborations provide opportunities to increase access to comprehensive services, increase the profile of public health services in the community, and strengthen the competitive position for funding. Many opportunities can occur as a result of collaboration; yet multiple challenges accompany any partnership. In the beginning, challenges may include getting a co-applicant to approve the proposal; staff discomfort with blending the public health and medical models; maintaining cohesiveness of staff; and appreciating one another's unique and separate staff identities while functioning well together.

During a past NACCHO audio conference presentation, Lewis and Clark City-County Health Department, a health department that co-applied with CHC, Inc. (a non-profit) to receive 330 funding, discussed factors to a successful partnership. These include strong support from the medical community (not viewing them as the competitor); clarifying legal and operating relationships between the two entities ahead of time, which may include creating a Memorandum of Agreement; compatible missions; capable governance; a committed and diverse board; and strong leadership.

CONCLUSION

Local health departments (LHDs) are striving to ensure adequate provision of

care to the underserved in their communities, and receiving funding can strengthen and support the local safety net. Although eligible, currently LHDs do not receive anywhere near the amount of resources allowed to them as public entities. At times the LHD is the only safety net provider in the community, and funding for an FQHC is crucial. In other situations, LHDs can work with existing CHCs as co-applicants for funding opportunities. NACCHO and the Bureau of Primary Health Care (BPHC) encourage the collaborative relationship between LHDs and CHCs. Stronger relationships and stronger applications often result from collaborative applications for funding through the President's Initiative to Expand Health Centers.

RESOURCES

NACCHO resources available to assist LHDs include a fact sheet on the potential roles of local public health agencies (LPHAs) working with CHCs to provide access to care, and an audio conference, "Important Issues for Smooth Functioning of a CHC in an LPHA and Tips for Developing a High-Quality Application (October 2004)," available in the Primary Care section of NACCHO's Web site, www.naccho.org/topics/HPDP/primarycare.cfm. NACCHO encourages members to take advantage of these and other listed resources.

Mid-Atlantic Association of Community Health Centers

www.machc.com/Introduction.php
Guide for Developing a Community Health Center
This online guide offers general information regarding the expectations from the Bureau of Primary Health Care (BPHC) regarding FQHC's, as well as specifics on service delivery models, assembling a governing board, creating a business plan, and 330 grant application procedures.

Texas Association of Community Health Centers

www.tachc.org/Home.asp
The Web site contains a community

WORDS REVIEWERS USE TO RATE APPLICATIONS

Comprehensive vs. Partial
Documented vs. Undocumented
Feasible vs. Impossible
Provides Evidence vs. Lacks Evidence
Innovative vs. Common
Convincing vs. Unconvincing

development section that houses a number of resources for those interested in applying for 330 funding. Particularly helpful is a tip sheet entitled "Insider Tips for FQHC Grant Applications."

The National Association of Community Health Centers

www.nachc.org

This organization's Web site houses a variety of resources, including summaries of teleconferences with the BPHC staff, and a calendar of events that may include trainings on writing 330 proposals.

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ADVICE from the field

"One thing we did differently was in addition to letters of support from numerous community stakeholders, we had patients write letters of support, handwritten letters, sometimes not in English, but representative of the community we serve."

— Stacey Rude,
Hennepin County (MN)
Primary Care