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**COMMUNITY HEALTH WORKER PILOT**

**REQUEST FOR PROPOSALS | AUGUST 2018**

Community Memorial Foundation (CMF) and Healthy Communities Foundation (HCF) seek proposals from nonprofit organizations to incorporate Community Health Workers (CHWs) into their work.

Please submit proposals no later than Monday, October 1, 2018 to [info@cmfdn.org](mailto:info@cmfdn.org).

Please type ‘Community Health Worker Pilot’ in the subject line.

For more information about Community Memorial Foundation, please visit [www.cmfdn.org](http://www.cmfdn.org)

For more information about Healthy Communities Foundation, please visit [www.hcfdn.org](http://www.hcfdn.org)

For more information about Community Health Workers, please visit

<http://www.dph.illinois.gov/topics-services/prevention-wellness/community-health-workers>

<http://www.sinai.org/content/sinai-urban-health-institute-0>

**The Foundations will host an hour-long RFP Information Session on**

**Wednesday, September 12th from 10:00-11:00 AM**

**Location: CMF Conference Room**

**15 Spinning Wheel Road, #326**

**Hinsdale, IL 60521**

After the Information Session, additional questions may be directed towards:

Nanette Silva, Program Director, CMF [nsilva@cmfdn.org](mailto:nsilva@cmfdn.org)

Nora Garcia, Program Officer, HCF [ngarcia@hcfdn.org](mailto:ngarcia@hcfdn.org)

**Background on Community Health Workers (CHWs)**

A community health worker or CHW (sometimes referred to as a ‘promotora’) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This relationship enables the CHW to serve as a liaison between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. The American Public Health Association, US Department of Labor, and the Affordable Care Act all acknowledge and define the importance of the role of the CHW.

Both foundations are committed to the value that CHWs bring to a community through their missions and visions:

* Community Memorial Foundation (CMF) views the pilot as an integral part of its [*Regional Health and Human Services Agenda*.](http://cmfdn.org/our-work/regional-health-and-human-services-agenda/) Residents of its 27 communities have indicated they feel disconnected from information about health and human services and resources. Subsequent discussions between local foundations and community organizations focused on the potential of a grassroots community health worker workforce to address resource information gaps amongst community residents. CMF is committed to promoting CHWs for the purposes of enhancing community engagement, health equity and workforce development in our region. The CHW pilot will address four out of the five values of the *Regional Agenda*: coordinated, person-centered health and human services delivery systems; transformational leadership in health and human services; community self-awareness, knowledge and equity; and prevention, quality and active living.
* Healthy Communities Foundation (HCF) is a community-informed grantmaking foundation that seeks to measurably improve the health and well-being of individuals, families, and communities in its service area by promoting health equity, quality and access. HCF envisions that all residents in its 28 zip code service region lead full, healthy and happy lives and enjoy equal life expectancy. As part of its new strategic plan developed in 2018, HCF aims to be responsive and collaborative towards community-informed solutions aimed at addressing evolving and intersecting health needs. The HCF grantmaking framework focuses on 1) access to quality healthcare; 2) addressing the social determinants of health; 3) advocating for health-related policies and systems change; and 4) augmenting knowledge through capacity building.

**Project Coordinator**

Health and Medicine Policy Research Group (HMPRG) will serve as the Community Health Worker Pilot Coordinator, with Margie Schaps, Executive Director and Maya Bauer, CHW Policy Analyst providing the lead. The organization has extensive experience and expertise on issues related to CHWs. HMPRG was tapped by the Governor’s office to help develop and secure passage of Illinois’ first CHW legislation, which formally recognized CHWs as an integral part of healthcare teams, adopted the American Public Health Association’s definition of a CHW, and established an advisory board to provide recommendations and consider essential core competencies. Health and Medicine has partnered with the Chicago CHW Local Network, the Governor’s Office, the Illinois Department of Public Health, and Sinai Urban Health Institute (SUHI). Health and Medicine also has a demonstrated commitment to vulnerable populations, workforce development, and has a working knowledge of the healthcare landscape in the Western Suburbs. The Health and Medicine team will:

1. Provide ample, intensive, culturally competent training to CHWs (bilingual where appropriate), with a focus on core competencies like building relationships with community groups
2. Actively implement a collaborative learning model, with all involved sites having regular access to technical assistance to help them integrate CHWs into their healthcare teams
3. Provide supervision and support to CHWs
4. Assess training needs of CHWs and host organizations
5. Communicate regularly with CHWs and their home organizations
6. Work with Sinai Urban Health Institute to develop quantitative and qualitative objectives to measure success of pilot programs and evaluate the effectiveness of the training
7. Create a long-term sustainability plan to transform the pilot work into sustainable work
8. Manage project budget and timeline
9. Produce regular reports on progress

**Core Assumptions**

1. All CHWs must receive a living wage and be empowered with tools and knowledge to advance in their careers
2. There should be no fewer than 2 CHWs at a grantee site; this may include existing CHWs. CHWs may be full-time or part-time.
3. CHWs will possess knowledge of the targeted communities to be served
4. All pilot projects must intentionally advance health equity and access to care within the region

**Community Health Worker Job Description**

**POSITION SUMMARY:**

The American Public Health Association (APHA) defines a community health worker (CHW) as a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery (*apha.org 2018*).

In this position, the CHW provides on-going peer support and case management to navigate access to health care and achieve collaboratively developed health goals. This position is responsible for performing duties as part of an integrated interdisciplinary care coordination team. The CHW has life experience similar to that of members of the population with which he or she is assigned to work, and builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as resource and system navigation, outreach, community education, informal counseling, social support and advocacy. The position is informed by and integral to health equity.

**PRINCIPAL DUTIES AND RESPONSIBILITIES:**

* Consult and collaborate as an integral part of a multi-disciplinary team
* Conduct outreach and education to individuals who are in need of health care and social services to increase utilization of the health care system
* Serve as community liaison and maintain relationships with key individuals in the community
* Facilitate referrals and transitions within systems of care on behalf of participants
* Assist participants with obtaining access to health care and supportive services, including coordinating medical care with providers and facilitating appointments
* Assist participants with navigating through systems of health care and social services, and providing for public transportation
* Assist participants with maintaining relationships with care providers for follow-up screenings and treatment, and supporting adherence to program follow-up
* Assist participants through peer support and frequent communication/follow-up utilizing a harm reduction approach
* Accurately complete reports as required
* Participate in meetings, conferences and committees as assigned
* Provide basic advocacy, assessment, planning and casework services
* Assist staff in collaborating with community health and social service providers and partner agencies to identify barriers and service gaps
* Conduct outreach for and facilitate health promotion programming
* Provide education, information and referrals to clients; locate, identify, and utilize new social services and resources
* Maintain a case load of participants as required
* Maintain current knowledge of general health and wellness information, insurance coverage, and available services and resources
* Maintain the highest level of client confidentiality, in person and in practice
* Other duties as assigned

**QUALIFICATIONS, KNOWLEDGE, SKILL REQUIRED:**

*Required:*

* Associate’s Degree in social work, social sciences, public health or counseling, or four years of case management experience; or, an Associate’s Degree in a human services field, or,
* Equivalent two (2) years of experience working with diverse populations, community, or faith-based organizations (health care setting experience preferred)
* Thorough knowledge of assigned community and its residents
* Basic knowledge of state social service agencies and community resources
* Basic knowledge of health education, motivational strategies and an empathetic manner working with the underserved
* Basic knowledge of healthcare systems
* Ability to work with other members of the healthcare team and community to provide quality health care services
* Ability to communicate effectively both orally and written, and have basic computer skills
* Ability to work with vulnerable populations in a non-judgmental manner
* Ability to work as a member of a multi-disciplinary team
* Must be able to multi-task, have initiative and be self-directed
* Ability to endure periods of heavy workload
* Ability to work with frequent interruptions and respond appropriately to unexpected situations

*Preferred:*

* Bilingual in English/Spanish or English/Arabic, or English and language of community served
* Valid driver’s license and reliable access to a vehicle with liability insurance
* Experience working with a high volume of clients in a fast-paced environment

**Communities Invited to Participate in the Pilot**

Communities eligible to participate in the pilot include those that are served by both Community Memorial Foundation and Healthy Communities Foundation:

Bridgeview La Grange Park

Broadview Lyons

Brookfield McCook

Countryside North Riverside

Hickory Hills Riverside

Hodgkins Stickney

Indian Head Park Summit

Justice Westchester

La Grange Western Springs

Community Health Workers will perform assigned duties in these municipalities, serving residents of these communities.

**Eligibility**

Proposals will be accepted from applicants that are tax exempt under Section 501 (c)(3) of the Internal Revenue Code. Proposals must demonstrate a commitment to the missions and visions of the Foundations, dedication to the target communities and broad experience with vulnerable populations. Eligible applicants do NOT have to have prior experience with CHWs on staff.

**Timeline**

Interested organizations should submit the attached application no later than Monday, October 1, 2018 to [info@cmfdn.org](mailto:info@cmfdn.org). CMF and HCF may conduct a site visit as part of the grant review process. Final decisions will be made by the boards of both foundations in early December.

The Community Health Worker Pilot will have a start date of January 1, 2019 and will run through December 31, 2019. This timeline includes a start-up window for the recruitment and hiring of CHWs. There will be opportunity for renewal grants in years 2 and 3 pending successful outcomes.

**Budget**

CMF and HCF have allocated a budget of $330,000 for 6 FTE Community Health Workers at a total budget of up to $55,000 each which can include salary, benefits, and administration/overhead. However, we want to encourage flexibility and creativity as to how each organization chooses to integrate its CHW(s). Therefore, it is allowable to propose, for example, a half-time CHW(s). Though not optimal, it is also allowable to propose a stipend-based model with a solid case as to why that would work best for your organization. Whether full-time, half-time, or stipend-based CHWs are proposed, decisions will be made on the case that is made particular to your organization.

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**COMMUNITY HEALTH WORKER PILOT**

**APPLICATION**

**Organization Legal Name:**

**FEIN #:**

**Address:**

**Website URL:**

**Organization Mission Statement:**

**Brief Organization History:**

**List of Current Programs:**

**Number of Full-Time Employees:**

**Number of Part-Time Employees:**

**Population Served by Organization:**

(Include demographic information and total number served)

**Enter the number of unduplicated persons served last year from the target communities:**

\_\_\_ Bridgeview \_\_\_ La Grange Park

\_\_\_ Broadview \_\_\_ Lyons

\_\_\_ Brookfield \_\_\_ McCook

\_\_\_ Countryside \_\_\_ North Riverside

\_\_\_ Hickory Hills \_\_\_ Riverside

\_\_\_ Hodgkins \_\_\_ Stickney

\_\_\_ Indian Head Park \_\_\_ Summit

\_\_\_ Justice \_\_\_ Westchester

\_\_\_ La Grange \_\_\_ Western Springs

**Organization’s Chief Executive:**

First Name:

Last Name:

Title:

Office Phone:

E-mail:

**Primary Contact Person for this application:**

First Name:

Last Name:

Title:

Office Phone:

E-mail:

**Fiscal Year begins:**

**Fiscal Year ends:**

**Total annual ORGANIZATION budget: $**

**Name of program under which CHW will work:**

**Description of program**:

**Grant Amount Requested: $**

**How will this be used, e.g. portion towards salary, benefits, administrative expenses, overhead, etc? Describe the rationale behind the dollar allocation.**

**Program Narrative**

In a short narrative no more than four pages, please describe:

1. Your organization’s experience with CHWs (if applicable) or similarly embedded community worker models (having previous CHWs is not a requirement to participate in the pilot). What was the funding source, how long did you retain the CHWs, and what tasks did they do?
2. Your organization’s experience with vulnerable populations
3. Your organization’s knowledge of existing or emerging health needs of the Western Suburbs and proposed CHW’s knowledge of the target communities
4. Your organization’s commitment to and experience with creating a team-based working environment
5. How your organization will incorporate CHW(s) into your team:
   1. If you have an existing CHW(s), how will a new CHW be integrated?
   2. If you do not have an existing CHW, you will need to bring on at least two (they can be full-time or part-time). How will they be integrated into your healthcare team, e.g. participation in staff meetings, on-site mentor?
   3. Will your CHW(s) be full-time, part-time, or stipend-based? Describe the rationale behind this decision.
   4. In addition to addressing resource information gaps, what other duties will your CHW have, if any [e.g. integrated into existing programmatic work, such as health education on a particular topic (asthma, diabetes, maternal and child health, behavioral health, etc.) and/or with a particular population (older adults, children, etc.)]?
   5. Describe the logistics of CHW integration. (e.g. where will the CHW be physically situated?)
6. Do you already know who you would bring on as your CHW(s), or would you need to conduct a search process? If you have already identified your CHW(s), please include letters of support.
7. How will the addition of a CHW(s) enhance your organization’s work?

**Supporting Materials**

**Audited Financial Statements**

Please provide audited financial statements for the last fiscal year, or if unavailable, a copy of your 990.

**Most Recent Financial Statements**

Please provide a copy of your most recent Profit & Loss statement and your most recent balance sheet.

**Annual Report**

Latest annual report or a summary of the organization’s prior year’s activities

**Board List**

Current board list with related employment affiliations

**List of Funders**

A list of foundations, corporations, governmental agencies and individuals which funded the organization in the past fiscal year, including amounts contributed ($1,000 and above) if not included in the enclosed annual report