

## Healthy Eating and Activity across the Lifespan (HEAL) Request for Letters of Interest for Funding Opportunity

The Center for Healthy Eating and Activity across the Lifespan (HEAL), led by Drs. Jerica Berge, PhD, MPH, LMFT and Marilyn “Susie” Nanney, PhD as part of the University of Minnesota’s Department of Family Medicine and Community Health, announces a unique funding opportunity. We seek to support creative pilot projects that are broadly focused on healthy eating and physical activity and that have the long-term potential for meaningful and measureable impact on local community health. We seek proposals that demonstrate the use of an “integrated approach,” to connect: (a) community resources, (b) research, (c) clinical practice, and (d) policy (see definitions at the end of the document) to improve community health and eliminate health disparities.

Because we know that integration and collaboration take time, this grant mechanism is incremental. Project funding will be dispersed in two phases (for a total of 18 months). **Phase I** includes a 6 month planning phase and **Phase II** includes a 12 month project implementation phase.

- **Phase I (Development & Planning)** funding will require a two-page letter of interest (LOI) that includes: (a) a description of the community health issue that the project will address; (b) a description of potential collaborators that will be involved in the project to allow for successful integration across the domains of research, clinical practice, policy and the community resources. Alternatively, if the applicant(s) does not have a particular collaborator in mind for a specific domain (e.g., policy, clinic), the LOI may request assistance from HEAL in facilitating connection to a collaborator; (c) specific aims of the planning phase of the project including initial broad goals of the project; and (d) expected needs/costs of the project such as, meeting costs, training needs, travel to see integration in clinical practice, etc.
- **Phase II (Putting the Plan into Action)** will require the submission of a 5-10 page fully-developed action plan, including the specific aims of the integrated project, implementation steps, measurable outcomes and a spending plan/budget. This application will be due at the end of Phase I (Development & Planning), after the team has attended the Developing a Winning Action Plan workshop.

We expect to support 1-2 pilot projects with a total budget of up to \$20,000 each (i.e., between \$3,000-\$5,000 for Phase I and between \$10,000-\$15,000 for Phase II). While we intend to fund projects accepted in Phase I for Phase II, funding for Phase II is contingent on successful completion of Phase I. As mentioned above, interested organizations and/or individuals should first submit a brief LOI for Phase I. Teams with selected LOI will then work collaboratively with HEAL to explore the potential of their project and add other partners if needed to ensure all four domains (research, clinical practice, policy, community resources) are utilized as part of the project action plan. Ultimately, the team will submit their full action plan proposal to be considered for Phase II.

**The required letter of interest (LOI) must be submitted by  
Friday January 12th, 2018 at 5pm CST.**

## What We're Seeking

### *What is an integrated approach?*

Proposed projects should address how each of the four domains of integration, namely research, clinical practice, policy, and community resources will interact to improve a local community health problem focused on some aspect of healthy eating and/or physical activity.

Priority will be given to projects that:

- Use an innovative strategy to address, and have a meaningful impact on, a local community health problem.
- Incorporate elements of research, clinical practice, policy, and community resources (e.g., non-profit organizations, neighborhood groups). If one of the four domains isn't represented in the LOI, applicants will need to identify potential opportunities to incorporate these missing domain(s) and be open to the HEAL team matching the project with other partners so that all four domains are included in the project to enhance the impact of the project.
- Include a focus on nutrition and/or physical activity.
- Address a health disparities/equity issue.
- Offer elements of sustainability beyond the 12 month funding periods (e.g., continued partnerships are likely, have the potential for additional funding).
- Have clear objectives with a rigorous measurement plan to measure how the project will impact the identified health problem.
- Address how the proposed project will align with the HEAL values (described below) including: pioneering, collaborative, strategic, accountable, sustainable, and rigorous.

An example of a fundable project includes: a primary care clinic (clinical practice) partnering with a community group that does cooking courses (community resource) to create a demonstration kitchen in the clinic to offer cooking classes for patients with diabetes or heart disease. Individual health and community health outcomes would be measured (research). Further, the clinic and community partners would work together to create a policy change such as, health insurances reducing co-pays when patients attend classes (policy).

| Timeline   |  |
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| RFP Issued   | November 1, 2017   |
| Phase I Letter of Interest due   | January 12, 2018   |
| Applicants notified if selected for Phase I and funding begins   | End of January, 2018   |
| Half-day "How to Develop a Winning Action Plan" Workshop. Team members representing the four integration domains will need to attend this workshop together in order for funding to begin. | Early February (February 9 <sup>th</sup> or 16 <sup>th</sup> ); Either 9-noon or 1-4pm |
| Phase II action plan due   | Early August 2018  |
| Phase II funding begins  | Late August 2018   |
| 6-month progress report  | Early February 2019  |
| Final progress report due  | Late August, 2019  |

## About Healthy Eating and Activity across the Lifespan (HEAL)

**Mission Statement:** *HEAL integrates research, clinical practice, community resources, and policy to improve healthy eating and activity across the lifespan.*

**Vision Statement:** *HEAL inspires a culture of health through innovative partnerships.*

**HEAL Values Statement:** *HEAL adopts a health equity lens in all facets of its integration work to inspire a culture of health through being:*

- ❖ **Pioneering:** Be groundbreaking leaders in the field; remain curious and creative
- ❖ **Collaborative:** Cultivate an organizational culture of shared power; be trustworthy, authentic, inclusive, and respectful partners
- ❖ **Strategic:** Pursue clear goals with focused intention; anticipate and implement cutting-edge strategies; ensure meaningful impact
- ❖ **Accountable:** Be transparent, communicative, and timely with partners
- ❖ **Sustainable:** Build capacity among ourselves and partners; mentor the next generation of integrators; maintain lasting partnerships
- ❖ **Rigorous:** Be thorough and evidence-based in our approach to high-quality integration, research, evaluation, and dissemination; commit to excellence

## Technical Details

### Phase I: Development and Planning

Phase I is intended to allow partners time to establish common definitions, identify the challenge/problem to be addressed, identify ways that community, research, clinical practice, and policy might be combined to address the problem or challenge, establish how team members will work together and write an action plan for funding for Phase II.

**1) Submit a Letter of Interest.** Letters of Interest (LOI) will be reviewed by community and University members of the HEAL team. The format and scoring criteria for the LOI are detailed below. The LOI should be up to 2 pages (single spaced, 12-point font, 0.5-1 inch margins) and include the following information:

- a) **Specific Aims/Goals:** A description of the specific aims/goals of the project, including the problem to be addressed, why the problem is important, the innovative plan you have to address the problem, and plans for sustainability of the project (about  $\frac{3}{4}$  page).
- b) **Team Members:** An introduction of the team members that you will include to ensure that integration across research, clinical practice, policy and community occurs. Include details such as: The roles and responsibilities of each team member? How will the team work together? (If you have unidentified members in a certain domain, identify that you would like HEAL to match you with a potential partner) (about  $\frac{1}{4}$  page).
- c) **Integrative Approach:** How the work will use an integrated approach to address a dietary and/or physical activity-related and health equity issue (e.g., How will the work use research to

impact community initiatives?; How will the work inform policy through a community voice?; Could the work be extended to clinical practice through collaboration with community and research?) (about ½ page).

- d) **Impact:** What other perspectives, areas of expertise, resources, or skills sets could be integrated to maximize the proposed project's impact? (about ¼ page).
- e) **HEAL Values:** Identify how the proposed project will align with HEAL values: pioneering, collaborative, strategic, accountable, sustainable, and rigorous (about ¼ page).
- f) **Budget:** Budgeting plan and justification for using the Phase I \$2,000-5,000 development and planning money (submit as separate page from 2-page LOI).

*Project teams will be informed by the end of January 2018 whether their LOI has been selected for funding for Phase I. If selected, the aim of participation in Phase I is to assist the project team in submitting a fundable Phase II action plan.*

**2) Work with HEAL.** Two HEAL team members will collaborate on each project. The HEAL faculty team member's responsibility will be to assist with the project goals and to ensure that the project meets its potential for integrating research, clinical practice, policy, and community resources. When needed, the assigned HEAL faculty team member will suggest other potential collaborators who could contribute additional perspectives, resources, and skills in support of the project. An administrative HEAL team member will also assist in coordinating communication and progress reports between HEAL and each funded project.

**3) Attend a "How to Develop a Winning Action Plan" workshop.** At this half-day workshop all team members will come together and work with HEAL to plan a successful action plan. The workshop will focus specifically on developing the role of research, clinical practice, policy, and community resources in the proposed project.

**4) Submit a full project action plan.** This action plan will stem from the work done at the workshop and will serve as the action plan for the team moving forward. The assigned HEAL collaborator will assist with the development of this action plan. The action plan will be between 5-10 pages (single spaced, 12-point font, 0.50-1 inch margins) in length. More specific details will be given at the How to Develop a Winning Action Plan workshop. After the action plan is submitted, projects will be notified within one month of funding status.

## **Phase II: Putting the Plan into Action**

Phase II is intended to allow for enough time (i.e., 12 months) for the team to carry out the action plan created in Phase I. A HEAL team member will continue to collaborate on the project to ensure continued integration across research, clinical practice, policy, and community resources. Ongoing progress reports will be submitted by project teams every six months (two total; the first progress report will be included as part of the action plan proposal for Phase II).

## **Eligibility**

LOI's may be submitted by interested parties from non-profit organizations (application from for profit organizations will not be considered). Examples of eligible parties include, but are not limited to: (1) any community-based organization with an interest in community health; (2) individual community members with an interest in improving the health of their community; (3) a researcher partnering with a community-based organization with an interest in improving community health; and (4) a team of comprised of multiple community organizations and/or individuals who support a common idea around community health. Collaborative efforts between multiple organizations and community members are strongly encouraged.

## **Support Duration**

Projects will be supported for a total of 18 months; 6 months for Phase I and 12 months for Phase II. We expect to support 1-2 awards with a maximum award amount of \$20,000 (i.e., \$2,000-\$5,000 for Phase I and \$10,000-\$15,000 for Phase II) in direct costs. Indirect costs are not permitted in this mechanism. Salaries for investigators will not be covered.

## **Selection Criteria**

- Letters of interest and action plans must demonstrate how the community health issue identified may be addressed by integrated efforts in the 4 following areas:
  - Research
  - Clinical practice
  - Policy
  - Community Resources
- Projects must focus broadly on the areas of healthy eating and/or physical activity within a health disparities/health equity framework, though projects that also attend to other aspects of health and well-being are encouraged.
- The intended impact/vision and innovation of the project should be clear.
- Projects must be local (i.e., Twin Cities metro area), to facilitate work with the HEAL team throughout the process.
- Projects must have a clearly-stated change objective that is measurable.
- Proposed projects (i.e., Phase II) must be able to be completed within a one-year time frame.
- Applicants should be open to working within the domains of research, clinical practice, policy and community and be amenable to working with representatives from these domains.
- Applicants must submit a determination form to the University of Minnesota IRB during Phase I and follow IRB requirements for their Phase II project.
- Applicants must be amenable to working collaboratively with members of the HEAL research team to develop and assess the integrated approach (in addition to other outcomes of interest) throughout the pilot study.

## Definition of Terms

**Research:** Academic or non-profit data collection meant to further knowledge in a specific content area. Individuals involved in research could be from higher education, non-profit research centers (e.g., Wilder Research Foundation), they may be staff, faculty or students from a research organization.

**Clinical Practice:** Interaction with patients through a medical clinic setting. Individuals involved in clinical practice could be from a Federally Qualified Health Center or other clinical entities that serve patients with medical or mental health needs, they may be staff, behavioral health providers, nurses, physicians or other staff within these organizations.

**Policy:** Work that influences policies at an organizational, local, state or federal level. Individuals involved in policy may be from a department in an organization that influences organizational policy (HR, Administration), they may be local (city council, school board), state, or federally elected officials.

**Community Resources:** Work that is rooted at the community level, grassroots initiatives and programming that directly impacts community level outcomes. Individuals involved in community resources could be from non-profit agencies, advocacy groups, or residents/members of an impacted community.

## Submission Instructions

To submit your letter of interest for HEAL funding please follow the below link. You will be asked to fill out a survey requesting your contact information, and short description of your team, and their organizations. At the end of the survey you will be able to upload your full letter of interest.

To submit a letter of interest please visit: [z.umn.edu/healfunding](https://z.umn.edu/healfunding)

For questions, please contact HEAL at [heal@umn.edu](mailto:heal@umn.edu), or 612-625-7179.

HEAL Website: <https://familymedicine.umn.edu/research/heal>