YOUR ZIP CODE SHOULD NOT

BE



**Community Impact**An Initiative of



IMPORTANT
THAN YOUR
GENETIC CODE

# **Texas Health Community Impact Grants**

## **Background**

Texas Health Resources has a long history of caring for those in need. In keeping with our mission, and working together with community leaders and stakeholders, we are identifying and addressing health disparities and the social and environmental conditions that affect overall health. Across North Texas, significant differences in life expectancy and health outcomes exist from ZIP code to ZIP code. Where you live can have a bigger impact on your health than your genetic makeup. Access to health care and improving the quality of life can go a long way in improving the health of the community.

Texas Health Community Impact (THCI) was launched in January 2018 with the purpose of transforming lives by serving as a proactive, collaborative catalyst. This initiative awards cross-sector collaborative grants addressing local needs in innovative ways. These grants address the impact of social determinants of health on an individual's health with the goal of improving the lives of North Texans. Program and partnership priorities must lead to changes in operational procedures that revolutionize service delivery and outcomes, while also aligning with the Texas Health mission and vision for a healthy future for North Texans.

The COVID-19 pandemic has affected our world profoundly, however early data from the Centers for Disease Control and Prevention (CDC) suggests the virus does not infect and affect communities equally.



The pandemic is impacting African American and Latino communities disproportionately across the country. Among COVID-19 deaths for which race and ethnicity data were available, New York City identified death rates among Black/African American persons (92.3 deaths per 100,000 population) and Hispanic/Latino persons (74.3) that were substantially higher than that of white (45.2) or Asian (34.5) persons. Studies are underway to confirm these data and understand and potentially reduce the impact of COVID-19 on the health of racial and ethnic minorities. Additionally, COVID-19 has compounded barriers in many of the target communities, making efforts in these communities even more important.

<sup>&</sup>lt;sup>1</sup> Centers for Disease Control and Prevention. <a href="https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html">https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html</a>. Accessed 6/1/2020.

Much of this relates to the intersection of the virus with health disparities, population density, and socioeconomic status. Low-income communities tend to have specific characterizations, such as limited resources, subpar housing, high crime rates, and an underfunded school system, which are all associated with poor mental health outcomes. These factors all contribute to the SocioNeeds Index Score – a determining factor identifying high-risk communities, with 0 (low need) to 100 (high need) – which provided guidance in selecting the communities for THCI grants. COVID-19 has compounded these issues in many of our target communities.

Furthermore, evidence increasingly shows that COVID-19 is creating a silent pandemic. In fact, 50% of Americans report an increase in anxiety when polled by the American Psychology Association in early April 2020. A marked increase in demand for food security resources at food banks and pantries has also been seen. Texas Workforce Commission reports record high unemployment, and experts predict that unemployment may reach as high as 20% by the end of summer 2020.

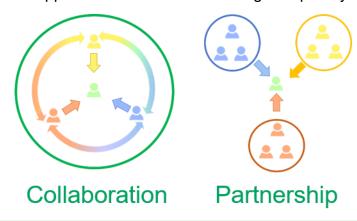
COVID-19 exposed the interconnectedness of social determinants of health and behavioral health in unpredictable and unexpected ways. THCl is releasing this Request for Proposals (RFP) to address this interaction and create a revolutionary way of doing business that integrates innovative solutions for behavioral health and social determinants of health.

## The Opportunity

Through this 2020 RFP, THCI invites collaborative organizations to apply to join this effort. THCI aims to revolutionize systems-level strategies that improve community health. THCI is seeking applications from cross-sector collaborations that will use upstream approaches to address their region's priority

topics. Collaborators are encouraged to integrate innovative solutions to behavioral health and prioritized social determinants of health in their regions as part of the application.

THCI expects collaborators to truly integrate services between the lead applicant and collaborating organizations. Supporting innovative solutions that break down traditional silos of specialization across community services is the true intent of THCI. For example, sending referrals from a mental health organization to a food pantry is not a strong proposal. Incorporating mental health screening and services into a food pantry would score higher than a simple referral program.



Ideal collaboration is a partnership that breaks down traditional silos and integrates services between two or more partner organizations to streamline the process of addressing community needs.

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Proposed solutions should align with these THCl 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; and
- Innovate.

THCI will provide the following non-financial support to help collaboratives implement their projects:

- 1:1 technical support from a designated liaison provided by Texas Health. Each
  collaborative will be assigned one liaison with whom they will connect monthly to work through
  current and anticipated barriers to project implementation.
- Learning with other participating communities. THCl values the sharing of ideas across communities who are engaged in similar work and will host a series of virtual learning sessions and annual in-person convenings.
- Regional visibility to increase awareness of each grantee among prospective new collaborating organizations and funders.

Applicants should carefully review the specific objectives and available funding for each region as outlined in Appendices 1-5 at the end of this document. Collaborative organizations may choose to work in one or more ZIP codes within a region and/or across multiple regions but must fulfill the required strategies. Lead organizations are encouraged to describe how their proposal will support community engagement through authentic and significant participation of community members. Responses to this RFP should focus on innovative solutions to health equity issues that have not been addressed sufficiently or at all.

- Funded programs are expected to operate for a two (2) year period beginning January 2021 and ending December 2022.
- Programs will be assessed through quarterly reporting.
- Continuation of program funding will depend on satisfactory progress.
- A lead organization must be designated as the responsible party for convening, holding accountable, and managing financial allocations to collaborative organizations.

## **Eligibility**

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
- Hospital systems can be a part of a collaboration but cannot serve as the lead applicant

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For the purpose of THCI, collaboratives must designate an organization to submit the application and serve as the lead. The lead organization may be a city or county government agency, federally recognized tribal leader, non-governmental organization, academic institution, or other organization, as defined above, that can effectively engage with all of the relevant collaborative organizations and is in a position to receive and disburse grant funding on behalf of the collaborative.

Lead organizations' annual operating budgets will be taken into consideration. Preference will be given to collaborators partnered with local organizations with a history in the target communities. Applicants from the 2019 THCI RFP cycle that did not receive a grant are eligible to apply in the current RFP cycle.

## **Funding Exclusions**

Grant recipients may not use funds for:

- Indirect costs greater than 15%
- Research
- Endowments or capital campaigns
- Capital expenses, construction projects, and purchases of large equipment
- Fundraising activities or event sponsorships
- Direct delivery of reimbursable health care services
- Grants or scholarships to individuals
- Advertising reimbursement of pre-award costs is not allowed
- Lobbying activities including, but not limited to:
  - o publicity or propaganda purposes,
  - preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.

## **Expectations of Applicants**

**Engagement in Technical Assistance and Learning Opportunities**: Collaboratives will be expected to meet on a monthly basis with their assigned Texas Health liaison. They will also be expected to actively engage in THCl's learning network by participating in virtual sessions and attending the annual in-person meetings, and hosting on-site visits with THCl staff, collaborative organizations and leadership as necessary. These visits will occur during the first three semi-annual periods of the funding period, as scheduling permits.

**Project Implementation**: Applicants will be expected to demonstrate satisfactory progress on the implementation of their projects within the first two quarters of the initiative. By the end of Year 1, grantees are expected to achieve preliminary outcomes based on the proposed implementation plan and have established at minimum a foundation for Year 2 programming. It is also expected that grantees will document and submit for approval any proposed changes of scope in a timely manner.

## Texas Health Community Impact invites applications targeting the following ZIP Codes:

<u> Priority Topics – Must Address Both</u>					
<u>Region</u>	ZIP Codes	<u>Health Concern</u>	Social Determinant of Health	<u>Maximum Funding</u> <u>Available per region</u>	
Collin	75069	Depression, Anxiety, and Social Isolation in Adults	Food Insecurity	¢050 000 00	
Collin	75074	Depression and Anxiety in Youth	Food Insecurity	\$950,000.00	
Dallas-Rockwall	75032	Depression in At-Risk Populations Ages 25-54	Access to Care		
Dallas-Rockwall	75211 75212 75217 75231	Depression in At-Risk Populations Ages 10-34	Access to Care	\$1,200,000.00	
Denton-Wise	76266 75057 76426	Resiliency in the Family Unit	Food Insecurity Navigation Services	\$850,000	
Southern - Kaufman	75143 75147 75161	Depression and Anxiety in Adults 40+	Food Insecurity Navigation Services		
Southern - Johnson	76031 76033 76059	Depression and Anxiety in Adults 40+	Food Insecurity Navigation Services	\$1,000,000.00	
Southern - Erath	76401 76402 76446	Depression and Anxiety in Adults 40+	Food Insecurity Navigation Services		
<u>Tarrant-Parker</u>	76010 76011 76119	Depression and Anxiety in Adults	Food Insecurity Navigation Services	\$1,000,000.00	
Tarrant-Parker	76082	Depression and Anxiety in Adults	Food Insecurity Navigation Services		

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## **Application Requirements**

All applications must be submitted through <a href="https://tinyurl.com/THCIGrants">https://tinyurl.com/THCIGrants</a>. Late submissions will not be accepted. Collaborative organizations must designate a lead organization to submit the application on their behalf.

### **Key Dates**

Date(s)	Activity	Details	
June 2020	RFP Announcement	Applications accepted at <a href="https://tinyurl.com/THCIGrants">https://tinyurl.com/THCIGrants</a> (available after June 15).	
August 3, 2020	Submission Deadline	The submission period will close at 4 p.m. CDT on August 3, 2020. Proposals should be submitted by the designated lead organization. Applications will not be accepted after the deadline. Applicants are responsible for familiarizing themselves with the application portal to avoid missing the deadline. Questions regarding the application process will not be accepted within 24 hours of the deadline.	
August 2020	Review Process	All submissions will be reviewed, and applicants may be asked to clarify questions regarding their proposals.	
October 2020		Selected applicants will present their proposals to the respective Regional Leadership Councils for discussion and review.	
December 2020	<u> </u>	Grantees will be required to attend an onboarding webinar and 1:1 call with their assigned liaison and a technical assistance partner.	

Competitive applications will demonstrate a commitment to participatory decision-making with residents and a willingness to shift traditional power structures. Priority consideration will be given to applications that address the interaction of social determinants of health and access to health care with the goal of improving the lives of North Texans. Impactful service delivery and outcomes will be given preferential scoring. Recognizing that some communities may be just starting on the path of finding new ways for sectors and residents to work together, we will consider collaboratives with limited tangible community impact to date, but with a clear vision for change.

Applications must provide clear and concise information in response to the following questions:

### 1. Quick Pitch (approximately 150 words)

What is your collaborative poised to do if selected to participate in THCI?

#### 2. Community Background and Priorities (approximately 350 words)

a. Describe your plan to address behavioral health and improve social determinants of health through THCI. Provide information about local needs and other relevant data points to help reviewers understand why your community has selected this plan and who exactly will benefit from your collaborative's work.

b. Provide historical, systemic, and community context for the key needs, barriers, and challenges your collaborative aims to address related to access to behavioral health services and access to foods that support healthy eating patterns, access to care, and/or navigation to social services.

## 3. Collaboration and Innovation Strategy (approximately 750 words)

- a. Describe the current state of cross-sector collaboration and resident engagement in your community.
- b. Discuss how participation in THCI will build upon this foundation and accelerate your work to advance health equity.
- c. Explain how your project brings an innovative solution to the priority topics you are seeking to address in your area.

### 4. Proposed Project (approximately 1,000 words)

- a. Describe the goals and activities your collaborative will carry out during the project and the systems and/or policies you will seek to impact.
- b. Describe key activities your collaborative has already implemented to address health equity through integrating access to behavioral health services and access to foods that support healthy eating patterns, access to care, and/or navigation to social services. What have you learned from those activities that you will apply to this project? If your collaborative is just beginning this work, what is your vision?
- c. Texas Health will employ an independent evaluator to assess the results of your project. Describe how your collaborative will assemble the results of its collective work. Specify the methods you plan to use to measure your progress. Describe how you will communicate that data to the independent evaluator.

## 5. Organizational Capacity and Leadership Qualifications (approximately 500 words)

- a. Describe the lead organization's capacity to facilitate a cross-sector collaborative and manage the day-to-day operations associated with convening partners and members of the community, including cultivating partnerships, managing membership, engaging diverse stakeholders, setting common goals, responding to changes in priorities, and supporting resident leadership.
- b. Include a proposed staffing plan and the relevant experience and expertise of your leadership collaborative members to carry out your initiative. Specify which leaders are from the community your initiative is serving and what their responsibilities will be.
- c. Describe how your organization's policies and practices help promote cultural competency and understanding among its leaders and front-line staff.
- d. Describe the communications channels you have available to leverage for spreading the word about your work and to disseminate lessons learned from your project.

## 6. Lead Organization Roles and Responsibilities (approximately 500 words)

- a. Describe how you will create or enhance the integration of services between your collaborating organizations.
- b. Describe how the lead organization will organize and manage the project between collaborating organizations. Include organization roles and responsibilities.
- c. Describe the communication plan the lead organization will use to collect and disseminate information to and from the collaborating organizations.

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## 7. Feasibility and Sustainability (approximately 250 words)

- a. Discuss the feasibility of your proposal in terms of collaborators' capacity, community support and engagement, as well as integrating service delivery.
- b. Describe how you will develop sustainability for your proposal after the grant period is complete.
- 8. Potential Challenges and Technical Assistance Needs (required but not scored; approximately 250 words)

THCI staff anticipates that communities will need learning support in carrying out their projects and welcomes submissions from communities that are forthcoming about these needs. While collaboratives will not be evaluated based on these learning needs, please answer the following questions to help the technical assistance partners plan their efforts:

- a. Discuss the primary challenges and barriers you anticipate in advancing health equity by addressing access to behavioral health services and access to foods that support healthy eating patterns, access to care, and/or navigation to social services. Please refer to region-specific appendix for more details.
- b. What specific technical assistance would be most useful in helping you proactively address these challenges?

In addition, please include the following items:

- List of all collaborative organizations and the primary representative's contact information for each one.
- Letters of Commitment (300-500 words each) from each of the major collaborative organizations identified in the proposal as part of the cross-sector collaborative (minimum of one, excluding the lead organization). Templated letters will not be accepted. These letters must answer the following questions:
  - o What will be the collaborative organization's roles and primary responsibilities?
  - How will the collaborative organization participate in the planning and implementation of the THCI project?
  - o How will the collaborative organization contribute to measuring the project's progress?

#### **Evaluation**

Applications will be evaluated on how well they align with the mission and purpose of Texas Health Community Impact, the guiding principles, and the focused interventions as outlined in the following region-specific appendices.

The following specific areas will be scored and weighted to determine rank of proposals:

### 1. Need/Opportunity aligns with priorities and is focused (15%)

Proposals need to have a clear alignment with the priorities and the stated goals and objectives. Proposals with a broad focus beyond the priorities will not score as high as proposals with a defined project with clear alignment with priorities.

## 2. Impact and Evaluation Measures (35%)

Proposals should have clear goals outlining expected impact of the programs. Goals should be in SMART format. Proposals should have goals for expected outputs, for example, Program A will screen 2,000 people for depressions. Of the 2,000, 25%, or 500, will need counseling services. In addition, there should be clear outcomes, i.e., 75% of the 500 will show improvement by at least one level on the Patient Health Questionnaire – 9. Applications without goals and outcomes will not score high.

## 3. Innovative and Potential for Cross-Collaboration (20%)

Proposals should clearly describe the innovative aspects of the projects. Innovation is defined as a new or unconventional idea that could alter the trajectory of health and improve health equity and well-being. Projects should outline a strong cross-collaboration. Applications with referrals only will not score as well as programs with integrated services.

## 4. Feasibility and Sustainability (30%)

Proposals should be feasible with clear timelines. Programs should describe when projects will be able to reach the target population. Programs, which require more than four months in start-up time, will not score as high as programs reaching the target population by March 31, 2021.

## Frequently Asked Questions (FAQs)

- Please direct questions regarding this RFP to <u>THCI-Grants@TexasHealth.org</u> until 4 p.m.

   CDT on Monday, June 29, 2020. Please use the email subject line "THCI RFP Questions" and indicate which region you are inquiring about.
- Submitted questions and corresponding answers will be posted on the Texas Health Community Health Improvement website on Monday, July 6, 2020:



https://www.texashealth.org/2021-RFP-and-Application-FAQs . Texas Health Resources will post a webinar to the website listed above by **June 22, 2020.** This webinar will provide an overview of how to apply for the 2020 THCI RFP; help organizations become familiarized with the requirements of the RFP; and provide tips on viable projects.

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## Right to Reject

Texas Health Resources reserves the right to:

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

No applicant will be reimbursed for the cost of developing or presenting a proposal in response to this RFP. The submission of proposals through Texas Health's intake system is for operational purposes and will not result in any obligation by any of THCl partners to fund a proposal. All applications will be reviewed, and finalists determined solely as described in this RFP.

## **Appendices**

Specific objectives and available funding for each region are outlined in the following Appendices. Collaborative organizations should carefully review the appropriate appendix for the region in which they wish to work. Collaborative organizations may choose to work in one or more ZIP codes within a region and/or across multiple regions.



## **Appendix 1: Collin Region**

#### **Community Health Needs Assessment**

Texas Health Resources is targeting communities and populations who disproportionally experience the prioritized health challenges related to behavioral health, chronic disease, awareness, health literacy, and navigation. Demographics of a community significantly impacts its health profile. Different race/ethnicity, age, and socioeconomic groups have unique needs and require different approaches to health improvement efforts. THCI analyzed utilization data from Texas Health Resources, the DFW Hospital Council, and available public data. The issues of behavioral health, access to health care, unemployment, and food insecurity have been affected disproportionately in this region as evidenced by information outlined in our Community Health Needs Assessment, and prioritization will be on the following ZIP codes: 75074, 75069

Click here to view the 2019 Texas Health Resources Community Health Needs Assessment

#### **Health Data**

Collin County health data, found at the county level with some at the ZIP code and census tract level, were primarily accessed through documented assessments noted from Healthy North Texas, Community Commons, City Health Dashboard, DFW Hospital Council and other public health data. Analyzing utilization data noted the following key themes for the Collin County:

- In Collin, 26% of outpatient behavioral health volume are due to depression and anxiety.
- Depression rate in the Medicare population is 17.35% in ZIP code 75069 and 17.30% in ZIP code 75074, as compared to Texas at 17% and the United States at 16.7%.
- Suicide rate per 100,000 population age 55+ is 10.7 in Collin County.
- Mental distress: 16.7% in 75069, 10.41% in 75074.
- Frequent physical distress (physical health not good for >14 days during the past 30 days among adults age 18 years): 15.7% in 75069, 12% in 75074.

#### **Social Determinants of Health**

- Limited Access to Healthy Foods: According to Feeding America, there are approximately 138,000 food insecure people in Collin County, which is 16% of the population. 20% of kids in Collin County are food insecure. VNA Meals on Wheels estimated that 9% of older adults in Collin County are food insecure.
- **Poverty:** According to Community Commons, 37.44% of residents living in 75069 live in poverty (200% below federal poverty level) and 38.2% of residents living in 75074 also live in poverty at the same level.
- **Housing Cost Burden:** With a rapidly growing population in Collin County, the housing costs exceeding 30% of household income is noted at 36.07% in ZIP code 75069 as compared to Collin County at 27.04%, Texas at 30.01%, U.S. at 32.89%. East Plano, 75074 indicates a 27% housing cost burden.
- Behavioral Health: Pre-COVID-19 numbers show that approximately 26% of American adults age 18+ suffer from a diagnosable mental disorder a year. Preliminary data shows this number will dramatically increase. According to the Centers for Disease Control and Prevention (CDC), 8.7% of people who have an income below the poverty level report severe psychological distress. National survey results show that Hispanics and non-Hispanic Black adults age 20+ have higher rates of depression when compared to non-Hispanic Whites. Research also suggests that depression is undertreated among Hispanics and Latinos, particularly if they are uninsured.
- **Transportation:** Lack of transportation often leads to isolation and poor health outcomes. According to Community Commons, in ZIP code 75069, only 0.65% access public transportation; in 75069, 8.18% households are without a motor vehicle as compared to Collin County at 2.74% and Texas at 5.63%.

## Goals, Objectives, and Strategies

**Program Goal:** Maximize the impact of initiatives addressing Behavioral Health and Social Determinants of Health in the target areas of Collin County.

#### East McKinney (75069)

- **Objective 1:** Decrease depression and anxiety by one stage of severity as measured by the Patient Health Questionaire-9 (PHQ-9) and General Anxiety Disorder-7 (GAD-7), among low-income individuals age 18+ in McKinney (75069) by December 2022.
- **Objective 2:** Increase food security by 10 percent as measured by USDA Food Security Questionnaire (Short Form) within low-income individuals age 18+ in McKinney (75069) increasing access and navigation to healthy foods by December 2022.

#### **East Plano (75074)**

- **Objective 1:** Decrease depression and anxiety by one stage of severity as measured by the Patient Health Questionaire-9 (PHQ-9) and General Anxiety Disorder-7 (GAD-7), among low-income youth ages 11-19 in Plano (75074) by December 2022.
- **Objective 2:** Increase food security by 10 percent as measured by USDA Food Security Questionnaire (Short Form) within low-income youth and family units ages 11-19 in Plano (75074) increasing access and navigation to healthy foods by December 2022.
- **Objective 3:** 70% students participating in educational support services will demonstrate academic success by passing all classes.

## Required Strategies

- Improve access to a range of culturally relevant behavioral health services that leverage different delivery
  mechanisms: in-person, telepsychiatry, in-home, etc. to meet the needs of participants despite complex
  environmental changes. Innovative approaches should leverage existing service availability and/or establish
  services in non-traditional settings (i.e. salon, barbershop, church, community center and/or resource center)
  where people feel safe. The grant must demonstrate how barriers will be addressed.
- Design and implement community-based interventions to promote positive outcomes in individuals at-risk for
  food insecurity. Examples: create new access points for affordable healthy food options, establish new
  collaborations to create an innovative approach to food/meal distribution. Depression may reduce motivation to
  carry out daily activities, such as obtaining food or resources to get food. Further, food insecurities may lead to
  depression as a result of stress about finding enough food resources.
- Establish educational support services designed to assist youth negatively impacted by the distance learning due to COVID-19 by creating a new innovative approach to education support services. An example: Incorporating self-efficacy and resiliency training with education support services.

## **Optional Strategies**

Break the stigma related to mental illness by deploying an evidence-based program, such as Mental Health First Aid or QPR (Question, Persuade, Refer), to train others to understand, recognize, and respond to someone experiencing a mental health or substance abuse crisis. Training should reach lay community members in community-based organizations, schools, churches and/or businesses.

#### **Award Information**

Total funding allocation for the Collin Region will be \$950,000.00, to address the strategic plan through collaborative and innovative programs in both designated areas. Lead applicant may apply for the full amount and complete the desired objectives across both areas or may apply for and address only one or two of the areas.

#### Success

Success will involve the effectiveness of a comprehensive program and activities in reducing levels of depression and anxiety among low-income adults age 18+ in East McKinney 75069 and youth 11-19 in East Plano 75074. Targeted individuals include low-income community residents who are at risk for depression and anxiety, measured by reducing the PHQ-9 or GAD-7 by one level. By using integrated screening efforts these individuals identified and placed in a program aimed at addressing behavioral health and/or social determinants of health.

## **Appendix 2: Dallas-Rockwall Region**

#### **Community Health Needs Assessment:**

Texas Health Resources is targeting communities and populations disproportionally affected by social determinants of health. In an effort to address the unique needs of the target communities in Dallas and Rockwall counties, THCI analyzed data from Texas Health Resources, the DFW Hospital Council, and available public data. Issues of behavioral health, access to health care, unemployment, and food insecurity were assessed and documented in the Community Health Needs Assessment. The following ZIP codes were prioritized as target areas for engagement in the region: 75211, 75212, 75217, 75032, 75231.

Click here to view the 2019 Texas Health Resources Community Health Needs Assessment

#### **Health Data**

For each community of interest, Texas Health data as well as available public health data was analyzed, however, the data reflects pre-COVID-19 numbers. It is expected that during and post-COVID-19, key indicators will significantly change due to the impact this pandemic has had on overall behavioral health and access to health. Review of available data suggests that:

- Mental distress in West Dallas (75212 16.25%) and Southeast Dallas (75217 16.48%) are above the 12.6% average for the City of Dallas. The 13.2% rate for Rockwall County is also higher than the 12.2% average for Dallas County.
- Significantly higher shares of people sheltering in place (47%) reported negative mental health effects resulting from worry or stress related to COVID-19; isolation can lead to negative outcomes and is a risk factor for suicide.[1]
- Depression rates among the Medicare population for each county are as follows, 18.17% for Dallas County and 17.82% for Rockwall County; additionally, 75% (75217) and 81% (75032) of participants were hypertensive. [2]
- 47.2% of behavioral health encounters in West Dallas and 60.7% of the same in Southeast Dallas had principal diagnoses of anxiety, depression, mood disorder, severe stress, panic disorder, insomnia or suicidal ideation. Between 2008 and 2017, major depressive episodes among adolescents increased by 60.2%; with females being 2.5 times more likely than males to suffer from an episode. [3]
- There is an anticipated 12% growth in outpatient and 14% growth in inpatient behavioral health needs over the next 5 years. [4]
  - [1] Kaiser Family Foundation
  - [2] Texas Health Dallas Community Health Needs Assessment 2019 (pp. 18-19)
  - [3] Healthy People 2020
  - [4] Sq2 Analytics Report

## **Social Determinants of Health**

An individual's ZIP code can be more impactful than their genetic code. For the Dallas-Rockwall areas of interest, there are significant barriers related to the following social determinants of health:

- Limited Access to Health: In 2019, Dallas had the worst uninsured rate in the nation.<sup>[1]</sup> The primary care supply trend 2017-2030 shows that demand will continue to outweigh supply of primary care service providers in Texas.<sup>[2]</sup>
- **Behavioral Health Services:** Texas is challenged by high percentages of uninsured, high degrees of obesity, and fewer mental health providers.<sup>[3]</sup> Dallas County has an estimated 122 providers per 100,000 and Rockwall County 95 providers per 100,000.
  - [1] DMagazine
  - [2] Department of State Health Services (in Parkland CHNA)
  - [3] The Silver Tsunami in North Texas (by the Senior Source)

## Goals, Objectives, and Strategies

**Program Goal:** Maximize the impact of initiatives addressing behavioral health, and health access through a continuum of care approach targeting low-income minority communities in Dallas and Rockwall Counties.

**Objective:** By the end of 2022, reduce depression by one stage of severity among underserved individuals ages 10-34 in Dallas (75231), West Dallas (75212 and 75211) and Southeast Dallas (75217), and individuals ages 25-54 in South Rockwall (75032).

### **Required Strategies**

Applications submitted for programming in the Dallas-Rockwall Region should include program elements that address all the following strategies:

Strategy	Impact Metrics
1. Design and implement community-based interventions to promote positive outcomes for individuals at-risk for depression. Successful applicants will incorporate community health promotion strategies such as the use of lay community leaders, peer to peer education and/or mentorship, and define how barriers to participation <i>such</i> as transportation, nutrition and childcare will be eliminated.	Make a positive impact on individuals atrisk for depression.  ♣ Reach at least 500 individuals with a meaningful intervention by grant-end  ♣ Use a health promotion strategy
2. Reduce the stigma related to mental illness by deploying an evidence-based program, such as Mental Health First Aid or Question, Persuade, Refer (QPR) to train others to understand, recognize and respond to someone experiencing a mental health or substance abuse crisis. Training should reach lay community members in community-based organizations, schools, churches and/or businesses. Applicants should detail innovative strategies to identify and deliver education to individuals and families.	Equip lay community members with the skills and resources to assist and support individuals facing a mental health crisis.  ♣ At least 900 individuals will be equipped with skills and resources.  ♣ Develop and build a replicable model to equip lay community members.
3. Establish a continuum of care model to deliver integrated behavioral health and primary health care to individuals in the target group. Solutions should be cost-effective, and applicants must explain how the proposed solution will address the complex problems exasperated by the COVID-19 pandemic.	Deliver an innovative approach that incorporates efficiencies in the delivery of behavioral health and primary care.  ♣ 75% of individuals identified as depressed will be referred to counseling by grant-end.  ♣ Intervention will reduce depression scores
4. Assess the effectiveness of referral and navigation processes associated with program interventions. Document key strategies, including engagement with community members to achieve feedback and inform sustainability efforts.	Build a toolkit that documents processes, including monitoring and adjustment of strategies to meet the needs of the target population based on community context, feedback and environmental circumstances.

### **Award Information**

Total funding allocation for the Dallas-Rockwall Region will be \$1,200,000.00, to address the strategic plan through collaborative and innovative programs in the five designated areas. Lead applicant may apply for the full amount and complete the desired objectives across all five areas or may apply for and address only one or multiple areas. The funding request should be commensurate with the proposal and intended impact.

#### Success

Success will include the effective implementation of a comprehensive mental health strategy including education to reduce stigma, behavioral health screening, and provision, referral and navigation to care, with special consideration for multigenerational needs among low-income community members affected by social determinants of health.

## **Appendix 3: Denton-Wise Region**

## **Community Health Needs Assessment:**

Texas Health Resources is targeting communities and populations who disproportionally experience the prioritized health challenges related to behavioral health, chronic disease, awareness, health literacy, and navigation. Demographics of a community significantly impacts its health profile. Different race/ethnicity, age, and socioeconomic groups have unique needs and require different approaches to health improvement efforts. THCl analyzed utilization data from Texas Health Resources, the DFW Hospital Council, and available public data. The issues of behavioral health, access to health care, unemployment, and food insecurity have been affected disproportionately in this region as evidenced by information outlined in our Community Health Needs Assessment, and prioritization will be on the following ZIP Codes: 75057, 76266, 76426

Click here to view the 2019 Texas Health Resources Community Health Needs Assessment

#### **Health Data**

For each community of interest, Texas Health, as well as available public health data, was analyzed, however, the data reflects pre-COVID-19 numbers. It is expected that during and post-COVID-19, key indicators will significantly change due to the impact this pandemic has had on anxiety and overall mental health. Review of data led to the following key themes:

- Anxiety and depression make up 23% of the outpatient behavioral health visits. An anticipated 13% growth is
  expected over the next 5 years and 27% over the next 10 years in outpatient behavioral health visits for the
  Denton/Wise region.
- Frequent mental distress in Denton County (10.7%) as compared to Lewisville 75057 which is (16%) which is higher than the county. Wise County has a frequent mental distress rate of 12%. (ZIP code data is not available in 76266 or 76426)

#### Social Determinants of Health

- Limited access to Healthy Foods: One in six older adults struggles with hunger, pre-COVID-19.<sup>[1]</sup> Due to COVID-19, Tarrant Area Food Bank, which serves the Sanger area, is experiencing a 60% increase in demand. In Denton County, 16.30% of the population are food insecure, compared to Texas at 17%. Wise County has increased to a rate of 22.9%. Non-profits are reporting a large increase in demand for food resources. This increased demand due to COVID-19 is predicted to remain elevated for the next 18-24 months.
- **Transportation:** The COVID-19 pandemic has impacted transportation in that most people without access to vehicles get rides from family and friends. This hits all areas hard but especially in Bridgeport 76426, where there are very limited resources, and many must travel to Decatur or Denton for services. This greatly impacts access to health care and healthy food options, especially in food deserts like 76426.
- **Behavioral Health:** Pre-COVID-19 numbers show that approximately 26% of American adults age 18+ suffer from a diagnosable mental disorder in a year. Preliminary data shows this number will dramatically increase. Currently, 25% of outpatient behavioral health volume is dedicated to anxiety and depression. There is considerable evidence that even small levels of resilience can create a buffer for people who are experiencing high levels of stress.<sup>[2]</sup> Resiliency can provide a buffer for people to prevent or lessen anxiety during stressful times or events
  - [1] CDC.gov: https://www.cdc.gov/workplacehealthpromotion/tools-resources/pdfs/issue-brief-no-2-mental-health-and-chronic-disease.pdf [2] Vandoros, 2020

## Goals, Objectives, and Strategies

**Program Goal:** Maximize the impact of initiatives addressing Behavioral Health and Social Determinants of Health in the target areas of Denton and Wise Counties.

- **Objective 1:** Increase resiliency as measured by a benchmark validated tool like the CD-RISC 10, known as the Conner Davidson Resiliency Scale. 10% improvement in resiliency scores among low-income youth and family units in Sanger (76266), Lewisville (75057), and Bridgeport (76426) by December 2022.
- **Objective 2:** Increase food security by 10% as measured by USDA Food Security Questionnaire (Short Form) among low-income youth and family units in Sanger (76266), Lewisville (75057), and Bridgeport (76426) by December 2022.
- **Objective 3:** Improve self-efficacy by 10% over baseline as measured by General Self-Efficacy Scale (GSE) among low-income youth and family units in Sanger (76266), Lewisville (75057), and Bridgeport (76426) by empowering individuals to navigate health care and social assistance services by December 2022.

## **Required Strategies**

- Improve access to a range of age-appropriate and culturally relevant behavioral health services, including inperson counseling, as well as psychiatric evaluations, patient education, and medication management.
  Innovative approaches should leverage existing services availability and/or establish services in non-traditional
  settings (i.e. salon, barbershop, church, community center and/or resource center) where people feel safe. The
  grant must demonstrate how barriers will be addressed.
- Design and implement community-based interventions to promote positive outcomes in individuals at-risk for food insecurity. Examples: create new access points for affordable healthy food options; establish new collaborations to create an innovative approach to food/meal distribution.
- Establish navigation services designed to empower individuals with the knowledge and skills to identify solutions to the complex problems exasperated by the COVID-19 pandemic. Create a new and innovative approach to navigation services by incorporating self-efficacy and resilience training for consumers.

## **Optional Strategy**

Break the stigma related to mental illness by deploying an evidence-based program, such as Mental Health First Aid or QPR (Question, Persuade, Refer), to train others to understand, recognize, and respond to someone experiencing a mental health or substance abuse crisis. Training should reach lay community members in community-based organizations, schools, churches and/or businesses.

#### **Award Information**

Total funding allocation for the Denton-Wise Region will be \$850,000.00, to address the strategic plan through collaborative and innovative programs in all the three designated areas. Lead applicant may apply for the full amount and complete the desired objectives across all three areas or may apply for and address only one or two of the areas.

#### Success

Success will involve the effectiveness of a resiliency skills training program, comprehensive referrals to care and navigation to services that increase resiliency in low-income youth and family units, and will be measured by increasing resiliency scores using a validated resiliency scale such as CD-RISC 10, and navigation to reduce food insecurity and housing instability.

## **Appendix 4: Southern Region**

spanning the counties of Erath, Hood, Johnson, Ellis, and Kaufman

## **Community Health Needs Assessment:**

Texas Health Resources is targeting communities and populations who disproportionally experience the prioritized health challenges related to behavioral health, chronic disease, awareness, health literacy, and navigation. Demographics of a community significantly impacts its health profile. Different race/ethnicity, age, and socioeconomic groups have unique needs and require different approaches to health improvement efforts. Texas Health Community Impact analyzed utilization data from Texas Health Resources, the DFW Hospital Council, and available public data. The issues of behavioral health, access to health care, unemployment, and food insecurity have been affected disproportionately in this region as evidenced by information outlined in our Community Health Needs Assessment. For the Southern Region, prioritization will be on the following ZIP codes within the counties of Erath, Johnson, and Kaufman: 76401, 76402, 76446; 76031, 76033, 76059; and 75143, 75147, 75161.

Click here to view the 2019 Texas Health Resources Community Health Needs Assessment

#### **Health Data**

Although some county level data is available, ZIP code level data is limited for the Southern Region. Information from Texas Health, as well as available pre-COVID-19 public health data, was analyzed. It is expected that during and post-COVID-19, data will significantly change due to the impact this pandemic has had on anxiety and overall mental health. Review of current data led to the following key themes for the Southern Region:

- Anxiety and mood disorders (including depression) made up 24% of the 2019 outpatient behavioral health
  visits. Spanning the next 5 years, there is an anticipated 10% growth in outpatient behavioral health visits for
  the Southern Region, with a 21% growth over 10 years.
- The suicide rate per 100,000 population is higher than Texas (12.5): Kaufman County (13), Johnson County (15), and Erath County (18).

#### **Social Determinants of Health**

- Food Insecurity: Pre-COVID-19, one in 10 working adults struggle with hunger.[1] Also pre-COVID-19, in Erath County, 19.3% of the population are food insecure, compared to Texas at 17%, Kaufman County (16.8%) and Johnson County (15.9%). During COVID-19, non-profits are reporting a large increase in demand for food resources and it is predicted to remain elevated for the next 18-24 months.
- Access: The COVID-19 pandemic has impacted transportation in that many people without access to vehicles
  get rides from family and friends. This hits all areas hard but especially in our Southern Region, where
  transportation has already been identified as an issue from community focus groups and available data.
  Additionally, the 2018 Texas Health Community Readiness Assessment identified technology limitations as a
  barrier in the Southern Region. With limited resources, combined with transportation and broadband
  challenges, access to health care and healthy food options are of great need.
- **Behavioral Health:** Pre-COVID-19 numbers show that approximately 26% of American adults age 18+ suffer from a diagnosable mental disorder in a year. [2] Preliminary data shows this number will dramatically increase. With Texas challenged by high percentages of uninsured and fewer mental health providers, there is a great need for behavioral health services. Pre-COVID-19, Erath, Johnson, and Kaufman counties were identified as underserved behavioral health areas, with a shortage of providers at rates of 85.8, 71.1, and 89.5 respectively.

  - [2] CDC.gov: https://www.cdc.gov/workplacehealthpromotion/tools-resources/pdfs/issue-brief-no-2-mental-health-and-chronic-disease.pdf

### Goals, Objectives, and Strategies

**Program Goal:** Maximize the impact of initiatives addressing Behavioral Health and Social Determinants of Health in the target areas of Erath, Johnson, and Kaufman Counties.

- **Objective 1:** Decrease depression and anxiety by one stage of severity as measured by the Patient Health Questionaire-9 (PHQ-9) and General Anxiety Disorder-7 (GAD-7) among low-income individuals age 40+ in Erath (76401, 76402, and 76446), Johnson (76031, 76033, and 76059), and Kaufman (75143, 75147, and 75161) by December 2022.
- **Objective 2:** Increase food security by 10% as measured by a USDA Food Security Questionnaire (short form) within low-income individuals age 40+ in Erath (76401, 76402, and 76446), Johnson (76031, 76033, and 76059), and Kaufman (75143, 75147, and 75161) by increasing access and navigation to healthy foods by December 2022.

## **Required Strategies**

- Establish and implement innovative initiative(s) to decrease depression, anxiety, and social isolation.
- Design and implement community-based interventions to promote positive outcomes in individuals at risk for food insecurity. Examples: create new access points for affordable healthy food options; establish new collaborations to create an innovative approach to healthy food distribution and education.
- Enhance navigation services by creating a new and innovative approach by incorporating self-efficacy with navigation services.

#### **Award Information**

Total funding allocation for the Southern Region is \$1,000,000.00 to address the strategic plan through collaborative and innovative programs. Based on county, each target area consisting of three ZIP codes has their own application, and the total funding amount will be split. Therefore, a lead applicant will apply to complete the desired objectives across all three ZIP codes within the county areas: Erath County: 76401, 76402, and 76446; Johnson County: 76031, 76033, and 76059; or Kaufman County: 75143, 75147, and 75161.

#### Success

Through innovative and collaborative approaches that resonate locally and have measurable outcomes, each grant's success will involve:

- Creating accessible, culturally appropriate initiative(s) to address behavioral health.
- Building innovative solutions to food insecurity by increasing new access point(s) and/or by designing new distribution capabilities through capacity building programs.
- Creating a new and innovative approach to navigation services by incorporating self-efficacy with navigation services.

## **Appendix 5: Tarrant-Parker Region**

### **Community Health Needs Assessment:**

Texas Health Resources is targeting communities and populations who disproportionally experience the prioritized health challenges related to behavioral health, chronic disease, awareness, health literacy, and navigation. Demographics of a community significantly impacts its health profile. Different race/ethnicity, age, and socioeconomic groups have unique needs and require different approaches to health improvement efforts. THCI Tarrant-Parker Leadership Council analyzed utilization data from Texas Health Resources, the DFW Hospital Council, and available public data. The issues of behavioral health, chronic disease, access to health care, transportation, and food insecurity have been affected disproportionately in this region as evidenced by information outlined in our Community Health Needs Assessment, and prioritization will be on the following ZIP Codes: 76010, 76011, 76119, 76082

Click here to view the 2019 Texas Health Resources Community Health Needs Assessment

#### **Health Data**

Texas Health and available public health data was analyzed prior to the COVID-19 pandemic. It is anticipated that during and post-COVID-19, key indicators will significantly change due to the impact this pandemic is having on anxiety and overall mental health. Review of data led to the following key themes:

- Anxiety and depression make up 23% of the outpatient behavioral health visits. An anticipated 11% growth is
  expected over the next 5 years and 22% over the next 10 years in outpatient behavioral health visits for the
  Tarrant-Parker region.
- Frequent mental distress in Southeast Fort Worth (76119) is at a rate of 20.4%, which is above the 14.4% average for the City of Fort Worth. In East Arlington (76010 and 76011), frequent mental distress is at a rate of 20.7% and 17.8%, respectively, which is above the 13.8% average for the City of Arlington.

### **Social Determinants of Health**

- Limited Access to Healthy Foods: One in six older adults struggles with hunger (pre-COVID-19).[1] Due to COVID-19, Tarrant Area Food Bank is experiencing a 60% increase in demand. This increased demand is predicted to remain elevated for the next 18-24 months. Most Garden on the Go sites, which offer low-cost produce, are reporting a 100% increase in demand in April compared to March 2020.
- Transportation: The COVID-19 pandemic has further impacted transportation resulting in the need for alternative options for those without access to vehicles, such as obtaining rides from family or friends. This is especially evident in 76119, where 10.95% of residents do not have a motor vehicle, and in Arlington, the largest city in the U.S. without public transportation. Moreover, this greatly impacts access to health care and healthy food options, particularly in areas with limited access, such as 76119.
- **Behavioral Health:** Pre-COVID-19 numbers show that approximately 26% of American adults age 18+ suffer from a diagnosable mental disorder in a given year. Preliminary data shows this number will most likely dramatically increase during and Post-COVID-19.

## Goals, Objectives, and Strategies

**Program Goal:** Maximize the impact of initiatives addressing Behavioral Health and Social Determinants of Health in the target areas of Tarrant and Parker Counties.

- **Objective 1:** Decrease depression and/or anxiety by one stage of severity as measured by the Patient Health Questionaire-9 (PHQ-9) and General Anxiety Disorder-7 (GAD-7), among low-income individuals age 18+ in East Arlington (76010/76011), Southeast Fort Worth (76119), and Parker (76082) by December 2022.
- **Objective 2:** Increase food security by 10% as measured by USDA Food Security Questionnaire (Short Form) among low-income individuals age 18+ in East Arlington (76010/76011), Southeast Fort Worth (76119), and Parker (76082) by increasing access and navigation to healthy foods by December 2022.
- **Objective 3:** Improve self-efficacy by 10% over baseline as measured by General Self-Efficacy Scale (GSE) among low-income individuals age 18+ in East Arlington (76010/76011), Southeast Fort Worth (76119), and Parker (76082) by empowering individuals to navigate health care and social assistance services by December 2022.

## **Required Strategies**

- Improve access to a range of culturally relevant behavioral health services that leverage different delivery
  mechanisms: in-person, telepsychiatry, in-home, etc. to meet the needs of participants despite complex
  environmental changes. Innovative approaches should leverage existing service availability and/or establish
  services in non-traditional settings (i.e. salon, barbershop, church, community center and/or resource center)
  where people feel safe. The grant must demonstrate how barriers will be addressed.
- Design and implement community-based interventions to promote positive outcomes in individuals at-risk for
  food insecurity. Examples: create new access points for affordable healthy food options, establish new
  collaborations to create an innovative approach to food/meal distribution. Depression may reduce motivation to
  carry out daily activities, such as obtaining food or resources to get food. Further, food insecurities may lead to
  depression as a result of stress about finding enough food resources.
- Establish navigation services designed to empower individuals with the knowledge and skills to identify solutions to the complex problems exacerbated by the COVID-19 pandemic. Create a new and innovative approach to navigation services by incorporating self-efficacy and resilience training for consumers.

## **Optional Strategies**

- Break the stigma related to mental illness by deploying an evidence-based program, such as Mental Health
  First Aid or QPR (Question, Persuade, Refer), to train others to understand, recognize, and respond to
  someone experiencing a mental health or substance abuse crisis. Training should reach lay community
  members in community-based organizations, schools, churches and/or businesses.
- Partner with local health systems to develop and/or refine a comprehensive virtual tool to meet the needs of low-income residents serving as a primary resource for information about programs, services, and activities in their community.

#### **Award Information**

Total funding allocation for the Tarrant-Parker Region will be \$1,000,000.00, to address the strategic plan through collaborative and innovative programs in all the four designated areas. Lead applicant may apply for the full amount and complete the desired objectives across all four areas or may apply for and address only one or two of the areas.

#### Success

Success will be measured by the effectiveness of the program(s) addressing depression/social isolation and anxiety as measured by the PHQ-9 and GAD-7. Additionally, the effectiveness of program(s) addressing food insecurity and self-efficacy will be measured using the USDA Food Insecurity Questionnaire and GSE. Overall success will result in individuals being empowered to self-manage and navigate health care and social assistance services.