



Strengthening the Community of Practice for Public Health Improvement (COPPHI)

Call for Proposals: Quality Improvement Award Program

Proposal Deadline: January 26, 2012

Strengthening the **Community of Practice for Public Health Improvement (COPPHI)** is managed by the National Network of Public Health Institutes with support from the Robert Wood Johnson Foundation

OVERVIEW

The [National Network of Public Health Institutes](#) (NNPHI) will provide health departments with \$5,000 awards coupled with individualized quality improvement (QI) coaching to conduct a QI project that results in measureable change. A total of 60 awards will be provided in two cycles of 30 awards each. **This Call for Proposals (CFP) supports the first cycle of 30 awards that will be provided to health departments to implement a QI project during an 8-month period between April 1, 2012 and November 30, 2012.**

The purpose of this *QI Award Program* is to support health departments to become more proficient in the adoption and application of QI and to meet the accreditation standards and measures set by the Public Health Accreditation Board (PHAB).

The QI Award Program will support projects that apply QI methods and tools to improve processes, outputs, or outcomes. Health departments have used QI successfully across a wide range of public health activities such as: increasing the efficiency and timeliness of a process; improving customer satisfaction; increasing outputs (e.g. number of people reached, vaccines distributed, or partners engaged); improving opportunities for healthy behaviors that reduce the rates of chronic disease; reducing rates of infectious diseases; or addressing disparities in infant mortality.

For this initiative, health departments are encouraged to develop and implement QI projects that meet their priority needs. The QI Award Program is most interested in supporting projects that seek to make improvements to processes, outputs, and outcomes related to broad public health functions or population health issues, rather than clinical services, which tend to be focused on patient care.

The 8-month timeline to implement the QI project will provide health departments with a hands-on opportunity to learn and apply QI to make incremental improvements with the guidance of an experienced QI Coach. In addition, health departments will be provided with opportunities for peer exchange and learning via participation in webinars and an in-person accreditation and QI-focused meeting scheduled for June 2012.

BACKGROUND

Quality improvement in public health is defined as “the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act, which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community.”¹

[Strengthening the Community of Practice for Public Health Improvement](#) (COPPHI) is a new initiative funded by the Robert Wood Johnson Foundation (RWJF) and managed by NNPHI that

¹ Riley W. Defining quality improvement in public health. *J Public Health Management and Practice*. 2010;16(1):5-7

will facilitate the exchange of best practices and build capacity among the nation's public health departments to conduct QI and to become accredited. COPPHI is launching as health departments across the country are beginning to submit applications to PHAB, a new national accreditation program that provides consistent national standards for health departments and enables people to know that their health departments are providing high quality services and protecting and improving the health of their communities. The overall goal of national accreditation for state, territorial, local, and Tribal health departments is to provide a catalyst for continuous quality improvement and in turn, improve the impact of health departments in protecting and improving health in their communities.

COPPHI builds on the NNPHI-managed [*Multi-State Learning Collaborative*](#) (MLC), a six-year project funded by RWJF that played a critical role in creating momentum for public health accreditation and establishing a vision of a QI culture in the field. COPPHI responds to the continued need to provide support to public health practitioners and departments interested in using QI tools as a way to improve their health departments as well as to meet PHAB accreditation standards and measures.

The QI Award Program described in this Call for Proposals is a key component of the COPPHI initiative. In addition to the QI Award Program, NNPHI will coordinate public health partner organizations to promote the use of the QI Practice Exchange, a searchable online database (under development) that will organize information from the rapidly growing number of public health QI projects and make it easily accessible to practitioners and other stakeholders.

NNPHI will also promote shared learning among a broad range of local, state, territorial and tribal health department representatives; researchers; public health institutes; universities; national public health organizations; funders; policymakers; government agencies; and boards of health and other governance entities by holding national meetings that focus on QI and accreditation modeled on the highly successful MLC Open Forum meetings. Health departments selected to participate in the QI Award Program are invited to attend an Open Forum meeting scheduled for June 2012.

TOTAL AWARDS

In this first cycle of the QI Award Program, NNPHI will provide 30 awards of \$5,000 each coupled with 15 hours of individually-tailored QI coaching from an experienced public health QI Coach.

Awards will be provided via contract to selected health departments. Coaches will be provided from a panel selected by NNPHI for their expertise in public health QI.

Award funds may be used for project staff salaries; consultant fees; data collection and analysis; meetings; supplies; project-related travel; communications/marketing; and project supplies. Funds may not be used for lobbying activities; ongoing general operating expenses or existing deficits; items for which third-party reimbursement is available; endowments; or capital costs, including construction, renovation, or equipment.

Participating health departments are also invited to attend the June 2012 Open Forum meeting hosted by NNPHI. Travel, lodging, and per diem for one person from the health department to participate in the meeting will be provided.

ELIGIBILITY CRITERIA

- Applicant entities must be governmental public health departments (state, local, territorial, or Tribal).
- Organizations that assist governmental public health departments (e.g. public health institutes or state associations of county and city health officials) are also eligible to apply in the following instances:
 - the organization is serving as a fiscal agent for the health department
 - the organization is working with the health department on a joint QI project

PROPOSAL SUBMISSION

A broad range of applicants are sought for this initiative, including state, local, territorial, and Tribal health departments of varying sizes, geographic location, and populations served. In addition, a range of experience in QI and accreditation-readiness is desired. Health departments with all levels of experience related to QI and accreditation – from novice to highly experienced – are encouraged to apply.

Health departments may submit up to 2 separate proposals for distinct QI projects. Each proposal will be evaluated individually (see the ‘selection criteria’ below). NNPHI seeks to support a broad range of health departments in their QI efforts. Depending upon the response to this call for proposals, it is possible that 2 awards could be provided to a single health department.

Applicants will not need to submit a budget as part of this proposal; however, all selected health departments will need to adhere to the appropriate use of funds (described in the ‘total awards’ section of this Call for Proposals).

In completing the proposal process, applicants will need to:

- Propose a specific QI project that can be completed within an 8-month timeframe between April 1, 2012-November 30, 2012.
 - The QI project should aim to improve a process, output, or outcome.
 - Successful applications will need to include:
 - A brief description of the issue that will be addressed; the information and process used to determine the need to improve this issue; and the significance of the desired improvement to the health department’s efficiency and /or effectiveness.
 - An aim statement that articulates the goal of the QI project in terms of the measurable improvement sought.
For guidance on writing aim statements, applicants may wish to reference [Michigan’s Quality Improvement Guide book](#).
 - The data source(s) that will be utilized to measure improvement.
 - The PHAB standard(s) or measure(s) that the QI project could help the health department satisfy.

Note: Performing QI may assist the health department in meeting PHAB Standard 9.2 (Develop and Implement Quality Improvement Processes integrated into organizations practice, programs, processes, and interventions), and your QI project may also be relevant to PHAB standards in other domains. Refer to the [PHAB standards and measures Version 1.0](#) located on the PHAB Website.

- Submit a notice of intent to apply by **3:00 p.m. ET on January 6, 2012**. See the 'how to apply section' on page 6 of this Call for Proposals for additional detail.
- Complete and submit a brief proposal (3-single-spaced pages maximum) by **3:00 p.m. ET on January 26, 2012**. See the 'how to apply section' on page 6 of this Call for Proposals for additional detail.
- Provide a letter signed by the health department director reflecting support for the applicant's participation and completion of contractual obligations.

Note: If an applicant is unable to obtain the letter of support by the proposal deadline of January 26, 2012, a letter may be submitted at a later date, but must be received prior to engaging in a contract with NNPHI.

See a preview of the online proposal template at:

<http://my.rwjf.org/viewApplication.do?cfp=2084>

SELECTION CRITERIA:

Proposals will be reviewed by an external review panel involving: NNPHI staff and consultants; representatives from national partner organizations; and RWJF staff. **Sites will be selected based on the following considerations:**

- Completeness and quality of the proposal.
- Evidence that the proposed QI project meets a significant need for improvement.
- Evidence that the QI project addresses broad public health functions or population health issues rather than clinic services or patient care.
- Identification of data source(s) that will be utilized to measure improvement.
- Clarity and specificity of the QI project aim statement, including baseline data and target for improvement.
- Identification of how the project could assist the health department to satisfy PHAB standards and measures.
- Feasibility of completing the QI project in the given timeline.
- Demonstrated capacity to meet the project requirements.

Incomplete proposals will not be reviewed.

SELECTED HEALTH DEPARTMENTS

Health departments selected through the QI Award Program will be required to:

- Designate a point of contact (the staff member with whom NNPHI will directly communicate on all matters relating to this project).
- Participate in all Project Activities, including:
 - Approximately 3-5 webinars/teleconferences

- 15 hours of distance-based QI technical assistance, provided by an experienced QI Coach
- With the assistance of the QI Coach, implement a QI project aimed at improving a process, output, or outcome.
- With the assistance of the QI Coach, document the results of the QI project for submission to the Quality Improvement in Public Health Practice Exchange (Practice Exchange) – a searchable online database (under development) that will organize information from the rapidly growing number of public health QI projects and make it easily accessible to practitioners and others.
- Submit a brief final report to NNPHI that documents the improvements gained and lessons learned from the implementation of the QI project.
- Provide information, feedback, evaluations, and suggestions on QI Award Program activities as requested via questionnaires and/or interviews with NNPHI staff.
- Adhere to NNPHI’s standard contract (see Attachment A).
- Execute a contract with NNPHI within 45 days of notice of selection (sites will be notified of selection status no later than March 2, 2012).

Health departments selected through the QI Award Program will be provided with:

- A monetary award of \$5,000 to support costs directly associated with the project.
- 15 hours of individualized technical assistance provided by an experienced public health QI Coach.

Note: QI Coaches will be identified by NNPHI via a competitive application process. All QI Coaches will have expertise in providing QI consultation and technical assistance in health departments or similar settings. The majority of the QI Coaching will be distance-based, with an opportunity for health departments and coaches to meet face-to-face at an Open Forum Meeting in June 2012. NNPHI will provide a teleconference line to enable conferences between a department and their coach.

- 3-5 webinars/teleconferences that will provide an opportunity for additional technical assistance and peer-exchange/learning.
- Connection to learning communities and national networks of public health professionals engaged in QI and accreditation work.
- Travel, lodging, and per diem for one person from the health department to attend the June, 2012 Open Forum meeting hosted by NNPHI.

HOW TO APPLY

Applicants will submit their proposals using the RWJF online system, which can be accessed utilizing the “apply online” link at <http://www.nnphi.org/copphi>. If you have not previously utilized this online system, you will be prompted to register the first time you access the site. The online system will be open on December 12, 2012.

There are two steps to the application process, *both of which must be completed using the online system*, available through the “apply online” link at <http://www.nnphi.org/copphi>:

1. **Intent to Apply:** Applicants should indicate their intent to apply by **3:00 p.m. ET on January 6, 2012**. **If you do not submit a letter of intent to apply by this deadline,**

you will not be able to submit a proposal. Once you indicate your intent to apply, you will be emailed a link that can be utilized to submit your proposal.

2. **Proposal Submission:** A proposal must be submitted by **3:00 p.m. ET on January 26, 2012**. No hard-copy proposals will be accepted.

See a preview of the online proposal template at:

<http://my.rwjf.org/viewApplication.do?cfp=2084>

It is strongly recommended that applicants use the “apply online” link at <http://www.nnphi.org/copphi> to become familiar with the online system and submission requirements *before* beginning to prepare any documents or materials or drafting a proposal. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline. In fairness to all applicants, the program will not accept late submissions.

Please direct inquiries to QIAward@nnphi.org. All inquiries will receive a response within 48 hours.

Web Conference:

Questions about this Call for Proposals will be answered during an *optional* web conference, to be held **at 2:00 p.m. -3:00 ET on December 19, 2011**. The web conference will include a review of the objectives of this program, describe this solicitation and describe the requirements for proposals.

Registration is required to participate on the web conference. Registration information as well as instructions to join the web conference are available at <http://www.nnphi.org/copphi>.

Participation in the web conference call is strongly encouraged, but not required.

The web conference will be recorded and archived on the NNPHI website at: <http://www.nnphi.org/copphi>.

KEY DATES AND DEADLINES

- **December 19, 2011 (2 p.m.-3 p.m. ET)—Applicant Web Conference**
Registration is required. Please visit <http://www.nnphi.org/copphi> to register and find instructions to join the web conference.
- **January 6, 2012 (3 p.m. ET)**—Deadline for receipt of letter of intent to apply submitted online.
- **January 26, 2012 (3 p.m.ET)**—Deadline for receipt of full proposal submitted online.
- **By March 2, 2012**—Sites notified of selection.
- **March 2012**—Contracts initiated

The Following dates are tentative and subject to change

- **April 1, 2012**—Contract start date
- **November 30, 2012** – QI projects must be completed

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- **December 30, 2012**-Contract end date. Final reportsjQI project write up for Quality Improvement in Public Health Practice Exchange Due

THIS AGREEMENT made and entered into this X day of DATE, by and between the following:

National Network of Public Health Institutes, a private, non-profit Corporation, represented herein by Joseph D. Kimbrell, Chief Executive Officer of the National Network of Public Health Institutes, duly authorized, whose mailing address is 1515 Poydras Street, Suite 1200 New Orleans, LA 70112 (hereinafter referred to as “NNPHI”), and [Contractor Name] (herein referred to as “Contractor”).

During the performance of this agreement, the parties hereby agree to the following terms and conditions:

1. This Agreement shall be in effect from [date] to [date].
2. Contractor’s obligations include but are not limited to the following:
 - *Conduct a quality improvement project as outlined in the proposal submitted to NNPHI in response to Strengthening the Community of Practice for Public Health Improvement (COPPHI): QI Award Program Call for Proposals*
 - *With the assistance of a QI coach, document the results of the QI project and submit it to the Quality Improvement in Public Health Practice Exchange (Practice Exchange).*
 - *Participate in all Project Activities, including:*
 - *3-5 project webinars/teleconferences*
 - *15 hours of distance-based quality improvement technical assistance, provided by a QI Coach*
 - *Submit a brief final report to NNPHI that documents the improvements gained and lessons learned from the implementation of the QI project.*
 - *Provide information, feedback, evaluations, and suggestions on QI Award Program activities as requested via questionnaires and/or interviews with NNPHI staff.*
3. Terms of Payment: In consideration for the services actually rendered by Contractor under the terms of this Agreement, NNPHI shall pay Contractor a maximum of \$5,000, to be paid in two installments, with the first installment of 75% (\$3,750) due and payable at the at the signing of this agreement. The final installment of 25% (\$1,250) will be due and payable within thirty (30) days of receipt of a final report due [insert due date]. Invoices must be submitted for final payments. Please include the contract number listed above on the invoice and submit it to the attention of Merilee Jones at mjones@nnphi.org. Any approved direct travel costs for meetings and/or conferences will be reimbursed at cost, and are not included in this contract.
4. In the performance of the work, duties and obligation assumed by and imposed upon Contractor under the terms of this Agreement, it is mutually understood and agreed that Contractor is at all times acting and performing as an independent contractor.

5. Contractor shall be solely responsible for all federal, state and municipal income taxes, social security, retirement and all other taxes and NNPHI shall not withhold taxes or be obligated in any manner therefore. Contractor is solely responsible for workmen's compensation as required by state law and prescribed by the statutory limits and any other legally required insurance. No relationship of employer and employee is created by this Agreement. It is expressly understood by the parties that NNPHI shall neither have nor exercise any control of direction over the methods by which Contractor shall perform the work and functions subject to this Agreement, which Contractor further agrees to perform pursuant to and at all times in strict accordance with all applicable laws and regulations.
6. Contractor shall abide by the laws and regulations concerning confidentiality which safeguard information and the patient/client confidentiality.
7. This Agreement being personal to Contractor shall not be assignable by Contractor to any other party without NNPHI's prior written approval. Furthermore, Contractor shall not substitute the services of another party for Contractor's Services hereunder without prior written approval of NNPHI. Violation of this Section will be cause for immediate termination of the Agreement.
8. Any alterations, variations, modifications or waivers of provision(s) of this Agreement shall be valid only when they have been reduced to writing, duly signed by both parties, and attached to the original of this Agreement. No claim for services furnished or requested for reimbursement by Contractor, not provided for in this Agreement, shall be allowed by NNPHI.
9. It is understood and agreed that the Contractor, in rendering the services listed herein, acts on its own and NNPHI shall not be held liable for acts of the Contractor which may result in damage.
10. Request agreement be silent as to Governing law.
11. No funds provided herein shall be used to urge any elector to vote for or against any candidate or proposition on an election ballot nor shall such funds be used to lobby for or against any proposition or matter having the effect of law being considered by the legislature or any local governing authority. This provision shall not prevent the normal dissemination of factual information relative to a proposition on any election ballot or a proposition or matter having the effect of law being considered by the legislature or any local governing authority. Agreements with individuals shall be exempt from this provision.
12. Upon completion of this Agreement or if terminated earlier NNPHI shall have the right to reproduce, publish, or otherwise use the materials generated by the project.
13. All records prepared pursuant to this contract shall be retained and safeguarded for a 5-year period following the termination of this contract, and said records shall be made available to either party to this contract, and/or an independent auditor retained by either party.
14. Neither party to this contract shall discriminate against any person on the basis of race, ancestry, national origin, color, sex, disability, age, or religion and the parties shall conform to the applicable provisions of the federal and state anti-discrimination acts.

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15. Waiver of a breach in performance of any term of this contract shall not be construed as a waiver of any subsequent breach of the same or any other performance or provision of this contract.
16. Any provision of this contract determined to be invalid or unenforceable shall not affect the validity or enforceability of the remaining provisions, and in all respects the contract shall be construed as if such invalid or unenforceable provisions were omitted.
17. This contract supersedes all prior negotiations and contracts between these parties with respect to the matters stated herein, and it represents the entire understanding of the parties.
18. All notices which are required or which may be given pursuant to any provisions of this contract shall be made in writing and shall be deemed by the parties sufficient in all respects if delivered as follows:

If to NNPHI:
National Network of Public Health Institutes
[insert information]

If to Contractor:
[insert information]

or to such other address or to the attention of such other person as may be identified by a party during the term of this contract.

19. It is the responsibility of the Contractor to advise NNPHI in advance if funds or terms included in the Agreement may be insufficient to complete contract objectives.

THUS DONE AND SIGNED in New Orleans, Louisiana, on the day and date herein first above mentioned.

Approved As To Form

