Oversight and Advisory Committee

Request for Partnerships (RfP)

Strengthening Community Solutions to Improve Black Maternal and Infant Health

June 2021

The Wisconsin Partnership Program (WPP) was established at the UW School of Medicine and Public Health in 2004 through a generous endowment gift from Blue Cross Blue Shield United of Wisconsin’s conversion to a stock insurance corporation. The Wisconsin Partnership Program’s mission is to bring about lasting improvements in health and well-being and advance health equity in Wisconsin through investments in community partnerships, education and research.

The Wisconsin Partnership Program’s Oversight and Advisory Committee (OAC) advances health and health equity through a commitment to supporting community-based organizations, led by community members who best understand factors that determine their community’s health and well-being. The Partnership Program also believes that bridging the expertise and resources of the university with the lived experiences and expertise of communities strengthens its ability to successfully address and influence health and advance health equity together.

Steadfast Commitment to Black Women, Mothers and Infants

The Wisconsin Partnership Program is committed to improving health and advancing health equity in Wisconsin and continues to be deeply invested in supporting the health of Wisconsin’s under resourced and marginalized communities, including addressing the significant disparities in Black maternal and infant health outcomes.

WPP has supported efforts to reduce disparities in Black maternal and infant health outcomes through a strategic grant program. Now, as a result of the growing understanding of the root causes of poor maternal and infant outcomes, and the growing array of community-based efforts to address them, the Wisconsin Partnership Program is transitioning from a strategic funding model to a competitive grant program model. Through this Request for Partnerships, the Wisconsin Partnership Program is
expanding its approach to addressing inequities in birth outcomes by engaging a broader circle of partners and supporting a range of effective approaches to improve Black maternal and infant health outcomes.

Background

WPP has been addressing this issue for many years and acknowledges the broadening awareness at both the national and local levels for urgent attention to the Black maternal and child health crisis. For example, at the national level, influential health policy thinkers like the Aspen Health Strategy Group of the Aspen Institute recently released the report – *Reversing the U.S. Maternal Mortality Crisis* and here in Wisconsin, there have been at least 11 local declarations that racism is a public health crisis and contributes to poor health outcomes of populations and individuals. Encouraged by this growing awareness, WPP is embarking on this new funding strategy rooted in community.

WPP recognizes the significant challenges facing communities, increased by the challenges of the pandemic, and seeks to support efforts in place, that will result in immediate impact. Research shows that strengthening community supports and resources can relieve some of the challenges, including toxic stress that Black mothers are managing and allow for improved health outcomes for both mother and infant.

This RFP focuses on the important and effective work already occurring to improve health for Black mothers and infants. With this RFP, WPP aims to strengthen and expand capacity to help community-based organizations and community models of care serve women and families more effectively. The challenges of improving Black maternal health and infant mortality have existed in Wisconsin for too long and remain a challenge that cannot be solved by a single funder or institution. Ideally, this will be one of many collective steps to steer the state toward progress and improve health outcomes for Wisconsin’s Black women and children.

**GOAL OF THIS GRANT**

Wisconsin remains one of the worst states in America for a Black child to be born. Wisconsin Black infants are about 3 times more likely to die before their first birthday than their white peers. Moreover, Black mothers in Wisconsin face severe complications during pregnancy, have a higher rate of pregnancy related deaths and severe maternal morbidities than white mothers.

To address this complex and ongoing health challenge, the Oversight and Advisory Committee of the Wisconsin Partnership Program will allocate up to $2 million over two years to organizations to expand and strengthen successful strategies and approaches for improving Black maternal and infant health. Priority will be given to those organizations that can illustrate a track-record of successfully supporting Black communities and that have established trust-based relationships with Black women, specifically women of childbearing age and who are already mothers. WPP recognizes the power of interconnected programming and collaboration focused on the whole family and will give consideration to organizations.
connecting to both the adult (mother/father/partner/caregiver) and infant, a two-generation approach (2-Gen). Promising 2-Gen practices build family well-being by intentionally meeting the needs of young children and the adults in their lives together.

**FUNDING, DURATION and SCOPE**

The Wisconsin Partnership Program will provide up to $2 million to strengthen and expand the capacity of community-based organizations and community models of care to serve women and families more effectively, thereby improving health outcomes. Each award will be for a maximum of **$150,000 for up to two years**. This funding prioritizes areas of the state with the highest populations of Black families and Black maternal and child health disparities: Dane County, Kenosha County, Milwaukee County, Racine County, and Rock County. Other areas of the state are eligible to apply.

Proposals must address at least one of the four priority areas:

1. Supporting Black women’s health before a possible pregnancy by programs, such as:
   - Providing health and wellness education, including stress reduction through traditional and cultural practices, self-care, mindfulness and exercise
   - Providing information about maternal and prenatal health, including options for mental health needs, smoking cessation and alcohol/drug reduction programs

2. Expanding community-based models of care to be responsive to the desires/needs of pregnant Black women, such as:
   - Midwives, doulas, perinatal community health workers and other birth care providers
   - Peer support groups such as Centering Pregnancy or other models
   - Education to empower mothers of their ideal birth options
   - Creating a pipeline into culturally responsive education and apprenticeship to become a doula, midwife, and other supporting birthing professions

3. Strengthening access to post-partum maternal care and infant needs, such as:
   - Breastfeeding assistance and education through lactation consultants or other support providers
   - Maternal depression screening and post-partum mental and behavioral health programming and support, and providing the option for one year after birth
   - Safe sleep efforts and resources
   - Comprehensive home visitation programs, focused on the challenges of being a parent, whether it is the first time or not, and the dynamic growth and brain development of the infant

4. Prioritizing the needs of the infant and the family adults together, such as:
   - Programming to build family life routines (e.g., daily reading, singing, playing) to foster strong adult-child bonds and early learning
   - Collaboration with early learning centers (e.g., Early Head Start) and adult education and job readiness
Engaging expectant fathers and current fathers through positive support initiatives, with special consideration to those families managing issues stemming from Wisconsin’s high incarceration rate of Black men.

Reaching the student parent and supporting both the young child and the needs of a parent in training or school.

**ELIGIBILITY**

**Eligible Community Lead Organizations must:**

- Be a Wisconsin-based, nonprofit, IRS tax exempt, 501(c)(3) organization, or a tribal or local government entity.

By applying for a Wisconsin Partnership Program grant, applicants agree to the Partnership Program’s terms and conditions.

**KEY DATES AND DEADLINES**

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**HOW TO APPLY**

**Step 1: Letter of Intent. Due June 28, 2021 by 11:59 PM.**

Applicants invited to submit full proposals will be notified on July 22nd.

To start a Letter of Intent, go to: https://www.GrantRequest.com/SID_5637?SA=SNA&FID=35377

If you've already started a Letter of Intent, access it by logging into: https://www.grantrequest.com/Login.aspx?ReturnUrl=%2faccountmanager.aspx%3fSA%3dAM%26sid%3d5637&SA=AM&sid=5637

MATERNAL AND INFANT HEALTH – JUNE 2021
Applicants will be asked to submit the following information by uploading PDFs to our online grant management database.

- Contact information and IRS determination letter (501c3) or other relevant documentation.

Letters should be a maximum of three pages (11-point font, 1-inch margins) and should include the following information in the order listed below.

- Organizational mission and description of existing capacity and experience in supporting Black maternal and infant health.
- Population served (include specific geographic areas where you focus your work).
- Describe how your organization is led or informed by those who best understand the challenges of Black families and the complex work of improving maternal and infant health outcomes.
- Describe the major activities you propose under this grant and time frame for each activity.
- Provide a bulleted list of partners you will engage and their role in this work (e.g., childcare centers, schools, hospitals, health systems, government, private sector, philanthropy, nonprofits, faith-based organizations, etc.).
- Share your connections to maternal and child health and early childhood policy, advocacy, and systems change efforts at all levels, local, state, and federal. Please do include connections through membership associations, a collective impact table, etc.

Other information requested – please upload:

- Financial Statements- please attach a recent audit report or IRS Form 990 issued less than 15 months prior to the application date. If your organization does not have an audit or IRS Form 990, provide a balance sheet and income statement for the most recent closed accounting period.

Letter of Intent Criteria

*Partnership Program staff and content experts evaluate each submission to check for eligibility and fit with the intent of this award program. Submissions that do not meet eligibility requirements will not move forward.*

- Does the letter meet eligibility requirements and illustrate an alignment with the goals of this funding program?
- Does the applicant have expertise in maternal and child health?
- Has the applicant shown evidence of successfully connecting with and providing activities that are responsive to the specific needs of Black women, mothers, and infants?
- Are appropriate partners identified?
- Due to the effects of the pandemic, does this organization show evidence that the proposed work can be implemented and adapted to meet the needs of mothers and infants? How has the organization adapted to the challenges of the continuing pandemic?

Applicants will be asked to submit the following information by uploading a PDF to our online grants management database.

**Narrative (5-pages maximum, 11-point font, 1-inch margins)**

**Executive Summary (one page maximum, 11-point font, 1-inch margins)**

The summary is a succinct and accurate description of the proposed work when separated from other application materials. Your summary should include (a) description of need for this specific approach to strengthening capacity for Black maternal and infant health, (b) an overview of the proposed grant activities and desired outcomes, (c) the partnerships involved, and (d) the contextual factors that will support or hinder progress toward realization of outcomes.

**Activities and Evidence Base (three pages maximum, 11-point font, 1-inch margins)**

- What are the proposed primary activities that will be completed within the timeline of the initiative and what are the specific goals for each activity?
- What is the existing evidence supporting the proposed approach? If you are piloting an approach that will contribute to the evidence-base, please explain why you are taking the proposed approach.
- What are the preconditions that must be in place to bring about the long-term goal (e.g., Medicaid funding, continuation of partnerships, etc.)?
- What is being considered to sustain the work to improve the health outcomes for Black mothers and infants and are there efforts to expand and scale the work?
- Have you reached an audience to share the story of the work that is already underway for maternal and infant health? Please share any links or connections to media and awareness building.

**Reach, Evaluation and Learning (one page maximum, 11-point font, 1-inch margins)**

Evaluation is critical to better understanding what approaches are proving effective. Understanding the full scope of a program’s outcomes provides invaluable knowledge to guide further investment and possible expansion plans. Grantees funded through this grant program will collaborate with the Partnership Program and evaluators to document and evaluate outcomes and lessons learned.

- How many persons are expected to be impacted by this project (i.e., Black women served, Black newborns and infants served, homes visited, parents trained, etc.)?
- Do you collect feedback from the individuals you serve? Are there points in time through your relationships where you solicit data on how the consumer of services perceives your organization’s work? Will you be able to provide impact touch points (i.e., a mother served, a home visitor on staff, a father engaged) for the grant managers to communicate with about the services and support provided?
- Are you connected to larger efforts to change policy or innovate systems to better meet the needs of Black mothers and infants/children?
Letters of Commitment from project partners and past recipients of service (no page limit)

Letters of commitment provide a crucial piece of an overall application. Each named partner from the Letter of Intent stage should provide a letter of commitment. Letters from Black community members and individual mothers or family members and others who have received support from your work are also welcome and encouraged. There is no page limit for letters of commitment. Letters can be handwritten.

Budget (using budget template provided)

*Please note that the Wisconsin Partnership Program operates under a quarterly cost reimbursement model. This means that your organization must incur expenses and request reimbursement. Funds are not distributed at the onset of the award.*

Project Budget

The project budget should clearly indicate how the grant funds will be spent. Expenditures must:

- be fully justified and reasonable to complete the project’s goals;
- reflect the activities listed in the proposal; and
- explain the sources and amounts of any cash-match or cost-sharing funds.

Requests should be made by expense type (salary and fringe benefits, services, travel, supplies, etc.) and should provide sufficient detail for individuals unfamiliar with the project.

Budget Justification (upload as a PDF, 1-inch margin, 11-point font)

A budget justification is required for purposes of describing in detail the major budget line items: salary and fringe benefits, travel, services, and supplies and other expenses. The narrative should provide specific information about why an expense is necessary to achieve the project’s goals and objectives.

Use of Funds

Guidelines for allowable/unallowable expenses are available for review on the Wisconsin Partnership Program website.

Funds must be used for project-related costs, examples include:

- Personnel expenses, i.e., salaries and benefits
- Salary support for academic partners (if applicable)
- Consultant and contract services (e.g., training)
- Travel
- Office supplies and participant incentives directly related to the scope of work
- Services that are not otherwise available or reimbursable

Funds may not be used for:

- Patient care with the sole purpose of providing clinical services related to treatment or follow-up for specific health conditions; such as funded or reimbursable clinical services.
• General overhead expenses, i.e., general administrative support, office space and cost-allocations for expenses not directly related to the project
• Lobbying
• Pre-award or proposal costs
• Capital expenditures costing $5,000 or more with a useful life of two (2) years or more; exceptions may be made for capital expenditures if such equipment is crucial to the primary objectives of the project; Wisconsin Partnership Program pre-approval is required.
• Projects outside the state of Wisconsin
• Supplanting

Other documentation
• Non-supplanting questionnaire (provided online)
• Human subject approval plans (if applicable)
• Designation of confidential and proprietary information forms (using template provided)

All proposals are due no later than 11:59 PM on August 23, 2021.

PROPOSAL REVIEW AND FUNDING DECISIONS

The Oversight and Advisory Committee will use the following criteria and scoring rubric to make funding decisions.

Criteria for proposal review:

• The proposal provides a clear and convincing summary of the work and gives reviewers confidence that the organization and proposed approach can have a positive impact on Black maternal and infant health. 25 points
• The proposal illustrates a strong and qualified lead applicant and has illustrated trust-based relationships with Black women and children who will be supported by this work. 25 points
• Letters of Commitment are specific to the work, commitment and involvement of the individual or group submitting the letter. Template letters will not be considered positively. 20 points
• The proposal considers sustainability of the work and future opportunities for scalability and reach. 15 points
• The proposal includes an avenue for participant feedback and continuous improvement. 15 points

The Oversight and Advisory Committee final vote will take place at their meeting on October 11, 2021. Decisions made by the OAC are final and not subject to appeal.

Grantees will be notified of the award decisions by or on October 15, 2021.

Earliest start date is December 1st, 2021.
TERMS AND CONDITIONS

By applying for a Wisconsin Partnership Program grant, applicants agree to the Partnership Program’s terms and conditions. For more information or assistance, please contact:

Renuka Mayadev, JD  
Program Advisor, Maternal Child Health  
Wisconsin Partnership Program  
mayadev@wisc.edu

Courtney Saxler, MPH  
Program Officer  
Wisconsin Partnership Program  
csaxler@wisc.edu

Jon Thomas  
Assistant Director for Finance  
Wisconsin Partnership Program  
thomas38@wisc.edu