

## Frequently Asked Questions Health Equity Request For Proposals

Do you have to attend the RFP Webinar to submit proposal?

No, you do not, link of the recording can be found below for review: <a href="https://us06web.zoom.us/rec/play/YyGy4MHUbfnRzhk7CzvxXa5eJtO6dy-tbx">https://us06web.zoom.us/rec/play/YyGy4MHUbfnRzhk7CzvxXa5eJtO6dy-tbx</a> rKW1XvPeD6J0TwBwH5FEh2yk0QCaBud3uW4F6V6el9h41.sGGCCAXGfezZT00D

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Is this related to collective impact work?

Yes, we use a collective impact approach through the LHIP process to address county health priority areas: Type 2 Diabetes, Adverse Childhood Experiences (ACEs), and Mental Health. (https://healthierfrederick.org/about/what-we-do)

How would you say you are currently integrating health equity?

The Coalition is currently integrating health equity through several avenues. Some of the primary ways that is currently being conducted include:

- Directing the Local Health Improvement Process (LHIP) Workgroups on mental health, adverse childhood experiences and type 2 diabetes to focus on health disparities within the health outcomes covered by their respective areas with a goal of reducing those disparities.
- Board recruitment strategies are organized around increasing diversity and representation of the Frederick County resident population.
- Leading a statewide data disaggregation advocacy project for state health department reports that would impact available data at the county level (<a href="www.dataequitymd.org">www.dataequitymd.org</a>).
- Do you imagine that this work will be done in-person or virtually?

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We would expect capacity to support a hybrid approach. Some of our work is done virtually and some is done in person.

• Is in-person attendance expected for all quarterly board meetings, or will select board meeting(s) with health equity education/competency agenda items be identified for in-person attendance?

The quarterly public community health meetings the Coalition convenes are always virtual and are an hour long. Board meetings are monthly on the first Wednesday of the month at 11AM and last for an hour. We would expect the selected consultant to attend the quarterly meetings. The selected consultant would not need to attend all board meetings, and for the board meetings they would attend they would not be required to attend the whole meeting. We do have an annual board retreat in August that is in person in Frederick, Maryland and typically is scheduled for 8:30AM-12Noon. The August 2024 board retreat has not been scheduled yet, and the selected consultant would have the opportunity to indicate their availability when Coalition staff are scheduling it. We are currently planning that the August 2024 board retreat would focus on the health equity project, and that the health equity consultant hired would work with staff to plan the retreat agenda. The consultant would be primarily responsible for putting together the content that would be covered during the retreat.

 How frequently should the project manager and key staff expect to attend Coalition meetings? Are those meetings in-person, virtual, or a hybrid? What is the meeting cadence and length?

See the previous answer for part of the answer to this question. However, we would add that in addition to the quarterly community health meetings, occasional board meetings and the annual board retreat in August that the consulting firm hired would meet with Coalition staff every other week to maintain momentum on the project. These meetings would be virtual and last 30 minutes. In addition, the hired consulting firm would be expected to attend several Local Health Improvement Process Workgroup meetings. These Workgroups meet monthly, and their meeting schedule is available on our website (<a href="https://healthierfrederick.org/priorities/join-a-workgroup">https://healthierfrederick.org/priorities/join-a-workgroup</a>). Most meetings are virtual, though there could be an in-person meeting if it was agreed upon that the content to be covered would be more productive and impactful if covered in person. Workgroup meetings last 90 minutes.

 Are bi-weekly updates assumed to be written progress reports, project sponsor conference calls, or a combination of both?

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A combination of both. The Coalition would prefer if the selected consulting firm used Microsoft Teams, or another agreed upon online project management platform to conduct the scope of work for submitting written progress reports and other deliverables.

How would you describe their relationship with the hospital and health department?

The Coalition's relationship with the Frederick County Health Department and Frederick Health (the county's only hospital) is incredibly close and positive. Several representatives from the health department and hospital are on the Coalition's board of directors (<a href="https://healthierfrederick.org/about/board-of-directors">https://healthierfrederick.org/about/board-of-directors</a>) and the Coalition has written partnership agreements with each entity (<a href="https://healthierfrederick.org/partners">https://healthierfrederick.org/partners</a>). In addition, the Coalition meets at least monthly with a designated contact from each entity to keep each other up to date on various endeavors and to ensure that the partnership is yielding maximum impact for all parties

For further questions or clarification, contact:

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