Collaborative Improvement and Innovation Network on Infant Mortality (IM CoIIN)
Funding Opportunity Number: HRSA-17-105

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Webcast Outline

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Maternal & Child Health Bureau (MCHB)  
Collaborative Improvement & Innovation Network (CoIIN)
History of the CoIIN to Reduce Infant Mortality
(p. 10-11 NOFO)

• Pilot phase in HRSA Regions IV and VI (2012-2014)
  • 13 southern states – each with their own infant mortality team
  • 5 IM CoIIN Strategy Teams – each focused on a common aim

  • Spread to HRSA Region V in 2013, and then remaining 7 HRSA regions in 2014
  • Currently has 57 participating states/jurisdictions
  • 6 IM CoIIN Learning Networks with a common aim: safe sleep, smoking cessation, pre- and early-term birth (17-P and/or EED), preconception/interconception care (postpartum visit, adolescent well visit, and/or birth spacing), risk appropriate perinatal care (i.e., perinatal regionalization), and social determinants of health (SDOH)
  • Supported through a cooperative agreement with the National Institute for Children’s Health Quality (NICHQ) through Sept. 29, 2017

• MCHB intends to support an enhanced model or approach that will retain components that were most beneficial to states/jurisdictions and other entities working to reduce infant mortality, and also address some of the early lessons learned that were gathered during the national expansion of the IM CoIIN.
Overall goal of IM CoIIN is to reduce infant mortality in areas with high annual rates, as well as disparities in infant mortality and related perinatal outcomes, through support of 1) collaborative improvement, 2) collaborative innovation, and 3) the spread and scale of best practices to reduce infant mortality. Specific aims/objectives of IM CoIIN are to:

1) Achieve measurable improvements in specific aims...as defined by the CoIIN teams during the project period

2) Accelerate the development and/or discovery of innovations and new evidence to reduce infant mortality, as well as disparities in infant mortality and related perinatal outcomes

3) Support dissemination, spread and scale of best practices to reduce infant mortality as well as disparities to stakeholders in all states/jurisdictions
Funding Summary (p. 14 NOFO)

- **Number of Awards:** Four (4) cooperative agreements
- **Award Amount:** Up to $500,000.
- **Project Start date:** September 30, 2017
- **Project Period:** Three (3) years (Sept. 30, 2017 – Sept. 29, 2020)
Eligibility Information (p. 14 of NOFO)

• **Eligible Applicants:** Any public or private entity. Faith-based and community-based organizations, tribes, and tribal organizations are eligible to apply.

• Foreign entities are not eligible for HRSA awards, unless the authorizing legislation specifically authorizes awards to foreign entities or the award is for research. This exception does not extend to research training awards or construction of research facilities.

**NOTE:** Multiple applications from an organization are not allowable.

See p. 14-Section III of NOFO for additional details on Eligibility.
Award Recipients: “Backbone Organization” to CoIIN team

• May apply on behalf of a CoIIN team for one of the estimated four awards, with a ceiling amount of up to $500,000 per year

• Award recipients will serve as the backbone organization for the CoIIN teams (sub-recipients), with roles and responsibilities including coordination and financial and/or technical (i.e., content expertise) support for the CoIIN team.

• Among other things, you must identify in your application:
  • Participating organizations/entities on the CoIIN team
  • State/jurisdiction each one is from
  • CoIIN team’s common aim
IM CoIIN Teams

A CoIIN team:

• Is a voluntary, self-initiated, and participant-driven team consisting of organizations/entities from multiple states/jurisdictions desiring to work together for 18-24 months towards a specific common aim, while tracking progress using shared measures

• Consists of participants (i.e., organizations/entities) from a minimum of four (4) states/jurisdictions, and no more than fifteen (15) states/jurisdictions

  • at a minimum, team should include the State Title V Maternal and Child Health Block Grant Program from all participating states/jurisdictions

  • for states with Federal Healthy Start programs, you are expected to include as many such programs as possible on the CoIIN team

  • Other CoIIN team participants may be from any level within a state/jurisdiction (i.e., community, local, and state)
The **purpose of the CoIIN teams** is to produce measurable improvements in specific common aims, defined by the participants, during the project period and/or to accelerate the development and/or discovery of innovations and new evidence to reduce infant mortality as well as disparities in infant mortality and related perinatal outcomes using the CoIIN approach/methodology.
IM CoIN Teams (cont.)

• Participants on a CoIN team will initiate and select a common aim that is to be achieved by all participants on the team during the project period through implementation of various strategies and activities (i.e., sub-recipients’ specific projects/efforts); use of rapid cycle QI or innovation tools, methods, and techniques; and collaborative learning.

• The CoIN team and each participating organization/entity will implement activities to achieve the aim, and they can be at the community/local, state/jurisdiction, and/or regional level.
Common Aim/aim statement

• The common aim selected by the CoIIN team should be “SMART” (specific, measurable, achievable, realistic, and time-bound) and reflective of and responsive to participants’ priorities.

• Effective aim statements should clearly describe what the team intends to accomplish, and serves as the common vision and unifying goal determined by the CoIIN team.

• Aim statements should clearly describe the expected outcome, specific to a target population, and be descriptive in the timeframe for completion and measure of success.

CoILN Team Aims: Priority Topic Areas (p. 3 of NOFO)

1) Reducing non-medically indicated elective deliveries before 39 weeks gestation;
2) Expanding group prenatal care;
3) Increasing use of progesterone for women with a history of prior preterm birth;
4) Reducing tobacco use among pregnant women;
5) Increasing receipt of preconception/interconception care services (including postpartum visit);
6) Promoting optimal interpregnancy intervals;
7) Increasing use of low-dose aspirin to prevent preeclampsia;
8) Decreasing substance use/abuse during pregnancy (to prevent/decrease neonatal abstinence syndrome);
9) Improving safe sleep practices; and
10) Addressing social determinants of health (SDOH).

You may address topics not listed here, and should include evidence to support the link to infant mortality/perinatal outcomes in your application.
Award Recipients: “Backbone Organization” to CoIIN team (p. 4 of NOFO)

• The award recipient will serve as the backbone organization to the CoIIN team (sub-recipients) and ensure technical support (i.e., content/subject matter expertise) and financial support are provided to the CoIIN team (sub-recipients) through subawards.

• For example:
  • ensure coordination of overall team efforts, as well as support of participants’ CoIIN activities (i.e., QI and/or innovation), including travel support to attend any in-person meetings convened by the recipient
  • ensure continued engagement of participants and collaborative learning across the team
  • provide content/subject matter expertise and assistance with identifying strategies based on scientific evidence as needed
Data and Technical Assistance (DATA) Contractor

• Will be established through a separate HRSA/MCHB contract to provide technical assistance (TA) and support related to CoIN core methods (QI and innovation), QI data/measurement, and evaluation to assist award recipients and CoIN teams in assessing results and progress towards their aim.

• In addition, the contractor will provide CoIN teams with a web-based shared workspace/online platform for communication, collaborative learning and to track participant data (e.g., IM CoIN data dashboard).
Award Recipients: Summary of requirements (p. 4-5 of NOFO)

• Provide topic-specific content/subject matter expertise related to the teams’ self-selected aim, and assist with identifying strategies based on scientific evidence as needed

• Ensure CoIIN team implementation of projects, strategies, and activities that will achieve the common aim set by the team

• Ensure the CoIIN team collaboratively establishes shared measures and implements a team-specific measurement strategy in order to track progress towards meeting the common team aim

• Ensure the CoIIN team utilizes the IM CoIIN data tracker system/platform (i.e., data dashboard) provided by the DATA contractor to monitor and share progress on team-specific measures in ‘real-time’
• Ensure the CoIIN team (sub-recipients) submits data **annually** to the IM CoIIN data tracker system/platform (i.e., data dashboard) provided by the DATA contractor on the following initiative-wide measures for the duration of the project period:
  • Infant mortality rate (overall and by disparities)
  • Neonatal mortality rate (overall and by disparities)
  • Post-neonatal mortality rate (overall and by disparities)
  • Preterm-Related Mortality Rate (overall and by disparities)
  • Sudden Unexpected Infant Death (SUID) mortality rate (overall and by disparities)
  • Preterm birth rate (overall and by disparities)
• Facilitate collaborative learning within and among participants on the CoiIN team to share progress, lessons learned, and to exchange information

• Convene and conduct in-person meetings as needed (up to two per project year) to assist the team in meeting team-specific aims and/or IM CoiIN initiative aims, and ensure attendance by the CoiIN team (sub-recipients)

• Foster synergy among participants and/or align activities within the CoiIN team

• Help to address problems and barriers that are preventing participants from meeting the team aim

• Coordinate CoiIN team efforts and ensure continued engagement of participants

• Utilize the DATA contractor for assistance related to the core CoiIN methods (QI, innovation, collaborative learning) and for TA and support related to data, measurement, data analytics, and/or evaluation
• Work closely and collaboratively with the DATA contractor and ensure the following:
  • Participation by CoIIN teams (sub-recipients) in initiative-wide activities coordinated by the DATA Contractor, to include conference calls, webinars, and virtual and TA meeting(s)
  • Identification and sharing with the DATA Contractor of any successful innovations/improvements, best practices, and lessons learned that emerge/result from CoIIN team and assist with dissemination efforts
  • Collaboration between the CoIIN team (sub-recipients) and the DATA Contractor
  • Coordination, but not duplication, of efforts
Resources for Applicants in NOFO

• Glossary of Terms (Appendix A of NOFO)
  • “States/jurisdictions”
  • “Backbone organization”
  • “CoIIN Team”

• Section VIII: Other Information (p. 40 of NOFO)

• Footnotes/references throughout the NOFO
  • Example: “aim statements” p. 18 of NOFO, footnote #30.
Application and Submission Information (p.15-28 of NOFO)

PROGRAM-SPECIFIC INSTRUCTIONS (p.17), Project Narrative Sections:

• Introduction
• Needs Assessment
• Methodology
• Work Plan
• Resolution of Challenges
• Evaluation and Technical Support Capacity
• Organizational Information
Narrative – NEEDS ASSESSMENT

- **Describe the CoIIN team** (participating organizations/entities, what state/jurisdiction they are from, their role/purpose)
- **Briefly describe issue of infant mortality and disparities** in infant mortality within the states and/or region(s) represented
- **Provide CoIIN team’s aim statement** (common aim)
- **Provide rationale for the team’s selection of the topic area and aim; and evidence linking it to infant mortality or perinatal outcomes**
- **Describe challenges/barriers faced** among the CoIIN team in the selected topic area or common aim; any relevant unmet needs that will be addressed

Use and cite data whenever possible.
Narrative – METHODOLOGY

Describe plans and/or methods for:

- Implementation of MCHB CoIIN methodology as a framework for proposed activities
- CoIIN team’s various strategies and activities
- Ensuring technical (i.e., content/subject matter expertise) and financial support are provided to the CoIIN team
- Management of any subawards to be issued under this cooperative agreement
- Ensuring the CoIIN team collaboratively establishes shared measures and implements a team-specific measurement strategy
- Ensuring the CoIIN team (sub-recipients) utilizes the IM CoIIN data tracker system/platform (i.e., data dashboard) provided by the DATA contractor
- Facilitating collaborative learning and fostering synergy
- Coordinating CoIIN team efforts and ensuring continued engagement
- Identifying/sharing successful innovations/improvements with DATA contractor and assisting with dissemination
- Project sustainability
Narrative – METHODOLOGY

Discuss/describe

• actual or potential problems/barriers that affect the CoIIN team (sub-recipients) in meeting the team aim, and plans/methods for how they will be addressed

• plan for working collaboratively and closely with the DATA contractor and clearly explain how TA efforts/activities will be coordinated, but not duplicated

• plans/methods for ensuring participation by CoIIN teams in initiative-wide activities coordinated by the DATA contractor; use of the DATA Contractor for assistance related to the core CoIIN methods (QI, innovation) and for data, measurement, data analytics, and/or evaluation needs
Narrative – EVALUATION & TECHNICAL SUPPORT CAPACITY

Describe/discuss

• Plan for **monitoring and assessing project performance**

• Systems and processes that support your organization's performance management requirements; how the organization will **collect and manage performance data** in a way that allows for accurate and timely reporting of performance outcomes.

• Plans/methodologies to **evaluate outcomes/impact** of the CoILN team, including use of the real-time data collected and used by the team to drive improvement or innovation.

• Potential obstacles for implementing the evaluation plan and how those **obstacles will be addressed**.

• **If an external evaluator will be used**, describe how your agency will coordinate evaluation activities with this evaluator. Discuss how you will use the findings of your evaluation activities.
Describe:

• Organization’s current mission and structure, scope of current activities, an organizational chart in *Attachment 5*; how these all contribute to ability to conduct program requirements and meet program expectations

• **Project personnel**, including proposed partners and joint-applicant organizations/agencies

• Any **significant experience with MCHB-sponsored CoIINs** and your organization’s roles/responsibilities therein

• Relevant **experience related to infant mortality reduction** and/or programs, initiatives or projects to improve perinatal outcomes and disparities
  - Past or current work with state Title V Maternal and Child Health Block Grant Programs, Healthy Start award recipients, and/or other entities working to reduce infant mortality
  - Experience partnering to improve perinatal outcomes through a variety of mechanisms and processes on the community, state and/or national levels.
Describe:

- relationships to any agencies or organizations (subcontractors) with which you intend to partner, collaborate, coordinate efforts, or receive consultation from
- participating organizations/entities (sub-recipients) within each state/jurisdiction on the CoIN team and your relationship to them while conducting project activities.

Letters of agreement should be included in Attachment 4.

- current capacity/ability and demonstrated experience to:
  - Develop/maintain virtual teams and/or MCHB-sponsored CoIN teams
  - Provide ongoing TA to state/jurisdictional infant mortality teams and/or virtual teams, in order to meet shared aims and track progress using shared measures
  - Provide financial support (subawards) to participating organizations/entities
1. Work Plan, with logic model if desired
2. Staffing Plan and Job Descriptions for Key Personnel
3. Biographical Sketches of Key Personnel
4. Letters of Agreement and/or Descriptions of Proposed/Existing Contracts
5. Organizational Chart
6. Tables, Charts, etc.
7. Progress Report (for competing continuations only)
8. Request for Funding Priority
9. – 13. Other relevant documents (e.g. letters of support)
Review Criteria (p. 28-35 of NOFO)

• Criterion 1: Need (15 points)
• Criterion 2: Response (30 points)
  • Methodology (20 points)
  • Work Plan (5 points)
  • Resolution of Challenges (5 points)
• Criterion 3: Evaluative measures (10 points)
• Criterion 4: Impact (10 points)
• Criterion 5: Resources/Capabilities (25 points)
• Criterion 6: Support Requested (10 points)

NOTE: Funding Priority for Past performance (3 points)
Corresponds to Section IV’s Introduction and Needs Assessment

• Understanding of the purpose of the project, the problem, associated contributing factors to the problem, and needs of the target population.

• Understanding of issues related to project & key activities.

• Description of CoIIN Team composition
  • extent to which there are participating organizations/entities from a minimum of four (4) states and no more than fifteen (15) states;
  • extent to which the Title V MCH Block Grant Program from all participating states/jurisdictions is included, and Federal Healthy Start programs if applicable (i.e., the states represented on the team have Federal Healthy Start programs);
  • extent to which other participants such as community-based organizations, local health departments, state health departments/agencies, hospitals, health centers, consumer groups, etc. are included on the team

• Description of infant mortality and disparities in infant mortality within the states/jurisdictions/regions represented on CoIIN Team.
Review Criteria #1 – NEED (cont.)

• Clarity and quality of aim statement (common aim).

• Rationale for the team’s selection of the topic area/aim provided, and evidence linking the topic area/aim to infant mortality or perinatal outcomes.

• Clarity and quality of the applicant’s description of the challenges/barriers faced by CoINN team in topic or common aim.

• Extent that data are used and cited in the needs assessment narrative when applicable and feasible.
Corresponds to Section IV’s Methodology, Work Plan, and Resolution of Challenges

• METHODOLOGY (20 points)

• WORK PLAN (5 points)

• RESOLUTION OF CHALLENGES (5 points)
Clearly describes:

- how CoIIN methodology will be implemented
- CoIIN Team’s strategies and activities

**Strength, feasibility, and adequacy of the applicant’s plan to:**

- Ensure technical & financial support to CoIIN Team (sub-recipients).
- Managing sub-awards and assessing performance.
- Collaboratively establishes & implements measurement strategy.
- Ensuring CoIIN Team’s timely use of data tracker system/platform.
- Facilitating collaborative learning and foster synergy.
- Actual or potential problems/barriers to meeting aim, and methods to address them.
- Coordinating CoIIN team efforts and ensuring continued engagement.
- Working collaboratively and closely with DATA contractor; ensure TA is not duplicated
- Ensuring CoIIN Team participation in initiative-wide activities, and use of DATA contractor for TA on QI, innovation, data/measurement, evaluation
- Identifying, sharing, & dissemination of successful innovations & improvements.
- Sustainability after federal funding ends.
Corresponds to Section IV’s Evaluation and Technical Support Capacity

• Extent to which a plan for monitoring and assessing project performance is described and strength of the proposed plan

• Strength and adequacy of systems and processes supporting organization's performance management requirements.

• Strength, feasibility, and adequacy of the plans/methodologies to evaluate outcomes/impact of the CoIIN team and participating organizations/entities.

• Extent to which potential obstacles for implementing the evaluation plan described; and strength and adequacy of plans for addressing those obstacles.

• Extent to which plans for coordinating with external Evaluator are described, if one is used.
Corresponds to Section IV’s Methodology, and Evaluation and Technical Support Capacity

Strength, feasibility, and adequacy of applicant’s

- Plans/methodologies to evaluate outcomes/impact of the CoIIN team.
- Plans/methods for identifying and sharing with the DATA contractor any successful innovations and improvements, best practices, and lessons learned from CoIIN Team.
- Plan for assisting the DATA contractor with dissemination efforts
Corresponds to Section IV’s Organizational Information

• Extent to which applicant organization, proposed partners and joint-applicant organizations/agencies, and proposed project personnel are all qualified by training, expertise, and/or experience to implement and carry out the project.

• Extent to which organization’s mission, structure, and scope contribute to the ability to conduct requirements and meet project expectations.

• Extent to which project personnel (including proposed partners and joint-applicant organizations/agencies) are clearly described, and whether they have sufficient/relevant training, qualifications, expertise and experience to implement and carry out the project.

• The applicant demonstrates that any proposed partners and joint-applicant organizations/agencies have agreed to participate

• Extent to which applicant has relevant experience related to infant mortality reduction and/or programs, initiatives/projects to improve perinatal outcomes & disparities
  • Past or current work with state Title V MCH Block Grant Programs, Healthy Start award recipients, and/or other entities.
  • Partnering with relevant entities through a variety of mechanisms and processes on the community, state and/or national levels.
Corresponds to Section IV’s Organizational Information

- Extent to which the applicant has significant experience with MCHB-sponsored CoIsNs and provides a clear description of organization’s roles/responsibilities within that CoIN.

- Extent to which relationships to, any organizations/entities with which they intend to partner, collaborate, coordinate efforts, or receive consultation from while conducting project activities are described; and whether these will contribute to the applicant’s ability to conduct the project requirements.

- Extent to which participating organizations/entities within each state on the CoIN team (sub-recipients) are described, and the applicant’s relationship to them while conducting project activities.

- Quality/strength of letters of agreement.

- Strong and relevant experience with, and current capacity/ability, to:
  - Develop and maintain virtual teams and/or MCHB-sponsored CoIN teams.
  - Provide ongoing TA to state/jurisdictional infant mortality teams and/or virtual teams, in order to meet shared aims and track progress using shared measures.
  - Provide financial support (subawards) to participating organizations/entities.
Additional Considerations

• **Post-award Reporting requirements (p. 37-38)**
  • Progress Report, Final Report Narrative, Performance Reports
  • Performance measures and program data
  • Integrity and Performance Reporting

• **Ensure application does not exceed the specified 80 page limit (p. 15)**
  • Includes abstract, project and budget narratives, and attachments
  • Does **not include** standard OMB-approved forms included in the application package, Indirect Cost Rate Agreement, or proof of non-profit status (if applicable)

• Applications are due **July 17, 2017 at 11:59 PM Eastern Time (p. 27)**
Agency Contact Information

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Q & A
THANK YOU!

A **recording** of this TA webcast will be posted here:

https://mchb.hrsa.gov/fundingopportunities/