Letters of Support vs. Collaboration

- Often generic & repetitive
- Usually make no commitment for action or outcomes
- Add no value to your proposal unless they reflect a specific commitment of resources

- Specific & tailored to the collaboration
- Make a commitment for action aimed at project outcomes
- Are a value add because they reflect a specific commitment of resources
Types of Collaboration Commitments

- Letters of collaboration from state agencies & key partners that reflect:
  - Support for your application
  - Information about your relationship
  - Specific commitments to collaborate
  - Signed & dated

- Forms for collaboration from other partners & supporters that reflect commitments to:
  - Assist in information creation/dissemination
  - Host workshops, support groups, other activities
  - Provide input/feedback
  - Refer/accept referrals*
  - Signed & dated

Letters of Agreement, MOU, Contracts

“Attachment 4: Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific)

Provide any documents that describe working relationships between the applicant agency and other agencies and programs cited in the proposal. Documents that confirm actual or pending contractual agreements must clearly describe the roles of the subcontractors and any deliverables. Letters of Agreement/Memoranda of Understanding must be dated, signed, and specifically state details of commitments.”

RFP p. 15
“Letters of support must be dated and specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.).”

RFP p. 16
Letters of Collaboration-KEY Partners

- Identify KEY partners
- Develop outreach email & draft letter of collaboration & commitment for each key partner
  - Summary of support for your proposal
  - History of your work together
  - Specific description of collaboration commitment
  - Concluding paragraph reiterating support
  - Signature of agency head
- Who will follow up?
- Include in proposal & as attachment with cover sheet listing all letter sources

Referencing Letters in Proposal

- **Methodology Section**: “To ensure that we impact health providers, the project continues collaborative relationships with the American Academy of Pediatrics-NJ Chapter, particularly its Committee on Children with Disabilities and Medical Home Initiative; the Health Research and Educational Trust of the NJ Hospital Association, which has partnered with SPAN on several CMS-funded projects to enroll eligible immigrant children; and a CDC/AMCHP funded collaboration with the Boggs Center UCEDD to educate FQHCs, home visitors, and early childhood providers on screening. (The letters of support and collaboration from all three agencies are attached).”

- **Organization Information Section**: “The Arc’s Mainstreaming Medical Care project, the Family Support Center, the NJ Department of Health-Special Child Health Services, the NJ Department of Human Services-Office of Managed Care, the NJ Department of Children and Families Children’s System of Care for Children with Mental Health or Developmental Disabilities and Division of Family and Community Partnerships-Office on Early Childhood, and the NJ Department of Labor Division of Vocational Rehabilitation Services are represented on the Community of Care Consortium for CYSHCN and their letters of support and collaboration are included with this application.”
Incorporating Quotes into Proposal

Incorporating into Needs Assessment or Methodology:

Core Outcome 4: Early and Continuous Screening
“Being new to this country, facing a new diagnosis for my child was not easy. I neither found adequate support to understand the diagnosis nor received referrals to much needed services. Initially, I was scared to ask questions. Even though screening might be available, service providers need to do a better job of stressing to parents from different cultures the importance of such screening. Families from different cultures, especially South Asian families like mine, have many beliefs that interfere with screening and follow-up. Just telling us there may be a problem and giving us a specialist’s name is not enough.” South Asian NJ parent

As a section in Organizational Capacity:

“SPAN’s capacity to successfully operate the proposed project is recognized by our partners, including NJ’s leading disability and health advocacy organizations and relevant state agencies, as indicated by the following excerpts from this year’s letters of support and collaboration:”

Collaboration Commitments

- Summarize project activities
- Create Commitment Form with check-off space
  - Project Activities
  - # of projected families/professionals
  - Space for other collaborations
  - Signature, date, contact information
- Who will follow up?
- Aggregate & include summary (#’s) in proposal, list of collaborators as attachment
Incorporating Collaboration #’s

**Specific organization:**
- “To identify and serve immigrant and limited English proficient (LEP) families, the project will partner with the NJ Alliance for Immigrant Justice, members of which will provide in-kind translation services and will disseminate information about workshops, conferences, written materials, etc. to the over 10,000 families they serve throughout NJ. (SPAN is a member). NJAIJ members will participate in the project’s train-the-trainer sessions to build their own staff’s capacity to provide information and support to at least 250 immigrant and Limited English Proficient (LEP) families of CYSHCN.”

**Aggregated data:**
- “With the assistance of our partners, SPAN’s F2F will provide at least 21 county-based Health Advocacy workshops, 21 Transition to Adult Systems of Care workshop, and 21 Health & Education Rights of CYSHCN in the Child Welfare & Juvenile Justice Systems workshop each year. 30 of our partners have committed to host and recruit parents to participate in at least one workshop.”

Relevant Reviewer Comments

The applicant organization:

- “Documents extensive outreach networks, strong multiple collaborative partners, and demonstrates a history of obtaining and listening to consumer feedback to strengthen and improve programs and services.”
- “Clearly provides strategies for the dissemination of information through an extensive collaborative network of State, regional, and local resources.”
- “Documents a long history and capacity to serve a high volume of participants and is strengthened by the array of holistic partners to aid families with complex issues.”
Relevant Reviewer Comments

The application:

- “Thoroughly demonstrates the extensive partner relationships and collaborations maintained for the development of educational resources and the dissemination of information for the provision of training and for outreach to the underserved population.”
- “Provides numerous letters of support from high-level State agencies and educational institutions, and from the State Medicaid office.”

Sample Tools – Partner Outreach Form

<table>
<thead>
<tr>
<th>Name/Organization</th>
<th>Date of Outreach</th>
<th>Survey Feedback</th>
<th>Org. Commitment</th>
<th>Letter/Quote</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DD Act Agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Key Partners</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Partners</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Sample Tools – Input Form

<table>
<thead>
<tr>
<th>Current Activity</th>
<th>Keep this activity</th>
<th>Do more/different</th>
<th>Do fewer/less</th>
<th>Don’t do</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Health Advocacy workshops (2/year)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training for health professionals on medical home, screening, etc. (10/year)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual technical assistance to families on health resources, services, laws, insurance appeals, partnership, etc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Create &amp; disseminate resources &amp; tools on health advocacy for families Healthcare Financing Fact Sheet series, transition fact sheet, etc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintain website with health advocacy resources</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilitate support groups for underserved families</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilitate targeted activities for fathers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilitate targeted activities for grandmother caregivers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Represent family perspective on task forces</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support the Community of Care Consortium (quarterly meetings, workgroups on core outcomes)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(organization) agrees to partner with the Statewide Parent Advocacy Network in their Family to Family Health Information Center project as follows. Please check all that apply, then sign and date this form and fax to 973-642-8080 or email to Diana.autin@spannj.org.

___ Share information about SPAN’s F2F and how to access services with the families we serve

Projected # of families: ____________________________
Projected # of professionals: ______________________

___ Link to SPAN’s website including the F2F section of the website

___ Share SPAN’s F2F resources (fact sheets, toolkits, etc.) with the families we serve

Projected # of families: ____________________________
Projected # of professionals: ______________________

___ Partner with SPAN to identify additional needed resources (fact sheets, etc.)

___ Host SPAN F2F health advocacy workshops for the families we serve

___ Provide space for SPAN F2F family support groups for families in our community

___ Assist in connecting fathers to SPAN F2F activities targeting dads of children with special needs

Projected # of dads: __________________________

___ Assist in connecting grandmothers raising grandchildren to SPAN F2F activities targeting them

Projected # of grandmothers as caregivers: __________

___ Participate in the Community of Care Consortium for CSHCN and their families (quarterly)

___ Identify and connect SPAN with potential parent leaders

Projected # of potential parent leaders to be connected: __________

___ Other collaboration activities (please be specific and include projected #s if possible):

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Name: ____________________________ Date: ____________________________
Email: ____________________________ Phone: ____________________________
Summary

• Listing of all letters of support received, indicating those included in application
• Letters of support with specific commitments from state agencies & key partners referenced in application & attached with a cover sheet (see above)
• Listing of all collaboration commitments received
• Integrate #’s from collaboration commitment forms from other partners into your application
• Quotes from letters of support (& families assisted) integrated into your application

Evaluation Deeper Dive
Logic Models

Carolyn Fisher, PhD
Institute For Community Health

Building sustainable community health, together.
Outline

1. What is a logic model?
2. Why do you need a logic model?
3. How do you make a logic model?

What is a logic model?

- Visual representation of the theory of change
- A visual map representing how strategies will achieve change
Why do you need a logic model?

- You don’t!
  - But you DO need a theory of change
- Funders requirement
- Demonstrate accountability
- Show the value of your work

Logic Models are Useful!

- Helps articulate program theory
- Participatory creation of logic model helps build buy-in among stakeholders
- Reveals gaps and inefficiencies
- Clarifies assumptions
- Shows what we can measure
**Logic Model Components**

"If . . . then . . ."  "But, how?"

<table>
<thead>
<tr>
<th>Resources</th>
<th>Activities</th>
<th>Outputs</th>
<th>Outcomes</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>What you need to carry out the activities you have planned</td>
<td>What you do with the resources you have</td>
<td>What the activities produce (e.g., services, products)</td>
<td>What you expect to happen as a result of the outputs – short- and long-term benefits or changes for participants</td>
<td>The fundamental, long-term changes you are seeking</td>
</tr>
</tbody>
</table>

**CEO CLER Grant Program Logic Model**

**Assumptions**
- CEO/CLER Leadership:
  - Engages with CMA, senior leadership to earn funds for grant awards
  - Creates committee to review proposals

- Program Outcomes:
  - Achieve desired outcomes for grant award
  - Complete evaluation project

- Critical Questions:
  - What is the impact of the grant program?

**Logic Model Example**
- Create a team
- Define program goals
- Plan the evaluation
- Collect and analyze data
- Interpret, use and disseminate

**Short Term Outcomes**
- CMA Leadership & faculty understand both trainees' value & their challenges & concerns
- Trainers' projects create targeted improvements in clinical learning environment
- Trainers have improved knowledge, attitudes, confidence, & specific competencies

**Long Term Outcomes**
- CMA leadership & faculty increase their collaboration with trainees
- Faculty mentors become more committed to CMA
- Trainers feel empowered, efficient, & less burnout or training
- Trainers are more fulfilled, have healthier, empowering relationships to their work & the system of work

**Impact**
- Positive relationships between trainees, staff & senior leadership are well-developed
- Clinical environment at CMA is more positive for working & learning of trainees, staff & faculty
- More learners continue on as staff at CMA
- CMA's CEO/CLER model is realized in other CMA learning environments
- Across CPA, profile of training programs is raised
- Larger CMA offers around selection & CI is strengthened
- CMA culture change:
  - Problem approaches/ excitement & curiosity
  - People have skills to make change
- CMA recognized as:
  - Leader in improvement of clinical learning environment via CI research
  - Institution that promotes innovation & academic rigor
Parents reflect on their past experiences of being parented and identify what did and didn’t work in their own experience.

Parents make connections of unhealthy patterns they might repeat with their own children.

Parents feel hope and possibility that their situation/circumstances can be different.

Parents learn how to be self-reflective about their behavior.

Parents are aware that they must think about how they were parented in order to understand how to be a better parent.

Parents are willing to reach out for social support.

Parents learn how to increase their self-knowledge/self-awareness.

Parents learn that larger goals can be broken down into smaller achievable goals.

Parents identify concrete and achievable goals.

Activities

Plan the evaluation

Collect and analyze data

Interpret, use and disseminate

Create a team

Define program goals

Parenting Journey I Logic Model

Long Term Outcomes

Families are stronger and more resilient.

Communities are stronger, more resilient, and healthier.

Influencing Factors:

- Financial stability
- Education level
- Substance use
- Mental health status
- Depression
- Overstressed families (too many demands)
- Non-American value systems/cultural norms
- Oppression
- Income
- Isolation
- Immigration status and policy

Unintended Outcomes:

- Family members are more successful in other aspects of their lives.
- Participants complete a community center for participants.
- Participants form social support networks.
- Participants lose social circle and have to find healthier circles.

Improved Mental Health

Improved Parenting

Improved Child Outcomes

Carolyn Fisher, Ph.D.

cffisher@icommunityhealth.org

(781) 338-0394

Institute for Community Health

http://www.icommunityhealth.org

Thank you!