## FOUNDATION FOR COMMUNITY HEALTH

## Learning & Results Summary

January – December 2023

Last Update: September 2024



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## **EVALUATION PURPOSES**

why we evaluate our work

We evaluate to be accountable to the region we serve, to learn with the organizations we partner with, and to determine if our strategies to improve health, well-being, and equity are working. Understanding our impact and being open to improvement helps us be a better partner, funder, and community leader.



## **EVALUATION PURPOSES**

how we evaluate our work

At Foundation for Community Health, we center the experiences, expertise, and goals of the nonprofits we partner with. This looks like:

- developing reporting metrics in partnership with our grantee partners
- accepting reports created for other stakeholders
- using grant check-ins in lieu of a written report
- surveying our grantee partners to learn more about the effectiveness of the foundation



## **EVALUATION PURPOSES**

#### what we evaluate to learn

#### Grant Results

Outcomes and outputs as reported by FCH's Grantee Partners, to understand progress towards the outcomes identified in our Theory of Change.

## Foundation Effectiveness

The factors related to how FCH works and the ways we support our grantee partners, to understand if we're living our values and providing meaningful support.

## Community Health Indicators

Information related to health factors and health outcomes, to understand if our strategies to change the conditions that influence health are working.

#### **Short-Term Outcomes** Medium & Long-Term Outcomes Outputs **Impact** Annual 2025-2030 2021-2024 Local decisions X of X affordable housing plans are X% of participating communities # of communities engaged increasingly adopted Decision-making report influence of program on Support Local consider the effects # of participatory events or processes decisions and/or outcome of project **X of X** towns commit to bringing on community health and are broadband to their community X% of local leaders that report **X of 17** towns launch comprehensive improved through increased confidence in community community engagement campaigns **X of X** participating towns report citing or the direct input from related to broadband, food, and/or engagement or facilitating using community health information as part community participatory processes housing of their decision-making process members. Improve Community **X of 3** school districts in our region More aspects of Utilization of school-based health center establish a school-based health center our community # of students served services increases by X% work to improve Assets **X of 2** place-based investees achieve the conditions # of place-based investments their desired outcomes Insurance coverage of patients of required for developed Community Health & Wellness in North health, well-Community Health & Wellness opens its Canaan is reflective of the community at being and community health center in North large equity. Canaan Stronger, more X% of nonprofits in the Multi-Year General X% of nonprofits in the Multi-Year General effective and resilient # of organizations that report Strengthen Organizations Operating Support Program report organizations serve Operating Support Program and the improvement in their Program Quality, improvement in 4 of 8 functional areas of our community. Capacity Building Grant Program report a Workplace, Experimentation and/or their organization strengthened ability to meet their mission Mission/financial alignment Strengthened X% of nonprofits in the Capacity Building collaboration X% of nonprofits in the Capacity Building # of goals met by our Multi-Year Grant Program report improvement in at least between Grant Program participate in the Multi-Year **General Operating Support Grantees** 1 of 3 organizational health indicators organizations and General Operating Support Program (function, adaption, and growth) effectiveness of # of service organizations engaged networks improves **X of 2** FCH invested networks progress through local networks and coalitions X of 4 FCH invested networks and the delivery of along the engagement continuum services to our

collaboratives achieve their desired

outcomes

community.

the delivery of

services to our

community.

Contribution

engaged through local networks and

coalitions

Support Local

#### Medium & Long-Term Outcomes **Short-Term Outcomes** Outputs **Impact** Annual 2025-2030 2021-2024 Local decisions X of X affordable housing plans are **62%** of participating communities 12 communities engaged increasingly adopted Decision-making report influence of program on consider the effects 27 participatory events or processes decisions and/or outcome of project **X of X** towns commit to bringing on community health and are broadband to their community 12 of 17 towns launch 100% of local leaders report improved through increased confidence in community comprehensive community **X of X** participating towns report citing or the direct input from engagement campaigns related to engagement or facilitating using community health information as part community broadband, food, and/or housing participatory processes of their decision-making process members. 2 of 3 school districts in our region More aspects of Utilization of school-based health center establish a school-based health center our community **828** of students served through services increases by X% work to improve school-based health services Assets 1 of 2 place-based investees achieve the conditions Insurance coverage of patients of their desired outcomes required for 2 place-based investments Community Health & Wellness in North health, well-Community Health & Wellness Canaan is reflective of the community at being and constructs its community health center large equity. in North Canaan Stronger, more X% of nonprofits in the Multi-Year General effective and resilient 10 organizations reported organizations serve Operating Support Program and the improvement in their Program Quality, 75% of nonprofits in the Capacity Building our community. Capacity Building Grant Program report a Workplace, Experimentation and/or Grant Program report improvement in at least strengthened ability to meet their mission 1 of 3 organizational health indicators Mission/financial alignment Strengthened (function, adaption, and growth) collaboration X% of nonprofits in the Capacity Building 6 goals were met by our Multi-Year between Grant Program participate in the Multi-Year **General Operating Support Grantees** 3 of 4 FCH invested networks and organizations and General Operating Support Program effectiveness of collaboratives achieved their desired **153** service organizations were networks improves

**X of 2** FCH invested networks progress

along the engagement continuum

outcomes

We are investing in our community's social sector in ways that leverages community partnerships, contributes to its resiliency and effectiveness, and bolsters leadership development.

OUTCOMES

# **LEARNING QUESTIONS**

- Nonprofits are better able to anticipate, prepare for, respond and adapt to incremental or sudden changes
- More networks, coalitions, and collaborative efforts further their engagement efforts

 To what extent and in what ways is the operational health of organizations changing?

- What improvements to organizational health lead to resiliency and strengthened effectiveness?
- What conditions support increased engagement amongst the networks and coalitions with whom we partner?
- In what ways does increased collaboration improve service delivery in our region?

In 2023, **74%** of closed Grants (20 out of 27) met at least one of these outcomes at the end of their funded period.

#### **Grant Results**

9 out of 12 organizations that received funding through our Capacity Building Grant Program reported at least one improvement in Program Quality, Workplace, Experimentation and/or Mission/Financial alignment

100% of nonprofits in the *Capacity Building Grant Program* reported improvement in at least 1 of 3 organizational health indicators (function, adaption, and growth). Most reported changes in how their organization functions.

3 out of 4 FCH-invested networks and collaboratives achieved their desired outcomes

FCH funded 4
collaborative efforts.
One network's efforts
resulted in the
engagement of over
600 community
members and health
professionals in a daylong conference.

In 2023, Grantee Partners in FCH's Capacity Building Grant Program were most likely to report improvements in:

- Program Staffing
- Outreach and Follow-up
- Program Logistics
- Innovation

#### STRENGTHEN ORGANIZATIONS

Program Highlight: Nonprofit Community of Practice

#### Our Why

At FCH, we firmly believe in the power of collective wisdom and shared learning to drive lasting change. In 2023, in collaboration with Connecticut-based consulting firm Fio Partners, we launched our Nonprofit Community of Practice (CoP). Through the CoP, nonprofit leaders are provided with the tools and insights they need to navigate challenges and create viable solutions for their organization.

#### WHAT HAPPENED

18

nonprofit leaders were engaged in 4 learning sessions 8

organizational leaders received one-to-one coaching. Leaders were offered up to seven monthly coaching sessions.

#### WHAT WE LEARNED

- Deliberate connection is essential for capacity building. After our planning session in June 2023, we pivoted to an entirely inperson program.
- Case studies rooted in the leaders' real-life experiences were invaluable to the shared learning experience of the group.



2023 session topics were decided by the participants and included: navigating growth and change in your organization; leadership/management development (succession planning); short & long-term planning, and financial/operational sustainability.

#### Our Next Steps

We will continue this program in 2024, offering six in-person sessions and 1:1 leadership support to Executive Directors that received funding through our *Capacity Building Grant Program*. In addition to increasing the number of sessions offered due to interest from the nonprofit community, we also reworked our survey to understand whether the CoP was supporting learning between nonprofit leaders in our region.

#### STRENGTHEN ORGANIZATIONS

#### What We Learned & Changes We Made

Our *Capacity Building Grant Program* is continuously evolving, guided by the valuable feedback from our grantee partners and the changing needs of our community. In 2023, we gained several important insights that led to meaningful adjustments in our approach. The following table outlines what we learned and how we adapted our program in response. These changes reflect our commitment to providing flexible, responsive support that truly empowers our partners in their important work.

#### WHAT WE LEARNED

#### **Early Check-ins for New Grantees**

New grantee partners to our *Capacity Building Grant Program* suggested scheduling an additional check-in at the beginning of the grant's funded period.



#### CHANGES WE MADE

#### **Introduction of Introductory Meetings**

We now offer 20-minute introductory check-ins at the beginning of each grant with new grantee partners. These conversations allow us to share program details, explain our flexible funding approach, and address any questions the organization may have.

#### **Challenges with Bi-Annual Grant Requests**

Our initial structure of accepting requests up to \$15,000 twice a year led to unforeseen reporting complications for organizations receiving multiple grants.



#### **Increased Maximum Grant Amount**

Starting in 2024, we will increase the maximum request to \$30,000 per cycle. A change we feel will better accommodate organizations' needs and simplify the reporting process.

#### **Narrow Focus of Post-Grant Survey**

Grantees pointed out that our post-grant survey questions focused too heavily on funding utilization rather than overall organizational impact.



#### **Updated Survey to Reflect Holistic Interest in Organizations**

Based on grantee feedback, we revised our survey language to capture a more comprehensive picture of the organization's developments during the funded period.

#### **Assessing Statewide Organization's Local Impact**

While we recognized that over 80% of health influencing conditions are shaped at a state or federal level, evaluating statewide organizations' specific impact in our community proved challenging with unrestricted funding.



#### **Refined Eligibility Criteria**

Beginning in 2024, we will adjust our eligibility criteria to focus on organizations with clear, direct ties to FCH's catchment area. For statewide advocacy efforts, we continue to remain open to program-restricted funding opportunities to better serve our funding interests.

We are investing in the development of health access points and community infrastructure that will expand access for those most adversely impacted by our community's social determinants of health.

- Fewer barriers to health exist, a result of more school-based health centers, a new health center in North Canaan, and increased effectiveness of our rural transportation operators and schoolbased oral health providers
- Our community's infrastructure bolsters the local economy while supporting food access, job security, and the affordability of housing
- How is health advanced through existing and new community assets?
- How do changes in local infrastructure improve the living conditions that support health and wellbeing?

#### **Grant Results**

- 35% of students at Webutuck Central School District are enrolled in the school-based health center.
- 314 students received sealants through their school-based oral health program, the highest since COVID-19.
- 3 transportation providers in our region provided 7,662 rides to 786 community members.

A 100% increase in affordable housing units entered the development pipeline, expanding from 160 to 323 units. This growth signifies a potential doubling of housing opportunities for Litchfield County.

323 housing units (18 affordable housing developments) are being supported in 13 towns in Litchfield County, 8 of which are in the northwest corner.



Through FCH funding, The Northwest
Connecticut Food Hub, an initiative of the
Partners for Sustainable Healthy Communities,
began working with Food Works Group to
understand strategic partnership opportunities
to improve its operations. The Food Hub is
responsible for distributing food from over 30
partner farms to pantries and schools in
northwest Connecticut.

LEARNING QUESTIONS

**OUTCOMES** 

## **IMPROVE COMMUNITY ASSETS**

Milestones in 2023

#### **MARCH 2023**

## CONSTRUCTION BEGINS ON THE NORTH CANAAN HEALTH CENTER

Operated by Community Health & Wellness of Greater Torrington, the FQHC provides comprehensive and continuous primary care, behavioral health services, walk-in- non-emergency medical services, and chiropractic care. FCH has worked in close partnership with Community Health & Wellness for many years towards this effort – including granting over \$2 million, to date, in flexible funding. In 2023, we helped secure \$350K in in-kind support and \$300K in financial support from Nuvance Health for the North Canaan Health Center.



#### **JUNE 2023**

#### NORTHWEST HILLS COUNCIL OF GOVERNMENTS SECURES FUNDING FOR RURAL HEALTH NETWORK

The \$1.2M federal grant will improve access to behavioral health services for teens in northwest Connecticut, by establishing a network of care to increase capacity of existing providers and bring in new providers. In 2022, FCH made a grant to Northwest Hills Council of Governments to support their efforts to pursue a federal planning grant for the rural health network.

#### SEPTEMBER 2023

#### COMMUNITY HEALTH & WELLNESS SECURES SCHOOL BASED HEALTH CENTER FUNDING FOR REGION 1

Nearly \$600,000 in HRSA funding was awarded to Community Health & Wellness to establish three school-based health centers within the Region 1 School District (Housatonic Valley Regional High School, North Canaan Elementary School and Sharon Elementary School). In 2021, FCH provided grant funding to Connecticut Association of School Based Health Centers to facilitate community conversations about the school-based health center model.

We are building the capacity and skills of our community's decision-makers to incorporate input from community members and anticipate how their decisions affect health and well-being.

Community health information is used

Our community is better off in ways

community members define for

more frequently to guide local decision-

**OUTCOMES** 

What resources enable participatory and health-informed decision making from our local leaders?

2 Grants closed in 2023 demonstrated at least one of these outcomes in their work.

In our region, efforts to preserve and create affordable housing are largely led by volunteers through town-dedicated housing trusts, nonprofits, and townsponsored planning commissions and boards. In 2023, we partnered with the Litchfield County Center for Housing Opportunity to provide funding for community engagement initiatives of the affordable housing nonprofits serving the northwest corner.



#### **Grant Results**

Through our partnership with The Housing Collective and Hudson River Housing 11 affordable housing community engagement projects were completed in Dutchess and Litchfield counties and 2 additional projects in Litchfield County launched.

making

themselves

**LEARNING QUESTIONS** 

#### 2023 WORK PLAN PROGRESS REPORT KEY complete = Support Local Decision-making = Strengthen Organizations = on track = some risk to deliverable = Foundation Effectiveness = Improve Community Assets = significant risk to deliverable Delivery Q1 2023 Q2 2023 Q3 2023 Q4 2023 Long-Term Goals **Annual Objectives** Confidence Jan-Mar April-Jun Jul-Sep Oct-Dec Focus Area 1. Work towards a 70% application approval rate within our Capacity Building Grant Program by the first two years of the program, through continual improvements to outreach, communication, and application requirements. 2. Seek to fund at least 50% of small organizations (organizations with an annual operating budget at/under \$500K) through our Capacity Building Grant Program. We are investing in our community's social sector in a way that leverages community partnerships, contributes to its resiliency and effectiveness, and 3. Support and contribute to bi-directional collaboration within the bolsters leadership development. Northwest Connecticut Funders Collaborative, through the creation of co-sponsored programs and other initiatives. 4. Provide significant 'support beyond the grant' to further bidirectional collaboration for at least one network or coaltion with or without FCH project-restricted funding. 5. Develop and launch a Nonprofit Community of Practice and oneon-one leadership support for FCH grantee partners. Facilitate Executive Director monthly calls.

We are investing in the development of health access points and community infrastructure that will expand access for those most adversely impacted by our community's social determinants of health.		Identify opportunities with at least one school district in our region to discuss the need for and feasibility of a school-based health center by Q4.	(		
		2. Develop a place-based investment strategy for FCH based on best practices and local need by Q4 2023.		[	
		3. Identify at least two potential place-based investment opportunities within our region no later than Q4 2023.	(		
		<ol> <li>Continue to convene the transporation providers in our region to generate technical assistance needs or other ways in which FCH can provide support beyond the grant.</li> </ol>			
		5. Identify and create at least one state-level advocacy aim that is informed or generated by our grantee partners no later than Q4 2023.			 
		6. Actively garner community support for Community Health & Wellness' North Canaan Clinic, leveraging FCH's relationships and existing partnerships in the community to strengthen Community Health & Wellness' outreach and capital campaign.			
We are building the capacity and skills of our community's decision-makers to incorporate input from community members and anticipate how their decisions effect health and well-being.		1. Identify at least one partner to support locally led community engagement efforts and co-create a grant program together to benefit multiple towns in our region.			
		2. Continue to build an online series for decision-makers and the public at-large about initaitives in the region and the conditions influencing health on the local level. Develop a dissemination plan and begin to implement in Q2 2024.			
As an organization, we move from systems of monitoring to systems of learning and more meaningful evaluation. FCH, the community, our grantee partners, and peers benefit in measurable ways from the foundation's learning.		1. Develop tools to operationalize FCH's Learning & Results Summary, moving the organization further along the learning organization continuum. Update FCH's Learning & Results Summary for 2023 by end of Q1 2024.			
		2. Share about FCH's progress towards its objectives and <i>Stories</i> from our region by publishing a <i>Learning and Results Summary</i> no later than Q3 2023 and at least five <i>Stories</i> from our region through FCH's website.			

We create high quality content which directly supports storytelling by our board, grantee partners, and peers. More of our community understands what we do, why it matters, and the health issues impacting our community. Our visibility is improved through delibrate engagement with our partners and community, strengthening ties and furthering organizational learning and progress towards our goals.



Launch a new FCH website with the aims of a) improved functionality b) clear articulation of FCH's strategic Focus Areas and c) expanded information about our grantmaking and ways of working.			
<ol> <li>Create plan to operationalize FCH 2023-2025 strategic communications plan, which aims to improve internal operations and the quality and effectiveness of FCH communication with its target audience.</li> </ol>			
3. Expand <i>Past Grants</i> database on FCH's website to include Key Takeaways, Lessons Learned, applicable reports/briefs and other relevant information for the community at large.			]]]

#### **Staff Reflections: 2023 Workplan Progress**

#### **Embracing the Challenges of Collaboration**

We're proud to have successfully organized and executed a half-day workshop, "Renewal through Self-Compassion" in November, in partnership with the Northwest Connecticut Funders Network. The event was a significant achievement and largely well-received. However, we recognize that true collaboration among funders in the Northwest Connecticut Funders Network remains a work in progress. While we've made strides, we're still navigating the complexities of establishing a fully bi-directional collaborative effort. This journey has reminded us that meaningful collaboration takes time, effort, and patience. Looking ahead to 2024, we're excited to explore ways to refine our collaborative approach, ensuring each organization can contribute meaningfully within their capacity, fostering a more sustainable and effective partnership for all involved.

#### **Strengthening Our Communication**

2023 marked a significant milestone in our communication efforts with the launch of our new website in June. This major undertaking, which involved six months of careful planning and extensive content creation, has greatly enhanced our ability to convey who we are and how we work. The improved backend has also streamlined our website maintenance, making it easier to keep our digital presence up-to-date. We've also continued to engage our audience through our ongoing *Stories* and our *Health&* publications. While we're proud of the overall progress in our communication strategies, we're also mindful that our *Health&* series may not be fully meeting its goal of providing actionable health information for regional decision-makers. Looking ahead to 2024, we're excited about the possibility of forging a strategic partnership with local journalism outlet(s), to enhance community awareness about important decisions and decision-making processes in our region that are impacting health.

#### **Acknowledging Our Capacity Limits and Ambitious Goals**

In 2023, we successfully revised nearly 600 individual grant summaries for our website launch. However, we didn't publish additional results and outcomes as planned, nor did we progress on developing an advocacy strategy, or cultivating a New York partnership for affordable housing initiatives. While these shortfalls highlight areas for improvement in aligning our ambitions with our capacity, they also reflect our commitment to setting ambitious goals. Not meeting every objective isn't necessarily a failure—it's often a sign that we're pushing ourselves to grow and innovate. Moving forward, we're focusing on balancing realistic goal-setting with maintaining high aspirations.

## LONG-TERM COMMUNITY HEALTH INDICATORS

why we track long term health outcomes

We track long-term community health indicators to understand how health and well-being outcomes change. Our intention is that over time our work can contribute to improvements in these areas.

These indicators do not tell us why something is happening, but they can be the beginning of figuring out root causes and the conditions creating a particular health outcome. Unlike our measures of accountability, these long-term community health indicators are influenced by many factors that go beyond the work of FCH or our grantee partners.

Data isn't perfect! The data we collect and how data is reported is a product of human systems, which are prone to bias. As a small, place-based foundation, FCH relies on data collected and analyzed by others, but we strive to be mindful consumers of this information.

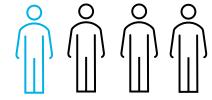
## LONG-TERM COMMUNITY HEALTH INDICATORS

a bird's-eye view of our 17-town region

FCH serves 17 rural towns in the northwest corner of Connecticut, and eastern Dutchess and southern Columbia counties in New York State. The conditions that define our region, also constrain it, notably:



1 out of 4 residents 25 and older in FCH's region only have a high school diploma



20% of individuals living in poverty in FCH's region live in Dover, NY.

Ancram has the highest concentration of poverty at 20%.



7 out of 17 towns have a median household income below their state's median. Dover, NY and Amenia, NY have the lowest median household incomes in FCH's region (\$54,600 and \$58,000).

#### HIGH HEALTH DISPARITIES IN CONNECTICUT

- Between those with less than a high school education and college graduates for high health status
- Between Hispanic and white for child poverty
- Between those with less than a high school education and college graduates for physical inactivity





18% \_\_\_\_

Premature death

Excessive drinking

#### **LITCHFIELD COUNTY HEALTH INDICATORS**

Litchfield County has similar rates of post-secondary education and reported health status, which means that the high disparities that exist in Connecticut are at play on the county level, as well. While the number of children in poverty in Litchfield County is comparable to Connecticut, this rate has increased in recent years.

Litchfield County experiences higher rates of fatal overdoses than the statewide rate, contributing to the increase in premature deaths, which is on the rise.

69% of adults (age 25-44) had completed some post-secondary education, including vocational/technical schools, junior colleges, or four-year colleges. This includes those who had and had not attained degrees. Statewide the rate is 70%.

10% of adults reported being in fair or poor health. Statewide the rate is 11%.

10% of children lived in poverty. Statewide the rate is 13%.

Regional Housing Affordability Challenges

9,735

households are severely housing cost burdened 50% of young adults are living with their parents

#### **DATA SOURCES**

<u>America's Health Rankings</u> <u>Health Disparities Report</u> (United Health Foundation)

County Health Rankings & Roadmaps (University of Wisconsin-Madison Population Health Institute & the Robert Wood Johnson Foundation) Litchfield County Center for Housing Opportunity

## **COMMUNITY HEALTH INDICATORS**

#### HIGH HEALTH DISPARITIES IN NEW YORK

- Between those with less than a high school education and college graduates for physical inactivity
- Between females and males for excessive drinking
- Between Hispanic and white for severe housing problems



#### **DUTCHESS COUNTY HEALTH INDICATORS**

While health outcomes in Dutchess County are better when compared to statewide outcomes in New York, residents in Dutchess County experience worse health outcomes than their Columbia County and Litchfield County neighbors. Notably, while the number of children in poverty in Dutchess County is lower than the for the state of New York, this rate has been on the rise in recent years.

12% of children live in poverty. Statewide the rate is 19%.

19% of households experienced at least one of the following housing problems: overcrowding, high housing costs, lack of kitchen facilities or lack of plumbing facilities. Statewide 23% of residents experience this.

#### **COLUMBIA COUNTY HEALTH INDICATORS**

Columbia County has comparable health outcomes as its neighbor Dutchess County, apart from a handful of health outcomes and conditions detailed below. Notably, as is the case throughout FCH's 17-town region the number of children in poverty in Columbia County has increased in recent years.

15% of children live in poverty. Statewide the rate is 19%.

64% of people lived close to a park or recreation facility (a known indicator for physical activity). Across New York 93% of residents live close to a park or recreation facility.

27% of motor vehicle crash deaths involved alcohol. This is 25% higher than the statewide rate.

#### **DATA SOURCES**

America's Health Rankings Health Disparities Report (United Health Foundation)

County Health Rankings & Roadmaps (University of Wisconsin-Madison Population Health Institute & the Robert Wood Johnson Foundation)