

# Community Partnerships to Advance Science for Society (ComPASS) Program

Community-Led, Health Equity Structural Intervention  
(CHESI) Initiative OTA-22-007  
Letter of Intent (LOI)

## Technical Assistance Pre-Application Webinar

Please send your questions to [CFComPASS@od.nih.gov](mailto:CFComPASS@od.nih.gov)

***This webinar will start shortly. This webinar is being recorded.***



National Institutes of Health  
Office of Strategic Coordination–The Common Fund

# WELCOME



## Community Partnerships to Advance Science for Society (ComPASS) Program



# ComPASS Working Group Co-Chairs



**Janine Austin Clayton, M.D., FARVO**  
Associate Director for Research on Women's Health  
Director  
Office of Research on Women's Health  
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**David R. Wilson, Ph.D.**  
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Director  
National Institute of Nursing Research (NINR)

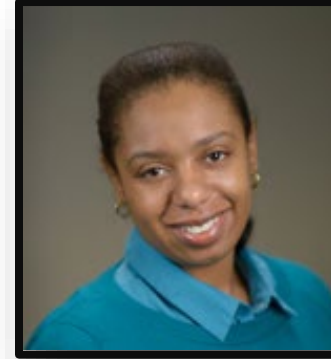


**Eliseo J. Pérez-Stable M.D.**  
Director  
National Institute on Minority Health and Health  
Disparities (NIMHD)

# Pre-Application Webinar Panelists



**Jennifer Alvidrez, Ph.D.**  
Senior Advisor for Health Disparities  
Office of Disease Prevention  
Office of the Director (OD)



**Kristina Faulk**  
Health Science Policy Analyst  
NIH Common Fund  
Office of the Director (OD)



**Alison Brown, PhD, MS, RDN**  
Program Director  
National Heart, Lung, and Blood Institute  
(NHLBI)



**Yvonne Owens Ferguson, PhD, MPH**  
Program Leader  
NIH Common Fund  
Office of the Director (OD)



**Shalanda Bynum, PhD, MPH**  
Program Director  
National Institute of Nursing Research  
(NINR)



**Nathan Stinson Jr., PhD, MD, MPH**  
Director, Community Health and  
Population Science  
National Institute on Minority Health and  
Health Disparities (NIMHD)

# AGENDA

TOPIC	PRESENTER
What is ComPASS and Overview of NIH Common Fund	Yvonne Ferguson, Program Leader
Social Determinants of Health, Structural Interventions and Community-Led Research	Jennifer Alvidrez, WG Member
ComPASS Overview and Initiatives	Shalanda Bynum, WG Program Coordinator
Eligibility Criteria and LOI Overview	Nathan Stinson, WG Program Coordinator
LOI Requirements and LOI Submission	Alison Brown, WG Program Coordinator
LOI Review Information	Kristina Faulk, NIH Office of Strategic Coordination
Full Application and Other Transaction Authority (OTA) Mechanism Overview	Yvonne Ferguson, Program Leader
Timeline	Alison Brown, WG Program Coordinator
Question & Answer	Alison Brown, WG Program Coordinator

# What is ComPASS?

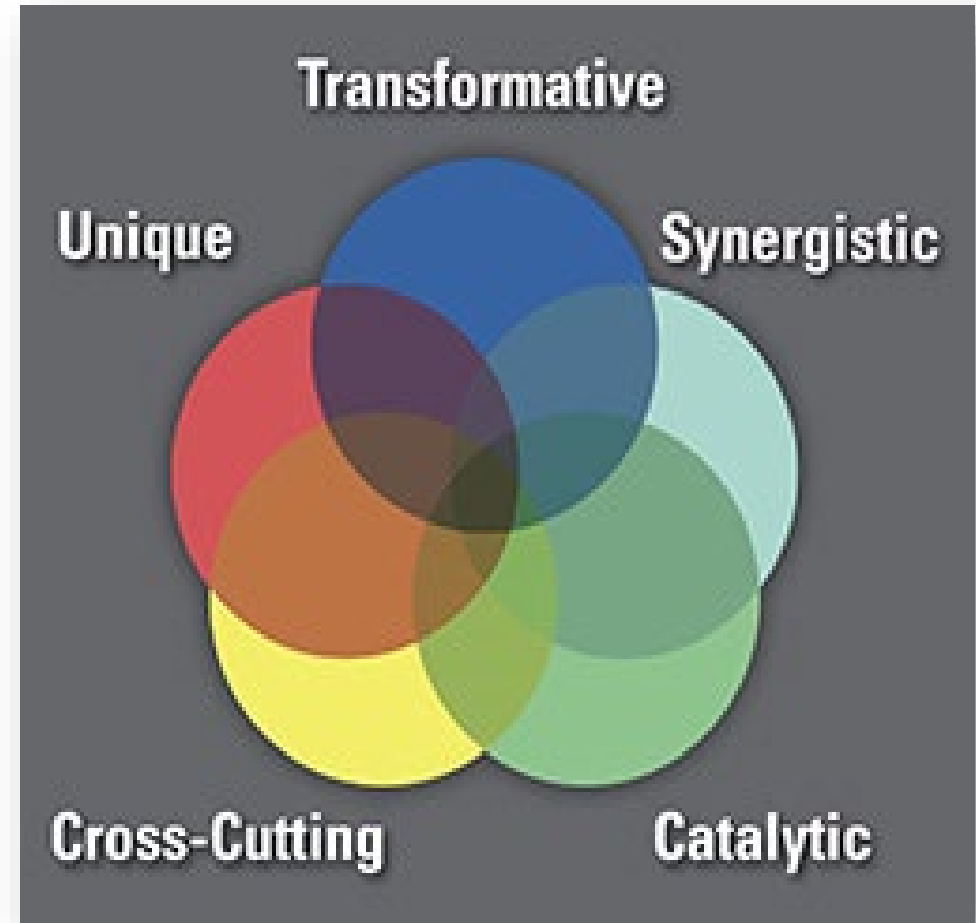
## HEALTH EQUITY



- Community Partnerships to Advance Science for Society (ComPASS)
- Supported by the NIH Common Fund
- Health Equity Focus
- Community-Led
- Leveraging Structural Interventions and Multi-Sectoral Partnerships
- Intervening on Social Determinants of Health
- Improve Health Outcomes
- Reduce Health Disparities
- Advance Health Equity Research

# What is the Common Fund?

- Funded by the Office of the Director, managed in partnership with the NIH Institutes and Centers
- Supports a set of NIH-wide scientific programs
- Fosters innovative ideas with the potential for transformative impact
- Intended to benefit the broad biomedical and behavioral research community



# The Common Fund Moves the NIH Mission Forward-Faster

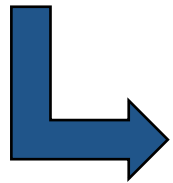
- Supporting bold scientific programs that **catalyze discovery** across all biomedical and behavioral research
- Advances areas of biomedical and behavioral research important to the missions of multiple NIH Institutes and Centers
- Spurs subsequent biomedical and behavioral advances that otherwise would not be possible without an initial strategic investment



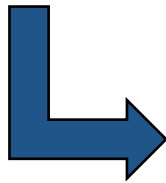


# Social Determinants and Health Disparities

Addressing health disparities and advancing health equity is a **profound challenge that involves many sectors and extends** beyond the reach of traditional health care settings.



Social determinants of health (SDOH) are a major contributor to health disparities and **operate on a continuum from fundamental structural causes to individual and family circumstances.**



Addressing fundamental, structural causes of health disparities offers the **greatest opportunity to advance health equity** and eliminate health disparities

# Structural Interventions to Address Social Determinants

*“Structural interventions attempt to change the social, physical, economic, or political environments that may shape or constrain health behaviors and outcomes, altering the larger social context by which health disparities emerge and persist”*

-Brown, et al 2019, American Journal of Public Health



# Structural Interventions Span Multiple Sectors



Human and  
Social  
Services



Commerce



Health  
Care



Economic and  
Urban  
Development



Transportation



Education



Housing



Justice

# Examples of Structural Interventions

These examples have the potential to influence health outcomes:

- Criminal justice system policy changes to address structural racial/ethnic and socioeconomic discrimination
- Universal basic income programs and policies to address issues of economic instability
- High-speed broadband internet expansion to enhance internet connectivity and telehealth access in rural and other underserved communities
- Community revitalization investment projects to enhance neighborhood and community resources and facilitate health promoting behaviors

**\*See OTA-22-007 for additional examples\***

# Innovations in Community-Led Research

- Community engaged approaches are recognized as key research strategies to address health disparities and advance health equity.
- Community-led research changes the process by which research has traditionally been conducted
- Community-led research requires a transformation in the processes and practices that govern research engagement
- Unique approach aligns with NIH's goal to enhance acceptability and sustainability of effective interventions to improve health equity and sustain positive impacts.



# Community Partnerships to Advance Science for Society (ComPASS)

*NIH Common Fund launched a new program in fiscal year 2023 to accelerate the science of health disparities and advance health equity research.*



National Institutes of Health

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# Overall Goals of ComPASS

## HEALTH EQUITY



1. To catalyze, deploy, and evaluate community-led structural health equity interventions that leverage multisectoral partnerships across multiple sectors to reduce health disparities
2. To develop a new health equity research model for community-led, multisectoral structural intervention research across NIH and other federal agencies

# ComPASS Initiatives

## HEALTH EQUITY



Community-Led, Health Equity Structural Interventions (CHESIs)



Health Equity Research Hubs (Hubs)



ComPASS Coordination Center (CCC)



# ComPASS Program Information

- Program duration: 10 years
- Planned budget: ~ \$153M over a 5-year period
- Up to 25 awards for Community-led Structural Interventions (FY 2023)
- Up to 5 awards for Health Equity Research Hubs (FY 2024)
- 1 award in for ComPASS Coordination Center (FY 2023)



Community-Led, Health Equity Structural Interventions (CHESIs)



Health Equity Research Hubs (Hubs)



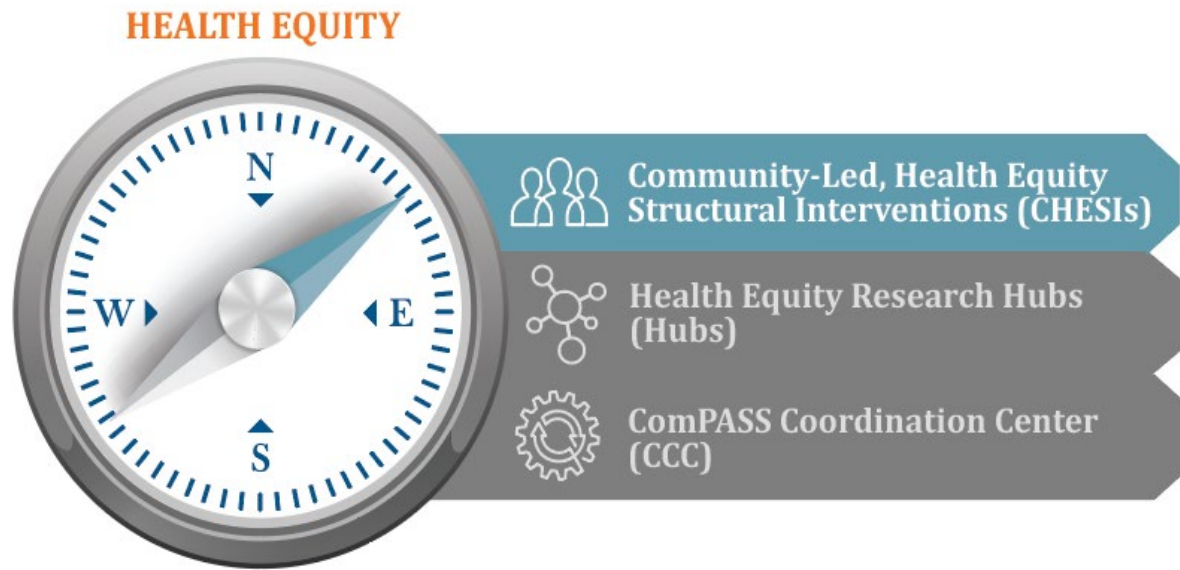
ComPASS Coordination Center (CCC)

# ComPASS Program Activities

- Support community organizations and their research partners in co-creating and evaluating health equity structural intervention research;
- Engage multisectoral partnerships in advising, guiding, and sustaining the community-led health equity structural interventions;
- Build the research capacity in structural intervention research and implementation
- Develop methods for capturing social determinants of health information, and collecting and analyzing data to evaluate outcomes from community-led health equity structural interventions; and
- Disseminate promising approaches resulting from the community-led health equity structural interventions.



# Community-Led, Health Equity Structural Intervention (CHESI) Initiative



- Community organizations will develop, implement, assess, and disseminate innovative, co-created community-led, health equity structural interventions in partnership with research organizations, by intervening upon structural factors that produce and perpetuate health disparities.

# Community-Driven, Health Equity Structural Intervention (CHESI) Initiative: Three-Phased Approach

1

## PLANNING (Year 1-2)

- Plan, develop, pilot (as appropriate) structural interventions
  - Capacity and partnership building
- Develop local Health Equity Research Assembly (HERA)

2

## IMPLEMENTATION (Year 3-8)

- Implement community-led, health equity structural interventions, with local HERAs
- Interventions will influence health outcomes across multiple health conditions and diseases

3

## DISSEMINATION (Year 9-10)

- Assess health impacts of structural intervention research findings
- Develop dissemination and sustainability plan for structural interventions

# Eligibility

- Community organizations (non-profits with and without 501(C)(3) IRS Status): a ***non-Federal, non-academic*** or ***non-research organization*** that provides goods, services, support, resources, or advocacy to members of a defined community. For example:
  - Community or faith-based organizations
  - Local businesses
  - Tribal serving organizations
  - Neighborhood authorities and associations
  - Labor unions
  - Patient or consumer advocacy groups
  - Public health departments
  - Regional/local and public healthcare systems
  - School districts
  - Law enforcement or criminal/juvenile justice agencies
  - Social service agencies
- Non-federal governmental organizations, includes local, regional, Tribal, or state level governments.
- Departments of commerce, labor, transportation, housing and recreation

# Eligibility (cont.)

- Academic research centers, academic healthcare organizations, and private healthcare organizations **are not eligible** for this opportunity.
    - These organizations may be identified partners in the application
  - Non-domestic (non-U.S.) Entities (Foreign applicants) **are not** eligible to apply.
  - Non-domestic (non-U.S.) components of U.S. Organizations **are not** eligible to apply.
  - Foreign components **are not** allowed.
- \*NIH is particularly interested in applications led by organizations that have a core mission to serve underrepresented or underserved groups impacted by health disparities.**

# Required LOI: Overview

A Letter of Intent (LOI) Deadline: **November 18, 2022, 11:59 PM ET**

- LOI will be used to select community organizations who will be invited to submit a full application.
- *If **invited** to submit a full application by NIH staff*, the Recipient Business Official/Signing Official and Contact PI will be notified and provided with guidance on submission.
- LOIs are not binding and will be used only to determine which community organizations are **invited** to submit full applications

# Application Process

- Letter of Intent (LOI) is required
- NIH will respond to LOI submitters
- Invitation to submit a full proposal





# LOI Requirements

No more than 4 pages, outlining the following elements:

## **Descriptive Information**

- Community organization's mission statement
- Description of the community organization's research and/or programmatic experience (e.g., program evaluation)
- Name and description of the established community and other partnerships that will help conduct the proposed structural intervention, including the date at which the established community partnership came into existence
- Description of at least one project/strategy/significant initiative that the community organization has participated in related to addressing health disparities with community and other partners

# LOI Requirements (cont.)

## Project Information

- The project's descriptive title
- Name of project's Principal Investigator(s)
- NIH-designated population(s) experiencing health disparities in the U.S. to be the focus of the proposal
- Project's geographic area(s) where the proposed structural intervention would take place
- Health outcomes impacted by proposed structural intervention
- Structural factors for potential intervention as part of a full application
- At least one potential research organization/research investigator, who has agreed to support and participate in the community organization's full application. The research organization(s)/research investigator(s) can be academic or non-academic institutions and must include the individual researcher's name, title, institution/organization, phone number, and e-mail address

## Fiscal Management Information

- Description of the community organization's organizational capacity and fiscal experience, and/or experience available, with managing program costs of over \$250,000.

# LOI Requirements (cont.)

## **LOIs will be considered non-responsive to the opportunity if your organization:**

- Does not have experience working with other established community partners on a health problem
- Does not demonstrate experience participating in at least one health disparity project
- Does not propose a project that focuses on one or more NIH-designated population(s) experiencing health disparities
- Does not describe the health outcomes impacted by proposed structural intervention
- Does not describe structural factors for potential intervention
- Does not propose at least one research organization/research investigator who has agreed to support and participate in the community organization's full application
- Does not have the organizational capacity and fiscal experience and/or expertise available to manage a program greater than \$250,000.

# Submitting the LOI

- LOI Deadline: November 18, 2022, 11:59 PM ET
- Submitted by the community organization's Recipient Business Official/Signing Official.
- E-mail LOIs to Yvonne Owens Ferguson, Ph.D., M.P.H. at [CFComPASS@od.nih.gov](mailto:CFComPASS@od.nih.gov)
- Contact Principal Investigator must be copied on the e-mail.

**Applicant organizations that submit their LOI by November 18, 2022, will be notified by December 8, 2022**

***if they are invited to submit a full application***

# LOI Review

- NIH internal staff subject matter expert panel will review LOIs for responsiveness based on the LOI requirements.
- **Only eligible and responsive LOI submitters will be invited to submit a full application**
- LOIs that are non-responsive to indicated criteria will not be invited to submit a full application for this opportunity.
- The NIH is not responsible for providing feedback on the LOI and will not accept an appeal of the decision.

# Full Application and Other Transactions Authority (OTA) Mechanism



National Institutes of Health  
*Office of Strategic Coordination – The Common Fund*

# Brief Overview of Full Application (*invite only*)

- Cover Letter
- Abstract
- Specific Aims
- Senior/Key Personnel and Other Significant Contributors
- Application Research Plan
- Multiple Principal Investigator (PI) Leadership Plan
- Data Management and Sharing Plan
- PHS Human Subjects and Clinical Trials Information
- Plan for Enhancing Diverse Perspectives (PEDP)
- Letters of Support
- Budget Details

Please see funding announcement (OTA-22-007) for details

# Other Transactions Authority

- **Not a grant, cooperative agreement, nor a contract;**
- Other Transactions (OTs) allow the **nimble addition or subtraction** of expertise, tools, technologies, and partnerships to meet program needs
- **NIH may propose or require changes** outside the scope of the funding opportunity and/or application to meet program needs
- OTs facilitate **engagement of nontraditional partners** as well as flexible cost-sharing and ownership
- Reporting requirements are **tailored for each award**
- Award **funding is different** (e.g., achievement of agreed-upon activities, availability of funds, can be terminated or extended by NIH to align with programmatic needs, etc.)



# Other Transactions Authority

Support or acquisition mechanism	Type of Funding	Research directed by	Responsive to changing priorities	Grant or procurement laws and regulations apply?	Governed by overarching federal <i>research</i> laws, regulations, policies	Review of Applications
<b>Grant</b>	Financial assistance mechanism to support research for the public good	Investigator	No	OMB Uniform Guidance & NIH Grants Policy and Statement	Yes	Peer review of broad criteria
<b>Cooperative Agreement</b>		Investigator with significant government involvement	Some		Yes	
<b>Contract</b>	Legally binding instrument to acquire good or services for the direct use or benefit of the Government	Government	Not really	Federal Acquisition Regulation (FAR)	Yes	Award based on stated evaluation factors
<b>Other Transactions Authority</b>	Legally binding instrument that may be used for a broad range of research and activities based on an OT Authority	Government / Investigator Collaboration	Yes	Federal laws and NIH policy applicable to all award instruments & Congressional authorizing language	Yes	Scientific Evaluation or Objective Review

# Timeline

- Research Opportunity Announcement Released: September 12, 2022
- Pre-Application Webinars: October 4 & 11, 2022
- Letter of Intent Office Hours: Late October/early November (date TBD)
- Letter of Intent Due: November 18, 2022
- Invitation to Submit Full Application: December 8, 2022
- Full Application Office Hours: December/January (date TBD)
- Application Submission Due: January 23, 2023
- Peer Review: March 2023
- Negotiation: April - August 2023
- Earliest Start Date: September 2023

# Questions Submission

Please send your questions to: [CFComPASS@od.nih.gov](mailto:CFComPASS@od.nih.gov)

Please remember that scientific inquiries and plans for individual research projects will not be addressed on the webinar. Please e-mail scientific inquiries to: [CFComPASS@od.nih.gov](mailto:CFComPASS@od.nih.gov)

Today's slides and Frequently Asked Questions will be posted to our website: <http://www.commonfund.nih.gov/compass>

