

Hospital Community Collaborative

2022 Cohort Application

Section 1 – Eligibility Criteria

The Hospital Community Collaborative is accepting applications from partnership teams – comprised of an AHA member hospital or health system and a cross-sector, community-based organization (e.g., community-based social service agency, local health department, or business partner). Applicant teams should be currently collaborating (or planning to) to address community-level societal factors to improve behavioral health and well-being.

Teams who meet the eligibility criteria below will be considered for the program.

NB: if applying as a health system, please identify a single hospital/community that will be the primary focus of your partnership interventions. If including more than one partner, all should be engaged in the same intervention for the same community and/or population.

1. Part of an existing or emerging partnership team between a hospital/health system and a community organization, public entity, health department, or other group that collaborates to address community-level societal factors that influence health (often referred to as social determinants of health).

NB: A letter of support from the partner organization is required to support the application, stating that they have committed to working with your hospital/health system for the collaborative work described herein. (An email from the partner organization is sufficient.)

2. Partnership teams have identified a societal factor that contributes to behavioral health and well-being at the community level (refer to the [AHA Societal Factors Framework](#)) in the community your organizations serve, and have agreed to work together on a community-level intervention.

3. Ability and willingness to designate a leadership dyad – one point person each from the applying hospital/health system and community partner organization- to facilitate the team’s participation.

4. Explicit commitment from each partner to:

- complete the assigned materials on time, and
- engage with cohort teams during quarterly live virtual convenings and share program updates with the cohort

NB: Anticipated monthly time commitment from each team is approximately four hours.

☐ **By checking this box, I certify that I have read the above and the team in the application herein meets all criteria for participation.**

Section 2 – Questionnaire

1. Proposed Team Composition

Please provide the following information about your hospital/health system, and the proposed team: including the individuals comprising the leadership dyad and additional team members (if known):

Hospital

Name:

Address:

AHA Member ID (can be looked up [here](#)):

NJHA Member ID:

Team Lead (from applying hospital/health system)

Name:

Position/Title:

Department/Division:

Mailing Address (if different from hospital address):

Email:

Phone:

Team Co-lead (from partner organization)

Organization Name:

Organization Type

- ☐ community-based social service agency
- ☐ local health department
- ☐ business
- ☐ other (please describe):

Co-Lead Name:

Title:

Email:

Mailing Address:

Phone:

Organization website:

Other Team Members (list all that apply)

Name:

Organization (Hospital or Partner)

- ☐ Hospital/Health System
- ☐ Partner Organization

Title:

Email:

Mailing Address:

Phone:

2. Provide the following background information about your proposed program partner organization:

How long has this partnership existed?

- ☐ <1 year
- ☐ 1-2 years
- ☐ 3-4 years
- ☐ ≥5 years

How have the hospital and partner organization collaborated prior to applying to HCC?

Link to external docs or websites referencing historical relationship: (optional)

Develop Multi-Sector Collaborative

3. Describe work you and your partner have advanced thus far in addressing community-level societal factors that contribute to behavioral health and well-being (if any).

4. Describe your plans for **future work** to address behavioral health and well-being at the community-level, i.e. what work you intend to tackle while participating in the HCC program.

5. Please describe the community or target population for the work described above.

6. Have you identified how you will measure success of your work (in terms of process or outcome measures)? If so, please describe.

7. To what extent is there consensus at your organization that the collaborative work described in the previous question is:

	<i>Lack of Consensus</i>	<i>Emerging Consensus</i>	<i>Broad Consensus</i>
A change that is needed now	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supported by your senior leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. To what extent do you see your partnership team as aligned with the following descriptors?

	Very Aligned	Somewhat Aligned	Neither Aligned nor Unaligned	Somewhat Unaligned	Very Unaligned	<i>Not sure</i>
We value collaboration						
We are data savvy						
We are inclusive of community voices						
Our collaboration intervention is scalable						
Our partnership is sustainable						

9. What new tools, insights, skills, and/or resources would you like to gain from participating in the HCC program?
10. What is your long-term (e.g. >2 years) vision for behavioral health and well-being in your community?
11. How did you hear about the HCC program? Select all that apply.
- ☐ AHA Team Member contact
 - ☐ Email
 - ☐ Word of mouth
 - ☐ Previous HCC participant
 - ☐ Other (please describe):
12. Did you or a member of your proposed team attend an info session?
- ☐ Yes
 - ☐ No
13. In what areas of the program are you most interested/feel will be most beneficial to facilitating your partnership work? Check all that apply.
- ☐ Learning from national faculty subject matter experts
 - ☐ Peer-to-Peer learning
 - ☐ AHA resources and support
 - ☐ Not sure yet
14. Is there anything else you'd like to share about your organization or the collaborative work you've described?

Thank you for submitting your application for the HCC 2022 cohort.

Please email the letter(s) of support from your partner organization(s) to hcc@aha.org. An email from a leader at the partner organization(s) will suffice.

We will be reviewing applications and may be in touch to request clarifications or to ask for additional materials. Teams will be notified of our decision by Friday, May 20, 2022.

If you have any questions, please contact us at hcc@aha.org.