
METROWEST
COMMUNITY
HEALTH CARE
FOUNDATION

Strategic Plan 2008-2013

MetroWest Community Health Care Foundation
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Executive Summary

The MetroWest Community Health Care Foundation (MCHCF) is an independent health philanthropy whose mission is to “improve the health status of the community, its individuals and families through informed and innovative leadership.” Since its inception in 1999, the Foundation has awarded over \$23 million in grants in the 25 communities it serves. Over the three years since its previous strategic plan, the Foundation has increased its impact on the health of MetroWest by focusing its resources on select proactive initiatives, while remaining responsive to community needs through its open application process. The Foundation has also expanded its commitment to non-grantmaking activities, such as capacity building and knowledge sharing, to increase the impact and effectiveness of its responsive and proactive grantmaking. As the Foundation heads into the next five years, it is well positioned to further improve the health status of the MetroWest region.

What will remain the same?

The MetroWest Community Health Care Foundation (MCHCF) will remain committed to improving the health status of the MetroWest community. The Foundation will pursue a range of proactive¹ funding initiatives, but will continue to provide responsive grants to address a broad spectrum of community health needs in recognition of its role as a critical philanthropic resource in the region. In addition, the Foundation will continue to serve as a knowledge hub on health care information. The governance structure of the Foundation will also remain the same, with the Leonard Morse and Framingham Union Grants Panels each continuing to oversee dedicated resources for the communities of Natick and Framingham. The Foundation will also continue to respond to applicants in a timely way, balancing this with continued rigor in its research and due-diligence.

What will change?

The 2007 strategic plan builds on MCHCF’s previous successes while providing new ways for the Foundation to respond to changing needs in the community. The greatest change for the Foundation will be the increased intensity of its proactive work in the region. Most programmatic changes are an evolution from where the Foundation is today, rather than a change in direction, and all are intended to improve the way MCHCF supports the region and its grantees.

1. **Focus on Proactive Initiatives** – MCHCF will continue to lead proactive initiatives to improve the health of the MetroWest region. These initiatives are based on community needs as identified through health data and other community needs assessments. Current initiatives will evolve to increase their potential for social impact, and new initiatives will be added to the portfolio. In all initiative areas, the Foundation will actively work to address a priority health need, in partnership with local community organizations.
2. **Leadership Role in Addressing Systemic Health Care Issues** – The Foundation will support systemic initiatives that impact the health of the broad MetroWest community. Systemic initiatives focus on supporting the programmatic initiatives by enhancing capacity building and knowledge sharing efforts, as well as building field-wide infrastructure in order to address the underlying problems facing the health care system.
3. **Continued Development as a Learning Organization** – The Foundation will dedicate additional resources to evaluating the outcomes of its proactive initiatives, and it will use evaluation results to improve its ability to impact social issues. The Foundation will also continue to learn from grantees, in order to better meet the needs of the MetroWest nonprofit sector.

¹ Throughout this document the distinction is made between proactive grantmaking, those initiatives that the Foundation has advanced and has responsibility for developing strategies and achieving specific goals, and responsive grantmaking, where grantees have primary responsibility for developing strategies and achieving results.

I. Introduction

The MetroWest Community Health Care Foundation (MCHCF) is a community-based private foundation whose mission is to “improve the health status of the community, its individuals and families through informed and innovative leadership.” Since its inception in 1999, the Foundation has awarded over \$23 million in grants in the 25 communities it serves. MCHCF seeks to achieve positive health outcomes through both grantmaking and community leadership activities such as convening forums, promoting community solutions, and informing policy.

Over the past eight years, the Foundation has been on a path of continual improvement as a strategic grantmaker and catalyst for change in its 25 communities. MCHCF has undergone several strategic planning processes during this time and each planning process has increased the Foundation’s level of focus and intentional use of tools for change (e.g., convening, community knowledge development and sharing, nonprofit capacity building and informing policy work) beyond purely grantmaking. As a result, the Foundation has created a positive track record in its communities in key areas such as facilitating the establishment of a federally-qualified health center in downtown Framingham, creating a multi-site youth substance abuse prevention and intervention initiative, addressing the local shortage of nursing professionals, making local progress against childhood obesity, and addressing racial and ethnic health disparities.

The Foundation’s 2004 strategic plan outlined programmatic goals and initiatives designed to guide the Foundation’s work through the end of 2007. Anticipating the need for a review of its progress to date and an update to that plan, the Foundation’s Board of Trustees decided in mid-2007 to initiate a new strategic planning process. Based on the success of the previous strategic planning process, the Foundation decided to re-engage FSG Social Impact Advisors, a nonprofit consulting firm focused on working with philanthropic organizations, to guide them through the new strategic planning process. FSG had previously completed the Foundation’s 2004 plan, helping to design the Foundation’s proactive initiatives in the areas of Youth Substance Abuse prevention, support for the community-based health care center, and increased priority on capacity building.

Motivation for Strategic Planning

The MetroWest Community Health Care Foundation had several motivations for engaging in a strategic planning process.

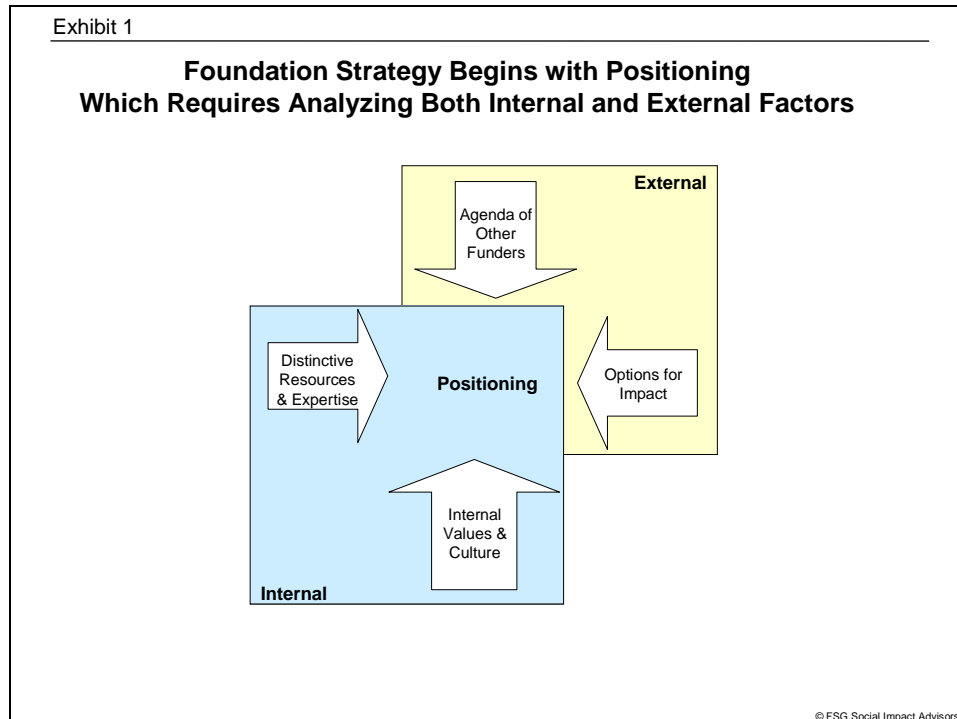
1. **Increased Social Impact:** To have an even greater impact on some of the region’s toughest health issues – taking a longer-term perspective, actively identifying high-priority needs, providing sustained and focused support, concentrating on systemic change, and exercising greater leadership.
2. **Greater Clarity of Purpose:** To help guide and coordinate the Foundation’s activities and to enable the Foundation to clearly articulate to stakeholders its mission, priorities, and the role it hopes to play in the community.
3. **Continuous Improvement:** To evolve as an organization that can continually learn from its grantmaking, improve upon its activities, develop deeper relationships with nonprofits across the region, and increase its impact.

II. Strategic Planning Process

A foundation strategy is grounded in two key concepts: *strategic positioning* and *value creation*, which are explained below.

Strategic Positioning

A true strategy is not a mission statement, which focuses only on internal considerations such as the organization's values and capabilities. Nor is it a needs assessment, which focuses primarily on external perceptions of priority problems. Instead, true strategy positions the Foundation at the intersection of internal and external views and asks: which pressing societal issues are we uniquely qualified to address? (See Exhibit 1)



A strategy involves explicit choices of what to do – and what not to do. This clarity enables the Foundation to tailor its entire operations to support the strategy. At the same time, the shared vision makes it possible to define success measures to track the Foundation's social impact and communicate persuasively about its intent and accomplishments.

Value Creation

Exemplary grantmaking programs focus resources on a few social problems and leverage funder expertise to create value. In FSG's 1999 *Harvard Business Review* article, "Philanthropy's New Agenda: Creating Value," FSG founders Michael Porter and Mark Kramer discuss how grantmakers can leverage their expertise to select the most effective grantees, attract additional funding, assist grantees, and share knowledge gained from their philanthropy. (See Exhibit 2) Employing all four forms of value creation increases the Foundation's ability to achieve social impact.

Foundations Create Value in Four Ways – Each Successive Approach Creates More Value Than the Preceding One

- 1. Selecting the best grantee**
 - Directing resources to their most productive use
- 2. Signaling other funders**
 - Educating and attracting other sources of funds, such as other Foundations, government, or individuals
- 3. Improving the performance of grant recipients**
 - Helping grantees be more effective, increasing the return on their entire budget
- 4. Advancing the state of knowledge and practice**
 - Funding research and a systemic progression of projects that produce more effective ways to address social problems

Timeline of Activities

The strategic planning process took place in three phases over a six-month time frame (November 2007 – April 2008). (See Exhibit 3) During the first phase, lasting three months, the process explored through primary and secondary research the Foundation's strengths, areas for improvement, community impact to date, and opportunities for impact going forward. Approximately 90 interviews were conducted with Foundation stakeholders including members of the Foundation's Board, both the Leonard Morse and Framingham Union Grants Panels, Foundation staff, grantees, and community members. Focus groups were conducted with an additional 14 grantees. In addition, an external survey of 69 community stakeholders was completed (out of a total of 114 surveys distributed). In the second phase, research into best practices and lessons learned was used to help shape and develop the Foundation's future strategy. This phase also included a retreat to define the Foundation's strategy. Close to 40 representatives of the Foundation, including members of the Foundation's Board, Grants Panels, Committees, and staff, participated in the retreat. In the third phase of the strategic planning process, an action plan was developed, which identified evaluation metrics and detailed the organizational implications of the refined strategy.

For MCHCF, the strategic decision making process blended internal values and visions for the future with input from key community stakeholders – a variety of past and current grantees, community leaders, and potential grantees. The process also incorporated analysis of the impact of the Foundation's current grantmaking efforts. These sources of input were then supplemented by research to identify potential opportunities for a private funder with the Foundation's resources and values to increase its impact in the MetroWest region. The Foundation used all of the data available to them during this rigorous process to shape its direction in a way that builds from its past and opens up new opportunities for the future.

Exhibit 3

Project Timeline For the Foundation's Strategic Planning Process with FSG

Phase I: Landscape Assessment

Internal Assessment

- Conduct research on past grantmaking
- Staff and board interviews
- Grants panel focus groups
- Conduct staff and board survey
- Synthesize and share findings

External Assessment

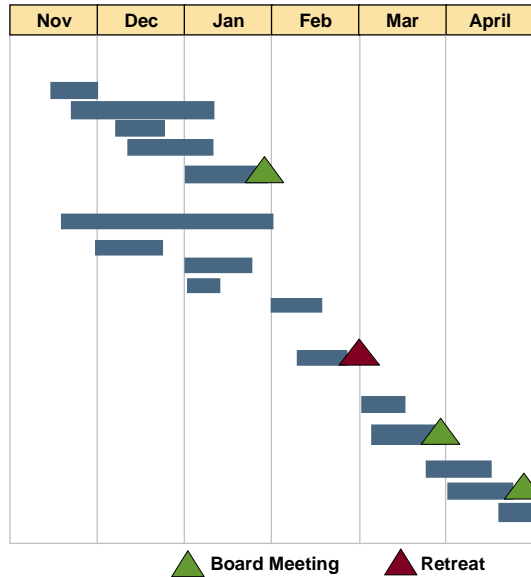
- Synthesize existing information on MetroWest regional health needs
- Analyze agenda of other funders
- Conduct stakeholder interviews & survey
- Conduct grantee focus groups
- Synthesize findings

Phase II: Strategy Development

- Facilitate board and staff retreat to share external assessment and develop goals for grantmaking
- Conduct additional conversations to identify and test initiatives
- Solidify goals and objectives

Phase III: Action Plan

- Develop evaluation metrics and dashboard
- Determine organizational implications
- Develop Final Written Report



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III. Assessment of Foundation's Progress to Date

For the past three years, the Foundation has been working with a focus on the four priorities identified in its previous strategic plan. The Foundation has made significant progress against each of these focus areas as evidenced by the summary below:

- **Increase emphasis on leading proactive community health initiatives**
 - The Foundation has successfully pursued initiatives outlined in the previous strategic plan, focused on Youth Substance Abuse, the Community Health Center, understanding the state of MetroWest community health (Data Book and MetroWest Adolescent Health Survey), and Connecting low income and vulnerable populations to low cost health care resources
 - Two new proactive initiatives, in Childhood Obesity and Racial and Ethnic Health Disparities, have been launched
 - Significant challenges have emerged in implementing an initiative focused on providing access to medical transportation for seniors
- **Address unmet health care needs in the MetroWest region through responsive grantmaking focused on youth, elderly, and the vulnerable**
 - During the three years ending December 2007, the Foundation made grants totaling \$13.2 million
 - The Foundation has introduced the logic model for grantees to facilitate tracking progress toward concrete goals
 - To improve its application process, the Foundation has initiated concept papers before proposal submission, a bidders conference to improve applications, and an online grant submission process

- **Undertake a new initiative to build the organizational capacity of MetroWest nonprofits focused on improving community health – employing both grants and non-grant support activities**
 - 28 capacity building grants totaling \$1 million have been awarded
 - The Foundation has funded technical assistance providers for several proactive initiatives
 - Extensive one-on-one staff consultation with grantees has occurred
 - The Foundation has held dozens of workshops, including 11 formal training sessions
 - The Foundation’s Health Leadership Program has provided leadership training courses for 28 health leaders in MetroWest
- **Dedicate greater attention to planning and evaluation of responsive grantmaking and proactive initiatives**
 - Foundation staff has provided extensive one-on-one coaching to increase effectiveness of logic model use
 - Grantee outcome reports have been incorporated into the Foundation’s evaluation process, enabling measurement of grant impact
 - The Foundation has funded evaluations, conducted by third-party evaluators, for numerous grantees

In the grants review and analysis, it was found that the Foundation has distributed over \$13.2 million in grants over the last three years. Sixty-percent of grants were responsive and awarded as part of the Foundation’s open application process; the remaining 40% of grants given as part of a Foundation proactive initiative. Approximately \$3 million in grants have been made as part of the Youth Substance Abuse initiative, \$2 million related to Childhood Obesity, and \$730,000 as part of the Foundation’s Racial and Ethnic Health Disparities initiative. The Foundation has also given out approximately \$150,000 in scholarships each of the last three years. The Foundation’s grants also reached various targeted populations in MetroWest: approximately 80% of the Foundation’s grants benefited youth, 40% adults, and 40% the elderly².

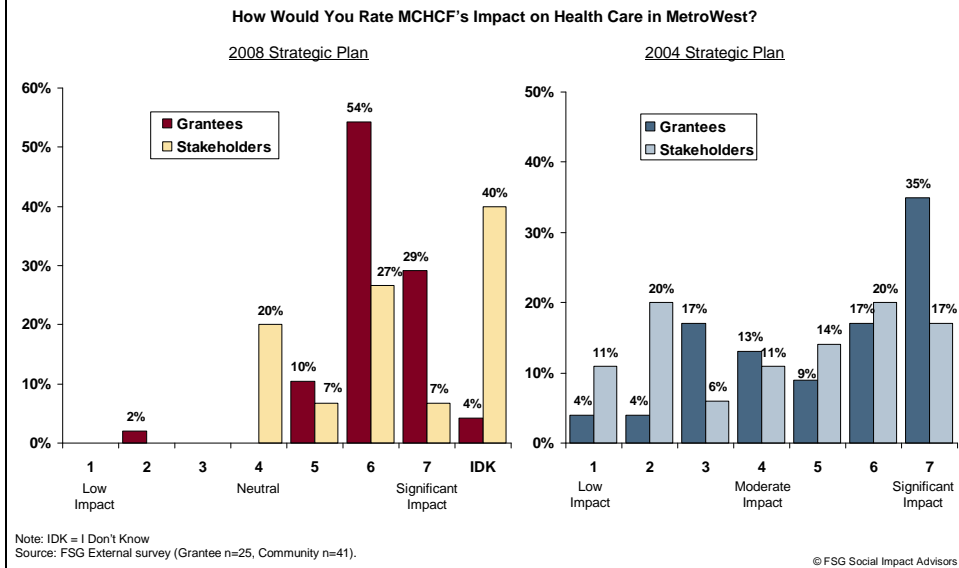
Interviews and surveys suggest that community stakeholders, grantees, and Foundation board members, believe that the Foundation has had a positive impact on the health of the MetroWest region, and that the Foundation’s impact has increased since the previous strategic plan in 2004. (See Exhibit 4) Per the Grantee Perception Report by the Center for Effective Philanthropy, proactive grantees felt that the impact of their grants was higher than responsive grantees. The Health Data Book, MetroWest Adolescent Health Survey, and Childhood Obesity were cited as the most impactful initiatives, and one-on-one staff consultations are the most useful non-grantmaking service provided by the Foundation.

Both internal and external stakeholders attribute the Foundation’s success to numerous strengths. Strong consensus exists that much success to date is due to the Foundation’s effective management and staff, with grantees consistently giving positive feedback regarding the staff’s approachability, dedication to the community, and deep understanding of the MetroWest region. The Foundation’s collection and sharing of data about MetroWest, through initiatives such as the Health Data Book and MetroWest Adolescent Health Survey, also receives high praise. Additionally, the Foundation’s impact to date is largely attributed to the relationships it has carefully cultivated with health care leaders and stakeholders, and convening people to discuss ideas and share learnings.

² Totals do not add up to 100% because of overlap in categories. Categories indicate population benefiting from grant e.g. a grant to a community-based health center would be counted in the Youth, Adults, and Elderly categories

Exhibit 4

External Stakeholders' Perception of MCHCF's Impact on Health Care in MetroWest Has Improved Since the Last Strategic Plan



Stakeholders identified some areas where the Foundation could add or expand impact, such as connecting grantees with other donors, creating networks within the community, and adding additional Foundation staff. In addition, sustainability of funding is a challenge for grantees.

IV. Future Five Year Strategy Summary

MCHCF's 2007 strategic plan builds on the Foundation's previous successes while providing new ways for the Foundation to respond to changing needs in the community. As a result, there are four key elements guiding the new five year strategic plan.

1. **Focus on Proactive Initiatives** – MCHCF will continue to lead proactive initiatives to improve the health of the MetroWest region. Current initiatives will evolve to increase their potential for social impact, and new initiatives will be added to the portfolio. In all initiative areas, the Foundation will actively work to address a priority health need, in partnership with local organizations.
2. **Leadership Role in Addressing Systemic Health Care Issues** – The Foundation will support systemic initiatives that impact the health of the broad MetroWest community. Systemic initiatives focus on supporting the proactive initiatives, through capacity building and knowledge sharing, as well as building field-wide infrastructure in order to address the underlying problems facing the health care system.
3. **Responsive Grantmaking** – MCHCF will continue to address unmet health care needs in the MetroWest region through responsive grantmaking focused on youth, elderly, and vulnerable populations.
4. **Continued Development as a Learning Organization** – The Foundation will dedicate resources to evaluating the outcomes of its proactive initiatives and it will use evaluation results to improve its ability to impact health issues. The Foundation will also continue to learn from grantees, in order to better meet the needs of the MetroWest nonprofit sector.

As with the last strategic plan, the revised strategy takes into account a portfolio approach to grantmaking that balances value creation in both proactive and responsive activities. (See Exhibit 5) In its proactive activities, the Foundation will focus on measurable and achievable outcomes, and will take primary responsibility for developing a strategy to achieve those outcomes. In addition to grantmaking, the Foundation will directly advance its proactive initiatives through non-grantmaking activities such as convening, capacity building, and knowledge sharing. In its responsive activities, the Foundation will focus on broad priority areas, and will delegate primary responsibility for developing strategies to achieve results in those areas to its grantees. In addition to grantmaking, the Foundation will support its responsive grantmaking grantees through value-added services that increase their capacity to create value.

Exhibit 5

FSG Recommends Maintaining the Portfolio Approach to Grantmaking as the Framework for Balancing Proactive and Responsive Activities

		Grantmaking Type	
		PROACTIVE	RESPONSIVE
Grantmaking Focus	WHERE	<ul style="list-style-type: none"> Focus is on measurable and achievable outcomes Foundation has primary responsibility for developing a strategy and achieving goals 	<ul style="list-style-type: none"> Focus is on broad priority areas Grantees have primary responsibility for developing a strategy and achieving results
	HOW	<ul style="list-style-type: none"> Foundation directly advances the initiative through both grants and non-grantmaking activities, working collaboratively with grantees to achieve goals 	<ul style="list-style-type: none"> Foundation provides support through grants and value-added services

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Overview of Proactive Funding Areas

In addition to researching the progress made in each of the Foundation’s existing initiative areas (youth substance abuse, childhood obesity, racial and ethnic health disparities), several new health issues were explored as potential focus areas for the Foundation (mental health, oral health, and elder health care). Based on the research provided, the Foundation’s Board, Grants Panels, Distribution Committees, and staff identified several areas of focus for the Foundation over the next five years.

Each of MCHCF’s proactive activities adopts a specific approach to improving the health status of the MetroWest community.

Programmatic initiatives focus on addressing specific population-based health care challenges. The Foundation has chosen to focus on the following programmatic initiative areas:

Programmatic Initiatives

- Youth Substance Abuse
- Childhood Obesity
- Racial and Ethnic Health Disparities

- Elder Health Care

Systemic initiatives focus on supporting the programmatic initiative areas as well as building field-wide infrastructure in order to address the underlying problems facing the health care system. As a result of the strategic planning process, the Foundation has committed to the following systemic proactive initiatives:

Systemic Initiatives

- Capacity Building / Health Leadership Program
- Knowledge Sharing
- Health Profession Scholarship Program
- Regional Public Health Entity

These initiative areas were selected after a thorough screening process that analyzed the magnitude of each issue, the potential to maximize existing infrastructure and programs (such as school systems, community health centers, community organizations, and existing Foundation grants), and the Foundation's ability to increase impact with non-monetary activities that utilized the Foundation's unique assets and expertise (such as convening and collaboration, research and advocacy, attracting other funders, and capacity building). Each proactive initiative will take place over a several year period, and will include defined measures of success to evaluate value creation and social impact throughout, and at the conclusion of, the initiative.

Proactive Initiatives - Programmatic

To improve the health of MetroWest residents, the Foundation will lead four programmatic initiatives that target health challenges for specific populations in MetroWest. Initiatives in Youth Substance Abuse and Childhood Obesity aim to improve the health of the region's youth. An expanded initiative in Racial and Ethnic Health Disparities will focus on meeting the needs of the region's vulnerable population. The Foundation will also explore a targeted initiative to meet the health needs of MetroWest's elder population.

Youth Substance Abuse

Preventing Youth Substance Abuse emerged as an area of focus for the Foundation during its previous strategic planning process and the Foundation has created a robust initiative to meet this community need. While substance abuse is often thought of as an urban issue, binge drinking has greater prevalence in suburban and rural communities than in urban centers. As the rates of substance use increase, a significant number of students engage in risky behavior related to substance abuse such as drinking and driving. Per the 2006 MetroWest Adolescent Health Survey, 66.5% high school students report having used alcohol in their lifetime and 42.2% reporting drinking in the past 30 days. Thus, the incidence of substance abuse in the MetroWest region is very real and the Foundation has committed to supporting towns to address this challenge.

Over the last three years, the Youth Substance Abuse initiative has supported substance abuse prevention coordinators for 10 MetroWest towns³ and provided technical assistance and in depth evaluation to supplement coordinator work. Grants to date total approximately \$3 million, over 90% of which has directly supported the 10 project coordinators and funded technical assistance for both Cohorts One and Two. The Foundation has also funded two youth substance abuse treatment programs.

³ The 10 project coordinators are divided into two cohorts: Cohort One (inception 2005) includes Needham, Hopkinton, Framingham, Milford/Bellingham, and Wayland. Cohort Two (inception 2007) includes Medfield, Holliston, Natick, Ashland, and Hopedale

The 10 town based project coordinators have worked to develop evidence based strategies for reducing substance abuse among the town's youth. Project coordinator work has focused on a number of strategies for creating community level change, including school curriculum development, parental outreach and involvement, in school identification & referral, law enforcement & diversion, youth development, and community coalition building. Evaluation reports to date show that project coordinators have begun to create significant change in their communities, and that provision of technical assistance has been a key influence on project coordinator activity. In addition, the evaluation shows that project coordinators have benefited from learning from their peer coordinators, often replicating other coordinators' successful programs in their own towns⁴. Long term outcome measurement for this initiative will come from the MetroWest Adolescent Health Survey.

The Youth Substance Abuse Initiative will further evolve over the next five years. Project coordinator planning will emphasize creating sustainability at the town level by incorporating prevention activities into the fabric of the town through a variety of methods including, but not limited to, creating policy change, incorporating substance abuse prevention efforts into current nonprofit and public programs, and establishment of community coalitions. Upon the conclusion of town-level grant funding, efforts will be maintained by a Foundation-sponsored Youth Substance Abuse Regional Coordinator. This Regional Coordinator will continue to sustain the prevention activities catalyzed by the town's project coordinator through both providing technical assistance to organizations in post-cohort towns that have taken ownership of prevention work, as well as sustaining community organizing and coordinating efforts focused on prevention.

While the past three years of the initiative exclusively focused on creating town-specific approaches to preventing youth substance abuse, the next phase of the initiative will expand to include a regional lens on prevention. In addition to maintaining prevention efforts in post-cohort towns, the Foundation will increase its focus on creating a regional approach to youth substance abuse prevention. These efforts will also be lead by the Regional Coordinator. Regional activities will focus on increasing regional awareness of substance abuse treatment options and leading a regional social norms awareness campaign. The Regional Coordinator will also promote communication and coordination of prevention efforts among towns by convening key stakeholders to discuss practices, policies, and share learnings about effectively preventing youth substance abuse.

The goals of the Youth Substance Abuse Initiative are:

1. **Significantly decrease the rates of youth substance abuse in MetroWest**, through enabling communities to design evidence based methods for addressing Youth Substance Abuse
2. **Increase access to treatment resources**, through raising awareness among community stakeholders of existing treatment options

The objectives of the Youth Substance Abuse Initiative are:

1. **Increase Town-Level Capacity to Reduce Youth Substance Abuse** – The Foundation will support Youth Substance Abuse project coordinators in current and future towns in order to create town ownership of prevention efforts
2. **Raise Awareness of Treatment Options** – The Foundation will promote awareness of existing treatment options to school, parents, youth, and other community members in MetroWest
3. **Increase Communication and Coordination of Youth Substance Abuse Prevention Efforts Among Towns** – The Foundation will convene key stakeholders from across MetroWest to coordinate YSA efforts and share best practices & lessons learned

Results of the MetroWest Adolescent Health Survey will continue to serve as a long term outcome measurement tool for tracking the impact of the Youth Substance Abuse initiative.

⁴ *Youth Substance Abuse Initiative, Evaluation Report for Cohort 1* - Peter Kreiner , Carol Prost, Rebekah Zinavage, Duane Neff, Brandeis University

Childhood Obesity

In 2006, concerned about the growing rates of childhood overweight and obesity in the MetroWest region⁵, MCHCF launched a new, proactive initiative aimed at combating childhood obesity. The strategic plan developed for this program recommended focusing on the following four goals:

- Increase public awareness of childhood obesity as a health issue
- Mobilize families, schools, and communities to create opportunities that encourage lifestyles that promote healthy weight
- Promote policies and environmental changes that support healthful eating habits and physical activity
- Monitor obesity rates, related behaviors, and health conditions for planning, implementing, evaluating, and disseminating activities

The Foundation supports progress toward these goals through a combination of grantmaking and non-grantmaking activities, including funding, evaluation, training and technical assistance, formation of the MetroWest Obesity Task Force, a public awareness campaign, a content-rich website (www.metrowestkids.org), partnerships with schools, health care agencies and academic institutions, and policy endorsements.

To date, grantmaking has largely focused on responsive grantmaking, working to build relationships with schools and youth-serving organizations, and supporting the programs identified as most critical by local leaders. Because of the range of programs supported, the Foundation has not sponsored an initiative-level evaluation; however, results from grantee cluster evaluations are promising⁶. In addition, feedback from the local community suggests that MetroWest's public education campaign, which involved a series of billboards as well as the launch of an interactive website, has increased the community's awareness of obesity as a health risk. The community urged the Foundation, however, to consider shifting its focus to promoting awareness of strategies to decrease or prevent childhood obesity in future campaigns.

The community's enthusiasm for MCHCF's Childhood Obesity initiative, as well as the evidence of the need to address this issue, led the Foundation to conclude that its work in this area should continue.

Research identified several ways in which the initiative could evolve over the next several years to increase its impact in the community. In particular, based on best practice research in other communities across the country, MCHCF will implement a more proactive, community-based approach to childhood obesity prevention in a select number of towns throughout the region.

The goals of the expanded Childhood Obesity Initiative area are:

1. **To improve children's health**, through increasing access to healthy foods and expanding opportunities for physical activity
2. **To reduce incidence of childhood overweight and obesity in targeted towns**, through proactive funding for town-based coalitions

Within the towns selected for participation in the proactive cohort-based initiative, specific objectives are:

1. **Increase access to opportunities to engage in physical activity** – The Foundation will seek to improve access to local physical activity outlets, including but not limited to bike paths, sidewalks,

⁵ In Massachusetts, approximately 30% of 2-to 5-year-olds and an equal proportion of 11-to 15-year-olds are above a healthy weight. In 2001, 10% of high school students in Massachusetts were obese (defined as having a BMI > 95th Percentile for Age and Gender), a 43% increase from 1999 at 7%. Source: MCHCF Childhood Obesity Strategic Plan, p. 3.

⁶ For example, participants in the Hockomock YMCA PAC program showed significant improvement in several areas, including increased intake of fruit, fruit juice, milk, green salad, carrots, and other vegetables; a reduction in drinking soda and watching television and video games; and increased physical activity and reduction in BMI. Teens participating in MCHCF-sponsored programming at Millis Middle School Teens reported more days eating salad, fewer TV hours and fewer video hours. (Source: Health Care Strategies evaluation, p. 11 and 12)

public parks, basketball and tennis courts, as well as physical activity time in schools and after-school programs

2. **Reduce engagement in risk behaviors for childhood overweight and obesity** – The Foundation will seek to reduce the prevalence of risk behaviors (e.g., high level of screen time) through public education to parents and children (through regional media campaign and local outreach efforts in cohort towns)
3. **Increase availability of healthy food** – The Foundation will seek to improve access to healthy food in schools, in before-and after-school programs, in local stores, and in local restaurants
4. **Improve local policies** – The Foundation will seek to achieve policy change at the local level on nutrition standards, physical activity standards, and health education standards in public schools and publicly-funded before- and after-school programs
5. **Ensure the long-term sustainability of activities initiated by the Childhood Obesity Prevention Coalitions** – The Foundation will seek to sustain the coalitions by building strong relationships with local stakeholders, ensuring community ownership, and engaging additional funders when possible

The Foundation will slowly phase towns into participation in the proactive cohorts, first providing support for a community-based needs assessment and strategic planning process, and where appropriate, providing funds to implement the programs identified within those plans. As in the Youth Substance Abuse initiative, the Foundation will provide technical assistance, evaluation, and knowledge-sharing opportunities to participating towns. The Foundation will also continue to support media outreach campaigns to educate community members about the health risks associated with childhood overweight and obesity, as well as healthy behaviors to reduce and prevent childhood overweight and obesity.

Racial and Ethnic Health Disparities

In late 2004 the Foundation commissioned the Harvard School of Public Health to study the issue of racial and ethnic health disparities in the MetroWest region. The study found that many health disparities existed in the Latino, Brazilian, and African American communities in MetroWest. Based on these findings, the Foundation launched the Racial and Ethnic Health Disparities initiative. A work group of community members was assembled to help develop the program and launch the implementation. Since 2007, the Foundation has distributed over \$750,000 in grants through this initiative. While the bulk of these grants were targeted at providing cultural competency training for area medical centers and nonprofits, the remaining grants were given to the administration of the Leon Nicks Memorial Minority Physician Fellowship Program for minority health care professional recruitment and retention, patient navigation, and other programs. The Foundation has also distributed grants that help alleviate racial and ethnic health disparities through its “Improving the Health of MetroWest Youth, Elder and Vulnerable Populations” responsive grantmaking program.

The review of the Racial and Ethnic Health Disparities initiative has led to adjustments in the program strategy going forward. Through interviews with external stakeholders and analysis of the MetroWest Health Data Book and Atlas 2005, research found that while there were many health disparities affecting the Latino, Brazilian, and African American populations in MetroWest, and there are four areas where MetroWest fared worse than the state. They are as follows:

- **Health care insurance coverage – 22.6% of Latinos in MetroWest are uninsured compared to 15% for Latinos in the state.** In addition, data from the Framingham Health Center shows that two out of three uninsured patients seen at the center are Brazilian – this data does not surface in the Health Data Book likely because Brazilians often self identify as White
- **Emergency room usage amongst Latinos in MetroWest is 84,566 per 100,000 compared to 60,296 per 100,000 in the state.** The Latino population is concentrated primarily in Framingham, Milford, and Marlborough and external stakeholders confirmed the acute shortage of primary care services for uninsured and low income Latinos in those areas

- **Diabetes hospitalization rates for African Americans in MetroWest is 463 per 1,000 compared with 350 per 1,000 for African Americans in all of Massachusetts**
- **Teen births amongst Latinos in Marlborough are 101 per 1,000 compared to 84 per 1,000 in the state.** It is projected in the Health Data Book that the rate amongst Brazilians in MetroWest is close to 91 per 1,000 which is also higher than the state rate for Latinos

A study of best practices in addressing racial and ethnic health disparities around the country revealed that the most effective programs are those that target a particular racial or ethnic community and focus on the prevention of a particular health disparity. The Foundation will adopt a similar strategy by addressing the above mentioned four health disparities for the particular racial or ethnic group affected by the disparity.

The goals of the Foundation's expanded Racial and Ethnic Health Disparities initiative are:

1. **Improve cultural & linguistic competency of MetroWest health care providers and nonprofit agencies** through increasing the diversity of health care professionals
2. **Reduce racial and ethnic health disparities in MetroWest** through focused efforts targeting specific health issues and population groups

The specific objectives that will guide the work of the Foundation in this area are as follows:

1. **Improve the cultural and linguistic competency of MetroWest health care and nonprofit service providers** – The Foundation will evaluate the need for additional interpreter and translator capacity in the area, and require its all its grantees to demonstrate cultural and linguistic competency where appropriate
2. **Increase diversity of health care professionals in MetroWest** – The Foundation will support the recruitment and retention of minority health care professionals in MetroWest using a range of vehicles such that the provider community better represents the resident population
3. **Reduce racial and ethnic health disparities where MetroWest fares worse than State** – The Foundation will support:
 - Increased access to insurance coverage for Hispanics & Brazilians
 - Increased access to affordable primary care for Hispanic and Brazilian populations
 - Reduction in diabetes hospitalization amongst African Americans
 - Reduction in teen births amongst Hispanics and Brazilian teens in Marlborough & Framingham
4. **Integrate focus on racial and ethnic health disparities into other Foundation initiatives and activities:**
 - Customize strategies for minority populations within Childhood Obesity, Youth Substance Abuse, and Elder Health Care initiatives
 - Support and require responsive grantees to improve cultural and linguistic competencies, and address disparities in their program strategies
 - Support and require grantees to collect and report data on racial and ethnic minorities served

The Foundation will seek to increase access to insurance coverage for Latinos and Brazilians by funding increased enrollment services. To increase access to affordable primary care for Hispanics and Brazilians, the Foundation will continue to fund the expansion of the Framingham Health Center into its new location, as well as investigate the establishment of satellite health centers in Marlborough and Milford. The Foundation will fund Diabetes education, prevention, and disease self-management programs for African Americans. The Foundation will seek to address teen births by addressing teen pregnancy more largely through school based interventions, community interventions, and parent education.

Elder Health Care

The elder population is one of three target populations served by MCHCF. Though the Foundation has not to date developed a specific initiative around elder health, it has provided generous responsive funding to support the needs of this population. Over the past three years, the Foundation has provided nearly \$2 million in grants to support elder health care programs across the region. The majority of these grants support access to care, home health, and health promotion activities.

Over the next 10-20 years, the elder population in MetroWest is projected to increase dramatically⁷, and there is some concern in the community that existing services are not sufficient to meet the needs of this growing population.

In recognition of these concerns, research into potential new initiatives for the Foundation included the area of elder health care. Subsequent research and discussion with MCHCF Board, Grants Panels, Committees, and staff determined that elder health care was a critical area of need in which the Foundation was well-positioned to create impact over the next five years.

While the research provided through the strategic planning process identified elder health care as an important need in the community, it also indicated that elders face a wide range of specific health concerns around which there was little consensus as to priorities. The research also revealed a lack of communication and coordination among local service providers. In light of these findings, the Foundation decided to dedicate funding in 2008 and 2009 to support for a comprehensive needs assessment and strategic planning process to be overseen by an Advisory Committee of local elder health care service providers.

The goals of the needs assessment and strategic planning process are:

1. **Understand the health-related needs of elders** in the MetroWest community
2. **Identify local resources** currently serving the needs of the community, and identify any gaps in service provision
3. **Develop a regional strategic plan** to address the unmet health care needs of MetroWest elders

The specific learning objectives for this process are:

1. **Identify any regional planning efforts currently underway** in the MW area related to elder health care and determine how MCHCF might capitalize on, support, or expand upon existing efforts
2. **Identify the greatest needs in the community related to elder health care** through working with BayPath Elder Health Care Services
3. **Identify local organizations** currently providing services to the community, determine their capacity, and identify gaps in services

MCHCF will convene an advisory committee of local elder health care service providers to offer direction and guidance to the research process. This committee will also oversee the development of a strategic plan designed to address the needs identified through the research process. Following the completion of the planning phase, MCHCF may elect to launch a proactive initiative around Elder Health Care in 2009 or 2010.

⁷ In 2000 (most recent available data) there were 53,316 elders living in MetroWest, representing 11.7% of the region's total population. By 2020, elders are projected to comprise 16.6% of the population, rising to 21.4% by 2030. In 2000, about 3 in 10 MetroWest elders struggled with some form of disability. In 2004, about 1 in 10 MetroWest elders were insured by MassHealth. (Sources: Census, MassCHIP)

Proactive Initiatives - Systemic

In addition to programmatic initiatives targeting specific populations, the Foundation will lead systemic initiatives focused on supporting programmatic initiative areas, and improving the health systems and infrastructure of the MetroWest region.

Capacity Building

MCHCF has historically focused on building the capacity in the health sector through a combination of grantmaking, workshops on a variety of topics, the Health Leadership Program, and on-on-one consultations with grantees and potential grantees. The previous strategic focus for this initiative area focused on three goals:

- Heighten the quality of the Foundation's service to all of its applicants and grantees through dedicated staff resources and internal processes
- Improve the quality of grant applications
- Ensure the Foundation is aware of grantees' successes and potential challenges, helping address needs where possible and learning from grantee experiences.

The majority of capacity building grantmaking has been responsive, and grant evaluation results have not been as successful as hoped⁸. In addition, interviewees noted that the capacity building grantmaking needed a more sustained focus, and the capacity building workshops funded by MCHCF have had challenges in attracting participants. However, interviews and surveys of MCHCF grantees showed that the Health Leadership Program, the technical assistance offered to grantees in some proactive initiative areas, and the one-on-one consultations with MCHCF staff were very useful.

As MCHCF moves forward with enhancing its strategic focus on select health issue areas, the Foundation will need to ensure that key service providers within those areas have the ability to fully serve their target populations. To help achieve this end, MCHCF must continue to invest in building the capacity of the service providers in the MetroWest region. Research in the area of nonprofit capacity building has shown that the key to increasing capacity in the nonprofit sector is to give funding based on identified capacity building needs to individual grantees, and to create long-term capacity building relationships that involve multiple types of assistance customized to meet the needs of the individual grantees. With this in mind, MCHCF will refocus its grantmaking activity in this arena, and will transition from a responsive to a proactive emphasis in capacity building grantmaking, with a focus on long-term, high-engagement capacity building with three to four select organizations that provide essential health services. The Foundation will also re-structure workshops as part of the overall capacity building efforts. MCHCF will continue sponsoring technical assistance for grantees, the one-on-one assistance to current and potential grantees, and the Health Leadership Program as they are currently structured.

The goals of the MCHCF Capacity Building Initiative include:

1. **Increase the ability of a select group of key health organizations** in the MetroWest area to achieve their mission and expand their services
2. **Develop the next generation of health leaders** throughout MetroWest
3. **Continue to enhance the technical capacity of grantees and increase their ability to obtain funding**

The key objectives within these goals include:

1. **Dramatically boost the capacity of select organizations** – The Foundation will enter into comprehensive Capacity Building relationships with key organizations within proactive initiative areas, and engage in both grantmaking, and non-grantmaking Capacity Building activities

⁸ The 2007 Carlisle Capacity Building Evaluation showed that a number of Capacity Building grant recipients believed that the grants had had a low impact on their organizational resources and efficiency. In addition, internal MCHCF evaluations have shown mixed grant results.

2. **Augment leadership in the health care arena** – The Foundation will continue to engage in the Health Leadership Program to increase the abilities of MetroWest health care leaders
3. **Increase the abilities of organizations to obtain MCHCF funding and enhance the program strength of both grantees and potential grantees** – The Foundation will continue to provide one-on-one assistance to grantees and potential grantees to build relationships and enhance the abilities of nonprofits throughout the MetroWest area
4. **Provide technical expertise** – The Foundation will continue to sponsor technical assistance to enhance the capacity of grantees within its proactive initiatives

As the Foundation engages in this grantmaking strategy with the objective of boosting the capacity of select organizations, a key consideration of its work will involve assessing the life stage of the organization that MCHCF is considering investing in. Depending upon the stage of organizational development, the Foundation may choose to focus upon incubating, scaling, or sustaining the capacity building grantee.

- **Incubate:** Young or small organizations serving a population with a high need for their services. Such organizations may only require short term, highly engaged support to push them to the “tipping point” of long-term stability.
- **Scale:** Slightly more mature organizations that possess the ability to serve a substantially larger population, but lack the resources to do so. A multi-year engagement with comprehensive capacity building may give them the tools they need to achieve this goal.
- **Sustain:** Organizations that are critical to the community but have difficulty obtaining adequate funding to fully serve their target population. For these organizations, the provision of financial and non-financial support while the organization works to reach long-term stability is essential.

Knowledge Sharing

Since its inception, the MetroWest Community Health Care Foundation has gathered a significant body of knowledge on both the health status of the MetroWest region, as well as best practices around meeting the health needs of local residents. This knowledge has come from a broad range of sources, including the Health Data Book and MetroWest Adolescent Health Survey, specially commissioned reports on specific high priority topics⁹, grantee and initiative evaluation findings, and extensive interactions among Foundation staff, grantees, and the community.

Going forward, the Foundation will increase the emphasis it places on collecting information and learnings, and will proactively share this knowledge with members of the MetroWest community. The Foundation will shift from collecting and creating a disparate set of information on a variety of health topics to specifically focusing knowledge sharing resources around proactive initiatives. By dedicating knowledge sharing resources to proactive initiatives, the Foundation will increase both its internal expertise, and the community’s access to information on these specific topics.

The goals of the Knowledge Sharing Initiative are:

1. **Advance knowledge about state of health in MetroWest**, by providing accurate, timely, and accessible MetroWest specific data for the community
2. **Advance knowledge of evidence based practices for specific health issues**, by providing multi-modal information on Foundation’s proactive initiatives to community stakeholders and grantees to enable them to make more informed decisions

The objectives of the Knowledge Sharing Initiative are:

1. **Serve as a Centralized Knowledge Hub on Proactive Initiative Topics:**
 - **Increase Knowledge Sharing Activities and Resources** – The Foundation will create a structured, proactive, and coordinated approach to sharing information with different audiences through different channels

⁹ E.g., MetroWest Birth Report, Cancer Incidence Report, Pay for Performance to Reduce Racial and Ethnic Disparities in Health Care in the Massachusetts Medicaid Program

- **Increase Community Perception of the Foundation as a Knowledge Hub** – The Foundation will actively communicate with proactive grantees about its knowledge and data about relevant health issues and approaches & solutions
 - **Redesign Website Around Proactive Initiatives** – The Foundation will create and share content focused on its Proactive Initiatives
2. **Improve Accessibility of the MetroWest Health Data Book** – The Foundation will create an online database which users can tailor to their specific data and information needs

As the Foundation becomes more intentional about serving as a knowledge hub on proactive initiatives (Objective 1), it will disseminate knowledge through a variety of communication channels in order to reach a broad and diverse set of audiences. The Foundation will rely on several channels, including but not limited to:

- **Online Presence** – The Foundation’s website will serve as a center for information on proactive initiative topics and will provide data and information on the health status of the MetroWest region
- **Events** – The Foundation will hold workshops, trainings, meetings, and presentations for grantees, local health care providers, public officials, and other stakeholders
- **Evaluations** – Continuous learning processes will be based on both grantee specific and initiative-wide evaluations, with best practices and lessons learned shared with grantees and other stakeholders
- **Publications** – A variety of publications on proactive initiative topics will be disseminated, including the Foundation’s special reports, research, and evaluations, relevant academic resources, and current articles on special initiative focus areas from newspapers and/or magazines

Health Profession Scholarship Program

For each of the past three years, the Foundation has given \$150,000 in scholarships to enable the residents of MetroWest to pursue careers in health. The scholarship program has evolved out of the Nurse Power program, and scholarships today are given to students committed to a broad range of careers in health care.

Going forward, the Foundation will continue its commitment to its scholarship program. The goal of the Health Profession Scholarship Program is:

1. **Increase the pipeline of highly qualified health care providers in MetroWest**, through the provision of scholarships to future health care providers and career advancement of current health care providers

The objectives of the Health Profession Scholarship Program are:

1. **Enable the pursuit of careers in health care by those who live or work in the MetroWest area.**
 - The Foundation will maintain its scholarship level at approximately **\$150,000 per year**
 - MCHCF will continue Nurse Power activities that support the Scholarship Program
2. **Increase the number of culturally competent health care providers in MetroWest** - The Scholarship Program will place an increased emphasis on encouraging candidates of racial and ethnic minority backgrounds to apply

Regional Public Health Entity

Massachusetts has a very fragmented and localized public health system. With approximately 350 local Boards of Health, Massachusetts has by far the highest number of local public health entities of any state in the U.S. This localization of public health services has led to a substantial number of issues in the provision of public health services throughout Massachusetts, including lack of resources and training,

fragmented and inconsistent services, and a shortage of staff¹⁰. The MetroWest Region is no exception, and exemplifies the issues associated with extreme localization of public health, including sizeable need for additional public health services such as emergency preparedness, regional health issue analysis, and communicable disease prevention.

Due to the inherent challenges of localized health services, the Massachusetts legislature has funded a study to examine the possibility of regionalizing public health within Massachusetts, and the implementation requirements. The study concluded that there was a great need for regionalization of public health within Massachusetts, and proposed several models that could be used in the event that regionalization is implemented. While MCHCF has not previously been involved in work around regionalization of public health, the Foundation's engagement in this issue is well timed. The Massachusetts State Legislature is considering funding a pilot of regionalization in 2009, and if the Foundation is willing to play a role in catalyzing a Regional Public Health Entity, the MetroWest region could be well positioned to take part in this pilot. Additionally, a survey of local stakeholders, including local board of health employees showed that very few responded negatively to the concept of Regional Public Health Entity in MetroWest¹¹.

Given the need for regionalization to fill the gaps in public health in the MetroWest region, MCHCF will focus on setting the stage for the creation of a Regional Public Health Entity (RPHE), to address some of the current public health gaps. MCHCF will conduct an in-depth public health needs survey, advocate for pilot funding from the state of Massachusetts, and provide seed funding for the Regional Public Health Entity.

The goals of the Regional Public Health Entity Initiative include:

1. **Improve the provision of public health in the MetroWest region**, through working towards creating uniformity in services offered and providing cost savings
2. **Improve the region's ability to respond to public health emergencies**, by facilitating coordination and networking

The key objectives within these goals include:

1. **Assess MetroWest public health needs** – The Foundation will conduct a systematic assessment of the public health needs and gaps in the MetroWest region
2. **Convene stakeholders** – The Foundation will begin to engage in an iterative process with boards of health, towns and senior service agencies to help educate them about the benefits of a RPHE, work with them to prioritize services, and obtain input to integrate into the design of the regional public health entity
3. **Catalyze the public health entity** – The Foundation will advocate for a pilot in MetroWest, partner with local boards of health, and other community groups to implement regionalization, provide seed funding, leverage state funding, and help solicit funding from other sources

Overview of Responsive Grantmaking

Responsive grantmaking will remain a significant element of the Foundation's grantmaking portfolio. With responsive grantmaking, the Foundation identifies several broad priority focus areas, and delegates to its grantees the responsibility for developing a strategy to create an impact in those areas. The Foundation will continue to focus its responsive grantmaking in the areas of youth, elderly, and the vulnerable.

¹⁰ Draft Recommendations of the Massachusetts Public Health Regionalization Working Group, 1/18/2007; Summary Report of the Working Group to the Statewide Steering Committee, 1/25/2008; Strengthening Local Public Health in Massachusetts; Hyde and Tovar, Institute for Community Health, June 28, 2006; FSG interviews

¹¹ Source: FSG MCHCF Strategic Planning Survey; Note: Several surveyed stakeholders chose to withhold comment until they had more information.

As part of this strategic planning effort, MCHCF reviewed its grant application and reporting strategies, in order to determine if there was potential to improve the Foundation’s responsive grant application process and reporting requirements. Benchmarking research and interviews of peer foundations’ grant application and reporting requirements suggest that:

- While few other foundations require the logic model, MCHCF’s processes are in other ways generally quite comparable to those of its peer foundations
- Some other foundations had implemented tiering of grant requirements, based upon grant size or grant length

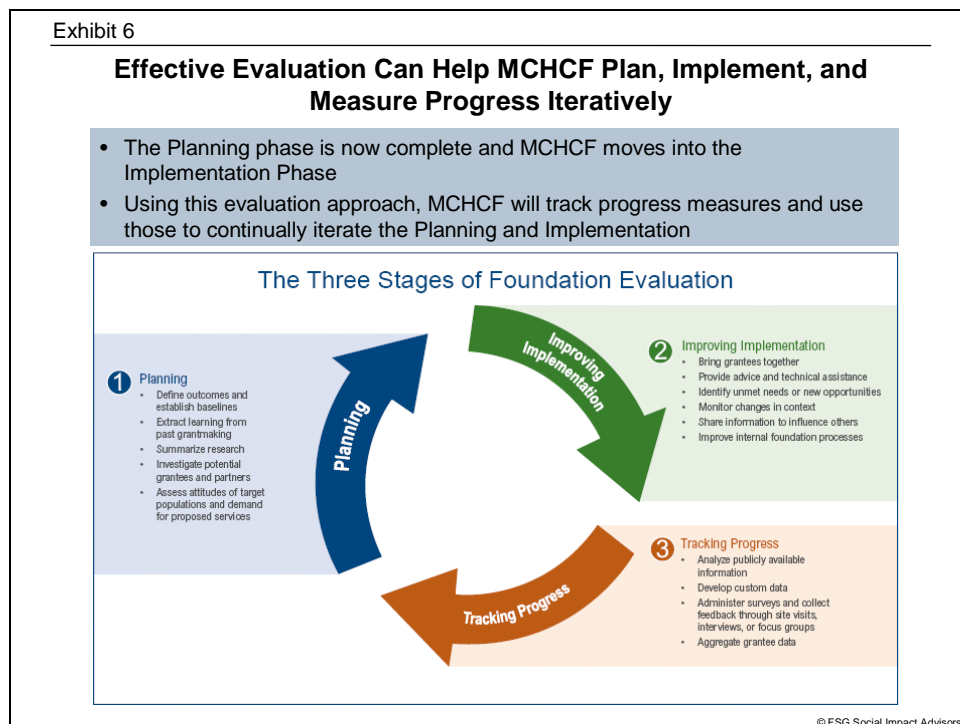
In addition, a number of MCHCF grantees were interviewed to gather their thoughts regarding the application and reporting process. This research found that:

- Recipients of larger grants were satisfied with the grantmaking processes, and felt that MCHCF did not require an undue amount of administrative time
- Recipients of smaller grants felt that in general, the application processes were helpful to them, but the reporting requirements were comparatively onerous for the amount of money they were receiving

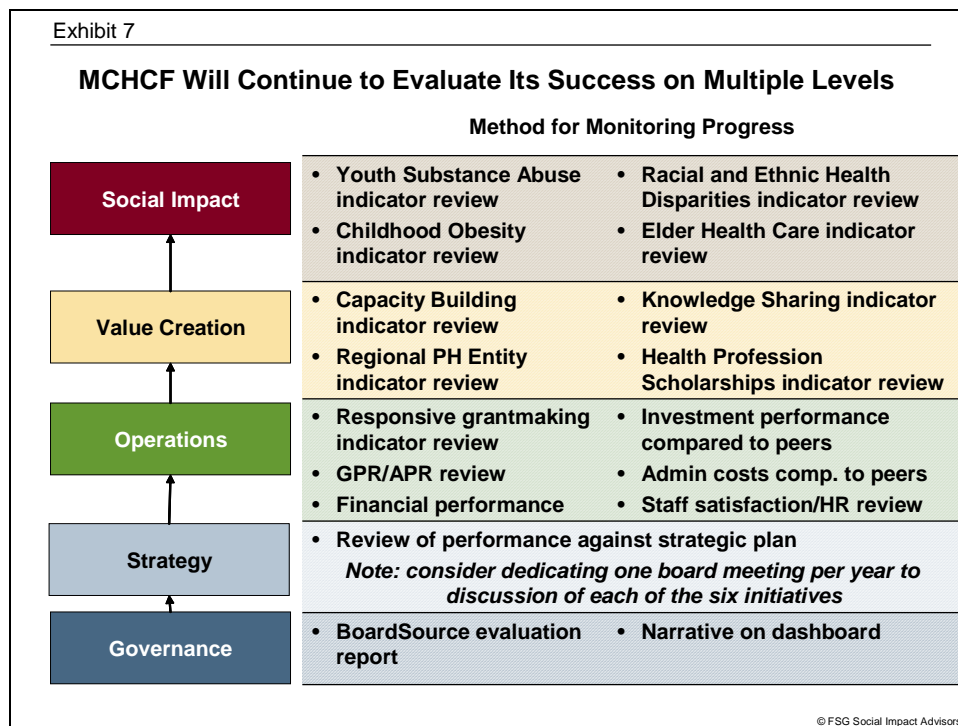
Given the peer benchmarking and interview results, MCHCF will explore some alterations to its grantmaking and reporting requirements for smaller grants.

Continuous Learning – Evaluation of the Foundation’s Impact

This new five year strategic plan will enable the Foundation to continue creating measurable social impact in the MetroWest communities. The Foundation will evolve and expand its proactive initiatives to tangibly impact social outcomes while also continuing to provide responsive grants. The Foundation will further consolidate its non-grantmaking activities by targeting capacity building and knowledge sharing activities to primarily support proactive initiatives. Going forward, the Foundation will also use evaluation as a means for continuous learning and as a tool for understanding the Foundation’s impact on social issues. (See Exhibit 6)



The Foundation will continue to evaluate its own success and impact at multiple levels: Social Impact, Value Creation, Operations, Strategy, and Governance. (See Exhibit 7) These five levels of evaluation will provide the Foundation with important internal and external information about how well the Foundation is performing.



Evaluation of Social Impact and Value Creation will provide the Foundation Board with important external performance metrics. At the Social Impact level, the Foundation will evaluate its success in reaching initiative-specific indicators (Youth Substance Abuse, Childhood Obesity, Racial and Ethnic Health Disparities, Elder Health Care). These indicators, created with input from grantees, will enable the Foundation to track its progress towards creating a discernable difference in the health of the region. Periodic in-depth external evaluations of these initiatives will serve to deepen the Foundation’s and grantees’ understanding of effectiveness of strategies and tactics employed, which will in turn be used to modify program implementation in an iterative fashion. At the Value Creation Level, the Foundation will measure the success of its capacity building and knowledge sharing initiatives that support and enhance the Foundation’s ability to achieve social impact in its programmatic areas.

Periodic internal evaluations, including evaluation of Operations, Strategy, and Governance, will provide a crucial component of the Foundation’s comprehensive evaluation plan. At the Operations level, the Foundation will evaluate its operational efficiency and effectiveness. This will include evaluation of the Foundation’s responsive grantmaking processes, grantee satisfaction (using the Grantee and Applicant Perception Reports by CEP), administrative costs, investment performance, and other indicators. At the Strategy level, the Foundation will assess progress made against this strategic plan. Additionally, at the Governance level, how well the Foundation’s governance supports achievement of its goals will be evaluated.

Organizational Development

As the Foundation’s grantmaking and non-grantmaking activities expand as a result of this plan, the organization itself will most likely need to grow to accommodate these new programs and projects. This

growth will mean the addition of new program staff and the use of outside consultants for time limited functions such as initiative evaluations or web design and updates.

As the staff roles evolve, the structure of the board committees will evolve as well. Although the governance structure of the Foundation will remain the same, each proactive initiative will benefit from a task force, comprised of grantees and community leaders, dedicated to strategic oversight of specific initiatives. This will require the addition of new task forces on Youth Substance Abuse and Elder Health Care, in addition to existing task forces on Childhood Obesity, Knowledge Sharing, and Racial and Ethnic Health Disparities.

V. Conclusion

As the Foundation embarks on the next five year period, it is well positioned to continue to increase the impact it has on the health of the residents of MetroWest. With a continuing priority on both creating deep impact in the areas of its proactive initiatives and meeting community needs through responsive grantmaking, the Foundation's work promises to both improve the health of specific populations as well as the region's health systems. The Foundation's focus on becoming a learning organization, through increased focus on evaluation and emphasis on sharing knowledge with the community, also positions MCHCF to increase the impact it has through its grantmaking and non-grantmaking activities.