



## Systems for Action

### Systems and Services Research for a Culture of Health

#### BACKGROUND

Health is shaped by a complex web of social, economic, and environmental conditions and experiences that extend far beyond the reach of the medical care system. A large and growing body of evidence demonstrates how these nonmedical determinants—such as housing, education, and transportation influence health and health equity for individuals, families and communities.<sup>1-3</sup>

The Robert Wood Johnson Foundation's Culture of Health Action Framework includes an overarching focus on health equity—which requires that “everyone has a fair and just opportunity to be healthier.” This can be achieved by “removing obstacles to health—such as poverty, discrimination, and their consequences—including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”<sup>4</sup> Unfortunately, the services and supports designed to improve these conditions—such as housing; transportation; education; income and employment assistance; child and family supports; and legal and criminal justice services—are often disconnected from the medical services and public health programs tasked with improving health. As a result, medical and public health interventions often fall short in improving health and health equity because they fail to address underlying social, economic and environmental conditions.<sup>3</sup>

Delivery and financing systems for medical care, social services, and public health services frequently operate in isolation from each other despite pursuing common goals and serving overlapping populations. These systems interact in complex and poorly understood ways through fragmented funding mechanisms, information systems, governance and decision-making structures, implementation rules and strategies, and professional practices.

As awareness about the importance of social determinants of health continues to grow, increasing numbers of health care providers, social service organizations, and government agencies are taking steps to intervene on these determinants by building stronger connections among the medical, social, and public health sectors. Unfortunately, relatively few research-tested models and tools exist that can inform this work in multisector systems alignment. Moreover, very few organizations currently engaged in systems alignment work are able to rigorously evaluate the implementation and impact of their work. New research is urgently needed to discover novel strategies for aligning systems in ways that improve health and health equity.<sup>5</sup>

#### THE PROGRAM

Systems for Action (S4A) is a signature research program of the Robert Wood Johnson Foundation (RWJF) that helps to build the evidence base for a Culture of Health by rigorously testing new ways of connecting the nation's fragmented medical, social, and public health systems. Studies conducted through the S4A program test innovative mechanisms for aligning delivery and financing systems for medical, social, and public health services, with a focus on the effects of these mechanisms on health and health equity. S4A uses a wide research lens that includes and extends beyond medical care and public health to incorporate social service systems—such as housing, transportation; education; employment; food and nutrition assistance; child and family support; criminal and juvenile justice; and economic and community development.

Research studies [supported through S4A](#) must: 1) focus on solutions to high-priority system alignment problems that involve medical, social, and public health services; 2) test the effectiveness of these solutions using rigorous scientific

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methods; and 3) engage stakeholders from medical, social, and public health systems in the design and conduct of the research, so that findings can be readily used in practice.

Studies funded through the S4A program must test a specific **system alignment mechanism** that engages all three of the broad sectors referenced in this call for proposals (CFP), including medical care, public health, and social services. These sectors are defined in greater detail below. The [S4A Research Agenda](#) uses the term “system alignment mechanism” broadly to include any action that an organization, network, or community may undertake to reduce fragmentation and improve coordination in the delivery of medical, social, and public health services.<sup>6</sup>

**Important Notice:** In contrast to earlier funding announcements of the S4A program, this fourth CFP focuses on a **limited and specific** subset of system alignment mechanisms selected from the larger [S4A Research Agenda](#) that have not been explored fully by [previous S4A studies](#). Proposals must address all four characteristics outlined below in order to be considered responsive to this CFP.

Studies to be funded under this 2019 CFP must address **all of the following** four characteristics:

1. **Alignment mechanisms must be based in the social services sector or public health sector.** Studies must focus on a system alignment mechanism that is designed and/or implemented principally by organizations operating in the social services sector or public health sector, rather than by organizations operating primarily in the medical care sector. Proposals must specify explicit and substantive roles to be played by social and public health organizations in implementing the system alignment mechanism under study. We refer to these types of mechanisms as **outside-in approaches** to system alignment because they rely significantly on ideas and capabilities contributed from outside the medical care system. Please refer to the sector definitions below for more information on how the social services and public health sectors are defined for the purposes of the S4A program.
2. **Alignment mechanisms must include a focus on financing and/or incentives for system alignment.** Studies must test an approach for financing and/or incentivizing greater alignment between medical, social, and public health systems. Innovative financing arrangements—such as shared-savings; pay-for-success; social impact bonds; risk-sharing arrangements; tax exemption; tax increment models; global budgeting; or community development financing are encouraged. Incentive arrangements are also of interest, including performance measurement; public reporting; peer comparisons; recognition and awards programs; certification or accreditation programs; purchasing or contracting requirements; or regulatory actions such as fines or fees.
3. **Alignment mechanisms must be designed to achieve system-level change.** Studies must focus on an alignment mechanism that has the potential to change how delivery and financing systems operate, rather than mechanisms that simply fill gaps between existing systems but do not change the status quo. Studies should propose methods for evaluating whether and how medical, social, and public health systems change in response to the system alignment mechanism under study. Studies that focus narrowly on outcomes realized by patients, clients or members of the target population, without also measuring system-level change, will not be considered responsive to this CFP.
4. **The research approach must include methods for evaluating impact on health equity.** Studies must include methods that allow the research team to evaluate the impact of the system alignment mechanism on one or more measures of health equity. Studies should examine the ability of the system alignment mechanism to contribute to an environment in which everyone has the opportunity to achieve their full health potential, and in which no one is disadvantaged from achieving this potential because of social position or circumstance.<sup>3</sup> Applicants are encouraged to follow recommendations of the National Academy of Medicine regarding measures of health equity.<sup>7</sup> Measures should quantify differences in health outcomes, risks, or determinants across key population subgroups of interest—such as those based on race; ethnicity; gender; socioeconomic status; disability status; geography; or other subgroups that experience differences in opportunity, social position or power.

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## **Medical, Social, and Public Health Systems**

Studies funded under the S4A program must test mechanisms for aligning systems that involve all three sectors referenced in this CFP—medical care, public health, and social services. The rationale for this requirement is that all three of these sectors address key determinants of health but often through fragmented rather than coordinated efforts. The S4A program uses broad and inclusive definitions for each of these three sectors, as follows:

- **Medical care sector:** The medical sector includes the organizations, programs, and services that help individuals obtain access to personal health services that prevent, treat, or manage diseases and injuries—including services for physical health conditions, mental health conditions, substance abuse, and developmental disabilities. This sector includes the providers, purchasers, and payers of these services, as well as the suppliers of associated products and technologies—such as pharmaceutical products and health information technologies.
- **Social services sector:** The social services sector includes the organizations, programs and services that work to address fundamental human needs and promote social well-being. This sector includes organizations and programs that provide: education; housing; income support; employment assistance; diversity and inclusion initiatives; food assistance; transportation; child and youth development; recreation and physical activity; legal assistance; disability support services; violence prevention; arts and cultural programming; criminal justice and juvenile justice services; and community and economic development.
- **Public health sector:** The public health sector includes the organizations, programs and activities that work to create the conditions in which people can live healthy lives, including activities to prevent disease and injury and promote health for the population at large. This sector includes governmental public health agencies working at local, state, and federal levels, as well as nongovernmental organizations that pursue a public health mission. A defining feature of the public health sector is its focus on actions designed to protect and improve health at a population level rather than purely at an individual level through delivery of personal health services.<sup>5</sup> Actions implemented within the public health sector have characteristics associated with *public goods*—meaning that they produce benefits that accrue broadly in society and that cannot easily be restricted to the entities who help to produce or pay for these actions. Similarly, the public health sector focuses on activities that generate positive or negative *externalities* for society at large—such as the social harms created by second-hand smoke and industrial pollution, or the social benefits of herd immunity created by vaccinations. For these reasons, governments play important roles within the public health sector because their taxing, spending, and regulatory powers are often needed to restrict activities with negative externalities, while promoting activities with positive externalities.

Studies supported through the S4A program may choose to focus on aligning delivery systems, financing systems or both across these three sectors. The S4A program defines a **delivery system** as the constellation of organizations, people, policies, and resources that allow a set of services or activities to be implemented for members of a target population.<sup>6</sup> Similarly, we define a **financing system** as the constellation of financial resources, funding mechanisms, funders, and payment policies that support implementation of a set of services or activities. Applicants should clearly specify the relevant delivery and/or financing systems to be aligned through their proposed research, along with the target populations of interest. Similarly, applicants should clearly specify which elements of the medical, social, and public health sectors are involved in their study's system alignment mechanism, and the roles to be played by each sector.

## **Alignment With RWJF Vision and Strategy**

Studies supported under the S4A program are expected to focus on mechanisms for system alignment that build evidence for RWJF's Culture of Health vision and Action Framework. See the updated report, *Moving Forward Together: An Update on Building and Measuring a Culture of Health* and the original 2015 report, *From Vision to Action: A Framework and Measures to Mobilize a Culture of Health*.<sup>4</sup> Similarly, S4A studies should build evidence for strategies used within RWJF's focus area of **Transforming Health and Health Care Systems (THHCS)**. THHCS's goal is that health care, public health and social services work together to fully address the goals and needs of the people they serve. THHCS's strategies focus on: 1) enhance the capacity of and incentives for the health care system to meet people's goals and needs, especially in low-resource communities; 2) ensure that policy decisions about health and health care systems are made by engaging the people served by these systems; and 3) foster alignment through sustainable connections among health care, public health and social services.

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To avoid duplication and maximize the potential for innovation, applicants are encouraged to review descriptions of studies already funded by the S4A program and by RWJF's other signature research programs: [Policies for Action](#) and [Evidence for Action](#). [Policies for Action](#) supports research on how law and policy impact health and well-being. [Evidence for Action](#) supports research on how specific programs, policies and partnerships impact health—particularly programs that operate outside the domain of health care services or public health practice. [Systems for Action](#) complements these other signature research programs by conducting research on the delivery and financing systems that impact health, and particularly on mechanisms for aligning and integrating these systems. Narrow studies of policies, programs, or interventions are unlikely to be supported through S4A, but may be a better fit for one of the other RWJF signature research programs.

## **Program Activities**

Applicants responding to this 2019 CFP may apply for awards of up to 36 months in duration and up to \$500,000 in total costs to support studies that evaluate the implementation and impact of novel system alignment mechanisms. In evaluating impact, studies should focus on health and/or economic outcomes of interest, with a priority focus on equity in impact. A 36-month research time frame places emphasis on studies that can be implemented expeditiously using novel applications of quasi-experimental research designs; natural experiment designs; rapid pragmatic trials; system dynamics and simulation studies; mixed-method approaches; and/or analysis of existing, linked health and social service data systems. Applicants are encouraged to propose novel uses of existing data sources for their studies—such as data from program administrative records; government surveys; social media feeds; commercial transaction databases; environmental monitoring and sensor systems; and satellite or other imaging data.

Studies should include a multidisciplinary approach demonstrating strong theoretical, methodological, and operational expertise that is directly relevant to the S4A research agenda.<sup>6</sup> Funded studies should draw upon expertise in all three broad sectors implicated in the S4A research agenda: 1) medical care; 2) public health; and 3) social services. Research teams must include people who work in each of these three types of sectors.

S4A is a “for action” research program, so studies must be designed with a clear focus on the stakeholders who will use the scientific knowledge to be produced by the research. Strong stakeholder relationships must be maintained throughout the research process using structures such as practice-based research networks; community-based participatory research collaboratives; translational research institutes; and/or other engagement mechanisms.

Applicants must demonstrate a supportive environment for S4A research and may be based: within community organizations; government agencies; professional associations; academic institutions; and independent research organizations that have the requisite skills, resources, and relationships to carry out the proposed work. We strongly encourage partnerships between research organizations and community organizations.

Each study funded under the S4A program will undertake the following activities:

- Design and implement the proposed study that tests a novel system alignment mechanism and evaluates its implementation and impact.
- Engage local, state, or national stakeholders in the design, implementation, and translation of the research project.
- Work collaboratively with the S4A national coordinating center and other S4A research investigators to identify and leverage potential synergies across research projects and to disseminate results broadly.
- Participate actively both in research dissemination and translation mechanisms organized by the national coordinating center and RWJF, including research-in-progress webinars, blogs, podcasts, research meetings, and policy briefings.
- Identify and pursue opportunities for research expansion, replication and follow-on studies from RWJF and other research funding agencies.

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- Investigators are expected to attend RWJF's annual Sharing Knowledge to Build a Culture of Health conference during each year the grant is active. Applicants must include funds in their budgets to cover travel costs to this meeting for at least two members of the research team.
- Grantees who publish findings in peer-reviewed publications must do so in open access journals. Please see "Open Access" section on page 7.

## TOTAL AWARDS

This call for proposals will support studies that can be completed over a 36-month period with up to \$500,000 in total funding from RWJF. Up to four awards will be selected for funding under this solicitation.

Each study will be expected to distribute its resources for stakeholder engagement, research implementation, and research dissemination in the most productive and equitable ways. Funded investigators are encouraged to leverage resources from other sources to support research, engagement, and dissemination activities.

## ELIGIBILITY CRITERIA

- Applicants must be either public entities or nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and are not private foundations or nonfunctionally integrated Type III supporting organizations. The Foundation may require additional documentation from applicant organizations.
- Applicant organizations must be based in the United States or its territories.
- Awards will be made to organizations, not to individuals.
- Multi-organizational consortia are encouraged to apply as long as a single eligible organization is designated as the primary applicant responsible for maintaining consortium agreements with other participating organizations.
- The primary applicant organization must have a demonstrated history of successfully managing funds awarded by foundation or government sources.
- We welcome applications from people of all personal and professional backgrounds. We especially encourage applications that include:
  - Individuals having backgrounds and life experiences that are underrepresented on research teams.
  - Individuals and institutions who are new to RWJF and have not received funding previously.
  - Individuals from disciplines outside of the health professions and medical sciences, including but not limited to architecture, business, communications, computer science, criminal justice, design, economics, education, engineering, finance, geography, law, political science, psychology, public administration, public policy, social work, sociology, transportation, urban and regional planning.
  - Individuals from nonacademic settings including government agencies, professional associations, and community-based organizations.
  - Interdisciplinary and cross-sectoral research teams that include individuals with both scientific expertise and operational experience.

Because S4A is a research program, all applicants should make sure that their team includes individuals with relevant expertise in scientific research design, data analysis methodologies, and scientific publication. Applicants from nonacademic settings that do not have an embedded research unit are strongly encouraged to partner with a research institution to provide this expertise.

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## OUR EQUITY, DIVERSITY, AND INCLUSION COMMITMENT

The Robert Wood Johnson Foundation is committed to building a Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. Achieving this goal requires focus on equity, diversity, and inclusion. To that end, we are committed to fostering diverse perspectives. We recognize that individuals' perspectives are shaped by a host of factors, such as their race, ethnicity, gender, physical and mental ability, age, socioeconomic status, gender identity and expression, sexual orientation, familial status, education, religion, legal status, military service, political affiliation, geography, and other personal and professional experiences.

We know that the presence of diverse perspectives alone is not sufficient. Therefore, we also are committed to creating inclusive environments where all individuals are encouraged to share their perspectives and experiences. We believe that only through valuing our differences and similarities, and remaining vigilant in advancing equity, will we be able to maintain an equitable workplace and actively pursue equity in all aspects of our work. We commit to being continuous learners and working alongside others to cultivate equity, diversity, and inclusion.

## SELECTION CRITERIA

Criteria to be used in evaluating applications include the following:

1. **Relevance:** The application describes a study that includes all four of the characteristics of interest described in this CFP: 1) an alignment mechanism that is designed and implemented primarily by organizations working in the social services sector or public health sector, rather than the medical care sector; 2) an alignment mechanism that includes an approach for financing and/or incentivizing greater alignment between medical, social, and public health systems; 3) an alignment mechanism that is designed to change how delivery and financing systems operate, rather than simply filling gaps between existing systems; and 4) a study design that includes methods for evaluating impact on one or more measures of health equity.
2. **Significance:** The application describes a clear logic model or theory of change indicating how the system alignment mechanism under study, if successful, will activate key drivers within the Culture of Health Action Framework, thereby exerting a powerful and sustained impact on health and health equity. Applications must clearly identify how each of the three sectors of interest to this program – medical care, public health, and social services – will be engaged and aligned through the system alignment mechanism under study, using the definitions of each sector described in this CFP.
3. **Innovation:** The system alignment mechanism to be studied is novel and previously untested or represents a promising adaptation to new settings or populations.
4. **Multidisciplinary expertise:** The proposed research team has expertise in areas relevant to the S4A research agenda, including investigators from diverse health and social science fields who have expertise in all three broad types of delivery and financing systems implicated in the S4A research agenda: 1) medical care; 2) public health; and 3) social services. In addition to individuals with scientific expertise, the team must include stakeholders who work in each of the three sectors of interest in this CFP: medical care, public health, and social services.
5. **Strength of the environment:** The proposed research team has access to the necessary resources, collaborative relationships and infrastructure required for successful execution of the project. The team has access to relevant data resources, computing facilities, supporting staff expertise, communication and dissemination mechanisms, and institutional relationships with relevant scientific, policy, professional and community organizations.
6. **Scientific merit and feasibility of the research approach:** The application includes a rigorous research design, data sources, sampling, measurement, and analytic methodology that can support sound conclusions about the implementation and impact of the system alignment mechanism under study. The proposed activities are feasible for completion with the available budget and time frame.
7. **Capacity for supporting meaningful system alignment and system change strategies:** The application describes a feasible and well-reasoned approach for translating and disseminating research findings, and for

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helping relevant stakeholders use findings from the research to achieve systems alignment and systems change. The proposed research team demonstrates an ability to support strong stakeholder engagement, research dissemination, and research translation strategies.

## MONITORING

RWJF monitors the grantees' efforts and careful stewardship of grant funds to assure accountability. Grantees will be required to submit periodic narrative and financial reports.

## APPLICANT SURVEY PROCESS

For selected programs, the principal investigator (PI) of the proposal will be contacted after the deadline by SSRS, an independent research firm. The principal investigator will be asked to complete a brief, online survey about the proposal process and applicant characteristics. This voluntary questionnaire will take no more than 15 minutes to complete. Responses provided to SSRS will not impact the funding decision for your proposal in any way.

SSRS will protect the confidentiality of your responses. RWJF will not receive any data that links your name with your survey responses.

## USE OF GRANT FUNDS

Grant funds may be used for project staff salaries, consultant fees, data collection and analysis, dataset procurement, meetings, supplies, project-related travel and other direct expenses, including a limited amount of equipment deemed essential to the project. In keeping with RWJF policy, grant funds may *not* be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, or as a substitute for funds currently being used to support similar activities. RWJF budget preparation guidelines are [available here](#).

## OPEN ACCESS

In order to ensure RWJF-supported research is made accessible to a wide and diverse audience, grantees who publish findings in peer-reviewed publications must do so in open access journals and/or must include funds in their budgets to cover the cost of making the resulting publications open access (typically \$2,000–\$5,000 per manuscript).

## HOW TO APPLY

- Proposals for this solicitation must be submitted via the RWJF online system. Visit [www.rwjf.org/cfp/s4a4](http://www.rwjf.org/cfp/s4a4) and use the “Apply Online” link. If you have not already done so, you will be required to register at [my.rwjf.org](http://my.rwjf.org) before you begin the application process.
- Guidelines and information, including a list of frequently asked questions (FAQs), are available in the online system through the links shown on the left side of all screens. A webinar for applicants will be held on September 5 from 1–2 p.m. ET and October 1, 2019 from 11 a.m.–12 p.m. ET and registration is required. Registration information may be found on the S4A website at <http://systemsforaction.org/funding-opportunities-2019>.
- Applicants are strongly encouraged to submit a one-page letter of intent (LOI) providing a preliminary title, a brief description of the proposed research, and a listing of the participating investigators and institutions. This LOI is not binding and not required, but it ensures that the program office is able to recruit reviewers with appropriate subject matter expertise to review your application thoroughly. The LOI should be submitted by 3 p.m. ET on October 4, 2019, which is four weeks before the full proposal deadline. Instructions for submitting the LOI are available at <http://systemsforaction.org/funding-opportunities-2019>.

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- Full proposal submissions will be accepted via the RWJF online system until 3 p.m. ET on November 6, 2019. Applicants are expected to submit a detailed proposal of no more than 10 pages, accompanied by a budget, budget narrative, and curriculum vitae for PI and/or co-PIs. The proposal narrative should include a discussion of each of the areas described above under Selection Criteria, including: 1) a statement of study aims, their significance, and their responsiveness to the objectives of this solicitation; 2) a description of key personnel and their relevant qualifications and experience, including individuals who work in medical care, public health, and social services sectors; 3) a description of the system alignment mechanism to be studied and the medical care, public health, and social service systems to be aligned; 4) a description of the research approach to be used in evaluating the implementation and impact of the system alignment mechanism, including information on data sources and measures, comparison groups, analytic methods, sampling strategies and statistical power as relevant; 5) a timeline and management plan for the study; and 6) a discussion of how practice, agency, and/or community stakeholders will be engaged in the research and how findings will be translated and disseminated to help relevant stakeholders apply the findings within their own systems. It is incumbent upon the applicant to make the case to the reviewers that they can provide appropriate expertise and capabilities, as well as good value for the funding requested.
- Applications will be screened for responsiveness to this CFP, and all responsive applications will be reviewed by members of the national advisory committee (NAC), the national coordinating center, and selected external reviewers with applicable subject matter expertise. The NAC will make funding recommendations to RWJF based on these reviews and on S4A program priorities. Final decisions on awarded applications will be made by RWJF. RWJF does not provide critiques of individual applications.

## **Late Submissions**

RWJF will accept only those proposals that are completed/submitted at the time of the deadline. Because one of our Guiding Principles is to treat everyone with fairness and respect, RWJF's deadline policy applies to all applicants. If an applicant experiences a problem with the online application system that may prevent them from submitting on time, please notify the program administrator immediately. To do so, click on the "Contact Us" link found in the "Resources" area on the left side of most screens within the online proposal site. We encourage you to submit your proposal in advance of the deadline so that any unforeseen difficulties, e.g., technical problems, may be addressed well before the deadline.

## **PROGRAM DIRECTION**

Direction and technical assistance for Systems for Action are provided by the S4A national coordinating center at the University of Colorado, which serves as the national program office located at:

### **Systems for Action National Coordinating Center**

Department of Health Systems, Management and Policy  
Colorado School of Public Health | Anschutz Medical Campus  
13001 E. 17th Place, Mail Stop B119  
Aurora, CO 80045  
Phone (303) 724-3759  
Email: [systemsforaction@ucdenver.edu](mailto:systemsforaction@ucdenver.edu)  
Website: [www.systemsforaction.org](http://www.systemsforaction.org)

Responsible staff members at the national coordinating center are:

- Glen Mays, PhD, program director
- Carrington Lott, program manager

Responsible staff members at the Robert Wood Johnson Foundation are:

- Carolyn Miller, MSHP, MA, *senior program officer*



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- Oktawia Wojcik, PhD, *senior program officer*
- Sofia Kounelias, *program financial analyst*

Members of the National Advisory Committee are:

- Susan Dreyfus, Alliance for Strong Families and Communities
- Darrell Gaskin, PhD, MS, Johns Hopkins University
- Phillip Huang, MD, MPH, Austin/Travis County Health and Human Services Department
- Patricia Mabry, PhD, HealthPartners Institute
- Jim Scanlon, MPP, U.S. Department of Health and Human Services (ret.)
- Elizabeth Sobel-Blum, MBA, MA, Federal Reserve Bank of Dallas
- Amy Ellen Schwartz, PhD, Syracuse University
- Steven Teutsch, MD, MPH, Los Angeles Department of Health (ret.)
- Tracy Wareing Evans, JD, American Public Human Services Association

## KEY DATES AND DEADLINES

- **September 5, 2019 (1 p.m. ET)**  
Informational webinar for applicants. Registration is required. Please visit <http://systemsforaction.org/funding-opportunities-2019> to register.
- **October 1, 2019 (11 a.m. ET)**  
Informational webinar for applicants. Registration is required. Please visit <http://systemsforaction.org/funding-opportunities-2019> to register.
- **October 4, 2019 (3 p.m. ET)**  
Deadline for receipt of one-page Letter of Intent (strongly encouraged, but not mandatory and nonbinding).
- **November 6, 2019 (3 p.m. ET)\***  
Deadline for receipt of full proposals via RWJF online system.
- **Mid-February 2020**  
Applicant finalists notified of funding recommendations.
- **April 1, 2020**  
Grants initiated.

*\*All proposals or applications must be submitted via the RWJF online system. All applicants should log in to the system and familiarize themselves with online submission requirements well before the final submission deadline. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline. In fairness to all applicants, late submissions will not be accepted.*

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## REFERENCES

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## ABOUT THE ROBERT WOOD JOHNSON FOUNDATION

For more than 45 years, the Robert Wood Johnson Foundation has worked to improve health and health care. We are working alongside others to build a national Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. For more information, visit [www.rwjf.org](http://www.rwjf.org). Follow the Foundation on Twitter at [www.rwjf.org/twitter](http://www.rwjf.org/twitter) or on Facebook at [www.rwjf.org/facebook](http://www.rwjf.org/facebook).

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