Strategic Advocacy Plan: Recommendations to Make Approaches Actionable

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During the Fall 2013 Special Hope Foundation (SHF) meeting, the Board decided to form an ad-hoc Advocacy Committee that would review the Strategic Advocacy Plan, assess the five approaches and create recommendations that would make the approaches more “actionable”. Since then, the committee has met three times to develop recommendations.

Each of the five approaches contribute the following objective:

“To increase awareness of current gaps in healthcare access for developmentally disabled adults among parents, healthcare providers, policymakers, and funders, and empower these groups to use their positions and resources to improve care” (SHF Strategic Advocacy Plan, February 2012).

Below are our recommendations.

**Approach #1: Champion the Growth of Local Self Advocates**

A) Include self-advocates with developmental disabilities in the Special Hope Foundation decision-making process.

1) After SHF completes the first grant review process, we will engage a committee of 2-3 self-advocate advisors to give input on the grant applications. Advisors will be paid for their time and expertise ($200 per quarter per person) and are expected to liaise with staff to share their comments within a two-week period before the Board reviews applications. We anticipate that advisers would spend 5 hours per quarter to review proposals and give input. Advisers will follow the SHF Conflict of Interest policy. Staff would coordinate adviser efforts.

   Implementation Timeline:

   By Spring 2014, we will identify five potential adult self-advocate candidates, at least one of who is on the autism spectrum and/or has an intellectual disability. Board members will seek recommendations from the community for these advising roles. Staff will decide 2-3 to appoint as advisers. During Summer 2014, the Board and/or staff will provide training in how to review grant applications. By Fall 2014, advisers will give input on grant applications.

   Resources required: stipend for time ($1600 – $2400 annually), staff time to coordinate and facilitate input.
2) SHF will invite 1-2 self advocates (who may be the advisers, or other self advocates) annually to present to the Board on their own experiences in healthcare so that the Special Hope Board can increase their awareness of key issues. These presentations would take place during the spring meeting.

   Implementation Timeline: Board and/or staff will recruit presenters for the Spring 2014 meeting immediately.

   Resources required: $100 - $200 a year in flat-rate transportation stipends.

3) SHF will bring on a second self-advocate to the Board.

   Implementation Timeline: Staff and Board will begin recruiting in Summer of 2014 with the goal of bringing on a new Board member in Spring 2015.

   Resources: Staff and Board time.

B) Increase collaboration among service providers.

   Include grant question on how the grant applicant encourages information partnership in their region and within support networks, where the grant is being implemented.

   Implementation Timeline: Staff will add this question to the grant application before the next cycle begins.

**Approach #2: Encourage Specialists**

A) Consider choosing to fund grants based on medical service providers developing innovative, doctor-tested, implementable tools that create positive results that can be adapted to the medical community nationwide. This may include funding implementation and testing grants (versus brand new tools grants).

   Implementation Timeline: Staff will determine when this is most strategic/appropriate.

B) Consider choosing one grant focused on improving one specific medical point in time (like annual check up), instead of system overhaul.

   Implementation Timeline: Staff will determine when this is most strategic/appropriate.

C) Recognizing that a critical component of program implementation is having support from a larger, often institutional infrastructure, SHF will prioritize grant awards to applicants working within a larger system (e.g. Kaiser).

   Implementation Timeline: Staff will determine when this is most strategic/appropriate.
**Approach #3: Make Research Accessible**

A) Include grant questions in the application re how grant applicant

1) will document their work in a statistically significant way and
2) will share findings that with other providers (e.g. article in peer review journal).

Implementation Timeline: Staff will add this question to the grant application before the next cycle begins.

B) Include question re how grant applicant will make approach usable and actionable to the end user or others who can replicate their work in the field.

Implementation Timeline: Staff will add this question to the grant application before the next cycle begins.

**Approach #4: Create Sustained Learning Opportunities for Donors**

A) Create document (e.g. newsletter) to share SHF successes with fellow funders and affiliate groups up to three times a year.

Implementation Timeline: The ad-hoc Social Media Committee and Staff will determine when this is most appropriate.

B) Approach other donors/foundations re collaboration and to gauge interest in forming an affinity group (e.g. intranet website) to share information--grants and results--internally. Sharing results should point to new avenues for future grants, and help avoid multiple funding of similar studies.

As explained in excerpts from http://en.wikipedia.org/wiki/Intranets,

“An intranet is a computer network that uses Internet Protocol technology to share information … within an organization. An intranet may host multiple private websites and constitute an important component and focal point of internal communication. In many organizations, intranets are protected from unauthorized external access by means of a network gateway and firewall. Increasingly, intranets are being used to deliver tools, e.g. collaboration (to facilitate working in groups and teleconferencing). Discuss(ion) of key issues in an intranet forum application could lead to new ideas.”
Implementation Timeline: The ad-hoc Social Media Committee and Staff will determine when this is most appropriate. A reasonable timeline to determine the interest of the affinity group in an intranet would be within the next 12 months. A reasonable estimate of the intranet setup cost would be useful information for the affinity group if setup costs will be shared.

**Approach #5: Convene Cross-Sector Audiences**

A) Form Board committee or hire consultant(s) who can help us work with grantees to identify key influencers in healthcare for people with developmental disabilities (e.g. AMA, insurance companies, legislators) and establish relationships with them.

   Implementation Timeline: Determine whether to form Board committee or hire consultants in next three months. Identify key influencers within next six months. Initial contact with key influencers in next 12 months.

B) Convene cross-sector group via internet or intranet to share resources and information with key influencers.

   Implementation Timeline: The ad-hoc Social Media Committee and Staff will determine when this is most appropriate.

C) Post research and results on our website and/or on intranet.

   Implementation Timeline: The ad-hoc Social Media Committee and Staff will determine when this is most appropriate.

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