

ACH Entrepreneur Challenge

Thank you for your interest in ACH's Entrepreneur Challenge.

If you have any questions or if you have any supporting documents you would like to submit with your application via email, please reach out to Samantha Noble, Senior Director of Programs, Engagement and Membership, via email at snoble@advocatesforcommunityhealth.org.

* Indicates required question

CONTACT INFORMATION

This information and person will be the primary point of contact between your health center and ACH's staff.

1. Community Health Center *

2. Full Name *

3. Job Title *

4. Email Address *

5. Phone Number: *

6. If you would like to add a secondary point of contact, please provide that information here.

Proposed Project

The following questions allows ACH to understand your project's goals, activities, and measurable impact.

7. **Project Title:** *

8. **Project Summary:** *

Provide an overview of your project and explain why you feel it should be considered for this award. Be sure to touch on the most relevant details requested in the other fields in this application.

9. **What problem(s) or issue(s) does your proposed project address?** *

Include details about why the problem you are solving needs to be addressed. (Statement of the problem.)

10. **Outline the key activities within your project, and how they'll aim to address the stated issues.** *

11.

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How is your project innovative?

Discuss how your proposed project will (1) address an important problem that health centers currently face, (2) influence the practices and services that drive the work of community health centers, and (3) modify and change current practices. Include an explanation of whether this concept is new and how it is innovative.

12.

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How is your project impactful?

Think to your patient population / community and your providers and staff; what are the short-term and long-term impacts of your project? In what ways is your project sustainable or able to continue after the project performance period ends?

13.

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How will you measure project success and improved outcomes?

Include specific metrics for tracking and measuring success, and provided estimated numbers of patients / providers / other individuals impacted through this project.

14.

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What is the extent of the support from your health center?

Describe the project team's access to various resources to ensure the successful completion of the proposed work. Also discuss any unique features of the health center's resources and collaborative partnerships.

15.

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Identify the key team members involved in this project.

Include details on the team's roles and any strategic partnerships you wish to pursue.

Optional: Supporting Documents

Examples of relevant supporting documents include:

- *Project Work Plan and Staffing Chart*
- *Timeline*
- *Budget with anticipated expenses*
- *Letters of Support*
- *And other documentation indicating your project's likelihood of successful implementation.*

You can submit additional documentation via email to Samantha Noble, Senior Director of Programs, Engagement, and Membership at snoble@advocatesforcommunityhealth.org.