

2024

Insights and Key Lessons

Strategic Framework

2025
↓
2030

We aim to equip communities, health collaboratives, congregations, and health care system partners with resources to take action so all Texans have the opportunity to live their healthiest lives.

Action Areas

EHF believes that whole-person well-being requires addressing non-medical drivers of health and must include integration between three action areas: accessible health services, healthy communities, and health-promoting policies at all levels.



igniting
change

Working in these [Action Areas](#), we believe we can make the greatest strides in reducing preventable health differences by addressing [three priorities for change](#):



Food and Nutrition
Security



Maternal Health



Diabetes Prevention

Our Commitment to Listening

In 2024, Episcopal Health Foundation embraced a year of learning to launch its new strategic framework with intention, humility, and a deep commitment to listening. Rather than rushing to fund new initiatives, EHF took time to engage directly with communities, congregations, health providers, and policy leaders to better understand the real challenges and opportunities within its three new Priorities for Change: maternal health, food and nutrition security, and diabetes prevention. This deliberate pause allowed EHF to invest in grants for learning, build relationships, and test new ideas that reflect the lived experiences of Texans most affected by health inequities.

This evaluation report highlights how and where we invested our financial and non-financial resources, it documents our ongoing efforts to promote “health, not just health care,” and identifies critical insights that will guide our strategic approach to address complex health needs and prepare for deeper, more strategic action ahead.



Dr. Ann Barnes
President & CEO, EHF

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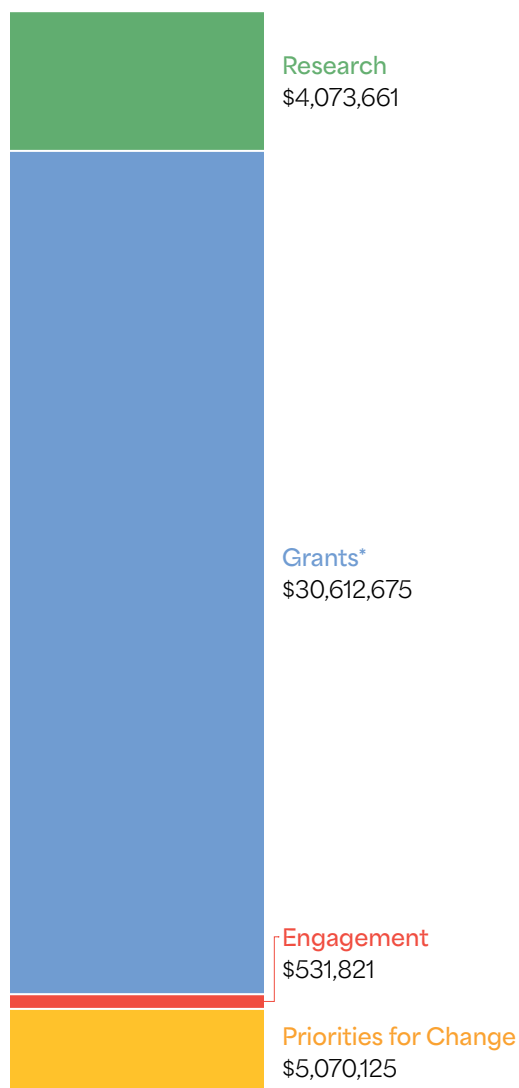
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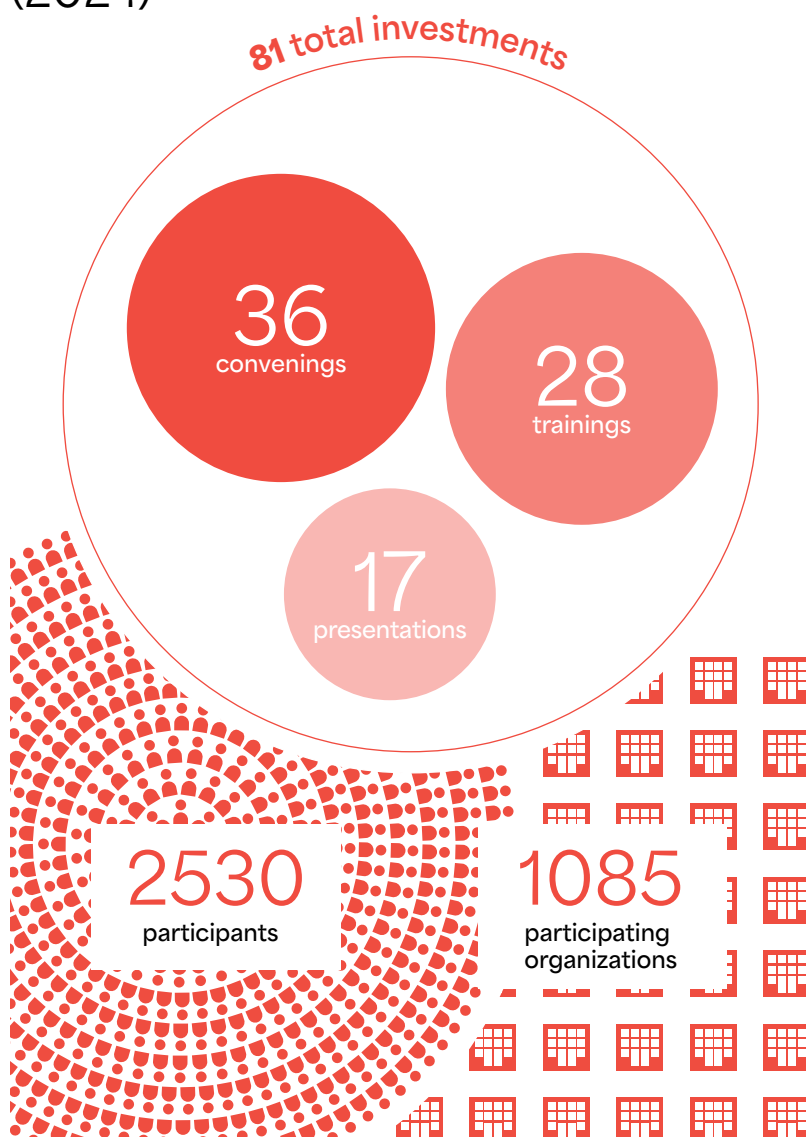
Sustained Engagement with Partners

This section summarizes the breadth of EHF's financial and non-financial investments for 2024 and aggregates data across all divisions. Foundation investments include grants, research projects, and community and congregational engagement programs.

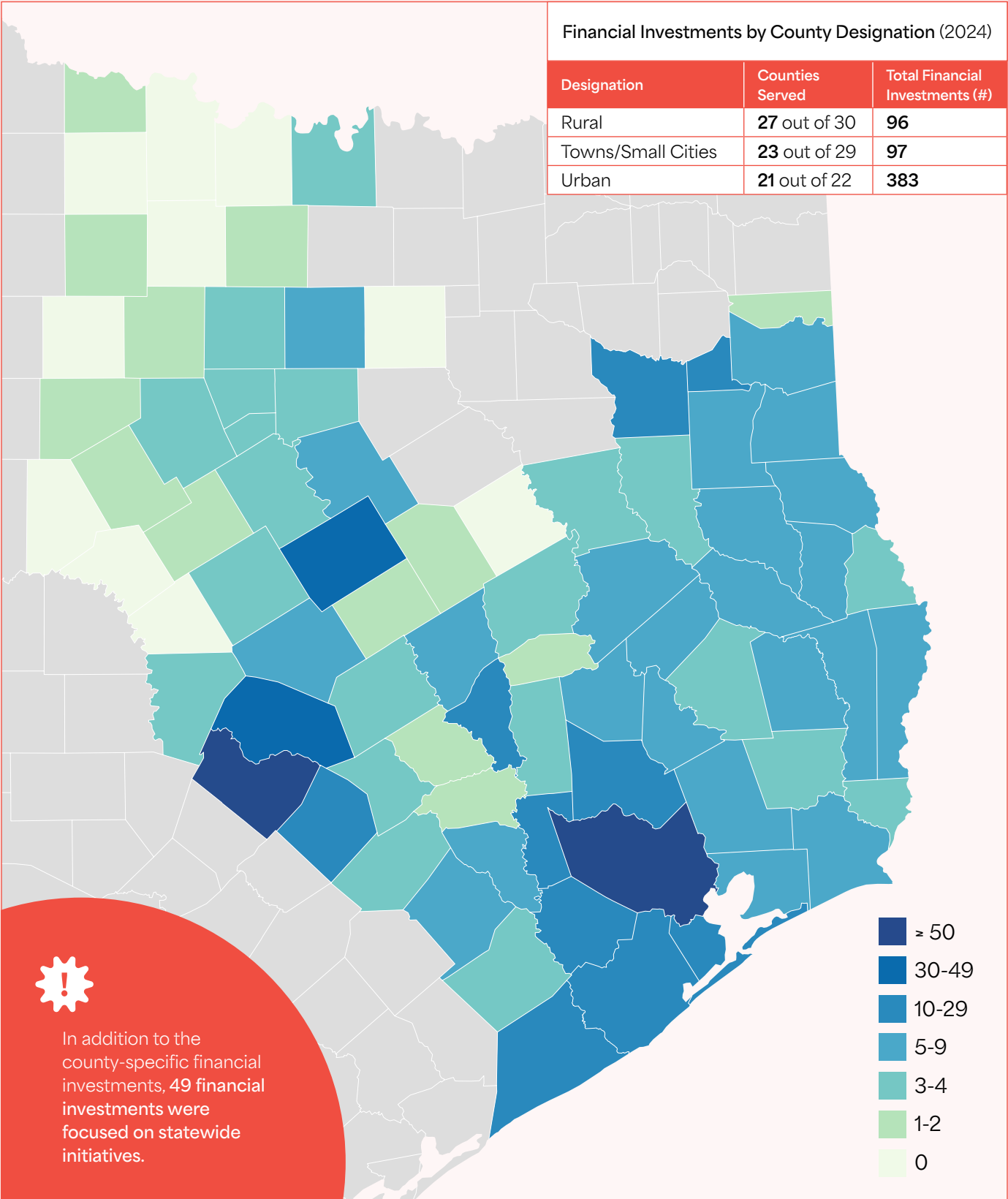
Financial Investments by Division (2024)



Non-Financial Investments by Type (2024)



Geographic Reach of Financial Investments (2024)



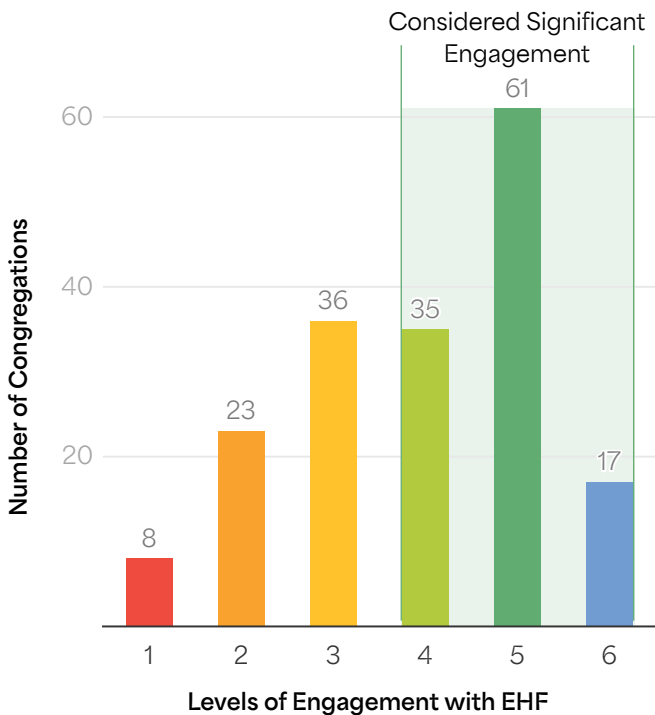
Congregational Engagement

Levels of Engagement (2024)

In 2024, almost two-thirds of all congregations in the Episcopal Diocese of Texas were engaged in exploration, engagement, and advanced engagement efforts through EHF. This represents a 37% increase in the share of congregations significantly engaged with EHF since 2018, the start of the previous Strategic Plan. Of the 23 new counties included in the Diocese, close to three-quarters of the congregations engaged with EHF in 2024.

Levels of Engagement

- ① Information Dissemination
- ② Information Exchange
- ③ Education
- ④ Exploration
- ⑤ Engagement
- ⑥ Advanced Engagement



Congregational Engagement

Community Engagement Capacity Ratings (2024)

While working with EHF, the number of congregations that have developed or significantly transformed their community ministries has increased sevenfold from the start of the previous Strategic Plan in 2018.

Community Engagement Capacity Ratings

Developmental

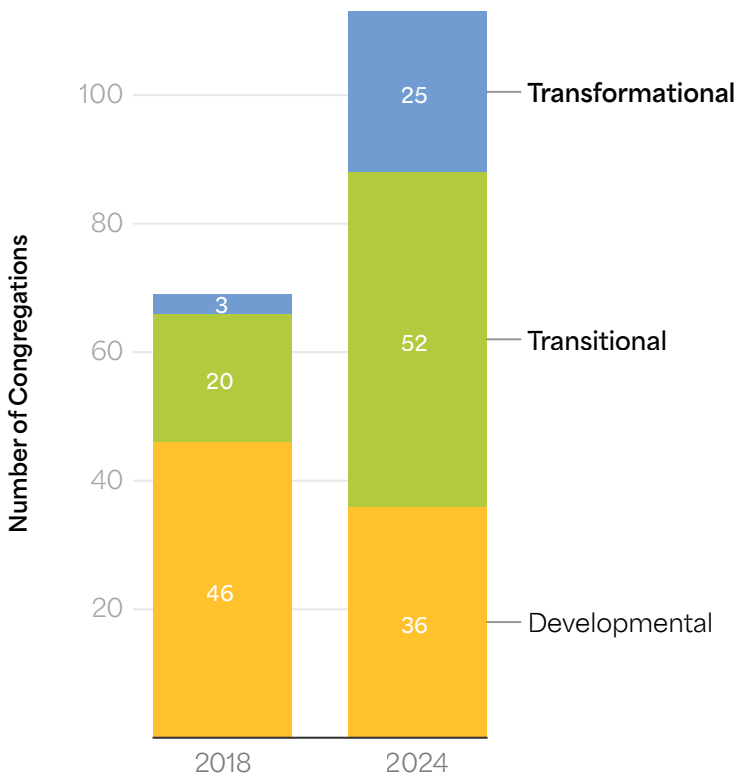
Congregations emphasize dialogue, education, and awareness building in their engagement work.

Transitional

Congregations focus on strengthening their capacity, consulting or involving community partners, and developing partnerships to address needs.

Transformational

Congregations empower and collaborate with community partners to establish a shared vision and leadership across multiple levels of an issue.



Findings from Initiatives, Models, and Collaboratives

This section highlights EHF's continued support of the ongoing work of several initiatives, models, and collaboratives. Findings from this work reveal that while progress continues to be made, particularly around strengthening the capacity of organizations to collaborate and build relationships - implementing innovative projects takes time.

Texas Accountable Communities for Health Initiative (TACHI)

Created by EHF, with support from St. David's Foundation, TACHI is a multi-year initiative to develop financially sustainable, multi-sector community health collaboratives in six Texas communities focused on addressing the non-medical drivers of health (NMDOH). TACHI supports sites as they center multi-sector partnerships by providing flexible grant funding, site specific technical assistance, and evaluation of the Accountable Communities for Health model within the context of Texas. In its fourth year, TACHI continues to demonstrate progress across the six sites.

◆ Milestones

The initiative has achieved remarkable growth in cross-sector collaboration, including:

- Commitments from **34 organizations** representing **14 sectors**
- Nearly **tripled community engagement** from 14% to 40%
- Fostered **sustainable partner relationships**
- **Increased data sharing across partners by 52%**
- Enhanced **collaborative capacity** to address health and social needs through **strengthened systems and institutional commitments**.

Access the *2024 TACHI Year-End Report* via episcopalhealth.org [here](#) 



Key Lessons

Key lessons that are informing EHF and funding partners as we consider multiple, viable pathways for achieving effective, community-driven multi-sector health collaboratives:

- * Building collaborative capacity takes time
- * Health care engagement requires a strategic approach
- * Community engagement is both essential and complex
- * Ongoing and evolving technical assistance and support are necessary

Collaborating for Healthy Communities Initiative (CHCI)

As a result of their participation in EHF's CHCI capacity-building program, collaboratives from the 2023-24 CHCI cohort were equipped with the process and practices to supercharge their shared purpose (mission and vision) and translate their ideas into strategic action. The coalitions embraced the notion of shared leadership in their communities and expanded their collaborative tables in order to tackle systemic issues with a multi-sector approach (e.g., food insecurity, diabetes prevention, foster care). Each coalition completed the program having articulated their unique path toward growth and sustainability through listening to families and individuals most immediately impacted by the issue.

2023-24 CHCI COHORT

5 collaboratives

\$610,760

secured from Texas health funders

758

people engaged in Southwest Houston, Galveston, Waco, and Third Ward (Houston) to identify community needs



Clinics Pathway Approach (CPA)

EHF initiated CPA in 2021 to offer community-based clinics the opportunity to build their fundamental capacities for population health work and a value-based payment system.

CPA supports **11 clinics** to implement and maintain robust business models that sustain operations beyond the current fee-for-service payment system to a value-based payment model.

→ Progress in 2024

- One-third of participating CPA clinics have strengthened their care coordination services, which are critical to **improving outcomes** and **avoiding unnecessary costs**.
- As of Fall 2024, two clinics have enhanced their patients' NMDOH tracking, while two others have advanced their referral systems – moving beyond tracking to **facilitating access and “warm handoffs” that ensure a smooth transition** to community-based organizations.
- All clinics report **some progress towards value-based care** (VBC), ranging from establishing a guiding coalition, to a “VBC Boot Camp” for providers, to joining the Clinically Integrated Network (CIN), to signing several additional value-based contracts.

Pathways Community Hub (PCH)

PCH is a pay-for-performance model that utilizes a network of community-based organizations who employ community health workers (CHWs) to provide care coordination for individuals to needed health and social services. The goal of using a PCH model is to address gaps in care and NMDOH through a whole-person approach.

EHF's evaluation of two PCH models provided valuable insights into the real-world impact and effectiveness of this patient care approach:

Evaluation of a Pathways Community Hub in Texas for Pregnant Mothers and their Infants [↗](#)

Early Evaluation of the PCH Model in Texas [↗](#)

Mixed Results with Promising Signals

- +** **Strongest positive outcome** Women in the PCH Model attended postpartum appointments at or above the national average.
- \$** **Cost considerations** Preliminary calculations in one study implied potential savings related to the infant's medical delivery costs.
- **Birth outcomes** No immediate improvements in birth outcomes detected in early evaluation.
- ×** **Implementation barriers** Transitions in and out of health insurance coverage, especially after birth, can negatively influence ongoing care management.

Future Research is Needed

- Evaluation reflects early model implementation since the three PCH sites initiated operations in mid-2023.
- Larger sample sizes and extended evaluation periods needed to capture full impact.

Bottom Line

While initial costs were higher and birth outcomes unchanged, the PCH Model's success in improving postpartum care engagement suggests potential for better long-term maternal health outcomes, warranting continued implementation and rigorous evaluation.



Texas Managed Care Organizations (MCO) Non-Medical Drivers of Health (NMDOH) Learning Collaborative – Year Five

With support from EHF and Michael and Susan Dell Foundation, the Texas Association of Community Health Plans, Texas Association of Health Plans, and Texas Health and Human Services Commission (HHSC) convened the MCO NMDOH Learning Collaborative. The collaborative was designed to help Texas Medicaid health insurance plans develop and implement strategies to address the non-medical, root causes of poor health for patients across the state. Since 2019, the work of the Texas MCO NMDOH Learning Collaborative has resulted in legislative and policy changes that promote health for Texans.

Input from Medicaid Members

In 2024, the Collaborative brought together funders and MCOs to hear directly from current or recently pregnant Medicaid members about their experiences and support needs. MCOs learned that web-based communication didn't always reach current and potential enrollees. Instead, text messaging and social media are more effective and efficient ways to share information about enrollment and accessing benefits.

The information resulted in updated approaches to how Medicaid MCOs conduct outreach, communication and engagement.

Engaging Medicaid Members: Assessing Health Literacy and Channels for Member Engagement [🔗](#)

Engaging Medicaid Members: Identifying the Non-Medical Needs of Pregnant Members [🔗](#)

CHW and Doula Engagement

The Learning Collaborative worked closely with HHSC on the implementation of HB 1575 to strategically connect MCOs and HHSC with CHW and doula networks across Texas.

Innovation around Alternative Payment Models (APMs)

To support providers in implementing APMs, the Learning Collaborative serves as a platform for HHSC, MCOs, and providers to discuss opportunities to leverage APMs to pilot or implement models of care that address not only medical needs but the non-medical needs of Medicaid Members.

ARPA-H Health Care Rewards to Achieve Improved Outcomes (HEROES)

The learning collaborative served as a platform to educate HHSC, MCOs, and nonprofits, and to facilitate the development of relationships between payors and organizations interested in the ARPA-H HEROES outcome-based payment approach.

Through the learning collaborative, HHSC and MCOs were able to learn more about ARPA-H and support Dallas-Fort Worth's successful bid to become a federally-selected ARPA-H site, one of just six in the country.



Key Lesson

Listening to the community is important to ensure interventions that effect them are appropriate and efficient.

HIGHLIGHTS

Strategic Framework 2025-2030 Activities

In 2024, EHF released our initial Strategic Framework reaffirming our plan to double down on efforts to go beyond the doctor's office to address non-medical drivers of health. With this new Framework, EHF will address whole-person well-being by working through three integrated Action Areas: Health and Health Care Services, Healthy Communities, and Health Policies. The new Strategic Framework introduced three critical health issues as metrics EHF will use to begin to measure impact—Priorities for Change: Food and Nutrition Security, Maternal Health, and Diabetes Prevention.

Capacity Building for Priorities for Change Grantees

In Spring of 2024, EHF funded a 12-month capacity building program for emerging and community-led nonprofits advancing health equity in work related to the three Priorities for Change. At the end of 2024, the top three selected areas for capacity building were:

- Board Management
- Fundraising
- Strategic Planning



Early Success

Through participation in the cohort, grantee Fit Houston learned about an opportunity and was awarded free office space for two years in a downtown co-working site. The new office space translates to:

- * **Cost savings** to free up capital for other investments
- * **Reduced financial risk**, creating a foundation for sustainability
- * **New community relationships** while also being closer to community leaders and decision-makers

Grantee Spotlight: Nurtured TX

Nurtured TX is a volunteer-driven nonprofit organization dedicated to nurturing perinatal mental health support before, during, and after pregnancy. As part of a larger case study, Nurtured TX's Executive Director, Tori Tanner, reported being able to access the tools, support, and peer network she needed to confidently lead Nurtured TX into its next chapter. **Nurtured TX now has a concrete financial roadmap for the future.**

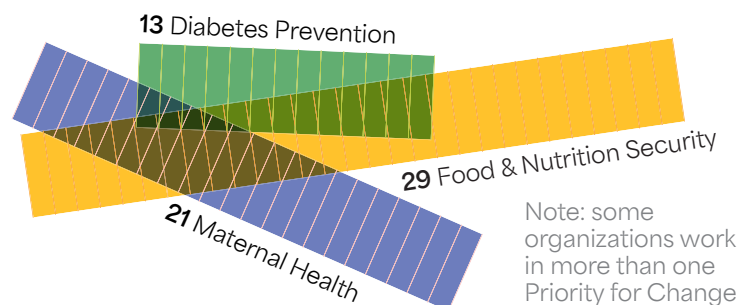
“[Without this program,] there would have been lots of time spent outside of our mission and program delivery, taking away our limited resources.”

TORI TANNER

Executive Director, Nurtured TX

The Cohort

41 nonprofits working in the Priorities for Change joined the cohort:



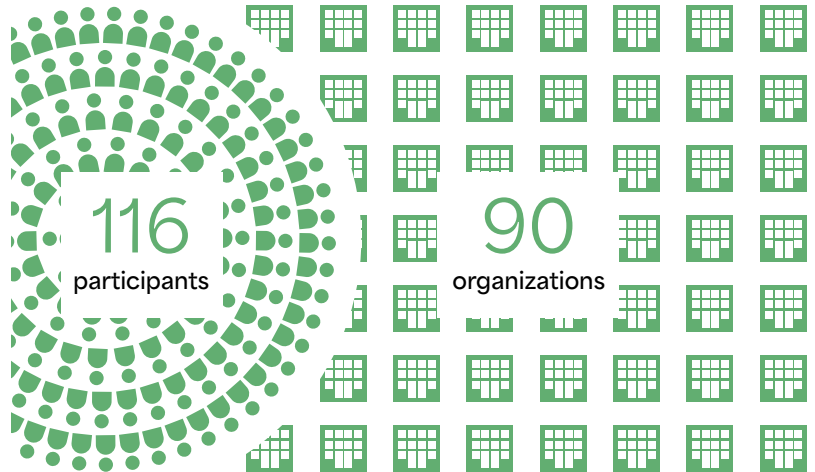
ignition festival

In June 2024, EHF hosted the virtual Ignition Festival to gather community feedback on the Priorities for Change. The event brought together community members and experts in Food and Nutrition Security, Maternal Health, and Diabetes Prevention to discuss how EHF's proposed strategies would translate to real-world implementation in their communities.



Key Lessons

- * Listening to those with lived experience must be prioritized.
- * Dignity and cultural competency are important.
- * Improving health for all Texans requires responsive attention to NMDOH.



Themes from Participant Feedback



Food & Nutrition Security

- Federal food and nutrition programs are seen as important tools in addressing food and nutrition security; however, many times state agencies under-perform in the administration of these programs which can lead to challenges in collaborative efforts.
- Respondents valued culinary demonstrations and nutrition support in combination with tangible resources like food or funds to purchase food.
- Responses to food and nutrition security should be hyper-local and support food systems, including local growers.



Maternal Health

- Respondents express support for relationship-based, comprehensive perinatal care, ideally occurring within the individual's local community.
- In addition to relationship-based care, pregnant Texans need supportive communities that prioritize public benefit programs, like SNAP and WIC.



Diabetes Prevention

- Address lifestyle and behavior interventions through non-medical drivers of health.
- Position sustainability and continuous support as a top priority for prediabetes and lifestyle interventions.
- When applicable, align Diabetes Prevention efforts with Food & Nutrition Security and Maternal Health strategies.

ignition festival on Lived Experience

Quotes from festival attendees, community members, and subject matter experts reflect the key lessons that apply across all three of EHF's Priorities for Change: Diabetes Prevention, Food and Nutrition Security, and Maternal Health. Effective implementation requires bringing culturally competent services and programs directly to communities and centering lived experiences.

“... implementation of the strategy will need to **look different for each community.**”

FOOD AND NUTRITION SECURITY

“By offering **culturally tailored care**, it enhances patient trust and engagement, ensuring sustained health benefits for both mothers and their children through continuous postpartum support.”

MATERNAL HEALTH

“Bringing the program to **where the people are** is a strategy to make it more likely to succeed.”

DIABETES PREVENTION





“...it is important to know your community, its particular needs, and **identify influencers in that community** who can help with implementation strategies and spread awareness in the community.”

FOOD AND NUTRITION SECURITY

“I just want to convey the importance of recognizing **culturally relevant solutions**. There is a plethora of qualitative stories our team and network can share for supporting national work 10+ years ago, and it simply wasn't effective in our communities of focus.”

MATERNAL HEALTH

“Again, **lived experiences are critical**. We need to work on the programming for diabetes prevention. Lifestyle modification is difficult and ongoing so if we really want to make a change we must put the community in the center.”

DIABETES PREVENTION



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