Funders want to ensure their investments make a sustained impact. A better understanding of grantee factors associated with long-term sustainability may strengthen future funding decisions.

The Health Resources and Services Administration’s (HRSA’s) Federal Office of Rural Health Policy (FORHP) funds community health initiatives in a noncategorical manner, meaning that local community grantees decide upon their greatest need and design a project to address that need. The challenge for the agency is that assessing impact across grantees is more difficult since all grantees’ programs inherently differ.

**Assessing Grantee Sustainability**

In 2018, FORHP commissioned the Georgia Health Policy Center (GHPC) to conduct a study of a subset of its grantees to deepen understanding of the drivers of long-term sustainability and the impact of grant-funded programs. Researchers evaluated grantee factors such as program design, organizational and collaborative capacity, and local context for Rural Health Care Services Outreach Program (Outreach) grantees that received funding in 2009, 2012, and 2015.

**Findings: Sustainability Is in the DNA**

92% of funded services implemented in the 2009, 2012, and 2015 grant periods were sustained for some length of time beyond the initial grant.

Are there certain factors or attributes that contribute to grant-funded initiatives that sustain versus those that do not?

Surveys of 88 organizations implementing 194 services showed that sustainability is not clearly or consistently tied to programmatic factors, including the:

- Focus of the program (oral health, mental health, chronic disease management, etc.)
- Program approach (care coordination, care navigation, telehealth)
- Type of organization (hospital, Federally Qualified Health Center, nonprofit)
- Financial mechanism used to sustain the program (reimbursement, grants, etc.)

The “DNA” of sustainability is less about fixed traits and more about adaptive behaviors.

*This research was funded through a contract with FORHP. Any views, findings, conclusions, or recommendations expressed do not necessarily represent those of the FORHP.*
Programs most likely to sustain shared certain behavioral and strategic characteristics.

**Leadership**

Leadership as it relates to sustainability of grant-funded programs refers to the way the leader or leadership (a CEO, a grant program coordinator, board, etc.) is oriented to the grant. Sustainability-associated leadership includes:

- Someone who has a very clear and strategic purpose for the grant.
- Someone who will make commitments to provide resources (e.g., human, funding, or policy) to sustain the effort.

**Collaboration**

As a positive driver for sustainability, collaboration includes a sense of shared purpose among partners and clear implementation roles for each organization:

- Grantees understand the importance of having cross-sector partners and recognize that this work cannot be done well and sustained by one organization alone.
- All partners are clear on the purpose of the program and its connection to their own organizational missions, and share responsibility and risk during and after the grant period.

**Alignment Between Need and Demand**

Grant-funded programs sustain because local need is known and the demand for the service is there. Having a program with a “local” orientation and close to the community that it serves is a key for building a program that is right-sized and well-received within the community.

**Using Data to Demonstrate Impact**

Using data to tell the story of program impact drives sustainability, as this evidence helps to garner resources to support the program post-grant.

**Attuned to Policy and Context**

Some grantees are especially gifted at “reading the policy context tea leaves” and focus their grant programs on positioning their entity to succeed in the current policy environment.

**Implications**

The unique context within which rural health entities operate and the challenges related to workforce, geography, and access mean that noncategorical funding permits grantees to design to their local context, community need, and existing assets. A focus on sustainability from the start of the grant period can be supported by training and technical assistance and program deliverables that encourage strong data collection and engagement of partners in implementation and sustainability. These findings around adaptive characteristics (behavioral and strategic characteristics) associated with post-grant sustainability may be helpful for funder organizations that seek to invest in rural and frontier communities.

For those grantees reporting on the level of achieved sustainability:

- 38% of services and activities were sustained as implemented
- 25% of services and activities were scaled up
- 36% of services and activities were sustained, but scaled back

“With GHPC, we hit upon this idea of sustainability. And now that’s the core performance metric for this program,” says Tom Morris, associate administrator for rural health policy at HRSA. “When you can tell somebody that you’ve invested $25 million or $30 million into community health projects and that 80% of them are sustainable beyond federal funding, that is a pretty powerful metric.”