



# Request for Qualifications

Submission Deadline: January 29, 2024

Developing an Evaluation Approach for  
EHF's 2024-2030 Strategic Plan

# Background

## About the Foundation

[Episcopal Health Foundation \(EHF\)](#) believes all Texans deserve to live a healthy life – especially those with the least resources and those who face the most obstacles to health. We're promoting equity by improving health, not just health care in Texas.

Health is much more than seeing a doctor. Access to affordable medical care is vitally important, but it's only 20% of what contributes to a person's overall health. The remaining 80% is determined by social and economic status, health behaviors, community safety, physical environment, and much more.

EHF has changed the conversation to reshape the debate around health care to focus on addressing the non-medical drivers of health: factors and conditions outside the health care system that significantly influence a person's overall health and well-being.

For Texas to fully realize its great potential, all Texans must have the ability to thrive. Equity, specifically health equity, is an essential part of that future. From the beginning, EHF has had a long-term commitment to invest in and promote equity in organizations, communities, and initiatives to accelerate a bold vision that all Texans have a just opportunity to live their healthiest lives.

By providing millions of dollars in [grants](#), working with [community partners](#) and [congregations](#), and providing important [research](#), EHF promotes equity by supporting solutions that address the underlying causes of poor health in Texas.

### Where we started

EHF is based in Houston and was founded in 2013 by the [Episcopal Diocese of Texas](#) upon the transfer of St. Luke's Episcopal Health System. [Bishop Andy Doyle](#) led the effort to use the more than \$1 billion in proceeds to start a foundation that would reshape the way the Episcopal Church engages the community and change the way we think about health.

EHF chose to focus on improving community health, rather than just health care, because the opportunity for good health starts long before the need to see a doctor. Health systems need scalable solutions to address non-medical drivers of health like access to healthy foods, having safe places to exercise, affordable health insurance coverage, and much more.

EHF was created as a community-based philanthropy to spark transformative change within the diocese's [80-county service area](#) that now serves more than 15 million Texans.

### What we've done

With a vision to achieve healthy communities for all by improving health, not just health care, EHF's strategic work has changed the conversation and the way we think about health in Texas:

Government officials, state agencies, health insurance plans, health care providers, and community members recognize the importance of addressing non-medical drivers of health and are taking action to support non-medical, health-related needs.

Community health clinics, health resource centers, and behavioral health providers have increased their services and their reach to low-income and underserved communities.

Congregations and community collaboratives have increased capacity to engage with other partners and those they want to serve to envision and create healthier communities and address upstream barriers to health equity.

Clinics and community-based organizations have strengthened their capacity to provide skills to parents and caregivers to promote healthy early relationships and brain development during a child's first three years.

### Where we're going

EHF has changed the conversation about health, and now we are ready to accelerate this positive change by tackling the unequal and unacceptable health realities faced by Texans with lower incomes, populations of color, and under-resourced communities across the state.

EHF's new [\*\*Strategic Framework for 2024 — 2030\*\*](#) demonstrates our belief that whole-person well-being requires addressing non-medical drivers of health and must include integration between three Action Areas: accessible health and health care services, healthy communities, and health-promoting policies at all levels.

In addition, we believe certain health conditions and events serve as warning signs that systems and circumstances need to be improved in Texas. Working in EHF's Action Areas, we're focusing on three **Priorities for Change: food and nutrition security, maternal health, and diabetes prevention**. We believe addressing these priorities is key to real change and can start a ripple effect of good health in Texas.

### **EHF's Continued Commitment to Health Equity**

For Texas to fully realize its great potential, all Texans must have the ability to thrive. Equity, specifically health equity, is an essential part of that future.

Using the Robert Wood Johnson Foundation's definition, Health Equity means that "everyone has a fair and just opportunity to be as healthy as possible. This requires 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." "For the purposes of measurement, health equity means reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups."

Pursuit of fair and just opportunities for all Texans drives us to address health equity in a more effective way. While EHF has successfully worked with partners to improve the health opportunities for those who continue to be marginalized by existing systems, there is still much work to be done.

As EHF moves into its new strategic season, it reaffirms its long-term commitment to invest in and promote equity in organizations, communities, and initiatives to accelerate a bold vision that all Texans have a just opportunity to live their healthiest lives.

## Project Overview

### Background

EHF recently developed and released our 2024-2030 [strategic framework](#). The framework outlines the priorities and action areas intended to ignite change so that Texans will have an opportunity to live healthy lives. We are now in the process of developing the corresponding goals and objectives to operationalize the strategic framework.

In addition to the three priority areas of diabetes prevention, food and nutrition security, and maternal health, EHF will continue to build on the foundational areas where progress has already been made. Comprehensive health services including physical, mental, behavioral health care, and non-medical drivers of health will also be addressed through strategies in EHF's [action areas](#) of health and health care services, healthy communities, and health policies.

An evaluation approach is intentionally being incorporated with the development of strategic plan goals and objectives to ensure that EHF's strategies are effective and that there is alignment between the work and intended outcomes. EHF believes that measures of our impact will be the reduction of health disparities and improvements in key health outcomes, especially for Texans who have a lower income and are marginalized. Improvements in population health require a long-term view. We are committed to developing and monitoring short-term and mid-term measures that signal long-term health improvements.

### Goal

EHF is seeking an evaluation consultant to partner with staff in developing an evaluation approach for our six-year strategic plan, with specific assistance in developing the indicators within EHF's action areas (access to health/health care, healthy communities, and health policies) across our three priorities for change: food and nutrition security, maternal health, and diabetes prevention.

EHF is in the early phase of outlining the goals and objectives that will operationalize the new strategic plan. Concurrently, EHF's evaluation team is working collaboratively with the three internal Priority Teams to identify and frame an evaluation approach with related



indicators, metrics, and logic models/theories of change that will be used to measure change, assess impact, and inform learning around the strategic plan. Identification of preliminary indicators and metrics around the three priority areas is actively underway.

The evaluation approach will serve as an overarching framework founded on a logic model or theory of change that includes short, mid- and long-term outcomes with related indicators and metrics. The evaluation plan should be a guide to:

1. Assess the change and impact occurring because of activities outlined in the strategic plan.
2. Identify how, and if activities are leading to progress toward the goals and objectives outlined in the strategic plan.
3. Support learning processes that can be utilized for ongoing strategy and evaluation refinement.

The consultant timeline for developing the evaluation plan will take place over nine months (February- October 2024) with the greatest time investment occurring in the first five months.

### Scope of Work

In partnership with EHF's evaluation staff, the consultant will engage in the proposed activities, which include, but are not limited to:

#### 1) Preliminary Research (February- March 2024)

- Collaborate with EHF staff and the three priority teams developing strategic plan goals, and objectives
- Review preliminary set of indicators and metrics assessed and under review within the three action areas (access to health and health care services, healthy communities, and health policies) across our three priority areas - food and nutrition security, maternal health, and diabetes prevention; how EHF is promoting equity in our investments (grants, research, engagement)
- Utilize secondary data sources to identify valid, equitable, evidence-based indicators and metrics
- Engage primary data sources to identify relevant and feasible indicators and metrics; this engagement may include key informant interviews, focus groups with subject matter experts, EHF partners (grantees, community and congregational members), persons with lived experience, consultants, peer foundations and others
- Communicate with EHF evaluation staff and consultants conducting the evaluation of EHF's 2018-2023 Strategic Plan to ascertain relevant lessons to inform 2024-2030 Strategic Plan.
- Intentional vetting of indicators and metrics to select only those measurements and methods that advance equity;

**DELIVERABLES:** Compendium of indicators and metrics that can be used to measure change, impact and progress within EHF's three action areas, across the three priority areas for change. Draft workplan/timeline for accomplishing related evaluation tasks.

## 2) **Development of an Evaluation Plan (March – May 2024)**

- Continued collaboration with EHF staff and the three priority teams developing strategic plan goals and objectives within the three action areas
- Propose first draft of indicators/metrics and solicit feedback from community partners using focus groups or similar method
- Conduct ongoing refinement of draft indicators and metrics
- Begin connecting indicators and metrics with short, mid- and long-term outcomes through the development of a logic model or theory of change framework
- Solicit ongoing input from subject matter experts, etc.; continue to consult secondary resources

**DELIVERABLES:** Draft evaluation plan based on logic model or theory of change, that includes short, mid- and long-term outcomes, indicators and metrics that measure change, impact and progress of the proposed goals and objectives outlined in the strategic plan. Final metrics/indicators ready for entry into Fluxx database, EHF's grants management system on June 1, 2024.

## 3) **Finalize Evaluation Plan Components (June – August 2024)**

- Incorporate final metrics/indicators for use in Fluxx, EHF's relational database (June 1)
- Finalize logic model(s) and or theories of change connecting EHF's strategic plan activities and objectives to short, mid- and long-term outcomes
- Work with EHF communications team to develop dashboard to monitor progress
- Introduce and socialize evaluation plan, and related metrics, indicators, theories and logic models with EHF staff, priority teams and external partners

**DELIVERABLES:** Final EHF evaluation plan including logic model(s)/theories of change connecting EHF's strategic plan activities and objectives to short, mid- and long-term outcomes; dashboard to monitor progress, and public facing documents to share evaluation approach with external partners

## 4) **Support evaluation staff in strategic learning from evaluation findings (August- October 2024)**

- Collaboration with EHF evaluation staff
- Draft monitoring plan to use evaluation logic models/theories of change as living documents modifiable over time
- Outline processes for identifying real time and retrospective learnings and incorporating feedback into evaluation and strategy development

**DELIVERABLES:** A plan to monitor progress and support strategic learning with related evaluation shifts in response to unexpected outcomes, dynamic environments and unpredicted interactions or effects

## CONSULTANT RESPONSIBILITIES AND DELIVERABLES

Minimum responsibilities and activities required of the consultant include:

- Kick-off meeting (led by consultant)
- Development of project workplan and timeline
- Twice monthly calls between foundation and consulting firm
- Ongoing collaboration with EHF evaluation staff and priority teams
- Production of deliverables outlined in evaluation scope:
  1. Compendium of indicators and metrics that can be used to measure change, impact and progress within EHF's three action areas, across the three priority areas of food and nutrition security, maternal health and diabetes prevention. Draft workplan/timeline for accomplishing related evaluation tasks. (March 2024)
  2. Draft evaluation plan based on logic model or theory of change, that includes short, mid- and long-term outcomes, indicators and metrics that measure change, impact and progress of the proposed activities, goals and objectives outlined in the six-year strategic plan (May 2024)
  3. Identify final metrics/indicators for use in EHF's Fluxx database on June 1, 2024
  4. Final EHF evaluation plan including logic model(s)/theories of change connecting EHF's strategic plan activities and objectives to short, mid- and long-term outcomes; public facing documents to share evaluation approach with external partners (August 2024)
  5. Dashboard to monitor progress (August 2024)
  6. Learning plan that supports strategic learning and incorporation of learnings into strategic and evaluation shifts (October 2024)

## Application Requirements

### Why RFQ, Not RFP

This request is specifically formatted as a "Request for Qualifications" (RFQ) as opposed to a "Request for Proposal" (RFP) to minimize the barriers for interested individuals or firms.

RFPs frequently require that applicants provide detailed information on how they plan to accomplish the desired objective. A response to an RFP might include a constructed methodology, related processes, timelines, workflows, and a budget. A significant amount of uncompensated staff time and effort goes into developing such a proposal that may not end up being selected. RFPs offer an advantage to larger firms with experienced staff.<sup>1</sup>

An RFQ, instead, requires that interested applicants give thoughtful consideration to the outlined request and offer information related to their individual or firm's skills, knowledge, and related experience that are most applicable to meeting the desired objective.

### Application Materials

1. Form:
  - a. Name or team name
  - b. Contact information
2. Cover letter that includes the following:
  - a. Summary of relevant experience. See the Application Evaluation section below for more details
  - b. How you/your team is uniquely positioned to do this project well
  - c. Availability and capacity to complete project within timeline
  - d. Any possible conflicts of interest
3. Resume or CV for each proposed team member
4. Up to two relevant work samples

### Application Evaluation

Prospective candidates will be evaluated based on their applications and interview responses on the following criteria:

- Content knowledge of priority areas: food and nutrition security, maternal health, and diabetes prevention
- Depth of experience with indicator and metric development
- Depth of experience with developing an evaluation approach for a strategic plan
- Depth of experience with developing evaluation learning agendas
- Depth of experience incorporating equity in evaluation
- Quality of work samples
- Understanding of project

Applications will be evaluated based on the criteria outlined above. Top candidates will be invited to participate in an interview via Zoom. Interviews will take place February 5-9, 2024. The selected consultant will be notified on Monday, February 12, 2024.

### Timeline and Budget

The project will begin in February 2024 and continue through October 2024. The total project budget is not to exceed \$80,000, inclusive of all expenses, activities, materials, and travel. Most work will be likely completed virtually, with some opportunities for hybrid collaboration.



## Proposal Review and Selection Process

- **RFQ Release Date:**
  - Thursday, January 4, 2024
- **Qualifications Submission Deadline:**
  - Monday, January 29, 2024, 12:00pmCT
- **Follow up interviews**
  - February 5-9, 2024
- **Notify selected consultant:**
  - Monday, February 12, 2024
- **Project work to begin:**
  - February 2024- October 2024

Please direct all questions to Jennfier Mineo , [jmineo@episcopalhealth.org](mailto:jmineo@episcopalhealth.org)