



EPISCOPAL HEALTH  
FOUNDATION

Request for Qualifications

**Submission Deadline: Friday May 2, 2025- COB**

# Evaluation Learning Collaborative Consultant

## ABOUT THE FOUNDATION

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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 dedicated to 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. By providing millions of dollars in grants, working with community partners and congregations, and providing important research, EHF supports solutions that address the underlying causes of poor health in Texas. EHF has had a long-term commitment to invest in and promote health across organizations, communities, and initiatives to accelerate a bold vision that all Texans have a just opportunity to live their healthiest lives.

### 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 [81-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 (NMDOH) 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 are warning signs that systems and circumstances need to be improved in Texas. Working in EHF's Action Areas, we focus 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.

## PROJECT OVERVIEW

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### Background

EHF is a strategic grantmaking organization in the second year of its current strategic plan. In 2024, EHF made invitation-only grants to 16 organizations working in three Priority Areas—diabetes prevention, food and nutrition security, and maternal health. This was a unique grantmaking cycle for the foundation. Many of the 16 grantees selected for funding are new to EHF, the organizations range in size and geography, each with varying levels of organizational maturity and evaluation capacities and interests. The unique conditions around this grantmaking cycle created an ideal opportunity to advance learning around evaluation.

EHF is launching a virtual evaluation learning collaborative to enhance learning and strengthen evaluation processes for both EHF and future grantees. The focus of the collaborative is two-fold: 1) to learn about effective ways for EHF to evaluate and document the work of grantees; 2) to build the evaluation capacity of grantees and community partners.

Two types of evaluation technical assistance (TA) will be available as part of the evaluation capacity building focus: optional group sessions around general evaluation topics (e.g. logic models, needs assessments, etc.) and 1:1 coaching sessions specific to the needs and interests identified by the grantee. The individual TA does not necessarily have to focus on an evaluation of the grant being funded, rather it can support evaluation learning as defined by the grantee.

EHF is inviting the 16 Priorities for Change grantees to participate in the learning collaborative; however, it is not expected that all grantees will elect to join the collaborative or be ready to participate. Participation is not required and will be “opt-in” for each grantee. Participating grantees will receive a financial stipend that will be distributed directly by EHF.

Through the learning collaborative, EHF hopes to identify ways to effectively evaluate grantee work and generate valid and reliable outcomes, with minimal burden to the grantee.

Specific topics of interest around evaluation include but are not limited to:

#### 1. Evaluation Purpose, Criteria and Co-creation

- Aligning project focus, timeline, resources, and outcomes/learnings
- When and why are specific criteria needed to evaluate a grant?
- What does it mean to come alongside and co-create an evaluation with grantees?

#### 2. Data, Lived Experience, and Evaluation Resources

- Where and how is it useful to lift up lived experience?
- When is generalized, statistical data needed?
- How to integrate quantitative data with qualitative research?

### 3. Resources and Feasibility

- Should evaluation resources be built in, added on, or a mix of both?
- Which of EHF's resources/levers are best to understand the feasibility of certain work?

### 4. Learnings and Sector Insights

- What are relevant learnings to roll up to sectors broadly?
- What are sector-based learnings?

## Goal

EHF intends to engage an evaluation consultant/consulting team to co-develop and coordinate the activities of the virtual evaluation learning collaborative. The consultant will be responsible for: 1) facilitating EHF's learning around evaluating strategic grants or thematic groups of grantees; and 2) providing bespoke evaluation capacity building TA to members of the learning collaborative.

Through the simultaneous activities of building grantee capacity around evaluation (increasing knowledge and awareness of methods, activating skills and encouraging reflection and learning) and refining EHF evaluation approaches and processes, EHF hopes to make evaluation an integrated and more sustainable process that strengthens grantee outcomes and impact. While EHF will define the scope of activities related to EHF's learning from grantees, the capacity building work, both group and individual, will be co-created by grantees and EHF and will be shaped as aligned to the grantees' needs, interests, and priorities.

## Scope of Work

EHF is soliciting proposals from evaluation consultants/teams to manage and facilitate the activities of a virtual evaluation learning collaborative.

The consulting partner will have knowledge around and demonstrated experience supporting evaluation capacity building with non-profit organizations, coordinating collaborative activities, providing tailored evaluation TA, strategic philanthropic evaluation, and synthesizing findings from community-based qualitative data collection.

Minimum responsibilities and activities led by the consultant include:

Goals	Deliverables
<p><b>Co-Develop and Plan Activities of the Evaluation Learning Collaborative</b></p>	<ul style="list-style-type: none"> <li>• Support the co-development of evaluation learning collaborative activities with grantees and EHF</li> <li>• Co-create a work plan for the evaluation learning collaborative</li> <li>• Monitor progress of work plan activities to their completion and refine activities with grantees and EHF as needed</li> </ul>
<p><b>Convene Evaluation Learning Collaborative to Facilitate Collective Learning</b></p>	<ul style="list-style-type: none"> <li>• Plan and coordinate a Collaborative Kick-Off Meeting</li> <li>• Facilitate learning activities with grantees</li> <li>• Facilitate EHF learning around grantee perspectives of and contributions to EHF's evaluation questions</li> </ul>
<p><b>Build Capacity of Grantee Organizations to Conduct Evaluation Activities</b></p>	<ul style="list-style-type: none"> <li>• Develop and conduct group coaching sessions on general evaluation topics with participating grantee organizations</li> <li>• Develop materials for and delivery of tailored evaluation TA to individual grantee organizations</li> </ul>
<p><b>Make Recommendations to Inform EHF's Future Evaluation Approaches</b></p>	<ul style="list-style-type: none"> <li>• Synthesize findings from grantee engagement and data collection (conversations, TA, focus groups) as an assessment of evaluation approaches</li> <li>• Quarterly updates on supported evaluation recommendations for EHF</li> </ul>

This project will be a 2-year engagement with contracting for each year. The initial year of the project is expected to begin in June 2025. A maximum of \$100,000 per year for two years is available for this proposal, including all expenses.

Evaluation consultant/consulting teams are invited to submit a competitive proposal in the format outlined in this RFQ.

## PROPOSAL REQUIREMENTS

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Please address the following topics in a letter of qualification, not to exceed 5 pages. Include the evaluation consultant/consulting team name, physical address, website, and name of contact person with title, telephone number, and email address on the cover page.

Include the following information.

**Overview:** Describe your organizational structure and provide a list of the key staff for the project, including their roles and responsibilities.

**Personnel:** Describe the qualifications, experience, and availability of the personnel most likely to lead this work. Include qualifications, experience, and availability for principals and leadership for the project and any additional personnel most likely assigned to the project.

- Describe your organization's specific experience around evaluation capacity building,
- Describe your organization's experience with philanthropic evaluation, noting any background with strategic philanthropy
- Describe your organization's experience and capacity to facilitate collaborative work
- Describe your organization's experience providing evaluation technical assistance
- Describe your organization's experience with quantitative and qualitative evaluation
- Provide relevant examples of evaluation capacity building completed in the last 1-2 years, including a de-identified sample report that clearly communicates a summary and utilization of findings. One example should reflect work completed in the state of Texas.

**Budget:** Submit a detailed, itemized budget and budget narrative of proposed consultant services for a one-year period. The budget should not exceed \$100,000, inclusive of all expenses including staff time, travel, etc. *Note: Grantee stipends are distributed by EHF directly to grantees and should not be part of the consultant's budget.*

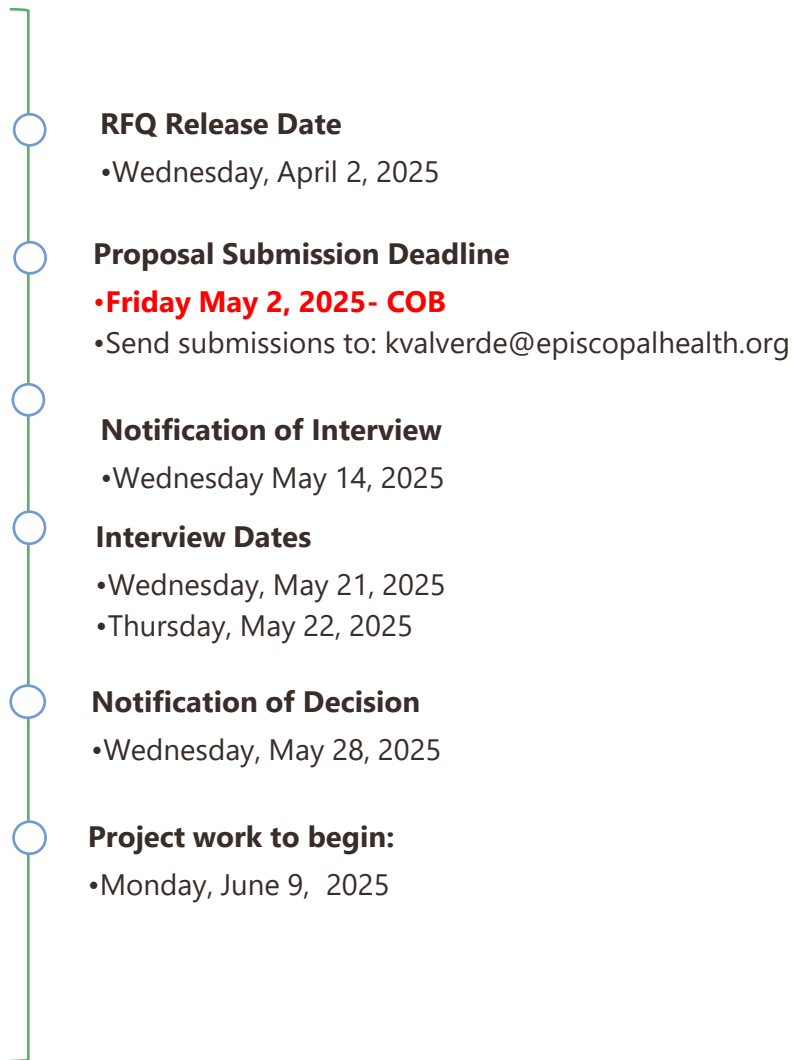
**References:** Include references from two organizations that you have contracted with to provide services similar to those proposed. Include the name of the organization, a contact person, telephone number and email address of the contact person, the amount and term of the contract(s), and the service your organization provided through the contract(s).

## PROPOSAL REVIEW AND SELECTION PROCESS

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Proposals will be evaluated based on multiple criteria, which include but are not limited to:

- Understanding of initiative
- Knowledge, experience, and/or expertise of evaluating strategic philanthropy
- Knowledge, experience, and/or expertise around capacity-building
- Knowledge, experience, and/or expertise facilitating collaboratives
- Developing and delivering tailored evaluation technical assistance to individual organizations or groups of organizations
- Ability to achieve deliverables



Questions may be directed to Jennifer Mineo, [jmineo@episcopalhealth.org](mailto:jmineo@episcopalhealth.org)