Request for Proposal

Engaging Community Voice to Understand Health Needs

Community Health Needs Assessment (CHNA)

Issue Date: Monday, February 26, 2024
Virtual Office Hours: Tuesday, March 19, 2024, 3:00 - 5:00 p.m. Central Time
Submission Deadline: Monday, March 25, 2024, 12:00 p.m. Central Time
Submissions by Email: learning@stdavidsfoundation.org

Point of Contact:
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About St. David’s Foundation

St. David’s Foundation (SDF) is a community-focused and equity-driven organization investing more than $80 million annually in a five-county area surrounding Austin, Texas, with a total population of about 2.4 million residents. Through a unique partnership with St. David’s HealthCare, SDF reinvests proceeds from the hospital system back into the community in the form of grants, initiatives, and direct service programs with a goal of advancing health equity and improving the well-being of those most impacted by inequities in Central Texas. SDF also operates one of the largest mobile dental programs providing charity care in the country and runs the largest healthcare scholarship program in Texas.

St. David’s Foundation Strategic Vision and Direction

Our Vision for Central Texas
A vibrant and inclusive community in which every individual can flourish and reach their full potential.

Our Mission for the Foundation
To advance health equity in Central Texas through investment and action.

Core Values
- Collaboration
- Community
- Compassion
- Innovation
- Stewardship

Guiding Principles
- Listen, learn, and evolve
- Use an equity lens in our work
- Embrace effective risk-taking
- Make data-driven decisions aligned with evidence, strategy, and community voice
- Measure outcomes and strive for high-impact work

Strategy
We focus on removing barriers for better living today and changing systems and conditions to improve outcomes for a healthier community tomorrow.

Learn more about SDF at www.stdavidsfoundation.org.
**Background and Context**

SDF is required to complete a Community Health Needs Assessment (CHNA) and adopt a related Implementation Plan (IP) at least once every three years, per requirements of the Affordable Care Act. To get a sense of past reports, previous CHNAs/IPs are available on our website. The requirement for non-profit hospitals to conduct a CHNA serves as a beneficial mechanism to determine community health needs as well as providing a tremendous opportunity to develop community-informed strategies. However, the requirements outlining the CHNA process has received understandable criticism when those efforts are made to only meet the minimum requirements, including (1) having too broad of a focus to be meaningful, (2) not reaching those most impacted by inequities and thus best positioned to provide insights, and (3) only exploring downstream symptoms of inequities and not tackling underlying causes such as systemic and structural barriers. Individual hospitals and philanthropic organizations have a large amount of flexibility in how they structure and execute the CHNA process as long as all IRS requirements are met.

While specific qualitative data gathering events are important and needed to fulfill the IRS requirements related to conducting CHNAs, we envision this exercise as an opportunity for a broader effort with deeper community engagement with those most impacted by health inequities.

**Project Goals and Audiences**

SDF is seeking a consultant to lead the qualitative portion of the CHNA. The goal of this project is to lead a community focused process, in coordination with partners, to build on the findings of the 2022 CHNA and more deeply explore the health needs of historically marginalized communities in Central Texas. Findings will be shared with staff, Board, and the communities we serve as a key tool for SDF and our partners to learn together and inform decision making. In addition, findings will be incorporated into the SDF’s final mixed methods CHNA report to be developed at the completion of this engagement.
Collaboration with Partners

SDF is collaborating with nonprofit hospitals in the region who are also required to adopt CHNAs as a way to reduce the burden on participants in Bastrop, Caldwell, Hays, Travis and Williamson counties. The selected consultant will work with our collaborating hospital partners and health district partners to ensure efforts complement each other.

Intersection with Strategic Plan

SDF recently released our new 2024 – 2030 Strategic Plan: Pathways to Health Equity. Our goals were informed by discussions with staff, our Board, and the community; external research; and the findings of the 2022 Community Health Needs Assessment (CHNA). We see the upcoming qualitative engagement as an opportunity to build on what community shared in the prior CHNA, explore shifts, and more deeply understand the systemic drivers and acute needs of historically marginalized communities in our five-county region.

Proposed Approach and Timeline

While the initial vision for this project is included to provide general guidance, the strongest proposals will be those that include co-creation and adaptation within their proposed approach. For this reason, the first month of the engagement will focus on finalizing the project scope and budget for selected consultant. There is a non-negotiable deadline to submit a summary of themes and findings by November 29, 2024. While subject to change, below is a high-level estimation of the timeline for the nine-month engagement.

March 2024 Consultant Selection

Apr 2024 Co-Design Scope

May-Sep 2024 Qualitative Data Collection & Sense Making

Oct-Nov 2024 Create & Submit Final Deliverables

Dec 2024 Additional Sensemaking
Scope of Work

SDF is committed to incorporating equitable evaluation practices and is looking for a consultant with expertise in frameworks that could include, but is not limited to, the Equitable Evaluation Initiative and Culturally Responsive and Equitable Evaluations. Unlike prior CHNAs, SDF plans on creating a region wide CHNA report that includes specific sections on the five counties, rather than creating five individual county reports. This approach will allow us to follow the CHNA specified requirements for each county, while also incorporating unique data gathering opportunities in specific counties and across region-wide systems.

The scope of work to be performed through this engagement must include 1) Project Management, 2) Collaborative Design and Data Collection, 3) Analysis and Sensemaking Session, 4) Report Development.

1. **Project Management:** This is a highly complex and collaborative project with many moving parts. In addition to tools needed for robust qualitative data collection and analysis, project management tools are needed to ensure activities led by selected consultant and collaborating partners are woven together to produce the final report.

   The consultant will be responsible for managing activities with guidance from SDF, the CHNA Advisory Committee and community partners. In addition, the consultant will be responsible for managing logistics for input and sensemaking sessions including, but not limited to, securing locations (virtual or in person), recruiting participants, providing refreshments, managing participant reimbursement, providing regular appropriate updates to SDF, and coordinating translation services (as needed). Clear communication with all partners is required and a close partnership with SDF staff is expected.

2. **Collaborative Design and Data Collection:** Working collaboratively with SDF staff, the Advisory Committee, and our partners, the consultant will lead the design and implementation of all primary data collection activities in the five-county region. We are open to a variety of equity focused qualitative methods and will work closely with the selected consultant and the Advisory Committee to finalize the research questions, methods, recruitment plan, and data collection plan including interview tools/guides. Details will be finalized during the planning phase, but for planning purposes, we estimate a minimum of three focus groups or similar gatherings per county (15 total) and at least 15 in-depth interviews across the region. Deidentified transcripts or similar deliverables are intended to be shared with collaborative hospital partners to inform their CHNA reports. Consultants are responsible for ensuring appropriate consent processes and accurate and effective data sharing protocols.

3. **Analysis and Sensemaking Sessions:** Following data collection, the consultant will be responsible for analysis of qualitative data from this engagement as well as qualitative data
collected by our collaborating partners. Data analysis across sources should identify key themes across all groups (focusing on needs as well as strengths) and unique issues that emerged for specific populations or counties. The consultant is responsible for sharing early findings and leading sensemaking sessions with staff, partners, and/or participants to illuminate themes, insights, and opportunities across the region and by county. The purpose of the sensemaking sessions is to ensure final deliverables reflect community feedback on recommendations. We welcome the selected consultant’s input on the approach to these sessions in relation to other activities (e.g. purpose, timing, participants). In addition, sensemaking sessions should inform dissemination plans to share findings and action steps with participants.

4. **Report Development:** The consultant will be responsible for developing a region-wide report and presentation that includes comprehensive findings and recommendations to inform Foundation strategies. All deliverables should be developed for accessibility and ease of use, rather than overly academic or technical in nature.

**Deliverables** include workplan, data collection plan and tools, transcripts, preliminary findings presentation, and a region-wide final report and presentation of findings with key takeaways by county and region. Deliverables will be shared with both SDF and our collaborating partners.

Note that although the summarizing of secondary quantitative data and report-writing of the final CHNA report will not occur until after this engagement, the deliverables should be created to support this final report. SDF has tools available to support quantitative data as needed to guide qualitative research.

*Dark Blue = Consultant Engagement; Light Blue = SDF Building on the Work of Consultant Engagement*
Submission Details

Interested parties should submit the following information as a single PDF to learning@stdavidsfoundation.org, no later than 12:00 p.m. Central Time on Monday, March 25, 2024. A complete proposal will include:

**Required**

1. Cover letter including a description of relevant experience with similar community engagement and qualitative research projects, including but not limited to IRS-required Community Health Needs Assessments. Include reflections on what you learned from the experiences, how you’ve incorporated those lessons, and how past clients/communities utilized your work.

2. Proposed research approach including the methods for design, data collection, analysis, sensemaking, and rationale for those methods. This should include a description of your general approach to authentic community engagement, equity, and equitable evaluation.

3. Proposed timeline including your proposed frequency and format of progress updates to SDF staff, as well as a high-level timeframe for completion of the project.

4. List of the consultant(s) who would do the work, their respective responsibilities, and their experience with similar projects. Identify who will serve as project manager/key point of contact.

5. An estimate of fees and expenses to be charged by deliverable, including the hourly rate proposed for this work and whether that rate varies by staff or is a blended rate (if applicable). Please specify which costs are for community input sessions and which costs cover report development.

**Included as Attachments (not limited to the ten pages)**

6. An example of a similar deliverable or report produced for another client.

7. Three references for similar projects completed within the last five years. Each reference should describe the project, dates of work, outcomes achieved, and a client reference that includes name, title, email and phone contact.

8. Resumes of all consultants who would be involved in the project.
All responses must be:

- Page numbered with the respondent’s/firm’s name on each page
- Organized according to the list above
- Formatted for 8.5 x 11-inch paper, 10-12 font size is preferred
- No more than ten (10) pages, excluding bios or other attachments; brevity is appreciated
- All elements of the response must be contained in a single PDF file

Cost of Services

The cost of services will be determined by the final accepted work plan. The contract resulting from this RFP will be structured to pay based on deliverables (e.g. community input sessions, county-specific analysis, and final qualitative report). While flexible, as general guidance, our initial vision for total project costs is a range between $75,000 to $125,000.

Review and Selection

The Foundation’s Learning and Evaluation Team, composed of four individuals, will be responsible for proposal review and selection.

Learning and Evaluation staff will be available to answer questions during an office hours session to be held virtually on Tuesday, March 19th, 2024, 3:00-5:00 p.m. CST. Please email learning@stdavidsfoundation.org for meeting information.

The selection process is expected to be complete by mid-April. Please note that SDF may request additional information via video interview.

Point of Contact

The point of contact for all correspondence and submissions is:
Jesse Simmons
Senior Evaluation Officer
St. David’s Foundation
jsimmons@stdavidsfoundation.org
512.879.6227
Review Rubric

The following criteria will be used by reviewers to score proposals. We transparently share that we use scores as an important starting point in review discussions, but they are not used to solely decide who we engage. We utilize a 0-4 scale per question, asking,

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<th>Somewhat Exceeds Expectations</th>
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**Experience**
The consultant provides examples of successful projects with similar community engagement and sense making activities.

**Equity Approach**
The proposed techniques demonstrate an understanding of equity, systematic and historical racism, cultural competency, and equitable evaluation practices.

**Project Approach**
As a large component of the work includes analyzing qualitative data, the consultant demonstrates the ability to perform in-depth analysis and interpretation of data.

**Capacity**
The consultant has the internal capacity to accomplish the work.

**Scope and Timeframe**
The timeline adequate and efficient considering the amount of work proposed. Note, the final scope will be co-designed and finalized in April.

**Appropriate Budget**
The project cost match and seem reasonable for the work being proposed.

**Other Considerations (not scored)**

*Firm Location:* Local offices or strong partnership with a local entity is preferred.