



REQUEST FOR CONTRACTED SERVICE PROPOSALS

Infant Mortality Reduction Initiative



Missouri Foundation
for *Health*

a catalyst for change



Missouri Foundation for Health is requesting proposals from organizations seeking to partner in learning and evaluation of the Foundation's [Infant Mortality Reduction Initiative \(IMRI\)](#). The intended scope of work includes providing thought partnership to various initiative partners and foundation staff, as well as evaluating the IMRI's contributions toward (1) system-level changes in maternal and infant health promotion, and (2) improving the experiences and health outcomes of women and their infants.

Initiative Background

The Infant Mortality Reduction Initiative is in the seventh year of a 10-year MFH commitment (2013-2022) aimed at decreasing infant mortality rates in St. Louis and six counties located in Missouri's Bootheel (Scott, Stoddard, Pemiscot, Dunklin, Mississippi, New Madrid), where infant mortality is twice that of the state and disproportionately affects black infants.

Recognizing that a complex array of social determinants drives high rates of infant mortality – including racial and economic inequity – MFH has partnered with a range of stakeholders (such as, community-based organizations, local governments, and health care providers) to develop a framework for collectively improving the range, type, and quality of services available to vulnerable mothers, and where possible, to innovate new approaches. Central to this framework is the understanding that those most impacted by high infant mortality rates are those most likely to identify root causes, suggest effective solutions, and participate in their implementation.

Using this approach, MFH and community partners have collaborated over the past seven years in the development and implementation of aligned, equity-focused infant mortality reduction goals, strategies, and shared measurement using the following three lenses (see the [IMRI Theory of Change](#) for more detail):

- **Community Led:** Our approach acknowledges that those most impacted by the issue are the ones most likely to identify root causes, suggest effective solutions, and participate in their implementation. In the second five years of the 10-year commitment, an increased emphasis has been placed on empowering communities to drive the priorities of the initiative and direct the flow of resources supporting the unique place-based strategies of the two efforts.
- **Equity Centered:** Starting in 2018, the initiative's goals explicitly include a focus on eliminating the inequities between white and black infant deaths, with place-based efforts developing to engage people of color and address issues of structural racism and poverty.
- **Learning and Adaptation Focused:** Through continuous learning and adaptation, the initiative aims to create sustainable systems change by facilitating the continuous improvement of policies and programs to best serve the needs of women.

Initiative "Backbone" Stakeholders

IMRI has two site-based efforts, [FLOURISH](#) in St. Louis, and [Bootheel Babies and Families \(BBF\)](#) in the Bootheel. The initiative originally was based in a [collective impact framework](#) but has evolved into a framework that is rooted in the voices and power of communities. For the incoming evaluation partner, familiarity with collective impact approaches is important, but measurement of fidelity to the collective impact model is not.



Based on the framework, FLOURISH is supported by a “backbone” organization (Generate Health). The Bootheel site, BBF, is supported through a fiscal agent with three staff and multiple capacity-building consultants. Each site has a common agenda and is building shared measurement systems. Each site supports mutually reinforcing activities (“aligned activities”) and uses participatory grantmaking to guide further investments toward the common agenda.

FLOURISH St. Louis

Generate Health is a 501c3 organization that has provided backbone support for FLOURISH, the collaborative effort of the IMRI in St Louis, since 2013. The collaborative implements the common agenda and shared measurement structures through strategic action teams and results-based accountability focused on their “North Star” of achieving zero racial disparities in infant mortality by 2033. After the midpoint review in 2018, FLOURISH restructured as **FLOURISH 2.0**, a collaborative that is community-led, sustainable, and able to drive change via (1) recognizing the power of community to make change; (2) being accountable to community; (3) creating sustainable systems change; (4) manifesting shared resources across networks; (5) practicing equity at all levels; (6) insisting on authentic relationship building; and (7) reinforcing trauma-informed/responsive practices.

Generate Health supports the learning community model and ensures it serves as a critical component to building collective knowledge, presenting the opportunity to learn from peers’ success and challenges, and connecting to the overarching efforts of FLOURISH.

Bootheel Babies and Families is the collective impact collaborative encompassing the six-county Bootheel region. While BBF began with support from two backbone organizations, the midpoint evaluation resulted in a transition to a model more inclusive of the diversity within each community to drive the regional BBF agenda and activities. Through planning and visioning meetings over the course of 2018, the BBF Executive Council (comprised of representatives from community based organizations and local health departments in all six counties), determined that a place-based structure designed to fully engage the six counties and diverse communities of the Bootheel would be best suited for the next phase of the initiative. In 2019, BBF selected **regional hub partners** from each of the six counties, which represent and engage their communities in developing specific strategies in alignment with the BBF common agenda. Working collaboratively and under the direction of the BBF Executive Council, the hub partner organizations are working to cultivate broad community ownership, long-term commitment, and emergent approaches to change the conditions that contribute to inequities in infant deaths in each of the six Bootheel counties. Each Hub partner leads a coalition of community members, business leaders, local government officials, schools, and other interested organizations as part of their county’s community advisory task force.

The Executive Council, hub partners and their respective community advisory task forces, are all individual working groups that feed the BBF collaborative and its common agenda. The BBF approach addresses health inequities through addressing multiple social determinants of health, including income, race, and place. BBF is not supported by a backbone organization, but rather an infrastructure that, in addition to the three full-time staff, includes capacity-building partner, evaluator, and health equity consultant.

Across both efforts, a number of consultants with historical institutional knowledge and capacity-building expertise in areas such as communications and marketing, data and analysis, maternal child health, and organizational management continue to assist all the community partners to gain momentum toward the goal of the initiative. Initiative partners from both sites and external stakeholders from across the state convene yearly at a conference held in Missouri, which highlights the work of the initiative and provides



opportunities for broader shared learning. In 2019, MFH also began work on the development of a women and infants health network, that will link the regional work of IMRI to other women and infant health stakeholders throughout the state and will provide a forum for program and policy collaboration on women's health as it relates to infant mortality.

Current Learning and Evaluation Objectives and Activities

The evaluation model used for this initiative thus far has been rooted in learning and adaptation. Moving forward, the evaluation will focus on the following objectives:

1. What system-level changes have occurred in maternal and infant health promotion as a direct or indirect result of the work of IMRI (backbones, partners, and foundation)?
2. How has the IMRI contributed to improvements in the experiences and health outcomes for women and infants?

Both sites have developed and implemented data collection activities over the course of the initiative. Each site, with support, is coordinating the collection of a variety of primary (listening sessions, surveys, individual program outcomes, RedCAP, partner interviews) and secondary data regarding the activities and outcomes of site-specific components of work and regional trends in maternal and infant outcomes. Progress is captured from all funded partners through various dashboards ([BBF sample](#), [FLOURISH sample](#)). The Foundation supports flexible and participatory evaluation approaches, allowing sites to focus their data collection efforts on indicators and outcomes that are most meaningful to them.

A successful learning and evaluation partner will:

- Lead the initiative-level evaluation activities, including developing new data collection methods, while integrating existing methods (site dashboards), and analysis and reporting related to the initiative's theory of change and three key frames outlined above. This will include a combination of light support for site-based data collection activities as well as the robust development of initiative-wide methods to garner, analyze, and compile insights on overall impact. Applicants are encouraged to propose innovative methods and approaches while being sensitive to placing additional burden for data collection activities on the site partners.
- Continue support of the evaluation activities related to FLOURISH partners, including completing dashboards based on stakeholder and grantee interviews, key document reviews on a quarterly and biannual basis for evaluation of FLOURISH initiative and grantee partners.
- Ensure the evaluation methodology contributes to equity, while being responsive to the unique geographical context of each collaborative and include a variety of methods, sources, and voices.
- Share insights in meaningful and digestible ways for multiple audiences, including Foundation staff, lead organizations, and general audiences.
- Support backbone partners in ongoing development of their evaluation plans with an increasing focus on right-sized and sustainable methods for each site.
- Facilitate continuous learning conversations with foundation staff and two lead organizations, generating emerging insights that can be translated into action.



- Support grantee learning by contributing to communities of practice, virtual learning summits, and offering coaching support to backbones.

Key Deliverables

At a minimum, key deliverables must include (1) a retrospective yearly report (spring 2021, 2022, & 2023), comprised of an initiative-level evaluation, as well as BBF/FLOURISH-specific reviews, (2) timeline and insightful thought partnership, and (2) methods for sharing of findings at the annual convening in Missouri. We encourage evaluators to develop concise reports and, where possible, include visualizations as part of their communications. Creative approaches to the key deliverables and additional dissemination methods and products (factsheets, presentations, webinars, etc.) are welcomed and encouraged.

Budget

Cost proposal should be commensurate with the scope of the proposed approach and experience of the organization.

Duration

The agreement will be 30 months in duration beginning October 1, 2020 and ending April 1, 2023. If selected, contractor will be required to enter into a Service Agreement with MFH. To review the terms of the agreement, [click here](#).

Submission and Deadline

Proposals must be submitted [online](#) by Monday, June 22, 2020, at 5 p.m. (Central Time).

To return to a proposal in progress, log in to your [Account](#).

For more information on the online submission process, [click here](#). For additional questions contact Steve Frisbee, Project Analyst, at sfrisbee@mffh.org or (314) 345-5587.

Contact

If you have questions regarding the content of this request, contact Katherine Fritz, Vice President of Learning and Research, at kfritz@mffh.org or (314) 345-5557.

Proposal Requirements

Address each of the sections below. There is no page limit. Please use at least 11-point font.

- Submission acknowledgement.** Complete and submit the [one-page acknowledgement form](#).
- Approach to services.** Please prepare a narrative that describes the following:
 - Your approach to evaluating social change efforts and system-level impact that achieve the objectives above.



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- How data will be gathered, synthesized, and translated to assess impact, inform strategy development and ongoing learning and adaptation for the Foundation, site partners, and broader community.
 - Your organization’s approach to ensuring the infusion of equity across a range of social determinants throughout the evaluation.
 - Your approach for communicating findings.
 - Any foreseeable challenges to undertaking this work with ideas for how the Foundation may assist in overcoming them.
- Organization history.**
- Provide a description of the organization’s experience conducting similar scopes of work in evaluation of systems-change efforts and learning and adaptations partnership. Include 1-2 examples of similar projects the organization has undertaken and one sample deliverable for each.
 - Describe the organizations commitment to diversity, equity, and inclusion.
- Key Bios.** Provide bios of key personnel working on the contract, as well as any proposed subcontractors.
- Deliverables and proposed timeline.** Provide a work plan and timeline that identifies activities and deliverables.
- Cost proposal.** Provide a detailed cost proposal including justification for professional services (hourly rate and number of hours per deliverable/task), travel related to the project, subcontractor fees (attach proposal or contract), and other direct costs related specifically to the project. Indirect costs will not be allowed. MFH reserves the right to negotiate proposed costs. MFH will not reimburse for the cost of developing or presenting this proposal. The cost proposal will be considered confidential.
- Note: Requested travel will be reimbursed for coach airfare booked within a reasonable timeframe, lodging, standard rental car or public transportation, meals, and incidental expenses at a rate not to exceed the federal per diem rate.*
- Intellectual property.** If applicable, attach list of intellectual property.
- References.**
- The names and contact information of 1-2 individuals or organizations that MFH can contact to gather insight on past work. They need not be the same as those described in the Organization History.
- Completed W-9 form**
- Completed Conflict of Interest Disclosure form**



Proposal Review and Evaluation

Proposals will be reviewed in accordance with the requirements of this RFP. Only those proposals that meet all the mandatory criteria in the RFP will be given consideration.

A respondent's submission of a proposal in no way guarantees procurement.

Right to Reject

MFH reserves the right to:

- Reject any or all proposals submitted
- Request additional information from any or all respondents
- Conduct discussions with respondents to ensure full understanding of and responsiveness to the solicitation requirements
- Negotiate modifications to a respondent's proposal prior to final award for the purpose of obtaining best and final offers
- Approve subcontractors proposed or used in carrying out the work

Non-Discrimination Policy

MFH will not discriminate on the basis of race, color, sex, religion, national origin, age, disability, sexual orientation, gender identity, or veteran status. Respondent will be required to affirm respondent will not discriminate on the basis of race, color, sex, religion, national origin, age, disability, sexual orientation, gender identity, or veteran status either in its employment practices or in its policies and procedures on account of any services, or activities made possible by or resulting from an agreement resulting from this RFP. Any violation of this provision shall be considered a violation of a material provision of this procurement and shall be grounds for cancellation, termination, or suspension in whole or in part of any related agreement by the MFH.

MFH is committed to ensuring that equal opportunity is provided to minority and woman-owned enterprises and that its contractors have active programs for ensuring diversity in their workforce and sensitivity to the issues of race and gender.

MFH strives to make this solicitation widely available to people with disabilities or those who communicate in languages other than English. If you need assistance, including translation services or large print formats, contact the foundation staff. If you request information in an accessible format, you will not be disadvantaged by any additional time necessary to provide it.

About Missouri Foundation for Health

Missouri Foundation for Health is a resource for the region, working with communities and nonprofits to generate and accelerate positive changes in health. As a catalyst for change, The Foundation improves the health of Missourians through partnership, experience, knowledge, and funding. To learn more, please visit mffh.org.