



REQUEST FOR QUALIFICATIONS (RFQ):

FY25 B'more for Healthy Babies Communities Evaluator RFQ

DATE OF ISSUE: August 31, 2024

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BACKGROUND

Since 1991, Family League of Baltimore (Family League) has been the designated Local Management Board for the City of Baltimore. Family League works collaboratively to support data-informed, community-driven solutions that align resources to dismantle systemic barriers that limit the possibilities for children, families, and communities. Family League believes that racial equity plays a pivotal role in realizing its organizational vision and that it can be achieved when race no longer determines the life trajectory of people in Baltimore. As such, Family League applies a racial equity lens to its policies, practices, organizational culture, and grantmaking.

Family League's work is guided by, and its success is defined by its ability to address, the State of Maryland's 8 Child Well-being Results. We work to ensure that babies are born healthy; children are healthy; children enter school ready to learn; children are successful in school; youth will complete school; youth have opportunities for employment or career readiness; communities are safe for children, youth, and families; and families are economically stable.

As a careful steward of the funds awarded by the City of Baltimore, the State of Maryland, and federal and private entities, Family League braids its resources together to maximize the impact of each dollar invested in support of these results areas. We leverage these resources to serve Baltimore's children, youth, and families and hold three key roles in the community: programming and grantmaking, coalitions and collaborations, and policy and advocacy.

Family League's Commitment to Equity and Inclusion

Family League is committed to strengthening Baltimore City-based businesses and incorporating a focus on equity and inclusion in its procurement process. It is the policy of Family League to provide all Baltimore City-based small, minority and/or woman-owned or -led businesses and other historically underrepresented and underutilized business enterprises the maximum practicable opportunity to compete and be awarded contracts to provide goods, services, and activities administered by the Organization.

Program Description

Infant mortality is a measure of the overall health of a community and in Baltimore, infant mortality highlights deep inequities in health and resources faced by Baltimore families.¹ Baltimore previously had one of the highest infant mortality rates (IMR) in the country. In 2009 alone, 128 babies died before their first birthdays, a rate that had been climbing for a decade.²

¹ B'more for Healthy Babies. (2019). *B'more for Healthy Babies 5-Year Strategy Update, 2019-2024*. <https://drive.google.com/file/d/1vLjivBuaQd78PHIa5b5G2r5xTLpUdiTr/view>.

² Maryland Department of Health. 2010. *Maryland Vital Statistics Annual Report 2009*. <https://health.maryland.gov/vsa/Documents/Reports%20and%20Data/Annual%20Reports/2009annual.pdf>

Moreover, Black babies were five times more likely to die than White babies. Overall, there were two leading causes of infant mortality— babies born preterm and at low birth weight, and babies dying in their sleep.³ . Many factors can influence infant mortality and infant health outcomes. Social determinants of health (SDOH), like housing and housing conditions, residential segregation, environmental factors like exposure to pollutants, economic stability and income inequality, healthcare access and quality, and education all impact infant health.⁴ Structural racism has a critical impact on social determinants of health and on both maternal and infant health outcomes. Across Baltimore city, communities of color and neighborhoods with higher rates of poverty have the highest infant mortality rates, making infant mortality in Baltimore a racial social justice challenge.

To combat these inequities Baltimore launched the B'more for Healthy Babies (BHB) initiative in 2009. The city-wide initiative takes a multi-level life course approach to reducing infant mortality and improving birth and early childhood outcomes. Between BHB's launch in 2009 and 2018, Baltimore's IMR decreased by 32% to 9.2 deaths per 1,000 live births.⁵ Additionally, the Black IMR decreased by 28% during this time. While much progress was made, the work must continue. In 2020, there was an increase in infant mortality rates.⁶ The COVID-19 pandemic impacted families tremendously including, but not limited to, access to essential resources like stable housing and health care that could prevent poor infant and perinatal health outcomes.⁷ The gap persists between Black and White infant health outcomes in Baltimore.⁸

In response to Baltimore's high infant mortality rate and clear disparities, the city continues to engage in a multi-year, city-wide planning process to analyze the factors influencing infant mortality. BHB's original strategy was developed in 2010, and resulted in the identification of areas on which to focus; Community Collaboratives was one of them. That same year, a request for proposals (RFP) was released to organizations in areas of Baltimore City with the highest rates of infant mortality at the time. Through that process, the two BHB Communities were selected. The lead agencies of Baltimore Medical System and University of Maryland's School of Social Work conduct intensive outreach and community-based programming in their

³ B'more for Healthy Babies. (2019). *B'more for Healthy Babies 5-Year Strategy Update, 2019-2024*.

<https://drive.google.com/file/d/1vLJivBuaQd78PHIa5b5G2r5xTLpUdiTr/view>.

⁴ Dagher RK, Linares DE. A Critical Review on the Complex Interplay between Social Determinants of Health and Maternal and Infant Mortality. *Children (Basel)*. 2022 Mar 10;9(3):394. doi: 10.3390/children9030394. PMID: 35327766; PMCID: PMC8947729.

⁵ B'more for Healthy Babies. (2019). *B'more for Healthy Babies 5-Year Strategy Update, 2019-2024*.

<https://drive.google.com/file/d/1vLJivBuaQd78PHIa5b5G2r5xTLpUdiTr/view>.

⁶ Maryland Department of Health (MDH). (2021). *Maryland Vital Statistics Annual Report 2020*.

<https://health.maryland.gov/vsa/Documents/Reports%20and%20Data/Annual%20Reports/2020Annual.pdf>

⁷ Heerman, W. J., Gross, R., Lampkin, J., Nmoh, A., Eatwell, S., Delamater, A. M., Sanders, L., Rothman, R. L., Yin, H. S., Perrin, E. M., & Flower, K. B. (2022). How COVID-19 impacted child and family health and healthcare: a mixed-methods study incorporating family voices. *Translational behavioral medicine*, 12(3), 466–479.

<https://doi.org/10.1093/tbm/ibab166>

⁸ Maryland Department of Health (MDH). (2021). *Maryland Vital Statistics Annual Report 2020*.

<https://health.maryland.gov/vsa/Documents/Reports%20and%20Data/Annual%20Reports/2020Annual.pdf>

respective neighborhoods. This programming includes a variety of perinatal support groups for parents.

Each Community utilizes a mobilization model that helps identify community priorities and builds upon strengths and assets to create solutions for these priorities. Community priorities are continuously identified through monthly Community Collaborative meetings, which bring together BHB Community team members, local partner organizations, and program participants. The Community Collaborative identifies needs in the community, promote referrals among partners, and share recommendations from the Fetal-Infant Mortality Review. Each initiative relies on Community Health Workers to partner with families and provide them with support and education through group-based programming and outreach in the community. Through partnerships with many other organizations in their communities, BHB facilitates access to health care, education and social support. Each initiative has a strong advocacy component and works to promote policy changes that will create more equitable structures without regard to race, gender or socio-economic status.

Baltimore has a city-wide collective impact effort focused on improving birth and early childhood outcomes, B'more for Healthy Babies (BHB). BHB¹, engages practitioners, policymakers, researchers, funders, service recipients, and the community around a collective vision that “all Baltimore children are born healthy and grow and thrive in healthy families.”² BHB is led by the Baltimore City Health Department, and Family League and HealthCare Access Maryland serve as lead implementation partners. There are 150 public and private partners involved with BHB, and the initiative operates at the systems, neighborhood, and direct service levels. Key partners include health care systems, home visiting programs, child care providers, partners focused on community outreach and mobilization, public agencies, and funders. BHB stakeholders acknowledge the critical need to holistically support families, as well as the systemic inequities that many families in Baltimore have faced and continue to face. Thus, guided by a collective impact lens, BHB stakeholders work to coordinate the network of resources available through the initiative.

Family League currently funds two partners, University of Maryland School of Social Work and Baltimore Medical System, to implement BHB Communities, a vital component of the larger BHB initiative. BHB Communities functions as BHB's neighborhood-level work and is based on the hub and spokes model. Trusted community-based organizations and ambassadors strive to build authentic relationships with community and increase utilization of BHB's myriad supports and services. Through this approach, a lead agency convenes a neighborhood team to “canvass homes, markets, schools, [houses of worship], and businesses with messaging and materials to help neighborhood residents take good care of their health and have healthy babies.”³ These community hubs connect parents with centralized intake and other service referrals, spread health information, and facilitate group-based programming. BHB Communities is a promising approach, and this approach has supported reductions in infant mortality in communities that previously had the highest rates of infant mortality in the city: Upton/Druid Heights in west Baltimore and Patterson Park North and East in east Baltimore.

BHB Communities and the overall BHB initiative have been critical to supporting reductions to Baltimore’s infant mortality rate and the racial disparities within this indicator. Disparities persist, however; many families face systemic barriers to accessing and participating in BHB’s services. In 2020, there was an increase in infant mortality rates.⁴ The COVID-19 pandemic impacted families tremendously including, but not limited to, access to essential resources like stable housing and health care that could prevent poor infant and perinatal health outcomes.⁵ The gap persists between Black and White infant health outcomes in Baltimore.⁶ Supporting the Result *Babies Born Healthy* was a recommendation in Family League’s Community Health Needs Assessment.⁷ We will continue to be in a lead implementation partner in BHB and will continue investing in Baltimore’s perinatal health infrastructure, which will include Children’s Cabinet funding through the FY25 Community Partnership Agreement and the FY25 Baltimore Children and Youth Fund (BCYF) Notice of Funding Availability (NOFA). BHB is looking to expand the BHB Communities approach to additional neighborhoods with high rates of infant mortality. For example, a BHB Community is in the early stages in the Cherry Hill neighborhood of south Baltimore. As planning for this expansion is underway, it is critical to have an external evaluation of the existing investments. This evaluation will not only analyze the impact of the BHB Communities investment to date, but also build an evidence base that can be incorporated into future iterations. While BHB Communities is inherently neighborhood-specific work, the external evaluation will support in identifying common themes and promising practices. This evaluation will be timely, as this is the last year of the current BHB Strategic Refresh. BHB will be formalizing another multi-year priority setting. The external evaluation of a key component of BHB should be able to provide vital information.

PURPOSE OF THIS INVESTMENT

Our program evaluation data suggests positive outcomes related to:

- Maternal and infant health outcomes
 - Increased rates of full term births
 - Increased rates of initiating breast/chest feeding in the hospital
 - Reduction in infant mortality rates

With this investment, we want to assess the impact and efficacy of the investment before seeking future funding. We are hoping to investigate the function of building trust with Community Health Workers who are trusted, active members of their communities on generating positive outcomes, as well as identifying program successes and opportunities for improvement. Furthermore, we want to share our lessons learned about the impact that these programs have had on families with the state and national community. An external evaluation of the program will provide the evidence-base needed to improve and advocate for this program.

DEFINITIONS

- **B'more for Healthy Babies (BHB):** B'more for Healthy Babies (BHB) started in 2009 in response to high infant mortality rates in Baltimore City and an alarming disparity seen among Black infants who were dying at significantly higher rates. BHB is a Baltimore City initiative led by the Baltimore City Health Department with support from Family League of Baltimore and HealthCare Access Maryland. BHB brings together communities, organizations, and resources so that every baby might have the best start possible. To learn more about B'more for Healthy Babies visit: <https://www.healthybabiesbaltimore.com/>
- **Thematic codebook:** A codebook for qualitative research is a stand-alone document that contains a list of themes, codes, and definitions that you are using in your qualitative analysis.
- **Landscape analysis:** A landscape analysis is a research method used to identify and elucidate trends, opportunities, and gaps in the field.
- **Literature review:** A literature or narrative review is a comprehensive review and analysis of the published literature on a specific topic or research question.

PROJECT DESCRIPTION

Family League is seeking an external evaluator or team of evaluators to complete an implementation and outcome evaluation of the BHB Communities Programs to understand how well the programs are working, their impact on participants, and recommendations for future programming. Family League will provide the selected evaluator(s) with internal evaluation data from 2019-present, which includes quarterly narrative reports on successes and challenges written by program staff, historical output data on program offerings and participation, as well as performance data on the following measures:

- # of groups offered, meetings held, and other outreach events attended
- % of participants completing groups
- % of parents who initiate breaks/chest feeding in the hospital
- % of parents who have full-term births

Since Community Health Workers carry out the mission of the initiative, we would like the selected evaluator(s) to perform a landscape analysis and literature review for similar programming with an emphasis on community and perinatal health, including compensation analysis for people in the field. Additionally, we would like the evaluator or team of evaluators to conduct a small number of stakeholder interviews and/or focus groups with program participants and Community Health Workers to collect and analyze primary qualitative data on the process and outcomes of the program.

The anticipated deliverables for the evaluation project include:

- Landscape analysis and literature review including
 - similar programming targeted at community and perinatal health; Medicaid reimbursement processes for similar programming
 - compensation analysis for Community Health Workers doing similar work in the field
- Development of research questions in consultation with Family League;
- Development of research questions and a logic model in consultation with Family League;
- Development of an interview/focus group protocol and script;
- Interview transcripts, thematic codebook, and prevalence data on themes identified;
- Documentation on existing data review and analysis;
- A preliminary outline of findings to be used in Family League advocacy during legislative sessions in April 2025;
- A draft report on which Family League will provide feedback and assist with meaning-making, if needed;
- A final public report that contains an Executive Summary, Methodology, Findings, Limitations, Data Visualizations, Conclusions, and Recommendations;
- A presentation to internal Family League staff on the findings of the evaluation; and
- A presentation to Community partners on the findings of the evaluation.

The External Evaluator shall comply with any contractual or statutorily required privacy standards for maintenance of data as applicable including those required by the Family Educational Records Privacy Act (34 CFR §99), The Health Insurance Portability and Accountability Act of 1996 (HIPAA) 45 CFR Part 160 and Part 164, Subparts A and E, and the Code of Maryland Regulations §13A.08.

GRANT TERMS & APPLICANT ELIGIBILITY

This application is for information-gathering purposes; should an applicant be selected, a separate contracting process will follow, which will represent the following terms: Contract Award Amount: Not to exceed \$100,000.00

Contract Performance Period: Contingent upon available funding, the anticipated period is **October 1, 2024– June 30, 2025**. Contract performance period, scope of work, and budget will be finalized during the contract execution period. A timeline will be developed with the consultant and Family League to determine when drafts of deliverables should be submitted and reviewed. Final deliverables must be completed by **June 30, 2025**. Project scope is negotiable to fit within this timeframe. The amount of primary data collection is particularly flexible. All revisions to the scope must be negotiated with and approved by Family League.

SUBMISSION REQUIREMENTS

Applicants are required to submit proposals through FUNDINGtrack, Family League’s online grants management system accessible through <https://flb.fluxx.io>. Submission must be completed by the date and time specified in this RFQ and in the FUNDINGtrack application. The deadlines will be strictly enforced. It is the responsibility of the applicant to ensure that the application process is completed by

the deadline. Hard copies, emailed copies, and late submissions will not be accepted. Furthermore, Family League reserves the right, at its sole and absolute discretion, to amend or modify any provision of this RFQ or to withdraw this RFQ at any time prior to contract award. Family League shall not be bound by or liable under this RFQ and/or any response thereto until a final written contract has been executed by Family League and the grantee incorporating the terms and conditions of the award.

Applications Due: September 9, 2024 by 4:00pm, EST (Extended)

Registration

All applicants must be registered in FUNDINGtrack. This is done by selecting the “Register” link on the portal’s home page, found here: <https://flb.fluxx.io>. Applicants will receive login credentials via email within three business days of submission of the registration form. Applicants are highly encouraged to register early.

Organization Information and Documentation

The Organizational Profile enables all registered users of FUNDINGtrack to provide the key business and contact information needed from partners. All registered users should fully complete the requested information and upload the due diligence documentation required in this RFQ.

Help using the Online Application

For questions or problems, contact Family League’s Help Desk at support@familyleague.org, Monday through Friday, 8:30 am to 4:30 pm.

PRE-PROPOSAL CONFERENCE & QUESTIONS

Questions can be emailed to fundedpartnerships@familyleague.org. **Questions will be accepted until close of business (4:00 pm) on August 5, 2024.** All questions and responses will be publicly posted on the Family League website <http://familyleague.org/funded-partnerships/funding-opportunities/professional-service-opportunities/> by **August 7, 2024**

A Pre-proposal Conference will be held (virtually) on **August 5, 2024 at 12:00pm.**

Funded Partnerships is inviting you to a scheduled Zoom meeting.

Topic: FY25 BHB Communities Evaluator RFQ Pre-Proposal Conference

Time: Aug 5, 2024 12:00 PM Eastern Time (US and Canada)

Join Zoom Meeting

<https://familyleague-org.zoom.us/j/85177163614>

Meeting ID: 851 7716 3614

One tap mobile

+13017158592,,85177163614# US (Washington DC)

+14703812552,,85177163614# US (Atlanta)

Dial by your location

- +1 301 715 8592 US (Washington DC)
- +1 470 381 2552 US (Atlanta)
- +1 646 518 9805 US (New York)
- +1 786 635 1003 US (Miami)
- +1 929 205 6099 US (New York)
- +1 267 831 0333 US (Philadelphia)
- +1 470 250 9358 US (Atlanta)
- 877 853 5247 US Toll-free
- 888 788 0099 US Toll-free
- 833 548 0276 US Toll-free
- 833 548 0282 US Toll-free

Meeting ID: 851 7716 3614

Find your local number: <https://familyleague-org.zoom.us/j/85177163614>

RFQ Components

Applicants should provide the following in addition to what is listed in “Applicant Questions and Submissions”

- Researcher(s) resume and bio
- Proposed budget for this project
- Proposed timeline and outline of research process
- A letter of reference
- 1-2 samples of final reports for other projects that include mixed methods analysis and data visualization on par with what could be expected in the final draft of the BHB project
- Certificate of Good Standing with the State of Maryland dated within the past 30 days.
- Audited Financials (request for \$50,000.00 or more) or Form 990 (requests for \$49,000.00 or less)

Communication Regarding RFQ

To maintain fairness in the process, inquiries concerning this RFQ, including questions related to technical issues, are to be directed through email to fundedpartnerships@familyleague.org. Communication by telephone or in person will not be accepted.

Inquiries or requests for clarification submitted prior to 4:00 pm on August 5, 2024, 4:00pm (EST) will be addressed in writing and available on Family League’s website at www.familyleague.org no later than August 7, 2024. All proposal responses must be received by the deadline of August 26, 2024.

REVIEW AND SELECTION PROCESS

Review Panel

Applications will be reviewed and rated by a panel comprised of individuals with experience, knowledge, and expertise in the field. This panel may include service professionals; community members; parents, youth, and/or family members of Baltimore City. Review panelists will serve at the invitation of Family League.

Selection Criteria

Criteria, including compliance with RFQ priorities/requirements, will be used in determining which applicants will be awarded grants and become community partners. This includes:

- Proposal is designed to support community voice
- Proposal is aligned with and designed to meet B'more for Healthy Babies and Family League of Baltimore's missions and priorities
- Proposal meets needs identified by Baltimore City stakeholders and shows knowledge and experience conducting research ethically with communities.

Announcement

Funding decisions are expected to be announced by October 2, 2024.

Key Dates and Deadlines

DATE	TASK
July 31, 2024	RFQ Released
August 5, 2024	Question & Answer Deadline
August 5, 2024	Pre-Proposal Conference
August 7, 2024	Q&A Posted to Family League website
September 9, 2024 (extended)	Applications Due
September 10-13, 2024	Technical Review & Cure Period
September 16 – October 14, 2024	Application Review
October 15, 2024	Determination Notices
October 21, 2024	Scope Finalization (in collaboration with Family League)
October 1, 2024	Contract Term Start Date
June 30, 2025	Contract Term End Date