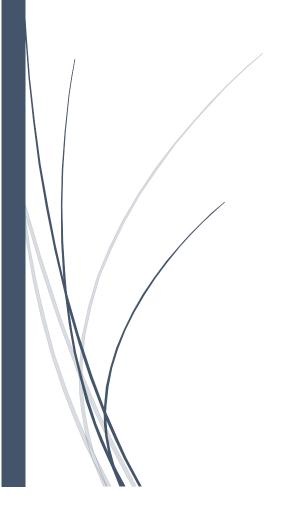
The School Community Health Alliance of Michigan (SCHA-MI) is seeking proposals from qualified organizations to develop and implement evaluation of the Child and Adolescent Health Center program in Michigan. The purpose of this Request for Proposals (RFP) is to solicit competitive proposals from qualified organizations and individuals to develop a comprehensive evaluation plan that will assess the impact, effectiveness, and efficiency of the Michigan Department of Health and Human Services Child and Adolescent Health Center program. Proposals are to be delivered by email to info@scha-mi.org. Proposals must be received by August 25, 2023 at 5:00 PM EST to be considered a responsive proposal. SCHA-MI reserves the right to extend this deadline by providing a written addendum to the Request for Proposal. The Request for Proposal can be downloaded from the SCHA-MI website.



REQUEST FOR PROPOSAL



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PURPOSE

The purpose of this Request for Proposals (RFP) is to solicit competitive proposals from qualified organizations and individuals to develop a comprehensive evaluation plan that will assess the impact, effectiveness, and efficiency of the Michigan Department of Health and Human Services Child and Adolescent Health Center program.

BACKGROUND INFORMATION

The School-Community Health Alliance of Michigan (SCHA-MI) is a collaboration of individuals and organizations that represent and support school-based and school-linked health centers and programs. Through our actions, commitment and passion, we support the belief that all Michigan children and youth have a basic fundamental right to access and receive comprehensive primary health care and prevention services. Additional information about SCHA-MI can be found at https://scha-mi.org/.

School-based and school-linked health centers bring health care services to children where they are — in school! It just makes sense. These centers and programs provide quality health care services on or near school property that help students be healthy and succeed in school. They are focused on the prevention, early identification and treatment of medical and behavioral concerns that can interfere with a student's learning.

The MDHHS Child and Adolescent Health Center (CAHC) Program services are aimed at achieving the best possible physical, intellectual, and emotional status of adolescents by providing services that are high quality, accessible, and acceptable to youth. Included in the Child and Adolescent Health Program are three models of service delivery - clinical health centers, School Wellness Program and Behavioral Health Service models. The School Wellness Program sites pair an RN with a mental health counselor to provide limited clinical services, referrals, health education and immunizations. The Behavioral Health Service model provides a full-time licensed mental health counselor to a school.

The program administers approximately 220 clinical and alternative clinical centers, school wellness programs and behavioral health service models throughout the state. The program is



serves youth ages 5-21 and their children. It provides Primary Health Care, Preventive Care, Mental Health Care, Comprehensive Health, Assessment, Vision and Hearing Screening, Medication administration and management, Immunization, Treatment of Acute Illness, Comanagement of Chronic Illness, Health Education, Medicaid Outreach and Insurance Enrollment, Oral Health Services or Referral, and Referral for Specialty Care. Additional information about the CAHC program can be found at https://www.michigan.gov/mdhhs/adult-child-serv/childrenfamilies/familyhealth/cahc.

SCOPE OF WORK

PURPOSE

SCHA-MI, in partnership with the Michigan Department of Health and Human Services, seeks to contract with an evaluator to develop and execute an evaluation of the Child and Adolescent Health Center Program. Broadly, the evaluation will focus on a) services provided and access to care and b) evidence of effectiveness and cost savings. The goal of the evaluation is the 1) demonstrate how program increases access to physical and mental health care for children and adolescents, 2) impacts overall health and well-being and 3) demonstrates cost savings as a result of increase preventive services. Other aims of the study include 1) to expand the growing body of work on the role CAHCs play in promoting child and adolescent health, well-being, and academic success; 2) to inform and promote positive policies that support optimal growth and development among adolescents, particularly adolescents living in conditions of poverty; 3) to support ongoing learning about opportunities for continuous improvements in the quality and impact of CAHCs moving forward and 4) to better understand the role of CAHCs in addressing social determinants of health. Final evaluation questions and strategy are to be developed as part of scope of work.

The selected evaluator will work closely and in partnership with SCHA-MI and MDHHS staff to develop evaluation questions and approach in Year 1, to collect and analyze data in Year 2 and to evaluate and disseminate data in Year 3. SCHA-MI expects to work as a partner with the selected evaluator and to actively engage in all aspects of refining design and implementation of this evaluation. In addition, the selected evaluator will collaborate with sponsoring agency leadership, school-based health center staff and other stakeholders to be identified.

LENGTH OF AGREEMENT

The anticipated duration of the agreement will be for one year, with the term tentatively set to begin October 1, 2023 and end September 30, 2024 and the opportunity to renew for Years 2 and 3 contingent on available funding.

FUNDING

Funds for these services are provided to SCHA-MI from the Michigan Department of Health and Human Services. Total funding for this RFP is \$250,000. Funding available for Year 1 is \$50,000. Continuation funding of up to \$100,000 per year for years 2 and 3 may be available contingent on availability of funding.



MAJOR TASKS

To successfully design the Child and Adolescent Health Center evaluation, SCHA-MI expects the evaluator and any subcontractors to complete the following tasks outlined below:

Year 1:

Task 1: Orientation and Planning Kick Off and Meetings with Key Stakeholders

Participate in an in-person meeting at the onset of the project. The meeting will serve the following purposes: 1) review contract with SCHA-MI and project management expectations; b) orient the evaluator to Child and Adolescent Health Center program and sponsoring agencies; c) review and discuss key design, methodological and logistical issues; and d) identify action items and next steps to support an effective evaluation launch. Prior to the meeting, the evaluator shall work with SCHA-MI staff to finalize the meeting agenda. Meet with additional key stakeholders during initial and within two weeks following the meeting the evaluator shall generate a memo summarizing key decisions and action items, including drafted evaluation questions.

Task 2: Assess Grantee Data

The evaluator will be responsible for assessing the status of data qualitative and quantitative data available, including assessing types of data available, data needed, data quality and consistency. A preliminary conversation will begin during the planning meeting (Task 1) and SCHA-MI will facilitate other conversations with the grantees as needed.

Task 3: Develop Evaluation Plan

Based on Task 2's findings, the evaluator will develop the evaluation plan. The evaluation plan will be based on content in this RFP, decisions made during contract negotiation and the planning meeting (Task 1), and availability of data (Task 2). The purpose of the evaluation plan is to document and describe how the evaluation will be conducted and the safeguards and quality assurance procedures that will be in place to ensure the quality, accuracy and confidentiality of the data. The evaluation plan for this task will reflect the agreed upon plan and approach at the outset of the project, including documentation that will need to be submitted for Task 5. The evaluation plan will include plans for data collection (listing additional data the proposer recommends collecting) and detail sampling methods (if applicable). As the evaluation evolves, any proposed amendments to this evaluation plan must be approved by SCHA-MI. The evaluator will work with SCHA-MI to come to an agreement on the design of the evaluation plan and any amendments to the plan. Plan will also include development of Year 2 and Year 3 Tasks.

Task 4: Create Data Collection Protocols and Instruments

While the evaluation will primarily utilize existing data, some additional data may need to be collected from School Based Health Center sites or state repositories. In these cases, the evaluator shall create or identify existing data collection protocols and instruments to meet the needs of this project consistent with the evaluation plan (Task 3). The evaluator will work with SCHA-MI and/or sites to coordinate the piloting of data collection protocols and instruments, focus groups, etc. if necessary. The evaluator and SCHA-MI will jointly determine when it is necessary to pilot data collections tools and the process for doing so.

Task 5: Submit Documentation to Obtain Data

Dependent on data available, the evaluator with SCHA-MI's assistance will develop materials necessary to obtain data. Most grantees have indicated willingness to share data, although the process for obtaining data varies by agency. The evaluator should plan to go through an IRB



process, submit research applications for review by Research Committees and develop data sharing agreements such as Business Associate Agreements. Additional efforts may be required if the evaluator requests protected health information (PHI) and/or links to administrative records.

Task 6: Manage the Overall Project

The evaluator will maintain quality control and timeliness throughout the life of the project. During all phases of the contract, the evaluator will inform SCHA-MI of progress as well as obstacles or issues encountered, proposed solutions and next steps. The evaluator will submit monthly progress memos organized by task. The evaluator is also expected to plan and facilitate regular conference calls with the SCHA-MI project team. For conference calls, the evaluator will be responsible for drafting meeting agendas and summarizing discussion, decision and action items. The tasks, as well as any additional subtasks proposed, should be included in the proposal narrative proposed scope of work and budget. Proposers are encouraged to revise, expand and otherwise edit the tasks in the proposed Scope of Work to enhance the project as long as they remain consistent with the overall project purpose and goals.

Year 2 and 3:

Task 7: Collect Data

The evaluator will be responsible for quantitative and qualitative data collection for the evaluation per agreements established with sites as described under Task 5. At a minimum, data collected should reflect existing data sources and staff interviews and/or focus groups in order to obtain data described in Task 5. It is the responsibility of the evaluator to train data collectors and to coordinate with the appropriate SCHA-MI staff to collect data. Data collected for this evaluation, merged, cleaned and stripped of PHI, shall be submitted to SCHA-MI in an acceptable format no less than 30 days prior to the contract end date. Together, SCHA-MI and the evaluator will determine if and when there is need for suppression of variables, especially any low frequency variables that may risk compromising confidentiality.

Task 8: Analyze Data

The evaluator will analyze data according to the Evaluation Plan (from Task 3) and any addenda to answer the evaluation questions.

Task 9: Share Findings

The evaluator will plan and facilitate conversations with appropriate staff from SCHA-MI, MDHHS and grantees in real time as needed. These conversations will provide the opportunity to collaboratively: (a) discuss and interpret evaluation results; (b) identify implications of those findings in the current context; (c) develop recommendations; and (d) outline associated next steps. To the extent possible, these conversations will be integrated into existing networking meetings. The evaluator will work closely with SCHA-MI staff to share study findings with other key stakeholders and with the field broadly. Interim findings will be reported throughout the evaluation in the form of Rapid Feedback Memos. A final report will be produced at the end of the evaluation. In addition to generating written briefs and reports, the evaluator may present study findings using PowerPoint or a similar application to program grantees. The selected evaluator and SCHA-MI will abide by data sharing and intellectual property principles.

ADDITIONAL ACTIVITIES

SCHA-MI may require the selected evaluator to perform additional activities related to the work described above based on emergent learning and our desire to respond to unique needs of this



project. These activities may be incorporated in a revised design and analysis plan, budget, scope of work, and task orders. The selected evaluator will be responsible for furnishing the necessary personnel, materials, services, and technological capabilities for efficient communication (phone and email) needed to carry out all tasks as outlined in the Scope of Work to perform this evaluation.

QUALIFICATIONS AND QUALITIES OF THE EVALUATOR

Desired qualifications include:

- Experience managing a community/school based evaluation
- Experience working with communities, school districts, public health and health systems serving diverse clientele
- Knowledge of the health services landscape in Michigan, including characteristics of the service delivery systems and infrastructure
- Demonstrated skills in evaluation design (including research methodology, quantitative and qualitative skills)
- Ability to apply knowledge from other fields to the program and evaluation
- Organization and project leadership
- Experience with reporting findings to community and/or school audiences
- Experience conducting an evaluation process with multiple stakeholders
- Preferred knowledge and experience working with agencies that provide child/adolescent health and mental health services

TIMELINE FOR THIS RFP

EVENT	DATE
RFP issued	7/15/2023
Deadline for questions to SCHA-MI	8/18/2023
Latest date and time proposal may be submitted	8/25/2023
Evaluation of proposals. This period includes any interviews (estimate only)	9/8/2023
Notice of Intent to Award (estimate only)	9/15/2023
Negotiations and execution of contract (estimate only)	9/29/2023
Contract start date (estimate only)	10/1/2023
Contract end date (estimate only)	9/30/2024

SCHA-MI will make every effort to adhere to the above schedule. It is, however, subject to change.

PROPOSAL CONTENTS

Proposals shall include the information outlined in this section:

A. Principal contact name, phone, and email address.



- B. A brief description of the organization, including capacity, qualifications and relevant experience delivering the specific services outlined in "Scope of Work."
- C. Short biographies and resumes of each identified project team member.
- D. A brief description of content knowledge in the field of SCHA-MI/MDHHS Child and Adolescent Health Centers and school-based health services and any related fields
- E. Project description, approach, and timeline, to providing the specific services outlines above in "Scope of Work" including how you will facilitate planning, collaboration, coordination and communication for the development of evaluation plan across 3 year project period.
- F. Two (2) references for similarly contracted services within the last 10 years including name, address, phone number, email address, scope of services provided and length of service.
- G. Fully explain and justify all budget line items in a narrative entitled "Budget Justification."

SUBMISSION OF QUESTIONS

Questions or clarification regarding this RFP must be submitted to info@scha-mi.org by 5:00PM EST on 8/18/23. A List of FAQs will be posted to the SCHA-MI Website.

SUBMISSION OF PROPOSALS

Proposals must be submitted electronically in PDF format to info@scha-mi.org no later than August 25, 2023 at 5:00 PM EST. Late submissions will not be considered. The subject line of the email should read: "Proposal: Evaluation of MDHHS Child and Adolescent Health Center." All proposals submitted in response to this RFP shall become the exclusive property of SCHA-MI.

PREPARATION COSTS

All costs incurred in the preparation and presentation of the RFP shall be wholly absorbed by the applicant.

RIGHT TO NO AWARD

SCHA-MI reserves the right to reject all proposals, reject portions of any proposal, or accept the proposal deemed most advantageous to SCHA-MI.

EVALUATION OF PROPOSALS

At the time proposals are opened, each proposal will be checked for the presence or absence of the required proposal contents. Receipt will be confirmed via email.

SCHA-MI will evaluate the proposals on a 100-point scale using the criteria set forth in the table below.



CRITERION	MAXIMUM # POINTS
Demonstrated understanding of the evaluation objectives and requirements	25
Proposed approach to develop and implement evaluation	25
Qualifications and experience of the organization/individual and project personnel	25
Credentials of staff to be assigned to the project	5
Feasibility and clarity of the project timeline	10
Cost-effectiveness and budget justification	10

INTERVIEWS

SCHA-MI may conduct interviews with Proposers to clarify aspects set forth in their proposals or to assist in finalizing the ranking of top-ranked proposals.

CONTRACT AWARD

The RFP and selection process shall in no way be deemed to create a binding contract or agreement of any kind between SCHA-MI and any organization submitting a proposal. During contract process, scope or work and budgets will be reviewed in detail and negotiated a necessary to ensure that they meet the goals, objectives, and policies of SCHA-MI. All legal rights and obligations between the successful applicant and SCHA-MI will come into existence only when an agreement is full executed by the respective parties.

