

DEADLINE EXTENDED TO NOVEMBER 27, 2017

Request for Proposal Facilitator/s Health Equity Advocacy (HEA) Cohort for The Colorado Trust

Summary of Need

The Health Equity Advocacy Cohort (HEA Cohort) is seeking a facilitator or team of facilitators to support the HEA Cohort members and partners. The facilitator/s will organize and implement multi-day state-level convenings, monthly video conferencing/phone conferencing meetings, and additional in-person meetings as needed. The facilitator/s will create agendas, facilitate the meetings, conduct relevant meeting follow up activities. Work is expected to begin in late December 2017 and continue through December 2019.

Section I: Overview and Background

The Colorado Trust (The Trust) is a foundation dedicated exclusively to the health and well-being of the people of Colorado. The Trust believes that all Coloradans should have fair and equal opportunities to lead healthy productive lives regardless of race, ethnicity, income, or where we live. The Trust uses a variety of grant making strategies and approaches to advance health equity for all Coloradans. One such strategy is the [Health Equity Advocacy](#) (HEA) [field-building](#) strategy.

With the HEA strategy, The Trust aims to advance health equity policy solutions through a field-building approach. Eighteen organizations currently comprise the HEA Cohort, which is working to create a strong foundation for a health equity advocacy field, building the capacity and skills needed to influence and shape an ever-changing policy landscape. The HEA Cohort includes policy advocacy organizations, direct service providers, and community organizing entities. The HEA Cohort also supports a network of partners across the state.

Central to the HEA strategy is the understanding that race, ethnicity, income, geography, zip code and other social conditions, collectively referred to as the “social determinants of health,” are at the root of persistent health disparities facing Coloradans. In addition, the HEA Cohort understands that inequities in health and social status are systemic due to the influence social conditions have on life chances and health outcomes. Due to the structural nature of inequality and racism, organizations and individuals in positions of influence often inadvertently perpetuate inequitable outcomes unless they dedicate sustained learning and attention to creating equitable opportunities in communities and with partners in the field.

The HEA Cohort has been working together since 2014 and has continually learned and adapted its strategies over the course of the work. To learn more about this journey, please read [this evaluation report](#). The HEA Strategy is grantee driven, meaning that the tactics to build the field, including capacity building and meeting design, is conducted and implemented by the Cohort. The Colorado Trust acts as a thought partner to the Cohort and does not drive the decision-making or tactics. To plan and implement these tactics, the cohort designed a structure consisting of:

- Core Partnership Team (CPT): the Core Partnership Team (CPT) is comprised of six cohort members which, together, represent the geographic and organizational diversity of the Cohort; Colorado Trust staff; and the external evaluation firm, Social Policy Research Associates (SPR). The CPT meets for two hours monthly via Zoom video conferencing and holds in person retreats as needed. The CPT functions as the “brain trust” or “think tank” of the cohort, analyzing data presented by SPR; tackling big questions or issues identified as a group, by the cohort, or by The Trust; and builds options for strategies to move the work forward. The CPT uses a consensus decision-making model.
- General Assembly (GA): the General Assembly (GA) is the 18 organizations of The Cohort; decisions about the strategy are made by the GA through a consensus decision-making process. The GA meets as part of the state level convenings.
- State Level Convenings: the Cohort gathers together three times a year in three day convenings, which often have 50-100 participants. Convenings are intentionally planned and implemented in different locations throughout the state, and often have place-based activities. They are complex endeavors: they serve as space to build relationships and community; discuss policy and advocacy issues and needs; support peer learning and assistance; are conducted through a racial equity lens; and often have a training or capacity building component. 50-100 people attend the convenings. Logistics and meeting planning is supported by both Colorado Trust staff and a professional meeting planner. The Cohort is committed to language justice, and convenings usually require Spanish interpretation provided by a contractor, where all attendees wear headsets. The convening planning is conducted by the CPT, The Colorado Trust, and other Function & Issue Teams as needed. There is an event planner and administrative support for all logistics.
- Function Teams: to build the field of health equity advocates across the state, the Cohort has created several Function Teams. The current teams are: Engaging Affected Populations; Communications & Messaging; Policy & Advocacy; and Racial Equity. The Teams generally meet monthly for 1-2 hours via Zoom video conferencing, with the exception of Racial Equity, which meets in person as well as via video conferencing. Cohort members and other staff from their organizations comprise the Teams; they set the meeting objectives, create and manage RFPs, and often plan components of convenings.

Section II: Services Needed

Convenings (estimated 100 hours each year, 2018 and 2019)

- Work with the Core Partnership Team (CPT), The Colorado Trust, and the other teams as necessary to develop convening objectives and agendas. Facilitator also works with the event planner and other consultants serving the cohort to coordinate convening content and flow, speakers/presenters, and logistics
- Facilitate two state level convenings in 2018 and 3 convenings in 2019. Facilitation includes addressing equity issues, power and privilege within the group and taking steps to assure all members have the opportunity to participate. The facilitator also ensures the group adheres to established group agreements
- Facilitate pre-convening webinars as needed
- Coordinate with event planner for logistical needs
- Implement convenings. This includes making sure commitments made at convenings are

followed through, that all cohort members have an opportunity to participate in the activities, and there is a feedback loop

NOTE: The consultant is expected to participate in, but not plan, the first Convening of 2018, January 16-18, which will be held in Metro Denver.

Function/Issue Teams (estimated 108-120 hours each year, 2018 and 2019)

- Provide facilitation support, including agenda creation and distribution, follow up for action steps and tasks, to function and issue teams for phone/ZOOM meetings as needed
- Actively monitor Basecamp and stay abreast of Function/Issue team activities

Core Partnership Team (estimated 42-50 hours each year, 2018 and 2019)

- Coordinate agendas and facilitate monthly 2-hour CPT meetings via ZOOM
- Coordinate agendas and facilitate at least two in-person CPT mini-retreats

Evaluation & Learning (estimated 26 hours each year, 2018 and 2019)

- Participate in biweekly debrief meetings with TCT staff and SPR
- Participate in annual interviews conducted by SPR

Section III: Qualifications

The ideal consultant is welcoming, compassionate, and warm hearted. They are able to hold space for healing and relationship building as well as move a group forward.

Required:

Content Expertise

- Have a strong understanding of the concepts and ideas around health and racial equity
- Has a strong understanding of how the social determinants of health influence the health of Coloradans
- Have experience facilitating a variety of types of organizations, recognizing that each type has their own culture, way of working, and priorities, especially experience working with policy advocacy, community organizing, and direct service provider non-profits

Facilitation

- Experience facilitating coalitions or other groups with diverse membership; diversity includes but is not limited to race/ethnicity, culture, heritage, ability, gender identity, sexual orientation, political ideology, socioeconomic status, rural, urban, and community organizing/direct service/policy advocacy organization types.
- Be able to manage complex group dynamics
- Demonstrated skill set in handling difficult conversations (about race and otherwise)
- Accommodates different abilities in group activities
- Experience using a variety of activities to build community and relationships
- Experience facilitating different adult learning and participation styles

Process Management

- Ability to manage multiple and competing meeting objectives and assist groups in coming to agreement on complex meeting objectives
- Ability to manage power dynamics and incorporate equity issues into the group process (e.g. make it so the the most privileged are not dominating the meetings but in a real way - not forced or tokenistic.)
- Moves group forward through process to making decisions
- Moves group forward in following through with decisions made in meetings
- Excellent group time management skills

Communication Skills

- Have excellent verbal and written communication skills
- Willingness to communicate via text, phone, and email depending on the need of the group

Other:

- Ability to travel, including overnight sometimes for multiple nights throughout the state for meetings and convenings
- Ability to be completely available to the cohort without distraction for 3-4 days at a time during convenings

Preferred

- Bilingual in Spanish and English

Section IV: Management of Contract

The facilitator will be an independent third-party contracted directly with The Trust. The consultant may be an individual or a team.

Section V: Equipment and Systems

- The contractor will be expected to use their own computer and telephone equipment. Must be able to accommodate cohort members and affected populations so must have ability to help those less computer literate or with older programs (e.g. saving documents in lower version and sending individually if needed, assuring only accessible material is published, etc.)
- The contractor will be expected to arrange their own travel, but travel needs will be covered by The Colorado Trust, including disability accommodations for attendants.
- The contractor will be expected to have their own workspace. Black and white printing of documents needed for the listed activities will be provided as necessary. Access to a conference call/video call line and/or webinar service will be provided as needed.

Section VI: Proposal

Proposals must include the following elements, in order. Proposals should only be in MS Word or PDF format.

1. Contact Information
 - a. Name, organization (if appropriate), and contact information
2. Services Needed
 - a. Describe how you will address all services listed in Section II.

3. Health Equity, Racial Equity, & Social Determinants of Health
 - a. Describe your experience and understanding of and experience with health equity, racial equity, and SDOH.
4. Facilitation Experience
 - a. Describe your facilitation experience and approach, including any work on similar projects and the services you provide.
 - b. Provide 3-5 specific case studies related to content expertise; facilitation skills; process management; and communication skill set.
5. Project Coordination
 - a. Describe how you plan to manage the project and communicate and coordinate with The Colorado Trust and the HEA Cohort
 - b. Provide examples of complex project coordination
6. Cost
 - a. Provide a cost plan for the Services Needed.
7. Resume
 - a. Resume, and/or background and skills.
8. References
 - a. Name and phone & email contact information for three references that can speak to your experience. Additional references may be requested.

Our intent is for the proposal writing and reviewing processes to be expedient and not overly burdensome. Your brevity is appreciated. Please send a complete proposal that includes the above elements to Noelle Dorward by November 27, 2017.

Section VII: Timeline & Questions

Timeline

Proposal deadline = November 27, 2017

Proposals reviewed and questions to applicants expected = December 1

Interviews with finalists = December 4 - 7, 2017

Final decision expected = December 8, 2017

Work expected to begin = December 22, 2017

Work expected to end = December 2019

Questions

Questions can be directed to Noelle Dorward at noelle@coloradotrust.org. Please include "HEA FACILITATOR" in the subject line.