



**Florida Early Childhood Comprehensive Systems (ECCS)
Health Integration Prenatal-to-Three Project**



Request for Proposals

#2023-02

Proposal Deadline: April 24, 2023

COVER PAGE

FLORIDA ASSOCIATION OF HEALTHY START COALITIONS, INC. (FAHSC)

FLORIDA ECCS HEALTH INTEGRATION PRENATAL-TO-THREE PROJECT

REQUEST FOR PROPOSAL (RFP)

Full Name: _____

Mailing Address: _____

City, State, Zip: _____

Telephone Number(s): (Including area code) _____

Email Address: _____



REQUEST FOR PROPOSAL

FLORIDA EARLY CHILDHOOD COMPREHENSIVE SYSTEMS (ECCS) HEALTH INTEGRATION PRENATAL-TO-THREE PROJECT

The Florida Association of Healthy Start Coalitions, Inc., (FAHSC) is seeking proposals from Florida parents to guide parent leadership activities for the Early Childhood Comprehensive Systems Health Integration Prenatal -to-Three (ECCS P-3) Project, including facilitating the ECCS P-3 Parent Leader Alliance. Additional information on the project is provided in attachment one.

1. Funding

One parent lead may be selected and will receive \$25 per hour for planning, engaging, and supporting parent leadership activities. The work is estimated to average 40-50 hours per month.

Compensation for Parent Leadership activities is planned as outlined below.

- Up to \$3,750 (maximum 150 hours) for May to July 2023.
- Up to \$15,000 (maximum 600 hours) for August 2023 to July 2024.

An additional \$15,000 per year may be available to continue the work through July 31, 2026, if approved by FAHSC. Allowable and unallowable expenditures are delineated in Federal Public Laws, Catalog of Federal Domestic Assistance (CFDA), and Code of Federal Regulations (CFR). See also the [HRSA Grants Policy Statement](#).

2. Purpose and Activities

Successful proposals will demonstrate the parent's knowledge of and ability to plan, engage, and direct parent leadership meetings and activities. The parent lead will be responsible to:

- A. Participate in ECCS P-3 advisory group meetings.
- B. Coordinate with FAHSC staff to support parent leadership activities, including the development of goals and an action plan for the Parent Leader Alliance.
- C. Facilitate P-3 Parent Leader Alliance group.

3. Applicant Requirements

- A. Parent or primary caregiver of a minor child and currently reside in Florida
- B. Experience in navigating the receipt of services in Maternal and child health, childcare and/or early childhood education
- C. Knowledge of and commitment to advancing equity
- D. Experience partnering with parent and/or community leaders
- E. Additional points will be given for applicants who have experience facilitating a parent leadership group.

4. Deadline for Submission

The deadline for submission of proposals is **April 24, 2023**. All proposals should be submitted electronically in pdf format to Monya Newmyer, MNewmyer@fahsc.org. Please include "ECCS P-3 RFP RESPONSE" in the subject line of your email submission. Email must be sent with read receipt requested.

5. Technical Assistance Zoom Meeting

A technical assistance Zoom meeting will be held on **April 12, 2023, at 10:30am Eastern time** to review this proposal and respond to questions. A Q&A document will be posted on the FAHSC website after the webinar at www.HealthyStartFlorida.com.

To join the TA Zoom meeting, register in advance:

<https://us02web.zoom.us/j/89454546561?pwd=cjlQQjNpdElvUWl0VklVS212czR6QT09>

After registering, you will receive a confirmation email containing information about joining the meeting.

6. Timeline Summary

March 30, 2023	RFP posted at www.HealthyStartFlorida.com
April 12, 2023 @ 10:30am	Technical assistance Zoom meeting to answer questions
April 24, 2023	Proposals due
April 28, 2023	Award announcement posted at www.HealthyStartFlorida.com
May 1, 2023	Project begins

7. Proposal

The Respondent's proposal should include the following:

- A. The Cover Page
- B. Proposal narrative that describes the applicant's experience and ability to meet the requirements and activities specified in Sections 2-3 above.
- C. Resume

8. Response Review and Selection Criteria

All submissions will be reviewed and scored by an independent panel of reviewers with expertise in early maternal health, early childhood education and childcare services delivery. Review criteria and points are summarized below.

- A. Equity training and/or experience advancing equity in services or projects (Maximum 15 points)
- B. Experience in navigating the receipt of services in maternal and child health, childcare and/or early childhood education (Maximum 10 points)
- C. Parent/community leader partnership experience. (Maximum 10 points)
- D. Extra points will be given for applicants who have experience facilitating a parent leadership group. (15 points)

The Florida Association of Healthy Start Coalitions reserves the right to reject any and all submissions, and to request changes based on the expert reviewers' recommendations prior to final selection. Submissions from individuals who are not the parent or primary caregiver of a minor child and/or do not currently reside in Florida will be automatically rejected.

ATTACHMENT ONE: ECCS P-3 Project Background

The Florida Association of Healthy Start Coalitions, Inc. (FAHSC) has received funding from HRSA for the Florida Early Childhood Comprehensive Systems (ECCS): Health Integration Prenatal-to-Three Project. The purpose of this project is to build integrated maternal and early childhood systems of care that are equitable, sustainable, comprehensive, and inclusive of the health system, and that promote early developmental health and family well-being and increase family-centered access to care and engagement of the prenatal-to-3-year-old (P-3) population. A maternal and early childhood system of care brings together health, early care and education, child welfare, and other human services and family support program partners—as well as community leaders, families, and other stakeholders—to achieve agreed-upon goals for thriving children and families. The P-3 period is a particularly critical period of early child development and parent-driven change. The ECCS P-3 Project will advance intergenerational health equity and expand state capacity to reach and engage families during this critical period.

The goals for the ECCS P-3 Project are to:

- 1) Increase state-level infrastructure and capacity to develop and/or strengthen statewide maternal and early childhood systems of care;
- 2) Increase coordination and alignment between maternal and child health (MCH) and other statewide systems that impact young children and families to advance a common vision for early developmental health and family well-being;
- 3) Increase the capacity of health systems to deliver and effectively connect families to a continuum of services that promote early developmental health and family well-being, beginning prenatally;
- 4) Identify and implement policy and financing strategies that support the funding and sustainability of multigenerational, preventive services and systems for the P-3 population; and
- 5) Increase state-level capacity to advance equitable and improved access to services for underserved P-3 populations.

ECCS P-3 goals and objectives aim to increase statewide access to integrated, effective, culturally appropriate, evidence-based early developmental health and family well-being promotion, prevention, and early intervention practices and services during the prenatal and early childhood period. Earlier family engagement in high-quality comprehensive services supports long-term family protective factors, reductions in risks to health and development, and improvements in indicators of health and well-being.

The Need

Many families experience significant adversity during the P-3 period or experience significant challenges in providing the safe, nurturing, and engaging environments that young children need to thrive—this contributes to widening disparities and inequities in childhood development, school readiness and achievement, and lifelong health. While multigenerational approaches focusing on prevention and coordinated services have proven to be effective, existing infrastructures are often fragmented or lacking the leadership and coordination capacity necessary to reach families equitably and early. Systems leadership, improvement, and coordination capacity are necessary to achieve population level improvements in early developmental health and family well-being. Including parent voice in state-level maternal and child health, and early education planning and policy initiative discussions is essential to effectively address specific disparities in service delivery and to address other drivers of family and community well-being.