

REQUEST FOR PROPOSALS:

Building STLT Capacity: Concurrent Disaster Preparedness, Response and Recovery Tabletop Exercise Participation

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PART I: OVERVIEW INFORMATION

Issuing Organization: Council of State and Territorial Epidemiologists (CSTE) at www.cste.org

Participating Organizations: CSTE and Centers for Disease Control and Prevention (CDC) – Cooperative Agreement number **1 NU38OT000297-04-00**

PART II: FULL TEXT OF ANNOUNCEMENT

Section I. Funding Opportunity Description**Statement of Purpose**

The Council of State and Territorial Epidemiologists (CSTE) is partnering with the Centers for Disease Control and Prevention (CDC) National Center of Environmental Health, Agency for Toxic Substances and Disease Registry (NCEH/ATSDR), and the National Environmental Health Association (NEHA) to provide state, tribal, local, and territorial (STLT) public health agencies the opportunity to participate in a tabletop exercise simulating concurrent disaster response. CSTE seeks STLT public health agencies to participate in this exercise and associated activities.

Background

During the COVID-19 pandemic, many STLT public health agencies have had to respond to environmental health emergencies and disasters in addition to continued COVID-19 response. To better understand the gaps and needs of preparing for, responding to, and recovering from concurrent disasters, CSTE has partnered with CDC and NEHA to assist STLT public health agencies in assessing preparedness and response capacity and capabilities through participation in a tabletop exercise simulating concurrent disasters.

Objectives

By June 2022, participating public health agencies will participate in a NEHA-developed, and CDC-CSTE conducted tabletop exercise simulating concurrent disaster response. In addition to exercise participation, participating agencies will:

- Participate in key informant interviews to describe anticipated gaps and needs related to concurrent disasters
- Pilot test a NEHA-developed digital planning and response tool
- Develop a jurisdiction-specific after-action report and improvement plan (AAR/IP) based on the tabletop exercise scenario simulating concurrent disaster response

Deliverables

To meet the above-mentioned objectives, the awardee will be required to meet the following sets of deliverables:

Key informant Interviews: Participate in key informant interviews conducted by the CSTE-identified consultant to describe anticipated gaps and needs related to preparing for, responding to, and recovering from concurrent disasters, e.g., pandemic and severe weather.

Tabletop Exercise Participation: Participate in a NEHA-developed tabletop exercise (TTX), virtually or in person, simulating the response to concurrent disasters. The tabletop will be jointly conducted by CSTE and CDC and is expected to be held between April and June 2022.

After-Action Report and Improvement Plan Development: Using identified areas of improvement and successes after completing the TTX, develop a jurisdiction-specific AAR-IP to improve jurisdiction preparedness for responding to concurrent disasters. The funded jurisdiction will develop the AAR-IP with assistance from the CSTE-identified consultant.

Optional Deliverable: Utilize National Environmental Health Association (NEHA)-developed toolkit: The National Environmental Health Association (NEHA) has developed a digital tool to facilitate better collaboration between Emergency Support Function (ESF) 8 - Public Health & Medical Services coordinating agencies and partner organizations before, during and after emergency events and disasters. Participants will input relevant agency and partner information prior to participating in the tabletop exercise and provide feedback on functionality and usability of the tool.

Timeline

December 22, 2021	RFP Release
January 31 2022	Application Due Date
February 4 2022	Notification of Award
Week of February 7, 2022	Kick-off Call
February – March 2022	Key Informant Interviews
April – June 2022	Tabletop Exercise and AAR Development

*Please note that the timeline is subject to change

Section II. Contract Mechanism

Mechanism of Support

CSTE will manage matters related to financial support for this project. CSTE intends to commit up to \$20,000 each to eight (8) recipients through firm-fixed contract. The final contract amount is contingent upon submission of a detailed and reasonable budget proposal to be approved by CSTE and the availability of funds. Successful applicants are expected to return a signed contract within 30 days of receiving it.

Section III. Eligibility Information

Eligible Applicants

State, tribal, local, or territorial (STLT) public health agencies interested in exercising agency preparedness, response, and recovery plans.

Applicants who are employed or work on behalf of STLT health agencies are required to submit an outside activity form or secondary employment request (actual form may vary) that has been approved by their employer with their application.

Section IV. Application and Submission Information

Content and Form of Application Submission

The application should be no longer than 6 pages, and should be written using a 12-point, double-spaced, unrounded, Times New Roman font, on 8.5x11 inch paged paper with one-inch margins. Additional pages or appendices that are not required may not be reviewed. Please include the headings below in the order listed and address all the issues included under each heading.

1. Contact Information (0.5-page limit)
 - a. Provide applicant contact information including email address, phone number, and mailing address.
2. Background (2.5-page limit)
 - a. Describe experience of agency response to concurrent disasters, detailing role of partner agencies within ESF 8 response planning and operations. If your jurisdiction has no experience responding to concurrent disasters, please outline your agency's plans, detailing the role of partner agencies within ESF 8 response planning and operations.
 - b. Include all relevant experience of team members who would be assigned to this project.
3. Work Plan (1.5-page limit)
 - a. Describe the implementation plan to complete the outlined deliverables.
 - i. If applicant is a state, tribal, or territorial public health agency, work plan should include description of how agency will collaborate with jurisdictional partners including local public health agencies
 - ii. If applicant is a local public health agency, work plan should include description of how agency will collaborate with regional and state agencies, based on agency's preparedness and response plans
 - b. Please include a timeline for key activities and milestones.
 - c. Identify any potential risks to timeline
4. Budget and Justification (1.5-page limit)
 - a. Provide detailed budget and budget justification.

For further assistance, technical questions, or inquiries about the application, contact Andrew Adams at aadams@cste.org. Representatives from CSTE will be available to speak to potential applicants to discuss technical or administrative questions. All questions and answers will be made available to all potential applicants upon request.

Submission Dates and Times

Submission, Review, and Anticipated Start Dates:

- Application Submission Receipt Date: **Submissions due by 11:59 PM EST January 21, 2022**
- Award Notification Date: February 4, 2022

- Anticipated Start Date: Week of February 7, 2022

Submitting an Application:

Application materials should be sent to Andrew Adams at aadams@cste.org by **11:59 PM EST on January 31, 2022**. Applications submitted after this deadline may not be reviewed. Notification of successful receipt of the application will be sent to the applicant upon request.

Section V. Application Review Information***Criteria***

The following criteria will be used to review all submitted applications:

1. Overall Application (10 points)
 - a. Followed application formatting requirements (5 points)
 - b. Grammar (5 points)
2. Background (30 points)
 - a. Demonstrated expertise and/or prior experience of applicant (and project staff, as applicable) (20 points)
 - b. Jurisdiction plans referenced include public and/or private partner organizations that cater to vulnerable populations, e.g., elderly, medically vulnerable, low socioeconomic status, etc. (10 points)
3. Project Plan (50 points)
 - a. Applicants understanding of the project and deliverables (10 points)
 - b. Detailed work plan to complete stated deliverables (10 points)
 - c. Inclusion of partner organizations representing vulnerable and underserved populations (10 points)
 - d. Inclusion of partner organizations outside of local jurisdiction (20 points)
4. Budget and Justifications (10 points)

Review and Selection Process

Eligible applications that are complete will be evaluated for scientific and technical merit by CSTE in accordance with the review criteria stated above. Submissions that do not comply with the technical requirements set in the RFP are considered nonresponsive and will be rejected. A review panel of CSTE National Office staff, CSTE Steering Committee members, and subject matter experts may score the applications. Funding awards will be made based upon the quality of the submitted proposal and the ability of the applicant to meet the criteria stated above.

Section VI. Additional Information***Award Notices***

All applicants will be notified via email no later than **February 4, 2022**.

Contractor Responsibilities

The award recipient will have primary responsibility for the following:

- 1) Participating in a kick-off call with CSTE, NEHA, and CDC to outline objectives and expectations
- 2) Accomplishing the objectives and completing the deliverables listed in this announcement
- 3) Providing written progress reports and invoices to CSTE as required in the contract agreement
- 4) Communicating through multiple avenues on a regular basis for feedback and discussion (e.g., conference calls, emails, etc.)
- 5) Actively engaging partners and stakeholders

CSTE Responsibilities

CSTE will have the primary responsibility for the following:

- 1) Participating in a kick-off call with the awardee to outline objectives and expectations
- 2) Serving as the awardee's principal point of contact between participants, CDC, and other stakeholders
- 3) Facilitating work and providing avenues for communication between awardee and stakeholders
- 4) Monitoring the terms of the agreement
- 5) Funding according to the terms of the contract agreement
- 6) Assisting in exercise implementation and AAR development, as appropriate

For More Information

For more information, contact:

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