

## REQUEST FOR PROPOSALS:

### Consultant to Update CSTE Tribal Epidemiology Toolkit

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#### PART I: OVERVIEW INFORMATION

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**Issuing Organization:** Council of State and Territorial Epidemiologists (CSTE) at [www.cste.org](http://www.cste.org)

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

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**PART II: FULL TEXT OF ANNOUNCEMENT**

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

The purpose of this request for funding proposal (RFP) is to seek a consultant with grounded expertise in Tribal Epidemiology and American Indian/Alaska Native (AI/AN) health to update the [CSTE Tribal Epidemiology Toolkit](#) (referred hereafter as the Toolkit). The Toolkit is an online resource for state, Tribal, local, and territorial epidemiologists that details resources and best practices for improving health in Indian Country. The Toolkit highlights data sharing and issues pertaining to data quality so authorities may better address health inequities and enhance collaboration among state, federal and tribal partners.

**Background**

The Tribal Epidemiology Subcommittee consists of epidemiologists and others working with AI/AN in state, local, territorial, and Tribal health agencies, and Tribal Epidemiology Centers (TECs). Since 2008, CSTE has been successful in bringing together key players for public health surveillance, health data sharing, and public health authority in Indian Country despite more complex issues surrounding the responsibility for public health services for AI/AN populations. CSTE promotes partnership and data sharing to support tribal public health surveillance and data sovereignty. There are gaps in the surveillance of health status among AI/AN people resulting in the lack of available data to drive public health interventions and research. Thus, some of the Tribal Epidemiology Subcommittee strategic priorities include improving engagement in CSTE activities, recommending guidance to reduce racial misclassification, and promoting data sharing between states and TECs.

At meetings in Albuquerque, NM with TECs and other partners in May 2008, September 2013, and July 2018, the CSTE Tribal Epidemiology Subcommittee identified a series of actions and recommendations to improve public health surveillance in Indian Country. Among these was the need to encourage data-sharing between state/local health departments and Tribal entities. The Toolkit was developed as part of the response to these recommendations. The Toolkit educates CSTE members on key considerations and strategies for engaging in Tribal epidemiology and provides resources and examples from successful collaborations. Expanding the knowledge and understanding of these concepts among CSTE members and centering the expertise of AI/AN voices are priorities of the Tribal Epidemiology Subcommittee.

**Objectives**

By June 30, 2023, the consultant will have updated the online CSTE Tribal Epidemiology Toolkit to meet the following objectives:

- Educate users on the background, guiding principles, and key elements of Tribal Epidemiology and working with AI/AN communities and organizations
- Provide functional and timely resources on Tribal health authority, TEC & AI/AN engagement, and Indigenous Data Sovereignty ideally generated and authored by Tribal nations and organizations
- Provide templates for data use agreements/memorandums of understanding/etc.

### ***Deliverables***

To meet the above-mentioned objectives, the awardee will be required to:

- Outline proposed sections of the toolkit, including but not limited to:
  - Background and justification
  - Cultural Humility
  - Tribal Public Health Authority and Indigenous Data Sovereignty
  - Data collection
  - Data linkage
  - Data sharing
  - Collaboration examples
  - Consultation and Communication Tools & Resources
- Create new toolkit content, suitable for publication to the CSTE website, that meets the objectives described above
  - Content can be submitted as .doc or .pdf. Images as .jpg or .png. If included, video should be .mp4
- Participate in regular update calls with CSTE
- Provide progress reports to CSTE following the timeline described below
- Provide proof of Tribal review, consultation, or grounded expertise in development of materials
- Adhere to the timeline for activities as described below.

Important note: the consultant will not be required to build the website of the toolkit but can suggest layout and flow of content.

Optionally, the consultant may include multi-media content for embedding into the online toolkit such as video, animations, slides, etc. If such content is to be included, it should be part of the proposed outline.

### ***Timeline***

<b>Date</b>	<b>Action</b>
November 21, 2022	RFP Release
December 9, 2022	Application Due Date
<b>January 6, 2023</b>	Notification of Award
January 16, 2023	Orientation/Kickoff
February 10, 2023	Proposed outline due
April 7, 2023	Interim progress report due
May 26, 2023	Materials submitted to CSTE for review
June 30, 2023	Final materials due for approval
July 2023	Toolkit published to website

\*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 \$26,000 through contract mechanism. 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***

Applicants should be non-federal public health professionals (including, but not limited to, those from institutions of higher education, nonprofit organizations, communication firms, public health agencies, or private consultants) with advanced knowledge and experience with applied epidemiology in Tribal contexts and with AI/AN peoples.

Given the nature of the topic area, extra consideration will be given to applications from Tribal Epidemiology Centers, Tribal Health Departments, Native American Research Centers, Urban Indian programs, or other Tribal health organizations.

Applicants who are employed or work on behalf of state, local, tribal, or territorial (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.

Current CSTE policy states that contracts should not be made with former CSTE staff unless approved by the CSTE Executive Director for extenuating circumstances. Please contact Colin Gerber at [cgerber@cste.org](mailto:cgerber@cste.org) if you have any questions about this policy or request an exemption.

## **Section IV. Application and Submission Information**

### ***Content and Form of Application Submission***

The application should be no longer than 7 pages, and should be written using a 12-point, double-spaced, un-reduced, 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 (1/2 page limit)
  - a. Provide applicant contact information including email address, phone number, and mailing address.
  - b. Indicate if your organization is a minority- or women-owned business and/or is Indigenous
2. Experience (2 page limit)
  - a. Describe prior experience as it relates to:

- i. Tribal epidemiology and public health
    - ii. Tribal data collection, management, and sharing
    - iii. Tribal and Urban Indian engagement
  - b. Include all relevant experience of team members who would be assigned to this project.
3. Work Plan (2 page limit)
  - a. Describe the implementation plan to complete the outlined deliverables.
  - b. Please include a timeline for key activities and milestones.
  - c. Indicate any potential risks to completing the work
4. Budget and Justification ((2 page limit)
  - a. Provide detailed budget and budget justification.
5. Other required documentation
  - a. Outside activity form/secondary employment request (if applicable)

For further assistance, technical questions, or inquiries about the application, contact Colin Gerber at [cgerber@cste.org](mailto:cgerber@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 [December 9, 2022]**
- Award Notification Date: [January 6, 2023]
- Anticipated Start Date: [January 31, 2023]

#### **Submitting an Application:**

Application materials should be sent to Colin Gerber at [cgerber@cste.org](mailto:cgerber@cste.org) by **11:59 PM EST on [December 9, 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. Experience
  - a. Demonstrated expertise and/or prior experience of applicant (and project staff, if applicable) in (25 points):
    - i. Tribal epidemiology
    - ii. AI/AN data collection, management, and sharing
    - iii. Tribal and Urban AI/AN engagement
  - b. Applicant is a Tribal Epidemiology Center, Tribal Health Department, Native American Research Center, Urban Indian program, or other Tribal health organization (10 points)
2. Project Plan

- a. Applicant's understanding of the project and deliverables (10 points)
  - b. Detailed work plan, method, and timeline for completing work in timeframes listed above (35 points)
  - c. Feasibility of proposed work plan (10 points)
3. 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 [January 6, 2023].

***Contractor Responsibilities***

The award recipient will have primary responsibility for the following:

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

***CSTE Responsibilities***

CSTE will have the primary responsibility for the following:

- 1) Serving as the awardee's principal point of contact
- 2) Facilitating work and providing avenues for communication between awardee and stakeholders
- 3) Monitoring the terms of the agreement
- 4) Funding according to the terms of the contract agreement
- 5) Approving the final content for publication to the CSTE website

***For More Information***

For more information, contact:

Colin Gerber  
Senior Program Analyst  
[cgerber@cste.org](mailto:cgerber@cste.org)