

REQUEST FOR PROPOSALS:**Consultant to Provide Continuous Technical Assistance (TA) and Subject Matter Expertise on HIV Surveillance and Epidemiology**

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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 #NU38OT000297 and the National Alliance of State & Territorial AIDS Directors (NASTAD)

Cooperative Agreement #NU65PS923687**PART II: FULL TEXT OF ANNOUNCEMENT****Section I. Funding Opportunity Description*****Statement of Purpose***

The Council of State and Territorial Epidemiologists (CSTE) seeks the assistance of a technical expert to provide continuous technical assistance (TA) and subject matter expertise to State, Tribal, Local and Territorial (STLT) health departments, including Ending the HIV Epidemic (EHE) jurisdictions to improve HIV surveillance capacity and provide support on activities and convenings related to HIV surveillance technical assistance and programmatic planning and execution.

Background

Approximately 1.2 million people in the United States (U.S.) are living with HIV today.¹ While annual infections in the U.S. have been reduced by more than two-thirds since the height of the epidemic in the mid-1980s, data from the Centers for Disease Control and Prevention (CDC) indicate that progress has stalled in recent years, decreasing 9% from 2015 to 2019. Most recently, CDC estimates that approximately 36,800 new HIV infections occurred in the United States in 2019.²

To reduce new HIV infections in the U.S., the U.S. Department of Health and Human Services (HHS) launched the [Ending the HIV Epidemic: A Plan for America](#). This initiative aims to reduce the number of new HIV infections in the U.S. by 90 percent by 2030. The initiative has four pillars or strategies: Pillar One: Diagnose all people with HIV as early as possible after infection; Pillar Two: Treat the infection rapidly and effectively to achieve sustained viral suppression; Pillar Three: Prevent new HIV transmissions by using proven interventions and including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs); and Pillar Four: Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.³

In response to the “Respond” pillar of the EHE plan, CSTE is partnering with NASTAD and CDC to provide TA on HIV surveillance to STLT health departments. CSTE and NASTAD are specifically focusing on the 57 priority jurisdictions that contribute to more than half of the new HIV diagnoses.

Objectives

Provide subject matter expertise and technical assistance support on activities and convenings related to HIV surveillance and epidemiology to STLT health departments. Through these activities and convenings, the consultant will contribute to improving HIV surveillance capacity by providing TA to STLT health departments with an emphasis on EHE jurisdictions.

Deliverables

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

1. Provide continuous virtual TA to STLT health departments through individual and group consultations requested by CSTE HIV Subcommittee members.

- a. TA sessions will be conducted over a virtual Zoom platform, each session will take place for approximately 60-120 minutes.
- b. TA requests will be submitted to the consultant via an online submission form or via email and triaged by CSTE staff to determine relevance, priority, and potential grouping of requests.
- c. CSTE staff will share confirmed TA requests with consultant and will coordinate with consultant and requestor(s) for scheduling, additional information, etc.
- d. CSTE staff will be responsible for the logistics of the TA sessions; consultant will be responsible for the development of any resources/presentations for use during TA sessions.
- e. CSTE will conduct post-TA session evaluations that will be shared with consultant to help plan future TA offerings
- f. Examples of TA requests include integrating HIV data systems, utilizing data visualization, and managing reported lab data for negative persons.
2. Develop training resources including, but not limited to, providing content (such as presentation slides and educational curriculum) for HIV surveillance webinars, developing online training modules, and updating existing HIV surveillance manuals to be housed on CSTE Learn.
 - a. Consultant will provide content for and record 2-5 interactive lessons on topics related to HIV surveillance best practices aimed at HIV Surveillance Coordinators.
 - b. Consultant will utilize previous assessments and the CSTE HIV Subcommittee leadership group to determine lesson topics.
3. Facilitate a workgroup from CSTE HIV Subcommittee, with support from CSTE staff, to update existing HIV surveillance manuals.
 - a. CSTE staff will identify and convene the workgroup and manage all workgroup logistics.
 - b. Consultant will be responsible for tracking feedback received, incorporating edits and feedback into drafts, and producing a final updated HIV surveillance manual
4. Solicit and incorporate feedback from CSTE HIV Subcommittee and STLT health departments when developing and updating HIV surveillance resources.
5. Attend regular monthly and ad hoc check-in meetings with key stakeholders, including CSTE, CDC, and NASTAD, to discuss deliverable progress.

Timeline

August 10 – September 7, 2022	RFP open
September 7– September 28, 2022	Proposal Review and Selection
September 28, 2022	Notice of Award
September 28 – May 26, 2023	Contract Period

*Please note that the timeline is subject to change.

Section II. Award Mechanism

Mechanism(s) of Support

CSTE will manage matters related to financial support for this project.

Funds Available

Funding for this project will be firm-fixed. CSTE intends to commit up to \$35,000 for this project consultancy. The final award amount is contingent on submission of a detailed and reasonable budget proposal, to be approved by CSTE, and the availability of funds.

Funding is provided by CDC Cooperative Agreement number **NU38OT000297** and NASTAD Cooperative Agreement number **NU65PS923687**. Funds awarded to contractors under this announcement are subject to the laws, regulations and policies governing the U.S. Public Health Service grant awards. All estimated funding amounts are subject to the availability of funds.

Section III. Eligibility Information***Eligible Applicants***

Eligible applicants are non-federal public health organizations or professionals (including, but not limited to, those from institutions of higher education, nonprofit organizations, communication firms or private consultants) that possess the following skills and competencies:

- A minimum of 10 years of demonstrated experience with epidemiology or strategies for HIV prevention and/or surveillance.
- Experience conducting environmental scans and developing recommendations.
- Experience disseminating the findings of scientific studies through state reports, state websites, scientific writing, publications, presentations, or a combination of these skills.
- Experience developing training materials or guidelines to support practice.
- Experience providing technical assistance to EHE jurisdictions and/or STLT health departments
- Engaging with stakeholders (e.g., local health agencies and federal agencies) on projects to improve public health surveillance and population health.
- Experience working with federal health agencies including but not limited to CDC and HHS.

Applicants who are employed or work on behalf of STLT health departments 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, 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 maximum)
 - a. Provide applicant contact information including email address, phone number, and mailing address.
2. Statement of interest and experience (2 page maximum)

- a. Describe prior experience as it related to:
 - i. Familiarity and experience with conducting public health surveillance, specifically working with or in HIV programs.
 - ii. Developing training materials or guidelines to support public health surveillance practice.
 - iii. Collecting and evaluating qualitative and quantitative data.
 - iv. Providing technical assistance to EHE jurisdictions and/or STLT health departments
 - v. Disseminating the findings of scientific studies through state reports, publications, presentations, or some combination of these; and engaging with stakeholders (e.g., local health departments or federal health agencies). Please provide examples of previous work as an appendix.
 - vi. Demonstrated knowledge of technical writing, ability to synthesize comments and perspectives from multiple parties
 - vii. Experience with meeting facilitation and consensus building
3. Plan/Methods (2 page maximum)
 - a. Describe the implementation plan to complete the outlined deliverables, including descriptions of communication style, availability, and tools utilized for project management
 - b. Prepare a detailed work plan describing the tasks involved in completing the deliverables described above in Section I. Funding Opportunity Description, along with a timeline.
4. Budget (1 page maximum)
 - a. Provide breakdown of costs, including hourly rates, estimated hours for each task and any other project related costs and budget justification.
5. Other required documentation (not included in page count)
 - a. Resume/CV of all project staff
 - b. Letters of Support
 - c. Outside activity form/secondary employment request (if applicable)

For further assistance, technical questions, or inquiries about the application, contact Symone Richardson at CSTE (770-458-3811 or srichardson@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 September 7, 2022**
- Award Notification Date: **September 28, 2022**
- Anticipated Start Date: **September 28, 2022.**

To Apply:

Please review the Objectives, Deliverables and Eligible Applicants and respond with your proposal. Proposals should follow the guidelines set forth in Section IV. ***Please email your application to srichardson@cste.org by Wednesday, September 7, 2022.***

Section V. Application Review Information

Application Rubric

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

- Experience
 - Demonstrated prior experience and subject matter expertise (25 points)
 - Qualifications, statement of interest, and letters of support (25 points)
- Project Plan
 - Detailed deliverables specific to the proposed objectives (20 points)
 - Detailed work plan, methods, and timeline for completing work (20 points)
- Budget
 - Detailed budget breakdown & justification of costs (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. 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. Award Admission Information

Award Notices

All applicants will be notified via email no later than **September 28, 2022**.

Award Recipient 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 between participants, CDC, and other stakeholders
- 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



Council of State and Territorial Epidemiologists

For More Information

For more information, contact:

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