Request for Proposal (RFP)

For

Ending the HIV/HCV/STI Epidemics (EtE)
Community Engagement Consultation

From

Heluna Health

Key Dates:

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
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<tbody>
<tr>
<td>RFP Issue Date</td>
<td>February 5, 2020</td>
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<td>E-Question Period</td>
<td>February 5 – February 14, 2020</td>
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<td>Proposals Due Date</td>
<td>February 28, 2020</td>
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<td>Award Decisions Announced</td>
<td>March 13, 2020</td>
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<td>Project Period</td>
<td>March 30 – September 30, 2020</td>
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I. INTRODUCTION
San Francisco has made extensive progress in recent years in HIV, hepatitis C (HCV), and sexually transmitted infections (STIs) prevention and care. There is increasing optimism that San Francisco will be the first city in the United States to achieve its goal of ‘Getting to Zero’: zero new HIV infections; zero HIV deaths; and zero HIV stigma. While this progress is encouraging, some populations in San Francisco continue to experience significant disparities in HIV-associated indicators. In addition, many of these populations disproportionately impacted by HIV also experience high rates of other sexually transmitted infections (STIs) and hepatitis C (HCV). This overlap demonstrates the need to address all three epidemics with coordinated strategies.

The impacts of social determinants of health, such as lack of housing and income inequality, are more pervasive than ever before. San Francisco has undergone dramatic economic transformation resulting in rapidly growing economic inequality in the city and in the Greater Bay Area. The impact of this change on the lives of the city’s most vulnerable communities cannot be overstated. This shift mirrors a trend toward income inequality throughout the entire state of California, whereby millions consumed with the daily struggle of managing on extremely low incomes, while at the same time the incomes of higher income households continue to grow.1 Inextricably linked is the structural racism that is embedded in our systems and services, which often excludes communities of color from economic opportunities, increasing their vulnerability and preventing them from experiencing optimal health. Disparities among HIV,

1 https://calbudgetcenter.org/resources/income-inequality-significantly-increased-for-californians-in-2018/
HCV, and STI prevention and treatment outcomes, particularly among Black/African Americans (B/AA), Latinos/Latinas/Latinx, trans women, people who are experiencing homelessness, and people who use drugs, remind us of the imperative to address the underlying social determinants of health. There is a need for an increased focus on person-centered, integrated services and increased innovation to address the root causes and to keep up with changing times. San Francisco has a rich network of services and efforts that must be maintained; shifts in policies and approaches are needed to realize the goals of getting to zero, ending HCV, and turning the curve on STIs.

In 2019, SFDPH’s Community Health Equity and Promotion Branch (CHEP) received a one-year grant from the Centers for Disease Prevention and Control (CDC) to facilitate a rapid strategic planning process to develop a San Francisco Ending the Epidemics (SF EtE) plan. The SF EtE planning process is part of the national Ending the HIV Epidemic initiative, which is focusing on developing and funding “disruptive innovations” that overcome barriers to prevention and care. The SF EtE plan will: (1) integrate HIV, HCV, STI prevention and care, (2) use a whole person care approach, and (3) focus on health disparities and inequities using a social and racial justice lens. The plan will support the implementation of services that will help San Francisco reach the following city-wide goals:

- Get to and stay at zero new HIV infections, zero HIV-related deaths, and zero stigma
- Eliminate HCV
- Reverse increasing STI rates and prevent congenital syphilis

Community involvement, engagement, and leadership are crucial to the EtE initiative and SFDPH and its partners are committed to working closely with the community to ensure that EtE strategies and programs meet community needs. SFDPH has synthesized existing strategic plans from the HIV Community Planning Council (HCPC), Getting to Zero Consortium (GTZ), End Hep C SF, The Black/African American Health Initiative (BAAHI), and the Drug User Health Initiative and has developed a first, preliminary draft of the SF EtE plan. The existing plans included years’ worth of information and recommendations from community planning and engagement, including information from focus groups, listening sessions, surveys, planning bodies, advisory boards, and informal feedback. We are using this wealth of information as the foundation for the EtE planning process. We will build on existing community experience and expertise, and use creative and meaningful strategies to develop groundbreaking services with new and diverse partners. The aim is to not replicate what has already been done but to go to the next level. This involves developing an advisory process that is community led and community owned.

II. FUNDING OPPORTUNITY

Heluna Health is releasing this Request for Proposal (RFP) to solicit proposals for consultant services in the area of community engagement and strategic planning. This RFP is part of the Centers for Disease Prevention & Control – EtE Strategic Planning Process within the Community Health Equity & Promotion Branch of the SFDPH. The RFP is intended to identify
qualified applicants that can complete both time-limited specific tasks and provide ongoing strategic planning and technical assistance support. There are five (5) EtE Community Engagement Consultation grants available for $40,000 each.

<table>
<thead>
<tr>
<th>Total Funding Available: $200,000</th>
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<tbody>
<tr>
<td>Total Awards Anticipated: 5</td>
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<tr>
<td>Award ceiling: $40,000</td>
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<tr>
<td>Funding term is March 30, 2020 – September 30, 2020</td>
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The primary goal of this RFP is to support SFDPH to establish meaningful and ongoing community engagement pathways with five (5) San Francisco communities that are most impacted by HIV, HCV, and STIs (we recognize that the populations overlap):

1. Black/African Americans
2. Latinos/Latinas/Latinx
3. Trans Women
4. People who use drugs, including people who inject drugs
5. People experiencing homelessness

The funded applicants can be individuals, groups, agencies, or entities (applicants), will have deep connections to their community, and will be leaders in addressing issues that their community is facing. They will be able to design and facilitate a community advisory process that elicits community feedback; synthesize feedback from all the activities; and develop a report of recommendations for SFDPH. Collaboration with other agencies/entities/individuals is encouraged to ensure all activities are completed. Proposals must demonstrate the applicant’s capacity to accomplish all areas. Whether a proposal meets these qualifications and service requirements will be determined through a review and selection process. **An applicant can only apply for one (1) of the identified communities** (Black/African Americans; Latinos/Latinas/Latinx; Trans Women; People who use drugs, including people who inject drugs; OR People experiencing homelessness).

**III. APPLICATION TIMELINE**

**February 5, 2020**

This RFP is available online at [www.helunahealth.org](http://www.helunahealth.org/)

**February 5 – February 14, 2020**

**E-Question Period**

The e-question period is an opportunity to submit questions via email to hanna.hjord@sfdph.org. All e-questions must be received by 1:00pm PST on February 14, 2020. Responses to all e-questions will be published at [www.helunahealth.org](http://www.helunahealth.org) as time allows.

**February 28, 2020**

**Proposals Due**

Completed proposals must be received via email to Hanna Hjord, hanna.hjord@sfdph.org, by 5:00 pm on February 28,
2020. Late applications will not be accepted under any circumstances – no exceptions. After the date proposals are due, an External Review Panel will be convened to review all completed applications and make an award recommendation based on the evaluation criteria outlined in this RFP.

March 15, 2020  
**Award Decisions Announced**

Letters will be emailed to applications regarding award decisions no later than March 15, 2020.

Heluna Health and SFDPH will begin contract negotiations with agency selected for funding between March 1 and March 15, 2020.

March 30, 2020  
**Grant Period Begins**

The contracted agency should be ready to start on March 30, 2020.

September 30, 2020  
**Grant Period Ends**

**IV. APPLICATION REQUIREMENTS**

**A. Minimum Eligibility Criteria**

SFDPH is committed to diversity, inclusion, and broad-based community access, and to funding a variety of San Francisco’s community organizations, non-profit agencies, entities, and individual consultants. All qualified applicants are cordially invited to submit applications. However, failure to meet the minimum qualifications will eliminate applicants from further consideration for funding.

1. An applicant can be an agency, group, entity, or individual
2. Applicant must be in good financial standing according to generally accepted accounting practices
3. Applicant must demonstrate existing connection with and capacity to reach the community of interest (Black/African Americans; Latinos/Latinas/Latinx; Trans Women; People who use drugs, including people who inject drugs; or People experiencing homelessness)
4. Applicant must demonstrate experience and ability to engage the community of interest, in particular community members who are not engaged with SFDPH services, advisory groups, or other traditional community engagement groups
5. Applicant must demonstrate experience and ability to manage and facilitate the community engagement process
6. Applicant must demonstrate experience and ability to synthesize the information gathered from the community to develop clear recommendations to SFDPH.

7. Applicant must be able to submit three (3) references (include name of project, contact information and relationship) who have experience working with the applicant in the past 3 – 5 years.

8. Applicant must be able to demonstrate administrative capacity to enter into a business subcontract consultant agreement with a fiscal intermediary and capacity to complete work of high quality in a timely manner.

B. Program Requirements
   i. Applicant must attend regular (monthly) meetings with SFDPH staff in San Francisco.

   ii. Applicant must report out data in formats required by SFDPH.

   iii. Applicants must solicit feedback from the community related to the SF EtE plan, in particular from people and groups who are not already engaged in SFDPH services, advisory groups, or other traditional community engagement groups. The process has to include providing meaningful compensation (monetary and food) to community members for their time and expertise. **At least 20% of the budget must go directly to community advisory members.** The iterative feedback process will include 3 rounds (dates below are tentative):

   **Community Engagement Round 1:** SFDPH will provide the preliminary draft of the EtE plan to funded applicants who will review and pull out information relevant to their community and bring to their community for feedback. **Feedback and specific recommendations provided back to SFDPH by April 15, 2020.**

   **Community Engagement Round 2:** SFDPH will provide list of “big topics” to funded applicants who will bring it to their community for further discussion and feedback. A “big topic” might be something like “providing HIV/HCV/STI services in mobile settings.” **Feedback and recommendations provided back to SFDPH by May 15, 2020.**

   **Community Engagement Round 3:** Between June 6-July 15, review a comprehensive second draft of SF’s EtE plan, solicit feedback from community, and hold discussions to fine-tune remaining issues. **Feedback and recommendations provided back to SFDPH by July 15, 2020.**

   iv. Applicants must establish advisory group(s), process and pathway for continuous and meaningful dialogue with the community that will advise SFDPH on service design, delivery methods, and funding allocations on an ongoing future basis. The process has to include community leadership and skill building and providing meaningful compensation to community members for their time and expertise. **“Community engagement advisory process” proposals due to SFDPH June 30, 2020.**
C. Application Format

Please read all instructions carefully and include all information required. Incomplete applications may not be reviewed. The burden is on the applicant to demonstrate qualifications. Be advised that Heluan Health and SFDPH have the right to reject any and all proposals/applications.

- Use single-spaced line spacing, in Arial or Times New Roman font no less than 11 points, and 1" margins.
- Submit one electronic version of your application via email to hanna.hjord@sfdph.org, as a single PDF document.

D. Page Limits

Proposals must include:

<table>
<thead>
<tr>
<th>Document</th>
<th>Page limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cover letter</td>
<td>1</td>
</tr>
<tr>
<td>Proposal narrative</td>
<td>3</td>
</tr>
<tr>
<td>Budget</td>
<td>1</td>
</tr>
<tr>
<td>Budget justification</td>
<td>1</td>
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No attachments or supplemental material beyond the 8 pages above will be accepted, with the exception of two samples of relevant work.

E. Proposal Narrative Requirements

In a proposal narrative of up to 3 single-spaced pages, answer the following:

1. Applicant capacity (15 points)
   Provide an organizational description (Mission, goals and ethnic populations reached through previous work). Specifically, describe your experience working with the community that you are submitting the proposal for. Be sure to clearly address how you meet each of the minimum requirements in section IV.A. Explain why you believe you or your agency is well-positioned to reach the community, in particular members who are not part of existing SFDPH processes.

2. Connections with the community (25 points)
   Describe existing connections with your community (Black/African Americans; Latinos/Latinas/Latinx; Trans Women; People who use drugs, including people who inject drugs; or People experiencing homelessness). Please provide specific examples of work you have done showing deep community connections.

3. Proposed Community Engagement Strategies (30 points)
   Describe specific ideas and experiences related to engaging members who are typically not engaged in SFDPH processes or services.
   a. Provide creative and innovative strategies you propose to use
b. Describe why this would be effective with your community

c. Provide examples that show you have the ability to implement these strategies effectively

d. Describe how you will compensate community advisory members for their time and expertise; 20% of the budget must go directly to advisory members

4. Proposed Project Facilitation and Management (20 points)
   Describe how you will manage and facilitate the community engagement process.
   Describe how you will synthesize information and provide clear recommendations to SFDPH.
   Describe how you will ensure ongoing communication with SFDPH.
   Define the methodology for measuring success.

F. Budget Requirements (10 points)

Your proposal should contain a brief, one-page budget that covers the entire costs of the 6-month period. Budgets should realistically reflect the expected cost of your proposed services. However, totals should not exceed $40,000, including any direct and indirect costs. Applicants need not propose activities that will require a full $40,000.

It is the applicant’s responsibility to design a proposed scope of work that can be achieved within this funding limit. No additional expenses will be reimbursed so that the contractor can complete the deliverables of this project. Applicants are not permitted to budget for travel expenses as part of this project.

Budget must prioritize compensating community members for their time and expertise. At least 20% of the budget must go directly to advisory member. Budgets should be accompanied by a one-page budget justification that makes clear how the total amounts allocated in each line of your budget were calculated. Your budget justification should make it clear how the funding will actually be spent to achieve your proposed deliverables in the allotted time period.

Interested applicants should submit an application package of qualifications via a single PDF file that must contain ALL of the following information:

1. A Cover letter that includes: Summary of qualifications and experiences, specifically in response to all of the items under minimum qualifications – not scored
2. Proposal narrative (maximum 3 pages) which must respond to all items in the “Proposal Narrative” section below – 90
3. Budget and justification (maximum 3 pages) using the template provided
4. Three references (include contact information and relationship) that can describe a successful community engagement process that you have facilitated with the community in the past 3 – 5 years.
V. TERMS AND CONDITIONS

A. ERRORS AND OMISSIONS IN RFP
Applicants are responsible for reviewing all portions of this RFP. Applicants are to promptly notify SFDPH/CHEP in writing, if the applicant discovers any ambiguity, discrepancy, omission, or other error in the RFP. Any such notification should be directed to SFDPH/CHEP promptly after discovery, but in no event later than five working days prior to the date for receipt of proposals. Modifications and clarifications will be made by addenda as provided below.

B. INQUIRIES REGARDING RFP
Inquiries regarding the RFP and all oral notifications of an intent to request written modification or clarification of the RFP must be directed to: Hanna Hjord, hanna.hjord@sfdph.org

C. OBJECTIONS TO RFP TERMS
Should an applicant object on any ground to any provision or legal requirement set forth in this RFP, the applicant must, not more than ten calendar days after the RFP is issued, provide written notice to SFDPH/CHEP setting forth with specificity the grounds for the objection. The failure of an applicant to object in the manner set forth in this paragraph shall constitute a complete and irrevocable waiver of any such objection.

D. CHANGE NOTICES
SFDPH/CHEP may modify the RFP, prior to the proposal due date, by issuing Change Notices, which will be posted at http://www.endhepcsf.org/request-proposals-for-video-creation-and-launch/. The applicant shall be responsible for ensuring that its proposal reflects any and all Change Notices issued by End Hep C SF prior to the proposal due date, regardless of when the proposal is submitted. Therefore, End Hep C SF recommends that the applicant consult the website frequently, including shortly before the proposal due date, to determine if the applicant has downloaded all Change Notices.

E. REVISION OF PROPOSAL
An applicant may revise their proposal at any time before the deadline for submission of proposals. The applicant must submit the revised proposal in the same manner as the original, and it must clearly be marked as ‘REVISED’ on the envelope and in the footer of the proposal package itself. A revised proposal must be received on or before the proposal due date. No revisions will be accepted after the due date for proposals. At any time during the proposal evaluation process, SFDPH/CHEP may contact the applicant for clarification or correction of minor errors or deficiencies in their proposals prior to deeming a proposal to be non-responsive. Clarifications are “limited exchanges” between SFDPH/CHEP and a proposer for the purpose of clarifying certain aspects of the proposal, and do not give a proposer the opportunity to revise or modify its proposal in any way other than the requested clarification. Minor errors or deficiencies are defined as those that do not materially impact SFDPH/CHEP’s evaluation of the proposal; for example, failing to label a “revised” proposal as “revised”.

F. ERRORS AND OMISSIONS IN PROPOSAL
Failure by SFDPH/CHEP to object to an error, omission, or deviation in the proposal will in no way modify the RFP or excuse the vendor from full compliance with the 9 specifications of the RFP or any contract awarded pursuant to the RFP.
G. FINANCIAL RESPONSIBILITY
SFDPH/CHEP accepts no financial responsibility for any costs incurred by an agency in responding to this RFP.

VI. GRANT AWARD PROCESS

A. APPLICATION SCREENING
CHEP will screen applications to ensure that they meet the minimum eligibility requirements and are eligible for review before being forwarded to the Review Panel. Three basic requirements must be met for applications to merit further review. This preliminary staff screening is not a qualitative review. All applications that meet the following eligibility criteria are forwarded to the Review Panel for evaluation:
1. Received by deadline (late applications will not be accepted)
2. Completeness (incomplete applications may not be reviewed)
3. Address the RFP minimum eligibility criteria (Applications that do not meet the criteria are disqualified from further consideration)

B. REVIEW PANEL
The proposals will be evaluated by a Review Panel composed of individuals familiar with community engagement strategies and HIV/HCV/STI-related service provision for key populations. Members of the Panel will not be affiliated with any agency submitting a proposal in response to this RFP, and will be screened for real or perceived conflicts of interest prior to assignment. The Panel is established to review, discuss, score, and make an award recommendation regarding applications based on the evaluation criteria outlined herein. Reviewers will evaluate only the application materials submitted and base their scoring strictly on the requirements of the RFP and the contents of the application. CHEP staff will review award recommendations and make all final decisions.

C. EVALUATION CRITERIA
The Review Panel will assess and score applications according to the following matrix:

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<thead>
<tr>
<th>Category</th>
<th>Scoring Considerations</th>
<th>Max Pts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant Capacity</td>
<td>• How well does the applicant meet the minimum requirements?</td>
<td>15</td>
</tr>
<tr>
<td>Connections with the community</td>
<td>• Did the applicant clearly describe their connections with the community?</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>• Did the applicant provide examples of work with the community that show those connections?</td>
<td></td>
</tr>
<tr>
<td>Proposed Community Engagement Strategies</td>
<td>• Did the applicant describe innovative and creative strategies for engaging the community?</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>• Did the applicant describe creative and innovative strategies for engaging new members of the community who are not part of SFDPH processes?</td>
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<tr>
<td></td>
<td>• Did the applicant provide examples of why these strategies will be effective?</td>
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<tr>
<td></td>
<td>• Did the applicant provide examples that show their ability to implement the proposed strategies?</td>
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<td></td>
<td>• Did the applicant describe how community members will be compensated?</td>
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• Do the proposed strategies for producing the deliverables seem reasonable and feasible given the timeline?

**Proposed Project Facilitation and Management**
• Did the applicant clearly describe how they will facilitate and manage the project?
• Did the applicant describe how they will synthesize the information and provide clear recommendations?
• Did the applicant describe how they will measure success?

**Budget and Budget Justification**
• Do the total budget and line-item budget allocations seem reasonable for the scope of work proposed?
• Does the budget justification provide clear information about how all budget subtotals were calculated?
• Does the total budget remain at or below the $40,000 cap?
• Is at least 20% of the budget allocated to compensation for community advisory members?
• Given the proposed campaign design (including final products), does the application seem to be a good value?

**MAXIMUM POSSIBLE POINTS**

D. FINAL DETERMINATION
Final decisions regarding a proposal award will be made by SFPDH/CHEP, after scoring and recommendations have been received by the Review Panel. No appeals will be permitted. Panel members and staff deemed to have any real or perceived conflict of interest with any proposing organization will be excluded from the process for determination of awards. Recommendation by the Review Panel of any proposal for funding shall not imply acceptance by SFPDH/CHEP of all terms of the proposal, which may be subject to further negotiations and approvals before contracts are finalized. Staff members of SFPDH/CHEP will initiate the process for formalizing grant agreements. Funding may be contingent upon the submission of additional information, budget revisions, and/or program design changes. If a satisfactory contract cannot be negotiated in a reasonable amount of time, SFPDH/CHEP, in its sole discretion, may terminate negotiations with the applicant and begin contract negotiations with another applicant.

Responses required by Friday February 28, 2020 by 5:00p
No telephone calls or emails inquiries will be accepted.
Please email responses with the phrase “Community Engagement Consultation RFP” in the subject line to:
Hanna.Hjord@sfdph.org