

**RFA # 1408120402**  
**Grants Gateway # DOH01-AIHTSA-2015 (Component A)**  
**Grants Gateway # DOH01-AIHTSB-2015 (Component B)**  
**Grants Gateway # DOH01-AIHTSC-2015 (Component C)**

**New York State Department of Health**  
**AIDS Institute Office of the Medical Director**  
**and**  
**Health Research, Inc.**

**Request for Applications**  
**Internal Program # 14-0001**

**This is a procurement which encompasses 3 components.**  
**In order to apply for any of the three components, applicants must submit separate applications for each Component on the New York State Grants Gateway.**

*HIV/Sexually Transmitted Infections/Viral Hepatitis Training Services*

**Component A: Regional Training Centers**  
**Component B: Topic Specific Centers of Expertise**  
**Component C: Centers of Expertise in On-Line Training**

<b>RFA Release Date:</b>	<b>September 18, 2014</b>
<b>Deadline to Submit Questions:</b>	<b>October 2, 2014</b>
<b>RFA Updates and Questions and Answers Posted:</b>	<b>October 16, 2014</b>
<b>Letters of Interest Due:</b>	<b>October 23, 2014</b>
<b>Applications Due:</b>	<b>November 6, 2014 by 4:00 p.m.</b>

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**Table of Contents**

<b>I. INTRODUCTION</b>	<b>4</b>
A. Description of Program	4
B. Background/Intent	4
C. Overall Goals of Training Initiative	4
D. Support of the NYS Prevention Agenda 2013-2017	6
E. Overview of the Components of the RFA	6
<b>II. COMPONENT A: Regional Training Centers</b>	<b>7</b>
A. Who May Apply	7
1. Minimum Eligibility Requirements – Component A	7
2. Preferred Eligibility Requirements – Component A	8
B. Available Funding – Component A	8
C. Project Narrative/Work Plan Outcomes	8
1. Expectations of the Project: Component A – Regional Training Centers	8
2. Staffing	10
3. Additional Details	11
<b>III. COMPONENT B: TOPIC-SPECIFIC Centers of Expertise</b>	<b>11</b>
A. Who May Apply	16
1. Minimum Eligibility Requirements – Component B	16
2. Preferred Eligibility Requirements – Component B	17
B. Available Funding – Component B	17
C. Project Narrative / Workplan Objectives	17
1. Expectations of the Project: Component B – Topic Specific Centers of Expertise	17
2. Staffing	18
3. Additional Details	19
<b>IV. COMPONENT C: Center of Expertise in On-Line Training:</b>	<b>20</b>
A. Who May Apply	20
1. Minimum Eligibility Requirements – Component C	20
2. Preferred Eligibility Requirements – Component C	20
B. Available Funding – Component C	21
C. Project Narrative/Work Plan Outcomes	21
1. Expectations of the Project: Component C – Center of Expertise in On-Line Training	21
2. Staffing	22

<b>V. Administrative Requirements</b>	<b>22</b>
A. Issuing Agencies	22
B. Question and Answer Phase	23
C. Letter of Interest	24
D. Applicant Conference	24
E. How to File an Application	24
F. Department of Health and HRI's Reserved Rights	25
G. Term of Contract	26
H. Payment and Reporting Requirements of Grant Awardees	26
I. Minority & Woman-Owned Business Enterprise Requirements	28
J. Limits on Administrative Expenses and Executive Compensation	29
K. Vendor Identification Number	29
L. Vendor Responsibility Questionnaire	30
M. Vendor Prequalification for Not-for-Profits	30
N. General Specifications	32
O. HRI General Terms and Conditions	33
<b>VI. Completing the Application</b>	<b>34</b>
A. Application Format/Content	34
Component A: Regional Training Centers	34
Component B: Topic-Specific Centers of Expertise	39
Component C: Center of Expertise in On-Line Training	40
B. Freedom of Information Law	46
C. Review Process	47
<b>VIII. Attachments to the RFA</b>	<b>48</b>

## **I. INTRODUCTION**

### **A. Description of Program**

HIV Education and Training Programs of the Office of the Medical Director, AIDS Institute, New York State Department of Health (NYSDOH) and Health Research Inc. (HRI) is responsible for coordinating training activities to support the effectiveness of non-physician health and human services providers and public health staff in providing a range of services related to HIV, sexually transmitted infections (STIs) and viral hepatitis. This program will fund the provision of professional training interventions designed to help health and human services providers implement the strategies outlined in Governor Cuomo's three point plan to end the AIDS epidemic in New York State. The initiative will provide training that will help further the goals of the National HIV/AIDS Strategy as well as AIDS Institute priorities including: increasing HIV viral load suppression; maximizing participation in health insurance programs; reducing new HIV and STD infections among gay men and men who have sex with men; enhancing efforts to address Hepatitis C; and, promoting sexual health awareness and early identification and treatment of STIs. Training programs will enhance the capacity of the target audience to: deliver high impact primary, secondary and tertiary prevention interventions to persons at highest risk for HIV, STIs and viral hepatitis; conduct outreach to engage "hard to reach" populations; deliver streamlined HIV counseling and testing services in accordance with state law and regulation; offer integrated screening; make appropriate referrals to partner services programs; support treatment adherence, linkage and retention in health care; maximize participation in health insurance programs; and provide a range of case management, care management and support services to persons living with HIV and chronic viral hepatitis.

### **B. Background/Intent**

The purpose of this Request for Applications (RFA) is to identify a pool of qualified training contractors to deliver an array of training and educational interventions throughout New York State. Training and educational interventions will include delivery of in-person trainings, conferences, seminars and production of distance education training such as live webinars, archived webinars, web-based trainings, digital learning tools and other emerging distance learning technologies. Training contractors will deliver existing and new NYSDOH developed trainings, develop new training programs at the request of the NYSDOH and deliver trainings on evidence based prevention interventions. Training centers will be expected to tailor trainings to meet unique regional or population specific needs.

### **C. Overall Goals of Training Initiative**

The goal of this initiative is to support New York State's effort to end the AIDS epidemic by 2020 by preparing non-physician health and human services providers and the public health workforce to effectively address HIV, STIs and viral hepatitis in the course of their work. As a result of this training initiative, non-physician health and human services providers throughout New York State will:

1. Improve their capacity to implement the strategies outlined in New York's three point plan to end the AIDS epidemic;

2. Improve their awareness of other emerging issues in HIV, STIs and viral hepatitis;
3. Increase their awareness about the syndemic of HIV, STIs and viral hepatitis;
4. Increase their awareness about the social determinants (poverty, stigma, drug use, etc.) of health for individuals living with and affected by HIV/STI and viral hepatitis;
5. Increase their capacity to offer screening and testing for HIV, STIs and viral hepatitis in accordance with NYS law, regulations, clinical guidelines and best practices;
6. Improve their knowledge of available health coverage options and be able to provide clients with referrals to enroll in Medicaid, New York State of Health – New York’s Official Health Plan Marketplace and HIV Uninsured Care Programs / ADAP;
7. Increase their capacity to promote HIV treatment adherence, linkage and retention in HIV care;
8. Identify strategies to promote effective collaboration between support services providers and clinical providers to improve patient health outcomes;
9. Increase their capacity to identify and reduce new HIV/STI infections among gay men, men who have sex with men (MSM) and transgendered individuals;
10. Increase their ability to assist eligible clients in accessing non-occupational post exposure prophylaxis (PEP) and HIV pre-exposure prophylaxis (PrEP) in accordance with clinical guidelines;
11. Increase their capacity to apply harm reduction and other strategies to promote drug user health;
12. Increase their capacity to educate clients, their families and communities about strategies for avoiding opioid overdose and administer naloxone in cases of suspected opioid overdose in accordance with state regulation;
13. Increase their awareness of the New York State HIV Clinical Guidelines and ensure that support services are consistent with the intent of these clinical guidelines;
14. Build skills in implementing evidence based interventions;
15. Increase their ability to provide non-judgmental and compassionate services;
16. Increase their knowledge of how HIV, STIs and viral hepatitis affect individuals throughout the life cycle;
17. Improve their ability to provide culturally-relevant services to all clients, including clients who are: gay, lesbian, bi-sexual and transgendered, from underserved communities; youth, mature adults, substance users, formerly incarcerated, from communities of color, limited in English proficiency, limited in health literacy skills;
18. Identify strategies to improve access to health insurance coverage for persons living with and affected by HIV/STIs and viral hepatitis;
19. Improve their ability to evaluate the services they offer.

In order to meet these goals, the AIDS Institute is seeking to identify a pool of qualified training contractors with expertise in HIV, STIs and viral hepatitis staff development, curriculum development, training, distance education and adult education. Funded applicants are expected to remain abreast of the latest clinical guidelines for the care and treatment of HIV/STIs and viral hepatitis. All funded training centers will be expected to coordinate training activities with each other, AIDS Institute funded Clinical Education Initiative sites, federally funded regional AIDS Education and Training Center sites, and with other federally funded training initiatives including the CDC Prevention Training Centers, HRSA’s Title X Training Centers and SAMSHA’s Addiction Technology Transfer Centers.

#### D. Support of the NYS Prevention Agenda 2013-2017

In keeping with the NYSDOH's efforts to improve the health of all New Yorkers, HIV Education and Training Programs will request that organizations funded under this RFA be available to assist in the implementation of the *NYS Prevention Agenda 2013-2017*. Developed by a diverse group of stakeholders, the *Prevention Agenda 2013-2017* is a comprehensive plan which identifies goals, measurable objectives and a range of evidence based and promising practices in five priority areas that can be implemented by public health, health care settings and community partners. The *Prevention Agenda 2013-2017* focuses on the social determinants of health and on health disparities along racial, ethnic, and socioeconomic lines. Under this RFA, funded organizations may be asked to devote a portion of their deliverables to assisting local health departments in their efforts to meet the goals and implement activities outlined in the *Prevention Agenda 2013-2017*.

#### E. Overview of the Components of the RFA

This Request for Applications is organized as three distinct funding components as follows:

<b>Overview of RFA Components</b>		
<b>Component A: Regional Training Centers</b>		
<b>Region</b>	<b>Awards Per Region</b>	<b>Annual Funding</b>
New York City & Long Island	1	\$175,000
New York City & Mid-Hudson	1	\$175,000
Upstate NY	1	\$175,000
<b>Total Awards for Component A</b>	<b>3</b>	<b>\$525,000</b>
<b>Component B: Topic-Specific Centers of Expertise</b>		
Drug User Health and Opioid Overdose Prevention	1	\$270,000
Hepatitis C and HIV/Hepatitis C Co-Infection	1	\$110,000
Promoting Sexual Health, HIV/STI/Hepatitis C Health Care and Secondary Prevention for Gay Men, MSM and Transgender Individuals	1	\$120,000
Legal Issues	1	\$75,000
<b>Total Awards for Component B</b>	<b>4</b>	<b>\$575,000</b>
<b>Component C: Center of Expertise in On-Line Training</b>		
On-Line Training Center	1	\$220,593
<b>Total Awards for Component C</b>	<b>1</b>	<b>\$220,593</b>
<b>GRAND TOTAL PER YEAR</b>	<b>8</b>	<b>\$1,320,593</b>

Applicants may apply for one, two or all three components of the RFA. In addition, under Component A, applicants may apply for more than one region and under Component B, there is no limit on the number of topic areas for which an applicant may apply. However, separate and complete applications must be submitted for each component or subcomponent for which the applicant is seeking funding.

## **II. COMPONENT A: Regional Training Centers**

Regional Training Centers will be responsible for developing and delivering a mix of in-person trainings, webinars and emerging distance education technologies on an array of topics related to HIV, STIs and viral hepatitis in a specifically defined region of the state. The AIDS Institute anticipates contracting with **three (3)** organizations to serve as Regional Training Centers. Funded applicants will have the capacity to meet the training needs of the target audience throughout the entire region for which they are applying. For the definition of regions, please see Section C below.

### **A. Who May Apply**

#### **1. Minimum Eligibility Requirements – Component A**

- Local health departments, not-for-profit community-based organizations, academic institutions, hospitals, professional educational organizations, tribal organizations and not-for-profit training organizations, with a minimum of three years of experience delivering training or technical assistance in the area of HIV, STIs and viral hepatitis, are eligible to apply.
- All applicants must be registered in the New York State Grants Gateway and have prequalified status (if not exempt) on the date the application is due. Applications submitted by organizations that do not have prequalified status on the Grants Gateway will be rejected and will not be considered.
- Applicants must be prepared to provide a mix of in-person and distance learning trainings throughout the designated region.
- Applicants may apply for more than one component of the RFA and under Component A may apply for more than one region. However, separate, complete applications must be submitted for each component and for each region for which the applicant is seeking funding.
- Applicant must maintain an active registration in the System for Award Management (SAM) at SAM.gov, have no exclusions or delinquent federal debt.

## 2. Preferred Eligibility Requirements – Component A

Preference will be given to applicants who:

- Demonstrate a history of at least five (5) years of experience in the effective oversight of administrative, fiscal, and programmatic aspects of government contracts, including timely and accurate submission of fiscal and program reports.

### B. Available Funding – Component A

**A total of \$525,000 annually in State funds is anticipated to support training initiatives.** The NYSDOH reserves the right to revise the award amounts as necessary due to changes in availability of funding.

Below is a table outlining training regions for Component A: Regional Training Centers. The table also identifies the anticipated number of awards per region and total funding per region. The total awards per region were determined based on available resources and several sources of data including: HIV/AIDS rates, Community Need Index and past training attendance.

<b>Region</b>	<b>Awards Per Region</b>	<b>Annual Funding Per Region</b>
New York City & Long Island	1	\$175,000
New York City & Mid-Hudson	1	\$175,000
Upstate NY	1	\$175,000
<b>Total Awards and Funds Available</b>	<b>3</b>	<b>\$525,000</b>

For Component A, awards will be made to the highest scoring applicant in each region. If there are an insufficient number of acceptable applications (scoring 70 or above) received from any region, the NYSDOH AI and HRI will award the highest scoring applicant(s) that scored in the marginal range (60-69) from that region (remedial actions will be taken due to score). In cases where two or more applicants are judged on the basis of their written proposals to be equal in quality, the applicant with the highest score in Section 6: Workplan would be selected for funding. If there are an insufficient number of applicants in the marginal range, AI and HRI will re-solicit this portion of the RFA.

### C. Project Narrative/Work Plan Outcomes

#### 1. Expectations of the Project: Component A – Regional Training Centers

The AIDS Institute has been offering training to non-physician health and human services providers and public health staff throughout New York State since 1986. In 2012, HIV Education and Training Programs funded Regional Training Centers trained over 5,000 non-physician health and human services providers. New York State DOH approved training curricula or training outlines are available for the following topic areas:

- Sex, Gender and HIV/STIs
- Addressing Sexual Risk with Drug Users and Their Partners

- Promoting Primary Care and Treatment Adherence for HIV Positive Individuals
- Prevention with HIV Positive Persons
- HIV and Viral Hepatitis
- Enhanced Outreach
- Behavioral Counseling
- Case Management/Care Management
- Harm Reduction
- HIV Counseling, Testing, Referral and Partner Notification
- Hepatitis C Screening
- Integrated Screening for HIV and Hepatitis C
- Promoting Sexual Health for Young MSM of Color
- Aging and HIV, STIs and Viral Hepatitis
- Managing Patients with Co-occurring Disorders of Substance Use, Mental Health & Trauma
- Sexual Health and Gender Identity
- Health Insurance Coverage: Medicare, Medicaid, Health Insurance Exchange, Health Care Reform, Health Homes
- Other topics, visit DOH website- [www.hivtrainingny.org/](http://www.hivtrainingny.org/)

In conjunction with the AIDS Institute, Regional Training Centers assess training needs in their regions through development and distribution of surveys, active and on-going participation on relevant community task forces, planning bodies and on-going dialogue with providers. Additional training curricula are developed by the AIDS Institute, the Regional Training Centers, or AIDS Institute funded Topic Specific Centers of Expertise on an as needed basis.

Applicants funded to serve as Regional Training Centers will be prepared to deliver a mix of in-person and distance education trainings to ensure access to trainings for health and human services providers throughout their designated region. Applicants should carefully review the following list of counties to be included in each defined region:

NYC & Long Island: including the five boroughs, Nassau and Suffolk counties

NYC & Mid-Hudson: including the five boroughs and Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster and Westchester counties

Upstate NY: including counties of Albany, Greene, Columbia, Rensselaer, Schoharie, Schenectady, Saratoga, Fulton, Essex, Montgomery, Hamilton, Franklin, Clinton, Warren, Washington, Steuben, Schuyler, Yates, Seneca, Ontario, Livingston, Monroe, Wayne, St. Lawrence, Jefferson, Lewis, Oswego, Oneida, Herkimer, Onondaga, Madison, Cayuga, Chemung, Tioga, Broome, Tompkins, Delaware, Cortland, Chenango, Otsego, Niagara, Orleans, Genesee, Erie, Wyoming, Chautauqua, Cattaraugus, Allegany

Under the guidance of the AIDS Institute, Regional Training Centers will:

- Deliver a mix of in-person and distance learning trainings related to HIV, STIs and viral hepatitis throughout the identified region;

- Develop regional training calendars based on needs assessment and guidance from the AIDS Institute;
- Coordinate delivery of trainings with the AIDS Institute’s Clinical Education Initiative, AIDS Education and Training Centers and other entities that offer related trainings;
- Post information about the initiative, training calendars and other promotional information on the applicant’s web site;
- Promote trainings to non-AI funded providers that interface with clients living with and affected by HIV/STI and viral hepatitis, including Health Homes, Area Associations on Aging, OASAS-funded providers, Correctional settings and others;
- Create and implement a marketing plan using all appropriate media to promote trainings on a regional basis;
- Provide training and technical assistance to local health departments;
- Provide on-site technical assistance to DOH funded providers as directed by the AIDS Institute;
- Interface with the New York State Department of Health’s centralized, online learning management website (<http://www.hivtrainingny.org/>) to conduct training registration activities, track and report training data, ensure quality training data, confirm participant registration, send appropriate reminders and document participant attendance;
- Develop training materials for non-physician health and human services providers including trainer manuals, participant manuals, slides, handout materials, interactive exercises, role plays, values clarification activities and other educational activities consistent with adult learning principles;
- Tailor training delivery to meet the unique needs of the training audience; and
- Provide training staff that are representative of the target audience, well versed in the latest New York State HIV Clinical Guidelines and well informed about new developments in the field.

## 2. Staffing

Contractors will provide qualified administrators, clerical staff, trainers and approved consultants to perform contract related activities. Below are program standards for these positions. Applicants with the following positions will be best prepared to successfully administer training programs:

- **Program Manager** – Master’s degree and five years of professional administrative level experience in a public health or human services-related field providing programmatic and fiscal oversight activities, including at least three years of experience overseeing professional training programs. An effective program manager will have experience in training, coordinating activities with community-based and governmental organizations, program development and implementation, evaluation of training programs and have excellent interpersonal skills.
- **Lead Trainer** – Master’s degree and at least three years of professional training in the fields of HIV, STIs and viral hepatitis. Five years of training experience and a bachelor’s degree may substitute for a Master’s degree. The Program Manager and Lead Trainer may be the same person.

- **Trainers and consultants** – the minimum standard is a Bachelor’s degree, demonstrated training skills and appropriate experience and qualifications in the topics they will train.
- **Access to a Pool of Consultants** – Regional Training Centers will be best able to offer trainings on the full range of expected topics when they have access to a pool of consultants with diverse expertise.
- Resumes and credentials of staff and consultants are subject to approval by the AIDS Institute. All appropriate staff and consultants will attend and successfully complete train-the-trainer programs provided by the AIDS Institute or an approved contractor. Training centers will be responsible for ensuring all consultant trainers are fully prepared to deliver trainings for which they are assigned as primary or back-up trainers.

### 3. Additional Details

- Regional Training Centers should be prepared to print approximately 30 pages of handouts per participant, per training.
- Regional Training Centers are expected to create a training environment reflective of the diverse population of providers being trained and the communities they serve. To accomplish this, training centers are expected to display posters and other images showing diversity with regards to race, ethnicity, age and people with disabilities. Regional Training Centers are also expected to display Safe Zone statements indicating the center is a safe environment for gay, lesbian, bi-sexual and transgendered people.
- Applicants may subcontract components of the scope of work. For those applicants that propose subcontracting, it is preferable to identify subcontracting agencies during the application process. Applicants that plan to subcontract are expected to state in the application the specific components of the scope of work to be performed through subcontracts. Applicants should note that the lead organization (contractor) will have overall responsibility for all contract activities, including those performed by subcontractors, and will be the primary contact for the DOH. All subcontractors should be approved by the Department of Health.

### III. COMPONENT B: TOPIC-SPECIFIC Centers of Expertise

Topic-specific Centers of Expertise will develop training curricula and deliver a mix of in-person trainings, webinars and emerging distance education technologies on specialized topic areas. Centers of Expertise must offer trainings statewide with the specific locations for in-person training determined in concert with the AIDS Institute. Pending availability of funds, Centers of Expertise will be established in the following topic-specific areas:

#### ***Topic# 1: Drug User Health and Opioid Overdose Prevention***

The 2013 New York State Prevention Agenda indicates that, based on estimates from the NYS Office of Alcoholism and Substance Abuse Services (OASAS), more than 1.9 million

New York residents have a substance abuse problem. It is estimated that 1 in 13 NYS residents suffers from a substance abuse disorder, including 1.77 million adults and 156,000 youths (12-17 years). Drug overdose is a significant problem in New York State. As a direct consequence of drug use, 1,848 persons died in New York in 2012. Based on post-mortem toxicologies, 478 of these deceased New Yorkers had heroin in their systems. In 879 of these deaths, opioid analgesics were involved.

New York State is leading the nation in promoting a comprehensive effort to prevent and respond to opioid overdose. Efforts are being made on multiple fronts to educate communities about how to prevent opioid overdose and to prepare a wide range of professionals and citizens to respond in the event of a suspected opioid overdose. The NYS Opioid Overdose Prevention Program authorizes community based organizations to prepare lay-responders to administer naloxone in cases of suspected opioid overdose. The NYSDOH partners with the Division of Criminal Justice Services, OASAS, and other state and local agencies to prepare first responders including Emergency Medical Services personnel, law enforcement officers and fire fighters to recognize opioid overdose and administer naloxone to reverse overdose. In addition, collaborative efforts are being undertaken with SUNY, CUNY and other universities and colleges to educate students about how to avoid opioid overdose and prepare a wide range of campus staff to respond in cases of suspected overdose.

NYS's policies that promote access to sterile syringes have led to a dramatic reduction in new cases of HIV among injection drug users. In 2011, injection drug use accounted for only 4% of new cases of HIV infection. Reports indicate that drug users are now more likely to become infected with HIV through sexual practices than shared injection drug use. To complicate HIV risk further, certain "designer club drugs", crystal methamphetamine, bath salts and other substances may be used for the specific purpose of enhancing sexual activity, thus leading to increased risk for HIV and STIs.

While the percent of new cases of HIV via injection drug use is at an all-time low, persons with a history of injection drug use still comprise 16.6% of male and 18.8% of female cases of HIV/AIDS. Among those living with HIV/AIDS who continue to engage in active drug use, there is a need for additional levels of support to access health care, remain in care and adhere to HIV treatments.

This Center of Expertise will be charged with developing a range of training interventions designed to:

1. promote drug user health, especially those living with chronic HIV or HCV;
2. build capacity of a wide range of health, social service and first responder agencies to educate communities about opioid overdose prevention and respond to cases of suspected opioid overdose.

#### Drug User Health

This Center of Expertise will work with the AIDS Institute to conduct provider training need assessments and define specific topics for curriculum development. It is anticipated that training content will be developed to focus on: improving drug user access to and participation in health care, including health coverage; linkage and retention in care and treatment adherence for drug users living with HIV/HCV; co-occurring substance use and

mental health issues; quality of life and pain management for drug users; engaging young injectors in screening, prevention and health care; club drugs, sexual harm reduction and early screening and treatment of HIV/STDs; and, other emerging topics in substance use.

### Opioid Overdose Prevention

1. The Center of Expertise will recruit, provide training curricula and technical assistance to enlist eligible community organizations as NYS Opioid Overdose Prevention Programs;
2. The Center will work with the DOH and its other partners to expand capacity of first responders, including EMS, law enforcement officers and fire fighters. This training center will work under the direction of the NYSDOH to prepare tools, training materials and deliver training and training of trainers program to prepare first responders to reverse opioid overdose;
3. The Center will work with the DOH and its other partners to meet the state's objectives with regard to opioid overdose prevention and response on university and college campuses; and,
4. This training center of expertise will partner with the NYSDOH in all aspects of its Opioid Overdose Prevention Programs including strategic planning, evaluation and quality assurance reviews.

The Center of Expertise will work with the AIDS Institute and the On-Line Training Center to determine those training topics that are best suited for on-line training.

### ***Topic # 2: Hepatitis C and HIV/Hepatitis C Co-Infection***

Hepatitis C Virus (HCV) infection is estimated to be the most common chronic blood borne infection in the US. HCV can cause liver inflammation and lead to liver cirrhosis, liver cancer, liver failure and death. HCV mortality rates have been rising throughout the last decade and in 2006, the number of HCV related deaths in the nation exceeded that of HIV. In addition, liver disease associated with HCV infection is a leading cause of death among people living with HIV.

Over the last several years, there have been significant advances in screening, treatment and important developments in policy issues related to HCV. The Institute of Medicine released its report titled: *Hepatitis and Liver Cancer: A National Strategy for Prevention and Control of Hepatitis B and C* and this was quickly followed by release of the US Health and Human Services Viral Hepatitis Action Plan which outlined a range of activities for public health, health care providers and community based organizations. The report emphasized the need to expand efforts toward community education, professional training, increasing access to counseling, testing and referral, and improve access to health care and treatment for people with chronic viral hepatitis. The first CLIA-waived rapid HCV screening kit became available in 2012 and in 2013 the testing algorithm to confirm chronic HCV infection was revised. Due to high prevalence rates of HCV among "baby boomers," in 2013, the CDC released recommendations regarding one-time HCV screening for all persons born between 1945 and 1965. New York State also passed a public health law requiring the one-time offer of HCV screening for this group, with the law becoming effective in January, 2014. Increasing reports in the literature, including studies conducted in New York, indicate

growing concern about a new wave of HCV infection among young people who inject drugs. On the positive side, the coming years offer great promise for HCV treatments that will have improved tolerability and efficacy.

This Center of Expertise will be charged with developing a range of training interventions designed to prepare non-physician health and human services providers to deliver HCV prevention services, conduct outreach, conduct screening via rapid and conventional testing methods, facilitate support groups, link patients with chronic infection to health care; provide an array of support services and work with clients who have HIV/HCV co-infection. As of 2013, AIDS Institute funded training centers developed the following distinct training curricula on this topic: It's Time: Integrate Viral Hepatitis into Your Work; Integrated Screening for HIV and Hepatitis C; Rapid Screening for HCV; Overview of Viral Hepatitis; HCV Peer Training; HCV Support Group Training; HCV Linkage to Care training.

The range of interventions to be developed by this Center of Expertise shall include: in-person trainings, seminars, regional conferences, webinars, written materials and on-line trainings in conjunction with the On-Line Training Center. This Center of Expertise will work with the AIDS Institute to conduct provider training need assessments and define specific topics for curriculum development. It is anticipated that training content will be developed on topics such as: HCV screening and linkage to care; integrated HIV/STI/Hepatitis Screening; new developments in treatment; addressing substance use and mental health issues; working with young injectors; and a host of issues related to HIV/HCV co-infection. The Center of Expertise will work with the AIDS Institute and the On-Line Training Center to determine those training topics that are best suited for On-line training.

### ***Topic # 3: Promoting Sexual Health, HIV/STI/Hepatitis C Health Care and Secondary Prevention for Gay Men, MSM and Transgender Individuals***

The latest NYS epidemiological data (2010) demonstrates that men who have sex with men (MSM) represent the largest number of persons living with HIV/AIDS in NYS, comprising 34% of all cases. Between 2002 and 2011, new HIV diagnoses declined by 39% in NYS, from 6,072 to 3,732 new cases annually. However, during this same timeframe, new diagnoses among MSM rose 3%. MSM comprised approximately one half of all new HIV diagnoses and two-thirds of new male diagnoses in 2011. The increase in new HIV diagnoses among MSM is concentrated among the youngest age groups, with new annual diagnoses among MSM in the 13 to 25 age group nearly doubling between 2002 and 2011 (from 291 cases to 576 cases.). Gay men and MSM are also disproportionately impacted by STDs. For example, in 2010, males accounted for 92% of early syphilis cases in NYS and, of these male cases, 86% were among MSM.

A study published by Nuttbrock et al. in 2009, interviewed a total of 517 transgender women living in the New York Metropolitan area about risk factors for HIV/STDs and conducted testing for HIV, syphilis, hepatitis B, and HCV. The percentage of white transgender women with HIV/STDs was 3.5% for HIV, 1.4% for syphilis, 6.5% for hepatitis B, and 3.6% for HCV. Meanwhile, nearly half of black and Hispanic transgender women were HIV positive (49.6% and 48.1%, respectively), with corresponding rates of syphilis (blacks: 21.6%; Hispanics: 14.7%), hepatitis B (blacks: 36.0%; Hispanics: 35.5%), and hepatitis C (blacks:

15.7%; Hispanics: 7.4%). In addition, according to a 2010 survey involving 7,000 people conducted by the National Center for Transgender Equality and the National Gay and Lesbian Task Force, twenty-eight percent of transgender and gender nonconforming people postponed medical care when they were sick or injured due to concerns about discrimination.

This Center of Expertise will be charged with developing a range of training interventions designed to prepare non-physician health and human services providers to work with gay men, MSM and transgender individuals to: promote sexual health; encourage HIV/STI/hepatitis C screening; address barriers to health care and treatment adherence; and promote secondary prevention with a focus on avoiding transmission of HIV to sexual or needle sharing partners. As of 2013, AIDS Institute funded training centers developed distinct training curricula on the following topics related to gay men, MSM and transgender individuals: Sex, Gender and HIV/ STIs; Promoting Sexual Health Among Young MSM of Color; Surviving and Thriving: Older Gay and MSM Living with HIV/ AIDS; and others. This Center of Expertise will work with the AIDS Institute to conduct provider need assessments and define specific topics for curriculum development. The range of training interventions to be developed shall include: in-person trainings, seminars, regional conferences, webinars, narrated slidesets, written materials and on-line trainings in conjunction with the On-Line Training Center. The Center of Expertise will work with the AIDS Institute and the On-Line Training Center to determine those training topics that are best suited for On-line training.

#### ***Topic # 4: Legal Issues***

Efforts to address legal issues including discrimination and stigma have been a critical component of New York's response to HIV/AIDS since early in the epidemic. Since early in the epidemic, the AIDS Institute has funded a training center with qualified legal staff to educate health and human services providers about a wide range of legal issues. While the social context of HIV/AIDS has certainly changed since the 1980s, Health and human services providers continue to require training on Legal issues.

This Center of Expertise will be charged with developing a range of training interventions designed to keep health and human services providers abreast of current and emerging state and federal regulations that impact the provision of HIV/STI/Viral hepatitis services and the lives of people living with or affected by these public health conditions. This Center of Expertise will work with the AIDS Institute to conduct training needs assessments to determine the current and emerging training needs of health and human services providers. The range of training interventions to be developed shall include: in-person trainings, seminars, regional conferences, webinars, narrated slidesets, written materials, such as a comprehensive guide to NYS public health law regarding HIV testing and HIV/AIDS confidentiality, phone and on-site technical assistance and on-line trainings in conjunction with the On-Line Training Center. This center of expertise will be expected to have staff with legal expertise and the capacity to update written materials and train health and human services providers on all of the topics outlined below:

- Existing and emerging public health Law related to HIV, STDs and viral hepatitis
- Antidiscrimination laws, including the Americans with Disabilities Act

- Confidentiality of health, substance use and mental health records
- Employment rights and issues for persons with a history of incarceration
- Health care reform, including access to Medicare, Medicaid, ADAP and other Health Insurance Programs
- Eligibility and complaint procedures related to the full range of government entitlements
- Housing access, discrimination and tenant's rights
- Adolescent's ability to consent to HIV/STI testing, family planning and a range health care services
- Legal issues and considerations regarding aging and end of life

## **A. Who May Apply**

### **1. Minimum Eligibility Requirements – Component B**

- Local health departments, not-for-profit community-based organizations, academic institutions, hospitals, professional educational organizations, tribal organizations and not-for-profit training organizations, with a minimum of three years of experience delivering training or technical assistance in the area of HIV, STIs and viral hepatitis, are eligible to apply.
- All applicants must be registered in the New York State Grants Gateway and have prequalified status (if not exempt) on the date the application is due. Applications submitted by organizations that do not have prequalified status on the Grants Gateway will be rejected and will not be considered.
- Applicants for topic-specific Centers of Expertise must have a demonstrated track record in the topic area which must include one or more of the following: journal publications, conference presentations, experience developing and delivering direct service model programs in the topic area or a history of developing and delivering training in the topic area.
- Applicants seeking to serve as a Topic-Specific Center of Expertise must be prepared to provide a mix of in-person and distance learning trainings statewide.
- Applicants may apply for more than one Component of this RFA and under Component B, there is no limit on the number of topic areas for which an applicant may apply. However, separate and complete applications must be submitted for each Component of the RFA and for each Topic-Specific Center of Expertise for which the applicant is seeking funding.
- Applicant must maintain an active registration in the System for Award Management (SAM) at SAM.gov, have no exclusions or delinquent federal debt.

## 2. Preferred Eligibility Requirements – Component B

Preference will be given to applicants who:

- Demonstrate a history of at least five years of experience in the effective oversight of administrative, fiscal, and programmatic aspects of government contracts, including timely and accurate submission of fiscal and program reports.

### B. Available Funding – Component B

**A total of \$575,000 annually in State and Federal funds administered by Health Research Inc. (HRI) is anticipated to support this component. For Component B, State funds available total \$150,000 and HRI funds available total \$425,000.** The NYSDOH and HRI reserve the right to revise the award amounts as necessary due to changes in availability of funding.

The table below outlines the anticipated number of awards and total funding per topic. Topic-specific Centers of Expertise will be responsible for delivering trainings statewide in their designated topic area. They will offer a mix of in-person trainings and distance learning trainings to ensure that health and human services providers in all areas of the state have access to training.

<b>Component B: Topic-Specific Centers of Expertise (#1-4)</b>			
	<b>Topic-Specific Centers of Expertise (#1-4)</b>	<b>Awards</b>	<b>Annual Funding Per Topic</b>
1	Drug Users Health and Opioid Overdose Prevention	1	\$270,000
2	Hepatitis C and HIV/Hepatitis C Co-Infection	1	\$110,000
3	Promoting Sexual Health, HIV/STI/Hepatitis C Health Care and Secondary Prevention for Gay Men, MSM and Transgender Individuals	1	\$120,000
4	Legal Issues	1	\$75,000
	<b>Total Awards and Funds Available</b>	<b>4</b>	<b>\$575,000</b>

For Component B, the highest scoring applicant for each specific topic area will be funded. If there are no acceptable applications for a specific topic area, the NYSDOH AI and HRI will award the highest scoring applicant(s) that scored in the marginal range (60-69) from that topic area (remedial actions will be taken due to score). In cases where two or more applicants are judged on the basis of their written proposals to be equal in quality, the applicant with the highest score in Section 6: Workplan would be selected for funding. If there are an insufficient number of applicants in the marginal range, AI and HRI will re-solicit this portion of the RFA.

### C. Project Narrative / Workplan Objectives

#### 1. Expectations of the Project: Component B – Topic Specific Centers of Expertise

In 2000, HIV Education and Training Programs began administering Training Centers of Expertise in several specific topic areas. Centers of Expertise are organizations with

considerable demonstrated experience in the specific topic area.

The role of the topic-specific Centers of Expertise is to translate the latest findings, research and practice in their specific area into skills-building trainings to help further the capacity of non-physician health and human services providers to deliver prevention, screening, testing, support services, case and care management, and health care to persons living with or at risk of HIV, STIs or viral hepatitis.

Under the guidance of the AIDS Institute, the Topic-Specific Centers of Expertise will:

- Keep abreast of the latest developments in their specific topic area;
- Develop new training programs (including trainer manuals, participant manuals, slides, handout materials, interactive exercises, role plays, values clarification activities and other educational activities consistent with adult learning principles) to translate these latest developments into skills-building trainings for providers involved in the spectrum of HIV, STIs and viral hepatitis prevention, care and support services;
- Deliver a mix of in-person and distance learning trainings to ensure adequate access to training in every region of the state;
- Post information about the initiative, training calendars and other promotional information on the applicants' web site;
- Coordinate delivery of trainings with the AIDS Institute's Clinical Education Initiative, AIDS Education and Training Centers and other entities that offer related trainings;
- Create and implement a marketing plan using all appropriate media to promote trainings;
- Work with the Online Training Center to archive a selection of the distance education events delivered by the Center of Expertise;
- Interface with the New York State Department of Health's centralized, online learning management website (<http://www.hivtrainingny.org/>) to conduct training registration activities, track and report training data, ensure quality training data, confirm participant registration, send appropriate reminders and document participant attendance;
- Provide on-site technical assistance to DOH funded providers as directed by the AIDS Institute;
- Provide training-of-trainers sessions to prepare selected facilities and training organizations to deliver trainings developed by the Centers of Expertise; and
- Advise the AIDS Institute on incorporating state of the art information into existing HIV, STI and viral hepatitis training programs.

## 2. Staffing

Funded Centers of Expertise will provide qualified administrators, clerical staff, trainers and approved consultants to perform contract related activities. Below are program standards for these positions. Applicants with the following will be best prepared to successfully administer training programs:

- **Program Manager** – Master's degree and five years of professional administrative level experience in a public health or human services-related field providing programmatic and fiscal oversight activities, including at least three years of experience overseeing professional training programs. An effective program manager will have

experience in training, coordinating activities with community-based and governmental organizations, program development and implementation, evaluation of training programs and have excellent interpersonal skills.

- **Lead Trainer** – Master’s degree and at least three years of professional training in the fields of HIV, STIs and viral hepatitis. Five years of training experience and a bachelor’s degree may substitute for a Master’s degree. The Program Manager and Lead Trainer may be the same person.
- **Trainers and consultants** – the minimum standard is a Bachelor’s degree, demonstrated training skills and appropriate experience and qualifications in the topics they will train.
- Resumes and credentials of staff and consultants are subject to approval by the AIDS Institute. This center of expertise will be expected to have staff with demonstrated legal expertise. All appropriate staff and consultants will attend and successfully complete train-the-trainer programs provided by the AIDS Institute or an approved contractor. Training centers will be responsible for ensuring all consultant trainers are fully prepared to deliver trainings for which they are assigned as primary or back-up trainers.

### 3. Additional Details

- Centers of Expertise should be prepared to provide training participants with appropriate training manuals, handouts, estimating approximately 50 pages per participant, per training.
- Centers of Expertise are expected to create a training environment reflective of the diverse population of providers being trained and the communities they serve. To accomplish this, Centers of Expertise are expected to display posters and other images showing diversity with regards to race, ethnicity, age and people with disabilities. Centers of Expertise are also expected to display Safe Zone statements indicating the center is a safe environment for gay, lesbian, bi-sexual and transgendered people.
- Applicants may subcontract components of the scope of work. For those applicants that propose subcontracting, it is preferable to identify subcontracting agencies during the application process. Applicants that plan to subcontract are expected to state in the application the specific components of the scope of work to be performed through subcontracts. Applicants should note that the lead organization (contractor) will have overall responsibility for all contract activities, including those performed by subcontractors, and will be the primary contact for the DOH. All subcontractors should be approved by the Department of Health.

#### **IV. COMPONENT C: Center of Expertise in On-Line Training:**

The On-Line Training Center will host the initiative-wide learning management system website [www.hivtrainingny.org](http://www.hivtrainingny.org), provide at least 7.5 gigabytes of server space, translate existing and new AIDS Institute trainings into interactive distance education and digital learning formats and assist the AIDS Institute with a variety of issues related to expanding the use of distance learning technologies and digital learning tools to provide HIV/STI and viral hepatitis training to non-physician health and human services providers. The Center of Expertise in On-Line Training will be responsible for archiving a wide range of distance education training materials and will work with all funded training centers to post materials to the initiative's website.

##### **A. Who May Apply**

###### **1. Minimum Eligibility Requirements – Component C**

- Local health departments, not-for-profit community-based organizations, academic institutions, hospitals, professional educational organizations, not-for-profit training organizations, tribal organizations and not-for-profit technology companies, with a minimum of three years of experience delivering training or technical assistance in the area of HIV, STIs and viral hepatitis, are eligible to apply.
- All applicants must be registered in the New York State Grants Gateway and have prequalified status (if not exempt) on the date the application is due. Applications submitted by organizations that do not have prequalified status on the Grants Gateway will be rejected and will not be considered.
- Applicants for the On-Line Training Center must have at least 3 years of experience developing and delivering on-line training, webinars and digital learning tools with at least two years of experience related to health or public health topics.
- Applicants may seek funding under more than one component of this RFA. However, separate and complete application must be submitted for each component under which the applicant is seeking funding.
- Applicant must maintain an active registration in the System for Award Management (SAM) at SAM.gov, have no exclusions or delinquent federal debt.

###### **2. Preferred Eligibility Requirements – Component C**

Preference will be given to applicants who:

- Demonstrate a history of at least five years of experience in the effective oversight of administrative, fiscal, and programmatic aspects of government contracts, including timely and accurate submission of fiscal and program reports.

## B. Available Funding – Component C

A total of \$220,593 annually is anticipated to support this component, including State funds and Federal funds administered by Health Research Inc. (HRI). For Component C, State funds available total \$86,593 and HRI funds available total \$134,000. The NYSDOH and HRI reserve the right to revise the award amounts as necessary due to changes in availability of funding. One applicant will be funded under this component. The Center of Expertise in On-Line Training will assist the AIDS Institute with a variety of issues related to expanding the use of distance learning technologies and digital learning tools to provide HIV/STI and viral hepatitis training to non-physician health and human services providers.

<b>Component C: Center of Expertise in On-Line Training</b>		
	Awards	Annual Funding
On-Line Training Center	1	\$220,593

For Component C, the highest scoring applicant for the On-Line Training Center of Expertise will be funded. If there is not an acceptable application for the On-Line Training Center of Expertise, the NYSDOH and HRI will award the highest scoring applicant(s) that scored in the marginal range (60-69). In cases where two or more applicants are judged on the basis of their written proposals to be equal in quality, the applicant with the highest score in Section 6: Workplan would be selected for funding. If there is not an applicant scoring in the marginal range, AI and HRI will re-solicit this portion of the RFA.

## C. Project Narrative/Work Plan Outcomes

### 1. Expectations of the Project: Component C – Center of Expertise in On-Line Training

The AIDS Institute has been working for several years to offer HIV, STI and viral hepatitis trainings via on-line and distance learning formats. Given the rapid development of distance learning technologies, the popularity of webinars and digital learning tools and funding restrictions that limit the ability of health and human services providers to travel for trainings, it is essential that the AIDS Institute increase its capacity to offer trainings via distance learning formats.

Under the guidance of the AIDS Institute, the On-Line training center will:

- Advise the AIDS Institute about the latest developments in the field of distance learning, web-based training and digital learning tools;
- Host the initiative learning management system website [www.hivtrainingny.org](http://www.hivtrainingny.org) and ensure that the site meets NYSDOH Internet security requirements.
- Ensure the initiative website has at least 7.5 gigabytes of server space to host training materials
- Work with the AIDS Institute, Regional Training Centers and topic-specific Centers of Expertise to translate existing and develop new training curricula into interactive distance learning trainings and digital learning tools that keep participants engaged in the learning process and meet the intended goals and objectives of the training;

- Work with the AIDS Institute, Regional Training Centers and Topic-Specific Centers of Expertise to archive selected webinars and other electronic materials on the initiative website;
- Award continuing education credits, including ensuring the capacity of the site to conduct brief quizzes as required for awarding such credits;
- Coordinate activities with the AIDS Institute’s Clinical Education Initiative, AIDS Education and Training Centers and other entities that offer related trainings; and
- Create and implement a marketing plan using all appropriate media to promote the online training center.

## 2. Staffing

Contractors will provide qualified administrators, clerical staff, trainers and approved consultants to perform contract-related activities. Below are program standards for these positions.

Applicants with the following will be best prepared to successfully administer training programs:

- **Program Manager** – Master’s degree and five years of professional administrative level experience in a public health or information technology field providing programmatic and fiscal oversight activities with at least three years of experience overseeing the development and maintenance of online trainings, distance education programs and digital learning tools. An effective program manager will have excellent interpersonal skills, experience in distance education and management of on-line IT services, the ability to evaluate training programs and coordinate activities with community-based and governmental organizations.
- **Lead Trainer/Curriculum Developer** – Master’s degree and at least three years of professional experience developing and maintaining on-line training or distance education trainings, preferably in the health or public health field. Five years of distance education, digital learning tools or on-line training experience or curriculum development and a bachelor’s degree may substitute for a Master’s degree. The Program Manager and Lead Trainer/Curriculum Developer may be the same person.
- **IT staff** – Bachelor’s degree and demonstrated expertise in web design, developing interactive on-line training materials and digital learning tools, developing and delivering webinars and evaluating online trainings and digital learning tools.
- Resumes and credentials of staff and consultants are subject to AIDS Institute approval.

## V. Administrative Requirements

### A. Issuing Agencies

This RFA is issued by the New York State Department of Health/AIDS Institute (The Department) and Health Research, Inc. (HRI). The Department and HRI are responsible for the requirements specified herein and for the evaluation of all applications.

## B. Question and Answer Phase

All substantive questions must be submitted in writing to Richard Cotroneo, Director, HIV Education and Training Section, New York State Department of Health at the following Bureau Mail Log:

hivet@health.ny.gov

To the degree possible, each inquiry should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the cover of this RFA.

Questions of a technical nature can be addressed in writing to the e-mail address listed above. **Questions are of a technical nature if they are limited to how to prepare your application (e.g., formatting) rather than relating to the substance of the application.**

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or applications should be directed to the DOH contact listed on the cover of this RFA.

- [www.grantsreform.ny.gov/grantees](http://www.grantsreform.ny.gov/grantees)
- Grants Reform Videos (includes a document vault tutorial and an application tutorial) on YouTube: <http://www.youtube.com/channel/UCYnWskVc7B3ajjOVfOHL6UA>
- Agate Technical Support Help Desk  
Phone: 1-800-820-1890  
Hours: Monday thru Friday 8am to 8pm  
Email: [helpdesk@agatesoftware.com](mailto:helpdesk@agatesoftware.com)  
(Technical questions)
- Grants Team Email: [Grantsreform@budget.ny.gov](mailto:Grantsreform@budget.ny.gov)  
(Application Completion, Policy, and Registration questions)
- [www.grantsgateway.ny.gov](http://www.grantsgateway.ny.gov)

Prospective applicants should note that all clarifications and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of an application.

This RFA has been posted on the Department's public website at:

<http://www.health.ny.gov/funding/> and the NYS Grants Gateway website at:

[https://www.grantsgateway.ny.gov/IntelliGrants\\_NYSGG/module/nysgg/goportal.aspx](https://www.grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx). It is also posted on the HRI website at: <http://www.healthresearch.org/funding-opportunities>.

Questions and answers, as well as any updates and/or modifications, will also be posted on these websites. All such updates will be posted by the date identified on the cover sheet of this RFA.

### C. Letter of Interest

Submission of a letter of interest is strongly encouraged but not mandatory. The letter of interest should be received by the date posted on the cover page of the RFA. Applications may be submitted without first having submitted a letter of interest. A sample Letter of Interest is included as Attachment 11 of this RFA. Letters of Interest, if submitted, should be signed, scanned, and e-mailed to Richard Cotroneo at the following Bureau Mail Log:

[hivet@health.ny.gov](mailto:hivet@health.ny.gov)

### D. Applicant Conference

An applicant conference will not be held for this project.

### E. How to File an Application

Applications must be submitted online via the Grants Gateway by the date and time posted on the cover of this RFA. Tutorials (training videos) for use of the Grants Gateway are available at the following web address (and upon user log in):

[https://www.grantsgateway.ny.gov/IntelliGrants\\_NYSGG/module/nysgg/goportal.aspx](https://www.grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx) .

To apply, log into the Grants Gateway and click on the View Opportunities button under View Available Opportunities. To get started, in the Search Criteria, enter the Grant Opportunity name listed above and select the Department of Health as the Funding Agency and hit the Search button. Click on the name of the Grant Opportunity from the search results grid and then click on the APPLY FOR GRANT OPPORTUNITY button located bottom left of the Main page of the Grant Opportunity.

In order to access the online application and other required documents such as the attachments, you MUST be registered and logged into the NYS Grants Gateway system in the user role of either a “Grantee” or a “Grantee Contract Signatory”.

The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway.

<b>Role</b>	<b>Create and Maintain User Roles</b>	<b>Initiate Application</b>	<b>Complete Application</b>	<b>Submit Application</b>	<b>Only View the Application</b>
Delegated Admin	X				
Grantee		X	X		
Grantee Contract Signatory		X	X	X	
Grantee Payment Signatory		X	X		
Grantee System Administrator		X	X	X	
Grantee View Only					X

For further information on how to apply, please access the Grantee Quick Start Guide under the Pre-Submission Upload Properties for this opportunity.

Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Grants Gateway. Please visit the Grants Reform website at the following web address: <http://grantsreform.ny.gov/Grantees> and select the “Grantee Quick Start Guide” from the menu. There is also a more detailed “Grantee User Guide” available on this page as well.

Late applications will not be accepted. **Applications will not be accepted via fax, e-mail, hard copy or hand delivery.**

#### **F. Department of Health and HRI’s Reserved Rights**

1. Reject any and all applications received in response to this RFA.
2. Withdraw the RFA at any time, at the Department/HRI’s sole discretion.
3. Make an award under the RFA in whole or in part.
4. Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the RFA.
5. Seek clarifications and revisions of applications.
6. Use application information obtained through site visits, management interviews and the state’s investigation of an applicant’s qualifications, expertise, ability or financial standing, and any material or information submitted by the applicant in response to the agency’s request for clarifying information in the course of evaluation and/or selection under the RFA.
7. Prior to application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
8. Prior to application opening, direct applicants to submit proposal modifications addressing subsequent RFA amendments.
9. Change any of the scheduled dates.
10. Waive any requirements that are not material.
11. Award more than one contract resulting from this RFA.
12. Conduct contract negotiations with the next responsible applicant, should the Department or HRI be unsuccessful in negotiating with the selected applicant.
13. Utilize any and all ideas submitted with the applications received.
14. Unless otherwise specified in the RFA, every offer is firm and not revocable for a period of 60 days from the bid opening.

15. Waive or modify minor irregularities in applications received after prior notification to the applicant.
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's application and/or to determine an offerer's compliance with the requirements of the RFA.
17. Negotiate with successful applicants within the scope of the RFA in the best interests of the State or HRI.
18. Eliminate any mandatory, non-material specifications that cannot be complied with by all applicants.
19. Award contracts based on geographic or regional considerations to serve the best interests of the State or HRI.

### **G. Term of Contract**

Any State funded contracts resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller. Any HRI funded contract resulting from this RFA will be effective only upon approval by Health Research, Inc.

Contract periods may vary based on the source of funding.

It is expected that State funded contracts resulting from this RFA will have the following multi-year time period: **April 1, 2015 – March 31, 2020**. Continued funding throughout this period is contingent on satisfactory contractor performance and availability of funds. DOH reserves the right to revise the award amounts as necessary due to changes in the availability of funding.

HRI funded contracts resulting from this RFA will be for 12 month terms. The anticipated start date of HRI contracts is April 1, 2015. HRI contracts may be renewed for up to four (4) additional annual contract periods based on satisfactory performance and availability of funds.

### **H. Payment and Reporting Requirements of Grant Awardees**

1. The Department may, at its discretion, make an advance payment to not-for-profit grant contractors in an amount not to exceed 25 percent. Due to requirements of the federal funder, HRI will not make advance payments.
2. The grant contractor will be required to submit monthly invoices and required reports of expenditures to the State's/HRI's designated payment office:

AIDS Institute - Office of the Medical Director  
HIV Education and Training Programs  
New York State Department of Health AIDS Institute  
ESP, Corning Tower, Room 244  
Albany, New York 12237-0658

Grant contractors must provide complete and accurate billing invoices to the Department's designated payment office in order to receive payment. Billing invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department and the Office of the State Comptroller (OSC). Payment for invoices submitted by the CONTRACTOR shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: <http://www.osc.state.ny.us/epay/index.htm>, by email at: [epayments@osc.state.ny.us](mailto:epayments@osc.state.ny.us) or by telephone at 855-233-8363. CONTRACTOR acknowledges that it will not receive payment on any claims for reimbursement submitted under this contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of such claims for reimbursement by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be: Contractor will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Workplan.

3. The grant contractor will be required to collect data and participate in evaluation of training and/or training related activities.

The State funded grant contractor will be required to submit the following periodic reports at a minimum, each month:

- Narrative description of the program's process in relation to its objectives, major or significant accomplishments achieved during the reporting period and any problems encountered and plans to address noted problems.
- Electronically reported statistical data extracts of those served including participant demographic information. In addition, when requested, participant satisfaction assessments will be provided to the AIDS Institute. Contractors will also be required to participate in a collaborative process with the AIDS Institute to assess outcome of training and/or training related activities.

The HRI funded contractor will be required to submit the following periodic reports:

- Narrative description of the program's process in relation to its objectives, major or significant accomplishments achieved during the reporting period and any problems encountered and plans to address noted problems.
- Electronically reported statistical data extracts of those served including participant demographic information. In addition, when requested, participant satisfaction assessments will be provided to the AIDS Institute. Contractors will also be required

to participate in a collaborative process with the AIDS Institute to assess outcome of training and/or training related activities.

All payment and reporting requirements will be detailed in Attachment D of the final NYS Master Grant Contract.

For HRI Contracts, payment and reporting requirements will be detailed in Exhibit “C” of the final contract.

## **I. Minority & Woman-Owned Business Enterprise Requirements**

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health (“DOH”) recognizes its obligation to promote opportunities for maximum feasible participation of certified minority- and women-owned business enterprises and the employment of minority group members and women in the performance of DOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" (“Disparity Study”). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

### **Business Participation Opportunities for MWBEs**

For purposes of this solicitation, the New York State Department of Health hereby establishes a goal of 0% on any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing greater than \$25,000 under a contract awarded from this solicitation. The goal on the eligible portion of this contract will be 0% for Minority-Owned Business Enterprises (“MBE”) participation and 0% for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor (“Contractor”) on the subject contract (“Contract”) must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how DOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at: <https://ny.newnycontracts.com>. The directory is found in the upper right hand side of the webpage under “Search for Certified Firms” and accessed by clicking on the link entitled “MWBE Directory”. Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

In addition, successful awardees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

This RFA does not establish minimum goals for participation of minority or women-owned business. Therefore, completion of the Minority & Women-Owned Business Enterprise Requirement Forms (Attachment 13) is optional. Funded applicants are encouraged to engage with firms found in the directory for the acquisition of required product(s) and/or service(s) associated with this grant.

#### **J. Limits on Administrative Expenses and Executive Compensation**

Effective July 1, 2013, limitations on administrative expenses and executive compensation contained within Governor Cuomo’s Executive Order #38 and related regulations published by the Department (Part 1002 to 10 NYCRR – Limits on Administrative Expenses and Executive Compensation) went into effect. Applicants agree that all state funds dispersed under this procurement will, if applicable to them, be bound by the terms, conditions, obligations and regulations promulgated by the Department. To provide assistance with compliance regarding Executive Order #38 and the related regulations, please refer to the Executive Order #38 website at: <http://executiveorder38.ny.gov>.

#### **K. Vendor Identification Number**

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award and in order to initiate a contract with the New York State Department of Health, vendors must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, please include the Vendor Identification number on the application cover sheet. If not enrolled, to request assignment of a Vendor Identification number, please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found online at:

[http://www.osc.state.ny.us/vendor\\_management/issues\\_guidance.htm](http://www.osc.state.ny.us/vendor_management/issues_guidance.htm).

Additional information concerning the New York State Vendor File can be obtained online at: [http://www.osc.state.ny.us/vendor\\_management/index.htm](http://www.osc.state.ny.us/vendor_management/index.htm), by contacting the SFS Help Desk at 855-233-8363 or by emailing at [helpdesk@sfs.ny.gov](mailto:helpdesk@sfs.ny.gov).

## L. Vendor Responsibility Questionnaire

The New York State Department of Health recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at [http://www.osc.state.ny.us/vendrep/vendor\\_index.htm](http://www.osc.state.ny.us/vendrep/vendor_index.htm) or go directly to the VendRep system online at <https://portal.osc.state.ny.us>.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672. Vendors may also email the Vendor Responsibility Unit directly through their website at [http://www.osc.state.ny.us/vendrep/contact\\_us\\_email.htm](http://www.osc.state.ny.us/vendrep/contact_us_email.htm).

Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website at: [http://www.osc.state.ny.us/vendrep/forms\\_vendor.htm](http://www.osc.state.ny.us/vendrep/forms_vendor.htm) or may contact the Office of the State Comptroller's Help Desk for a copy of the paper form.

Applicants should complete and submit the Vendor Responsibility Attestation (Attachment 14)

## M. Vendor Prequalification for Not-for-Profits

All not-for-profit vendors subject to prequalification are required to prequalify prior to grant application and execution of contracts.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which requires not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for applications to be evaluated. Information on these initiatives can be found on the [Grants Reform Website](#).

**Applications received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the application due date listed on the cover of this RFA cannot be evaluated. Such applications will be disqualified from further consideration.**

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The [Vendor Prequalification Manual](#) on the Grants Reform Website details the requirements and an [online tutorial](#) are available to walk users through the process.

### 1) Register for the Grants Gateway

- On the Grants Reform Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the Division of

Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

If you have previously registered and do not know your Username, please email [grantsreform@budget.ny.gov](mailto:grantsreform@budget.ny.gov) . If you do not know your Password, please click the [Forgot Password](#) link from the main log in page and follow the prompts.

## 2) Complete your Prequalification Application

- Log in to the [Grants Gateway](#). **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Application.
- Specific questions about the prequalification process should be referred to your agency representative or to the Grants Reform Team at [grantsreform@budget.ny.gov](mailto:grantsreform@budget.ny.gov).

## 3) Submit Your Prequalification Application

- After completing your Prequalification Application, click the **Submit Document Vault Link** located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.
- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.
- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

**Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity.**

## **N. General Specifications**

1. By submitting the "Application Form" each applicant attests to its express authority to sign on behalf of the applicant.
2. Contractors will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.
3. Submission of an application indicates the applicant's acceptance of all conditions and terms contained in this RFA, including the terms and conditions of the contract. Any exceptions allowed by the Department during the Question and Answer Phase (Section V.B.) must be clearly noted in a cover letter attached to the application.
4. An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.
5. Provisions Upon Default
  - a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from this RFA.
  - b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.
  - c. If, in the judgment of the Department, the Applicant acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Contractor. In such case the Contractor shall receive equitable compensation for such services as shall, in the judgment of the State Comptroller, have been satisfactorily performed by the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.
6. For HRI Contracts: Prior to issuance of a contract, Contractor is required to register with SAM.gov and maintain active status as stated in 2 CFR Subtitle A, Chapter 1, and Part 25 of Code of Federal Regulations. Contractor must maintain the accuracy/currency of the information in SAM at all times during which your entity has an active agreement with

HRI. Additionally, your entity is required to review and update the information at least annually after the initial registration, and more frequently if required by changes in your information.

**O. HRI General Terms and Conditions**

HRI General Terms and Conditions will be incorporated as an attachment into HRI contract(s) resulting from this Request for Applications.

## VI. Completing the Application

**Note: Applicants may apply for more than one component of the RFA. Applicants may also submit for more than one region of Component A, however, separate and complete applications must be submitted for each component or sub-component for which the applicant is seeking funding.**

Please refer to the Quick Start Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Reform website at: [www.grantsreform.ny.gov/Grantees](http://www.grantsreform.ny.gov/Grantees).

### A. Application Format/Content

#### COMPONENT A: Regional Training Centers

##### Section 1. Agency Description and Mission (10 points)

- a. Describe the overall mission of the applicant's organization, its size, organizational structure and scope of services offered.
- b. Describe the applicant's current funding for HIV, STI or viral hepatitis services and training.
- c. Describe the expertise of any proposed subcontractor or consultant.

Applicants are required to upload an Organizational and Program Level Chart as Attachment 4.

##### Section 2. Agency Capability and Experience (20 points)

(2 points)

###### Preference factor:

- a. Demonstrate a history of at least five years of experience in the effective oversight of administrative, fiscal, and programmatic aspects of government contracts, including timely and accurate submission of fiscal and program reports.

(18 points)

Describe your organization's capability and experience in the following areas:

- a. training non-physician health and human service providers, including; prevention specialists, outreach workers, nurses, health educators, harm reduction staff, case and care managers, health home staff, peer educators, drug treatment counselors, public health workers, mental health counselors, domestic violence counselors, aging services providers, and others;
- b. training health and human services providers on the knowledge, skills and sensitivity needed to deliver culturally-relevant, non-judgmental and compassionate care to diverse populations, including: gay, lesbian, bi-sexual and transgender individuals, communities of color, underserved populations, recovering substance users, formerly incarcerated persons, youth, and mature adults;

- c. training health and human services providers on the intersection of HIV, STIs and viral hepatitis and the importance of service integration;
- d. training support services providers on strategies for effectively collaborating with clinical providers to facilitate linkages to health care, promote patient retention and improve patient health outcomes;
- e. providing training to increase the capacity of health and human services providers to identify and reduce new HIV/STI infections among gay and men who have sex with men (MSM) and transgendered individuals;
- f. providing training which translates complex medical care, NYS HIV clinical guidelines and treatment protocols into terms non-physician health and human services providers can understand;
- g. providing training to enable non-physician providers to educate their clients about health insurance coverage options for persons living with and affected by HIV/STIs and viral hepatitis;
- h. training health and human services providers on strategies and resources to enhance services for persons who have limited health literacy or limited English proficiency;
- i. training health and human services providers on the implementation of evidence-based interventions;
- j. training health and human services providers to implement NYS law, policy or regulations related to HIV, STIs and viral hepatitis;
- k. providing HIV, STI and viral hepatitis training and technical assistance to local health departments and on-site technical assistance to DOH funded contractors;
- l. providing a range of training interventions including in-person trainings, seminars and conferences, live webinar-based trainings and other distance learning technologies;
- m. assessing regional training needs of a diverse array of health and human services providers;
- n. developing training materials for non-physician health and human services providers including trainer manuals, participant manuals, slides, handout materials, interactive exercises, role plays, values clarification activities and other educational activities consistent with adult learning principles;
- o. evaluating individual training deliveries and training initiatives as a whole.

**Section 3. Training Delivery and Logistics**

**(15 points)**

Describe activities your organization would undertake to accomplish the following objectives:

- a. develop semi-annual training calendars for HIV, STI and viral hepatitis trainings;
- b. provide adequate access to in-person and distance learning trainings for health and human services providers throughout the designated region;
- c. develop a marketing plan which uses all appropriate media, including social media, to promote in-person and distance learning training programs on a regional basis;
- d. interface with the initiative-wide website to conduct training registration activities, monitor and report training data, ensure data quality, deliver correspondence to remind participants of upcoming trainings and confirm participant attendance;
- e. provide handicapped accessible in-person or online trainings that are conducive to adult learning and in compliance with the Americans with Disabilities Act.

#### **Section 4. Staffing Pattern and Qualifications**

**(10 points)**

Describe the staffing pattern your organization would put in place to implement *all activities being requested for funding*. Applicants should attach all Staff and Consultant Resumes as Attachment 3 and include an Organizational and Program Level Chart as Attachment 4.

- a. Describe the staffing pattern your organization would put in place to implement all activities being requested for funding, including the responsibilities of each staff person or consultant(s) and their educational background and experience performing the tasks related to their specific role in this proposal (i.e., administrative, training, fiscal, etc).
- b. Describe the extent to which training staff reflect the diversity of the providers being trained and the target communities receiving direct services in the region.
- c. Describe activities the applicant would take to recruit new staff, assure availability of qualified staff and remain abreast of new developments in the field of HIV, STIs and viral hepatitis.
- d. Describe how the applicant will ensure access to a pool of consultants and the ability to recruit new consultants on emerging topics as needed including consultants have expertise in all training topic areas.
- e. Describe how the applicant will prepare, support, supervise and evaluate training consultants.

#### **Section 5. Evaluation**

**(10 points)**

- a. Describe how the applicant will establish a continuous quality improvement plan built on the Plan-Do-Study-Act (PDSA) model to promote on-going quality improvement in all areas of the program.
- b. Describe the quality indicators your organization will put in place to monitor and ensure that the program is meeting grant requirements in the areas of: training marketing, training deliverables, fiscal processing and program reporting.
- c. Describe quality improvement activities the applicant will put in place to foster excellence in trainer presentation skills, group processing, interpersonal skills, communication, and cultural competency.

#### **Section 6. Workplan**

**(15 points)**

All applicants should review and complete Attachment 5A: Workplan Component A. Applicants should carefully review the directions for completing the Workplan. The Component A Workplan should be uploaded as Attachment 5A in the Grant Gateway On line Application.

Applicants must also complete the Workplan Properties Section of the Grant Gateway Online Application. Applicants are instructed to include the required performance measures for each workplan objective as listed in Attachment 5A. Please note: The performance measures may not necessarily match each task. However, due to system limitations this is the preferred option for entering the required performance measures.

## Section 7. Budget and Justification

(20 points)

- a. Proposed budgets should not exceed the annual designated award amount of \$175,000.
- b. Applicants should enter the year 1 budget (April 1, 2015 – March 31, 2016) directly into the Grants Gateway. Budgets for grant years 2-5 should be uploaded as Attachment 9: Grant Years 2-5 Budgets. The budgets for years 2-5 should be labeled as follows:

Budget Year 2 – April 1, 2016 – March 31, 2017

Budget Year 3 – April 1, 2017 – March 31, 2018

Budget Year 4 – April 1, 2018 – March 31, 2019

Budget Year 5 – April 1, 2019 – March 31, 2020

- c. A budget justification for year 1 should be included in the Budget Section of the Grants Gateway on line application. Budget justifications for grant years 2-5 should be uploaded as Attachment 10: Grant Years 2-5 Budget Justifications.
- d. All costs must directly relate to the provision of services outlined in this RFA and be consistent with the scope of services, reasonable and cost effective. Provide a brief narrative justification for each item. (Attachment 10)
- e. List all proposed staffing for the project in the budget. Specify the source of financial support for each staff item. Include in the **Budget Justification** staff responsibilities in carrying out the proposed activities, and how in-kind personnel and non-personnel services provide support to the proposed program. For all existing staff, the **Budget Justification** must delineate how the percentage of time devoted to this initiative has been determined.
- f. Allowable costs are those specifically incurred for the implementation of the proposed program through the provision of new or expanded services. This funding may only be used to expand existing activities or create new activities pursuant to this RFA. These funds may not be used to supplant funds for currently existing staff activities. Expenditures will not be allowed for the purchase of major pieces of depreciable equipment (although limited computer/printing equipment may be considered) or for remodeling or modification of structure.
  - Ineligible budget items will be removed prior to contracting. Ineligible items are those items determined by NYSDOH/HRI personnel to be inadequately justified in relation to the proposed workplan or not fundable under existing state and federal guidance (OMB circulars). The budget amount requested will be reduced to reflect the removal of the ineligible items.
- g. Funding for indirect costs may be requested under the budget line - ‘Other’ to support a portion of the agency’s overall organizational structure to the extent that it allows a

funded applicant to implement program activities. This includes funding for administrative and fiscal staff, supervisors and support personnel and other than personal service costs such as a share of space, supplies, telephone, and other expenses indirectly associated with program implementation and service delivery. ***Indirect costs may not exceed 10% of the total direct costs.***

## **COMPONENT B: Topic-Specific Centers of Expertise**

**Note: Applicants may apply for more than one component of the RFA. Under Component B, there is no limit on the number of topic areas for which an applicant may apply. However, separate and complete applications must be submitted for each component or sub-component for which the applicant is seeking funding.**

### **A. Application Content and Format**

#### **Section 1. Agency Description and Mission (10 points)**

- a. Describe the overall mission of the applicant's organization, its size, organizational structure and scope of services offered.
- b. Describe the applicant's current funding for HIV, STI or viral hepatitis services and training.
- c. Describe the expertise of any proposed subcontractor or consultant.

Applicants are required to upload an Organizational and Program Level Chart as Attachment 4.

#### **Section 2. Agency Capability and Experience (20 points)**

(2 points)

##### **Preferred Eligibility Requirement:**

- a. Demonstrate a history of at least five years of experience in the effective oversight of administrative, fiscal, and programmatic aspects of government contracts, including timely and accurate submission of fiscal and program reports.

(18 points)

Describe your organization's capability and experience in the following areas:

- a. serving as a Center of Expertise in the specific topic area of choice;
- b. history of publications, journal articles, conference presentations and implementation of direct service model programs in the topic area;
- c. developing and implementing innovative in-person, online, digital or webinar based trainings in the designated topic area;
- d. developing training materials in the topic area for non-physician health and human services providers including trainer manuals, participant manuals, slides, handout materials, interactive exercises, role plays, values clarification activities and other educational activities consistent with adult learning principles;
- e. delivering training/technical assistance programs to non-physician health and human services providers in the specific topic area;
- f. working collaboratively with representatives of the targeted training audience to assess training needs, develop, review and fine-tune training programs;
- g. evaluating individual training deliveries and training initiatives as a whole;
- h. developing, delivering and evaluating training of trainers programs;
- i. delivering training to providers serving high risk populations and/or communities of color.

### **Section 3. Training Delivery and Logistics**

**(15 points)**

Describe activities your organization would undertake to accomplish the following objectives:

- a. develop semi-annual training calendars for training on the designated topic;
- b. provide adequate access to in-person and distance learning trainings for health and human services providers statewide;
- c. develop a marketing plan which uses all appropriate media to promote in-person and distance learning training programs on a regional or statewide basis for AI funded organizations, minority-run CBOs and others serving high risk communities on a statewide basis;
- d. interface with the initiative-wide website to conduct training registration activities, monitor and report training data, ensure data quality, deliver correspondence to remind participants of upcoming trainings and confirm participant attendance;
- e. provide handicapped accessible in-person or online trainings that are conducive to adult learning and in compliance with the Americans with Disabilities Act.

### **Section 4. Staffing Pattern and Qualifications**

**(10 points)**

Describe the staffing pattern your organization would put in place to implement *all activities being requested for funding*. Applicants should attach all Staff and Consultant Resumes as Attachment 3 and include an Organizational and Program Level Chart as Attachment 4. Note: Centers of Expertise should provide a detailed description of staff knowledge, sensitivity and work experience specific to the Center of Expertise topic area.

- a. Describe the staffing pattern your organization would put in place to implement all activities being requested for funding, including a description of the responsibilities of each staff person or consultant(s) and their educational background and experience performing the tasks related to their specific role in the proposal.
- b. Describe the extent to which training staff and consultants reflect the diversity of providers being trained and target communities receiving direct services in the region.
- c. Describe activities your organization would take to recruit new staff and consultants, assure availability of qualified staff and consultants and remain abreast of new developments in distance education, digital learning and in the field of HIV, STIs and viral hepatitis.

### **Section 5. Evaluation**

**(10 points)**

- a. Describe how the applicant will establish a continuous quality improvement plan built on the Plan-Do-Study-Act (PDSA) model to promote on-going quality improvement in all areas of the program.
- b. Describe the quality indicators your organization will put in place to monitor and ensure that the program is meeting grant requirements in the areas of: training marketing, training deliverables, fiscal processing and program reporting.
- c. Describe quality improvement activities the applicant will put in place to foster excellence in trainer presentation skills, group processing, interpersonal skills, communication, and cultural competency.

## Section 6. Workplan

(15 points)

All applicants should review and complete Attachment 5B: Workplan Component A. Applicants should carefully review the directions for completing the Workplan. The Component B Workplan should be uploaded as Attachment 5B in the Grant Gateway On line Application.

Applicants must also complete the Workplan Properties Section of the Grant Gateway Online Application. Applicants are instructed to include the required performance measures for each workplan objective as listed in Attachment 5B. Please note: The performance measures may not necessarily match each task. However, due to system limitations this is the preferred option for entering the required performance measures.

## Section 7. Budget and Justification

(20 points)

- a. Awards for successful applicants will range from \$75,000 to \$120,000 depending on topic area. The proposed budget should not exceed the maximum amount specified.
- b. Applicants should enter the year 1 budget (April 1, 2015 – March 31, 2016) directly into the Grants Gateway. Budgets for grant years 2-5 should be uploaded as Attachment 9: Grant Years 2-5 Budgets. The budgets for years 2-5 should be labeled as follows:

Budget Year 2 – April 1, 2016 – March 31, 2017

Budget Year 3 – April 1, 2017 – March 31, 2018

Budget Year 4 – April 1, 2018 – March 31, 2019

Budget Year 5 – April 1, 2019 – March 31, 2020

- c. A budget justification for year 1 should be included in the Budget Section of the Grants Gateway on line application. Budget justifications for grant years 2-5 should be uploaded as Attachment 10: Grant Years 2-5 Budget Justifications.
- d. All costs must directly relate to the provision of services outlined in this RFA and be consistent with the scope of services, reasonable and cost effective. Provide a brief narrative justification for each item. (Attachment 10)
- e. List all proposed staffing for the project in the budget. Specify the source of financial support for each staff item. Include in the **Budget Justification** staff responsibilities in carrying out the proposed activities, and how in-kind personnel and non-personnel services provide support to the proposed program. For all existing staff, the **Budget Justification** must delineate how the percentage of time devoted to this initiative has been determined.
- f. Allowable costs are those specifically incurred for the implementation of the proposed program through the provision of new or expanded services. This funding may only be used to expand existing activities or create new activities pursuant to this RFA. These funds may not be used to supplant funds for currently existing staff activities. Expenditures will not be allowed for the purchase of major pieces of depreciable

equipment (although limited computer/printing equipment may be considered) or for remodeling or modification of structure.

- Ineligible budget items will be removed prior to contracting. Ineligible items are those items determined by NYSDOH/HRI personnel to be inadequately justified in relation to the proposed workplan or not fundable under existing state and federal guidance (OMB circulars). The budget amount requested will be reduced to reflect the removal of the ineligible items.
- g. Funding for indirect costs may be requested under the budget line - ‘Other’ to support a portion of the agency’s overall organizational structure to the extent that it allows a funded applicant to implement program activities. This includes funding for administrative and fiscal staff, supervisors and support personnel and other than personal service costs such as a share of space, supplies, telephone, and other expenses indirectly associated with program implementation and service delivery. ***Indirect costs may not exceed 10% of the total direct costs.***

## **COMPONENT C: Center of Expertise in On-Line Training**

**Note: Applicants may apply for more than one component of the RFA. Applicants may also submit for more than one region of Component A and under Component B, there is no limit on the number of topic areas for which an applicant may apply for. However, separate and complete applications must be submitted for each component or sub-component for which the applicant is seeking funding**

### **A. Application Content and Format**

#### **Section 1. Agency Description and Mission (10 points)**

- a. Describe the overall mission of the applicant's organization, its size, organizational structure and scope of services offered.
- b. Describe the applicant's current funding for HIV, STI or viral hepatitis services and training.
- c. Describe the expertise of any proposed subcontractor or consultant.

Applicants are required to upload an Organizational and Program Level Chart as Attachment 4.

#### **Section 2. Agency Capability and Experience (20 points)**

(2 points)

##### **Preferred Eligibility Requirements:**

- a. Demonstrate a history of at least five years of experience in the effective oversight of administrative, fiscal, and programmatic aspects of government contracts, including timely and accurate submission of fiscal and program reports.

(18 points)

Describe your organization's capability and experience in the following areas:

- a. Serving as a Center of Expertise in On-Line training and hosting and managing an initiative-wide website;
- b. Ensuring access to a minimum of 7.5 gigabytes of server space and meeting NYSDOH Internet Security Requirements (see Attachment 8);
- c. Developing and delivering on-line training, digital learning tools, webinars and archived webinars;
- d. Translating existing in-person trainings and new training curricula into interactive on-line, web-based or digital learning formats;
- e. Working collaboratively with representatives of the targeted training audience to assess training needs, develop, review and fine-tune training programs;
- f. Providing technical assistance or mentoring on distance learning technology issues to federal, state, local or non-profit organizations;
- g. Demonstrate its experience evaluating individual on-line trainings and an on-line training center initiative as a whole.

### **Section 3. Training Delivery and Logistics**

**(15 points)**

Describe activities your organization would undertake to accomplish the following objectives:

- a. Develop an annual workplan designed to ensure completion of workplan deliverables within the designated 12 month time period;
- b. Develop a marketing plan which uses all appropriate media, including social media to promote on-line trainings on a statewide basis to AIDS Institute-funded organizations, minority-run CBOs and others serving high risk communities;
- c. Interface with AIDS Institute staff and all funded training centers to ensure the website is capable of conducting training registration activities, providing training data reports, delivering correspondence to remind participants of upcoming trainings and enabling training centers to confirm participant attendance upon completion of the training;
- d. Provide handicapped accessible in on-line trainings and digital learning tools that are conducive to adult learning and in compliance with the Americans with Disabilities Act.

### **Section 4. Staffing Pattern and Qualifications**

**(10 points)**

Describe the staffing pattern your organization would put in place to implement *all activities being requested for funding*. Applicants should attach all staff and consultant resumes as an Attachment 3 and include an organizational and program level chart as Attachment 4. Applicants should provide a detailed description of staff knowledge, sensitivity and work experience specific to the Center of Expertise topic area.

Briefly describe the following:

- a. Describe the proposed staffing pattern including the responsibilities of each staff person or consultant and their educational background and experience performing the tasks related to their specific role in this proposal (i.e. administrative, training, fiscal, etc.)
- b. Describe the extent to which training staff and consultants reflect the diversity of the providers being trained and the target communities receiving direct services in the region.
- c. Describe activities your organization would take to recruit new staff and consultants, assure availability of qualified staff and consultants that remain abreast of new developments in distance education, digital learning and in the field of HIV, STIs and viral hepatitis.

### **Section 5. Evaluation**

**(10 points)**

The AIDS Institute expects funded Training Centers to conduct formal quality improvement projects to evaluate the proposed program design including issues pertaining to agency infrastructure, resources, staff development and staffing patterns needed to support the proposed program. Funded agencies will receive training evaluation forms to be completed by all participants and should have an internal process established for reviewing evaluation forms and reporting results to the AIDS Institute.

Describe activities your organization would take to:

1. Ensure evaluation plans are built on a model of continuous quality improvement and reflect the spirit of a PDSA model (Plan, Do, Study, Act) -- PLAN: plan ahead for change, analyze and predict the results; DO: execute the plan, taking small steps in controlled circumstances; STUDY: check, study the results; and ACT: take action to standardize or improve the process;
2. Establish training quality indicators that address program and fiscal management, marketing, training logistics and the overall roles and responsibilities of trainers and consultants including training skills such as: presentation skills, group processing, interpersonal skills, communication, cultural sensitivity;
3. Establish a continuous quality improvement plan to assist your agency with on-going quality improvement activities in order to ensure that on-line trainings and digital learning tools maximize learner interactivity to the extent possible within the limits of the budget.

### **Section 6. Workplan**

**(15 points)**

All applicants should review and complete Attachment 5C: Workplan Component C. Applicants should carefully review the directions for completing the Workplan. The Component C Workplan should be uploaded as Attachment 5C in the Grant Gateway On line Application.

Applicants must also complete the Workplan Properties Section of the Grant Gateway Online Application. Applicants are instructed to include the required performance measures for each workplan objective as listed in Attachment 5C. Please note: The performance measures may not necessarily match each task. However, due to system limitations this is the preferred option for entering the required performance measures.

### **Section 7. Budget and Justification**

**(20 points)**

- a. Proposed budgets should not exceed the annual designated award amount of \$220,593.
- b. Applicants should enter the year 1 budget (April 1, 2015 – March 31, 2016) directly into the Grants Gateway. Budgets for grant years 2-5 should be uploaded as Attachment 9: Grant Years 2-5 Budgets. The budgets for years 2-5 should be labeled as follows:

Budget Year 2 – April 1, 2016 – March 31, 2017

Budget Year 3 – April 1, 2017 – March 31, 2018

Budget Year 4 – April 1, 2018 – March 31, 2019

Budget Year 5 – April 1, 2019 – March 31, 2020

- c. A budget justification for year 1 should be included in the Budget Section of the Grants Gateway on line application. Budget justifications for grant years 2-5 should be uploaded as Attachment 10: Grant Years 2-5 Budget Justifications.
- d. All costs must directly relate to the provision of services outlined in this RFA and be consistent with the scope of services, reasonable and cost effective. Provide a brief narrative justification for each item. (Attachment 10)

- e. List all proposed staffing for the project in the budget. Specify the source of financial support for each staff item. Include in the **Budget Justification** staff responsibilities in carrying out the proposed activities, and how in-kind personnel and non-personnel services provide support to the proposed program. For all existing staff, the **Budget Justification** must delineate how the percentage of time devoted to this initiative has been determined.
- f. Allowable costs are those specifically incurred for the implementation of the proposed program through the provision of new or expanded services. This funding may only be used to expand existing activities or create new activities pursuant to this RFA. These funds may not be used to supplant funds for currently existing staff activities. Expenditures will not be allowed for the purchase of major pieces of depreciable equipment (although limited computer/printing equipment may be considered) or for remodeling or modification of structure.
  - Ineligible budget items will be removed prior to contracting. Ineligible items are those items determined by NYSDOH/HRI personnel to be inadequately justified in relation to the proposed workplan or not fundable under existing state and federal guidance (OMB circulars). The budget amount requested will be reduced to reflect the removal of the ineligible items.
- g. Funding for indirect costs may be requested under the budget line - ‘Other’ to support a portion of the agency’s overall organizational structure to the extent that it allows a funded applicant to implement program activities. This includes funding for administrative and fiscal staff, supervisors and support personnel and other than personal service costs such as a share of space, supplies, telephone, and other expenses indirectly associated with program implementation and service delivery. ***Indirect costs may not exceed 10% of the total direct costs.***

## **B. Freedom of Information Law**

All applications may be disclosed or used by DOH to the extent permitted by law. DOH may disclose an application to any person for the purpose of assisting in evaluating the application or for any other lawful purpose. All applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. **Any portion of the application that an applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly and specifically designated in the application.** If DOH agrees with the proprietary claim, the designated portion of the application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

### **C. Review Process**

Applications meeting the eligibility requirements and guidelines set forth above will be reviewed and evaluated competitively by a panel convened by the NYSDOH AIDS Institute using an objective rating system reflective of the required items specified for each component. The AIDS Institute anticipates that there may be more worthy applications than can be funded with available resources. Applications will be deemed to fall into one of three categories: 1) approved and funded, 2) approved but not funded, and 3) not approved.

In selecting applications and determining award amounts, reviewers will consider the following factors:

- overall merit of the application;
- clarity of the application;
- responsiveness to the Request for Applications;
- demonstration of need for proposed services;
- availability of similar services/resources in the applicant's service area;
- geographic coverage;
- agency capacity and experience to provide proposed services;
- the applicant's access to the target population(s);
- the comprehensiveness of the program design;
- relative intensity of the activities/services to be provided;
- the appropriateness of the evaluation strategy;
- relevance and justification of costs included in the budget;
- the applicant's experience in the effective oversight of administrative, fiscal, and programmatic aspects of government contracts, including timely and accurate submission of fiscal and program reports; and the funding and performance history of the agency or program with the AIDS Institute and other funding sources for providing similar and related services for which the agency is applying.

In the event that additional training activities are needed and funding becomes available, the AIDS Institute may select a contractor from the pool of organizations deemed approved and funded, or approved but not funded. A contractor would be selected based on needed expertise, availability and proximity to the target audience needing training. If it is determined that the needed expertise is not available among these organizations, the AIDS Institute reserves the right to establish additional competitive solicitations or to award funds on a sole source basis.

Following the award of contracts from this RFA, unsuccessful applicants may request a debriefing from the NYSDOH AIDS Institute no later than ten days from the date of the award(s) announcement. This debriefing will be limited to the positive and negative aspects of the subject application. In the event that unsuccessful applicants wish to protest awards resulting from this RFA, applicants should follow the protest procedures established by the Office of the State Comptroller. These procedures can be found on the OSC website at:

<http://www.osc.state.ny.us/agencies/guide/MyWebHelp>.

## VIII. Attachments to the RFA

Please note that the attachments can be accessed in the “Pre-Submission Uploads” section of an online application. In order to access the online application and other required documents such as the attachments, prospective applicants must be registered and logged into the NYS Grants Gateway in the user role of either a “Grantee” or a “Grantee Contract Signatory”.

- Attachment 1A: Sample Letter of Authorization/Intent from Board of Directors or CEO – Component A\*
- Attachment 1B: Sample Letter of Authorization/Intent from Board of Directors or CEO – Component B\*
- Attachment 1C: Sample Letter of Authorization/Intent from Board of Directors or CEO – Component C\*
- Attachment 2: Listing of Board of Directors/Task Force Members\*
- Attachment 3: Resumes of all Staff/Consultants to provide training
- Attachment 4: Organizational and Program Level Chart
- Attachment 5A: Workplan – Regional Training Centers \*
- Attachment 5B: Workplan – Topic-Specific Centers of Expertise\*
- Attachment 5C: Workplan – Center of Expertise in On-Line Training\*
- Attachment 6: Instructions for Completion of Budget Forms\*\*\*
- Attachment 7: General Terms and Conditions – Health Research Incorporated Contracts\*\*
- Attachment 7A: Additions to General Terms and Conditions for all HRI Agreements\*\*
- Attachment 8: NYSDOH Internet Security Requirements\* (Component C Only)
- Attachment 9: Grant Years 2-5 Budgets\*
- Attachment 10: Grant Years 2-5 Budget Justifications\*
- Attachment 11: Sample Letter of Interest \*
- Attachment 12: Application Cover Sheet\*
- Attachment 13: Minority & Women-Owned Business Enterprise Requirement Forms\*
- Attachment 14: Vendor Responsibility Attestation\*

\*These attachments are located / included in the Pre-Submission Upload section of the Grants Gateway on line application.

\*\* This attachment is located in the Contract Document Properties section of the Grants Gateway on line application.

\*\*\*This attachment to the RFA is for applicant information only. This attachment does not need to be completed.

**INSTRUCTIONS FOR COMPLETION OF BUDGET FORMS FOR SOLICITATIONS**

- b. Applicants should enter the year 1 budget directly into the Grants Gateway budget fields. Budgets for grant years 2-5 should be uploaded as Attachment 9: Grant Years 2-5 Budget
- c. A budget justification grant year 1 should be uploaded as Attachment 10: Grant Year 1 Budget Justification

**Tab 1 - Summary Budget**

- A. **Project Name** – Enter the Component for which you are applying
- B. **Contractor SFS Payee Name** - Enter official contractor name listed on Statewide Financial System (SFS). If you do not have an SFS Contractor name, please enter the official name of agency.
- C. **Contract Period** – “From” is the Start date of the budget and “To” is the end date of the budget. A separate budget must be completed for each 12 month budget period and labeled for each contract period.
- D. The **GRANT FUNDS** column is automatically populated based on the information entered in the major budget categories on Tabs 2 through 5 of the excel spreadsheet. These categories include:
  - Salaries
  - Fringe Benefits
  - Contractual Services
  - Travel
  - Equipment
  - Space, Property & Utilities
  - Operating Expenses
  - Other

**Tab 2- Salaries**

Please include all positions for which you are requesting reimbursement on this page. If you wish to show in-kind positions, they may also be included on this page. *Please include a written justification in Attachment 10.*

**Position Title:** For each position, indicate the title along with the incumbent’s name. If a position is vacant, please indicate “TBD” (to be determined).

**Annualized Salary Per Position:** For each position, indicate the total annual salary regardless of funding source.

**Standard Work Week (Hours):** For each position, indicate the number of hours worked per week regardless of funding source.

***Percent of Effort Funded:*** For each position, indicate the percent effort devoted to the proposed program/project.

***Number of Months Funded:*** For each position, indicate the number of months funded on the proposed project.

***Total:*** This column automatically calculates the total funding requested from the AIDS Institute based on annualized salary, hours worked, percent effort and months funded for each position. If the amount requested for a position is less than what is automatically calculated, please manually enter the requested amount in the total column.

### **Tab 2 - Fringe Benefits**

On the bottom of Tab 2, please fill in the requested information on fringe benefits based on your latest audited financial statements. Also, please indicate the amount and rate requested for fringe benefits in this proposed budget. If the rate requested in this proposal exceeds the rate in the financial statements, a brief justification must be attached. *Please include a written justification in Attachment 10.*

### **Tab 3 – Contractual Services**

Please indicate any services for which a subcontract or consultant will be used. Include an estimated cost for these services. *Please include a written justification in Attachment 10.*

### **Tab 3 – Travel**

Please indicate estimated travel costs for the contract period. *Please include a written justification in Attachment 10.*

### **Tab 4 – Equipment and Space**

Please indicate estimated equipment or space costs for the contract period. *Please include a written justification in Attachment 10.*

### **Tab 5 – Operating Expenses / Other**

Please indicate any operating expenses for the contract period. *(Operating costs include may include Supplies and any other miscellaneous costs for the contract period). Please include a written justification in Attachment 10.*

Please indicate the estimated other costs requested for the contract period. *(Other costs include indirect costs) Please note indirect costs are limited to 10% of direct costs. Please include a written justification in Attachment 10. The justification for indirect costs needs to include the requested rate.*

**Those agencies selected for funding will be required to provide a more detailed budget as part of the contract process.**