
REQUEST FOR PROPOSALS (RFP)

Expanding Mobile Harm Reduction Services for People Who Use Drugs in the North Bronx

ISSUE DATE: November 9, 2021

RESPONSE DUE DATE: December 6, 2021

REPLY TO: Ariana Holland at aholland@fphnyc.org

RELEASED BY

Fund for Public Health in New York
22 Cortlandt Street, 8th Floor, Suite 802 • New York, NY 10007
Phone: (646) 710-4860 • Fax: (212) 693-1856 •
www.fphnyc.org

Background and Program Overview

The Fund for Public Health in New York (FPHNY), on behalf of the New York City Department of Health and Mental Hygiene (DOHMH), is accepting proposals from organizations in New York City that are currently providing harm reduction services in the Bronx, such as sterile syringe access programming, and/or healthcare to people who use drugs (PWUD).

The goal of this Request for Proposals (RFP) is to support an expansion of services by an organization that is currently providing harm reduction including syringe services in the Bronx specifically to extend these services into the North Bronx. In 2019, overdose rates among residents of Fordham and Bronx Park were nearly double the city average (39.4 per 100,000 vs 21.2 per 100,000) and residents of Highbridge-Morrisania had rates more than double the NYC average (49.2 per 100,000 vs 21.1 per 100,000). Organizations proposing serving the UHF neighborhoods of Highbridge-Morrisania and Fordham-Bronx Park will be prioritized.

The population in the Bronx is burdened by a range of economic conditions and racial injustices that contribute to and perpetuate many health inequities compared to other New York City boroughs and to the rest of the nation. ^{i,ii,iii}The Bronx has some of the highest rates of drug overdose deaths, COVID-19, HIV, hepatitis C virus, sexually transmitted infections, diabetes and substance use disorder nationally, and has the highest teen pregnancy rate in the country. ^{i,ii,iv,v,vi,vii,viii} These conditions, inequities, and disparities heavily impact communities of color including, but not limited to, Latino/a people including those of Puerto Rican ancestry born either on the mainland or born in Puerto Rico and including those for whom Spanish may be their primary or only language. ^{ix,x} Further, historic disinvestment and disruption of neighborhoods by infrastructure “development” (e.g., highways, clearing of encampments) and gentrification have resulted in, among many other outcomes, disparate provision of basic health services for Bronx residents, including harm reduction services for PWUD. ^{ii,xi}

The use of a newly purchased (new or gently used) mobile vehicle to provide harm reduction services in the described neighborhoods is a requirement of this RFP. Organizations that are not currently syringe service programs (primary or second-tier syringe exchange programs) must explicitly commit to becoming authorized to distribute syringes (either as a First Tier or Second Tier Syringe Exchange Program) by providing the relevant documentation that they have initiated this process with New York State (NYS). Information on becoming a syringe service provider can be found at the NYS Department of Health website under Harm Reduction Initiative: https://www.health.ny.gov/diseases/aids/general/about/substance_user_health.htm.

[see First Tier or Second Tier Syringe Exchange Program guidance documents included in this RFP]

DOHMH seeks to partner with an organization that is able to fulfill the delineated basic services (detailed below) to participants in a culturally and linguistically competent manner (e.g., providing all services in both English and Spanish including to persons fluent only in Spanish).

This RFP has been developed in response to PWUDs' stated and observed need for an increase in harm reduction services, specifically mobile services, in the North Bronx. This work reflects the combined efforts of the NYC DOHMH and Greater Bronx and particularly North Bronx communities to address disparities, inequities and gaps in harm reduction services to the most underserved communities, specifically PWUD including people of color who use drugs.

The purpose of this RFP is to increase mobile-based harm reduction outreach, including sterile syringe access programming, for PWUD in the North Bronx, a currently underserved and high need area. A related goal of this RFP is to use the expansion of mobile harm reduction services as a means to provide resources not only to populations underserved, but also to populations that disproportionality incur multiple and interacting health and social consequences of this resource marginalization. This RFP seeks to fund an eligible organization to purchase a newly acquired (new or gently used) mobile vehicle capable of providing harm reduction services, including the distribution of safer drug use supplies, wound care services, and to conduct outreach and engagement to communities of PWUD in the North Bronx, particularly the high need UHF neighborhoods of Highbridge-Morrisania and Fordham-Bronx Park.

FPHNY serves as the fiscal agent for DOHMH. Funding will be provided by FPHNY to eligible institutions based on their response to this RFP.

This RFP is intended to solicit responses from organizations that are already providing harm reduction and/or healthcare to PWUD in the Bronx. Organizations providing these services in other boroughs only or who do not have a physical site already in the Bronx are not eligible. The expectation is that this funding will support an organization to establish mobile harm reduction services in the North Bronx, and that the program will continue via other mechanisms after funding from the RFP ends.

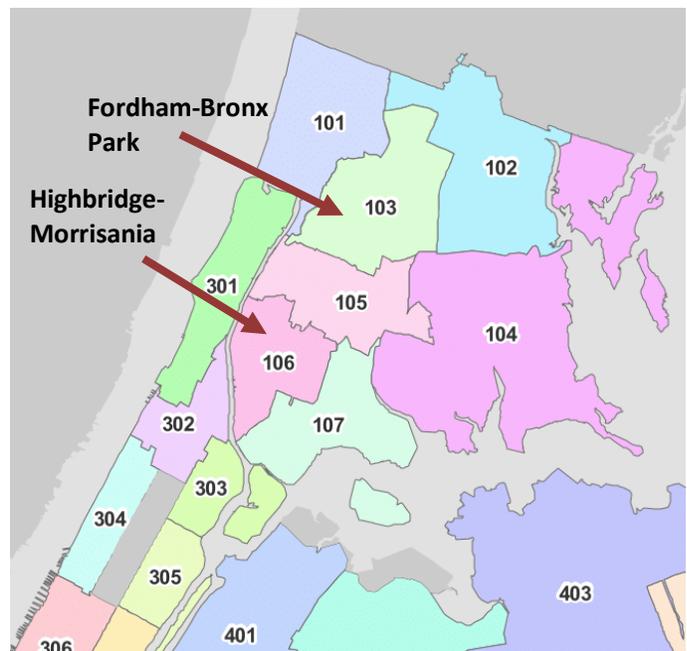


Figure. Proposed service areas reflecting neighborhoods in the United Hospital Fund areas 106 (Highbridge-Morrisania) and 103 (Fordham-Bronx Park) will be prioritized

Application Deadline

EVENT	DATE
Release of Request for Proposals	November 9, 2021
Inquiry Period	November 9 – November 12, 2021 11:59 PM EST
Bidder's call	November 16, 2021 3pm to 4pm EST https://us02web.zoom.us/j/85188293816?pwd=Sjcva2crazNldjFkS2RlZ0ttSy9SUT09
Q&A posted	November 17, 2021
Deadline for receipt of proposals	December 6, 2021 -11:59 PM EST
Notice of Award	December 13, 2021
Contract Start Date	January 1, 2022
Due date for establishing the mobile harm reduction program	June 30, 2022
Due date for last activity	June 30, 2022

Basic Information

Funding Term	<p>Funding will begin on January 1, 2022 and be extended through June 30, 2022.</p> <p>Depending on completion of deliverables, there will be an option to renew contracts for FY 23 (July 1, 2022 to June 30, 2023).</p>
Anticipated Funding and Payment Structure	<p>The anticipated funding amount is \$826,213 in Year 1, where \$100,000 is committed to purchasing a newly acquired (new or gently used) mobile vehicle capable of providing harm reduction services and the remaining \$726,213 will support vehicle maintenance, parking, insurance, etc.; staffing; and supplies for mobile outreach 7 days a week, >= 8 hours a day. DOHMH and the FPHNY reserve the right to make additional awards and/or change the value of awards should additional</p>

	<p>funding become available. Payments will consist of milestone payments tied to the achievement of deliverables and the schedule of the deliverables will be negotiated upon RFP award.</p> <p>See below for section on budget.</p>
Applicant Eligibility	<p>Organizations that are currently:</p> <ul style="list-style-type: none"> • Providing harm reduction including syringe services and/or healthcare in the Bronx to PWUD • Conducting outreach to PWUD • Have demonstrated experience in delivering services in a mobile capacity

Submission Information

Responses must be submitted electronically. Please format all documents submitted in response to this RFP in .pdf (Portable Document Format). Proposals must be e-mailed to the following address, no later than **Monday December 6, 2021 - 11:59 PM EST.**

Attn:

Subject: **Expanding Mobile Harm Reduction Services For People Who Use Drugs in the North Bronx**

E-mail: aholland@fphnyc.org

Responses received after **Monday December 6, 2021 - 11:59 PM EST** will not be reviewed.

RFP Communications and Bidder’s Call

Potential respondents may send any questions or comments no later than **Friday November 12, 2021 – 11:59 EST:**

Attn:

Subject: **Expanding Mobile Harm Reduction Services For People Who Use Drugs in the North Bronx**

E-mail: aholland@fphnyc.org

Answers to common questions answered on the Bidder’s call on **November 16, 2021** will be made available by **Wednesday November 17, 2021** on our website. No other contact with FPHNY or DOHMH personnel regarding this RFP is permitted in the period between the release of this RFP and the notice of award. Any oral communication shall be considered unofficial and non-binding with regard to this RFP and subsequent award.

Applications received after the deadline may be disqualified from funding consideration.

It is the responsibility of the submitting organization to ensure delivery of the application to DOHMH at the above email address by the submission deadline. A confirmation of receipt of the required electronic submission (via email) of specific sections of the application and other documents will be sent by email.

Application Format Guidelines

- Application narrative should be 1.5-spaced
- Applications should be submitted in PDF or Word format
- Applications should have 1” margins all around (headers and footers may appear outside of this margin)

- Suggested minimum font size is Times New Roman 12-point with the exception of any included supportive charts, which may use a font no smaller than 10-point
- Each page of the application narrative should be consecutively numbered and adhere to page limits
- Application narrative should remain in the same sequence and format as provided, questions should not be renumbered or reordered, however the text of the question can be omitted
- Each page of the application should include as a header or footer the name of the organization submitting the application.

Description of Award

The intent of this RFP is to fund a single eligible organization to increase harm reduction services including syringe services and wound prevention in English and Spanish to communities of PWUD in the north Bronx. The goal of this RFP is to increase harm reduction services (including sterile syringe access) available to PWUD in the North Bronx. This goal will be met by funding an organization already providing harm reduction and/or syringe services and/or healthcare services to PWUD in the Bronx to deliver harm reduction and syringe services via the purchase of a newly acquired (new or gently used) mobile van.

The establishing of the mobile harm reduction program as described under this RFP should be completed by **June 30, 2022**.

DOHMH will fund an organization to expand mobile harm reduction services in the North Bronx. Eligible organizations are not limited to but can include syringe service programs or organizations that are interested in providing syringe access and safer drug use programming, or that already are, a secondary syringe service provider.

Desired outcomes from this RFP focus on expansion of services in the North Bronx to PWUD and include:

- Increased knowledge and awareness of harm reduction strategies related to injection and non-injection drug use, including use of naloxone and fentanyl test strips among PWUD and their communities
- Increased engagement in harm reduction and care of people who use stimulants and PWUD by both injection and non-injection routes
- Increased number of people receiving wound prevention education and services including wound care and referral/linkage as needed
- Increased access to (either on the mobile van or through linkage, see specifics in Section IV):
 - o HIV and hepatitis C testing, prevention, care and treatment services
 - o Primary medical care services
 - o Medication for opioid use disorder
 - o Alcohol use disorder treatment
- Expanded syringe access services
- Expanded naloxone access and overdose prevention

Funding should be used to purchase, maintain, insure, and store/park a new or gently used mobile vehicle that will operate 7 days a week, >= 8 hours a day in the North Bronx neighborhoods identified in this RFP; the mobile vehicle should be outfitted so that it can be used to provide direct harm reduction services on the unit, including supporting outreach activities and confidential service delivery.

The route of the mobile unit will take will be decided by the funded organization based on factors including a combination of perceived and demonstrated need of PWUD in North Bronx areas as observed by the funded organization, community reports, and data from the DOHMH demonstrating a need for services (for example, NYC DOHMH will provide data on which neighborhoods/areas in the North Bronx have the highest rates of HIV, HCV, and overdose).

The balance of the funding will be committed to staffing costs and supplies to equip the vehicle to provide services as specified (see attached budget delineating funding for staff and details on staff requirements). The funds may not go to an already existing mobile vehicle operated by the organization but must be allocated to the purchase of a vehicle.

It is the expectation of this RFP that the funded organization coordinate with other organizations providing mobile and other outreach to populations of PWUD in the North Bronx in order to maximize service coverage.

Support for Selected Institutions

To help with project implementation and expansion of services, certain supports will be available to the selected organization, in addition to direct funding. This support is described below.

1. Overdose Education and Naloxone Distribution
 - a) NYC DOHMH will provide intranasal or intramuscular naloxone to all registered NYC-based Opioid Overdose Prevention Programs (OOPPs) free of charge. OOPPs will place orders for naloxone and will have naloxone shipped to their program sites, where they will be responsible for assembling naloxone kits (putting doses of naloxone into blue bags that come pre-packed with other necessary materials) to dispense to clients/patients, and storage.
 - b) Naloxone will be dispensed to clients and/or patients in blue bags that are provided free of charge for OOPPs.
 - c) NYC DOHMH will provide training and technical assistance on how to become an OOPP, forms for data collection, and other educational materials.
2. Technical assistance
 - a) NYC DOHMH will provide technical assistance to the funded organization on harm reduction services and support timely implementation of developed policies and procedures.
 - b) NYC DOHMH will assist with the First Tier or Second Tier Syringe Exchange Program enrollment process through NYS DOH.
3. Materials
 - a) NYC DOHMH will provide educational materials including materials on safer injection, overdose prevention, mental health awareness, where to find other SSPs in NYC and other relevant educational materials as needed.
 - b) NYC DOHMH will provide web links to other educational resources from other entities, such as other government and harm reduction organizations, that the funded organization can use in outreach efforts.
4. Data
 - a) NYC DOHMH will provide data on which neighborhoods/areas in the North Bronx have the highest rates of HIV, HCV, and overdose in order to help the funded organization target outreach efforts. Relevant data updates will be provided to the funded organization through surveillance work conducted by NYC DOHMH staff.

Eligibility and Requirements

1. Eligible organizations must be one of the following:
 - a) NYS waived First Tier or Second Tier Syringe Exchange Programs. [[Program definitions](#)]
 - b) Healthcare facilities, such as a federally qualified health center, regulated by the NYS Department of Health under the Public Health Law [[Public Health Law information](#)]. Organizations that are not currently but that are interested in becoming a syringe service program site can apply but will be required to apply to become an authorized syringe service program if selected.
 - c) Not-for-profit community-based organizations incorporated under the Not-for-Profit Corporation Law who provide harm reduction services including syringe distribution. Organizations that are not currently but that are interested in becoming a syringe service program site can apply but will be required to apply to become an authorized syringe service program if selected.
2. Eligible organizations that are currently both:
 - a) Providing harm reduction and/or syringe services and/or healthcare in the Bronx to PWUD.
 - b) Conducting outreach to PWUD in the Bronx.
3. Organizations must have demonstrable experience with operating and maintaining a mobile vehicle. Organizations may currently be providing mobile services but do not necessarily have to be currently doing so via mobile vehicle only.
4. Organizations must have demonstrated history of successfully fulfilling deliverables on other grant-funded initiatives.
5. In addition, in order to be selected under this RFP, an organization must meet the following criteria:
 - a) Organization commits to sending all staff for relevant trainings offered by the DOHMH and the National Harm Reduction Coalition.
 - b) Organization is an NYS opioid overdose prevention program (OOPP) or is working toward OOPP registration. Proof of OOPP registration (current or in process) should be included with proposer's application under "required documents".
 - c) Organization commits to sending all staff for the mobile vehicle to a DOHMH-run Fentanyl Test Strip Training of Dispensers so that they may then train participants in their use.
 - d) Organization commits to providing harm reduction services and to conducting outreach to communities of PWUD, including people who use illicit drugs but do not inject and people who use stimulants, in the North Bronx serving the UHF neighborhoods of Highbridge-Morrisania and Fordham-Bronx Park, 7 days a week, >=8 hours a day.
 - e) Organization commits to providing all services in both English and Spanish including to those for whom Spanish is their primary or only language, including having a Spanish fluent staff member on the mobile unit.
 - f) Organization commits to providing programming in a culturally competent manner including, but not limited to, providing tailored programming to people born in mainland US, Puerto Rico, and elsewhere.
 - g) Organization commits to obtaining a newly acquired (new or gently used) vehicle that has a minimum of the following parameters:
 - Has space where participants can receive services confidentially

- Has adequate space for organization staff to work
 - Lockable storage space for electronics, confidential participant files, and staff belongings
 - Outfitted with encrypted and reliable wi-fi to support tablet/PC functions (web browsing, video conferencing, word processing, printing, completing electronic health records) to facilitate real-time documentation
- h) Organization commits to adhering to any then-current COVID-19 precautions and policies as recommended by NYC DOHMH and New York State Department of Health.
6. Organizations that are currently syringe service programs must state that they will extend their NYS waivers to cover the mobile vehicle. If an organization is to become a First Tier or Second Tier Syringe Exchange Program, they must commit to providing services from the mobile vehicle.
7. Basic services to be committed by the funded organization should be described in the RFP and these services must include the following:
- a) Required (all)
- i. Health promotion education
 - ii. Safer drug use supply distribution (i.e., sterile syringes, safer smoking and sniffing kits, and safer disposal)
 - iii. Overdose education and naloxone distribution including to people who use non-opioid drugs and PWUD but do not inject
 - iv. Fentanyl test strip distribution
 - v. Wound prevention (e.g., wound care kits) and wound assessment
 - vi. Outreach and service engagement in the community
 - vii. Memorandum of understanding/agreement, either pre-existing or in-process at the time of the proposal for referral/linkages to:
 - 1. HIV and hepatitis C virus testing, care and treatment
 - 2. Buprenorphine and methadone treatment
 - 3. Alcohol use disorder treatment
 - 4. Primary care
 - 5. Vaccinations (including assistance with accessing appointments for Covid-19 vaccination)
 - 6. Wound treatment
 - 7. Case management (benefits and entitlements)
- b) Desired services to be performed and/or coordinated by the funded organization should be described in the RFP and can include, but are not limited to, the following services provided in both English and Spanish:
- i. Buprenorphine assessment and treatment on-site
 - ii. Wound treatment on-site
 - iii. HIV and hepatitis C virus testing and treatment counseling on-site

- iv. Covid-19 testing on-site
 - v. Pregnancy testing on-site and referral/linkages as appropriate
 - vi. Sexually transmitted infection testing and treatment counseling and referral/linkages as appropriate
 - vii. On-site vaccinations (e.g., hepatitis A virus, hepatitis B virus; influenza; tetanus, diphtheria, and acellular pertussis (Tdap); meningococcal; Covid-19)
 - viii. General medical examinations on-site including blood pressure checks and fingerstick glucose monitoring
 - ix. Support groups
 - x. Syringe litter clean up and safe disposal kiosk maintenance
 - xi. Psychiatric and other mental healthcare or referral/linkages
 - xii. Healthcare navigators to coordinate healthcare (for example, helping them schedule appointments) and/or to accompany participants to medical appointments
- c) Proposals that include operational hours that cover evening, weekend, or nighttime hours will be prioritized.

For reach of the relevant *required* services enumerated above, responses demonstrating clear plans to provide active linkage will be prioritized over plans relying on passive referral.

8. Organizations must have a contingency plan to address any COVID-19 surges and changes in public health guidance.

Selection Criteria

A committee at DOHMH will select an organization for funding through this RFP based on the criteria listed below:

1. Is eligible for funding, as per requirements outlined in above Eligibility and Requirements section
2. Applications must be complete and responsive to all instructions provided in above Eligibility and Requirements section. Those applications submitted that do not supply the required information will be considered non-responsive.

Application Instructions

Your application must consist of narrative responses to the 4 sections below and must address all of the questions in each section in the order listed below. Label the beginning of each section as indicated (e.g., “Provider Experience,” etc.) and include each question number; it is not necessary to repeat the text of the question. The maximum length of the narrative is 4 pages, not including attachments. Please see general instructions and additional requirements for the submission of the application are located in the Submission Information section.

- 1) Organization Experience in the Bronx
 - a) What are the current neighborhoods (using either zip codes, cross streets, or United Hospital Fund areas, for example) and populations served by your organization?

- b) What are the current unmet needs that your organization has identified in the Bronx? Where are these areas of need located?
- c) What services does your organization provide?
 - a) If you are a current syringe service program, describe your activities, including how harm reduction services are distributed, how frequently, the volume of syringe collection and distribution per month, who provides services.
 - b) Describe your organization's experience in conducting services in Spanish.
- d) What does your organization do to work towards health equity? What social justice frameworks, if any, does your organization use to ensure that community members are protected from discrimination, racism, etc.?
- e) What plan of action would your organization take if an act of discrimination or bias took place during the provision of these resources?
- f) Please briefly describe your program's history of applying and receiving funding and fulfilling grant deliverables.

2) Program Services in the Bronx

- a) Describe your program model and how a mobile outreach program will be integrated in your current programming.
- b) Describe how your organizations will notify neighboring community members, including Community Boards, local politicians, and residents of your work, of the provision of harm reduction supplies via the mobile initiative funded by this RFP.
- c) Describe your plan to expand or support current harm reduction services in the North Bronx into your organization, including how you will identify participants and locations.
 - a. Clearly delineate, both population and location plans that would be served under your application. If you are a current first or second tier syringe service program, describe how increased funding will enable you to identify new clients/patients in currently served and new geographic service areas.
- d) Describe any outreach activities your organization currently conducts and what outreach activities will be carried out in the North Bronx. If you are a current first or second tier syringe service program and your organization's outreach efforts already include syringe access programming and overdose prevention and naloxone distribution, describe how additional funding will change your outreach.
- e) Describe concretely your plans to deliver mobile outreach-based harm reduction services to populations of PWUD in the North Bronx.
- f) What is your plan and what are the processes to incorporate racial/ethnic equity into every aspect of community outreach?
- g) There are some populations that are generally underserved by harm reduction programs including people who are of Puerto Rican ancestry born either on the mainland or Puerto Rico including those who speak only Spanish, people who do not inject drugs and people who use stimulants, what is your plan to ensure that these important populations receive services?

3) Staffing Plan in the Bronx

- a) Applicants will be required to submit a staffing plan detailing the roles and responsibilities of the staff who will carry out the tasks related to the funded project of this RFP. Specifically, the roles and

responsibilities of the Outreach Supervisor, Driver, Health Educators, Maintenance Worker, and Peers will need to be specified as well as mapped to tasks required of the funded project (Section IV, 6a and as relevant 6b). Justification must be provided if the proposed staffing plan includes different or additional staff than mentioned in the prior sentence and reflected below in the budget draft. Explain their role and % time commitment to delivering services in the North Bronx. Please also include any in-kind staffing.

4) Program Monitoring, Data Management, and Reporting

To monitor programming, organizations are required to collect and manage data, and submit monthly reports to DOHMH.

- a) Describe existing data systems used for program and administrative data collection about outreach and client interactions. What data systems/capabilities are currently in place? How is data currently collected by outreach workers?
- b) Describe how your organization will collect data on client demographics, engagement, and services provided, including number of clients engaged in conversations, number of syringes collected/distributed, staffing updates, accomplishments, barriers to program delivery and efforts to increase knowledge and awareness of harm reduction techniques including knowledge and awareness of naloxone and fentanyl test strips.
- c) Describe how your will organization will manage and dispose of biohazard waste.
- d) Describe who will keep this data organized and submit it to DOHMH and how.
- e) Describe how your organization will ensure the submission of timely, accurate, and complete reports to NYC DOHMH.

5) Proposed Budget and Budget Justification

- a) Applicants must complete and attach a Proposed Budget using the template provided (see insert). Please keep in mind that items listed in Section III of this RFP will be provided by DOHMH free of charge.
- b) The proposed budget should be the estimated cost of providing the proposed services for a 3-year budget ensuring the inclusion of the purchase of a new or gently used vehicle in year 1.
- c) Include a narrative budget justification description for each line item (justification for each budgeted line item) based on the project in a separate document entitled "budget justification".

Budget template		
Description	>=40 hrs week	
	FY22	Annualized
<i>Outreach Supervisor</i>	\$	\$
<i>Driver/Health Educator (2)</i>	\$	\$
<i>Maintenance worker</i>	\$	\$
<i>Peers (\$18/hour)</i>	\$	\$
<i>Fringe</i>	\$	\$
<i>Supplies</i>	\$	\$
<i>Mobile vehicle</i>	\$ 100,000	\$ -
<i>Parking @\$500/month</i>	\$ 6,000	\$ 6,000
<i>Vehicle gas and maintenance</i>	\$ 87,360	\$ 87,360
Subtotal	\$ 718,446	\$ 618,446

Funding Process

Institutions selected for funding will receive initial funding in December 2021; remaining funding will be awarded after completion of initial deliverables on June 30, 2022. Documentation of deliverables must be accompanied by an accounting of costs incurred. Depending on completion of deliverables there will be an option to renew contracts for FY 23 (July 1, 2022 to June 30, 2023).

General Disclosures

A. Right to Reject Proposals

The Fund for Public Health in New York may reject any or all proposals received and may ask for further clarification or documentation. Submitted information that does not respond to all items in this RFP may be excluded from further consideration and alternative information packages may not be considered.

The Fund for Public Health in New York may decline to review an application in the event the respondent submits a response after the submission deadline and/or any disparity is found during the evaluation process.

B. Costs

The respondent will be solely responsible for any costs incurred in preparing, delivering, or presenting responses to this RFP. Respondents will not be reimbursed for any costs incurred in preparing proposals.

C. Fulfillment of Requirements

By submitting an information package, the respondent acknowledges that the respondent has read and understands this RFP and is capable of fulfilling all requirements.

D. Submitted Information

Once submitted, responses will be the property of FPHNY and will not be returned.

E. Right to Amend, cancel this RFP, or solicit a New RFP

FPHNY may amend or cancel this RFP at any time, without any liability to FPHNY, and/or DOHMH.

FPHNY or DOHMH may solicit new requests for information and/or proposals regarding the services addressed in this RFP at any time.

F. Amount of Business

FPHNY does not guarantee to any specific amount of business or revenue as a result of this RFP.

G. Security and Confidentiality

Respondents should give specific attention to the identification of those portions of their proposals that they deem to be confidential, proprietary information or trade secrets and provide appropriate justification for why such materials, upon request, should not be disclosed by FPHNY. Such information must be easily separable from the non-confidential sections of the proposal. All information not so identified may be disclosed by FPHNY.

H. Insurance Certificate and A-133 Audit Information

Selected institutions will need to provide proof of liability insurance (including Worker's Compensation) and its most recent certified financial audit report (reports prior to 2013 will not be accepted for review), including A-133 Audit, if applicable. For audit years beginning after 12/26/14, an A-133 Audit is required if your organization

expends \$750,000 in federal funds in the year. For prior audit years the requirement for A-133 was \$500,000 in federal funds during a given year.

Attachments

Attachment A – 2nd Tier SEP Guidance 2021

Attachment B – NYS DOH SEP Waiver Application Guidelines 7-20

REFERENCES

- ⁱ Nolan ML, Tuazon E, Mantha S, Blackman-Forshay J, Paone D. Unintentional Drug Poisoning (Overdose) Deaths in New York City: Bronx, New York. Department of Health and Mental Hygiene: Epi Data Brief (61); December 2015. <https://www1.nyc.gov/assets/doh/downloads/pdf/epi/databrief61.pdf>
- ⁱⁱ Bailey ZD, Moon JR. Racism and the political economy of COVID-19: will we continue to resurrect the past?. *Journal of Health Politics, Policy and Law*. 2020 Dec 1;45(6):937-50. <https://read.dukeupress.edu/jhpl/article-abstract/45/6/937/165296/Racism-and-the-Political-Economy-of-COVID-19-Will>
- ⁱⁱⁱ Reilly KH, Zimmerman R, Huynh M, Kennedy J, McVeigh KH. Characteristics of mothers and infants living in homeless shelters and public housing in New York City. *Maternal and child health journal*. 2019 May;23(5):572-7. <https://pubmed.ncbi.nlm.nih.gov/30569301/>
- ^{iv} Huxley-Reicher Z, Maldjian L, Winkelstein E, Siegler A, Paone D, Tuazon E, Nolan ML, Jordan A, MacDonald R, Kunins HV. Witnessed overdoses and naloxone use among visitors to Rikers Island jails trained in overdose rescue. *Addictive behaviors*. 2018 Nov 1;86:73-8. <https://www.sciencedirect.com/science/article/pii/S0306460317304379?via%3Dihub>
- ^v Yunzal-Butler C, Fisher R, Hinterland K, Agerton T. Trends in Pregnancy, Sexual Behavior, and Use of Contraception among Teens in New York City. New York City Department of Health and Mental Hygiene: Epi Data Brief (98); December 2017. <https://www1.nyc.gov/assets/doh/downloads/pdf/epi/databrief98.pdf>
- ^{vi} Patel VV, Beil R, Slawek D, Akiyama MJ. HIV Prevention and Treatment in the Context of the COVID-19 in the Bronx, New York: Implications for Practice and Research. *AIDS Rev*. 2020;22(3):143-147. doi:10.24875/AIDSRev.20000075 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7883660/>
- ^{vii} Ross J, Diaz CM, Starrels JL. The Disproportionate Burden of COVID-19 for Immigrants in the Bronx, New York. *JAMA Intern Med*. 2020;180(8):1043–1044. doi:10.1001/jamainternmed.2020.2131 <https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2765826>
- ^{viii} Mello E, Tuazon E, Paone D. Patterns of Alcohol-related Injury among New York City Residents. *NYC Vital Signs* 2017, 16(6); 1-4. <https://www1.nyc.gov/assets/doh/downloads/pdf/survey/alcohol-involved-injury.pdf>
- ^{ix} Deren, S., Kang, S. Y., Colón, H. M., & Robles, R. R. (2007). The Puerto Rico–New York airbridge for drug users: description and relationship to HIV risk behaviors. *Journal of Urban Health*, 84(2), 243-254. <https://link.springer.com/article/10.1007/s11524-006-9151-5>
- ^x Abadie, R., Habecker, P., Gelpi-Acosta, C., & Dombrowski, K. (2019). Migration to the US among rural Puerto Ricans who inject drugs: influential factors, sources of support, and challenges for harm reduction interventions. *BMC public health*, 19(1), 1-9. <https://bmcpubhealth.biomedcentral.com/articles/10.1186/s12889-019-8032-2>
- ^{xi} Lim S, Chan PY, Walters S, Culp G, Huynh M, Gould LH. Impact of residential displacement on healthcare access and mental health among original residents of gentrifying neighborhoods in New York City. *PloS one*. 2017 Dec 22;12(12):e0190139. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0190139>