ICE BREAKER

- Please respond to the questions below in the chat box (answer question of your choice)
- Name, Role, Organization, Pronouns
- What are some of your favorite things about your work?
- What are you hoping to learn during this conference?



RFP APPLICANTS' CONFERENCE:

Integrating Substance Use Harm Reduction Into Outreach to People Experiencing Homelessness (IHARP)

May 18, 2023



Thank you for joining us.

A few things before we get started:

- Today's webinar will be **recorded**
- Participant audio will be muted during the presentation
- Please type your questions in the chat box in the lower left corner of your screen
- Any questions not answered during today's webinar will be included in the Q&A
- All slides, recordings, and documents will be shared after the webinar
- To access the RFP and all resources, please visit: <u>https://fphnyc.org/get-involved/requests-proposals/</u>



Agenda

- Welcome and Introductions
- Project Overview (Background, Objectives, Benchmarks)
- Who Should Apply
- Application, Review, and Selection Process
- No-Cost Grant Writing Services
- Questions & Answers
- Reminders

Welcome and Introductions

Introductions

Fund for Public Health in New York City (FPHNYC)

Hye Won Lee – Chief Program Officer
Bethany Burrous – Director of Grants and Contracts
Jessica Lavides – Senior Grants and Contracts Manager
Jacob Orlove – Contracts Coordinator

New York City Department of Health and Mental Hygiene (DOHMH)

Lili Warren – Program Manager Marissa Kaplan-Dobbs – Director of Health Care Providers Initiatives Asmara Tesfaye Rogoza – Senior Practice Implementation Manager Hailey Broughton-Jones – Intern Eileen Kelly – Grant Writing Consultant



Fund for Public Health in NYC

Mission

To incubate innovative public health initiatives that lead to improved health for all New Yorkers.

Impact

18+

years of advocating for cutting-edge public health programming

\$450M

in public and private funds raised

450+

grants supporting innovative projects supporting public health

DOHMH & FPHNYC: A Public Health Partnership



- Provides strategic direction
- Oversees project planning and implementation
- Provides technical assistance
- Monitors program activities
- Monitors contractor performance
- Handles reporting and evaluation



- Issues and manages RFP process
- Provides administrative and financial oversight of project
- Creates and executes formal contracts
- Monitors compliance throughout contract lifecycle
- Handles invoicing and payment





With an annual budget of \$1.6 billion and more than 6,000 employees, the Department is one of the largest public health agencies in the world. Every day, DOHMH protects and promotes the health of over 8 million New Yorkers.

NYC Department of Health and Mental Hygiene

NYC Department of Health and Mental Hygiene

- DOHMH is also one of the nation's oldest public health agencies, with more than 200 years of leadership in the field.
- Health equity is central to the Department's work which is why racial justice is a priority. DOHMH is tackling these issues with innovative policies and programs, and getting exceptional results
- Towards the goal of eliminating preventable COVID-19 mortality (ECM), DOHMH has administered over 10 million doses of COVID-19 Vaccines to date.

Integrating Substance Use Harm Reduction Into Outreach to People Experiencing Homelessness (IHARP)

Project Overview

Project Background

- In New York City, drug overdose continues to be a leading cause of death among people experiencing homelessness.
- Substance use-related harms and overdose deaths are preventable.
- A critical strategy to addressing the overdose crisis is expanding access to substance use-related information, resources, supports, and services to people who use drugs who are also experiencing homelessness.



Project Objectives

- Improve the capacity of organizations serving people experiencing homelessness to engage people who use drugs more effectively and integrate a comprehensive harm reduction approach to engagement and care.
- Ultimately, IHARP is expected to contribute to a reduction in drugrelated harms among people experiencing homelessness in NYC.



Project Model Overview

- Awarded organizations will receive funding, technical assistance, and training to build their capacity and ability to provide essential supports, resources, and services to people who use drugs, via achievement of 12 key benchmarks.
- IHARP is designed to build on awarded organizations' existing areas of expertise and programming and is not meant to replace ongoing work. Organizations will incorporate IHARP workflows into their existing practices.



IHARP Benchmarks

Benchmark Set 1

Description: The first set of IHARP benchmarks focuses on information and resources outreach staff will provide, where geographically available and when applicable, during initial outreach encounters to any participant who indicates they use drugs.

proactive

1. Provide overdose risk reduction messaging and safer drug use tips

- 2. Train participants in the use of and dispense fentanyl test strips
- 3. Train participants in the use of and dispense naloxone
- 4. Discuss options for and connect to **drug-checking services** in NYC
- 5. Offer individualized overdose safety planning
- 6. Discuss and connect to Syringe Service Programs (SSPs) for relevant services
- 7. Refer to a geographically convenient SSP or Second-Tier Syringe Exchange Program (STSEP) for **safer drug use supplies** (e.g., sterile smoking and injection equipment)
- 8. Provide resources for syringe disposal
- 9. Discuss and connect to Overdose Prevention Centers (OPCs)

Benchmark Set 2

<u>Description</u>: The second set of IHARP benchmarks focuses on information and resources to be provided by outreach staff members *whenever a participant mentions a relevant need* during an engagement encounter.

<u>Description</u>: The second set of IHARP 1. Provide relevant connections/referrals to **treatment** for opioid use disorder and/or benchmarks focuses on information alcohol use disorder

2. Provide support, resources, connections around other **primary/specialty care needs** that overlap with substance use (e.g., Hep C testing and care, HIV/AIDS care, withdrawal management, wound care)

3. Provide connections to mental health services

responsive

Anticipated Funding & Contract Term

- Number of awardees: three (3)
- Amount: up to \$200,000 each (a maximum of \$100,000 per year)
- Program duration: two (2) years (July 2023-June 2025)
 - Contract renewal after the first year is dependent upon satisfactory performance and continued funding.
- Deliverables-based contract



Program Components

• DOHMH will provide:

- (1) Training
 - To develop knowledge and skills to allow for the achievement of IHARP benchmarks
 - Combination of asynchronous learning module series, live discussions, and refresher trainings
 - Topics include current drug and overdose mortality trends in NYC, stigma, harm reduction approach and tools (e.g., naloxone, fentanyl test strips, drug-checking services, syringe disposal), treatment for substance use disorders, Hep C care, withdrawal management, wound care, engagement and communication strategies for engaging with people who use drugs
 - Total of ~12 hours during training phase; 6-8 hours for refreshers



Program Components (Cont'd)

• DOHMH will provide:

- (2) Technical assistance
 - E.g., Quarterly Learning Community meetings, connections for participant referrals, supporting Contractors to become Opioid Overdose Prevention Programs to dispense naloxone
- (3) Funding
 - For supplies, resources, materials, hardware, software, educational training, staff compensation needed to meet IHARP benchmarks
- (4) Monitoring and evaluation



Program Components (Cont'd)

- Funded organization staff will:
 - Conduct outreach to people experiencing homelessness who use drugs, adopting a harm reduction, person-centered, equityfocused approach while incorporating IHARP protocols
 - Participate in IHARP training and technical assistance activities
 - Purchase supplies and materials as per budget
 - Meet program requirements outlined in RFP, including achievement of IHARP benchmarks



Program Timeline

Program Phase	Key Program Activities Contracted organizations will:
Baseline Phase	 Identify key staff members Share current protocols and baseline data Concretize details of technical assistance Provide feedback on evaluation plan
Training Phase	 Attend and complete the entirety of the IHARP training curriculum Develop referral lists, educational materials, IHARP workflows Purchase supplies
Implementation Phase	 Implement IHARP workflows during routine outreach Collect IHARP data and submit reports to DOHMH Attend Learning Communities
Sustainability Phase	Develop a IHARP sustainability plan





Key IHARP Staff at Contracted Organizations

Personnel	Key Responsibilities
IHARP Outreach Staff	 Conduct outreach; carry out protocols incorporating IHARP benchmarks Participate in all trainings and technical assistance activities
IHARP Administrative Staff	 Support deliverables submission, invoicing, and other operational activities Complete at least some IHARP training content
IHARP Champion	 Participates in all IHARP activities Liaises between organization, and FPHNYC/DOHMH Promotes and champions IHARP within organization
IHARP Opinion Leader(s) optional	 Participate(s) in Learning Communities Brainstorm(s) around IHARP Promote(s) IHARP within organization



Data Collection, Evaluation, and Reporting

- Contracted organizations will be required to participate in data collection, evaluation, and reporting activities, including
 - Completing pre-/post-training surveys, and keeping training attendance logs
 - Participating in meetings about IHARP preparation, successes, challenges
 - Submitting proofs of purchase of IHARP-related supplies
 - Collecting and reporting IHARP outreach data on participant demographics, engagement in conversations about IHARP benchmarks, needs mentioned by participants, participant interest in a resource or service, linkages to resources and services, and supplies distributed
- Data collected as part of IHARP will be used for evaluation purposes to improve IHARP project during the grant period, understand impacts, successes, and challenges upon project completion, and shape future programmatic work within DOHMH

Health

Who Should Apply





Eligibility Criteria

- Applicants must be a 501(c)(3) nonprofit organization with proof of tax-exempt status
- Applicants must currently provide services within New York City
- Applicants must currently conduct outreach to people experiencing homelessness



Preferred Qualifications

- Provide services in geographical areas of NYC with high rates of drug overdose and substance use-related concerns
- Provide services to marginalized populations of people experiencing homelessness (e.g., people of color, women, people who are pregnant, youth, people with disabilities)
- Utilize participatory/collaborative strategies for engaging people with lived experience of homelessness and/or substance use
- Currently meet a minimum of two (2) yet no more than eight (8) IHARP benchmarks, as this indicates that the organization already has sufficient baseline capacity for providing services to PWUD, while also having multiple benchmarks to work towards achieving
- Demonstrate success in integrating racial equity and social justice principles into its organization's vision and mission



Application, Review, and Selection Process



RFP Timetable

RFP Process	Key Dates
Deadline for Written Questions	Friday, May 19, 2023 at 11:59 p.m. ET Submit to procurement@fphnyc.org
Q&A Posted	May 23, 2023
Application Deadline	June 5, 2023 at 11:59 p.m. ET
Expected Funding Notification*	On or about June 27, 2023
Expected Project Start Date*	July 1, 2023

*Funding notification and project start dates are target dates only. FPHNYC may amend the schedule as needed.



Free Grant Writing Services for IHARP Applicants

- All organizations interested in applying to this RFP can receive NO-COST individualized and confidential grant writing services from the NYC Health Department
 - 45-minute initial virtual consultation
 - Follow-up service (e.g., second follow-up consultation, review of written grant proposal sections)
 - Maximum of 4 hours of consultation work for applicants
- To schedule your initial consultation, please email Eileen Kelly, IHARP Grant Writing Consultant ASAP at <u>kellyhealthnyc@gmail.com</u>





How to Apply

- A complete proposal consists of the following (see Appendix A Proposal Submittal Checklist, page 25):
 - Proposal Narrative in PDF Format
 - Section 1: Current organizational practices
 - Section 2: Participants served
 - Section 3: Organizational unmet needs
 - Section 4: Capacity for IHARP implementation
 - Section 5: Commitment to participatory strategies
 - Section 6: Commitment to racial equity and social justice
 - Budget in Excel Format (reflecting 2 one-year budget periods)
 - Budget Narrative and Justification in PDF Format
- The Proposal narrative must be 10 (ten) pages or less
- Proposals must be submitted via email to procurement@fphnyc.org and include the title of the solicitation, "IHARP," in the subject line





Application Questions and Assessment

- Section 1: Current organizational practices
 - What we are assessing:
 - Experience providing services to people experiencing homelessness
 - Commitment to providing high-quality and accessible services
 - Number of IHARP benchmarks already achieved
 - Structure of and commitment to reaching and providing resources to marginalized populations
- Section 2: Participants served
 - What we are assessing:
 - Extent to which organization serves geographic areas with high overdose mortality rates
 - Volume of people experiencing homelessness engaged during outreach, whether first-time or repeat engagements, and types of services provided



Application Questions and Assessment (Cont'd)

- Section 3: Organizational unmet needs
 - What we are assessing:
 - Whether IHARP would clearly benefit the organization and the participants served
 - Unmet needs of organization's participants with regards to IHARP training curriculum and technical assistance activities
- Section 4: Capacity for IHARP implementation
 - What we are assessing:
 - Organizational capacity, commitment, and readiness for participation in IHARP activities
- Section 5: Commitment to participatory strategies
 - What we are assessing:
 - Commitment to utilizing participatory and collaborative strategies for engaging people experiencing homelessness and people with lived experience



Application Questions and Assessment (Cont'd)

- Section 6: Commitment to Racial Equity and Social Justice
 - What we are assessing:
 - Commitment of organization to integrating racial equity and social justice work into their organization's practices
- Section 7: Organizational chart and staffing plan
 - What we are assessing:
 - Completion and clarity
- Section 8: Budget proposal and justification
 - What we are assessing:
 - Reasonability and necessity of costs to fulfill program goals



Completing Your Budget

- Budgets should reflect all anticipated project costs
 - **This information can be found in the RFP Application Guide under SECTION III: Completing the Application
- Budgets and Narratives should clearly demonstrate how funding will be used to implement proposed project activities and achieve all IHARP benchmarks
- Applicants must use the Proposal Budget Template and Budget Narrative Template provided on FPHNYC's website, <u>https://fphnyc.org/get-</u> <u>involved/requests-proposals/</u>



Budget and Narrative

A	В	С	D			I Services (OTPS), and
Integrating Substance Use Harm R	eduction into Outreach to People Experienci	ng Homelessness (IHARP)				
Proposal Budget Template - YEAR 1						dget Narrative (as shi
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						Applicants are strong
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	OTPS				\$	-
	OTPS		Indirect rate:	0%	\$ \$	-
Subtotal:	OTPS		Indirect rate:	0%		-

BUDGET NARRATIVE TEMPLATE

The purpose of the Budget Narrative is to provide additional details that do not fit within the Proposal Budget Workbook so that FPHNYC and DOHMH can better understand the budget for your project.

INSTRUCTIONS: The Project Budget has three functional categories: Personal Services (PS), Other than Personal Services (OTPS), and Indirect Costs (also referred to as overhead costs). Include each category in your Budget Narrative (as shown below) and provide a description of the expenses within each category. Provide an explanation of how amounts were derived and how the expense support accomplishment of the IHARP benchmarks. If a particular category has no expenses budgeted, mark it N/A.

- Applicants are strongly encouraged to follow this template when preparing their budget narrative.
- The budget narrative shall provide a justification for each proposed cost in the budget and demonstrate how it will support accomplishment of IHARP benchmarks.
- Budget numbers that are mentioned in the narrative should match the numbers in the Proposal Budget Worksheet.

 The budget narrotive has no page limit and will not be counted toward the page limit for the proposal narrotive.



Example Budget Items

- Percentage of staff salaries for time spent on completing IHARP training and technical assistance activities
 - If using IHARP funding for staff time, please indicate how you will be able to sustain IHARP work; it may be in your interest to use funding for staff time related to capacity-building, learning, etc.
- Equipment (e.g., tablets, phones)
- MetroCards



Example Budget Items (Cont'd)

- Additional trainings that would benefit IHARP program and help achieve IHARP goals
 - Additional trainings should be different from those already included in the IHARP training curriculum
 - Trainings could support community engagement work, maintain staff well-being, and/or develop or expand outreach skills (e.g., Critical Time Intervention, Motivational Interviewing, Self-care/Stress Management/Burnout Prevention, Psychological First Aid)
 - If you identify additional trainings for your staff, please include the following information:
 - 1. A hyperlink to training details/organization providing training (if available)
 - 2. A description of how this/these training(s) will support your staff/your CBO's work.
 - 3. Cost
 - If you have topic ideas but have not identified a specific training source, please indicate topic ideas and the amount you'd like to dedicate to the cost of training for each topic

lealtr

Example Budget Items (Cont'd)

- Hygiene packs
 - Can include socks, soap, toothcare items, tissues, comb, hand sanitizer, tampons, menstrual hygiene pads, washcloth, wet wipes, ziplock bags
- Benchmark-specific supplies to dispense during outreach
 - Fentanyl test strips
 - Available to purchase in bulk through BTNX by either ordering through their website (https://www.btnx.com/HarmReduction) or by calling them. BTNX might provide a discounted rate for larger orders if they know that the test strips will be distributed for harm reduction purposes
 - Fitpacks
 - Syringe disposal and carrying containers with a flap inside that separates used from unused syringes
 - Wound care supplies
 - Can include neosporin ointment, saline water vials, wet naps, band-aids, gauze pads, bar of soap



Evaluation & Selection Process

The Evaluation Committee will evaluate and rate all qualified proposals based on the criteria below:

Criteria	Points	Weight
Current Organizational Practices	12	8.5%
Participants Served	12	8.5%
Organizational Unmet Needs	12	23%
Capacity for IHARP Implementation	8	23%
Commitment to Participatory Strategies	4	10%
Commitment to Racial Equity and Social Justice	4	10%
Organizational and Staffing Plan	4	5%
Budget Proposal and Justification	4	12%
TOTAL	60	100%
		NYC

Health

Evaluation & Review Process

SELECTION PROCESS OVERVIEW – 3 ROUNDS

- ROUND 1 Adherence to Mandatory Minimum Requirements
 - Initial administrative review for completeness
- ROUND 2 Proposal Evaluation
 - The Review Committee will evaluate applications and score Applicants according to the evaluation criteria
 - Each application will be reviewed by at least 3 reviewers
- FINAL SELECTION
 - The Review Committee may meet to assign a final ranking score
 - The highest-ranking Applicants will be selected for award



Contracting Process



Health is everybody's business

Post-Award Requirements

- Proof of Nonprofit Status
- Proof of Insurance
 - General liability coverage (\$1M per incident, \$3M aggregate)
 - Workers compensation (as required)
 - Professional liability if providing professional services (\$1M per incident, \$3M aggregate)
 - Employers liability (\$1M per incident)
 - Excess Umbrella Liability if Contractor's insurance policy(s) does not meet limits stated above
- Register as a City of New York approved vendor
 - Payee Information Portal (PIP), system for managing financial transactions
 - PASSPort, City's procurement and sourcing solutions portal



Questions and Answers

- Please type your questions in the chat box in the lower left corner of your screen
- Any questions not answered during today's webinar will be included in the Q&A to be posted on **May 23, 2023**





A Few Reminders

- Upcoming dates
 - Deadline for questions: Friday, May 19, 2023 at 11:59 p.m. ET (email all questions to procurement@fphnyc.org)
 - Q&A to be posted on May 23, 2023
 - Applications due June 5, 2023 at 11:59 p.m. ET
- To receive free grant writing support, email Eileen Kelly, IHARP Grant Writing Consultant ASAP at <u>kellyhealthnyc@gmail.com</u>
- Please be sure to check the FPHNYC website (<u>https://fphnyc.org/get-involved/requests-proposals/</u>) for RFP addenda
- Proposals must be submitted via email to procurement@fphnyc.org and include the title of the solicitation, "IHARP" in the subject line

