REQUEST FOR PROPOSALS (RFP)

BUILDING RESILIENCY AND ADVANCING VACCINE EQUITY PROJECT

ISSUE DATE: NOVEMBER 13, 2023

APPLICATION DUE DATE: DECEMBER 11, 2023

REPLY TO: procurement@fphnyc.org

RELEASED BY:

Fund for **Public Health** NYC

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Acronyms & Abbreviations

The acronyms or abbreviations used in this Request for Proposals (RFP) are defined below.

BIPOC (Black, Indigenous, People of Color) Building Resiliency and Vaccine Equity (BRAVE) Center for Health Equity and Community Wellness (CHECW) Community and Faith-based Organizations (C/FBOs) Community Health Worker (CHW) Fund for Public Health in New York City (FPHNYC) New York City Housing Authority (NYCHA) New York City Department of Health and Mental Hygiene (NYC DOHMH) NYC Health + Hospitals Corporation (H+H) Public Health Corps (PHC) Public Health Solutions (PHS) Request for Proposals (RFP) Task Force on Racial Inclusion and Equity (TRIE) Technical Assistance (TA)

Canvassing – distributing information or materials throughout a geographic area.

Flyering – posting or distributing information flyers in an area or at an event.

Tabling – setting up a table at a specific location to distribute literature or provide information.

Section I: Introduction

Summary of Request

The New York City Department of Health and Mental Hygiene's (DOHMH) Center for Health Equity and Community Wellness (CHECW) and the Fund for Public Health in New York City (FPHNYC) announce the availability of \$4,000,000 to launch Building Resiliency and Vaccine Equity (BRAVE), a new Public Health Corp (PHC) initiative aimed at reducing morbidity and mortality associated with respiratory infections (i.e., COVID-19, influenza). This opportunity will support up to 18 community and faith-based organizations (C/FBOs) in their efforts to reduce racial and ethnic disparities in COVID-19 and influenza immunization by expanding vaccine coverage, confidence, and access. Funding will also be used to raise awareness of long COVID and the impact it can have on individuals' health and wellbeing.

The NYC Public Health Corps (PHC), a citywide investment in and commitment to the public health workforce and just recovery from COVID-19 with and for communities that have been disproportionately impacted. Co-led by the Health Department and NYC Health + Hospitals (H+H), the work of the PHC is grounded in health equity, a transformative and adaptive process that works toward the physical, mental, emotional, developmental, spiritual, and environmental well-being of all New Yorkers.

Background and Need

The mission of the New York City Health Department is to protect and promote the health of all New York City residents. The Center for Health Equity and Community Wellness builds on this mission by strengthening and amplifying the Department's work to eliminate health inequities, which are rooted in historical and contemporary injustices and discrimination, including racism.

Research has shown that reducing barriers to vaccination in communities of color is critical to reducing disparities in disease impact and decreasing COVID-19–related illness. COVID-19 vaccines continue to offer protection for millions of vaccinated New Yorkers, however, lower vaccination rates among certain groups leave them at increased risk for adverse health outcomes (i.e., Long Covid), particularly as new variants emerge.

The NYC Health Department remains committed to fair and equitable access to COVID-19 vaccines. The Public Health Corps maintains a network of C/FBOs that are working towards bridging the vaccine equity gap in neighborhoods designated by the Mayor's Taskforce for Racial Inclusion (TRIE) as those most impacted by COVID-19 and a high percentage of other health and socioeconomic inequities. As of August 2023, 81% of citywide residents have completed a COVID-19 primary vaccination series compared to 78% of resident in TRIE zip codes.

Community-based organizations that are familiar and embedded in the communities they serve are wellpositioned to serve as trusted vaccine messengers to deliver public health messages. The Building Resiliency and Vaccine Equity (BRAVE) initiative will increase investment in organizations with deep roots and strong experience supporting impacted communities. Funded partners will develop messaging, lead engagement, and support navigation of vaccination scheduling systems in their assigned neighborhoods.

Available Funding

Approximately \$4,000,000 will be available in Fiscal Year 2023-2024 to support up to 18 awards, one for each of the priority neighborhoods. Funded organizations will also have the opportunity to receive one-

on-one technical assistance from the NYC Health Department and to participate in a vaccine equity learning community.

Funding will be allocated as stated in the chart below. Funding amounts are divided into three tiers according to population size and expected reach.

Borough	Neighborhood(s)	Zip Code(s)	Maximum Funding Amount	Number of Awards	Tier Number
Bronx	Mott Haven and Melrose	10451, 10454, 10455	\$282,000	1	3
	Charlotte Gardens/Hunts Point	10459	\$236,000	1	2
	Allerton/Norwood/Pelham Parkway/ Williamsbridge	10467	\$282,000	1	3
	Parkchester and Soundview	10472, 10473	\$282,000	1	3
Brooklyn	Williamsburg (South)	11206	\$236,000	1	2
	Cypress Hills/East New York	11207, 11208	\$282,000	1	3
	Ocean Hill – Brownsville	11212	\$236,000	1	2
	Brighton Beach, Coney Island, Seagate, Manhattan Beach, Sheepshead Bay	11224, 11235	\$282,000	1	3
	East New York	11239	\$170,000	1	1
Manhattan	East Harlem	10029, 10025	\$282,000	1	3
Queens	Astoria (South)/Long Island City/Sunnyside	11101	\$170,000	1	1
	Airport/East Elmhurst	11369	\$170,000	1	1
	Woodhaven	11421	\$170,000	1	1
	Queens Village	11429	\$170,000	1	1
	Jamaica	11433	\$170,000	1	1
	Edgemere, Far Rockaway, Arverne	11691, 11692	\$236,000	1	2
Staten	New Dorp, Todt Hill	10304	\$170,000	1	1
Island	Port Richmond, Randall Manor, West Brighton	10310	\$170,000	1	1

Applicants are permitted to apply for multiple neighborhoods; however, a separate application is required for each neighborhood.

If there is an insufficient number of acceptable applications received, FPHNYC reserves the right to adjust the funding allocation and/or maximum number of awards from the applicant pool to ensure that that all funds are awarded. Organizations whose applications deemed fundable but not initially awarded a contract, due to funding limitations may receive an award letter if additional funds become available.

Funding Term and Payment Structure

Successful proposals will be funded for 6-month project period: January 2024 through June 2024. There is potential for contracts awarded under this RFP to be extended; any extensions will be contingent upon the following: availability of funds, continued need for services, and satisfactory contractor performance.

Payment will be made based on reimbursement of allowable expenses up to the maximum award amount. FPHNYC understands that selected C/FBOs may need upfront support to initiate project activities. Therefore, an advance of up to 20% of the total award amount may be paid to recipients upon execution of the contract.

Eligibility

Interested and qualified Applicants that can demonstrate their ability to successfully provide the services outlined in Section II, Scope of Services, of this RFP are invited to submit a proposal, provided they meet the following minimum requirements:

- Applicants must be a 501(c)(3) registered non-profit corporation, or have a fiscal sponsor with (501)(c)(3) tax status, provided that the fiscal sponsor organization meets all eligibility requirements in this RFP. More information on establishing a fiscal agent can be found here: <u>https://www.councilofnonprofits.org/tools-resources/fiscal-sponsorship-nonprofits</u>.
 - Applications will also be accepted from organizations working jointly or as part of coalitions. If applying as a coalition, one organization must serve as the lead applicant when submitting a proposal. Any proposed sub-awarding of funds should be clearly outlined in the application.
- 2. Applicants must be in good standing with the City of New York, State of New York, and the United States Federal Government.
- 3. Applicants must have a valid Unique Entity Identifier (UEI). UEI is a number issued by the System for Award Management (SAM) to identify businesses and other entities that do business with the federal government. Organizations do not need to have a UEI number to apply but will not be able to receive funding until one is obtained. Click <u>here</u> for more information on UEI.
- 4. Applicants must have a physical location in New York City and provide services in one or more of the neighborhoods designated by the Mayor's Taskforce for Racial Inclusion and Equity (TRIE) in 2020 as those most impacted by COVID-19 and a high percentage of other health and socioeconomic inequities. See Appendix A for a full neighborhood listing.

Preferred Qualifications:

- Previous experience conducting COVID-19 community engagement as a trusted credible messenger.
- Experience and ability to fill gaps in service for priority populations, such as, BIPOC (Black, Indigenous, People of Color) communities, seniors, people with disabilities, youth, immigrant populations, reproductive health community, faith-based communities.

Additional Bonus Points:

Additional points will be awarded for minority-led organizations. Minority-led is defined as an organization where 51% or more of overall staff, board members and volunteers in all levels of the organization are people who identify as racial/ethnic minorities.

Section II: Scope of Services

The purpose of this RFP is to develop and implement tailored, accessible, diverse, and culturally relevant messages and engagement for disproportionately impacted communities to increase vaccine awareness, literacy, and confidence, raise Long COVID awareness, and boost Influenza "flu" vaccinations. The specific deliverables are outlined below.

1. Staff Training

Contractors will develop and implement a training/professional development plan to ensure that all staff are appropriately equipped to undertake the work of this project. Plans must incorporate completion of the following trainings to be provided by the NYC Health Department:

- a. Health and safety
- b. Chronic disease prevention and management
- c. Root causes of health inequities
- d. Health coaching protocol
- e. Reporting in the Department's Salesforce database

Contractors will be required to maintain training logs to document completion of the trainings.

2. Monthly Outreach Plan

On a monthly basis, Contractor will develop targeted outreach plans detailing intended community engagement in their assigned zip codes.

3. Data Management Plan

Contractor will be required to submit a data management plan. This plan will outline the person(s) responsible for weekly data collection and data entry, describe internal data tracking process, and detail how data quality and integrity will be maintained.

4. Community Outreach & Engagement

Strategies for outreach and engagement activities will include: Tailored Messaging, Message Dissemination, In-person Engagement, Community Conversations, and Navigation. Performance targets for activities and reach have been developed for each funding level and are summarized in the table below. Targets are based on a 5.5-month performance period. Contractors are expected to meet all targets to achieve full reimbursement.

	Tier 1 Neighborhoods	Tier 2 Neighborhoods	Tier 3 Neighborhoods	
Deliverable	Expected Targets	Expected Targets	Expected Targets	
Tailored Messaging	1 Tailored Messaging	1 Tailored Messaging	1 Tailored Messaging	
Plan	Plan/Contract Period	Plan/Contract Period	Plan/Contract Period	
	5 Tailored Messaging	7 Tailor Messaging	9 Tailored Messaging	
Tailored Messaging	Products/Contract	Products/Contract	Products/Contract	
Products	Period	Period	Period	
Message	4 Disseminated	6 Disseminated	8 Disseminated	
Dissemination	Messages/Week	Messages/Week	Messages/Week	
In-Person	2 In-Person	3 In-Person	4 In-Person	
Engagement	Engagement/Week	Engagement/Week	Engagements/Week	
Community	1 Community	1 Community	1 Community	
Conversations	Conversation/Week	Conversation/Week	Conversation/Week	
One-on-One				
Navigation	90 Navigations/Week	165 Navigations/Week	260 Navigations/Week	
	7 Evaluation	7 Evaluation	7 Evaluation	
	Activities/Contract	Activities/Contract	Activities/Contract	
Evaluation	Period	Period	Period	

A. Tailored Messaging

Create tailored COVID-19 messaging and materials that are community-informed, culturally and linguistically appropriate, and accessible. Messaging must focus on building vaccine confidence and address concerns. Products may include posters, palm cards, flyers, infographics, public service announcements, videos, podcasts, or other forms of messaging as approved by the NYC Health Department.

Materials must be developed using information from credible sources of health information, such as the Centers for Disease Control and Prevention (CDC), New York State Department of Health (NYSDOH), and the NYC Health Department. Completed products must be approved prior to dissemination to ensure information aligns with current health guidance.

B. Message Dissemination

Widely disseminate information on COVID-19 vaccines with (1) timely updates to networks when new information is released (DOHMH will provide timely updates for distribution) and (2) distribution of tailored digital video and/or audio messages weekly (DOHMH will not provide these). Distribution methods may include listservs, local media, social media, messaging apps, webinars, phone trees, or other methods for messaging as approved by the NYC Health Department.

Metrics to be reported on a weekly basis include:

- Number of materials distributed;
- Number of community members engaged.

C. In-Person Engagement:

Plan and implement in-person engagement events every week for community members to access messaging. Options for events include flyering, public tabling, door-to-door, or other in-person engagements.

Metrics to be reported on a weekly basis include:

- Number of events/activities;
- Number of materials distributed;
- Number of community members engaged.

D. Community Conversations

Lead at least 1 community conversation every week (30 minutes minimum) with community members to deepen understanding of vaccine fears/concerns, collect feedback on vaccine rollout, build community-driven vaccine confidence and trust, and increase knowledge of local vaccination locations and availability. DOHMH may be able to provide medical professionals for participation in community conversations; however, availability cannot be guaranteed. Applicants can also elect to utilize professionals within their network to fulfill this role.

Metrics to be reported on a weekly basis include:

- Number of meetings;
- Number of community members engaged;
- Number of materials distributed.

E. Navigation

Engage and provide one-on-one navigation services to individuals weekly to support vaccination access/appointments. Services will include:

- Booking appointments or supporting individuals in finding a walk-up site.
- Providing information for or setting up appropriate transportation for eligible New Yorkers to and from vaccination site.
- Facilitating referrals/recommendations to other providers and community partners for individuals in need of other health or social services.

Metrics to be reported on a weekly basis include:

- Number of navigation engagements;
- Demographic information of community members engaged;
- Number of materials distributed.
- 5. Evaluation

Participate in up to 7 evaluation activities facilitated by DOHMH that may include completing surveys and/or story collection forms, attending sharing sessions, and completing a final written report. The goal is to develop a shared understanding about the barriers, challenges, needs, and success stories related to vaccine messaging, equity, and access.

Requirements of the Program

- Meeting Participation: Contractors will be required to participate in regular meetings and calls with Health Department staff, including weekly check-ins. These meetings help to ensure that program deliverables are being accomplished and align with the contract and timely submission of data and invoicing. Additionally, recipients will be required to attend monthly Partner's Forum where the latest public health information will be provided. Recipients may be asked to present to the DOHMH-hosted Partner's Forum to share lessons learned.
- 2. Data Collection and Reporting: Contractors will be responsible for collection and timely and accurate entry of programmatic data into a NYC Health Department-administered database. Required data will include, but is not limited to, participant-level data, such as participant demographics, participant health goals and outcomes (at intake and follow-up), and case management notes, as well as event and activity data and summaries.
- 3. Partner Coordination: Contractor may be asked to collaborate with and align activities with partners and others working in the neighborhood on COVID-19 vaccine efforts.
- 4. Health and Safety Requirements: All in-person activities must adhere to current health and safety requirements. Masking while conducting outreach events and in-person activities is strongly encouraged.
- 5. Virtual Meeting Capabilities: Contractor must have the capacity to provide in-person and remote health coaching services using various digital/telephonic platforms including but not limited to Zoom, WebEx, Facebook Live, or conference calls. Contractors will purchase and maintain all digital communication and media software and platforms.

Administrative Requirements

- Contractors will be required to name a dedicated project lead who will serve as the main programmatic point of contact for DOHMH and FPHNY. The Project lead should be the individual responsible for day-to-day management of the project, including daily/weekly reporting. Contractors will also be required to name a fiscal/administrative contact who will serve as the main point of contact for contract administration and invoicing.
- 2. Contractor will maintain a financial management system which will provide accurate, current, and complete financial results for each program activity funded under this agreement. Funding for this agreement shall be accounted for separately and shall only be used by the Contractor for the activities, services and specific locations described hereunder and for no other purpose. Contractors is also responsible for establishing and maintaining effective internal controls, including internal controls over compliance, and for evaluating and monitoring ongoing activities to help ensure that appropriate goals and objectives are met; following laws and regulations; and ensuring that there is reasonable assurance that programs are administered in compliance with all requirements.
- 3. Contractors, or their fiscal sponsor, must be City-approved vendors registered in the Payee Information Portal (PIP) and also in the Procurement and Sourcing Solutions Portal (PASSPort) before receiving funding. Organizations that are not yet registered in PIP and PASSPort should begin the process as soon as possible to ensure that they are able to meet these requirements if awarded a contract.
- 4. Contractors, or their fiscal sponsor, must provide proof of required insurance coverage prior to

work commencing. Further detail on insurance requirements can be found in Section IV.D on page 18.

5. Contractors must comply with all applicable federal, State, and local laws and regulations.

NYC Health Department Support

BRAVE partners will receive the following types of support from the NYC Health Department for this project:

- A project orientation workshop for Brave partners.
- Core trainings on the following:
 - Health and safety
 - Chronic disease prevention and management
 - Root causes of health inequities
 - Health coaching protocol
 - Navigating the Department's Salesforce database for reporting
- Convening of partners for peer learning opportunities to foster information exchange, sharing of best practices, networking, and team building.
- Technical support around evaluation methods and tools such as data collections forms, feedback questionnaires, and qualitative data collection and analysis.
- Scientific and public health information and resources on COVID-19 vaccines and other routine vaccinations, Long COVID, and addressing misinformation and myths about vaccinations.
- Design and production support for messaging and product development.
- Sharing of promising practices for facilitating community meetings, storytelling and story-based strategy, racial justice and trauma-informed framing, etc.
- Outreach materials specific to BRAVE that can be disseminated to community members.

Use of Funds

The amount of funding requested should be directly related to the activities included and the level of effort and cost of provided services. Funds must be used solely for implementing proposed project activities and achieving BRAVE deliverables during the program period. <u>Funds must supplement, not supplant, existing services and may not be used to pay for existing levels of services funded from any other sources.</u>

Funds may be used for, but are not limited to, the following program-related purposes:

- Salary & Wages: Include staff time supporting program activities. This may include percent time of existing staff or salaries of new staff.
- Fringe Benefits: Include costs of leave, employee insurance, unemployment benefit plans, etc. Should be based on actual costs or an established formula.
- Consultant Costs: Include costs related to hiring an individual who will give professional advice or services (e.g., training, expert consultant, etc.) for a fee. This individual is not and cannot be an employee of the organization.
- Local Travel: Include costs for local travel during project period, if this is applicable to your respective strategy. Only local travel is allowable and must utilize the most cost-effective way practicable. MetroCards must be budgeted as pay per ride cards; unlimited MetroCards are not allowable and will not be reimbursed.

- Supplies: Include costs for supplies that support program activities (e.g., computers, printers, computer software and applications, educational materials, COVID-19 test kits, and general office supplies).
- Other: Include costs associated with your activities not covered in other categories, such as:
 - Event expenses such as room rental fees, interpretation services, or rental equipment
 - Outreach materials such as fliers or paid social media posts
- Contractual Costs: Include costs for: 1) work performed by an independent contractor requiring specialized knowledge, experience, expertise or similar capabilities. 2) purchase of a product or service to be procured by contract and an estimate of cost.
- Indirect costs: Capped at 10% of direct costs.

Section III: Timeline and Award Information

RFP Timetable

The following timeline represents the tentative schedule of the entire RFP process, from solicitation to program implementation. The dates listed here are subject to change. Any amendments to the RFP, including this timeline, will be posted at: <u>https://www.fphnyc.org/get-involved/rfps/</u>. Applicants are responsible for monitoring the website for any changes prior to the submittal deadline.

November 13, 2023	Request for Proposals (RFP) Release
November 28th, 10:00 a.m. ET	An Information session will be held for interested organizations to learn more about the RFP. See below for details on how to participate.
November 30, 2023, 11:59 p.m. ET	Deadline for Written Questions
December 1, 2023	Q&A Posted
December 11, 2023, 11:59 p.m. ET	Application Deadline
January 3, 2023	Expected Notification of Awards*
January 22, 2023	Expected Project Start Date*

*FPHNYC may amend the schedule as needed.

Applicant Information Session

A virtual information session will be held for prospective applicants on Tuesday, November 28, 2023, at 10:00 a.m. ET to answer questions related to this RFP. The information session will be via Zoom (connection details below). While participation in the information session is not mandatory, it is strongly recommended. A recording of the webinar will not be available, but the slide deck and Q&A document will be posted to FPHNYC's website.

Webinar Information Session: November 28, 2023, at 10:00 – 11:00 a.m. ET This is an online conference only. To join the presentation, use the following link: <u>https://us02web.zoom.us/j/89170237552?pwd=VEs2cGwzM21DdDdVai9qaFpDU1I0UT09</u> Meeting ID: 891 7023 7552 Find your local number: <u>https://us02web.zoom.us/u/kvYPpbzMp</u>

RFP Inquiries, Written Questions and Answers

Interested parties may submit questions in writing prior to the date and time indicated in the RFP schedule above. All questions must be submitted via e-mail to procurement@fphnyc.org with a subject line of "BRAVE RFP." Questions received after the deadline may not be answered.

The Q&A will be posted at: <u>https://www.fphnyc.org/get-involved/rfps/.</u>

Applicants are encouraged to check the webpage frequently to stay informed throughout the procurement process.

Addenda to the RFP

If necessary, FPHNYC will issue addenda to amend conditions or requirements relating to the RFP. Any addenda to the RFP will be posted on the FPHNYC website: <u>https://www.fphnyc.org/get-involved/rfps/</u>. <u>Applicants are encouraged to check the website prior to submitting their final proposal.</u>

Section IV: Completing the Application

Applicants should follow the instructions set forth below in the preparation and submission of their proposal. FPHNYC will not be responsible for any proposal that does not follow the instructions in this RFP, and may, at its discretion, reject any such non-compliant or incomplete proposal.

Submission Instructions

Proposals must be submitted by 11:59 p.m. ET on December 11, 2023, using the online Proposal Submission Form in SurveyMonkey linked below. Google Chrome and Mozilla Firefox are the recommended web browsers for submitting this application.

CLICK HERE TO ACCESS THE PROPOSAL SUBMISSION FORM.

Or copy and paste the following URL into your address bar: <u>https://www.surveymonkey.com/r/TKZZ6J8</u>

Please note that there is no option to save your work on the online form. Applicants must ensure that time is set aside to complete the Proposal Submission Form in one sitting. To facilitate this process, use the list of questions in the Application Guide to compile the content for the proposal, and copy and paste the responses into the Proposal Submission Form. It is also recommended that Applicants complete all attachments and gather all file uploads prior to beginning the online form.

Once submitted, Applicants will see the following confirmation message, "Your application has been successfully submitted and will be reviewed by the selection committee." Applicants are strongly encouraged to submit their applications at least 48 hours prior to the due date and time. This will allow sufficient opportunity to obtain assistance should there be a technical issue with the submission process.

Proposal Contents

There are six sections to the Proposals Submission Form and four required attachments. Each is very important. Incomplete proposals will not be considered.

- 1. Proposal Submission Form All questions will be answered within the fields in the online form.
 - Section I: Eligibility Questionnaire (4 questions)

First, Applicants must complete a questionnaire to determine their eligibility. After demonstrating that the RFP's minimum requirements have been met, Applicants will be able to complete the full application.

- Section II: Applicant Information (16 questions)
- Section IIa: Fiscal Sponsor Information (10 questions; for organizations using a fiscal sponsor only)
- Section III: Qualifications & Organizational Experience (14 questions)
- Section IV : Organizational Capacity (11 questions)
- Section V: Proposal (5 questions per deliverable)

• Section VI: Proposal Budget, Narrative, and Audited Financial Statements

A list of all the survey questions is included in the Application Guide posted along with this RFP. The guide also includes instructions on preparing your budget and budget justification and other helpful tips for completing the application.

- 2. Attachments The following forms and attachments must be completed and signed as required and submitted via SurveyMonkey with the Applicant's online proposal form.
 - Applicant Signature Form see Attachment A
 - Budget Proposal template available in Attachment B
 - Budget Justification template available in Attachment C
 - W9 see Attachment D
 - Audited Financial Statements

Section V. Selection Process and Review Criteria

Applications meeting the guidelines above will be evaluated by a review panel convened by the NYC Health Department. Proposals will be scored based on the following criteria. The values assigned to each survey section and proposal component are an indication of the relative weight that will be given when scoring proposals. A maximum total of 100 points are possible.

CATEGORY	POINTS
Qualifications and Experience	30
Proposed Plan and Approach	40
Organizational Capacity	15
Budget	10
Additional Bonus Points	5
Maximum Points Awarded	100

The review process will consist of the following steps:

- FPHNYC will conduct an initial review to screen proposals for eligibility, completeness, and technical requirements. Those that are determined to be eligible will then be evaluated by the Review Committee.
- The Committee will evaluate applications and score Applicants according to the criteria listed above. After scoring, the Committee will rank Applicants by neighborhood according to final weighted score. As part of the evaluation process, at the discretion of the Committee, Applicants may choose to interview applicants to request additional clarification and/or information from applicants. However, under no circumstances will the Applicant be allowed to make changes to the response.
- 3. The review committee will recommend the highest-ranking proposals within each priority neighborhood for funding to the NYC Health Department's leadership. The final selection will be based on scoring, as well as additional factors such as: (1) achieving an effective and integrated mix of strategies; and (2) inclusion of priority communities and populations disproportionately affected by racial and health inequities.

Basis for Award

The NYC Health Department will select the Applicant whose proposal is determined to be the most advantageous to the Department, taking into consideration the evaluation criteria listed above. Additionally, final award decisions may consider past contract performance (if Applicant has current contract(s) or had contracts within the last three years with FPHNYC and/or the City of New York) or reference/background checks for Applicants without any prior or recent contracting relationship with FPHNYC and/or the City of New York.

Award Process

Each Applicant submitting a proposal will be notified in writing regarding the decision concerning their proposal. The contract or contracts resulting from this RFP will be held between the Fund for Public

Health in New York City, an independent 501(c) (3) not-for-profit organization, in its role as NYC Health Department's fiscal agent, and the selected applicant(s). Any contract award will be subject to timely and successful completion of contract negotiations, demonstration of all required insurance coverage, and all other requirements of FPHNYC, the NYC Health Department, or any other applicable federal, state, or local laws and policies.

At the discretion of FPHNYC and NYC Department of Health, final awards may be less than requested to distribute funds among Contractors and ensure adequate distribution of services throughout priority neighborhoods and communities. FPHNYC also reserves the right to adjust deliverables and timeframes in response to changes in need or priorities.

Section VI: Disclaimers and General Provisions

Applicants shall review each statement below to ensure capacity for compliance before submitting a proposal for consideration.

- 1. By submitting a proposal, the Applicant acknowledges that they have read and understand this RFP and can fulfill all requirements. Once submitted, submittals will be the property of FPHNYC and will not be returned.
- 2. FPHNYC may amend or cancel this RFP at any time, without any liability to FPHNYC and/or NYC Department of Health.
- 3. FPHNYC may reject any or all proposals received and may ask for further clarification or documentation. Submitted information that does not respond to all items or confirm to the requirements of this RFP may be excluded from further consideration and alternative information packages may not be considered.
- 4. FPHNYC may make an award under the RFP in whole or in part, or award more than one contract by awarding separate items or groups of items to various proposers.
- 5. Prior to application opening, FPHNYC may amend the RFP specifications to correct errors or oversights, or to supply additional information, as it becomes available. FPHNYC may also direct applicants to submit proposal modifications addressing subsequent RFP amendments.
- 6. Prior to the start of work, selected Contractors, including coalition members, shall procure and maintain in force at all times during the term of the agreement, insurance of the types and in the amounts set forth below:
 - I. <u>Commercial General Liability</u>: insurance to provide coverage for bodily injury and property damage, including damage to any facilities, equipment or vehicles, in limits of no less than \$1,000,000 per occurrence \$3,000,000 aggregate.
 - II. <u>Professional Liability</u>: medical malpractice or errors and omissions insurance in limits of no less than \$1,000,000 per occurrence and \$3,000,000 aggregate.
 - III. <u>Employers Liability</u>: insurance to provide coverage for the acts and omissions of Contractor's employees in limits of no less than \$1,000,000 per accident.
 - IV. <u>Workers' Compensation</u>: workers' compensation and disability insurance as required by the applicable New York State law.
 - V. <u>Commercial Auto</u>: if Contractor plans to use any vehicles in the performance of services under the agreement, Contractor shall obtain commercial auto coverage for all owned, non-owned, and hired vehicles, written on a form at least as broad as ISO form CA 00 01, with minimum limits of \$1,000,000 per accident.

VI. <u>Excess Umbrella Liability:</u> in the event that Contractor's insurance policy(s) does not meet the limits stated above.

Contractor shall maintain on file with FPHNY current Certificates of Insurance for the above referenced policies, listing FPHNY and the City as Additional Insureds for General Liability policies and as Certificate Holders for all other required insurance.

7. This project is being supported with funding from the NYC Health Department, which requires that vendors register in the City's Payee Information Portal (PIP). In PIP, vendors can view financial transactions with the City of New York, register for Electronic Funds Transfer payments and more. For more information, please visit: <u>https://a127-pip.nyc.gov/webapp/PRDPCW/SelfService</u>.

For awards of \$100,000 or more, vendors will also be required to register in PASSPort, the City's digital procurement system. PASSPort training and information materials are available through videos, user guides and FAQs at <u>www.nyc.gov/passport</u>.

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

APPENDIX A

Listed below are the selected neighborhoods identified by the Taskforce for Racial Equity and Inclusion based on equity burdens and the impact of COVID-19.

Borough	Zip Code	Neighborhood
Bronx	10451	Concourse/Melrose
	10454	Mott Haven/Port Morris
	10455	Mott Haven
	10459	Charlotte Gardens/Hunts Point
	10467	Allerton/Norwood/Pelham Parkway/Williamsbridge
	10472	Soundview
	10473	Castle Hill/Clason Point/Soundview
Brooklyn	11206	Williamsburg (South)
	11207	Cypress Hills/East New York
	11208	Cypress Hills/East New York
	11212	Ocean Hill-Brownsville
	11224	Brighton Beach/Coney Island/Seagate
	11235	Brighton Beach/Manhattan Beach/Sheepshead Bay
	11239	East New York
Manhattan	10029	East Harlem
	10035	East Harlem
Queens	11101	Astoria (South)/Long Island City/Sunnyside
	11369	Airport/East Elmhurst
	11421	Woodhaven
	11429	Queens Village
	11433	Jamaica
	11691	Edgemere/Far Rockaway
	11692	Arverne/Edgemere
Staten Island	10304	New Dorp/Todt Hill
	10310	Port Richmond/Randall Manor/West Brighton

Below is a map of New York City depicting the neighborhoods (shaded in blue) to be served by the BRAVE initiative.

