



CRDP Native American
Technical Assistance Provider Solicitation
Bidders Conference

Prepared by:



ANDREW CHANG & Co, LLC

March 15, 2016

CRDP Native American Technical Assistance Provider Solicitation Bidders Conference

To Call in to Conference:

1-866-434-5269

Access Code: 3249261#

Agenda

- 1:00 – 1:05** **Housekeeping**
William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health
- 1:05 – 1:10** **Roll Call**
William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health
- 1:10 – 1:20** **Welcome & Introductions**
Marina Augusto, MS Counseling, Staff Services Manager
Office of Health Equity, California Department of Public Health
- 1:20 – 1:45** **California Reducing Disparities Project (CRDP) Overview**
Marina Augusto, MS Counseling, Staff Services Manager
Office of Health Equity, California Department of Public Health
- 1:45 – 2:00** **Procurement Overview**
Andrew Chang, Consultant
Andrew Chang & Company
- 2:00 – 2:25** **Native American Technical Assistance Provider**
William Porter, MS, Contract Manager
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- 2:25 – 2:30** **Roll Call**
William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health
- 2:30 – 2:40** **Break**
- 2:40 – 3:55** **Q&A**
All
- 3:55 – 4:00** **Roll Call**
William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health

Agenda: Housekeeping

1:00 – 1:05	<p>Housekeeping William Porter, MS, Contract Manager Office of Health Equity, California Department of Public Health</p>
1:05 – 1:10	<p>Roll Call William Porter, MS, Contract Manager Office of Health Equity, California Department of Public Health</p>
1:10 – 1:20	<p>Welcome & Introductions Marina Augusto, MS Counseling, Staff Services Manager Office of Health Equity, California Department of Public Health</p>
1:20 – 1:45	<p>California Reducing Disparities Project (CRDP) Overview Marina Augusto, MS Counseling, Staff Services Manager Office of Health Equity, California Department of Public Health</p>
1:45 – 2:00	<p>Procurement Overview Andrew Chang, Consultant Andrew Chang & Company</p>
2:00 – 2:25	<p>Native American Technical Assistance Provider William Porter, MS, Contract Manager Office of Health Equity, California Department of Public Health</p>
2:25 – 2:30	<p>Roll Call William Porter, MS, Contract Manager Office of Health Equity, California Department of Public Health</p>
2:30 – 2:40	<p>Break</p>
2:40 – 3:55	<p>Q&A All</p>
3:55 – 4:00	<p>Roll Call William Porter, MS, Contract Manager Office of Health Equity, California Department of Public Health</p>

Housekeeping

- Attendance is mandatory. We will have multiple roll calls to ensure Web/Phone attendees presence is recorded
- We will be recording the Bidders Conference
- Out of respect for all participants, all questions will be held until the end of the conference, in the time allotted for Q&A. Questions and answers will be used to create a Frequently Asked Questions list that will appear on our website and on Cal eProcure
 - Each speaker will be allotted two minutes. We ask that you identify yourself when speaking
- Our staff have cards if you wish to write down your questions. You may also ask staff to pass them to us and we will read them for you. Please put your name on the card.
- Preliminary responses may be provided to questions verbally during this conference, however no responses will be considered final or binding until they have been posted in writing to the CDPH website and to Cal eProcure
- Sign-in sheets and list of webinar participants will be shared

Housekeeping

- Restrooms, exits, refreshments
- Please turn off cell phone ringers
- Allow presenters to finish presentations. There will be time at the end of the presentation for questions
- Listen actively. Respect others when they are talking
- If you are participating by WebEx/Dial-In and wish to submit a question or comment, please do so through the WebEx Q & A function. Staff will be monitoring the questions and provide time to address them in each Q & A session



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Welcome and Introductions



CRDP Bidders Conference | March 15, 2016

Agenda: California Reducing Disparities Project (CRDP) Overview

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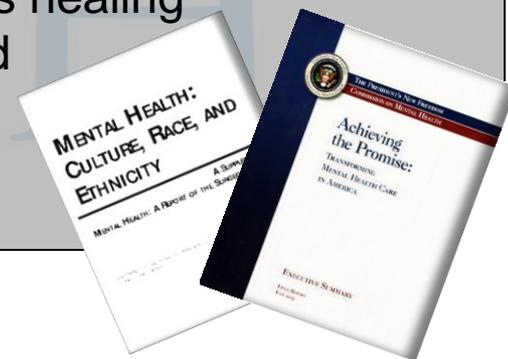
Office of Health Equity was created with the goal of eliminating health and mental health disparities and inequities

- Achieving the highest level of health and mental health for all people, with special attention focused on those who have experienced socioeconomic disadvantage and historical injustice, including, but not limited to, vulnerable communities and culturally, linguistically, and geographically isolated communities.
- *Working collaboratively* with the Health in All Policies (HiAP) Task Force to *promote* work to prevent injury and illness through improved social and environmental factors that promote health and mental health.
- *Advising* and *assist* other state departments in their mission to increase access to, and the quality of, culturally and linguistically competent health and mental health care and services.
- Conducting policy analysis and developing strategic policies and plans regarding issues affecting vulnerable communities and places to increase positive health and mental health outcomes and decrease disparities and inequities.
- *Establishing* a comprehensive, cross-sectoral strategic plan to eliminate health and mental health disparities and inequities.

CRDP's Vision is a California in which all individuals receive quality, culturally and linguistically competent mental health services

We envision a California in which all individuals, regardless of race, ethnicity, sexual orientation, or gender identity, receive quality mental health prevention and treatment services delivered in a culturally and linguistically competent manner.

- Anticipated near-term (5-10 year) outcomes:
 - Numerous Community Defined Evidence Practices (CDEPs) funded in Phase 2 found to be effective
 - Validated CDEPs funded by county mental health departments throughout California using Mental Health Services Act (MHSA) funds
 - Relationship between unserved, underserved and inappropriately served communities and county mental health departments is healing
 - Underserved communities advocate for individual and collective needs locally and statewide



The CRDP Strategic Plan includes four overarching themes and five goals

Four Over Arching Themes:

1. Address and incorporate cultural and linguistic competence at all levels
2. Implement Capacity Building at all levels
3. Improve data collection standards
4. Address social and environmental determinants of health

Five Goals:

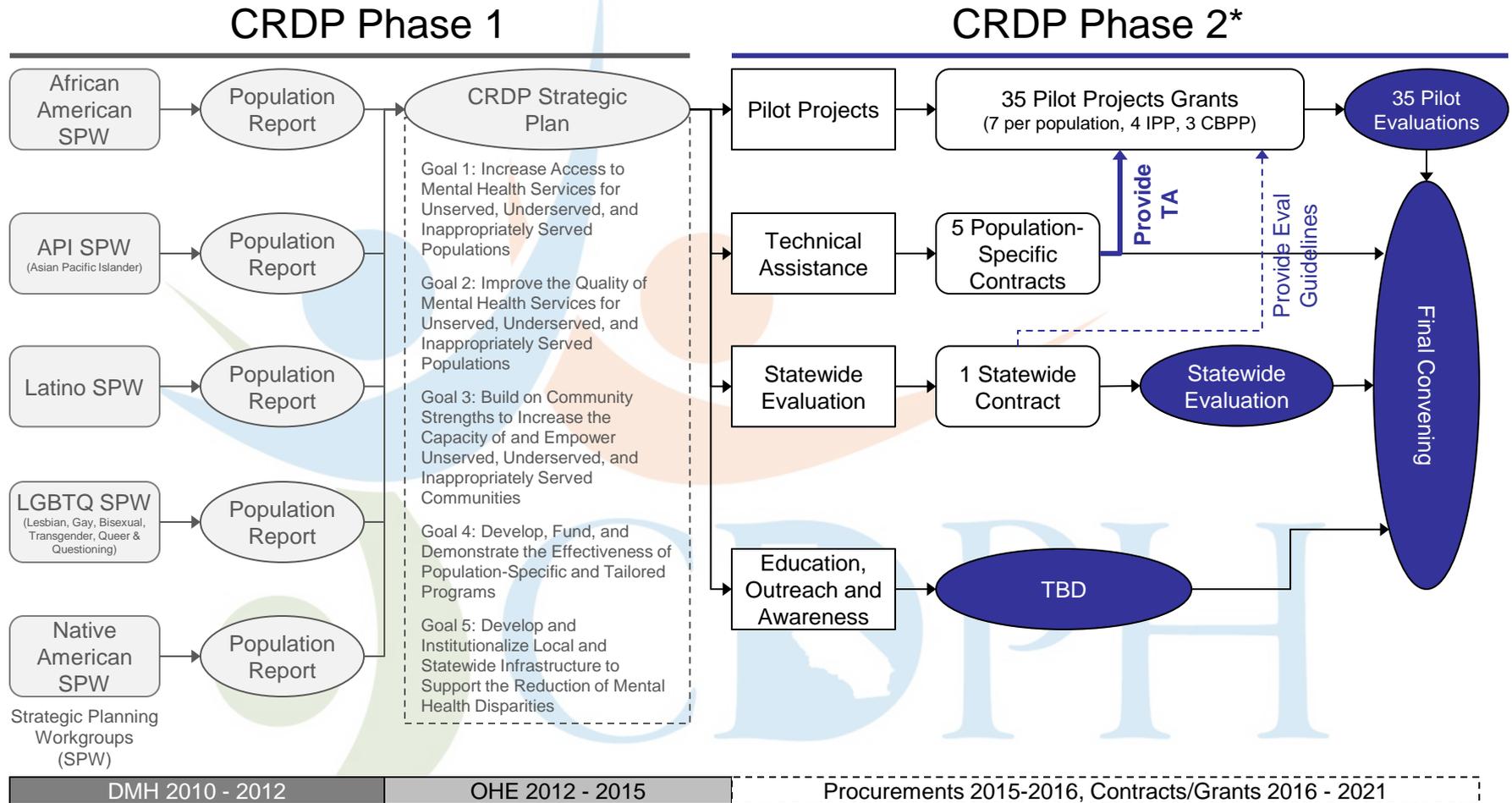
1. Increase Access
2. Improve the Quality of Services
3. Build on Community Strengths to Increase the Capacity of and Empower Unserved/Underserved/Inappropriately Served
4. Develop, Fund, and Demonstrate the Effectiveness of Population-Specific and Tailored Programs
5. Develop and Institutionalize Local and Statewide Infrastructure to Support the Reduction of Mental Health Disparities

CRDP Phase 1 Update

The Draft CRDP Strategic Plan was extensively vetted:

- 35 day public comment period which included 5 Town Halls (Los Angeles, San Diego, Fresno, Oakland, and Eureka)
 - CRDP Partners from each of the 5 populations / CA MHSA Multicultural Coalition
 - Community
 - State departments and other entities called to action in the Strategic Plan
-
- Timeline for Publication/Dissemination
 - CRDP Strategic Plan is in the final approval stage with CDPH leadership.
 - Once approved:
 - CPEHN posts on their website / Eblast Announcement
 - Office of Health Equity Press Release: Ethnic Media Outlets
 - Office of Health Equity Website & Eblast Announcement
 - CPEHN's Final Conference

CRDP Phase 2 consists of over 40 contracts and grants



* In process, specific details subject to change



CRDP Phase II is focused on the demonstration and evaluation of promising practices

What CRDP Phase II Is

- One-time demonstration of limited number of promising practices within targeted communities
- Opportunity to develop and implement new methods to gather data
- Exhibition of new community participatory program evaluation methods to prove effectiveness
- Effort to achieve system changes through concerted efforts

What CRDP Phase II Is Not

- Comprehensive program to address all the mental health needs of targeted communities
- Statewide program that impacts populations beyond African American, Asian American/Pacific Islander, Latino, Native American and LGBTQ communities
- Continuous funding source for promising practices

Demonstration pilot projects are seeking to validate community-defined evidence practices

Community-Defined Evidence Practice: A set of bottom-up practices derived from a community's ideas of illness and healing or positive attributes of cultural or traditional practices. In addition, the practice has been used by the targeted community, which has determined it to yield positive results through community consensus. While some CDEPs may have been measured empirically, this is not necessary to show that there is a consensus in the community regarding its effectiveness. CDEPs can include a range of culturally tailored treatment approaches or support (Martinez, 2010; CIBHS, 2014; Community Defined Evidence Project Work Group, 2007). These services are often culture-specific practices that are supported by community experience but generally not yet recognized or funded by the public mental health system.

CRDP Phase 2 solicitations were drafted and vetted through a thorough public process



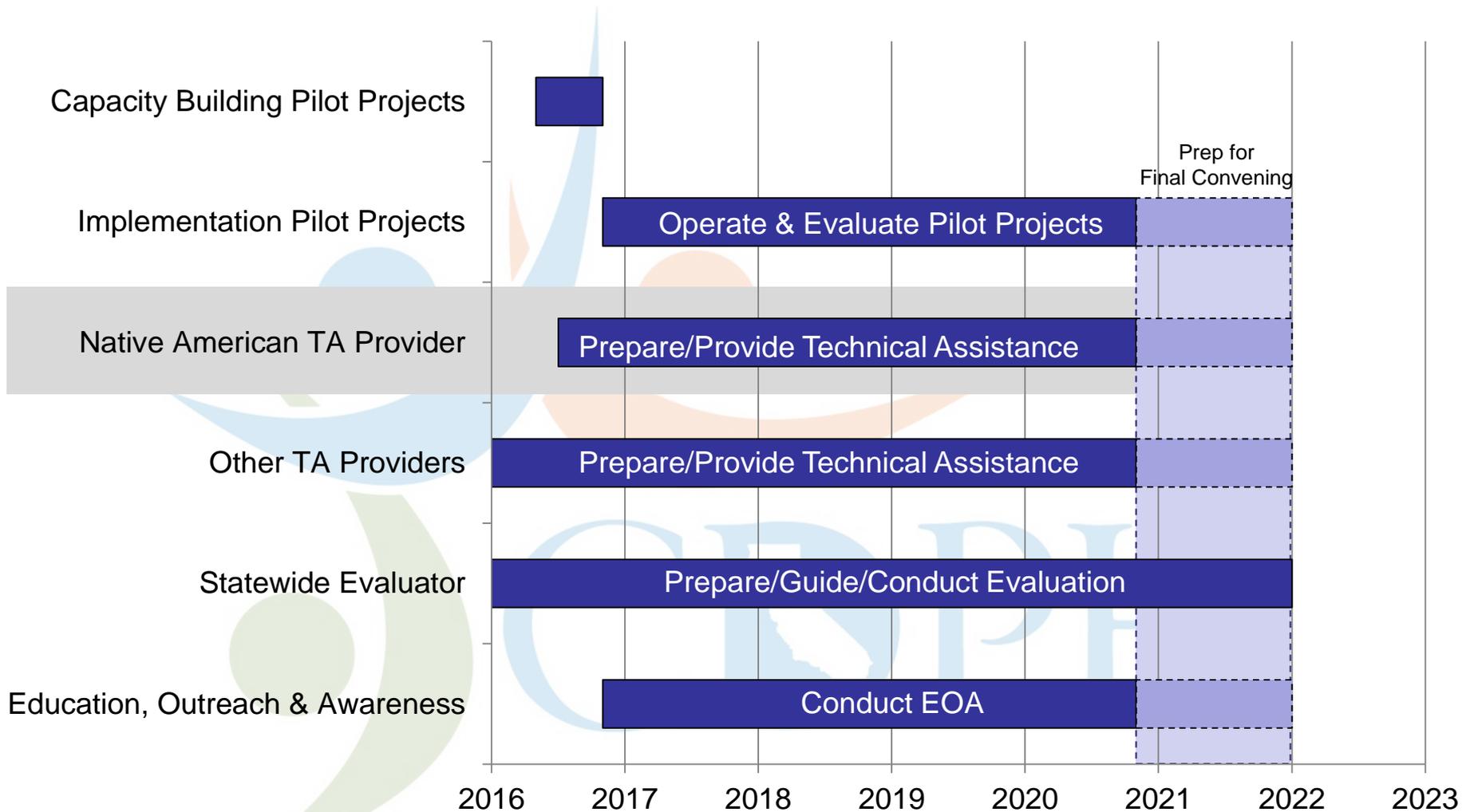
Timeline	April 2014 - Present	August 2014	December 2014	March 2015
	<ul style="list-style-type: none"> ▪ Interviews conduct with internal and external informants 	<ul style="list-style-type: none"> ▪ An informal advisory committee comprised of subject matter experts that provided feedback to CDPH regarding its planned design for Phase II. ▪ Approximately 6 Brain Trust members were selected based on their professional reputation in cultural competence and experience working with CRDP target populations. 	<ul style="list-style-type: none"> ▪ Four community forums held across the state: <ul style="list-style-type: none"> - Oakland - Los Angeles - Fresno - Online ▪ Over 200 attendees ▪ Over 100 questions answered 	<ul style="list-style-type: none"> ▪ Solicitations were made available for public comment for four weeks ▪ 68 comments received from 28 individuals



In total, over 40 solicitations will be completed with a budget of \$60,000,000

Wave	Procurement	Key Functions	# Awards	Total Funding	Funding Term	Avg per contract per year
I	Statewide Evaluator	<ul style="list-style-type: none"> Statewide evaluation Establish guidelines for population based evaluations Establish guidelines for pilot project evaluations 	1	\$4,000,000	6 years	\$667,000
II	Population Based Technical Assistance	<ul style="list-style-type: none"> Business and development technical assistance for pilot projects Evaluation technical assistance for pilot projects 	5	\$12,500,000	6 years	\$417,000
III	Population Based Capacity Building Pilot Projects	<ul style="list-style-type: none"> Aimed at allowing less developed organizations to develop capacity to participate as CRDP phase II pilot projects 	15	\$600,000	6 months	\$40,000
IV	Population Based Implementation Pilot Projects	<ul style="list-style-type: none"> Aimed at allowing population based CDEPs to operate for a four year period to establish records of performance and effectiveness 	35 (Includes 11 CBPPs)	\$39,900,000	5 years	\$228,000
V	Education, Outreach & Awareness	<ul style="list-style-type: none"> Aimed at providing education, outreach and awareness service to inform policy decision makers and stakeholders about issues impacting mental health disparities in population 	TBD	\$3,000,000	5 years	TBD
Total			40+	\$60,000,000		

We anticipate the first contracts will begin in early 2016 and CRDP Phase 2 will conclude by the end of 2022



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We are Public Contracting Code (PCC) exempt, but we are following PCC, except for three areas

Follow On Contracting

- **CBOs that participated in CRDP Phase I are being allowed to submit applications in Phase II**

Negotiations

- **We will conduct negotiations as necessary to fine tune the solicitations**

DGS Approval

- **Contracts do not need to be approved by DGS**
- **Formal DGS protest process does not apply**

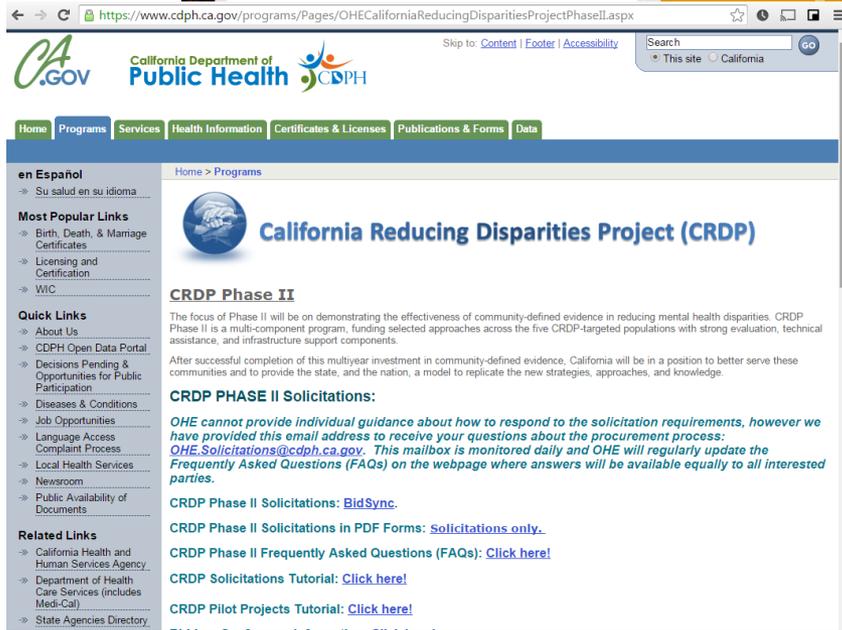
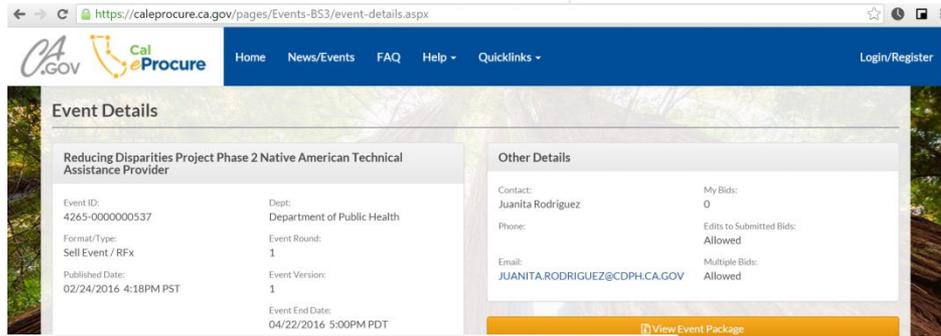
CRDP Phase 2 is in open procurement

- Throughout the procurement process from public comment until the contracts are awarded, CDPH OHE must work to ensure all potential proposers have a level playing field and that the CDPH OHE operates in a manner that is accountable to the public
- CDPH OHE will not be able to take personal meetings or respond to telephone inquiries regarding the solicitations to ensure a level playing field, full transparency and the integrity of the solicitations
 - As described in the following slide, please direct all correspondences to ohesolicitations@cdph.ca.gov
- If you would like to be added to the OHE email announcement list, please subscribe at OHE@cdph.ca.gov

All correspondence, questions, inquiries should be made in writing

- All correspondence, questions, inquiries should be made in writing via email to ohesolicitations@cdph.ca.gov
- Do not contact any other CDPH employee regarding this solicitation. All participants in this process are subject to applicable State and Federal codes regarding Public Officials and State of California bidding policies and codes
- Questions submitted by email will be made anonymous, responded to (as reviewed by CDPH team) and posted for all bidders to see
- Only written responses posted on Cal eProcure and the CDPH website shall be considered binding
- Check bid posting site often!
- Alternately, if email is inconvenient, phone calls may be directed to (916) 445-4139. Questions will be transcribed and posted with answers on the CDPH website and on Cal eProcure. No answers provided verbally shall be considered binding

Proposers are responsible for regularly checking Cal eProcure or the CDPH website for updates and FAQ



- Updates and Frequently Asked Questions (FAQ) will be posted to Cal eProcure and the CDPH website:
<https://www.cdph.ca.gov/programs/Pages/OHECaliforniaReducingDisparitiesProjectPhaseII.aspx>
- Questions submitted to CDPH will be posted anonymously and answered publicly in the FAQ so all potential bidders may benefit from the information
- Bidders are responsible for regularly checking Cal eProcure or the CDPH website and is responsible for being aware of any updates and accounting for all updates in their response

Agenda: Native American Technical Assistance Provider

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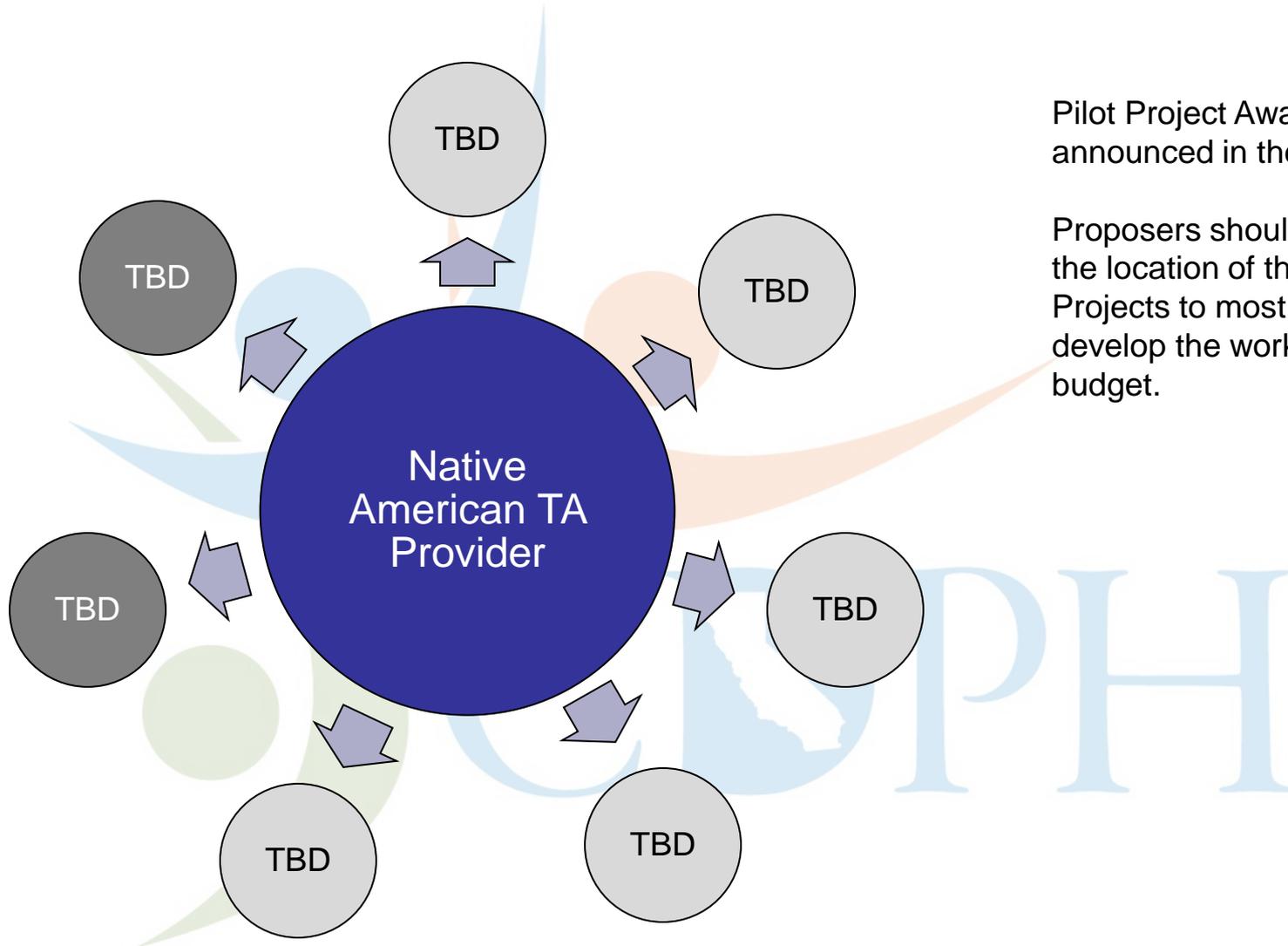
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Native American Technical Assistance Provider

The Native American TA Provider will be responsible to:

- Provide technical assistance to IPPs to improve organization operations and sustainability and conduct an evaluation of its CDEP
- Provide cross-population technical assistance to IPPs from other populations to support service provision to individuals who are members of multiple targeted population groups

The Native American TA Provider will provide services to seven Pilot Projects



Pilot Project Awardees will be announced in the near future.

Proposers should account for the location of the Pilot Projects to most efficiently develop the workplan and budget.

Population-Specific Technical Assistance Provider Responsibilities

Implementation TA

Support IPPs in evaluating its CDEP and making it sustainable

- Provide TA to strengthen the IPPs' organizational structure and service provision
- Provide TA to support the evaluation of each IPP
- Develop population-specific evaluation guidelines

Cross-population TA

Provide TA to IPPs from other populations

- Provide TA to other IPPs who also serve members of the TA Provider's targeted population
- Develop an assessment of cross population TA needs for TA Provider's IPPs

*** Note: Native American Capacity Building TA is no longer required for this project.**

The Contractor will be responsible for seven CDPH-defined deliverables and six Proposer-defined deliverables

CDPH-Defined Deliverables	Proposer-Defined Deliverables
<ol style="list-style-type: none"> 1. Kickoff Meeting 2. Monthly Progress Reports 3. Quarterly Collaboration Meetings 4. Knowledge Management 5. Other Meetings/Briefings 6. Closeout Meetings 7. Unanticipated Tasks 	<ol style="list-style-type: none"> 8. IPP Assessment 9. IPP TA and Training Plan 10. IPP Technical Assistance and Training 11. Cross-Population Technical Assistance and Training 12. CRDP Phase 2 Pilot Project Evaluation Population Guidelines and Support 13. Final Convening

Proposers must have deep experience working with California's diverse Native American population

Minimum Qualifications

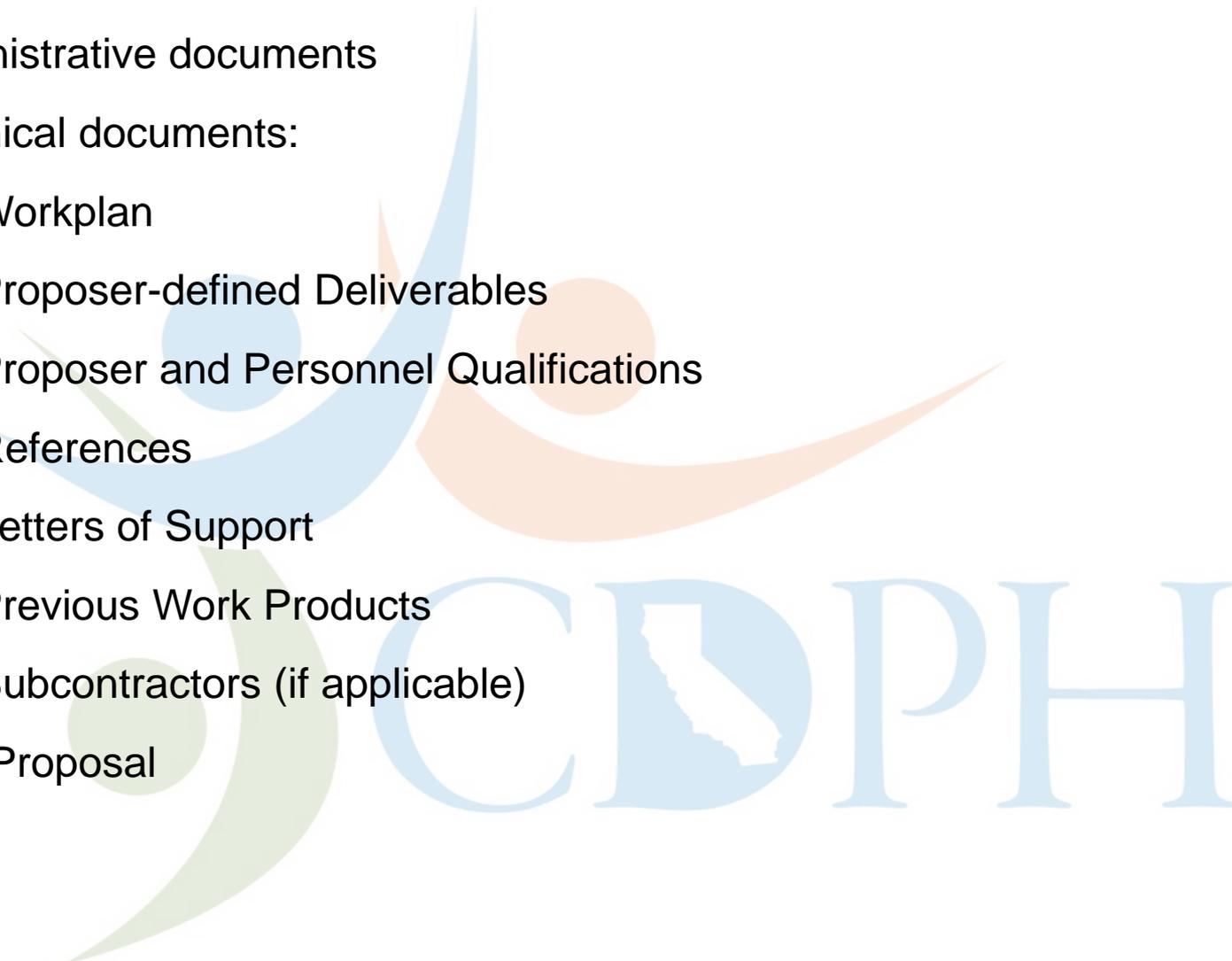
1. A minimum of two years providing comparable technical assistance support to community-based organizations serving the targeted population in California. Experience includes both paid and unpaid examples.
2. Experience operating and managing a project with an annual budget of \$200,000 or greater.
3. Organization has an established headquarters or other office in California.

Desired Qualifications

1. Proposer has significant understanding and direct experience working with California's Native American population and subpopulations in a culturally and linguistically competent manner.
2. Proposer has extended experience providing comparable technical assistance support to community-based organizations serving the Native American population in California.
3. Proposer has significant experience delivering the following technical assistance services to community based organizations. TA Providers are expected to provide administrative, programmatic and evaluation assistance and providers should be able to substantiate experience providing all aspects of the following: *(See solicitation)*
4. Proposer has significant experience acting as a facilitator between CBOs that serve the Native American population and government entities, including, but not limited to: *(See solicitation)*
5. Proposer has significant experience working with mental health service providers.

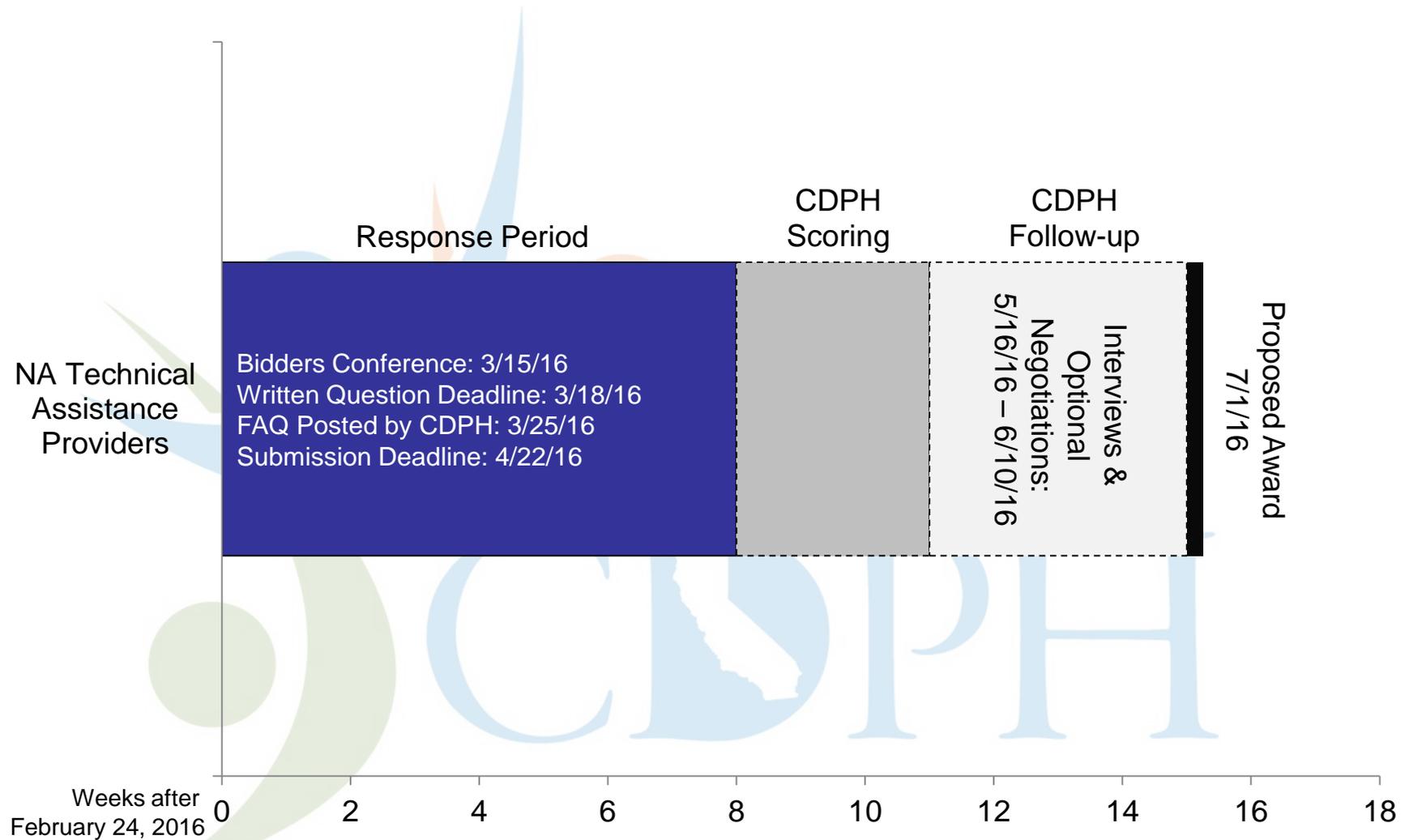
Proposers must include three sections in their response

- Administrative documents
- Technical documents:
 - Workplan
 - Proposer-defined Deliverables
 - Proposer and Personnel Qualifications
 - References
 - Letters of Support
 - Previous Work Products
 - Subcontractors (if applicable)
- Cost Proposal



CDPH

We anticipate announcing proposed awards in July



*** Note: Dates for scoring and follow-up are for planning purposes and subject to change**

CRDP Bidders Conference | March 15, 2016

Key changes to revised solicitation (1 of 2)

Change	Notes
Contact Information: William Porter (916) 449-5457 California Department of Public Health, 1616 Capitol Avenue, Sacramento, CA 95814	Updated to reflect new contact and CRDP's new address
Mandatory Bidders Conference	Changed to mandatory to ensure an even playing field
Cal eProcure replaces BidSync	The State of California no longer uses BidSync
Native American CBPPs removed – Includes multiple descriptive changes throughout	Due to a lack of applications, there will be no Native American CBPPs
Eliminate Deliverables 8-10 – Renumber subsequent Deliverables from 11-16 to 8-13 – Adjust scoring	Deliverables 8-10 were focused on CBPPs and are no longer needed

For specific changes, applicants should reference the “Solicitation Revisions” posted at: <https://www.cdph.ca.gov/programs/Pages/OHECaliforniaReducingDisparitiesProjectPhaseII.aspx>



Key changes to revised solicitation (2 of 2)

Change	Notes
Clarify Deliverable 10 (renumbered)	Clarifies required details regarding TA location of provision and staff availability
Clarify Deliverable 12 (renumbered)	Clarifies the need to justify proposed deliverable
In-Person Interview Added <ul style="list-style-type: none"> - Renumber scoring stages - Add scoring description - Adjust scoring 	Added to best meet the needs of the State
Adjust scoring of Letters of Support and References	Simplified/clarified scoring
Clarified Scoring Standards	Details refined to better describe scoring standards

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Tips for responses (1 of 2)

Requirement	Tips
<p>Qualifications</p> <p>Organization qualifications are scored based on the individuals doing the work, in addition to the history of the organization.</p>	<ul style="list-style-type: none"> ▪ Clearly articulate organization structure and tell us who is doing what. Not specifying key individuals like, project and workstream leads, will lower your score. ▪ Don't assume that we know who you are or what you have done. Tell us about the experience of your organization and all key staff, including experience with California's Native American populations and your ability to meet the linguistic needs of the populations in detail. Tell us about your experience and ability to provide organizational and evaluation technical assistance in detail. Failure to do so will lower your score. ▪ Your letters of support should come from the community and richly describe how their experience with you speaks to your understanding of cultural and linguistic competence. Failure to do so will lower your score. ▪ Your references should be detailed and attest to their personal experience with you in providing these services.

Tips for responses (2 of 2)

Requirement	Tips
<p>Workplan</p> <p>The workplan should include a very specific level of detail. It should show how each component ties together, including interdependencies. The workplan should clearly describe who will do each task, when the tasks will be completed and what milestones and benchmarks show that it has been completed.</p>	<ul style="list-style-type: none"> ▪ The workplan must clearly detail the key activities, the purpose or goal of each activity, the tasks involved in performing the activity, when each activity and task will be performed, the key deliverables and the key outcomes that you hope to achieve. It is important to also tell us which staff person will conduct the activities key, the that are involved, when they will be completed and the individuals responsible for each step. Failure to do so will lower your score. ▪ High level plans to plan are not adequate and will lower your score or deem you non-compliant.
<p>Proposer-Defined Deliverables</p> <p>Deliverables must be articulated in a very clearly defined manner to understand what specifically will be done and how it will be operationalized.</p> <p>Deliverable description should include a justification of why they are constructed in this manner, how they are designed to meet the specific needs of the pilot projects in a culturally and linguistically competent manner.</p>	<ul style="list-style-type: none"> ▪ You should not just reiterate what we said in the solicitation. We expect unique, culturally and linguistically competent solutions to provide these services. ▪ You should provide detailed explanations as to what you will provide and justify why it uniquely meets the needs of California's Native American populations. High-level descriptions are not acceptable and will lower your scores.

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William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health
- 1:10 – 1:20** **Welcome & Introductions**
Marina Augusto, MS Counseling, Staff Services Manager
Office of Health Equity, California Department of Public Health
- 1:20 – 1:45** **California Reducing Disparities Project (CRDP) Overview**
Marina Augusto, MS Counseling, Staff Services Manager
Office of Health Equity, California Department of Public Health
- 1:45 – 2:00** **Procurement Overview**
Andrew Chang, Consultant
Andrew Chang & Company
- 2:00 – 2:25** **Native American Technical Assistance Provider**
William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health
- 2:25 – 2:30** **Roll Call**
William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health
- 2:30 – 2:40** **Break**
- 2:40 – 3:55** **Q&A**
All
- 3:55 – 4:00** **Roll Call**
William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health

Agenda: Q&A

1:00 – 1:05

Housekeeping

William Porter, MS, Contract Manager
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Break

2:40 – 3:55

Q&A

All

3:55 – 4:00

Roll Call

William Porter, MS, Contract Manager
Office of Health Equity, California Department of Public Health



Q&A

- Preliminary responses may be provided to questions verbally during this conference. However, no responses will be considered final or binding until they are posted in writing, online in the FAQ
- All questions submitted verbally, through note cards, WebEx or email will be answered in writing, online in the FAQ and/or amended in the solicitations, which will be posted on the CDPH website and Cal eProcure. The written responses will supersede any verbal responses given
- Each speaker will be allotted two minutes. We ask that you identify yourself when speaking
- Our staff have cards if you wish to write down your questions. You may also ask staff to pass them to us and we will read them for you. Please put your name on the card
- If you are participating by WebEx/Dial-In and wish to submit a question or comment, please do so through the WebEx Q & A function. Staff will be monitoring the questions and provide time to address them in each Q & A session

Agenda: Roll Call

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3:55 – 4:00	<p>Roll Call William Porter, MS, Contract Manager Office of Health Equity, California Department of Public Health</p>

Thank you for participating

**Additional questions, comments or feedback:
ohesolicitations@cdph.ca.gov**

**To be added to the announcements email list:
ohesolicitations@cdph.ca.gov**

**Please take brief the post-conference survey:
<https://www.surveymonkey.com/r/3HNGFP7>
(paper copies available)**