

California Statewide Training Education Program
HIV/AIDS

REQUEST FOR APPLICATION
RFA 12-10049

March 15, 2012

Important Dates:

RFA Released	March 15, 2012
Last day RFA Questions will be accepted	March 29, 2012
RFA Questions and Answers Posted	April 6, 2012
Mandatory Letter of Intent Due	April 12, 2012
Application Due Date	April 26, 2012
Notification of Intent to Award	May 15, 2012

Application Packet Available at:
<http://www.cdph.ca.gov/programs/aids/Pages/OACSTEPRA.aspx>
California Department of Public Health
Center for Infectious Diseases
Office of AIDS

TABLE OF CONTENTS

SCHEDULE OF EVENTS	
I. INTRODUCTION	2
II. PURPOSE OF REQUEST FOR APPLICATION (RFA).....	2
III. CONTRACT TERMS AND FUNDING	3
IV. COST OF DEVELOPING APPLICATION.....	4
V. MANDATORY LETTER OF INTENT	4
VI. RFA INFORMATION, ADDENDA, or CHANGES.....	4
VII. PROGRAM REQUIREMENTS	5
A. Statewide Treatment Education Training	5
1. Background and Primary Goal	
2. Intended Audiences	
3. Primary Objectives	
4. Training Characteristics	
5. Primary Objectives: Curriculum Details	
Treatment Education	
Treatment Adherence	
Additional Topics	
B. Statewide Public Benefits Counseling Training.....	9
1. Background and Primary Goal	
2. Intended Audiences	
3. Primary Objectives	
4. Training Characteristics	
5. Primary Objectives: Curriculum Details	
Health Care Programs	
Disability Programs	
Health Care Benefits	
Disability Benefits	
Public Assistance Programs	
C. Additional Requirements for All Training	13
1. Appropriate and Accessible	
2. Promotion and Outreach	
3. Administrative Requirements	
4. Staffing	
5. Implementation Plan	
6. Progress Reports	
7. Meetings	

VIII.	APPLICANT QUALIFICATIONS.....	15
IX.	APPLICATION SUBMISSION REQUIREMENTS.....	16
X.	REQUIRED CONTENT OF THE APPLICATION.....	17
	1. Application Cover Sheet	
	2. Table of Contents	
	3. Application Certification Checklist	
	4. Required Forms/Documentation	
	5. Program Description	
	6. Implementation Plan and Timeline	
	7. Agency Capacity	
	8. Program Personnel	
	9. Detailed Budget	
	10. Budget Justification/Narrative	
	11. Appendix	
XI.	APPLICATION SUBMISSION INSTRUCTIONS.....	20
	1. Preparation	
	2. Submission	
	3. Application Deadline	
XII.	APPLICATION EVALUATION PROCESS.....	20
	1. Grounds for Rejection	
	2. Application Review Process	
	3. Application Evaluation Criteria	
XIII.	NOTIFICATION OF INTENT TO AWARD	23
XIV.	DISPOSITION AND OWNERSHIP OF THE APPLICATION	23
XV.	CONTRACT AWARD APPEAL PROCEDURES	23
XVI.	MISCELLANEOUS RFA INFORMATION.....	24
XVII.	CONTRACT TERMS AND CONDITIONS	25
XVIII.	APPENDIX	25

- Attachment 1: Application Cover Sheet
- Attachment 2: Application Certification Checklist
- Attachment 3: Agency Information Sheet
- Attachment 4: Payee Data Record (if applicable)
- Attachment 5: Sample Detailed Budget
- Attachment 6: Budget Narrative Descriptions
- Attachment 7: Contractual Terms and Conditions

California Department of Public Health
Center for Infectious Diseases
Office of AIDS
HIV Care Branch
Request for Application

California Statewide Training Education Program:

- 1) Statewide Treatment Education Training; and
- 2) Statewide Public Benefits Counseling Training

I. INTRODUCTION

The California Department of Public Health (CDPH), Center for Infectious Diseases, Office of AIDS (OA) is soliciting applications from eligible organizations for the continuation of the California Statewide Training Education Program (CSTEP). California Health and Safety Code Section 131019 defines that OA has the lead responsibility for coordinating state programs, services, and activities related to HIV/AIDS. The goals of OA are:

- To minimize the number of new HIV infections;
- To maximize the number of people with HIV infection who access appropriate care, treatment, support, and prevention services; and
- To reduce HIV/AIDS-related health disparities.

OA manages multi-faceted public health programs for HIV/AIDS. The HIV Care Branch within OA has the responsibility for programs related to HIV/AIDS care and treatment, HIV transmission prevention, and support of persons living with HIV in California.

II. PURPOSE OF REQUEST FOR APPLICATION (RFA)

The two specialized training curricula addressed in this RFA are designed for HIV service providers (medical and non-medical), as described below. *The intent of both training curricula is to facilitate and/or increase access to, and maintenance in, HIV care, treatment, and prevention services to stop further transmissions, especially in disproportionately impacted, disenfranchised, or vulnerable communities.*

The first curricula, Statewide Treatment Education Training is designed to ensure that care, treatment, and prevention program workers have the most current information about HIV treatment education and related topics. Training will be provided to health educators, clinicians, nurses or other medical staff, treatment advocates, health care providers, linkage to care coordinators, peer educators, direct service providers, mental health counselors, case managers, outreach workers, substance abuse counselors, and others working with HIV-infected persons. The intent of this training curricula is to educate and maintain a cadre

of certified treatment educators throughout the state. These certified treatment educators will provide accurate information on the availability and success of current HIV treatments and assist HIV-infected clients with treatment adherence. Treatment education services, though available to all, should focus specially on those who have remained out of care, or to those who are marginally engaged in care, due to a lack of understanding of HIV treatment options or poor adherence.

The second curricula, Statewide Public Benefits Counseling Training, is designed to ensure that HIV service providers have the most current information about federal, state, and local benefits and opportunities that are available for HIV-infected persons. Training will be provided to benefits counselors, case managers, outreach workers, eligibility workers, peer advocates, peer educators, and others working with HIV-infected persons. The intent of this training curricula is to educate and maintain a cadre of certified benefits counselors throughout the state. These certified benefits counselors will provide accurate information on the availability of, and eligibility for, public and private benefits as well as to provide assistance in obtaining benefits. Benefits counseling services, though available to all, should focus specially on those who have remained out of care, or to those who are marginally engaged in care, due to a lack of resources or adequate linkage to existing services and programs for which they are eligible.

This RFA seeks applications for: 1) statewide treatment education training, certification, and recertification; 2) statewide public benefits counseling training certification, and recertification; 3) current curricula development/revisions, editing; and 4) identify and development of new relevant training curricula that will meet the goals of CSTEP. Please refer to Section VII, Program Requirements for a detailed description of the statewide programs and what is requested in the RFA. Program awards will be based on a competitive review process.

III. CONTRACT TERMS AND FUNDING

The term of the resulting contract will be from July 1, 2012 to June 30, 2015. All funding is contingent on the availability of allocated funds. Funds from one fiscal year (FY), July 1 through June 30, cannot be carried forward to a subsequent FY. Total maximum FY funding allocation for CSTEP: 1) Statewide Treatment Education Training; and 2) Statewide Public Benefits Counseling Training will be no more than \$750,000 during the entire contract period.

Budget Year	Maximum Budget Year Totals
July 1, 2012 through June 30, 2013	\$250,000
July 1, 2013 through June 30, 2014	\$250,000
July 1, 2014 through June 30, 2015	\$250,000
Total Funding:	\$750,000

The intent of the RFA is to fund one agency to provide both training curricula described in the RFA on a statewide basis. However, applicants may submit an application for and/or be granted less than the maximum amount.

California public (governmental) and private non-profit organizations are eligible to apply for these funds. Applicant organizations must be capable of providing services under this contract on a statewide basis.

IV. COST OF DEVELOPING APPLICATION

The cost of developing an application is entirely the responsibility of the applicant and shall not be chargeable to the State of California, CDPH, or included in any cost elements of the application.

V. MANDATORY LETTER OF INTENT

Prospective applicants must submit a Letter of Intent to OA indicating that they intend to submit an application in response to this RFA entitled, “California Statewide Training Education Program: 1) Statewide Treatment Education Training; and 2) Statewide Public Benefits Counseling Training.” The Letter of Intent must be submitted on the applicant’s letterhead and must reference the applicant’s name, the contact person at the agency, address, telephone number and facsimile (fax) number, the e-mail address of the contact person, and a brief description of the applicant’s agency. The letter must be signed by the person authorized to legally bind the agency to the commitment outlined in the application. Applicants will be required to demonstrate the agency’s capability to undertake the proposed work as indicated in this RFA.

Submit Letter of Intent through e-mail at: OACareRFA@cdph.ca.gov no later than Thursday, April 12, 2012.

VI. RFA INFORMATION, ADDENDA, OR CHANGES

If any clarifications or modifications to this RFA are necessary, all questions and answers, addenda, or changes will be posted on OA’s website at: <http://www.cdph.ca.gov/programs/aids/Pages/OACSTEPRA.aspx>

It is the responsibility of potential applicants to check the website frequently to keep abreast of any clarifications or changes to the RFA.

RFA Questions

Notify OA immediately if clarification is needed regarding the services being sought through this RFA. If questions about the RFA instructions or requirements arise, or if a potential applicant discovers errors or inconsistencies, in the RFA, notify OA. Submit all questions and issues through e-mail to OACareRFA@cdph.ca.gov and include the following information:

1. Contact name;
2. Telephone number;
3. Description of issue or question;
4. RFA section, page number, or other identifying information pertinent to the question/issue (if applicable).

OA will only accept questions submitted through e-mail at the above e-mail address. The last day to submit questions is **Thursday, March 29, 2012**.

Questions and answers will be posted on OA's website at:

<http://www.cdph.ca.gov/programs/aids/Pages/OACSTEPRFA.aspx>

on **Friday, April 6, 2012**. OA reserves the right to combine similar questions when posting answers. If clarification on a question is needed, OA will contact the person identified in the e-mail. Applicants that fail to report a known or suspected problem with the RFA, or fail to seek clarification of an issue, submit an application at their own risk.

VII. PROGRAM REQUIREMENTS

CSTEP is a training program that is designed to increase access to HIV care, treatment, and prevention services through: 1) Statewide Treatment Education Training; and 2) Statewide Public Benefits Counseling Training. This program will include a variety of training classes and/or curricula that: 1) educate on topics related to peer advocacy and treatment education, including a series resulting in certification as a treatment educator; and 2) educate on topics related to federal, state, and local benefits and benefits counseling, including a series resulting in certification as a benefits counselor. Below are details on each of the two training curricula.

A. Statewide Treatment Education Training

1. Background and Primary Goal

HIV has had a disproportional impact upon communities of color. In addition, persons of color enter HIV care and treatment later than other groups, often receiving care and treatment services only after becoming symptomatic. In order to help ensure that HIV-infected and AIDS-diagnosed persons of color are able to access HIV services early

and to receive optimal results from HIV treatment, federal funds have been dedicated to “peer advocacy and treatment education for communities of color.”

2. Intended Audiences

The intended audiences for Statewide Treatment Education Training and Certification are HIV/AIDS service providers working with HIV-infected or AIDS-diagnosed Californians, particularly with persons of color and/or within communities of color. Communities of color include: African American, Latino/Latina, Asian/Pacific Islander, and Native American. Service providers working with other disproportionately affected, disenfranchised, or vulnerable communities are also included as part of the intended audience.

Service providers may include: 1) peer-based workers, outreach workers, peer advocates, linkage to care coordinators, and others; 2) treatment advocates, health educators, case managers, and HIV test counselors; 3) clinicians such as nurses, physician assistants, nurse practitioners, or other medical staff; 4) other staff working in OA-funded programs providing services to HIV-infected or AIDS-diagnosed persons such as HIV Care Program (HCP), Minority AIDS Initiatives (MAI) OA’s Pre-Existing Condition Insurance Plan (OA-PCIP), and OA’s Health Insurance Premium Payment (OA-HIPP); and 5) other staff working in federally-funded HIV care and treatment programs serving Californians such as Ryan White Services, Part C early intervention clinics, or services funded through Ryan White HIV/AIDS Services, Part A or B.

3. Primary Objectives

The primary objectives for Statewide Treatment Education Training are:

- To provide treatment education training on a statewide basis;
- To provide certification of treatment educators and periodic recertification;
- To provide treatment adherence training on a statewide basis;
- To provide training on topics that support peer services and peer advocacy; and
- To provide training on topics that help to ensure that HIV-infected persons of color have access to HIV care, treatment, and transmission prevention services.

4. Training Characteristics

All provider training developed to meet the objectives for Statewide Treatment Education Training must address the following:

- Develop trusting relationships with clients who may be hesitant to move forward with HIV care and treatment (regardless of causes/reasons);
- Provide culturally sensitive and linguistically appropriate health education and information materials;
- Recognize, respect, and work with different and unique perspectives on health and health care held by persons based on culture, religion, national origin, race, gender, sexual orientation, gender identity, personal life situations, disabilities, and education;
- Awareness of issues such as homelessness, poverty, stigma, substance use, mental health needs, and degrees of literacy and non-literacy;
- Assist clients in dealing with the stigma they may feel as a result of HIV infection or other factors;
- Communicate effectively with clients, including using “plain,” non-technical language, metaphors, and other techniques to make complex information understandable; and
- Treatment advocacy (i.e., empowering clients to make choices about HIV treatments that are beneficial to them and assist them in remaining actively involved and engaged in their personal care program).

5. Primary Objectives: Curriculum Details

Treatment Education

The treatment education training curriculum should include, at a minimum:

- A basic introductory course for those new to health care and for those with limited backgrounds in basic biology, HIV, medical and scientific terms, and/or the human immune system. The goal of this initial training is to prepare participants to enroll in treatment education training. Participants will acquire an understanding of basic terms and concepts related to health and wellness;
- A treatment education course that addresses topics such as: HIV/AIDS epidemic (relevant history/context), myths and facts about HIV, HIV transmission, sexually transmitted diseases and their role in HIV transmission, viral hepatitis (A, B, and C), immune system basics, HIV immune suppression, potential benefits of HIV treatment, basic treatment approaches and choices, how to support and maintain wellness, establishing and maintaining good medical provider-patient/client relationships, basic adherence concerns, and health care systems and resources; and
- A distinct treatment education track including treatment adherence training that allows for certification as a Certified Treatment Educator. This track must include updates to training and/or continuing education that is linked to periodic recertification.

Treatment Adherence

The adherence training should include, at a minimum:

- The concept of adherence, its importance, and how to explain it simply;
- Provide current information on factors known to influence success or challenges in adherence;
- How to work with specific populations around adherence (homeless, active substance users, individual with mental disorders, etc.);
- The use of “plain language” in communicating with clients;
- Overview of various cultural influences (health belief system, etc.) on adherence;
- Address systemic factors that impact adherence such as cost, delays in access, or other health care system issues;
- Practical strategies for ensuring adherence;
- Including partners, family, friends, and others in the patient support network;
- How to work with clients who have low health literacy;
- Techniques for helping the semi-or minimally-literate;
- How to assess a client’s readiness to initiate use of HIV medications;
- Understanding when and how to move clients toward accepting HIV medications;
- Addressing and overcoming barriers to beginning and continuing treatment before initiating treatment;
- Preparing clients for possible side effects (physical/psychological and internal/external) and how to deal with them;
- Identify when medication adherence support may be helpful after HIV medication has started (e.g., lack of anticipated results, client medication taking fatigue, relapse, or barriers from life situations);
- How to avoid developing drug resistance;
- Offer practical approaches to address factors that the client can control such as enhancing motivation, developing a routine, understanding the impact of recreational drug use on adherence, etc.;
- Offer practical approaches to address factors outside of client control such as dealing with situations where physicians fail to clearly explain a regimen or recommend an overly complex regimen;
- Addressing the barriers that employment, social activities, partners, family members, friends, and others can sometimes present; and
- Presentation of medication adherence tools (e.g., Peer Support, SMART Couples) and discussion of adaption of interventions.

Additional Topics

Training in additional topics may be offered. A menu of trainings should be provided and topics should address specific topics or issues related to treatment education, treatment adherence, and peer services or peer advocacy. Training topics may vary depending on assessed need and

may include some or all of the following suggested topics and/or other relevant topics:

- Street, over-the-counter, and/or prescription drugs – use and abuse, avoiding negative interactions with HIV medications, and the importance of getting proper counseling from health care providers and pharmacists;
- Psychotropic medications – considerations regarding assessments and proper use and how these medications interact with HIV medications;
- Herbal, nontraditional, or complementary therapies – understanding them, how they can interact with HIV medications, possible benefits or problems;
- Nutrition and HIV – how diet can minimize negative medication side effects and/or enhance overall health;
- Basic health education – basic anatomy and body functions, keys to risk and harm reduction, and the importance of factors such as sound sleep, stress reduction, proper nutrition, exercise, strategies to avoid social isolation, psychosocial issues, and other aspects of maintaining optimal health and wellness;
- Basic reproductive counseling for clients who are HIV positive;
- HIV 101 – the basics of HIV/AIDS (not including treatment education basics); and/or
- Other relevant or related topics.

B. Statewide Public Benefits Counseling Training

1. Background and Primary Goal

HIV has had a disproportionate impact upon communities of color and other disenfranchised, impoverished, and vulnerable communities. As part of the effort to increase access to care in these communities where many enter care only after becoming symptomatic, OA is funding training and certification on benefits counseling. Many HIV-infected persons who are out of care, as well as many who are in care, are unaware of benefits or funded services for which they are eligible, especially to preserve Ryan White Part B HIV Care Fund resources. Many health care service providers, including HIV service providers, are stretched beyond capacity and are increasingly resource poor. As more persons are living with HIV, it is becoming essential to maximize the use of all benefits for which individuals may be eligible.

2. Intended Audiences

The intended audiences for Statewide Treatment Public Benefits Counseling Training are HIV/AIDS service providers working with HIV-infected or AIDS-diagnosed Californians, particularly with persons from disproportionately impacted, impoverished, or vulnerable

communities that are traditionally underserved, such as communities of color, women, or homeless. Communities of color include: African American, Latino/Latina, Asian/Pacific Islander, and Native American.

Service providers may include: 1) case managers; 2) benefits counselors; 3) linkage to care coordinators, mental health counselors, eligibility workers, outreach workers, peer educators, peer advocates; 4) health educators; 5) other staff working in OA-funded programs providing services to HIV-infected or AIDS-diagnosed persons such as HCP, MAI, OA-PCIP, OA-HIPP; and 6) other staff working in federally funded HIV care and treatment programs serving Californians such as Ryan White HIV/AIDS Services, Part C early intervention clinics, or services funded through Ryan White HIV/AIDS Services, Parts A or B.

3. Primary Objectives

The primary objectives for Statewide Public Benefits Counseling Training are:

- To provide basic HIV-focused benefits training to HIV providers statewide;
- To provide certification and periodic recertification of benefits counselors;
- To improve access to care and treatment by identifying health care programs and disability income programs available to Californians living with HIV/AIDS;
- To improve access to care and treatment by training providers about how to advocate effectively with benefit agencies on behalf of their clients;
- To increase compliance with federal or state payer-of-last resort grant requirements by providing provider education that will assist providers with identifying private and public benefits available to their clients; and
- To increase the financial stability of public HIV care and treatment system by ensuring that all health care payers are being accessed.

4. Training Characteristics

All providers training developed to meet the objectives for Statewide Public Benefits Counseling Training must address the following:

- Develop trusting relationships with all clients, especially those who may be hesitant to move forward with HIV care and treatment (regardless of causes/reasons);
- Develop and provide culturally sensitive and linguistically appropriate information and materials;
- Recognize, respect, and work with different perspectives and beliefs that are held by persons based on culture, religion, national origin,

race, gender, sexual orientation, gender identity, personal life situations, disabilities, and education;

- Awareness of issues such as homelessness, poverty, immigration status, stigma, substance use and abuse, mental health needs, prior incarceration, and degrees of literacy and non-literacy;
- Assist clients in dealing with the stigma they may feel as a result of HIV infection or other factors;
- Communicate effectively with clients, including using “plain,” non-technical language, metaphors, and other techniques to make complex information, processes, and benefits understandable;
- Client advocacy (i.e., empowering clients to understand and make choices about benefits and opportunities that are beneficial to them and that assist them in remaining actively involved and engaged in HIV care);
- Health and disability benefits instructions must discuss benefits from an HIV perspective;
- Benefits information must include explanation of benefits from a regional perspective (e.g., city/county, rural/urban, Health Resources and Services Administration, Eligible Metropolitan Area, or Transitional Grant Area);
- Benefits information must include a discussion of immigration issues, including those affecting the undocumented, as they relate to health and disability benefits; and
- Trainings must include written reference materials (manual, fact sheets, and slides).

5. Primary Objectives: Curriculum Details

The Statewide Public Benefits Counseling training curriculum should include, at a minimum:

A basic introductory course on HIV benefits for those new to health care services, case management, publicly funded services, and/or benefits counseling. Participants will acquire an understanding of basic terms and concepts related to health care, support services, and benefits. This basic overview will prepare participants to enroll in a benefits counseling course. The goal of this initial training is to give a general overview of the following:

Health Care Programs: Medicare, Medi-Cal, Private/Group Insurance, Managed Care, Insurance Continuation, OA-PCIP and OA-HIPP, AIDS Drug Assistance Program (ADAP), In-Home Supportive Services (IHSS), AIDS Medi-Cal Waiver Program (MCWP), Low Income Health Program (LIHP), County Indigent Care Programs.

Disability Programs: State Disability Insurance (SDI), Social Security Insurance (SSI) and Social Security Disability Insurance (SSDI), Long-term Disability Insurance.

Public Assistance Programs: General Assistance, Food Stamps, CalWORKs.

An HIV benefits counseling course that specifically includes a description of the services or benefits, eligibility, and enrollment process for each of the following, at a minimum:

Health Care Benefits:

Medicare: Eligibility requirements; Part A, B, and D, Medicare Advantage, issues unique to dually eligible individuals, issues specific to Medicare Part D and ADAP, and appeals and hearings.

Medi-Cal: Application/eligibility requirements, discussion of Medi-Cal programs commonly accessed by persons living with HIV/AIDS including SSI linkage, medically needy, working disabled, MCWPs, Medi-Cal Share-of-Cost, issues specific to Medi-Cal, LIHP, ADAP, Medi-Cal managed care, and hearings and appeals.

Private/Group Insurance: General overview, insurance continuation (Consolidated Omnibus Budget Reconciliation Act of 1985, Omnibus Budget Reconciliation Act of 1987, Health Insurance Portability and Accountability Act of 1996), OA-PCIP, OA-HIPP, Major Risk Medical Insurance Program, and Managed Care.

ADAP: General overview, eligibility and application requirements, formulary review, and explanation of how ADAP works with other payers and payer of last resort requirements.

County Indigent Care: Tailored to the region where training is being offered. If applicable, Ryan White-funded care available to the region.

Home Based Care: Overview of MCWP and IHSS.

Disability Benefits:

Curriculum must include an explanation of the following items as they relate to SSI, SSDI, *Long-Term Disability*, and SDI: eligibility requirements, application requirements and strategies, and appeal rights.

Public Assistance Programs:

Curriculum must include an explanation of the following items as they relate to *General Assistance*, *Food Stamps*, and *CalWORKs*: eligibility requirements, application requirements and strategies, and appeal rights.

A distinct benefits counseling track that allows for certification as a Certified Benefits Counselor. This track must include return to work issues, updates to training and/or continuing education that is linked to periodic recertification.

C. Additional Requirements for All Trainings

1. Appropriate and Accessible

All training developed to meet the objectives of this RFA, "California Statewide Training Education Program: 1) Statewide Treatment Education Training; and 2) Statewide Public Benefits Counseling Training," must be culturally, linguistically, and geographically accessible. All must include the following:

- Training may be provided in person, through the Internet (online), or a combination of both;
- Training must be provided on a statewide basis, including both rural and urban areas;
- Training, when requested for sufficient numbers of attendees, must be provided onsite or regionally;
- Adult learning and learning at a distance techniques may be utilized whenever feasible;
- Trainings should be available in English and Spanish;
- Trainings should be taught by culturally competent staff;
- Trainings should be offered in ways that preserve quality learning but minimize cost and time required away from service provision;
- Information regarding trainings and treatment education certification must be available through telephone, fax, and Internet (online); and
- Class registration/enrollment must be available through telephone, fax, and Internet (online).

2. Promotion and Outreach

Required as part of this RFA are various strategies for outreach to providers that serve communities of color, or other vulnerable, impoverished, or disproportionately impacted communities. Also required are methods to market and promote trainings and certification of treatment educators. Strategies/methods may include the production and dissemination of materials such as pamphlets, electronic

announcements, posters and/or other creative ways to inform and update HIV/AIDS service providers.

The development and maintenance of a website to provide access to training schedules, course descriptions, class registration, treatment education certification, and when applicable, training materials, are required. Notification of future trainings must be made available to prospective attendees a minimum of 45 days prior to the training date in order to facilitate sufficient planning time and registration for the attendees.

3. Administrative Requirements

Administrative obligations include, at a minimum:

- A periodic needs assessment(s) prior to developing, revising, and/or providing initial, continuing, or updated trainings;
- A process by which each training session is evaluated by each participant and through which miscellaneous comments may be received and considered;
- A complaint process for use by training participants;
- A periodic update and revision of training sessions and materials to be responsive to changes in the epidemic, including new medications or changes in benefits, new medical research, input received through needs assessments, evaluations, and/or the complaint and comments processes;
- An effective system to demonstrate a successful increase in knowledge by training participants; and
- A means to ensure knowledge of and compliance with state and federal guidelines such as those regarding sexual harassment, civil rights, equal access for those with disabilities, and prohibition of use of public funds for political or religious purposes, etc.

4. Staffing

Staff with training experience in the fields of HIV/AIDS, HIV treatment education, peer advocacy, and/or benefits counseling are required. Staff must have linguistic and cultural competence and as much as possible reflect the communities being served. External, part-time, or limited-term staff may be hired on an as-needed basis. The RFA must address plans to secure qualified training staff and to provide necessary topical expertise.

Job descriptions for all staff involved with the contract must be developed and maintained on file for review by OA. Professional resumes of all staff and external trainers will be collected and submitted to OA on an annual basis.

5. Implementation Plan

An implementation plan is required. A detailed timeline must be included as part of the implementation plan. The timeline should include proposed activities for each of the three years of the contract period. Examples of activities may include outreach, needs assessment, evaluation and assessment tools, hiring staff, including trainers with needed expertise, determining training locations and facilities, estimated start, frequency and size of trainings, and training policies and/or procedures. *Currently, CSTEP has training curricula that can be modified accordingly with the approval of OA.*

6. Progress Reports

Monthly, quarterly, or semi-annual progress reports, as agreed upon between the contractor and OA staff, are required. Status reports should include information regarding trainings developed, offered/advertised, scheduled, and actually provided, the number of attendees, the feedback received from attendees, and any complaints received or issues noted, etc. Status reports should also include any plans for new trainings based on changes in the epidemic, emerging issues, changes in medications, changes in benefits, needs assessments and/or comments. The status reports should also provide a description of any factors that are affecting the provision of services (positively or negatively), if an issue exists, and plans for resolution and/or requests for assistance.

7. Meetings

The contractor shall meet with OA designated staff as requested to review and/or discuss timelines, program development, training development, outreach and promotion efforts, training courses curricula and agendas, and any other topics or issues. OA staff will attend trainings periodically to observe and document any apparent issues.

VIII. APPLICANT QUALIFICATIONS

Any agency able to meet the following may apply for this RFA:

- Has significant experience providing (HIV) trainings as described in Section VII, Program Requirements;
- Has the ability to plan and deliver trainings statewide as described in Section VII, Program Requirements;
- Has the existence of, or the ability to provide, an office with furniture, computers, printers, copy and fax machines, etc., to support staff and program needs;
- Has the ability to begin start up and/or implementation immediately upon the effective date of the contract;

- Has the experience and ability to provide services necessary to the program, including marketing, advertising, website development, scheduling, registration, travel arrangements and reimbursements, obtaining training venues statewide, developing and providing training materials, etc.;
- Has the experience and ability to collaborate with diverse organizations on training needs and to coordinate the provision of the training with community-based organizations, non-profit agencies, county, and state entities;
- Has significant experience and satisfactory performance with administrative, fiscal, and programmatic management of government grant funds, including timely and accurate submission of fiscal and program documentation, subcontracts and compliance with all state contract requirements, including audit requirements;
- Has programmatic and fiscal staff who possess the training, skills, and experience consistent with the program, fiscal, and management needs of the program;
- Has culturally competent staff skilled in the following areas: program coordination, collaboration with outside agencies, are able to develop educational materials, are able to develop curricula, manage a website, training expertise, provide evaluation, etc.;
- Has the ability to integrate the Statewide Treatment Education Training and Statewide Public Benefits Counseling Training with the agency's current activities;
- Has internal quality controls, internal accounting controls, and budget monitoring procedures that will be employed to ensure that deliverables are timely and that fiscal resources are managed responsibly;
- Has examples of prior programs that demonstrate the agency's ability to provide deliverables on time and to manage fiscal resources responsibly; and
- Has internal and/or external capacity to review medical content.

IX. APPLICATION SUBMISSION REQUIREMENTS

Organizations intending to submit an application are expected to thoroughly examine the entire contents of this RFA and become fully aware of all the deliverables outlined in this RFA. Applications are to be developed based solely on the material contained in this RFA and any written RFA addendum issued by OA.

An original and four hard copies of the entire application, including attachments, must be submitted to OA no later than 5 p.m. on **Thursday, April 26, 2012**.

Upon award of the contract, an approved Scope of Work, Budget, and Budget Justification must be submitted to OA.

All forms and attachments that require signatures must be signed in blue ink for inclusion in the original application. The four additional copies may reflect photocopied signatures.

The format must allow at least one-inch margins at the top, bottom, and sides. All pages must be numbered sequentially. The size of the lettering must be at least a 12-point font.

X. **REQUIRED CONTENT OF THE APPLICATION**

The following is the order in which sections in the application must be submitted. A brief description of each section is also included.

1. Application Cover Sheet

Complete the technical application cover sheet (**Attachment 1** in the Appendix of this RFA). This sheet will serve as the cover page of the application. If the applicant is a corporation, the signature of the official authorized by the Board of Directors to sign on behalf of the Board or the person authorized to legally bind the agency must sign this cover letter in blue ink.

2. Table of Contents

Include a Table of Contents immediately after the cover sheet. The Table of Contents must display appropriate page numbers for each section listed.

3. Application Certification Checklist

Complete the Application Certification Checklist (**Attachment 2** in the Appendix of this RFA). This sheet will serve as the guide to make certain that the application package is complete, and to ensure that the required documents are organized in the correct order.

4. Required Forms/Documentation

- A. Agency Information Sheet (Please refer to **Attachment 3** in the Appendix of this RFA).
- B. Payee Data Record – STD. 204 Complete and return this form, only if you have not previously entered into a contract with CDPH. If uncertain, complete and return the form. (Please refer to **Attachment 4** in the Appendix of this RFA).

5. Program Description (Maximum of 20 pages)

This section of the application must include a comprehensive description of the applicant's proposed statewide training program and how the proposed program will meet the goal and primary objectives of this RFA. This section should also address training characteristics, curricula, and all activities and deliverables described in Section VII, Program Requirements of this RFA. Applicants should include samples of actual or proposed training curricula in the application's appendix. Plans for satisfying other requirements described

in Section VII of the RFA, *with the exception of Section C, (5), Implementation Plan*, should be included in this section of the application.

6. Implementation Plan and Timeline (Maximum of ten pages)

This section of the application must include a description of the applicant's plan to implement the proposed statewide training program. It must address the topics described in Section VII, Program Requirements, Section C, (5), Implementation Plan. The plan must include an implementation timeline. The timeline may be placed in this section of the application or in the application's appendix. The timeline should indicate activities *for each year, covering July 1, 2012 to June 30, 2015*.

July 1, 2012 – June 30, 2013

July 1, 2013 – June 30, 2014

July 1, 2014 – June 30, 2015

7. Agency Capacity (Maximum of ten pages)

This section must describe the capacity of the applicant agency. The agency must be able to successfully meet the administrative and staffing requirements of the proposed statewide training program, as described in Section VII, Program Requirements. In addition, the agency must demonstrate that it meets all requirements described in this RFA's Section VIII, Applicant Qualifications. Include a brief history that includes the date of establishment of the agency/organization, examples of past accomplishments, and current programs. The applicant must describe the organization's capability to undertake the proposed work.

8. Program Personnel (Maximum of five pages)

This section of the application must describe program staffing. Include, at a minimum, the number of staff, titles, job descriptions, salary, and the estimated percentage of time each staff person will work. Include the resumes of key program staff in the appendix section of the application. Describe who will have primary responsibility for coordinating the program and who will exercise major administrative or policy roles. OA reserves the right to approve changes in staffing after a contract is awarded.

An organizational chart for the agency must be included. Also include a detailed organizational chart or listing that reflects which staff members have responsibility for the activities of the training program. Organizational charts and/or staff listings may be included in this section or in the application's appendix. Applicants who plan to use specially qualified experts as consultants, in addition to regular program staff, must identify these individuals and describe the specific responsibilities of the consultant.

9. Detailed Budget (No page limit)

Provide a Detailed Budget *for each year of the contract period, July 1, 2012 to June 30, 2015:*

July 1, 2012 – June 30, 2013

July 1, 2013 – June 30, 2014

July 1, 2014 – June 30, 2015

The Detailed Budget (for a sample format, see **Attachment 5** in the Appendix of this RFA) must list the five categories in the following order: Personnel (name and title of individual, percentage of time, salary range, salary, fringe, etc.), Operating Expenses (Please itemize expenses. Expenses may include: office supplies, communication, postage, travel, etc.) Capital Expenditures, Other Costs, and Indirect Costs.

10. Budget Justification/Narrative (No page limit)

Provide a Budget Justification *for each year of the contract period, July 1, 2012 to June 30, 2015:*

July 1, 2012 – June 30, 2013

July 1, 2013 – June 30, 2014

July 1, 2014 – June 30, 2015

The Budget Justification should explain and justify in a narrative format each budget line item. For example, the Personnel line item should list each position that is funded under this budget. If known, include staff member's names. This line item should also include a description and justification of the duties and responsibilities of each position, and the percentage of the full-time employment time allocation. See **Attachment 6** in the Appendix of this RFA for a description of what each line item should include.

Each line item in the Budget Justification should include subtotals and totals that match the Detailed Budget.

11. Appendix (No page limit)

The Appendix should contain all supplementary and/or required information not included in other sections of the Application. Examples include: any letters, resumes of key staff, letters of support, organizational charts and/or staff listings, samples of actual or proposed curricula, a copy of the most recent independently audited financial report, and any other information that demonstrates the applicant's ability to provide an optimal level of service as required by the RFA.

XI. APPLICATION SUBMISSION REQUIREMENTS

1. Preparation

- a) All applications must be in English.
- b) Applications must be clear and legible.
- c) Original pages must be printed on one side only.

2. Submission

To be considered complete, application submissions must include the following:

- a) One original application (single sided) with original signatures in blue ink.
- b) Four copies.

Submit all applications to:

Overnight Courier/Hand Delivery	General U.S.Postal Services
Attn: CSTEP RFA 12-10049 Office of AIDS HIV Care Branch California Department of Public Health MS 7700 1616 Capitol Avenue, Suite 616 Sacramento, CA 95814-5052 (916) 449-5900	Attn: CSTEP RFA 12-10049 Office of AIDS HIV Care Branch California Department of Public Health MS 7700 P.O. BOX 997426 Sacramento, CA 95899-7426 (916) 449-5900

3. Application Deadline

- a) All applications must be received by OA no later than 5 p.m. on **Thursday, April 26, 2012**. Packages received after the deadline will be returned without review. Faxes, electronic submissions, or postmarks will not be accepted in lieu of these requirements.
- b) Please be advised that OA’s internal processing of U.S. mail may add 48 hours or more to the delivery time. If applications are mailed, applicants are encouraged to use an overnight courier service that requires a signature or receipt upon delivery. If applications will be hand delivered, allow sufficient time to locate on-street metered parking and to sign in at the security desk.

XII. APPLICATION EVALUATION PROCESS

Shortly after the application submission deadline, OA will evaluate each application to determine the responsiveness to RFA requirements. Applications found to be non-responsive at any stage of the evaluation, for any reason, will be rejected from further consideration. **Late applications will not be reviewed.**

OA may reject any or all applications and may waive any material defect in any application. OA's waiver of any material defect shall in no way excuse the applicant from full compliance with the contract terms if the applicant is awarded the contract.

1. Grounds for Rejection

Circumstances that will cause an application package to be deemed non-responsive include:

- Receipt of the application after the deadline set forth in this RFA;
- Failure to submit a Letter of Intent by the deadline required by this RFA;
- Failure to complete and sign all required forms and attachments as instructed in this RFA or as instructed in the attachments;
- Failure to meet format or procedural submission requirements;
- Applicant provides inaccurate, false, or misleading information or statements;
- Applicant is unwilling or unable to fully comply with proposed contract terms;
- Applicant supplies cost information that is conditional, incomplete, or contains any unsigned material, alterations, or irregularities;
- Applicant does not meet the minimum qualifications set forth in this RFA; and
- OA reserves the right to reject any or all applications without remedy to the applicants. There is no guarantee that a contract will be awarded after the evaluation of all applications if, in the opinion of OA, none of the applications meet OA's needs.

2. Application Review Process

Applications that meet the format requirements and minimum qualifications and that contain all of the required forms and documentation will be submitted to an evaluation committee assembled by OA who will assign numeric scores to each responsive application. Each application will be reviewed and scored based upon the adequacy and thoroughness of its response to OA's needs and RFA requirements.

The evaluation criteria are shown below along with the maximum number of points possible. Application scores may range from 0-100 points. In the event that the top scoring applications receive the same score, a site visit will be conducted to select the applicant that will be funded.

Only applications receiving a score of 70 points or more will be considered for funding. Applications receiving a score of less than 70 points will be considered technically deficient and will not be considered for funding. There is no guarantee that scoring above 70 will result in funding or funding at the level indicated.

OA may, at its sole discretion, correct any obvious mathematical or clerical errors.

<u>Category</u>	<u>Maximum Scores</u>
Program Description	30 Points
Implementation Plan and Timeline	15 Points
Agency Capacity	20 Points
Program Personnel	15 Points
Budget and Budget Justification	20 Points
Total	100 points

3. Application Evaluation Criteria

Examples of specific evaluation criteria, which will be used to score each responsive application are:

Program Description Maximum Score: 30 Points

- To what extent does the program description show an understanding of the goal of the program?
- To what extent does the proposed training program appear to meet the objectives set out by this RFA?
- To what extent are the activities clear, measurable, appropriate, and specific to the objectives of the RFA?
- To what extent does the applicant describe methods to reach the intended audiences of this RFA?
- To what extent are the proposed training classes comprehensive and complete?

Implementation Plan and Timeline Maximum Score: 15 Points

- To what extent are timelines realistic and achievable?
- To what extent is the implementation plan reflective of the program description?

Agency Capacity Maximum Score: 20 points

- To what extent does the applicant demonstrate the ability of the applicant's organization to undertake the proposed work?
- To what extent does the applicant demonstrate capability and experience in ensuring timely and appropriate implementation and ongoing objectives of a program?
- To what extent does the applicant's internal quality controls, internal fiscal accounting controls, and budget monitoring procedures appear adequate to manage a program of this size and type? Also, does the applicant's example of similar or prior experiences adequately demonstrate the applicant's ability to provide deliverables in a timely manner, and

demonstrate the applicant's ability to manage fiscal resources responsibly?

Program Personnel

Maximum Score: 15 Points

- To what extent does the applicant adequately demonstrate that personnel policies and practices assure that well qualified staff are hired and retained for positions? Do the resumes provided by the applicant delineate the extent of the qualifications for the proposed staff, and is the proposed staff appropriate for this program? To what extent does the applicant adequately describe how the program will be organized and staffed?

Detailed Budget and Budget Justification Narrative Maximum Score: 20 Points

- To what extent is the Detailed Budget reasonable for the proposed quantity and quality of activities in the Program Description and does the Budget Justification Narrative provide the level of detail requested in this RFA? **Attachments 5 and 6** provide samples of a detailed budget format and budget narrative descriptions.

XIII. NOTIFICATION OF INTENT TO AWARD

Notification of the State's intent to award a contract for CSTEP: Statewide Treatment Education Training and Statewide Public Benefits Counseling Training will be posted by 5 p.m. on **Tuesday, May 15, 2012**, on OA's website at: <http://www.cdph.ca.gov/programs/aids/Pages/OACSTEPRFA.aspx>

All applicants, whether awarded funding or denied will be notified in writing of the funding decision.

XIV. DISPOSITION AND OWNERSHIP OF THE APPLICATION

All materials submitted in response to this RFA will become the property of OA and are subject to the Public Records Act (Government Code Section 6250, et seq.). OA shall have the right to use all ideas or adaptations of the ideas contained in any application received. The selection or rejection of an application will not affect this right. Within the constraints of applicable law, OA shall use its best efforts not to publicly release any information contained in the applications which is privileged under Evidence Code Sections 1040 (privileged official record) and 1060 (privileged trade secret) and which is clearly marked "Confidential" or information that is protected under the Information Practices Act.

XV. CONTRACT AWARD APPEAL PROCEDURES

An applicant who has submitted an application that was not funded may file an appeal with OA. Appeals must state the reason, law, rule, regulation, or practice that the applicant believes has been improperly applied in regard to the

evaluation or selection process. There is no appeal process for applications that are submitted late or are incomplete.

Appeals shall be limited to the following grounds:

- OA failed to correctly apply the standards for reviewing the format requirements or evaluating the applications as specified in the RFA.
- OA failed to follow the methods for evaluating and scoring the applications as specified in the RFA.

Appeals must be sent by express mail, and received by OA no later than 5 p.m. on **Wednesday, May 23, 2012**. Hand delivery, fax, U.S. Postal Service, and email will not be accepted.

Appeals are to be labeled and addressed as follows:

Overnight Courier:
Office of AIDS HIV Care Branch California Department of Public Health MS 7700 1616 Capitol Avenue, Suite 616 Sacramento, CA 95814-5052 (916) 449-5900

At the sole discretion of the Chief of the HIV Care Branch, or his/her designee, may hold an appeal hearing with each appellant and then come to a decision based on the combination of the written appeal letter and the evidence presented at the hearing. The decision of the Chief of the HIV Care Branch, or designee, shall be the final remedy. Appellants will be notified in writing within 15 days of their hearing date or the consideration of the written appeal letter if no hearing is held.

OA reserves the right to award the contract when it believes that all appeals have been resolved, withdrawn, or responded to the satisfaction of OA.

XVI. MISCELLANEOUS RFA INFORMATION

The issuance of this RFA does not constitute a commitment by OA to award a contract. OA reserves the right to reject any or all applications or to cancel this RFA if it is in the best interest of OA to do so.

In the event a contract is entered into, but later terminated, OA may enter into a contract with the available entity or organization having the next highest score in the evaluation process and so on for completing the remaining contract work.

In the case of any inconsistency or conflict between the provisions of the resulting contract, this RFA, addenda to this RFA, and an applicant's response,

such inconsistencies or conflicts will be resolved by first giving precedence to the contract, then to this RFA, any addenda, and last to the applicant's response.

As provided under the Public Contract Code governing contracts awarded by competitive bid, OA reserves the right, after contract award, to amend the resulting contract as needed throughout the term of the contract to best meet the needs of all parties.

XVII. CONTRACT TERMS AND CONDITIONS

The successful applicant must enter into a written agreement that may incorporate, by reference, this RFA as well as the applicant's response to this RFA, program description, detailed budget, and standard State contract provisions. Other exhibits, not identified herein, may also appear in the resulting agreement. The exhibits contain contractual terms that require strict adherence to various laws and contracting policies. Please refer to **Attachment 7** for Contractual Terms and Conditions. It is suggested that applicants carefully review the Contractual Terms and Conditions for any impact on their application and/or to determine if the agency will be able to comply with the stated terms and conditions, as little or no deviation from their contents will be allowed.

Individual meetings with OA and each selected contractor shall take place within 60 days after release of the Notice of Intent to Award. The purpose of the meetings will be to assure a common understanding of contract purposes, terms, budgets, timelines, and related issues.

XVIII. APPENDIX

Attachment 1: Application Cover Sheet

Attachment 2: Application Certification Checklist

Attachment 3: Agency Information Sheet

Attachment 4: Payee Data Record – STD. 204 (if applicable)

Attachment 5: Sample Detailed Budget

Attachment 6: Budget Narrative Descriptions

Attachment 7: Contractual Terms and Conditions