**STATE OF MAINE**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*



**RFP# 202402021**

**Statewide Community Led Needs Assessments**

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| --- | --- |
| **RFP Coordinator** | *All communication regarding the RFP must be made through the RFP Coordinator identified below*.**Name:** Brittany Hall **Title:** Procurement Administrator**Contact Information:** Brittany.hall@maine.gov |
| **Submitted Questions Due** | *All questions must be received by the RFP Coordinator identified above by:***Date:** February 27, 2024, no later than 11:59 p.m., local time. |
| **Proposal Submission** | *Proposals must be received by the Division of Procurement Services by:***Submission Deadline:** March 25, 2024, no later than 11:59 p.m., local time.*Proposals must be submitted electronically to*:Proposals@maine.gov |

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PUBLIC NOTICE

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**State of Maine**

**Department of Health and Human Services**

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

The State of Maine is seeking proposals for Community-Based Organizations to conduct Statewide Community Led Needs Assessments related to the strengths, needs, and priorities related to the health of an identified community.

A copy of the RFP, as well as the Question & Answer Summary and all amendments related to the RFP, can be obtained at: <https://www.maine.gov/dafs/bbm/procurementservices/vendors/rfps>

Proposals must be submitted to the State of Maine Division of Procurement Services, via e-mail, at: Proposals@maine.gov. Proposal submissions must be received no later than 11:59 p.m., local time, on March 25, 2024. Proposals will be opened the following business day. Proposals not submitted to the Division of Procurement Services’ aforementioned e-mail address by the aforementioned deadline will not be considered for contract award.

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**RFP TERMS/ACRONYMS with DEFINITIONS**

The following terms and acronyms, as referenced in the RFP, shall have the meanings indicated below:

|  |  |
| --- | --- |
| **Term/Acronym** | **Definition** |
| **Community-Based Organization (CBO)** | An organization driven by and accountable to the community and/or population it serves. A CBO has a physical presence in the community it serves and has clear processes to include community perspectives in determining the priority issues it addresses and the solutions pursued. |
| **Community-Based Participatory Research** | A collaborative research approach designed to ensure and establish structures for participation by communities affected by the issue being studied, representatives of organizations, and researchers in all aspects of the research process to improve health and well‐being through taking action, including social change. (*Agency for Healthcare Research and Quality* definition.)[[1]](#footnote-2) |
| **Community Led Needs Assessment (CLNA)** | Provides community leaders with a snapshot of the current state of health status, resources, and needs in a specific geographical area for a specific population. A CLNA is conducted with the leadership and direction of the communities being assessed, and the data collected is owned by the community.  |
| **Community of Focus** | The specific community or population the Bidder is proposing to conduct the CLNA with.The community of focus shall be Statewide and be a community or population that:* 1. Has a shared identity;
	2. Is underrepresented in current public health datasets; and
	3. Experiences health disparities as a result of systemic inequity and discrimination.
 |
| **Department** | Department of Health and Human Services |
| **Research Partner** | An entity with technical expertise in Community-Based Participatory Research that supports the CBOs in conducting a Statewide Community Led Needs Assessment. |
| **RFP** | Request for Proposal |
| **State** | State of Maine |

**State of Maine - Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

**PART I INTRODUCTION**

1. **Purpose and Background**

The Department of Health and Human Services (Department) is seeking organizations to conduct Statewide Community Led Needs Assessments (CLNAs) to better understand the strengths, needs, and priorities related to health in Communities of Focus as defined in this Request for Proposal (RFP) document. This document provides instructions for submitting proposals, the procedure and criteria by which the awarded Bidder will be selected, and the contractual terms which will govern the relationship between the State of Maine (State) and the awarded Bidder.

The Department is dedicated to promoting health, safety, resiliency, and opportunity to all Maine Residents. The Department’s Maine Center for Disease Control and Prevention (Maine CDC) provides leadership, expertise, information, and tools to assure conditions in which all the people of Maine can be healthy. The Office of Population Health Equity (OPHE) within Maine CDC advances health equity by illuminating and addressing underlying conditions and systems that limit the full potential of all Maine people to lead healthy, safe, and opportunity-rich lives.

CLNAs typically involve gathering information about the current state of health status, resources, and needs in a specific geographical area for a specific population. This data can be gathered through surveys, focus groups, interviews, and/or other methods (including an analysis of existing data sources). The goal of conducting a CLNA is to identify gaps in care or opportunities for improvement based on the collected data and then create strategies to address the issues. The efforts of the CLNA often include working with local stakeholders such as government officials, policy makers, healthcare providers, and the community members to ensure the information gathering, and analysis strategies are culturally-tailored and effective.

OPHE aims to support multiple Community-Based Organizations (CBOs) to conduct Statewide CLNAs in collaboration with a Research Partner who has conducted Community-Based Participatory Research and will serve as a technical advisor to support the project.

Each Statewide CLNA shall include, at a minimum, information about community strengths, health concerns of community members (including social determinants of health), how COVID-19 impacted the community, barriers in accessing government resources, and suggested ways for the Department to address health concerns and barriers (including the role of diverse businesses and non-profits).

The awarded Bidder(s) shall conduct a Statewide CLNA among a statistically significant sample size for a Statewide analysis, determined in collaboration with a Research Partner. The CLNA shall be conducted on Statewide Community of Focus and not for a specific region/location within the State. The Department will award only one (1) contract per Community of Focus.

The Department is seeking Statewide CLNAs for communities that:

* + Have a shared identity;
	+ Are underrepresented in current public health datasets; and
	+ Experience health disparities as a result of systemic inequity and discrimination.

The Department intends for the CLNA to be focused on specific Communities which include:

1. Multi-generational Black/African American communities;
2. Immigrant, refugee, and asylum seeker communities;
3. Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) communities;
4. Latino/Hispanic/Latinx communities;
5. Asian American and Pacific Islander (AAPI) communities
6. Indigenous/Native American communities
7. Middle Eastern/North African communities
8. Migrant and seasonal farmworker communities
9. People with disabilities

The Department anticipates the results of each Statewide CLNA will enable the Department to better understand the health needs and priorities of specific communities that are historically underrepresented or misrepresented in currently available data, and to inform the next State Health Improvement Plan and Maine Shared Community Health Needs Assessment.

1. **Allowable/Non-Allowable Costs**

Funding for Statewide CLNAs is provided by the Maine Jobs and Recovery Plan through the Federal American Rescue Plan Act (ARPA).

1. ARPA funds may be used to support:
2. Staff/consultant time related to design, implementation, and evaluation of the assessments as well as community feedback/governance.
3. Benefits, occupancy costs, professional development, etc. that are directly related to the project staff/consultants.
4. Costs to reduce barriers for community members to participate in the Statewide CLNA such as travel reimbursement, childcare at meetings/focus groups, food at meetings focus/groups, interpretation services, and other services that address specific barriers that prevent community members from participating in the Statewide CLNAs.
5. Indirect costs according to the Bidder’s Federally approved indirect cost rate, or a negotiated rate with the Department, or the ten percent (10%) de minimus indirect cost rate in accordance with Uniform Guidance.
6. Additional costs proposed by CBOs with approval from the Department.
7. ARPA funds may not be used to support:
8. General/management staff (unless those staff are specifically assigned to the Statewide CLNA project), general operational costs, and/or debt service.
9. Duplicating or supplanting funding received from other federal or State resources.

*The Department will consider other allowable activities related to conducting the Statewide CLNA. Approval of all proposed activities will be at the discretion of the Department. Bidders proposing activities not listed above, may submit questions to the Department through the RFP Q&A process outlined in this RFP.*

1. **General Provisions**
	1. From the time the RFP is issued until award notification is made, all contact with the State regarding the RFP must be made through the RFP Coordinator. No other person/ State employee is empowered to make binding statements regarding the RFP. Violation of this provision may lead to disqualification from the bidding process, at the State’s discretion.
	2. Issuance of the RFP does not commit the Department to issue an award or to pay expenses incurred by a Bidder in the preparation of a response to the RFP. This includes attendance at personal interviews or other meetings and software or system demonstrations, where applicable.
	3. All proposals must adhere to the instructions and format requirements outlined in the RFP and all written supplements and amendments (such as the Summary of Questions and Answers), issued by the Department. Proposals are to follow the format and respond to all questions and instructions specified below in the “Proposal Submission Requirements” section of the RFP.
	4. Bidders will take careful note that in evaluating a proposal submitted in response to the RFP, the Department will consider materials provided in the proposal, information obtained through interviews/presentations (if any), and internal Departmental information of previous contract history with the Bidder (if any). The Department also reserves the right to consider other reliable references and publicly available information in evaluating a Bidder’s experience and capabilities.
	5. The proposal must be signed by a person authorized to legally bind the Bidder and must contain a statement that the proposal and the pricing contained therein will remain valid and binding for a period of 180 days from the date and time of the bid opening.
	6. The RFP and the awarded Bidder’s proposal, including all appendices or attachments, will be the basis for the final contract, as determined by the Department.
	7. Following announcement of an award decision, all submissions in response to this RFP will be public records, available for public inspection pursuant to the State of Maine Freedom of Access Act (FOAA) ([1 M.R.S. § 401](http://www.mainelegislature.org/legis/statutes/1/title1sec401.html) et seq.).
	8. The Department, at its sole discretion, reserves the right to recognize and waive minor informalities and irregularities found in proposals received in response to the RFP.
	9. All applicable laws, whether or not herein contained, are included by this reference. It is the Bidder’s responsibility to determine the applicability and requirements of any such laws and to abide by them.
2. **Eligibility to Submit Bids**

All interested parties who, 1) identify as a Community-Based Organization (CBO); and 2) have a pre-determined a Research Partner (both as defined by this RFP’s Terms/Acronyms with Definitions) are invited to submit bids in response to this RFP.

1. **Contract Term**

The Department is seeking a cost-efficient proposal to provide services, as defined in the RFP, for the anticipated contract period defined in the table below. Please note, the dates below are estimated and may be adjusted, as necessary, in order to comply with all procedural requirements associated with the RFP and the contracting process. The actual contract start date will be established by a completed and approved contract.

The term of the anticipated contract, resulting from the RFP, is defined as follows:

|  |  |  |
| --- | --- | --- |
| **Period** | **Start Date** | **End Date** |
| Period of Performance | 6/1/2024 | 8/30/2025 |

1. **Number of Awards**

The Department anticipates making multiple awards as a result of the RFP process.

The Department will award only one (1) contract per Community of Focus. **Bidders interested in conducting a Statewide CLNA for more than one Community of Focus must indicate the Community of Focus on Appendix A (Proposal Cover Page) and submit a separate proposal for each Community of Focus.**

**PART II SCOPE OF SERVICES TO BE PROVIDED**

**Specific instructions for the Bidder to provide a narrative response to the Scope of Services may be found in Part IV, Section III, Services to be Provided.**

1. **General Requirements**
	* + 1. Identify a Community of Focus, which must have a shared cultural identity, be underrepresented in current public health datasets, and experiences health disparities as a result of systemic inequity and discrimination. Communities of Focus include:
2. Multi-generational Black/African American communities;
3. Immigrant, refugee, and asylum seeker communities;
4. Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) communities;
5. Latino/Hispanic/Latinx communities;
6. Asian American and Pacific Islander (AAPI) communities;
7. Indigenous/Native American communities;
8. Middle Eastern/North African communities;
9. Migrant and seasonal farmworker communities; and/or
10. People with disabilities.
	* + 1. Develop partnerships with other organizations to collaboratively design the Statewide Community Led Needs Assessment (CLNA), with representation from the Community of Focus.
			2. Develop a Staffing and Governance Plan that includes:
11. Leadership by one (1) full time equivalent staff person who is one hundred percent (100%) dedicated to the Statewide CLNA project and responsible for stewarding the Statewide CLNA effort.
12. Clear guidelines for how community members, partner organizations, and the Research Partner will collaborate and share decision-making power.
13. Consideration for how and where data will be collected and stored to protect the privacy of those who participate.
	1. Develop an implementation work plan that accommodates specific milestones:
		1. Complete planning and survey instrument development by 7/31/2024.
		2. Begin the assessment by 8/1/2024.
		3. Provide final report to Department by 6/1/2025.
	2. Conduct the Statewide CLNA by:
		1. Determining a statistically significant sample size for the Community of Focus based on State population.
		2. Designing the assessment instruments and data gathering methods (e.g., survey, focus group, interviews, etc.)
		3. Leading community engagement and outreach efforts to ensure sufficient participation to meet needed sample.
		4. Analyzing quantitative and qualitative data gathered.
	3. Work collaboratively with the Department to ensure insights from the assessment informs the next State Health Improvement Plan and Shared Community Health Needs Assessment.
14. **Reporting Requirements**
15. Provide quarterly progress reports to the Department on specific metrics:
	* 1. Number of partner organizations participating in Statewide CLNA design / implementation process;
		2. Number of individuals participating in Statewide CLNA design / implementation process;
		3. Number of individuals surveyed; and
		4. Number of individuals participated in focus groups.
16. Develop a final report of findings to be provided to the Department, which includes, at a minimum:
	* 1. Descriptive demographic statistics about the Community of Focus;
		2. Community strengths;
		3. Health concerns of community members (including concerns about healthcare and the broader social drivers of health);
		4. How COVID-19 impacted the community;
		5. Barriers in accessing government resources;
		6. Suggested ways for the Department to address health concerns and barriers; and
		7. Suggested ways for the Department to more effectively work with businesses and non-profits led by community members.

# **Reports**

* 1. Track and record all data/information necessary to complete the required reports listed in **Table 1**:

|  |
| --- |
| **Table 1 – Required Reports** |
| **Name of Report**  | **Description**  |
| **a.** | Progress Report | Provides narrative progress on project implementation and data, including but not limited to:* Number of Partner Organizations Participating in Statewide CLNA Design / Implementation Process

Number of Individuals Participating in Statewide CLNA Design / Implementation ProcessNumber of Individuals SurveyedNumber of Individuals Participated in Focus Groups |
| **b.**  | Survey Instrument(s) | Surveys and focus group interview questions.  |
| **c.**  | Final Statewide CLNA Report  | Findings from Statewide CLNA process, as determined by the awarded Bidder and the Department.  |

# Submit all the required reports to the Department in accordance with the timelines established in **Table 2**:

|  |
| --- |
| **Table 2 – Required Reports Timelines** |
| **Name of Report**  | **Period Captured by Report** | **Due Date** |
| **a.** | Progress Report  | Each quarter  | Thirty (30) days after each quarter |
| **b.** | Survey Instrument(s) | First 3 months of contract period | August 31, 2024 |
| **c.**  | Final Statewide CLNA Report | Entire contract period  | Thirty (30) days prior to the end of the contract period |

**PART III KEY RFP EVENTS**

1. **Questions**
	1. **General Instructions:** It is the responsibility of all Bidders and other interested parties to examine the entire RFP and to seek clarification, in writing, if they do not understand any information or instructions.
		1. Bidders and other interested parties should use **Appendix I** (Submitted Questions Form) for submission of questions. The form is to be submitted as a WORD document.
		2. The Submitted Questions Form must be submitted, by e-mail, and received by the RFP Coordinator, identified on the cover page of the RFP, as soon as possible but no later than the date and time specified on the RFP cover page.
		3. Submitted Questions must include the RFP Number and Title in the subject line of the e-mail. The Department assumes no liability for assuring accurate/complete/on time e-mail transmission and receipt.
	2. **Question & Answer Summary:** Responses to all questions will be compiled in writing and posted on the following website no later than seven (7) calendar days prior to the proposal due date: [Division of Procurement Services RFP Page](https://www.maine.gov/dafs/bbm/procurementservices/vendors/rfps). It is the responsibility of all interested parties to go to this website to obtain a copy of the Question & Answer Summary. Only those answers issued in writing on this website will be considered binding.
2. **Amendments**

All amendments released in regard to the RFP will also be posted on the following website: [Division of Procurement Services RFP Page](https://www.maine.gov/dafs/bbm/procurementservices/vendors/rfps). It is the responsibility of all interested parties to go to this website to obtain amendments. Only those amendments posted on this website are considered binding.

1. **Submitting the Proposal**
	1. **Proposals Due:** Proposals must be received no later than 11:59 p.m. local time, on the date listed on the cover page of the RFP.
		1. Any e-mails containing original proposal submissions or any additional or revised proposal files, received after the 11:59 p.m. deadline, will be rejected without exception.
	2. **Bidders must submit a separate proposal for each Community of Focus they intend conduct a Statewide CLNA on.**
	3. **Delivery Instructions:** E-mail proposal submissions are to be submitted to the State of Maine Division of Procurement Services at Proposals@maine.gov.
		1. Only proposal submissions received by e-mail will be considered. The Department assumes no liability for assuring accurate/complete e-mail transmission and receipt.
			1. Proposal submission e-mails that are successfully received by the proposals@maine.gov inbox will receive an automatic reply stating as such.
		2. E-mails containing links to file sharing sites or online file repositories will not be accepted as submissions. Only e-mail proposal submissions that have the actual requested files attached will be accepted.
		3. Encrypted e-mails received which require opening attachments and logging into a proprietary system will not be accepted as submissions. Please check with your organization’s Information Technology team to ensure that your security settings will not encrypt your proposal submission.
		4. File size limits are 25MB per e-mail. Bidders may submit files separately across multiple e-mails, as necessary, due to file size concerns. All e-mails and files must be received by the due date and time listed above.
		5. Bidders are to insert the following into the subject line of their e-mail proposal submission: **“RFP# 202402021 Proposal Submission – [Bidder’s Name]”**
		6. Bidder’s proposal submissions are to be broken down into multiple files, with each file named as it is titled in bold below, and include:
* **File 1 [Bidder’s Name] – Preliminary Information:**

*PDF format preferred*

**Appendix A** (Proposal Cover Page)

**Appendix B** (Debarment, Performance and Non-Collusion Certification)

**Appendix C** (Eligibility to Submit Bids Form)

All required eligibility documentation stated in PART IV, Section I.

* **File 2 [Bidder’s Name] – Organization Qualifications and Experience:**

*PDF format preferred*

**Appendix D** (Organization Qualifications and Experience Form)

**Appendix E** (Subcontractors Form), if applicable

**Appendix F** (Litigation Form)

All required information and attachments stated in PART IV, Section II.

* **File 3 [Bidder’s Name] – Proposed Services:**

*PDF format preferred*

**Appendix G** (Response to Proposed Services Form)

All required information and attachments stated in PART IV, Section III.

* **File 4 [Bidder’s Name] – Cost Proposal:**

*Excel PDF format preferred*

**Appendix H** (Cost Proposal Form)

All required information and attachments stated in PART IV, Section IV.

**PART IV PROPOSAL SUBMISSION REQUIREMENTS**

This section contains instructions for Bidders to use in preparing their proposals. The Department seeks detailed yet succinct responses that demonstrate the Bidder’s qualifications, experience, and ability to perform the requirements specified throughout the RFP.

The Bidder’s proposal must follow the outline used below, including the numbering, section, and sub-section headings. Failure to use the outline specified in PART IV, or failure to respond to all questions and instructions throughout the RFP, may result in the proposal being disqualified as non-responsive or receiving a reduced score. The Department, and its evaluation team, has sole discretion to determine whether a variance from the RFP specifications will result either in disqualification or reduction in scoring of a proposal. Rephrasing of the content provided in the RFP will, at best, be considered minimally responsive.

Bidders are not to provide additional attachments beyond those specified in the RFP for the purpose of extending their response. Additional materials not requested will not be considered part of the proposal and will not be evaluated. Include any forms provided in the submission package or reproduce those forms as closely as possible. All information must be presented in the same order and format as described in the RFP.

**Proposal Format and Contents**

**Section I Preliminary Information** (File #1)

* 1. **Proposal Cover Page**

Bidders must complete **Appendix A** (Proposal Cover Page). It is critical that the cover page show the specific information requested, including Bidder address(es) and other details listed. The Proposal Cover Page must be dated and signed by a person authorized to enter into contracts on behalf of the Bidder.

* 1. **Debarment, Performance and Non-Collusion Certification**

Bidders must complete **Appendix B** (Debarment, Performance and Non-Collusion Certification Form). The Debarment, Performance and Non-Collusion Certification Form must be dated and signed by a person authorized to enter into contracts on behalf of the Bidder.

* 1. **Eligibility Requirements**

Bidders must provide documentation to demonstrate meeting eligibility requirements stated in PART I, C. of the RFP. This documentation includes:

1. **Appendix C** (Eligibility to Submit Bids Form)

**Section II Organization Qualifications and Experience** (File #2)

* 1. **Overview of the Organization**

Bidders must complete **Appendix D** (Qualifications and Experience Form) describing their qualifications and skills to provide the requested services in the RFP. Bidders must include one (1) example of a project within the last five (5) years, which demonstrates their experience and expertise in performing these services, including training in conducting a Community Led Needs Assessment (CLNA) and/or past experience conducing needs assessments, as well as highlighting the Bidder’s stated qualifications and skills.

* 1. **Subcontractors**

If subcontractors are to be used, including consultants, Bidders must complete **Appendix E** (Subcontractors Form) by providing a list that specifies the name, address, phone number, contact person, and a brief description of the subcontractors’ organizational capacity and qualifications.

* 1. **Litigation**

Bidders must complete **Appendix F** (Litigation Form) providing a list of all current litigation in which the Bidder is named and a list of all closed cases that have closed within the past five (5) years in which the Bidder paid the claimant either as part of a settlement or by decree.  For each, list the entity bringing suit, the complaint, the accusation, amount, and outcome. If no litigation has occurred, write “none” on **Appendix F** (Litigation Form).

|  |
| --- |
| **Required Attachments Related to Organization Qualifications and Experience**  |
| **Attachment #:** | **Attachment Name:** |
| One (1) | Qualifications and Experience Form  |
| Two (2) | Subcontractors Form |
| Three (3) | Litigation |

Attachments 1 – 3, must be included in numerical order, as part of File 2, as outlined in PART III “Submitting the Proposal” of this RFP. Attachments 1 – 3 will be reviewed and evaluated by the Department’s evaluation team under the Organization Qualifications and Experience section of this RFP.

*The awarded Bidder(s) will be required to submit, prior to the contract execution, a valid certificate of insurance on a standard ACORD form (or the equivalent) evidencing the awarded Bidder’s general liability, professional liability, and any other relevant liability insurance policies that might be associated with the services provided as a result of this RFP.*

**Section III Proposed Services** (File #3)

Bidder must complete **Appendix G** (Response to Proposed Services Form) by providing a detailed response to the requirements outlined in this RFP.

|  |
| --- |
| **Required Attachments Related to Proposed Services** |
| **Attachment #:** | **Attachment Name:** |
| Four (4) | Implementation - Work Plan |

Attachment 4 must be included in numerical order, as part of File 3, as outlined in PART III “Submitting the Proposal” of this RFP. Attachment 4 will be reviewed and evaluated by the Department’s evaluation team under the Proposed Services section of this RFP.

**Section IV Cost Proposal** (File #4)

* 1. **General Instructions**
		1. Bidders must submit a cost proposal that covers the entire period of performance, starting 6/1/2024 and ending on 8/31/2025.
		2. The cost proposal must include the costs necessary for the Bidder to fully comply with the contract terms, conditions, and RFP requirements.
		3. No costs related to the preparation of the proposal for the RFP, or to the negotiation of the contract with the Department, may be included in the proposal. Only costs to be incurred after the contract effective date that are specifically related to the implementation or operation of contracted services may be included.
	2. **Cost Proposal Form Instructions**

Bidders must fill out **Appendix H** (Cost Proposal Form), following the instructions detailed here and in the form. Failure to provide the requested information, and to follow the required cost proposal format provided, may result in the exclusion of the proposal from consideration, at the discretion of the Department.

1. **Allowable/Non-Allowable Cost**

Funding for Statewide CLNAs is provided by the Maine Jobs and Recovery Plan through the Federal American Rescue Plan Act (ARPA).

ARPA funds may be used to support:

* + - * 1. Staff/consultant time related to design, implementation, and evaluation of the assessments as well as community feedback/governance.
				2. Benefits, occupancy costs, professional development, etc. that are directly related to the project staff/consultants.
				3. Costs to reduce barriers for community members to participate in the Statewide CLNA such as travel reimbursement, childcare at meetings/focus groups, food at meetings focus/groups, interpretation services, and other services that address specific barriers that prevent community members from participating in the Statewide CLNAs.
				4. Indirect costs according to the Bidder’s Federally approved indirect cost rate, or a negotiated rate with the Department, or the ten percent (10%) de minimus indirect cost rate in accordance with Uniform Guidance.
				5. Additional costs proposed by CBOs with approval from the Department.
	1. ARPA funds may not be used to support:
1. General/management staff (unless those staff are specifically assigned to the Statewide CLNA project), general operational costs, and/or debt service.
2. Duplicating or supplanting funding received from other federal or State resources.

*The Department will consider other allowable activities related to conducting the Statewide CLNA. Approval of all proposed activities will be at the discretion of the Department.*

**PART V PROPOSAL EVALUATION AND SELECTION**

Evaluation of the submitted proposals will be accomplished as follows:

1. **Evaluation Process - General Information**
	1. An evaluation team, composed of qualified reviewers, will judge the merits of the proposals received in accordance with the criteria defined in the RFP.
	2. Officials responsible for making decisions on the award selection will ensure that the selection process accords equal opportunity and appropriate consideration to all who are capable of meeting the specifications. The goals of the evaluation process are to ensure fairness and objectivity in review of the proposals and to ensure that the contract is awarded to the Bidder whose proposal provides the best value to the State of Maine.
	3. The Department reserves the right to communicate and/or schedule interviews/presentations with Bidders, if needed, to obtain clarification of information contained in the proposals received. The Department may revise the scores assigned in the initial evaluation to reflect those communications and/or interviews/presentations. Changes to proposals, including updating or adding information, will not be permitted during any interview/presentation process and, therefore, Bidders must submit proposals that present their rates and other requested information as clearly and completely as possible.
2. **Scoring Weights and Process**
	1. **Scoring Weights:** The score will be based on a 100-point scale and will measure the degree to which each proposal meets the following criteria.

**Section I. Preliminary Information (No Points – Eligibility Requirements)**

Includes all elements addressed above in Part IV, Section I.

**Section II. Organization Qualifications and Experience (35 points)**

Includes all elements addressed above in Part IV, Section II.

**Section III. Proposed Services (40 points)**

Includes all elements addressed above in Part IV, Section III.

**Section IV. Cost Proposal (25 points)**

Includes all elements addressed above in Part IV, Section IV.

* 1. **Scoring Process:** For proposals that demonstrate meeting the eligibility requirements in Section I, the evaluation team will use a consensus approach to evaluate and score Sections II & III above. Members of the evaluation team will not score those sections individually but, instead, will arrive at a consensus as to assignment of points for each of those sections. Section IV, the Cost Proposal, will be scored as described below.
	2. **Scoring the Cost Proposal:** The total cost proposed for conducting all the functions specified in the RFP will be assigned a score according to a mathematical formula. The lowest bid will be awarded 25 points. Proposals with higher bids values will be awarded proportionately fewer points calculated in comparison with the lowest bid.

The scoring formula is:

(Lowest submitted cost proposal / Cost of proposal being scored) x 25 = pro-rated score

No Best and Final Offers: The State of Maine will not seek or accept a best and final offer (BAFO) from any Bidder in this procurement process.  All Bidders are to provide their best value pricing with the submission of their proposal.

* 1. **Negotiations:** The Department reserves the right to negotiate with the awarded Bidder to finalize a contract. Such negotiations may not significantly vary the content, nature or requirements of the proposal or the Department’s Request for Proposal to an extent that may affect the price of goods or services requested. The Department reserves the right to terminate contract negotiations with an awarded Bidder who submits a proposed contract significantly different from the proposal they submitted in response to the advertised RFP. In the event that an acceptable contract cannot be negotiated with the highest ranked Bidder, the Department may withdraw its award and negotiate with the next-highest ranked Bidder, and so on, until an acceptable contract has been finalized. Alternatively, the Department may cancel the RFP, at its sole discretion.
1. **Selection and Award**
	1. The final decision regarding the award of the contract will be made by representatives of the Department subject to approval by the State Procurement Review Committee.
	2. Notification of conditional award selection or non-selection will be made in writing by the Department.
	3. Issuance of the RFP in no way constitutes a commitment by the State of Maine to award a contract, to pay costs incurred in the preparation of a response to the RFP, or to pay costs incurred in procuring or contracting for services, supplies, physical space, personnel or any other costs incurred by the Bidder.
	4. The Department reserves the right to reject any and all proposals or to make multiple awards.
2. **Appeal of Contract Awards**

Any person aggrieved by the award decision that results from the RFP may appeal the decision to the Director of the Bureau of General Services in the manner prescribed in [5 M.R.S.A. § 1825-E](http://www.mainelegislature.org/legis/statutes/5/title5sec1825-E.html) and [18-554 Code of Maine Rules Chapter 120](https://www.maine.gov/dafs/bbm/procurementservices/policies-procedures/chapter-120).  The appeal must be in writing and filed with the Director of the Bureau of General Services, 9 State House Station, Augusta, Maine, 04333-0009 within 15 calendar days of receipt of notification of conditional contract award.

**PART VI CONTRACT ADMINISTRATION AND CONDITIONS**

1. **Contract Document**
	1. The awarded Bidder will be required to execute a State Service Contract with appropriate riders as determined by the issuing department.

Forms and contract documents commonly used by the Department can be found on the Department’s [Division of Contract Management website](https://www.maine.gov/dhhs/about/financial-management/contract-management).

* 1. Allocation of funds is final upon successful negotiation and execution of the contract, subject to the review and approval of the State Procurement Review Committee. Contracts are not considered fully executed and valid until approved by the State Procurement Review Committee and funds are encumbered. No contract will be approved based on an RFP which has an effective date less than fourteen (14) calendar days after award notification to Bidders. (Referenced in the regulations of the Department of Administrative and Financial Services, [Chapter 110, § 3(B)(i)](https://www.maine.gov/dafs/bbm/procurementservices/policies-procedures/chapter-110).)

This provision means that a contract cannot be effective until at least 14 calendar days after award notification.

* 1. The State recognizes that the actual contract effective date depends upon completion of the RFP process, date of formal award notification, length of contract negotiation, and preparation and approval by the State Procurement Review Committee. Any appeals to the Department’s award decision(s) may further postpone the actual contract effective date, depending upon the outcome. The contract effective date listed in the RFP may need to be adjusted, if necessary, to comply with mandated requirements.
	2. In providing services and performing under the contract, the awarded Bidder must act as an independent contractor and not as an agent of the State of Maine.
1. **Standard State Contract Provisions**
	1. Contract Administration

Following the award, a Contract Administrator from the Department will be appointed to assist with the development and administration of the contract and to act as administrator during the entire contract period. Department staff will be available after the award to consult with the awarded Bidder in the finalization of the contract.

* 1. Payments and Other Provisions

The State anticipates paying the Contractor on the basis of net 30 payment terms, upon the receipt of an accurate and acceptable invoice. An invoice will be considered accurate and acceptable if it contains a reference to the State of Maine contract number, contains correct pricing information relative to the contract, and provides any required supporting documents, as applicable, and any other specific and agreed-upon requirements listed within the contract that results from the RFP.

**PART VII LIST OF RFP APPENDICES AND RELATED DOCUMENTS**

**Appendix A** – Proposal Cover Page

**Appendix B** – Debarment, Performance, and Non-Collusion Certification

**Appendix C** – Eligibility to Submit Bids Form

**Appendix D** – Qualifications and Experience Form

**Appendix E** – Subcontractors Form

**Appendix F** – Litigation Form

**Appendix G** – Response to Proposed Services Form

**Appendix H** – Cost Proposal Form

**Appendix I** – Submitted Questions Form

**APPENDIX A**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

**PROPOSAL COVER PAGE**

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

|  |  |
| --- | --- |
| **Community of Focus** |  |
| **Bidder’s Organization Name:** |  |
| **Vendor Customer Code** (for current State of Maine vendors)**:** | VC |
| **Chief Executive - Name/Title:** |  |
| **Tel:** |  | **E-mail:** |  |
| **Headquarters Street Address:** |  |
| **Headquarters City/State/Zip:** |  |
| ***(Provide information requested below if different from above)*** |
| **Lead Point of Contact for Proposal - Name/Title:** |  |
| **Tel:** |  | **E-mail:** |  |
| **Street Address:** |  |
| **City/State/Zip:** |  |

* This proposal and the pricing structure contained herein will remain firm for a period of 180 days from the date and time of the bid opening.
* No personnel currently employed by the Department or any other State agency participated, either directly or indirectly, in any activities relating to the preparation of the Bidder’s proposal.
* No attempt has been made, or will be made, by the Bidder to induce any other person or firm to submit or not to submit a proposal.
* The above-named organization is the legal entity entering into the resulting contract with the Department if they are awarded the contract.
* The undersigned is authorized to enter contractual obligations on behalf of the above-named organization.

*To the best of my knowledge, all information provided in the enclosed proposal, both programmatic and financial, is complete and accurate at the time of submission.*

|  |  |
| --- | --- |
| **Name (Print):** | **Title:** |
| **Authorized Signature:** | **Date:** |

**APPENDIX B**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

**DEBARMENT, PERFORMANCE, and NON-COLLUSION CERTIFICATION**

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

*By signing this document, I certify to the best of my knowledge and belief that the aforementioned organization, its principals and any subcontractors named in this proposal:*

1. *Are not presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from bidding or working on contracts issued by any governmental agency.*
2. *Have not within three years of submitting the proposal for this contract been convicted of or had a civil judgment rendered against them for:*
	1. *Fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local government transaction or contract.*
	2. *Violating Federal or State antitrust statutes or committing embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.*
3. *Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (b) of this certification.*
4. *Have not within a three (3) year period preceding this proposal had one or more federal, state, or local government transactions terminated for cause or default*.
5. *Have not entered into a prior understanding, agreement, or connection with any corporation, firm, or person submitting a response for the same materials, supplies, equipment, or services and this proposal is in all respects fair and without collusion or fraud. The above-mentioned entities understand and agree that collusive bidding is a violation of state and federal law and can result in fines, prison sentences, and civil damage awards.*

|  |  |
| --- | --- |
| **Name (Print):** | **Title:** |
| **Authorized Signature:** | **Date:** |

**APPENDIX C**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

## ELIGIBILITY TO SUBMIT A BID FORM

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |
| **Eligibility Certification**All interested parties who, 1) identify as a Community-Based Organization (CBO); and 2) have a pre-determined a Research Partner (both as defined by this RFP’s Terms/Acronyms with Definitions) are invited to submit bids in response to this RFP.  |
| 1. Is the Bidder’s organization identified as a CBO as defined by the RFP’s Terms and Definitions?

Describe the Bidder’s CBO: | [ ]  Yes [ ]  No |
|  |
| 1. Does the Bidder have a Research Partner as defined by the RFP’s Terms and Definitions?

Provide the name and contract information of the Research Partner and attach a letter of commitment from the Research Partner. | [ ]  Yes [ ]  No |
|  |

**APPENDIX D**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

## QUALIFICATIONS and EXPERIENCE FORM

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

|  |
| --- |
| **Present a brief statement of qualifications, including any applicable licensure and/or certification. Describe the history of the Bidder’s organization, especially regarding skills pertinent to the specific work required by the RFP and any special or unique characteristics of the organization which would make it especially qualified to perform the required work activities. You may expand this form and use additional pages to provide this information.** |
|  |

|  |
| --- |
| **Provide a description of projects that occurred within the past five (5) years which reflect experience and expertise needed in performing the functions described in Part II – Scope of Services to be Provided of the RFP. Please note that contract history with the State of Maine, whether positive or negative, may be considered in rating proposals even if not provided by the Bidder.** |

|  |
| --- |
| **Project** |
| **Business Reference Name:** |  |
| **Reference Contact Person:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
| **Description of Project** |
| **Project Start Date** |  | **Project End Date** |  |
|  |

**APPENDIX E**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

## SUBCONTRACTORS FORM

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

|  |
| --- |
| **If subcontractors, including consultants, are to be used, provide each individual subcontractor’s business or consultant’s name, contact person, address, phone number, and a brief description of the subcontractor’s organizational or consultant’s capacity and qualifications. Bidders may add additional Subcontractors/Consultants as needed.** |

|  |
| --- |
| **Subcontractor/Consultant** |
| **Subcontractor Business or Consultant’s Name:** |  |
| **Contact Person:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **E-Mail:** |  |
| **Subcontractor/consultant organizational capacity and qualifications** |
|  |

|  |
| --- |
| **Subcontractor/Consultant** |
| **Subcontractor Business or Consultant’s Name:** |  |
| **Contact Person:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **E-Mail:** |  |
| **Subcontractor/consultant organizational capacity and qualifications** |
|  |

**APPENDIX F**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

## LITIGATION FORM

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

|  |
| --- |
| **Provide a list of all current litigation in which the Bidder is named and a list of all closed cases that have closed within the past five (5) years in which the Bidder paid the claimant either as part of a settlement or by decree. For each, list the entity bringing suit, the complaint, the accusation, amount, and outcome. If no litigation has occurred, write “none.”** |

|  |
| --- |
|  |
| **Case #** |  |
| **Entity Filing Suit:** |  |
| **Complaint/Accusation:** |  |
| **Amount:** |  |
| **Outcome** |  |
|  |
| **Case #** |  |
| **Entity Filing Suit:** |  |
| **Complaint/Accusation:** |  |
| **Amount:** |  |
| **Outcome** |  |
|  |
| **Case #** |  |
| **Entity Filing Suit:** |  |
| **Complaint/Accusation:** |  |
| **Amount:** |  |
| **Outcome** |  |

**APPENDIX G**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

## RESPONSE TO PROPOSED SERVICES FORM

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

**The response to proposed services form may be obtained in a Word (.docx) format by double clicking on the document icon below.**

****

**APPENDIX H**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

**COST PROPOSAL FORM**

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |
| **Proposed Cost:** | **$**  |

**Instructions:** The Bidder must complete and submit a budget form providing a detailed breakdown of expenses in performing the services for the entire period of performance as described in this RFP and in the Bidder’s proposal. The total expenses amount is the proposed cost to be used in the scoring cost formula for evaluation purposes.

**The Budget Form may be obtained in an Excel (.xlsx) format by double clicking on the document icon below.**

****

**APPENDIX I**

**State of Maine**

**Department of Health and Human Services**

*Maine Center for Disease Control and Prevention*

**SUBMITTED QUESTIONS FORM**

**RFP# 202402021**

**Statewide Community Led Needs Assessments**

This form should be used by Bidders when submitting written questions to the RFP Coordinator as defined in Part III of the RFP.

If a question is not related to any section of the RFP, enter “N/A” under the RFP Section & Page Number. Add additional rows as necessary. Submit this document in WORD format, not PDF.

|  |  |
| --- | --- |
| **Organization Name:** |  |

|  |  |
| --- | --- |
| **RFP Section & Page Number** | **Question** |
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1. For more information about visit the [Community-Based Participatory Research](https://www.ahrq.gov/research/findings/factsheets/minority/cbprbrief/index.html#intro) webpage. [↑](#footnote-ref-2)