Overdose Response Strategy Health Equity Consultant

Request for Quotes (RFQ)

Date Issued: June 27, 2022
Date Response Due: July 15, 2022

CDC FOUNDATION CONTACT

Audi Lahijani
Emergency Response Officer
alahijani@cdcfoundation.org
BACKGROUND

The Overdose Response Strategy (ORS) is a unique public health/public safety collaboration between the Centers for Disease Control and Prevention (CDC) and the High Intensity Drug Trafficking Areas (HIDTA) program, created to help local communities reduce drug overdoses and save lives by sharing timely data, pertinent intelligence, and innovative strategies. The ORS program is staffed nationwide, including all 50 states, Puerto Rico, and U.S. Virgin Islands.

The program is implemented by teams made up of Public Health Analysts (PHA) and Drug Intelligence Officers (DIO) who work together on drug overdose issues within and across sectors, states, and territories. PHA positions are funded by the CDC through the CDC Foundation, and DIO positions are funded by the Office of National Drug Control Policy (ONDCP) through the HIDTA program. These teams serve as the foundation of the ORS, creating opportunities across public health and public safety sectors to share data, insights and trends related to drug overdose in communities across the nation. They simultaneously promote public health and public safety efforts, which allows for a wide range of drug overdose issues to be addressed more effectively and efficiently. By doing so, the ORS is growing the body of evidence related to early warning signs and prevention strategies. With the information shared, and programs inspired by the ORS, the program is helping communities develop solutions to reduce overdoses and encouraging individuals to make healthier, safer choices.

PURPOSE

Health inequities can contribute to increased overdose deaths and other negative health outcomes, especially among groups that have been marginalized. Groups of people who may be disproportionately affected by the drug overdose crisis include, but are not limited to those:

- From racial and ethnic minority groups
- From sexual and gender minority groups
- Experiencing disabilities, homelessness, mental health conditions, or incarceration,
- Experiencing limited educational attainment, limited access to healthcare, limited health literacy, and/or limited access to substance use treatment
- For non-English speaking populations, tribal populations, or rural communities and other geographically underserved areas
- Disadvantaged by reduce economic stability

Social determinants of health (SDOH), or the conditions in which people live, work, learn, and play, can also contribute to health inequities and result in intergenerational risk for substance use and overdose. Evidence-based tools and resources and the implementation of targeted prevention strategies that address key drivers of health inequities can help curb the overdose epidemic. To this end, the Overdose Response Strategy (ORS) program is seeking a consultant with subject matter expertise in health equity to provide technical assistance related to promoting health equity, addressing social determinants of health, and decreasing health disparities to increase the ORS’ capacity to advance health equity in local overdose prevention and response efforts.

Through the expertise and technical assistance provided by the Health Equity Consultant, the ORS program will be better equipped to:

- Identify and understand social determinants of health and the root causes of health inequities within multiple frameworks (e.g., race, gender, sexual orientation, socioeconomic status, etc.) in the drug overdose epidemic.
- ORS staff to provide their partners with technical assistance and guidance, tools, and resources to promote and identify approaches to health equity in their state and local overdose prevention and response efforts.
- Support meaningful inclusion of disproportionately affected populations in the development, implementation and evaluation of overdose response strategies, policies, and harm reduction services.
- Foster long-standing relationships with organizations that serve and work with communities affected by health inequities to understand and connect to populations of greatest need more effectively.
SERVICES REQUIRED

By engaging in this work, the ORS program aims to be more aligned with the National Drug Policy Priorities, create a culture of ongoing learning and professional growth about health equity and support local solutions to reduce overdoses and save lives through a health equity lens. This opportunity focuses on providing health equity expertise to the ORS network as a whole, specifically ORS PHA/DIOs, as opposed to consulting with each individual jurisdiction.

The contract is projected to begin August 8, 2022, and end December 2, 2022, with the level of effort being 60 hours per month.

Scope of Work

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<th>Services to be Provided</th>
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<td>• Conduct a needs assessment to identify the ORS technical assistance needs related to health equity, social determinants of health, and decreasing health disparities.</td>
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<td>• Provide recommendations to address program gaps and needs.</td>
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<td>• Support the design and implementation of professional development opportunities for ORS staff (training/webinar series, train-the-trainer modules, health equity style guide, office hours, etc.)</td>
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<td>• Meet bi-weekly with the CDC Foundation to discuss progress on project deliverables and submit monthly document of activities to CDC Foundation</td>
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REQUIRED SKILLS AND QUALIFICATIONS

- Master’s degree in public health, social/human services, social work, public policy, or other related discipline with a minimum of 5 years’ experience.
- Subject matter expertise in health equity and social determinants of health in relation to overdose crisis.
- Demonstrated experience working with public safety on health equity, including law enforcement.
- Previous experience working across multiple sectors to support the development and implementation of trainings and other strategies that advance health equity.
- Experience with conducting outreach and building meaningful connections to underrepresented and underserved communities.
- Work examples completed in the past
- Ability to express ideas and convey information quickly and effectively in a verbal and written manner.
- Ability to think creatively, analyze problems, and find innovative approaches to problem resolution.
- Ability to provide services virtually and in-person, as needed.

SUBMISSION REQUIREMENTS

Please email any proposal and/or project related questions to Audi Lahijani (alahijani@cdcfoundation.org) by July 8, 2022, 4PM ET.

Please submit a proposal packet including an expression of interest letter, statement of qualification, Curriculum Vitae including specific proof of experience such as examples of work you have developed, and financial quote to Audi Lahijani (alahijani@cdcfoundation.org) by July 15, 2022, 4pm ET be considered for this opportunity.

EVALUATION AND SELECTION CRITERIA

Submissions will be evaluated on vendors’ qualifications, expertise, and reasonableness of cost. The following outlines the criteria that reviewers will use to guide their evaluation of each application.

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<th>Domain</th>
<th>Application Selection Criteria</th>
<th>Weight</th>
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<tr>
<td>Capability Statement</td>
<td>Capability statement that demonstrates your ability to deliver services as requested in this RFQ</td>
<td>25%</td>
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<tr>
<td>Experience</td>
<td>Organizational reference to all related experience including CVs for all project staff which reflect tenure and/or education</td>
<td>25%</td>
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<td>Cost Proposal</td>
<td>Reasonableness of proposed rate</td>
<td>50%</td>
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Applicants who are selected to advance to the next stage of consideration will be contacted for a Zoom interview.

**PRE-AWARD RISK ASSESSMENT**
The CDC Foundation reserves the right to conduct financial and due diligence reviews. As a public entity, the CDC Foundation has a responsibility to the public to ensure that the organizations that receive grant funds are financially stable and to evaluate each applicant’s risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purposes of determining the appropriate method of monitoring.

**MAXIMUM PAYABLE AMOUNT (MPA)**
CDC Foundation will pay the contractor a fee not to exceed a Maximum Payable Amount (MPA) or ceiling price. Financial quotes for all submissions should not exceed the MPA of **$48,000 USD**. The MPA will be based on the fee proposed and the award will be negotiated as part of the resulting contract. CDC Foundation request bidders include a proposed fee structure.

**FUNDING SOURCE**
The agreement resulting from this RFQ will be supported by Federal funding under the “Capacity Building for Public Health Analysts in the Overdose Response Strategy” project via Cooperative Agreement Number 6 NU38OT000288-02-01 from the Centers for Disease Control and Prevention. The CDC Foundation anticipates that the award(s) resulting from this solicitation will meet the criteria of “Contractor” as defined by 2 CFR 200.331; a final determination will be made at the time of award.