



Request for Proposals Supplement

Sustainability Planning Consultant – Overdose Response Strategy

Date Issued: November 4, 2024

This Supplement revises the Request for Proposals (RFP) for Sustainability Planning – Overdose Response Strategy issued on 10/17/2024 and addresses questions submitted during the inquiry period from 10/17/24 – 10/31/24.

Failure to comply with any amended requirements and instructions included in this Supplement may result in a proposal being deemed non-responsive and ineligible for consideration for funding.

Please note that only communication received in writing from the RFP Contact on behalf of the CDC Foundation shall serve to supplement, amend, or alter in any way, this RFP released by the CDC Foundation. Any other communication is not binding and should not be relied upon by any party in interpreting or responding to this RFP.

Questions and Answers

Application Package

Q1: For the project personnel, is the review team expecting to see actual resumes or is it acceptable to indicate suggested LCATs and estimates hours on this project, if it is planned as a contingent upon award hire?

A1: We request to see resumes of the project team who will be leading this work from your organization. If the entire project team is to be determined, the project lead(s) resume will suffice. In the resume, we hope to see professional experience and education that reflects the knowledge and abilities to successfully carry out the scope of work.

Q2: Pg. 8 of the RFP requests that examples of previous work be included in the Proposal Narrative. Can you clarify if you would like these examples described in the narrative, or provided as attachments?

A2: Please include the actual work example embedded within the proposal narrative (PDF), rather than a separate attachment.

Q3: Section 4.1 (Eligibility) on pg. 5 of the RFP states “Vendor status verification: U.S. System Award Management (SAM), or equivalent, search results for overall organization and individuals designated to this proposal” is required. Can you clarify - is our organization’s active SAM registration sufficient to meet this criteria?

A3: An organization’s active SAM registration is sufficient, and you will need to provide the SAM unique entity ID (UEI).

Q4: Are letters of support allowed?

A4: Yes, although not required. Letters of support will not be included in the scoring criteria.

Budget

Q5: Please confirm that the CDC Foundation needs to see a total dollar value for the entire work scope, with budget assumptions? If not, and an itemized budget by task is required, please confirm that Foundation may be amenable to a Time and Materials type contract?

A5: We request you share the total proposed amount for the entire scope of work, we suggest broken down by milestones or deliverables. However, bidders may propose another payment structure, such as time and materials as well.

Q6: The budgeting sheet shows a red highlighted cell; however it is not changing color (as indicated in the instructions) based on dollar amount regardless of the total contract value calculated. Is there an expectation of the proposed budget to only be under the 150K amount or slightly higher estimates will be acceptable as submissions?

A6: The field is formatted to remain red until the budget total matches the Maximum Payable Amount (MPA) entered. You may propose a fee that exceeds the anticipated MPA if it is required to deliver the proposed solution for the scope of work. CDC Foundation will consider proposals meeting the proposal requirements from eligible bidders with a budget that exceeds the anticipated MPA. Bidders are requested to propose the best and most cost-effective solution to meet the RFP's requirements, while ensuring a high level of service.

Q7: Would exceeding the maximum payable amount affect the point score of the Budget and Budget Narrative section?

A7: Please reference Section 5.4, we will evaluate the budget and budget narrative section based on 1) the reasonableness of proposed rate and total amount and 2) the budget should be detailed and justifiable.

Q8: Is there a place in the submission to denote that both FFP/T&M contracting structures would be acceptable to the response submitter?

A8: Please include in the budget narrative.

Q9: In the budget template, is it acceptable to use fully loaded hourly rates (e.g., including fringe and indirect) in the 01B Personnel: Hourly table?

A9: Please reference the “instructions” tab within the Excel template.

Q10: We noticed that the Budget Excel template is currently locked. Can you please provide a version that is downloadable for us to use in our proposal?

A10: The Budget Excel Template is “view only” to avoid any changes directly to the template. Please click on **File > Save As> Download a Copy**.

Q11: Given that CDC foundation is expecting a FFP contract, would they be amenable to equal monthly payment structure adding up to the total firm fixed price value?

A11: The fixed-firm price structure is based on the achievement of deliverables and milestones.

Q12: CDC Foundation has requested monthly invoices. Please confirm that the CDC Foundation does require a deliverable-based payment schedule.

A12: The details of payment structure will be part of negotiations and fleshed out during the contract writing period. We highly encourage a deliverable-based payment schedule.

Q13: Are there any specific expectations regarding budget allocation for partner engagement or community outreach?

A13: No there are not.

Contextual Information

Q14: What is the relationship between the evaluation plan requested by this RFP and the evaluation plan previously described by the following article: Wolff, J., Gitukui, S., O'Brien, M., Mital, S., & Noonan, R. K. (2022). The Overdose Response Strategy: Reducing drug overdose deaths through strategic partnership between public health and public safety. *Journal of Public Health Management and Practice*, 28(Suppl 6), S359–S366.

<https://doi.org/10.1097/PHH.0000000000001580>

A14: This publication is based on the 2021 strategic and evaluation plan, inclusive of the 2021 logic model. For the RFP, we are requesting a new updated strategic and evaluation plan to better reflect the evolution of the overdose epidemic and the evolution of the Overdose

Response Strategy. To kick off these efforts, we have recently updated the ORS logic model but are seeking a consultant to strategize a sustainable strategic plan and evaluation framework that can effectively measure the ORS' impact.

Q15: Is a copy of the 2021 strategic plan and evaluation plan available for reference? Is the 2021 logic model available for reference?

A15: We will provide the 2021 strategic plan and evaluation plan to the consultant selected for this opportunity. Reviewing and understanding these materials will be part of the orientation phase of the contract. The 2021 logic model produced by a prior consultant is available for reference on pg. 32 of the [2021 ORS Annual Report](#) and referenced in this [journal article](#). Please note that the new updated logic model has major changes to the content and format of the logic model to better reflect our program, and will be provided to the selected consultant.

Q16: On p. 3 of the RFP, CDC Foundation also references that it recently updated the logic model for the initiative as part of its initial evaluation and program monitoring work. Is CDCF able to share its latest logic model for the ORS?

A16: The logic model is currently in the final stages of review, and we will share it with the consultant selected for this opportunity as part of the orientation phase. The updated logic model will serve as a launching point for the scope of work included in this contract.

Q17: Was an implementation roadmap included in the 2021 strategic plan?

A17: No, an implementation roadmap was not included in the 2021 strategic plan.

Q18: In the RFP it mentions you refined your program evaluation questions. Are those available to share so we can customize our proposed evaluation plan to fit the questions and any prioritized methods and data sources?

A18: The updated ORS key program evaluation questions include:

1. How does the ORS program build and strengthen public health/public safety collaboration and communication within and across sectors and jurisdictions?
2. To what extent is the ORS program carrying out its goals and strategies?
 - o In what ways do these activities support health equity?
3. To what extent and in what ways does the ORS program tap into the strengths and assets of public health and public safety partners?

4. To what extent and in what ways are the public health and public safety sectors making different decisions about policies or programs, and the use of resources because of and as they relate to the goals of the ORS program?
5. To what extent does the ORS contribute to reducing non-fatal and fatal overdoses and saving lives through public health-public safety partnership?

Q19: On p. 3 of the RFP, the CDCF references that the ORS completed a strategic planning process in 2021. Is CDCF able to share any of the products/plan from this 2021 effort? Additionally, can you share any existing indicators ORS is using and if they have any reports / data showing current progress / achievement of those?

A19: Please read more about our evaluation efforts, including data showing current progress, by viewing the annual evaluation survey reports:

- [2021 Annual Evaluation Survey Report \(on pgs. 32-33\)](#)
- [2022 Annual Evaluation Survey Report](#)
- [2023 Annual Evaluation Survey Report](#)

To generally read more about the ORS progress and reports developed, please read the following publications:

- [2021 Annual Report](#)
- [2022 Annual Report](#)
- [2023 Annual Report](#)

Q20: Is there a more detailed version than the “program goals” and “program strategies” listed at <https://orsprogram.org/program-overview/>?

A20: This webpage accurately depicts the menu of program strategies we offer in the form of our goals and strategies.

Q21: What types of information do ORS teams report?

A21: We have an internal web-based reporting system designed to collect and report data on the activities conducted by ORS Teams on a quarterly basis. ORS Teams enter their projects into the system and report on project activities each quarter. Projects are tagged to ORS goals and strategies, focus areas and presidential administration’s priorities. Within this reporting system, ORS Teams also share success stories.

Q22: Has the CDC Foundation worked with an external partner on prior/current evaluation efforts (e.g., the 2021 strategic plan, initial evaluation/program monitoring plan, updating logic model and evaluation questions)? If yes, can you share who you have worked with and if they are eligible to apply for this effort? 1. Is there an existing contract for strategic planning and/or evaluation, and if so, who is the incumbent contractor?

A22: A prior consultant conducted this work in 2021 and will be eligible to apply for this effort. However, we encourage all qualified applicants to apply since our program has greatly evolved and the scope of work will not be a continuation of the previous plan, but rather an entirely updated strategic plan and evaluation with a strong focus on sustainability and measuring program impact.

Q23: Do you have a previous strategic plan document that provides the basis for this webpage? - <https://www.cdcfoundation.org/strategies>. If so, can we get a copy?

A23: This webpage showcases the strategies for the CDC Foundation. To learn more about the Overdose Response Strategy and our goals/strategies, please visit www.orsprogram.org.

Scope of Work

Q24: Our typical process is very participatory in nature. Are you looking for a consultant to facilitate a process to guide a group/s of individuals through data review, prioritization, and the design of a relevant plan?

A24: We welcome a participatory approach. Our hope is a consultant can learn about the ORS' history/future and engage with key groups to gather feedback to inform a relevant sustainability plan.

Q25: What are the expectations for partner engagement during the strategic planning process? Is there an existing Committee or Workgroup we would engage throughout the project?

A25: The consultant will work very closely with the group of individuals assigned to support this contract. We will engage other key groups during the listening sessions.

Q26: Can you share more about your hopes for sustainability—what aspects of sustainability (e.g. funding, integration into existing systems, capacity, etc.).

A26: We are seeking a consultant to create a sustainability plan that includes a strategic plan and evaluation plan. Our intention is for the consultant to provide a phased roadmap for recommendations over years 1-4, as well as guidance for long-term strategic planning beyond year 4. The plans should account for timely implementation and necessary adjustments to measure and sustain program impact.

Q27: On pg. 3 of the RFP it says "Orient to overdose topic area inclusive of evidence-based strategies and best practices that are well-received by both public health and public safety sectors." Will all evidence-based strategies and innovative strategies on overdose prevention and intervention be included? If not, how will it be determined which practices to include?

A27: We will provide the latest guidance documents from CDC and ONDCP on evidence-based strategies and innovative strategies they each endorse. We will also provide the ORS' evidence-based and innovative strategies we currently use within our program. However, we anticipate updates to these strategies based on the latest literature. We expect the consultant to gather feedback from listening sessions and consider all evidence-based and innovative strategies that operate within the scope of public health and public safety collaboration and leverage the strengths of both sectors.

Q28: Are the listening sessions planned to be virtual or in person?

A28: Listening sessions will be hosted virtually.

Q29: Is the awardee expected to cover logistics (recruitment, hosting, etc.) for the listening sessions? If so, will there be support for invitation lists, etc.?

A29: The listening sessions will be virtual. We will lead recruitment efforts but expect the consultant to virtually host and facilitate the listening sessions.

Q30: On p.3 of the RFP it says: Host listening sessions or facilitate other feedback methods with key groups (approximately seven groups) to gather information needed to complete the project. Is the contractor expected to propose the key groups that would participate in the listening sessions, or will that be determined by staff? Does CDCF have specific groups in mind and if so, can they share who they have identified? Could you share how many people you estimate would attend each listening session, and how you imagine those groups will be defined (i.e. By region? By type of professionals?)

A30: We will provide the identified groups and email addresses of pre-selected participants. We imagine these key groups to be defined by type of professionals and will work with the consultant to determine the appropriate sample size for each group. Key groups will include personnel from leadership, management, national team, ORS teams, ORS partners, and people with lived/living experience.

Q31: With reference to the evaluation plan, is it the Foundation's intention for program staff to conduct the evaluation, and if so, what level of experience does the staff have in conducting evaluations?

A31: The ORS has a team of three individuals who specialize in evaluation and will oversee the implementation of the evaluation plan and conduct the evaluation. The three individuals are a part of the group who will work closely with the consultant during the duration of the contract.

Q32: On p.4 of the RFP it mentions developing skills-building and planning for the National ORS Team. How many individuals are anticipated to participate in the training component to the ORS National Team? Will these trainings occur virtually, in-person, or through a hybrid approach? Can you offer any insight into the training the team prefers or requires - recorded modules, virtual instructor led, in-person, train-the-trainer, etc.?

A32: We are open to various modalities of training, depending on the content and skills needed. We are a virtual team, and the training will be held virtually. We anticipate the training to be an overview of the sustainability plan and skills needed to implement the plan. Depending on the audience and training format, the consultant can anticipate approximately 6-20 participants.

Q33: Is there a desire for any in-person meeting during the course of this project, if so, explain.

A33: We are a virtual team, and all work will be conducted virtually.