

REQUEST FOR APPLICATIONS

RFA Number 0511140853

**New York State Department of Health
Division of Epidemiology/Center for Community
Health
Bureau of STD Control**

STD DISEASE INTERVENTION

Website Address: <http://www.nyhealth.gov>

Questions Due: July 11, 2006

Questions and Answers Posted on Web: July 25, 2006

Applications Due: August 15, 2006

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New York State Department of
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Corning Tower, Room 1168
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I. INTRODUCTION

A. *Description of Division/Bureau*

This project is funded by New York State's Bureau of Sexually Transmitted Disease (STD) Control grant from the Centers for Disease Control and Prevention (CDC). The specifications of this project are, in part, based upon CDC recommendations and guidelines for program operations. During the contract period, changes in CDC recommendations and/or guidelines may result in modifications to the project and will be incorporated in the successful bidder's work plan.

The mission of the Bureau of Sexually Transmitted Disease (STD) Control is to prevent and control the spread of sexually transmitted diseases among residents of New York State exclusive of New York City through oversight of state-mandated STD services provided by county health departments. The Bureau's major program components include: surveillance, field epidemiology, which includes: case interviews, partner elicitation/notification, counseling and referral services for STDs and HIV, training and education, screening services, research and evaluation. The field-based structure of the Bureau provides the flexibility which allows for immediate response to morbidity increases or outbreaks, wherever and whenever they occur.

B. *Background/Intent*

Sexually transmitted diseases (STDs) result in considerable economic cost and health consequences in this country. For syphilis, health consequences in the infected individual can include irreversible damage to the central nervous system (manifested as dementia, blindness or paralysis), as well as damage to other organs and death. The fetus of an infected mother may be stillborn, or born with mental retardation, blindness or severe musculoskeletal deformities.

Sexually transmitted diseases (STDs) are the most commonly reported communicable infections in New York State. Yearly, case numbers of gonorrhea and syphilis total more than forty-one percent of all reported infections. Control of STD infections presents a challenge quite different from other infections because of the stigma attached to a disease linked to sexuality and reproduction. Furthermore, the likelihood of control by vaccine has thus far proven elusive for the most prevalent viral agents.

The focus of the Bureau of STD Control is the surveillance, case management, and partner notification of STDs, specifically syphilis and gonorrhea. Decreasing trends in reported STD morbidity corroborate that these traditional approaches to STD prevention and control have been effective in New York State. Conversely, research shows that scaling back of STD control efforts lead to a dramatic increase in morbidity.

C. *Intended Use of Funds*

The Bureau of STD Control receives funding through the Comprehensive STD Prevention Systems (CSPS) Grant to prevent and control sexually transmitted diseases (STDs) among residents of New York State exclusive of New York City. Our goal is to reduce morbidity and mortality from STDs. This is accomplished through field epidemiology. Specifically, this includes case interviews, partner elicitation/notification, counseling, and referral services. The use of these funds is specifically limited to the support of the STD Field Investigator/s. These funds cannot be utilized to support supervisory positions or employees that function as such.

D. *Availability of Funds*

The Bureau of STD Control invites all eligible counties in New York State, excluding New York City, to compete for these funds. The funding for this RFA will be provided through the Comprehensive STD Prevention Systems Grant. Continuation of this funding beyond the initial contract will be subject to renewal of grant funds.

The anticipated project period for the funds will be for five years (10/1/06-9/30/11). Applicants are requested to submit a budget for the anticipated initial one-year contract period, which runs from October 1, 2006 through September 30, 2007. In addition to the anticipated initial contract period there are expected to be four, one-year contract renewals. The anticipated renewals will be approved provided the services are required, and there is an appropriation of funds.

There is a total of approximately \$574,000 in available funding that will be awarded to the four highest four scoring contractors. The applicant can apply for the salary and fringe benefits for up to two field workers based on their demonstration of need. The Bureau of STD Control will accept a documented fringe benefits rate of up to 45%.

In addition, the applicant can apply for up to \$500 in travel expenses per FTE. The four highest scoring awardees will receive the amount requested in their budget.

If, however, an applicant budgets for an item other than what is specified in the RFA, it will be considered unallowable and removed from the budget. Negotiations between the awardees and the Department of Health will be limited on how to spend the funds based on the application submitted.

After the awards are made, any unused funds will be allocated to one of the four highest contractors, based on staffing patterns and 2004 calendar year morbidity for early syphilis, gonorrhea, and *Chlamydia*. (This information will be compiled by the Bureau of STD Control Surveillance and Data Management Unit.). There is also the possibility of supplemental funding to support sentinel *Chlamydia* surveillance.

II. Who May Apply

A. *Minimum Eligibility Requirements*

All local health units in New York State, excluding New York City, that reported either > 25 cases of early syphilis or > 400 cases of gonorrhea or >1000 cases of *Chlamydia* for calendar year 2004, will be eligible to apply.

Counties applying for this funding should demonstrate the capacity to provide and support STD disease intervention services. This includes: field epidemiology, case interviews, partner elicitation/notification, counseling, and referral services for STDs. In addition, the county should provide adequate space for the employee and appropriate equipment including a computer.

III. PROJECT NARRATIVE/ WORK PLAN OUTCOMES

A. *Expectations of Project*

Demonstration of Need

The following information will be utilized to rank demonstration of need in your county:

1. Disease morbidity in your jurisdiction for calendar year 2004 for early syphilis, gonorrhea, and *Chlamydia*. (This information will be compiled by the Bureau of STD Control Surveillance and Data Management Unit).
2. The number of case investigations each for syphilis, gonorrhea and *Chlamydia* for calendar year 2004

3. The current number of staff and percentage of their time spent to support field epidemiology for syphilis, gonorrhea, and *Chlamydia*.

Partner Services

The provision of partner services is a key strategy for the prevention of STD/HIV transmission in New York State.

Explain your system for designating STD disease intervention as a priority, based on disease, demographics and any other pertinent characteristics. In order to receive these funds, it will be necessary for the applicant to adhere to the New York State Priority Grid (See Attachment 4) unless a reasonable case can be made that supports locally defined criteria.

Please respond to the following questions:

1. Based on your system of prioritization, what proportion of early syphilis, gonorrhea and *Chlamydia* cases were interviewed in 2004?
2. What is the disease intervention index for the cases interviewed for each disease? (The disease intervention index is the number of partners brought to treatment plus partners preventatively treated divided by the number interviewed) Calculate the indices by disease.
3. What was the proportion of contacts located? What proportion of those contacts in need of preventive therapy received the correct treatment?
4. What proportion of infected individuals in need of therapy were located and successfully referred for treatment?

Please provide a brief description of how your program will provide the following:

- therapy monitoring for syphilis.
- therapy monitoring for gonorrhea and *Chlamydia*

In order to receive these funds, the recipient will be expected to adhere to the NYS BSTDC “Field Interviewer and Investigator Tasks & Standards.” (See Attachment 2).

Quality Assurance

Please describe your system for monitoring work progress of case assignments and worker productivity.

Describe your system for evaluating skill assessment and development of staff (including, but not limited to case reviews, field audits, pouch reviews, and interview audits)

Describe your procedures in place for forms management including how forms are initiated, assigned, monitored, reviewed, and submitted. Include processes in place that will ensure timeliness, completeness, and accuracy.

Describe the degree to which you collaborate with other appropriate staff to pursue program goals at the county, regional and State level.

Training and Professional Development

Provide copies of training and orientation protocol(s) used to ensure that staff are appropriately and adequately trained to provide STD intervention activities. In addition, please complete Attachment 5: “STD Disease Intervention Services Training and Professional Development Staffing Plan.”

Please describe your system for:

- Training, orientation, and development of new employees.
- Evaluating skill assessment and development of staff (including, but not limited to case reviews, field audits, pouch reviews, and interview audits)

Disease Intervention Specialists (DIS) will complete a training and orientation plan that includes:

- successful completion of the *Employee Development Guide* (EDG) and practical experiences that include laboratory visits and observations of interviews and field visits (6-8-weeks on average);
- attending the two-week *Introduction to Sexually Transmitted Disease Intervention* (ISTDI) training course (as soon as possible after completing the EDG); and
- attending the four-day *Advanced Sexually Transmitted Disease Intervention* (ASTDI) training course within 1 year (federal guidelines recommend six months) of attending the ISTDI training course.

There are additional training standards for DIS and other staff who perform HIV partner notification roles. Since that training is supported under other funding it is not specified here.

First-line STD supervisory staff are expected to attend the standardized CDC four-day *STD Intervention for Supervisors* (STDIS) and the four-day *Principles of STD Supervision* training courses (see Attachment 6). Funding (including travel costs) for the above training is a county responsibility.

These courses are provided by the Eastern quadrant STD/HIV Partner Services Prevention Training Center; therefore out-of-state travel may be required in order to receive timely training.

Describe a plan to assure that county first-line supervisors and field staff will attend annual Statewide Bureau of STD Control staff meetings. First line supervisors are also required to attend quarterly supervisors meetings.

Budget

Your organization should submit a line-item budget and budget justification for the anticipated period October 1, 2006 through September 30, 2007. The budget and justification should reflect year one of operation. The applicant can apply for the salary and fringe benefits for up to two field workers based on their demonstration of need. The Bureau of STD Control will accept a documented fringe benefits rate of up to 45%. In addition, the applicant can apply for up to \$500 in travel expenses per FTE.

All requested costs should be cost effective, and consistent with program objectives and activities. In addition, all budgeted costs should be consistent with the proposed scope of work. Administrative/indirect costs will be capped at 10% of the total award. If an applicant budgets for an item other than what is specified in the RFA, it will be considered unallowable and will be removed from the budget.

Negotiations between the awardees and the Department of Health will be limited on how to spend the funds based on the application submitted.

Please utilize Attachment 7 (Budget Summary Form) to reflect your county's funding that supports STD disease intervention services.

This includes both the funding that you are requesting under this RFA, as well as any in-kind contribution from your county. In addition, please fill in Attachment 8 (Personal Services Budget Form), and Attachment 9 (Budget Justification Form).

This funding may only be used to expand existing activities or create new activities pursuant to this RFA. These funds may not be used to supplant funds for currently existing staff activities.

B. Problems/Issues to be Solved Through this RFA

The major issue to be solved through this RFA is the identification and reduction of sexually transmitted diseases amongst high-risk populations through patient interviewing, counseling and education, partner referral/services and field activities for partner notification.

C. Important Notes for Applicants

Contracts resulting from this RFA will be awarded for a five-year cycle. The anticipated initial contract period will be for the one-year period starting October 1, 2006 through September 30, 2007 with four, one-year contract extensions.

Applicants should include a current organizational chart, reflecting all individual associated with STD disease intervention services.

Applicants should adhere to established State and Federal tasks and standards for field operations (interviews, field investigations).

The Bureau of STD control will conduct on-site monitoring visits on a regular basis.

It is our goal to have an expected contract start date of October 1, 2006.

An original and six (6) copies of the application package should be **received** by 5:00 p.m., August 15, 2006.

The application should be submitted to:

Robert J. Reed, Assistant Bureau Director
New York State Department of Health
Bureau of STD Control
Corning Tower, Room 1168
Empire State Plaza
Albany, NY, 12237

All required forms for the RFA packet should be completed, including all bid items. Staff from the New York State Department of Health will conduct a review of proposals.

All applications should include the specific information requested in the following sections: demonstration of need, partner services, quality assurance, training and professional development, and a completed budget and budget narrative.

All applications should conform to a specific format. (Please see page 20). Up to five points will be deducted from applications which do not follow the prescribed format.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the NYS Department of Health/Division of Epidemiology/ Bureau of STD Control. The Department is responsible for the requirements specified herein and for the evaluation of all applications.

B. Question and Answer Phase

To the degree possible, each inquiry should cite the RFA section and paragraph to which it refers. Written questions will be accepted until July 11, 2006.

All substantive questions should be submitted in writing to:

Mr. Robert J. Reed, Assistant Bureau Director
New York State Department of Health
Bureau of STD Control
Empire State Plaza
Corning Tower, Room 1168
Albany, New York 12237

In addition, questions of a technical nature can be addressed in writing or via telephone by calling: Mr. Robert J. Reed at (518) 474-3598. Questions are of a technical nature if they are limited to how to prepare your application (e.g., formatting) rather than relating to the substance of the application.

Prospective applicants should note that all clarifications and exceptions, including those relating to terms and conditions of the contract, are to be raised prior to the submission of an application.

The questions and answers, as well as any updates and/or modifications, will be posted on the Department of Health's website at the address and date listed on the cover page of this RFA.

C. Applicant Conference

There will not be an Applicant Conference held for this project.

D. How to file an application

Applications must be **received** at the address listed below by 5:00 pm on August 15, 2006. **Late applications will not be accepted.**

All applications should be sent to the following address:

Mr. Robert J. Reed, Assistant Bureau Director
New York State Department of Health
Bureau of STD Control,
Empire State Plaza
Corning Tower, Room 1168
Albany, New York, 12237.

Applicants should submit one original, signed application and 6 copies. Application packages should be clearly labeled with the name and number of the RFA as listed on the cover of this RFA document. No applications will be accepted via Fax or email.

It is the applicant's responsibility to see that applications are delivered to Room 1168 prior to the date and time specified above. Late applications due to delay by the carrier or not received in the department's mailroom in time for transmission to room 1168 will not be considered.

E. THE DEPARTMENT OF HEALTH RESERVES THE RIGHT TO

1. Reject any or all applications received in response to this RFA.
2. Award more than one contract resulting from this RFA.
3. Waive or modify minor irregularities in applications received after prior notification to the applicant.
4. Adjust or correct cost or cost figures with the concurrence of applicant if errors exist and can be documented to the satisfaction of DOH and the State Comptroller.

5. Negotiate with applicants responding to this RFA within the requirements to serve the best interests of the State.
6. Modify the detail specifications should no applications be received that meet all these requirements.
7. If the Department of Health is unsuccessful in negotiating a contract with the selected applicant within an acceptable time frame, the Department of Health may begin contract negotiations with the next qualified applicant(s) in order to serve and realize the best interests of the State.
8. The Department of Health reserves the right to award grants based on geographic or regional considerations to serve the best interests of the State.

F. Term of Contract

Any contract resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller. It is expected that contracts resulting from this RFA will have the following time period: October 1, 2006 through September 30, 2007 with the provision of four, one-year, contract renewals. The contract renewals will be approved providing the services are required, and there is an appropriation of funds.

G. Payment Methods and Reporting Required

1. The grant contractor shall submit quarterly invoices and required reports of expenditures to the State's designated payment office:

New York State Department of Health
Bureau of STD Control
Corning Tower, Room 1168,
Empire State Plaza
Albany, NY 12237

Payment of such invoices by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law.

Payment terms will be:

Vouchers will be submitted on a quarterly basis. On each voucher, be sure to specify the contract number, the dates for which the voucher is being submitted and the amount being requested. Vouchers will only be processed when accompanied by a narrative quarterly report. (See Attachment 6)

2. The grant contractor shall submit the following periodic reports:

- Quarterly Narrative Reports
- Final report detailing success in meeting the goals and objectives as outlined in the workplan.

H. General Specifications

1. By signing the “Application Form,” each applicant attests to its express authority to sign on behalf of the applicant.

2. Contractor will possess, at no cost to the State, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses, and permits as may be required within such jurisdiction.

3. Submission of an application indicates the Applicant’s acceptance of all conditions and terms contained in this RFA. If the Applicant does not accept a certain condition or term, this must be clearly noted in a cover letter to the application.

4. An Applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in his employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.

5. Provisions upon Default

- a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from the RFA.
- b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants, or promises of any contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.
- c. If, in the judgment of the Department of Health, the Applicant acts in such a way which is likely to or does impair or prejudice

the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Contractor. In such case the Contractor shall receive equitable compensation services as shall, in the judgment of the State Comptroller, have been satisfactorily performed the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost for incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.

I. Appendices

The following will be incorporated as appendices into any contract(s) resulting from this Request for Application.

APPENDIX A - Standard Clauses for All New York State Contracts

APPENDIX A-1 Agency Specific Clauses

APPENDIX A-2 Program Specific Clauses

APPENDIX B - Budget

APPENDIX C - Payment and Reporting Schedule

APPENDIX D - Workplan

APPENDIX H - Federal Health Insurance Portability and Accountability Act (HIPAA) Business Associate Agreement

APPENDIX E - Unless the CONTRACTOR is a political sub-division of New York State, the CONTRACTOR shall provide proof, completed by the CONTRACTOR'S insurance carrier and/or the Workers' Compensation Board, of coverage for

Workers' Compensation, for which one of the following is incorporated into this contract as **Appendix E-1**:

1. **WC/DB-100**, Affidavit For New York Entities And Any Out-Of-State Entities With No Employees, That New York State Workers' Compensation And/Or Disability Benefits Insurance Coverage Is Not Required; OR

2. **WC/DB -101**, Affidavit That An OUT-OF STATE OR FOREIGN EMPLOYER Working In New York State Does Not Require Specific New York State Workers' Compensation And/Or Disability Benefits Insurance Coverage; OR
3. **C-105.2** -- Certificate of Workers' Compensation Insurance. PLEASE NOTE: The State Insurance Fund provides its own version of this form, the **U-26.3**; OR
4. **SI-12** -- Certificate of Workers' Compensation Self-Insurance, OR **GSI-105.2** -- Certificate of Participation in Workers' Compensation Group Self-Insurance

Disability Benefits coverage, for which one of the following is incorporated into this contract as **Appendix E-2**:

5. **WC/DB-100**, Affidavit For New York Entities And Any Out-Of-State Entities With No Employees, That New York State Workers' Compensation And/Or Disability Benefits Insurance Coverage Is Not Required; OR
6. **WC/DB -101**, Affidavit That An OUT-OF STATE OR FOREIGN EMPLOYER Working In New York State Does Not Require Specific New York State Workers' Compensation And/Or Disability Benefits Insurance Coverage; OR
7. **DB-120.1** -- Certificate of Disability Benefits Insurance OR the **DB-820/829** Certificate/Cancellation of Insurance; OR
8. **DB-155** -- Certificate of Disability Benefits Self-Insurance

NOTE: Do not include the Workers' Compensation and Disability Benefits forms with your application. These documents will be requested as a part of the contracting process should your agency receive an award.

V. Completing the Application

A. Application Content

The criteria for evaluating the application will include:

Demonstration of Need (15 points)

The following information will be utilized to rank demonstration of need in your county:

Disease morbidity in your jurisdiction for calendar year 2004 for early syphilis, gonorrhea, and *Chlamydia*. (This information will be compiled by the Bureau of STD Control Surveillance and Data Management Unit).

The number of case investigations each for syphilis, gonorrhea and *Chlamydia* for calendar year 2004.

The current number of staff and percentage of their time spent to support field epidemiology for syphilis, gonorrhea, and *Chlamydia*.

Partner Services (40 Points)

The provision of partner services is a key strategy for the prevention of STD/HIV transmission in New York State.

Explain your system for designating STD disease intervention as a priority, based on disease, demographics and any other pertinent characteristics. In order to receive these funds, it will be necessary for the applicant to adhere to the New York State Priority Grid (See Attachment 4) unless a reasonable case can be made that supports locally defined criteria.

Please respond to the following questions:

1. Based on your system of prioritization, what proportion of early syphilis, gonorrhea and *Chlamydia* cases were interviewed in 2004?
2. What is the disease intervention index for the cases interviewed for each disease? (The disease intervention index is the number of partners brought to treatment plus partners preventatively treated divided by the number interviewed.)
Calculate the indices by disease.
3. What was the proportion of contacts located? What proportion of those contacts in need of preventive therapy received the correct treatment?
4. What proportion of infected individuals in need of therapy were located were successfully referred for treatment?

Please provide a brief description of how your program will provide the

following:

- therapy monitoring for syphilis.
- therapy monitoring for gonorrhea and *Chlamydia*

In order to receive these funds, the recipient will be expected to adhere to the NYS BSTDC “Field Interviewer and Investigator Tasks & Standards.” (See Attachment 2).

Quality Assurance (15 points)

Please describe your system for monitoring work progress of case assignments and worker productivity.

Describe your system for evaluating skill assessment and development of staff (including, but not limited to case reviews, field audits, pouch reviews, and interview audits).

Describe your procedures in place for forms management including how forms are initiated, assigned, monitored, reviewed, and submitted. Include processes in place that will ensure timeliness, completeness, and accuracy.

Describe the degree to which you collaborate with other appropriate staff to pursue program goals at the county, regional and State level.

Training and Professional Development (10 points)

Provide copies of training and orientation protocol(s) used to ensure that staff are appropriately and adequately trained to provide STD intervention activities. In addition, please complete Attachment 5: “STD Disease Intervention Services Training and Professional Development Staffing Plan.”

Please describe your system for:

- Training, orientation, and development of new employees.
- Evaluating skill assessment and development of staff (including, but not limited to case reviews, field audits, pouch reviews, and interview audits).

Disease Intervention Specialists (DIS) are expected to complete a recommended training and orientation plan that includes:

- successful completion of the *Employee Development Guide* (EDG) and practical experiences that include laboratory visits and observations of interviews and field visits (6- 8weeks on average);

- attending the two-week *Introduction to Sexually Transmitted Disease Intervention* (ISTDI) training course (as soon as possible after completing the EDG); and
- attending the four-day *Advanced Sexually Transmitted Disease Intervention* (ASTDI) training course within 1 year (federal guidelines recommend six months) of attending the ISTDI training course.

There are additional training standards for DIS and other staff who perform HIV partner notification roles. Since that training is supported under other funding it is not specified here.

First-line STD supervisory staff are expected to attend the standardized CDC four-day *STD Intervention for Supervisors* (STDIS) and the four-day *Principles of STD Supervision* training courses (see Attachment 6). Funding (including travel costs) for the above training is a county responsibility.

These courses are provided by the Eastern quadrant STD/HIV Partner Services Prevention Training Center; therefore out-of-state travel may be required in order to receive timely training.

Describe a plan to assure that county first-line supervisors and field staff will attend annual Statewide Bureau of STD Control staff meetings. First line supervisors are also required to attend quarterly supervisors meetings.

Budget (20 points)

Your organization should submit an individual line-item budget and budget justification for the anticipated period October 1, 2006 through September 30, 2007. The budget and justification should reflect year one of operation. The applicant can apply for the salary and fringe benefits for up to two field workers based on their demonstration of need. The Bureau of STD Control will accept a documented fringe benefits rate of up to 45%. In addition, they can apply for up to \$500 in travel expenses per FTE.

All requested costs should be cost effective, and consistent with program objectives.

In addition, all budgeted costs should be consistent with the proposed scope of work. Administrative/indirect costs will be capped at 10% of the total award.

If an applicant budgets for an item other than what is specified in the RFA, it will be considered unallowable and will be removed from the budget. Negotiations between the awardees and the Department of

Health will be limited on how to spend the funds based on the application submitted.

Please utilize Attachment 7 (Budget Summary Form) to reflect your county's funding that supports STD disease intervention services. This includes both the funding that you are requesting under this RFA, as well as any in-kind contribution from your county. In addition, please fill in Attachment 8 (Personal Services Budget Form), and Attachment 9 (Budget Justification Form).

This funding may only be used to expand existing activities or create new activities pursuant to this RFA. These funds may not be used to supplant funds for currently existing staff activities.

B. Application Format

ALL APPLICATIONS SHOULD CONFORM TO THE FORMAT PRESCRIBED BELOW. UP TO 5 POINTS WILL BE DEDUCTED FROM APPLICATIONS WHICH DEVIATE FROM THE PRESCRIBED FORMAT.

Applications should not exceed 20 double spaced typed pages (not including the cover page, budget and attachments.) The application should be written using the Times New Roman 12 point font.

Points for incorrect formatting will be deducted as follows :

Incorrect font size	-1.0
Incorrect font style	-1.0
Application exceeds 20 pages	-2.0
Application is not double spaced	-1.0

The value assigned to each section is an indication of the relative weight that will be given when scoring your application.

1. Demonstration of Need	(3 pages)	(Maximum Score: 15 points)
2. Partner Services	(8 pages)	(Maximum Score: 40 points)
3. Quality Assurance	(3 pages)	(Maximum Score: 15 points)
4. Training and Professional Development	(2 pages)	(Maximum Score: 10 points)
5. Budget	(4 pages)	(Maximum Score: 20 points)

100 Points

C. Review Process

Applications meeting the guidelines set forth above will be reviewed and

evaluated competitively by staff from the NYSDOH Division of Epidemiology, Bureau of STD Control.

The review process will not use regional criteria to award grants. The four highest scoring acceptable applications will be funded.

Following the awarding of grants from this RFA, applicants may request a debriefing from the NYSDOH Division of Epidemiology, Bureau of STD Control. This debriefing will be limited to the strengths and weaknesses of the subject application only.

Any cost related to this RFA is the obligation of the applicant and not the responsibility of the Department of Health. Applications failing to provide all response requirements or failing to follow the prescribed format may be removed from consideration or points may be deducted.

VI. Attachments

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Attachment 2

Tasks & Standards (Field Level)

PUBLIC HEALTH REPRESENTATIVE I / II (HRI)

1. Conducts contact interviews of priority STD patients in a manner which best contributes to interruption of transmission of disease.
 - A. Interviews
 - \geq - 95%
 - 90 – 94%
 - 85 – 89% of cases assigned for interview.
 - B. Interviews
 - \geq - 75%
 - 65 - 74%
 - 55 – 64% of cases within two days of report.
 - C. Maintains a disease intervention index of
 - \geq - 1.50
 - 1.00 - 1.49
 - .80 - .99
 - D. Conducts at least one re-interview of
 - \geq - 75%
 - 65-74%
 - 55-64% of those priority patients originally interviewed.
 - E. Performs interviews pursuant to structure outlined in the Program's Field Manual.
 - F. Exhaustively pursues and documents names, physical descriptions, and locating information of all persons identified in original interviews, re-interviews, cluster interviews as at-risk for disease.
2. Ensures rapid, confidential examination of persons at-risk in order to best prevent disease acquisition/complications/congenital transmission.
 - A. Examines
 - \geq - 95%
 - 85 – 94%
 - 75 – 84% of all persons at-risk for disease.

Attachment 2 (Continued)

- B. Examines
 - \geq - 80%
 - 75 – 79%
 - 70 – 74% of contacts to disease within seven days of initiation.

- C. Ensures prophylactic therapy to
 - \geq - 95%
 - 90 – 95%
 - 80 – 89% of all persons eligible for such therapy.

- D. Dispositions
 - \geq - 90%
 - 85 – 89%
 - 80 – 84% of priority adult and newborn / delivery reactors and “infected, needs treatment investigations within 14 days of initiation.

- 3. Conducts HIV pre- and post-test counseling and partner notification services in a professional and sensitive manner.
 - A. Includes the major elements of pre-, post-test counseling as outlined in the AIDS Institute Counselor Training Participant Manual in all counseling sessions.
 - B. Maintains and updates referral source list for use in all counseling sessions.
 - C. Carries out partner notification services consistent with Department of Health protocols.

- 4. Completes required epidemiologic reports in a professional manner.
 - A. Completes
 - \geq - 90%
 - 85 – 89%
 - 80 – 84% of all syphilis interview records within 24 hours of interview.
 - B. Thoroughly documents investigative efforts on field referral forms.
 - C. Submits reports which are complete, legible, and within deadlines as required.

Attachment 2 (Continued)

5. Establishes / maintains professional relationships which contribute to the spectrum of disease control activity.
 - A. Visits hospitals, physicians' offices laboratories, and other sites periodically to facilitate surveillance and reporting activities.
 - B. Participates in periodic meetings with host agency officials which promote effective communication and contribute to mission of the program.
 - C. Conducts oneself in a professional, diplomatic, and tactful manner in interactions with patients, colleagues, supervisors, and all other individuals who have impact on the program.
 - D. Accepts and carries out other duties as assigned by the supervisor.

Attachment # 3

Tasks and Standards (First Line Supervisor)

PUBLIC HEALTH REPRESENTATIVE II

1. Organizes and directs staff assignments to ensure appropriate and equitable clinic/office coverage's and adequate field time.
 - A. Schedules individuals' assigned coverage and, except in emergency cases, gives employees reasonable notice of such schedules.
 - B. Reviews daily field workload and individuals' field itineraries.
 - C. Adjusts individuals' workloads as necessary to maintain quality productivity.
2. Directs priority interviews and field investigation activities
 - A. Reviews priority laboratory reports, case reports, and/or clinic medical records in pre-investigation/pre-interview conference with assignee.
 - D. Reviews results of all syphilis interviews, immediately when possible, or within 24 hours; frequently reviews gonorrhea and chlamydia interviews with emphasis on problematic cases, such as repeaters or "no contact" interviews.
 - E. Reviews results of problem field investigations immediately or within 24 hours.
 - F. Identifies potential problem field situations through review/identification of repeat failures of patients to maintain verbal contracts, incidents of employee harassment, uncooperative, medical care providers, sites of illicit (therefore dangerous) activities.
 - F. Documents on appropriate forms all salient direction regarding follow-up, re-interviewing, cluster interviewing, and other related activities.
3. Evaluates subordinates' interviewing and investigative techniques.
 - A. Documents indicators of quality in the interview process by a minimum of one formal interview audit per month for each subordinate.
 - B. Documents indicators of quality in the investigation process by a minimum of one formal field audit per month for each subordinate.

Attachment 3 (Continued)

4. Trains/orients employees.
 - A. Arranges appropriate orientation for new employees with the local health unit and the Departments' Regional/Field Office.
 - B. Provides the new employee an initial training base using the module system prepared by the Division of STD/HIV, Centers for Disease Control, and the STD Control Program's 20-Day Orientation Plan.
 - C. Conducts monthly meetings for all subordinate staff to conduct case analyses, address problem situations/issues, review/discuss specific operational processes, and generally develop the individuals' understandings of the epidemiologic successes, shortcomings, and short and long term strategies to address disease control in the jurisdiction.

5. Establishes and maintains effective working relationships with host area officials, agencies, individuals who have an impact on the control program, and staff members.
 - A. Contributes to the improvement of inter-agency relationships.
 - B. Integrates federal and state requirements with local program needs.
 - C. Displays tact, diplomacy, and professionalism in the conduct of all activities.
 - D. Maintains a work environment in which employees are encouraged to perform at the highest level.
 - E. Initiates actions which are non-discriminatory and enhance equal employment opportunity for the staff.

6. Acts as liaison between local area of responsibility (including staff) and higher level management.
 - A. Recognizes and responds appropriately to the need for providing information to and for consultation with higher level management regarding all local matters.
 - B. Governmental and program regulations, guidelines, and protocols are accurately communicated to all staff members.

Attachment 3 (Continued)

- C. Concerns, recommendations, and complaints of field staff are communicated to senior level management with sufficient alacrity to contribute to problem resolution.
 - D. Subordinate staff members demonstrate a working knowledge of federal, state, and local protocols specific to their unit.
7. Maintains effective local reporting systems.
- A. Demonstrates detailed knowledge of local reporting practices.
 - B. Establishes monitoring systems to ensure accurate, complete, and timely reporting of STD's within local area.
8. Submits interview and investigative records and reports, narratives, and statistical reports as requested.
- A. Reports are submitted on or before previously identified due dates.
 - B. Reports are accurately completed according to prearranged formats and typed or written as specified.
 - C. All mathematical calculations are accurate and verified.
 - D. Narrative reports are legible with accurate grammar and punctuation.
9. Maintain local records systems.
- A. Records are accurately and promptly filed and are easily retrievable.
 - B. Records are organized in a manner which best supports investigative or any other disease control activity.
10. Provides program assistance not considered part of the routine assignment, including a variety of epidemiological, clinical, professional liaison or other tasks.
- A. Demonstrates the ability and willingness to operate well in a broad variety of roles.

Attachment 4

NEW YORK STATE REACTOR GRID

Basic Policy - Reactor Surveillance and Follow-Up Prioritization

The statewide uniform reactor grid and prioritization schedule that follows, is a tool that should be employed by all STD prevention programs to prioritize incoming reactive serologic tests for syphilis (STS). This reactor grid should be distributed to DIS and implemented by supervisors as a guide to prioritize assignment and field activity for syphilis reactors, gonorrhea, HIV and *Chlamydia* laboratory results.

Reactive serologic titers are categorized by age group, sex, and test type or titer levels and are separated for follow-up based on likelihood of yielding a case of 1) untreated, 2) inadequately treated or 3) infectious syphilis. Program-specific adjustments should not be made to the grid. If deviations from the statewide strategy are considered, these should first be discussed with Central Office to ensure that early syphilis cases are not being missed and that program activities are conducted in a uniform

Reactor Grid and Field Activity Priority Schedule *

Syphilis - Followup Criteria

- all syphilis reactors - followed for treatment, history and symptom review with provider, morbidity report and updated serology registry

Syphilis - Interview Criteria

- Pregnant females, newborns
- To age 50 - All reactors with no previous history/documentation (up to age 40 must demonstrate serofast status)
- 51 – 60 - 1:2 and above
- 61-70 - 1:4 and above
- 71+ - 1:8 and above
- ALL AGES - all lesions and provider reports of Primary, Secondary or Early Syphilis diagnoses are followed epidemiologically regardless of details

Gonorrhea - Followup Criteria

- All untreated persons - followed for treatment and morbidity report

Gonorrhea - Interview Criteria Guidelines

- Established core areas

Attachment 4 (Continued)

NEW YORK STATE REACTOR GRID

Out of core:

- Females under 20 /pregnant females
- Repeaters (within 90 days), PID

HIV/PNAP - Followup Criteria

- Recent Infections/Recent Exposures

Gonorrhea - Interview Criteria (continued)

- Clinic patients
- Males to age 39

Chlamydia - Followup Criteria

- All untreated persons - followed for treatment and morbidity report

Chlamydia - Interview Criteria Guidelines

- Females under 20/pregnant females
- Repeaters

HIV/PNAP - All Others

Chlamydia - Interview criteria (continued)

- "Youngest" patients

Followup Protocols for Institutional Reports

County Jails	-	Per	Above	Syphilis	Reactor
Criteria					
Other Community Residential	-	Per	Above	Syphilis	Reactor
Criteria					
State Correctional Facilities**		=	1:16		
Psychiatric Facility Residents**			=	1:16	

* *Program priorities are listed in descending order*

** *All persons not specifically listed in the criteria must be followed to insure treatment and submission of morbidity report*

Attachment 5

**STD Disease Intervention Services
Training and Professional Development Staffing Plan**

Pt. I: Staff Listing and Training

- List each county employee who will work as disease intervention staff, regardless of funding source.
Include any disease intervention staff positions to be hired as TBD.
- List any additional disease intervention staff (e.g., NYSDOH regional STD staff) who will provide disease intervention services for the county.
- For each disease intervention staff person listed (county and NYSDOH), check off which designated partner services training they have received.
- For staff who need recommended training, it will be important to incorporate a plan for completion of training of county level disease intervention employees in the workplan.
Check if employee has completed each course:

Introduction to STD Intervention Advanced Sexually Transmitted Disease Intervention
Two-week course (ISTDI) CDC four-day (ASTDI)
Disease Intervention staff county will utilize:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Pt. II: Supervision/Technical Oversight

- List the first-line county staff who will provide the technical STD supervision and which supervisory training courses have been completed:

Attachment 5 (Continued)

CDC STD Intervention for Supervisors (STDIS)
CDC Principles of STD Supervision

1. _____

2. _____

Attachment 6

SAMPLE QUARTERLY REPORT FORM

1. Please describe your accomplishments during the quarter. Use quantitative data whenever possible. Specify any objectives that were met.

2. Please describe any obstacles that you encountered in the implementation of your workplan objectives.

3. Please describe any new initiatives that started during this quarter.

Attachment 6 (Continued)

4. Please describe any changes in personnel that took place during the quarter and how you will ensure that STD services continue to be provided.

Attachment 7- Budget Summary Form

NEW YORK STATE DEPARTMENT OF HEALTH

BUREAU OF STD CONTROL
BUDGET SUMMARY FORM

Contractor: _____
 Contract Period: _____
 Federal ID #: _____
 Initiative: _____

BUDGET ITEMS	Amount Requested	In-kind Contribution	Total Costs
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Personal Services			
Fringe Benefit (Rate = %)			
Personal Services Total	\$ -	\$ -	\$ -

Supplies			
Travel			
Equipment			
Miscellaneous/Other			
Subcontracts/Consultants			
Administrative Costs (Indirect Cost Rate = %)			
Total OTPS	\$ -	\$ -	\$ -

Budget Total	\$ -	\$ -	\$ -
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Amounts should be entered in whole dollars only.

