City of St. Louis Department of Health

FY2017

REQUEST FOR PROPOSALS

APPLICATION MATERIALS

FOR

Contract for Community Health Assessment (CHA)
and
Community Health Improvement Plan (CHIP)

RFP OPENING DATE: Monday April 18, 2016

RFP CLOSING DATE: Tuesday May 17, 2016

City of St. Louis Department of Health
1520 Market Street, Room 4051
St. Louis, MO 63103
(314) 657- 1485

Note: If this RFP was downloaded from the City of St. Louis RFP Website each applicant must provide contact information to the
RFP contact person in order to be notified of any changes in this RFP document.
## Estimated Schedule:

<table>
<thead>
<tr>
<th>Date/Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday, April 18, 2016</td>
<td>Request for Proposal Released</td>
</tr>
<tr>
<td>Monday, April 25, 2016</td>
<td>All questions submitted in writing</td>
</tr>
<tr>
<td>Monday, April 29, 2016</td>
<td>All questions answered in writing</td>
</tr>
<tr>
<td>Tuesday, May 17, 2016 4:00 PM</td>
<td>Due Date of Applications</td>
</tr>
<tr>
<td>TBD</td>
<td>Contract Start Date</td>
</tr>
<tr>
<td>TBD</td>
<td>Project Completion Date</td>
</tr>
</tbody>
</table>
The City of St. Louis Department of Health (CSLDOH) Seeks a firm to provide services for the development of a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)

The City of St. Louis Department of Health seeks to contract with a firm(s) to provide the necessary internal and external engagement and assessment activities to meet the requirements of the Public Health Accreditation Board’s standards to **Update the current Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP).**

I. APPLICATION FORMATTING REQUIREMENTS

Request for Proposals (RFP) may be obtained beginning **Monday, April 18, 2016** from Nakita Anthony at the CSLDOH, at, 1520 Market St. – Room 4051, MO 63103, or downloaded from the St. Louis City website at [http://www.stlouis-mo.gov/government/procurement.cfm](http://www.stlouis-mo.gov/government/procurement.cfm) or by contacting Ms. Anthony at anthonyn@stlouis-mo.gov.

All questions must be submitted in writing no later than **Monday, April 25, 2016** to Nakita Anthony at CSLDOH, 1520 Market Street – Room 4051, St. Louis, MO 63103 or via email at anthonyn@stlouis-mo.gov. All questions will be responded to in writing no later than **Friday, April 29, 2016.**

An original, five (5) paper copies bound, one (1) copy unbound and one (1) CD in Microsoft Word and/or Adobe Acrobat (.pdf) of the proposal must be submitted to the City of St. Louis Fiscal Division by **4:00 p.m. Tuesday, May 17, 2016. Late or incomplete proposals will not be accepted.**

Proposers must adhere to the following:

- Applications must be in English
- Five (5) copies of the application must be bound; one (1) copy must be unbound
- Use 12-point font
- Use 8.5 by 11 inch white paper that can be photocopied
- Top, bottom, left, and right margins may not be less than one inch each
- Text may be either 1.5 or double spaced
- Each copy must contain a Table of Contents
- CD must be properly formatted and be able to be read by Department of Health computers using Microsoft Word 95, 97, XP or Adobe Acrobat (.pdf). **CD must contain the same information as original paper copy, i.e., (draft RFP’s and resulting contracts, draft participation agreements and sole source contracts, organizational chart, resumes of key staff, most current financial statement, documentation of not for profit status, letters of support, current business license, etc.).**
II. SCOPE AND QUALIFICATION REQUIREMENTS

The City of St. Louis Department of Health desires to seek national accreditation and needs professional support with an update to the existing **Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)**.

1. Conduct and disseminate assessments focused on population health status and public health issues facing the community (Domain 1). Describe the firm’s approach to providing and using the results of health data analysis to develop recommendations regarding public health policy, processes, programs or interventions (Standard 1.3 B).

2. Engage with the community to identify and address health problems (Domain 4). Describe the firm’s approach to engage the public health system and the community in identifying and addressing health problems through an ongoing, collaborative process (Standard 4.1 B).

3. Engage with the community to identify and address health problems (Domain 4). Describe the firm’s approach to promote understanding of and support for policies and strategies that will improve the public’s health (Standard 4.2 B).

4. Facilitate seven separate information, feedback, and solutions sessions with community members and leaders including original members organized in seven clusters of four wards, each (N=28 Wards). Each cluster will consist of 16 persons (four per ward). Record feedback and prepare an outcomes sub-report. Effort (140 hours)

5. Plan and Facilitate four (six-hour) linked information, feedback, and solutions sessions with key partners and organizations including original members to review the current CHIP, epidemiological data and indicators for all zip codes and the city at large compared to state and national data and provide recommendations for strategies and approaches to respond to issues. Record feedback and prepare and outcomes sub-report. Effort (152 hours)

6. Conduct six (6-hour) planning meetings over six months. Meet with appropriate health department personnel and engage in an interactive process to prepare two documents that match the PHAB requirements for a high quality updated Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). Effort (60 hours).

7. Develop public health policies and plans (Domain 5). Describe the firm’s approach to conduct a comprehensive planning process resulting in a community health improvement plan (Standard 5.3 L)


**Evaluation Criteria:** Proposal submissions will be evaluated and selection based on the responses received to the RFP. Evaluation criteria and points assigned are described in Section V below.

III. **PROJECT ABSTRACT (Maximum of two (2) single-spaced pages)**

The proposal must include a project abstract. The abstract can be a maximum of two single-spaced pages and should be an overview of the proposal. The abstract should include:

- Name and brief description of the applicant organization.
- A brief description of your organization’s existing programs or services designed to serve the St. Louis communities public health needs.

IV. **PROGRAM NARRATIVE (Maximum of 20 double-spaced pages)**

The program narrative should be a minimum of five pages and a maximum of 20, 1.5 inch or double-spaced typewritten pages numbered consecutively. Applicants must respond to each of the required narrative proposal components (IV. A through E). The order of the responses must follow exactly the order provided below. The Applicant’s primary response should be included in the body or text of the submitted proposal. The response to proposal components may not consist solely of references to attached materials. This is not to say that Applicants may not attach documentation or material to demonstrate capacity or prior projects, but the response must not consist exclusively of attached material.

A. A statement of the applicant’s prior experience in providing services to the CSLDOH and/or pertaining public health services to other local agencies. **(10 pts)**

B. A statement that includes information about the applicant’s background providing the type of service requested in this RFP as well as experience working in a diverse environment. Please provide any pertinent examples of work or references as part of the proposal. Also include as attachments any resumes of individuals who will provide the services. **(20 pts)**

C. A statement that the applicant understands the scope of services to be provided (see Section II. Scope of Services); including a description of how each of the services will be performed. **(35 pts)**

D. A detailed cost proposal that specifies the amount of time commitment proposed for specified services included within this scope of services for Downtown West Health Center. This section will also indicate the minimum rate, at which these services will be involved, as well as any other costs, including overhead, profit, and any proposed reimbursable costs. Also include as attachments any applicable 501 (c) 3, current business license, and living wage declaration form (see Attachments A and B). **(30 pts)**

E. It is the policy of the City of St. Louis to address the effects of identified discrimination against minority business enterprises and women’s business enterprises within its jurisdiction. Contractual services shall be allocated according to the policy. The method
that the city shall employ to implement that policy is the establishment of a goal of at least 25% minority business enterprise participation and at least 5% women’s business enterprises participation in contracts and purchases wherein City funds are collected or expended. Please provide information on minority and women enterprise participation in your company. Provide as an attachment a statement of M/W/DBE participation. (5 pts)

V. EVALUATION CRITERIA

The RFP will undergo the following evaluation process. The DOH, in association with an independent review panel, will evaluate the proposal using the above criteria and provide recommendations to the DOH Professional Service Agreement Committee (PSA), established under City of St. Louis Ordinance 64102. The PSA Committee will evaluate and make selection based on the responses received to the project abstract and program narrative. The total points possible for CHSP is 100 and CHA/CHIP is 100, awarded as follows:

- Prior experience with City DOH 10 pts
- Vendor’s Background 20 pts
- Scope of services 35 pts
- Cost proposal 30 pts
- Minority participation 5 pts

VI. RFP TERMS

The City reserves and may exercise one or more of the following rights and options regarding this RFP:

- To reject any and all bids, to seek additional bids, to enter into negotiations and subsequently contract with more than one Bidder at any time during the process.
- To evaluate separately the individual components of each bid such as any proposed subsystem, product or service, and to contract with such Bidder for any individual component.
- To cancel or withdraw this RFP without the substitution of another RFP or alter the terms and conditions of this RFP.
- To modify specific terms and conditions in this document prior to execution.
- The City reserves the right to renew the contract for an additional one year term for up to four (4) consecutive years.
- Renewal of the contract will be dependent upon available funds.

Contents of Proposals: All materials submitted in accordance with this RFP will become and remains the property of the City and will not be returned. All Proposals shall be considered public records, but may be deemed and treated as closed or exempt by the City Counselor’s Office, at the sole discretion of the City Counselor's Office, pursuant to the City's understanding and interpretation of the laws of the State of Missouri. All Proposal material may be treated as open records. The City
cannot guarantee confidentiality of any materials during the evaluation process or at any other time. Thus, Proposals and communications exchanged in response to this RFP should be assumed to be subject to public disclosure.
Please review and enclose this checklist to ensure that your application is complete. Applications that do not contain a copy of each of the items below will be considered incomplete and will not be reviewed. The inclusion of letters of support and any other requested documentation is strongly suggested.

Application Cover Sheet

Project Abstract (Section III.)

Program Narrative (Section IV.)

A. Prior Experience

B. Background Statement

C. Scope of Work Statement

D. Detailed Cost Proposal

E. Minority Business Enterprise Qualifications

PROPOSAL ATTACHMENTS

- Letters of Support/Letters of Intent
- Resumes of Individuals that would perform the Scope of Services (Section IV. B)
- 501 (c) 3 (Section IV. D)
- Current Business License (Section IV. D)
- Living Wage Declaration Form (Section IV. D)
- Statement of M/W/DBE Participation (Section IV. E)
APPLICATION COVER SHEET

City of St. Louis Department of Health
Attention: Nakita Anthony, Health Services Manager II
1520 Market Street, Room 4051
St. Louis, MO 63103
(314) 657-1485

Proposal For

Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)

Program/Organization Name: __________________________________________________________

Contact and Address: ______________________________________________________________

________________________________________________________________________________

Telephone #: _____________________________ Fax:______________________________

Email Address: _________________________________________________________________
ST. LOUIS LIVING WAGE ORDINANCE

NOTICE OF ST. LOUIS LIVING WAGE RATES
EFFECTIVE APRIL 1, 2016

In accordance with Ordinance No. 65597, the St. Louis Living Wage Ordinance ("Ordinance") and the Regulations associated therewith, the City Compliance Official for the City of St. Louis has determined that the following living wage rates are now in effect for employees of covered contracts:

1) Where health benefits as defined in the Ordinance are provided to the employee, the living wage rate is $12.60 per hour (130% of the federal poverty guideline for a family of three); and

2) Where health benefits as defined in the Ordinance are not provided to the employee, the living wage rate is $16.87 per hour (130% of the federal poverty guideline for a family of three, plus fringe benefit rates as defined in the Ordinance).

3) Fringe benefit rate defined under Chapter 6.20 of the Revised Code of the City of St. Louis: $4.27 per hour.

These rates are based upon federal poverty level income guidelines as defined in the Ordinance and are effective as of APRIL 1, 2016. These rates will be further adjusted when the federal poverty guidelines are adjusted by the U.S. Department of Health & Human Services, or pursuant to Chapter 6.20 of the Revised Code of the City of St. Louis.

The Ordinance applies to employers who are covered by the Ordinance as defined in the Ordinance, where the contract or grant is entered into or renewed after the effective date of the Ordinance, which is November 3, 2002. A copy of the Ordinance may be viewed online at https://www.stlouis-mo.gov/government/city-laws/ordinances/ordinance.cfm?ord=65597 or obtained from:

City of St. Louis Living Wage Program Office
St. Louis, Missouri
(314) 426-8106

Dated: February 5, 2016
As the authorized representative of the above-referenced bidder or proponent, I hereby acknowledge that the bidder/proponent understands that the contract or agreement that will be executed with a successful bidder/proponent pursuant to this solicitation is subject to the St. Louis Living Wage #65597 and the Regulations associated therewith. The bidder/proponent hereby agrees to comply with the Ordinance and the associated Regulations if awarded a contract pursuant to this solicitation. I am authorized to make the above representations on behalf of the bidder or proponent.

AUTHORIZED REPRESENTATIVE CERTIFICATION:

_______________________________ (Signature)

NAME: __________________________

TITLE: __________________________

DATE: __________________________