

NACCHO

National Association of County & City Health Officials

REQUEST FOR PROPOSALS

“ROUTINE, OPT-OUT SYPHILIS SCREENING OF WOMEN AND OTHER INDIVIDUALS OF CHILDBEARING CAPACITY IN JAILS”

National Association of County and City Health Officials (NACCHO)

Release Date: October 4, 2021

Due Date: November 24, 2021*

*If this due date poses a problem for your jurisdiction, please reach out in advance of the deadline to discuss options.

For questions about the Request for Proposals (RFP), contact Shalesha Majors, Program Analyst, HIV, STI, & Viral Hepatitis, at smajors@naccho.org.

SUMMARY INFORMATION

Project Title: ROUTINE, OPT-OUT SYPHILIS SCREENING OF WOMEN AND OTHER INDIVIDUALS OF CHILDBEARING CAPACITY IN JAILS

Proposal Due: November 24, 2021 at 11:59 PM Pacific time.

Selection Announcement: Week of December 20, 2021

Source of Funding: Centers for Disease Control and Prevention, Division of STD Prevention

NOA Award No.: 6 NU38OT000306-04-01

CFDA No.: 93.421—Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation’s Health

Funding Amount: \$60,000-\$75,000 per site

Estimated Period of Performance: 01/1/22 – 12/31/22

Point of Contact for Questions Regarding this Application: smajors@naccho.org

I. Purpose and Background

The National Association of County and City Health Officials (NACCHO) represents the nation’s nearly 3,000 local health departments (LHDs), which work to protect and improve the health of all people and all communities. NACCHO's HIV, STI, and Viral Hepatitis program aims to strengthen the capacity of LHDs to prevent, control, and manage HIV, STIs, and hepatitis in their communities. NACCHO supports these efforts by providing technical and capacity building assistance, developing and disseminating tools and resources, facilitating peer information exchange, and providing learning opportunities.

NACCHO, in conjunction with the Centers for Disease Control and Prevention (CDC), announces a request for proposals (RFP) for a demonstration project to conduct routine, opt-out syphilis screening of women and other individuals of childbearing capacity housed in local jails. The primary purpose is to assess the effectiveness of routine, opt-out syphilis screening of women and other individuals of childbearing capacity in local jails as an intervention venue to identify and treat new cases of syphilis. This is part of the larger, ongoing effort using multiple interventions to combat increases in syphilis among individuals who can give birth, as well as increases in congenital syphilis (CS).

After a steady decline from 2008–2012, national data show a sharp increase in CS rates each year since 2012. In 2019, there were a total of 1,870 reported cases of CS, including 94 syphilitic stillbirths and 34 infant deaths. The national rate of 48.5 cases per 100,000 live births represents a 41.4% increase relative to 2018 and a 291.1% increase relative to 2015. This increase in the CS rate has paralleled increases in primary and secondary syphilis among all women and reproductive-aged women during 2015–2019. Preliminary 2020 data suggest continued increases in CS. As of June 30, 2021, 1,991 infants born in 2020 have been identified and reported to CDC as CS cases. Prior reporting trends indicate the total number of CS cases reported may increase to as high as 2,100 before the reporting period ends in October 2021.

Historically, syphilis screening or testing women and other individuals of childbearing capacity in jails has proven beneficial in terms of identifying new infections, particularly in jurisdictions with outbreaks of syphilis among heterosexual persons. Though data are limited, jail screening has often been productive at identifying syphilis compared to screening in STD clinics, with new case rates in jails ranging from 0.6 – 5.2% compared to about 1.0% in STD clinics.

This demonstration project aligns with the following CDC goals:

- a. reduce the number of new syphilis infections among individuals of childbearing capacity
- b. reduce the number of new congenital syphilis infections via the identification and treatment of syphilis among pregnant people

This project will offer essential information about the development and impact of expanded syphilis screening, testing, and treatment in women's local jails. To establish models of practice, NACCHO will fund up to 5 local health departments to develop, design, and implement a collaboration with one or more local jails to expand services and care. Proposals should not exceed \$75,000. Findings will be shared broadly with STD programs across the country.

II. Objectives

To achieve the objectives, each funded recipient should develop a multi-disciplinary team, which should include persons at the jail involved in the screening or treatment services. The team should have experience in conducting syphilis testing and referring syphilis-infected persons and persons at high risk of infection, to timely treatment.

The team will:

1. Collaborate with NACCHO/CDC personnel to finalize a syphilis screening protocol for women and other individuals of childbearing capacity in local jails.
2. Collaborate with NACCHO/CDC personnel to finalize program data collection materials to monitor and evaluate routine syphilis screening and treatment.
3. Follow the protocol, implement, monitor, and evaluate a routine opt-out syphilis screening and treatment program for women and other individuals of childbearing capacity in local jails.
4. Collaborate with all funded recipients and NACCHO/CDC personnel in data analyses and dissemination of program findings.

This is a demonstration and evaluation effort to identify replicable models and best practices for local health departments and local jails to work together.

III. Scope of Work and Requirements

This funding is open to local health departments (LHDs) that have at least one local jail housing women and other individuals of childbearing capacity with a committed interest to partnering to expand STI services in that jurisdiction.

The local health department must have the organizational and project management capacity over the project period to design and implement a model to work with the local jail.

A letter of agreement between the LHD and the local jail detailing mutual roles and responsibilities under this partnership is required.

Provision of STI services into local jails should reflect elements laid out in the CDC's [Recommendations for Providing Quality Sexually Transmitted Diseases Clinical Services, 2020 \(STD QCS\)](#). Screening and treatment protocols should reflect guidelines/recommendations from the [CDC STI Treatment Guidelines](#) and/or the [U.S. Preventative Services Task Force \(USPSTF\)](#).

Applicants will have flexibility in how project approaches are designed and are encouraged to propose and apply approaches that are sustainable and can be expandable (scalable). Applicants may also consider innovative approaches to challenging issues, such as logistics or third-party/healthcare insurance reimbursement.

During the project period, awardees will:

- Ensure that relevant local stakeholders are aware of the project, engaged, and informed appropriately throughout the duration of the funding period.
- Finalize a partnership and implementation model with the local jail.
- Finalize a plan to evaluate implementation of the project with process and outcome measures to answer the primary evaluation questions stated in Section IV
- Collaborate with NACCHO/CDC to collect, analyze, interpret, and synthesize findings.
- Collaborate with NACCHO/CDC during and post-project period to share ongoing lessons learned and findings through reports, conference abstracts, webinars, and limited 1:1 technical assistance with other areas interested in learning more about the approach and lessons learned.
- Collaborate with NACCHO/CDC staff in developing and implementing a protocol and data collection materials, and dissemination of program evaluation findings.
- Participate in any needed project conference calls as well as site visit(s) (virtual or in person) and any project dissemination meetings.
- Submit final project deliverables.

Summary of required project deliverables:

- Final project model and implementation plan
- Final evaluation plan
- Clean summaries of all data collected based on evaluation plan
- Minimum of 3 progress reports summarizing project status, completed deliverables, and next steps
- Electronic copies of any materials developed to implement the model, including standard operating and reporting procedures, a referring patient and treatment algorithm, sample lab requisition forms, educational material for patients, training modules, sample MOUs, data sharing, cost sharing, and other legal agreements between the entities.
- Final report documenting methods, results, conclusions, and lessons learned. This also should include documentation of the partnership development process

IV. Evaluation Guidance and Requirements

The awardees will be expected to answer the following evaluation questions using scientific methods:

- Was routine, opt-out screening of women and other individuals of childbearing capacity in the local jail an effective intervention in identifying and treating women and other individuals of childbearing capacity with syphilis?
- How operationally feasible was it to expand syphilis services/referrals in the local jail setting?
- What barriers and facilitators affected implementation?
- How feasible and successful was the partnership itself?
- To what extent will the partnership be sustained beyond the funding period?

Applicants should propose a basic evaluation design in their application. Applicants are encouraged to provide as much detail as possible in their applications to facilitate project timelines upon funding. Various types of data are needed to create a multi-dimensional description of feasibility, replicability, facilitators, and barriers. NACCHO and CDC are committed to working with funded jurisdictions to develop process and short-term outcomes with both quantitative and qualitative methods for the evaluation and to provide support as otherwise needed.

V. Support and Technical Assistance

NACCHO/CDC staff will provide guidance and coordination throughout the entire demonstration project. Activities to be conducted by NACCHO/CDC personnel include:

1. Provide programmatic and scientific oversight to the funded recipients in finalizing the program protocol and data collection materials.
2. Provide consultation and technical assistance on the screening and treatment program throughout the project period.
3. Aggregate cross-site program data collected by funded recipients for monitoring and evaluation purposes.
4. Collaborate and provide guidance in analyses and dissemination of program monitoring and evaluation findings.

Additionally, NACCHO/CDC will develop resources and materials based on project findings to disseminate broadly to LHDs and local jails as well as other STI stakeholders across the country.

VI. Funding and Timeframe

Approximately \$15,000-\$75,000 per site is available to fund up to 5 awards. It is expected that the awards will begin on or about January 3, 2022 and will be for a 12-month period (01/1/22 – 12/31/22).

Priority will be given to applicants who meet the following criteria:

- 100 or more syphilis cases (all stages) among women, age 15-44, in 2019 or 2020.
- LHDs that have an established relationship with a local jail and where some form of syphilis testing is already occurring.
- LHDs that propose routine, opt-out syphilis screening of women within 48 hours of induction/booking at the local jail.
- LHDs where the population of women inducted/booked into the jail will support a minimum of 2000 syphilis screening tests during the project.

Funding can be used to support costs for personnel, training, STI test kits and laboratory processing, and STI treatment. Funds may be used to support an employee with the organizational capacity to conduct and oversee program activities. Funding may not be used for client incentives, research, or clinical care (except as allowed by law) and generally, funding should not be used to purchase furniture and equipment. Recipients may use funds only for reasonable program purposes, including personnel, supplies, and services.

KEY DATES

EVENT	DATE
INFORMATIONAL WEBINAR FOR POTENTIAL APPLICANTS	OCTOBER 26, 2021
APPLICATION SUBMISSION DEADLINE	NOVEMBER 24, 2021
TELEPHONE INTERVIEWS WITH FINALISTS (IF NEEDED)	WEEK OF DECEMBER 6, 2021
ANTICIPATED AWARD NOTIFICATION	DECEMBER 20, 2021
ANTICIPATED CONTRACT EXECUTION	JANUARY 3, 2022
IMPLEMENTATION AND EVALUATION PERIOD	12 months from start date

VII. Eligibility and Contract Terms

Eligible applications must include a local health department in addition to meeting criteria specified below in the selection criteria.

Applicants should plan for approximately 12 months of project implementation. Projects will begin on the date of contract execution. NACCHO will pay the selected project areas upon receipt of deliverables per the payment schedule identified in the scope of work. Please note that NACCHO reserves the right to make changes to the project timeline and payment schedule if necessary.

NACCHO expects you as the applicant to review and agree to the NACCHO [standard contract language](#). However, if you know in advance that your agency or organization is going to have difficulty accepting any of the provisions in the contract, please contact NACCHO immediately to discuss. If you are an applicant from Florida, please contact NACCHO immediately for a copy of the Florida standard contract.

VIII. Proposal Format

The application should be single-spaced and use Times New Roman 12-point font, not to exceed eight (8) pages in length, and should include the following sections in this order:

A. Cover page

Provide a cover sheet that includes the project title, applicant organization name and address, project director name and contact information (telephone and email) and requested funding amount.

B. Background and Need (~2 pages). Describe:

1. Site population including an overview of your service area and community, the epidemiology of congenital syphilis and syphilis among women in the jail population, and any syphilis testing, treatment, and/or referral gaps and needs in your community that could be addressed by this joint initiative.
2. Current and past experience with addressing congenital syphilis and syphilis among individuals with childbearing capacity in the jurisdiction, including the current STI services offered by the local jail(s) and LHD in the jurisdiction and experience with screening for syphilis in local jails.
3. Jail(s) from which the participants will be recruited and the proposed demonstration project female population of the facility. Include Data that demonstrates that a minimum of 2000 syphilis screening tests can be conducted during the project period. Include

information on how medical services are integrated into the induction/booking process. Include a description of any existing STD health services available to detainees and how these services are integrated into the jail system.

4. How this project will help eliminate health disparities in your community.

C. Project Design (~3 pages). Describe:

1. Scope of work with project goals, objectives, and proposed outcomes, including estimated timeline for deliverables and completion.
2. How you propose to accomplish project objectives and any specific determinations about what patient population(s) will be reached may be included. Provide a detailed 12-month timeline for the implementation of the proposed program.
3. How the funded health department, the jail, and any participating community-based organizations will collaborate in the demonstration project.
4. How opt-out syphilis screening and any necessary treatment would be incorporated into the routines at the facility.
5. Data management and sharing processes that will be used by the LHD and the jail, including the timeliness of access to data for proper monitoring and evaluation.
6. Test technology that will be used, and the laboratory processing that will occur to support the test technology selected.
7. Process for ensuring that timely treatment occurs, both within the facility and if released prior to treatment. Include who will be providing the medication and who will administer the treatment.
8. How training for implementing routine rapid or serological testing will occur and who will be trained.
9. How and with whom project findings will be disseminated/shared.

D. Monitoring and Evaluation (~2 pages). Describe:

1. A Plan to measure progress against stated project goals, objectives, and outcomes. At a minimum, the following data variables are required to be collected and reported to NACCHO/CDC as part of the project. The data for women and other individuals of childbearing capacity should be reported by pregnancy status (Pregnant, Not pregnant, Unknown pregnancy status). If you would rather provide a template instead of narrative, that is acceptable.
 - a. Total number booked (duplicated count)
 - b. Total number released prior to screening
 - c. Total number tested for syphilis (duplicated count)
 - d. Total number confirmed (non-treponemal and treponemal) positive syphilis results (i.e., suspected case)
 - e. Total number positive syphilis results later determined to be new cases
 - f. Total number positive syphilis results later determined to be previously treated cases
 - g. Total number positive syphilis results later determined to be unknown if they were new or previously treated case
 - h. Total number positive syphilis tests receiving treatment
 - i. Total number of new cases treated
 - j. Total number of previously treated cases retreated
 - k. Total number of cases unknown if they were new or previously treated cases
2. How the program will be evaluated. At a minimum, this should include descriptions of activities to document program monitoring and quality assurance.

- a. Effectiveness component for assuring the established protocol is being followed and improved
 - b. Evaluation of the routine, opt-out syphilis screening and treatment within 48 hours of induction/booking and subsequent treatment, for program evaluation.
 - c. How data obtained for monitoring and evaluation purposes will be used to determine the effectiveness of the demonstration project,
 - d. Description of how monitoring and evaluation activities will be conducted.
 - e. Detailed 12-month timeline for the proposed evaluation.
- E. Key Staff and Partners (~1 pages)**
- 1. Proposed key staff to manage, implement, and evaluate the project, their role, and relevant experience with qualifications of the proposed staff needed to conduct program activities, and the percentage of time each staff member will be assigned to the project, including jail and/or contracted medical provider staff.
 - a. Include letter(s) of agreement or support between the LHD and local jail administration.
 - 2. Description of relationship to any partners critical to implementing the project
- F. Attachments - Required**
- 1. Proposed budget, using the [provided template](#).
 - 2. Budget narrative that includes a justification and explanation of each cost included in the budget.
 - 3. Letters of support from any key partners critical to the project. Include a letter of support from the jail administration, contracted medical provider, or other appropriate entity with license to authorize such a project and if medical care is provided by a contracted medical provider, an official from that entity with license to authorize such a project must co-sign the letter of support or provide a separate letter of support. The letter of support must include statements permitting rapid or serological syphilis testing within 48 hours of induction/booking, the provision of treatment for syphilis on site and after release, and access to routine STD test data from existing medical records.
 - 4. [Vendor Information Form](#)
 - 5. [Certification of Non-Debarment](#)
 - 6. [W-9](#)
 - 7. [FFATA data collection form](#)
- G. Attachments – Optional**
- 1. Resumes/CVs of Key Staff

The cover page, budget and budget narrative, resumes/CVs, and other attachments do not count against the total page limit. All pages, charts, figures, tables, and any additional information/attachments should be numbered.

Before a contract can be entered, proof of active registration with SAM.gov in accordance with an active DUNS number must be obtained. Registration can be done [here](#).

IX. Selection Criteria

Applications will be reviewed and scored in accordance with the following criteria (out of 100 points):

- 1. Project Plan (60 points):
 - a. Degree to which the applicant meets or exceeds the minimum number and rate of syphilis

- cases needed for the project in their jurisdiction
- b. Degree to which applicant discusses collaboration between themselves and the jail. Inclusion of letters of support from the jail administration and/or the contracted medical provider.
 - c. Degree to which the applicant has described the jail from which participants will be recruited. Degree to which applicant has described the medical evaluation process in the facility, and STD health services available to inmates, and how these services are integrated into the jail system.
 - d. Degree to which the applicant has adequately described how the proposed plan for the demonstration project will be implemented.
 - Adequacy of the description of how training for implementing routine rapid testing will occur.
 - Thoroughness of description of the following: how program participants would be recruited, number of participants who would receive rapid testing, how routine rapid testing would be implemented, and the type of data collected for program monitoring and evaluation purposes.
 - e. Presence of a statement that the team is willing to collaborate with CDC staff in developing and implementing a protocol and data collection materials, and dissemination of program evaluation findings.
 - f. Quality and experience of the proposed staff needed to conduct activities, and the appropriateness of the percentage of time each staff member will be assigned to the project.
 - g. Degree to which applicant has described duties and responsibilities of key personnel.
 - h. Adequacy of available facilities and equipment that will be used to conduct program activities.
2. Evaluation (30 points):
 - a. Degree to which applicant has provided a thorough description of how the program will be evaluated including, program monitoring, quality assurance, and an effectiveness of the program.
 - b. Completeness of a detailed 12-month timeline for evaluation of the proposed project.
 - c. Appropriateness of experience of key personnel and their capacity to carry-out the project.
 - d. Completeness of description on how biological, behavioral, and referral data will be used to determine the effectiveness of the program.
 3. Budget (10 points): The extent to which the applicant has prepared a budget that is reasonable, itemized, clearly justified, and consistent with the intended use of the funds.

NACCHO reserves the right to award jurisdictions that do not have the highest raw score to account for factors such as geography or population size. Telephone interviews may be conducted with finalists if additional information is needed to inform the selection process. Interviews would be conducted in early December.

X. Submission Instructions

The deadline to submit applications is November 24, 2021 by 11:59PM Pacific. Proposals should be submitted as a single PDF in an email to smajors@naccho.org with subject line: "ROUTINE, OPT-OUT SYPHILIS SCREENING OF WOMEN AND OTHER INDIVIDUALS OF CHILDBEARING CAPACITY IN LOCAL JAILS". Attachments should be included as separate PDFs.

*An informational webinar will be hosted for potential applicants on October 26, 2021 at 1-2PMET. Please note that **advanced registration is required**. Click here to [register](#).*

Questions may be submitted in advance to smajors@naccho.org and will be accepted until 11:59PM Pacific Daylight Time (PDT) on October 22, 2021.

Webinar URL: https://naccho.zoom.us/webinar/register/WN_IRVsZ2qxT96uuDkQRFwGng.

XI. Appendices

[Sample Contract Language](#)

[Budget Template](#)

For questions, contact:

Shalesha Majors

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