

State of Hawaii
Department of Health
Family Health Services Division
Maternal and Child Health Branch
Women's Health Section - Family Planning Program

Request for Proposals

<HTH-560-CW-007>

Title X Male Family Planning Services

Issued: 11/16/09

Date Due: 12/21/09

Note: If this RFP was downloaded from the State Procurement Office RFP Website each applicant must provide contact information to the RFP contact person for this RFP to be notified of any changes. For your convenience, you may download the [RFP Interest form](#), complete and e-mail or mail to the RFP contact person. The State shall not be responsible for any missing addenda, attachments or other information regarding the RFP if a proposal is submitted from an incomplete RFP.

November 16, 2009

REQUEST FOR PROPOSALS

**TITLE X MALE FAMILY PLANNING SERVICES
RFP No. HTH-560-CW-007**

The Department of Health, Family Health Services Division, Maternal and Child Health Branch, Women's Health Section, Family Planning Program, is requesting proposals from qualified applicants to provide male family planning and related health information, education, and/or clinical services to males ages 15-49 on Oahu. Funding is available for a two (2) year contract term with the initial period to commence on July 1, 2010, or State's notice to proceed, whichever is later, and end on June 30, 2012, with the option to extend up to an additional twenty-four (24) months and end no later than June 30, 2014.

Proposals shall be mailed, postmarked by the United States Postal Service on or before December 21, 2009, and received no later than 10 days from the submittal deadline. Hand delivered proposals shall be received no later than 4:30 p.m., Hawaii Standard Time (HST), on December 21, 2009, at the drop-off sites designated on the Proposal Mail-in and Delivery Information Sheet. Proposals postmarked or hand delivered after the submittal deadline shall be considered late and rejected. There are no exceptions to this requirement.

The Family Planning Program will conduct an orientation on November 30, 2009 from 9:00 a.m. to 11:00 a.m. HST, at 741-A Sunset Avenue, Room 205-A, Honolulu, Hawaii. All prospective applicants are encouraged to attend the orientation.

The deadline for submission of written questions is 4:30 p.m., HST, on December 7, 2009. All written questions will receive a written response from the State on or about December 14, 2009.

Inquiries regarding this RFP should be directed to the RFP contact person, Ms. Misty Pacheco at 741-A Sunset Avenue Rm 100, Honolulu, Hawaii 96816, telephone: (808) 733-9096, fax: (808) 733-8355, e-mail: misty.pacheco@doh.hawaii.gov.

PROPOSAL MAIL-IN AND DELIVERY INFORMATION SHEET

ONE ORIGINAL AND ONE COPY OF THE PROPOSAL ARE REQUIRED.

ALL MAIL-INS SHALL BE POSTMARKED BY THE UNITED STATES POSTAL SERVICE (USPS) NO LATER THAN 12/21/09 **and received by the state purchasing agency no later than 10 days from the submittal deadline.**

All Mail-ins

*Department of Health
Maternal and Child Health Branch
Family Planning Program
741-A Sunset Avenue, Room 103
Honolulu, HI 96816*

DOH RFP COORDINATOR

*Misty Pacheco
Phone: (808)733-9096
Fax: (808)733-8355
e-mail: misty.pacheco@doh.hawaii.gov*

ALL HAND DELIVERIES SHALL BE ACCEPTED AT THE FOLLOWING SITES UNTIL **4:30 P.M., Hawaii Standard Time (HST)**, 12/21/09. Deliveries by private mail services such as FEDEX shall be considered hand deliveries. Hand deliveries shall not be accepted if received after 4:30 p.m., 12/21/09.

Drop-off Sites

*Department of Health
Maternal Child Health Branch
741-A Sunset Avenue, Room 103
Honolulu, Hawaii 96816*

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Section 1

Administrative Overview

Section 1

Administrative Overview

Applicants are encouraged to read each section of the RFP thoroughly. While sections such as the administrative overview may appear similar among RFPs, state purchasing agencies may add additional information as applicable. It is the responsibility of the applicant to understand the requirements of *each* RFP.

I. Procurement Timetable

Note that the procurement timetable represents the State's best estimated schedule. Contract start dates may be subject to the issuance of a notice to proceed.

<u>Activity</u>	<u>Scheduled Date</u>
Public notice announcing Request for Proposals (RFP)	11/16/09
Distribution of RFP	11/16/09
RFP orientation session	11/30/09
Closing date for submission of written questions for written responses	12/7/09
State purchasing agency's response to applicants' written questions	12/14/09
Discussions with applicant prior to proposal submittal deadline (optional)	12/09
Proposal submittal deadline	12/21/09
Discussions with applicant after proposal submittal deadline (optional)	12/09
Final revised proposals (optional)	01/10
Proposal evaluation period	01/10
Provider selection	01/10
Notice of statement of findings and decision	02/10
Contract start date	07/01/10

II. Website Reference

The State Procurement Office (SPO) website is <http://hawaii.gov/spo/>

	For	Click
1	Procurement of Health and Human Services	"Health and Human Services, Chapter 103F, HRS..."
2	RFP website	"Health and Human Services, Ch. 103F..." and "The RFP Website" (located under Quicklinks)
3	Hawaii Administrative Rules (HAR) for Procurement of Health and Human Services	"Statutes and Rules" and "Procurement of Health and Human Services"
4	Forms	"Health and Human Services, Ch. 103F..." and "For Private Providers" and "Forms"
5	Cost Principles	"Health and Human Services, Ch. 103F..." and "For Private Providers" and "Cost Principles"
6	Standard Contract -General Conditions	"Health and Human Services, Ch. 103F..." "For Private Providers" and "Contract Template – General Conditions"
7	Protest Forms/Procedures	"Health and Human Services, Ch. 103F..." and "For Private Providers" and "Protests"

Non-SPO websites

(Please note: website addresses may change from time to time. If a link is not active, try the State of Hawaii website at <http://hawaii.gov>)

	For	Go to
8	Tax Clearance Forms (Department of Taxation Website)	http://hawaii.gov/tax/ click "Forms"
9	Wages and Labor Law Compliance, Section 103-055, HRS, (Hawaii State Legislature website)	http://capitol.hawaii.gov/ click "Bill Status and Documents" and "Browse the HRS Sections."
10	Department of Commerce and Consumer Affairs, Business Registration	http://hawaii.gov/dcca click "Business Registration"
11	Campaign Spending Commission	http://hawaii.gov/campaign

III. Authority

This RFP is issued under the provisions of the Hawaii Revised Statutes (HRS) Chapter 103F and its administrative rules. All prospective applicants are charged with presumptive knowledge of all requirements of the cited authorities. Submission of a valid executed proposal by any prospective applicant shall constitute admission of such knowledge on the part of such prospective applicant.

IV. RFP Organization

This RFP is organized into five sections:

Section 1, Administrative Overview: Provides applicants with an overview of the procurement process.

Section 2, Service Specifications: Provides applicants with a general description of the tasks to be performed, delineates provider responsibilities, and defines deliverables (as applicable).

Section 3, Proposal Application Instructions: Describes the required format and content for the proposal application.

Section 4, Proposal Evaluation: Describes how proposals will be evaluated by the state purchasing agency.

Section 5, Attachments: Provides applicants with information and forms necessary to complete the application.

V. Contracting Office

The Contracting Office is responsible for overseeing the contract(s) resulting from this RFP, including system operations, fiscal agent operations, and monitoring and assessing provider performance. The Contracting Office is:

Department of Health, State of Hawaii
 Maternal and Child Health Branch
 Women's Health Section
 Family Planning Program
 741-A Sunset Avenue, Room 103
 Honolulu, Hawaii 96816

Phone: (808)733-9050

Fax: (808)733-9032

VI. Orientation

An orientation for applicants will be held on Monday November 30, 2009, at 741-A Sunset Avenue, Room 205-A, in reference to the request for proposals.

VII. Submission of Questions

Applicants may submit questions to the RFP Contact Person identified in Section 2 of this RFP. All written questions will receive a written response from the state purchasing agency.

Deadline for submission of written questions:

Date: 12/7/09 Time: 4:30pm HST

State agency responses to applicant written questions will be provided by:

Date: 12/14/09

VIII. Submission of Proposals

- A. **Forms/Formats** - Forms, with the exception of program specific requirements, may be found on the State Procurement Office website referred to in II. Website Reference. Refer to the Proposal Application Checklist for the location of program specific forms.
1. **Proposal Application Identification (Form SPO-H-200).** Provides applicant proposal identification.
 2. **Proposal Application Checklist.** Provides applicants with information on where to obtain the required forms; information on program specific requirements; which forms are required and the order in which all components should be assembled and submitted to the state purchasing agency.
 3. **Table of Contents.** A sample table of contents for proposals is located in Section 5, Attachments. This is a sample and meant as a guide. The table of contents may vary depending on the RFP.
 4. **Proposal Application (Form SPO-H-200A).** Applicant shall submit comprehensive narratives that address all of the proposal requirements contained in Section 3 of this RFP, including a cost proposal/budget if required.
- B. **Program Specific Requirements.** Program specific requirements are included in Sections 2, Service Specifications and Section 3, Proposal Application Instructions, as applicable. If required, Federal and/or State certifications are listed on the Proposal Application Checklist located in Section 5.
- C. **Multiple or Alternate Proposals.** Multiple or alternate proposals shall not be accepted unless specifically provided for in Section 2 of this RFP. In the event alternate proposals are not accepted and an applicant submits alternate proposals, but clearly indicates a primary proposal, it shall be considered for award as though it were the only proposal submitted by the applicant.

- D. **Tax Clearance.** Pursuant to HRS Section 103-53, as a prerequisite to entering into contracts of \$25,000 or more, providers shall be required to submit a tax clearance certificate issued by the Hawaii State Department of Taxation (DOTAX) and the Internal Revenue Service (IRS). The certificate shall have an original green certified copy stamp and shall be valid for six (6) months from the most recent approval stamp date on the certificate. Tax clearance applications may be obtained from the Department of Taxation website. (Refer to this section's part II. Website Reference.)
- E. **Wages and Labor Law Compliance.** If applicable, by submitting a proposal, the applicant certifies that the applicant is in compliance with HRS Section 103-55, Wages, hours, and working conditions of employees of contractors performing services. Refer to HRS Section 103-55, at the Hawaii State Legislature website. (See part II, Website Reference.)
- **Compliance with all Applicable State Business and Employment Laws.** All providers shall comply with all laws governing entities doing business in the State. Prior to contracting, owners of all forms of business doing business in the state except sole proprietorships, charitable organizations unincorporated associations and foreign insurance companies be registered and in good standing with the Department of Commerce and Consumer Affairs (DCCA), Business Registration Division. Foreign insurance companies must register with DCCA, Insurance Division. More information is on the DCCA website. (See part II, Website Reference.)
- F. **Hawaii Compliance Express (HCE).** Providers may register with HCE for online proof of DOTAX and IRS tax clearance Department of Labor and Industrial Relations (DLIR) labor law compliance, and DCCA good standing compliance. There is a nominal annual fee for the service. The "Certificate of Vendor Compliance" issued online through HCE provides the registered provider's current compliance status as of the issuance date, and is accepted for both contracting and final payment purposes. Refer to this section's part II. Website Reference for HCE's website address.
- G. **Campaign Contributions by State and County Contractors.** Contractors are hereby notified of the applicability of HRS Section 11-205.5, which states that campaign contributions are prohibited from specified State or county government contractors during the term of the contract if the contractors are paid with funds appropriated by a legislative body. For more information, FAQs are available at the Campaign Spending Commission webpage. (See part II, Website Reference.)

- H. **Confidential Information.** If an applicant believes any portion of a proposal contains information that should be withheld as confidential, the applicant shall request in writing nondisclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the proposal, be clearly marked, and shall be readily separable from the proposal to facilitate eventual public inspection of the non-confidential sections of the proposal.

Note that price is not considered confidential and will not be withheld.

- I. **Proposal Submittal.** All mail-ins shall be postmarked by the United States Postal System (USPS) and received by the State purchasing agency no later than the submittal deadline indicated on the attached Proposal Mail-in and Delivery Information Sheet. All hand deliveries shall be received by the State purchasing agency by the date and time designated on the Proposal Mail-In and Delivery Information Sheet. Proposals shall be rejected when:
- Postmarked after the designated date; or
 - Postmarked by the designated date but not received within 10 days from the submittal deadline; or
 - If hand delivered, received after the designated date and time.

The number of copies required is located on the Proposal Mail-In and Delivery Information Sheet. Deliveries by private mail services such as FEDEX shall be considered hand deliveries and shall be rejected if received after the submittal deadline. Dated USPS shipping labels are not considered postmarks.

IX. Discussions with Applicants

- A. **Prior to Submittal Deadline.** Discussions may be conducted with potential applicants to promote understanding of the purchasing agency's requirements.
- B. **After Proposal Submittal Deadline -** Discussions may be conducted with applicants whose proposals are determined to be reasonably susceptible of being selected for award, but proposals may be accepted without discussions, in accordance HAR Section 3-143-403.

X. Opening of Proposals

Upon receipt of a proposal by a state purchasing agency at a designated location, proposals, modifications to proposals, and withdrawals of proposals shall be date-stamped, and when possible, time-stamped. All documents so

received shall be held in a secure place by the state purchasing agency and not examined for evaluation purposes until the submittal deadline.

Procurement files shall be open to public inspection after a contract has been awarded and executed by all parties.

XI. Additional Materials and Documentation

Upon request from the state purchasing agency, each applicant shall submit any additional materials and documentation reasonably required by the state purchasing agency in its evaluation of the proposals.

XII. RFP Amendments

The State reserves the right to amend this RFP at any time prior to the closing date for the final revised proposals.

XIII. Final Revised Proposals

If requested, final revised proposals shall be submitted in the manner, and by the date and time specified by the state purchasing agency. If a final revised proposal is not submitted, the previous submittal shall be construed as the applicant's best and final offer/proposal. *The applicant shall submit **only** the section(s) of the proposal that are amended, along with the Proposal Application Identification Form (SPO-H-200).* After final revised proposals are received, final evaluations will be conducted for an award.

XIV. Cancellation of Request for Proposal

The RFP may be canceled and any or all proposals may be rejected in whole or in part, when it is determined to be in the best interests of the State.

XV. Costs for Proposal Preparation

Any costs incurred by applicants in preparing or submitting a proposal are the applicants' sole responsibility.

XVI. Provider Participation in Planning

Provider participation in a state purchasing agency's efforts to plan for or to purchase health and human services prior to the state purchasing agency's release of a RFP, including the sharing of information on community needs, best practices, and providers' resources, shall not disqualify providers from submitting proposals if conducted in accordance with HAR Sections 3-142-202 and 3-142-203.

XVII. Rejection of Proposals

The State reserves the right to consider as acceptable only those proposals submitted in accordance with all requirements set forth in this RFP and which demonstrate an understanding of the problems involved and comply with the service specifications. Any proposal offering any other set of terms and conditions contradictory to those included in this RFP may be rejected without further notice.

A proposal may be automatically rejected for any one or more of the following reasons:

- (1) Rejection for failure to cooperate or deal in good faith. (HAR Section 3-141-201)
- (2) Rejection for inadequate accounting system. (HAR Section 3-141-202)
- (3) Late proposals (HAR Section 3-143-603)
- (4) Inadequate response to request for proposals (HAR Section 3-143-609)
- (5) Proposal not responsive (HAR Section 3-143-610(a)(1))
- (6) Applicant not responsible (HAR Section 3-143-610(a)(2))

XVIII. Notice of Award

A statement of findings and decision shall be provided to all applicants by mail upon completion of the evaluation of competitive purchase of service proposals.

Any agreement arising out of this solicitation is subject to the approval of the Department of the Attorney General as to form, and to all further approvals, including the approval of the Governor, required by statute, regulation, rule, order or other directive.

No work is to be undertaken by the awardee prior to the contract commencement date. The State of Hawaii is not liable for any costs incurred prior to the official starting date.

XIX. Protests

Any applicant may file a protest against the awarding of the contract. The Notice of Protest form, SPO-H-801, is available on the SPO website. (See paragraph II, Website Reference.) Only the following matters may be protested:

- (1) A state purchasing agency's failure to follow procedures established by Chapter 103F of the Hawaii Revised Statutes;

- (2) A state purchasing agency's failure to follow any rule established by Chapter 103F of the Hawaii Revised Statutes; and
- (3) A state purchasing agency's failure to follow any procedure, requirement, or evaluation criterion in a request for proposals issued by the state purchasing agency.

The Notice of Protest shall be postmarked by USPS or hand delivered to 1) the head of the state purchasing agency conducting the protested procurement and 2) the procurement officer who is conducting the procurement (as indicated below) within five working days of the postmark of the Notice of Findings and Decision sent to the protestor. Delivery services other than USPS shall be considered hand deliveries and considered submitted on the date of actual receipt by the state purchasing agency.

Head of State Purchasing Agency	Procurement Officer
Name: Chiyome Leinaala Fukino, M.D.	Name: Sharon Abe
Title: Director of Health	Title: DOH Procurement Officer
Mailing Address: P.O. Box 3378, Honolulu, HI 96801	Mailing Address: P.O. Box 3378, Honolulu, HI 96801
Business Address: 1250 Punchbowl Street, Honolulu, HI 96813	Business Address: 1250 Punchbowl Street, Honolulu, HI 96813

XX. Availability of Funds

The award of a contract and any allowed renewal or extension thereof, is subject to allotments made by the Director of Finance, State of Hawaii, pursuant to HRS Chapter 37, and subject to the availability of State and/or Federal funds.

XXI. General and Special Conditions of Contract

The general conditions that will be imposed contractually are on the SPO website. (See paragraph II, Website Reference). Special conditions may also be imposed contractually by the state purchasing agency, as deemed necessary.

XXII. Cost Principles

In order to promote uniform purchasing practices among state purchasing agencies procuring health and human services under HRS Chapter 103F, state purchasing agencies will utilize standard cost principles outlined in Form SPO-H-201, which is available on the SPO website (see paragraph II, Website

Reference). Nothing in this section shall be construed to create an exemption from any cost principle arising under federal law.

Section 2

Service Specifications

Section 2

Service Specifications

I. Introduction

A. Overview, purpose or need

Since the early 1970's, the Hawaii State Department of Health ("DOH") has been the Grantee for the federally funded Title X Family Planning Program. The award is made by the U.S. Department of Health and Human Services ("DHHS"), Office of Population Affairs ("OPA"), Office of Family Planning. The Hawaii DOH Family Planning Program ("FPP") of the Women's Health Section, Maternal and Child Health Branch, Family Health Services Division is responsible to administer the program and funds enabling the provision of Title X subsidized family planning ("FP") services in Hawaii.

As Grantee, the FPP's functions and responsibilities include:

- Assessing community needs in the area of family planning for individuals with low incomes and for those at risk for unintended pregnancy;
- Identifying, funding, and contracting with service providers;
- Assuring access to subsidized high quality clinical family planning services and related preventive health services including preconception and interconception care (care received prior or between pregnancies to improve individual health and pregnancy outcomes);
- Assuring access to highly effective contraceptive methods;
- Monitoring and evaluating the performance of contract agencies;
- Collecting, analyzing, and disseminating data;
- Providing training and technical assistance to family planning providers;
- Providing community education and outreach services;
- Advocating for clients; and
- Serving as liaison between the state, federal, and community family planning providers.

Proposals are requested from qualified applicants to provide male (ages 15-49) family planning services, including community information, education, and outreach in the areas of family planning and reproductive health, in Honolulu County for fiscal years 2011 and 2012 (July 1, 2010 to June 30, 2011 and July 1, 2011 to June 30, 2012). Probable funding is subject to the appropriation and allotment of federal funds. If federal funding is appropriated and allotted in the subsequent biennium budget, the contract period may be extended for an additional twenty-four (24) months with an execution of a supplemental agreement.

Preference will be given to geographic areas that are medically underserved or determined as a medical professional shortage area as described in the Primary Care Needs Assessment Data Book (2007). The applicant(s) must specify their project jurisdiction as cited in the Primary Care Needs Assessment Data Book (<http://hawaii.gov/health/doc/pcna2007databook.pdf>). Proposals that are accepted will be funded by the federal Title X Family Planning Program awarded to the DOH by the U.S. Department of Health and Human Services, Office of Population Affairs, Office of Family Planning.

The U.S. Census Bureau's Current Population Survey ("CPS") Annual Social and Economic Supplement, 2008, Hawaii Sample, indicates approximately six hundred thirty-two thousand (632,000) males aged 15-49 in Hawaii; and fifty-one thousand (51,000) of those males are uninsured.

According to the June 2008 Guttmacher Institute's "Facts on Young Men's Sexual Reproductive Health" fact sheet, more than three-quarters of young men will become sexually active by age twenty (20). Almost all (96%) will have sex prior to marriage. The sheet also reported that among publicly funded family planning clinics surveyed in 2003, 36% offered non-reproductive health services for men and 35% had recruitment efforts targeting the partners of their female clients. Furthermore, relatively few clinics offer programs focused on males, and only 4% of clinics offer special hours for male clients.

In a May 2002 Guttmacher Report on Public Policy, a special analysis, "Looking at Men's Sexual and Reproductive Health Needs" stated that of the almost sixty-nine million (69,000,000) American men in their peak reproductive years (ages 15-49), sixty-two million (62,000,000) have had sexual intercourse, including more than half of adolescent men and at least nine (9) in ten (10) adult men. For most of them, sex is currently a part of their lives: Three-quarters of men in their twenties, and close to nine (9) in ten (10) in their thirties and forties, have had sex in the past month. According to the analysis, another potential consequence of men's sexual behavior is their partners' pregnancies, either planned or unplanned. Men aged 25-49 are involved in 3.7 million pregnancies each year (excluding pregnancies that result in miscarriage), resulting in 2.8 million births (about 1.1 million of which are unplanned) and eight hundred thousand (800,000) abortions (also typically from unplanned pregnancies). Men of this age group report that 21% of births are mistimed and 17% are not wanted at all. Men younger than 25 are involved in an additional 1.7 million pregnancies, resulting in 1.1 million births (many of which are unplanned) and six hundred thousand (600,000) abortions. It is also reported by the analysis that condom use, by itself or in combination with a female contraceptive method, decreases with age, from 60% among sexually active adolescents to 16% among men in their late thirties.

The family planning program authorized under Section 1001 of Title X is required by law to provide family planning services to all individuals desiring such services. The number of males receiving services in Title X clinics has historically been low, ranging from approximately two (2) to five (5) percent annually. During calendar year 2008, the number of males receiving services in Hawaii Title X clinics was 2.7% (556 male users). The federal Office of Family Planning has focused on seeking more effective means for providing family planning information, education, and clinical services targeting males since approximately 1995.

Just as women do, men need to avoid the potential negative consequences and achieve the desired, positive outcomes of their sexual and reproductive behavior. Men need to prevent unintended pregnancies, within or outside of marriage. They need to protect themselves and their partners against acquiring STDs, including HIV, and they need to be screened and, if necessary, treated for such diseases. Furthermore, men need to be able to father children when they and their partners choose, overcome fertility problems, and help ensure that their partners' pregnancies are healthy. Overall, men need the self-esteem, self-awareness and skills to avoid violent and coercive relationships; to engage sexually in ways that are respectful of themselves and their partners; and to be part of strong, fulfilling relationships that can help them meet their other objectives.

B. Planning activities conducted in preparation for this RFP

A request for information (RFI) was posted on the State Procurement website on 9/22/09. An email was sent announcing the posting of the RFI to current providers and prospective providers. The RFI included the website for the Federal Title X Family Planning Program and Guidelines with other resources.

C. Description of the goals of the service

The goals of this program are to:

1. Promote information, education, awareness, and understanding of family planning for males so that they can make informed decisions and act responsibly in their own lives to prevent STDs and unintended pregnancy while encouraging condom use, emergency contraception, regular health care exams, better parenting, and healthier and more satisfying personal and family relationships.
2. Establish more effective means for providing family planning information, education, and clinical services targeting males.
3. Restructure the clinic environment (making it male-friendly) and train all

staff (clinical and health education and outreach staff members) on delivery of male services, while targeting community outreach and promotion of these services.

4. Promote more positive attitudes within males toward health care utilization and increase the use of sexual and reproductive health care.

5. Promotion and integration of male-focused family planning and reproductive health services into the State of Hawaii, Department of Health, Family Planning Program, including its delegate agencies.

6. Improve the health status of populations in areas of the State designated as in need of services as identified in the 2007 Primary Care Needs Assessment Data Book published by the Family Health Services Division, DOH (<http://hawaii.gov/health/doc/pcna2007databook.pdf>).

D. Description of the target population to be served

The target population is males ages 15-49 in Honolulu County. These individuals include, but are not limited to uninsured or underinsured males, immigrants, males with limited English proficiency, homeless males, substance abusers, males with disabilities, and adolescent males.

E. Geographic coverage of service

The services shall be in Honolulu County, in areas of high population density such as Honolulu. Preference will be given to geographic areas that are medically underserved or determined as a medical professional shortage area as described in the Primary Care Needs Assessment Data Book (2007). The applicant(s) must specify their project jurisdiction as cited in the Primary Care Needs Assessment Data Book (<http://hawaii.gov/health/doc/pcna2007databook.pdf>).

F. Probable funding amounts, source, and period of availability

July 1, 2010 – June 30, 2011	\$49,000	Title X Federal Funds
July 1, 2011 – June 30, 2012	\$49,000	Title X Federal Funds
July 1, 2012 – June 30, 2014	Funding subject to appropriation and allotment of federal funds.	

Probable funding is subject to the appropriation and allotment of federal funds. If federal funding is appropriated and allotted in the subsequent biennium budget, the contract period may be extended for an additional twenty-four (24) months with an execution of a supplemental agreement.

Provider(s) must perform the current contract in a satisfactory manner prior to any supplemental agreements, as determined by program and fiscal monitoring and audits.

II. General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. Necessary Skills and Experience

The agency must have staff with the background, knowledge, understanding and experience related to the delivery of community information, outreach, and education in the area of FP and reproductive health, specifically male sexual and reproductive health. A minimum of five years' experience in areas of outreach and education activities for the agency as a whole (not necessarily the staff described below) is desired.

2. Personnel

The agency must have a staff person with experience and knowledge in health education, outreach and community resources. In addition, this staff person must have experience and knowledge in male sexual and reproductive health. The staff person must be sensitive to and able to deal effectively with cultural and sensitive service delivery issues. At a minimum, a high school degree will be acceptable, with applicable experience in community outreach and health education being required. Applicable experience would include (but not limited to) experience in public health or social science related field, experience working with males, group facilitation, or health education training. The staff person must have technical and extensive training in male family planning.

3. Coordination of Services

The agency must have experience in effective coordination of services with other agencies and resources in the community, specifically related to family planning and reproductive health needs and services, and preferably with male clients. The agency must also have a memorandum of agreement with a family planning clinic or clinics that will take male referrals and provide males with family planning and reproductive health services. The agency must obtain data which can demonstrate improvement of male family planning service delivery.

4. Facilities

The agency must have a facility for a FP Community Health Educator which has reasonable office accommodations in which to carry out tasks efficiently and effectively (e.g. telephone, fax, email, personal computer, and space for preparation of education exhibits and programs). The FP Community Health Educator employed by the agency must have transportation to provide community education and outreach activities.

5. Administrative

The applicant shall comply with the Chapter 103F, Hawaii Revised Statutes (“HRS”) Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/1//98), which can be found on the SPO website. (See Section 1 Administrative Overview, Paragraph II, Website Reference.)

B. Secondary purchaser participation
(Refer to HAR Section 3-143-608)

After-the-fact secondary purchases will be allowed.

Planned secondary purchases- None

C. Multiple or alternate proposals
(Refer to HAR Section 3-143-605)

Allowed Unallowed

D. Single or multiple contracts to be awarded
(Refer to HAR Section 3-143-206)

Single Multiple Single & Multiple

E. Single or multi-term contracts to be awarded
(Refer to HAR Section 3-149-302)

Single term (2 years or less) Multi-term (more than 2 years)

Contract terms:

The initial term of the contract is July 1, 2010 to June 30, 2011.

F. RFP contact person

The individual listed below is the sole point of contact from the date of release of this RFP until the selection of the successful provider(s). Written questions should be submitted to the RFP contact person and received by the day and time specified in Section 1, paragraph I (Procurement Timetable) of this RFP.

Misty Pacheco, MHA
Public Health Educator
Family Planning Program,
Maternal & Child Health Branch,
Family Health Services Division,
Hawaii Department of Health
741-A Sunset Avenue, Room 108
Honolulu, HI 96816
Ph: (808)733-9096
Fax: (808)733-8355
email: misty.pacheco@doh.hawaii.gov

III. Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities

(Minimum and/or mandatory tasks and responsibilities)

1. Community Health Information and Education: Male Family Planning and Reproductive Health

- a. The awardee shall provide services through a Family Planning (“FP”) Community Health Educator, who shall be responsible for a minimum of one thousand five hundred (1,500) direct contacts and four thousand (4,000) indirect contacts with males annually.

Direct contacts can be individuals or groups who are personally reached by the FP Community Health Educator. Indirect contacts are individuals who have been reached through health fairs, health exhibits, printed information, and the media.

- b. The awardee shall develop an action plan as part of this RFP. Any corrections and/or changes will be done in consultation with the State of Hawaii Department of Health Family Planning Program

(“FPP”) Health Educator once the contract has been awarded. (Action Plan outlined below.)

The action plan shall include activities that address the goals of the program as listed in Paragraph I.C of Section 2, Service Specifications. The action plan also shall:

- Demonstrate how the FP Community Health Educator will coordinate activities with clinical resources. These activities with clinical resources shall include restructuring the clinic to make it male-friendly if necessary, training of clinical and health education and outreach staff on delivery of male services, and community outreach strategies to promote these services. The agency must obtain data which shall demonstrate improvement of male family planning service delivery. The goal is to support strategies which will reach male populations in need of clinical reproductive health care services and provide them with the necessary referrals. The awardee must also enter into a memorandum of agreement with a family planning clinic or clinics that will take male referrals and provide males with family planning and reproductive health services.
 - Utilize approaches to reach hard-to-reach male populations such as low-income, uninsured or underinsured persons, immigrants, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents.
 - Describe community-based information and education that is culturally and age appropriate and includes the complete range of family planning choices. The awardee shall utilize a wide range of program strategies and be responsive to the specific needs of the male community.
- c. The awardee shall submit quarterly reports on all information and education activities within one (1) month after each quarter ends.
- d. The awardee shall provide family planning and reproductive health informational and educational services to males of hard-to-reach populations, in addition to the general male population. Hard-to-reach populations include low-income, uninsured or underinsured persons, immigrants, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents. Presentations shall be delivered directly to those hard-to-reach individuals as well as to agency staff working with these populations. Culturally appropriate approaches and resources shall be utilized accordingly.

- e. The awardee shall provide support to schools, community-based and faith-based organizations, or others upon request to promote family planning, reproductive and sexual health information. This would include but not be limited to education relating to male development and reproductive health, condom use, relationships, fatherhood, and/or clinical services, including contraceptive services (emergency contraceptives) and sexually transmitted infection (“STI”) prevention and testing. These activities should include one (1) or more lesson plan(s) and/or activity which is evidence-based.

If activities are conducted in schools, activities should include one (1) or more lesson plan(s) and/or activity which is developed to promote the Hawaii Department of Education health standards related to sexual health and responsibility. If using a specific curriculum, this curriculum shall be reviewed and approved by the Hawaii Department of Education.

The action plan shall also include a related pre- and post- test activity which measures these outcomes. Lesson plan(s)/activities and pre- and post- tests should be included as an attachment to the action plan showing anticipated outcomes for the specific age group. The awardee shall also include as part of any lesson plan/activity, information about community-based family planning resources. (See Attachment E - Performance Measures, Attachment F - Outcome Measures, and Attachment G - Sample of Pre/Post Tests.)

- f. The awardee shall provide, upon request, education targeting males to community and professional groups, including teachers, focusing on the importance of family planning and the procedure for accessing subsidized clinical services through FPP’s contracted clinics statewide to assist with increasing the number of unduplicated clients.
- g. The awardee shall provide indirect information and education targeting males, through exhibits, distribution of printed information, and/or media contacts.
- h. The awardee shall be available, as appropriate, to provide presentations and/or assist in health fairs outside of the awardees’ area of service, upon request from the FPP Health Educator.
- i. The awardee shall be a member on the Department of Health (“DOH”) FPP’s Community Information and Education and

Participation Committee to provide input on male-friendliness and appropriateness of health education materials and activities.

- j. The awardee shall attend the family planning community health information, education, and outreach meetings convened by FPP. If unable to attend, an appropriate alternate shall represent the member. In addition, the awardee shall provide presentations and/or in-service training to FPP health educators on their project and male-focused family planning and reproductive health education and services once per contract year (towards the end of the contract period).
- k. The awardee shall participate in coalitions that focus on Title X family planning priorities.
- l. The awardee shall participate in trainings sponsored and supported by FPP and Title X Region IX's FP training center, the Center for Health Training, as applicable and/or required.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The FP Community Health Educator providing community health education services shall have experience and knowledge in health education, outreach and community resources. In addition, this FP Community Health Educator shall have experience and knowledge in male sexual and reproductive health education and shall be someone who can provide a supportive and instructive role model for males. The FP Community Health Educator shall be sensitive to and able to deal effectively with cultural and sensitive service delivery issues. At a minimum, a high school degree will be acceptable, with applicable experience in community outreach and health education being required. Applicable experience shall include (but not be limited to) experience in public health or social science related field, experience working with males, group facilitation, or health education training. The staff person shall have training in male family planning.
- b. The awardee shall select a FP Community Health Educator who is knowledgeable about community needs, cultural values, norms, and resources.

- c. The FP Community Health Educator shall:
- i. Receive an orientation to the Title X Program and participate in trainings sponsored and offered by FPP and Region IX's FP training center, the Center for Health Training ("CHT"), as applicable and/or required by the Title X program.
 - ii. Have adequate knowledge and training to provide current and accurate family planning information.
 - iii. Have adequate technical knowledge and training in male family planning.
 - iv. Be comfortable working with males who may have different experiences and backgrounds than the FP Community Health Educator's own, and be able to create a comfortable atmosphere for males to talk.
 - v. Have strong communication and public speaking skills.
 - vi. Be sensitive to and able to deal effectively with the cultural and other characteristics of the targeted geographical population.

2. Administrative

- a. Family planning community information and education services shall be provided to persons solely on a voluntary basis. (See Section 1 Administrative Overview, Paragraph II, Website Reference for Family Planning Guidelines ("FPG") and updates provided in the Office of Population Affairs ("OPA") Instructional Series.)
- b. Personnel shall be informed that they may be subject to prosecution under Federal law if they coerce any person to undergo an abortion or sterilization procedure. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG.)
- c. Awardee shall comply with Department of Accounting and General Services, Archives Division "General Records Schedule" (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG.)

- d. Awardee shall comply with the DOH's Directive Number 04-01 dated May 3, 2004 "Interpersonal Relationships between Staff and Clients/Patients." (Attachment H.)
- e. Awardee shall be responsible for its own determination and compliance efforts in regards to the federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA").
- f. Awardee shall obtain from a company authorized by law to issue such insurance in the State of Hawaii commercial general liability insurance ("liability insurance") in an amount of at least TWO MILLION AND NO/100 DOLLARS (\$2,000,000.00) coverage for bodily injury and property damage resulting from the awardee's performance under this Contract. The awardee shall maintain in effect this liability insurance until the State of Hawaii certifies that the awardee's work under the Contract has been completed satisfactorily.

3. Quality assurance and evaluation specifications

- a. The awardee shall implement a quality assurance system that provides for ongoing evaluation of project personnel and services. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG, page 30.)
- b. The awardee shall comply with Title X and DOH family planning policies, procedures, and guidelines, including but not limited to the following:
 - i. Federal Title X Program Guidelines for Project Grants for Family Planning Services, U.S. Department of Health and Human Services, Office of Population Affairs, Office of Family Planning.
 - ii. OPA Program Instructional Series.
 - iii. Uniform Requirements for Government and Non-Profits, 45 Code of Federal Regulations ("CFR") 92 & 74.
 - iv. Office of Management and Budget ("OMB") Circulars, A-87, A-102, A-110, A-122, A-133.
 - v. Hawaii Department of Health, Family Planning Program Policies and Guidelines. (Available on request from the FPP RFP contact, Section 2, Paragraph, II, F.)

- c. The awardee shall provide adequate and regular training to and supervision of health education program staff.
- d. The awardee shall participate in site monitoring of program activities by FPP staff in order to evaluate the quality of service delivery and to validate service provision. This shall occur at least once during the contract period July 1, 2010 to June 30, 2011 subject to appropriation and allotment of federal funds.
- e. The FPP shall provide an orientation for new health educator staff and ongoing technical assistance regarding the statewide family planning program as needed.

4. Output and performance/outcome measurements

The DOH requires the reporting of performance measures whereby the awardee takes responsibility for achieving short term performance objectives related to community health education and outreach activities. (Attachment E.) The detailed discussion shall include the applicant's approach for achieving these performance measures:

1	Of the total direct male family planning education, information, and outreach contacts, increase the percentage (minimum of 5%) that are made to hard-to-reach populations*.
2	Increase the percentage of participants who demonstrate 25% increase in knowledge of male sexual and reproductive health and family planning, as demonstrated through pre/post tests as a result of presentations/lessons.
3	Increase percentage of males that are referred to family planning clinic(s).
4	Increase the percentage of males that receive services in family planning clinic(s).

* Hard-to-reach populations include males who are low-income, uninsured or underinsured, immigrants, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents.

5. Experience

The awardee shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the delivery of the service activities.

6. Coordination of services

The awardee shall demonstrate the capability to coordinate with other community, agencies, coalitions and other resources in the community.

Coordination shall include establishing a good working relationship with FP clinical providers to facilitate clients' entry into healthcare.

The awardee shall enter into a memorandum of agreement with a family planning clinic or clinics that will take male referrals and provide males with family planning and reproductive health services. The awardee shall obtain data which can demonstrate improvement of male family planning service delivery.

7. Reporting requirements for program and fiscal data

- a. The awardee shall submit a monthly invoice and expenditure report based on the budget approved by the FPP.
- b. The following budget form(s) shall be submitted with the Proposal Application: SPO-H-205, 206A, 206B, 206C, 206D, 206E, 206F, 206G, 206H, 206I, 206J. All budget forms, instructions and samples are located on the State Procurement Office ("SPO") website. (See Section 1 Administrative Overview, Paragraph II, Website Reference.)
- c. The awardee shall provide information on program activities on a quarterly basis, on the Quarterly Report form designated by FPP.
- d. The awardee shall submit to the DOH an annual variance report within 60 calendar days after the end of each fiscal year in the format requested by the DOH. The report will document the organization's achievement toward the planned performances and output measures for the budget period and explain any significant variances (+/- 10%).
- e. The awardee shall incorporate their annual community information and education action plan within this RFP in the format requested by the DOH, documenting the organization's planned activities, timeline, and budget. (Attachment C.)

8. Pricing structure or pricing methodology to be used**a. Pricing Structure Based on Cost Reimbursement**

The cost reimbursement pricing structure reflects a purchase arrangement in which the purchasing agency pays the provider for budgeted agreed-upon costs that are actually incurred in delivering the services specified in the contract, up to a stated maximum obligation.

b. Prohibited Costs

The following costs are not allowed:

1. For awardees receiving other federal awards, indirect costs based on a rate that has not been negotiated with the federal government are not allowed. (A valid copy of the written agreement with the federal agency for the negotiated rate must be provided to the State.)
2. Depreciation – Assets acquired through the state or federal government.

c. Travel Out of State

An out of state trip must be pre-approved by the FPP office. The request must be adequately justified on form SPO-H-206D. (Budget Justification – Travel – Out of State.) The FPP will review requests for out of state travel using the following guidelines:

1. Travel is essential to the implementation of the FP program.
2. Personal attendance is preferable to conducting FP business through email, FAX transmission, correspondence, telephone, or other telecommunication method.

9. Units of service and unit rate

Not applicable.

C. Facilities

Facilities shall be adequate relative to the proposed services.

Section 3

Proposal Application Instructions

Section 3

Proposal Application Instructions

General instructions for completing applications:

- *Proposal Applications shall be submitted to the state purchasing agency using the prescribed format outlined in this section.*
- *The numerical outline for the application, the titles/subtitles, and the applicant organization and RFP identification information on the top right hand corner of each page should be retained. The instructions for each section however may be omitted.*
- *Page numbering of the Proposal Application should be consecutive, beginning with page one and continuing through for each section. See sample table of contents in Section 5.*
- *Proposals may be submitted in a three ring binder (Optional).*
- *Tabbing of sections (Recommended).*
- *Applicants must also include a Table of Contents with the Proposal Application. A sample format is reflected in Section 5, Attachment B of this RFP.*
- *A written response is required for **each** item unless indicated otherwise. Failure to answer any of the items will impact upon an applicant's score.*
- *Applicants are **strongly** encouraged to review evaluation criteria in Section 4, Proposal Evaluation when completing the proposal.*
- *This form (SPO-H-200A) is available on the SPO website (see Section 1, paragraph II, Website Reference). However, the form will not include items specific to each RFP. If using the website form, the applicant must include all items listed in this section.*

The Proposal Application comprises the following sections:

- *Proposal Application Identification Form*
- *Table of Contents*
- *Program Overview*
- *Experience and Capability*
- *Project Organization and Staffing*
- *Service Delivery*
- *Financial*
- *Other*

I. Program Overview

Applicant shall give a brief overview to orient evaluators as to the program/services being offered. Applicant should describe how male family planning services will be integrated with other existing programs and services and community resources to provide a comprehensive male family planning system within the geographic community areas. Applicant should describe established community connection(s) in which the male family planning services will be provided.

II. Experience and Capability

A. Necessary Skills

The applicant shall demonstrate that it has the necessary skills, abilities, and knowledge relating to the delivery of the proposed services. The applicant shall demonstrate abilities in working with males from various population groups, such as uninsured or underinsured persons, immigrants, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents. The applicant shall demonstrate partnering with community based organizations (“CBO”), faith-based organizations (“FBO”), and other public health providers that work with vulnerable or at-risk male populations to improve the health of individuals and communities. The applicant shall also demonstrate the ability to incorporate cultural competency in service delivery requirements.

B. Experience

The applicant shall provide a listing of verifiable experiences with projects or contracts for the most recent five years that are pertinent to the proposed services. The applicant shall include points of contact, addresses, email, and phone numbers. The description shall include the number of participants served and the various cultural groups and ethnicities they work with. The applicant shall also demonstrate experience in achieving similar programmatic goals and interventions for improving family planning services through coordination. The State reserves the right to contact references to verify experience.

C. Quality Assurance and Evaluation

The applicant shall describe its own plans for **quality assurance and evaluation** for the proposed services, including methodology (e.g., annual staff performance appraisal training, observation of presentations in the community).

Quality assurance plans shall be in the proposal, but are not limited to assuring:

1. Timely submission of accurate and complete action plans, quarterly reports, invoices, budgets, and expenditure reports to the Family Planning Program (“FPP”).
2. Management and supervision of personnel performing family planning (“FP”) community health education and documentation of activities.
3. Family planning objectives are being implemented to meet performance measure outcomes.
4. Adherence to FPP scope of services, program supervision, staffing, and that accounting system practices are followed.

5. Annual evaluation of FP Community Health Educator on program activities by supervisor.

D. Coordination of Services

The applicant shall demonstrate the capability to coordinate services with other community agencies, coalitions and other resources in the community.

The agency must enter into a memorandum of agreement with a family planning clinic or clinics that will take male referrals and provide males with family planning and reproductive health services.

Applicant should describe any coordination of service that occurs or will occur between other DOH managed programs such as the Family Planning Program, Violence Prevention Programs, Adolescent Wellness Programs, Parenting Support Programs, STD/HIV Education and Risk Reduction Services, or STD/HIV Prevention Program.

E. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the proposed services. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet ADA requirements, as applicable, and special equipment that may be required for the services.

III. Project Organization and Staffing

A. Staffing

1. Proposed Staffing

The applicant shall describe the proposed staffing pattern, participant/staff ratio and proposed caseload capacity appropriate for the viability of the services. (Refer to the personnel requirements in Section 2, Service Specifications, as applicable.) The FP Community Health Educator shall work full time (1.0 FTE) providing family planning community health information, education, and outreach activities.

2. Staff Qualifications

The applicant shall provide the minimum qualifications (including experience) for staff assigned to the program. The applicant shall submit the agency's position description for the FP Community Health Educator demonstrating the required qualifications for community health educator (including experience) for staff assigned to the program.

- a. The staff person providing male community health education services must have experience and knowledge in health education, outreach and community resources. The staff person must be sensitive to and able to deal effectively with cultural and sensitive service delivery issues. In addition, this staff person must have experience and knowledge in male sexual and reproductive health and must be someone who can provide a supportive and instructive role model for males.
- b. At a minimum, a high school degree will be acceptable, with appropriate experience in community outreach and health education being required. Applicable experience would include (but not limited to) experience in public health or social science related field, experience working with males, group facilitation, or health education training.
- c. The applicant shall select a FP Community Health Educator who is knowledgeable about the community needs, cultural values, norms, and resources.
- d. The FP Community Health Educator shall:
 - Receive an orientation to the Title X Program and participate in trainings sponsored and offered by FPP and Region IX's FP training center, the Center for Health Training (CHT), as applicable and/or required.
 - Be comfortable working with males who may have different experiences and backgrounds than their own, and be able to create a comfortable atmosphere for males to talk.
 - Have adequate knowledge and training to provide current and accurate family planning information.
 - Have adequate technical knowledge and training in male family planning.
 - Have good communication and public speaking skills.
 - Be sensitive to and able to deal effectively with the cultural and other characteristics of the targeted geographical population.

B. Project Organization

1. Supervision and Training

The applicant shall describe its ability to supervise, train and provide administrative direction relative to the delivery of the proposed services.

2. Organization Chart

The applicant shall reflect the position of each staff and line of responsibility/supervision for the FP Community Health Educator position (Include position title, name and minimum 1 full time equivalency for health educator). FPP must be informed of changes in staff involved in providing FP services. Both the “Organization-wide” and “Program” organization charts shall be attached to the Proposal Application.

IV. Service Delivery

Applicant shall include a **detailed discussion** of the applicant’s approach to applicable service activities and management requirements from Section 2, Paragraph III, **Scope of Work**, including an action plan of all service activities and tasks to be completed, related work assignments/responsibilities, timelines/schedules, and budgets.

A. Service Activities:

The Applicant shall describe how they plan to provide the following activities:

1. Provide services through a FP Community Health Educator who shall be responsible for a minimum of one thousand five hundred (1,500) direct contacts and four thousand (4,000) indirect contacts with males annually.

Direct contacts can be individuals or groups who are personally reached by the FP Community Health Educator. Indirect contacts are individuals who have been reached through health fairs, health exhibits, printed information, and the media.

2. Develop an action plan as part of this RFP. Any corrections and/or changes will be done in consultation with the FPP Health Educator once the contract has been awarded. (As described in Section 2, Part III, A(1)(b), pages 2-7 to 2-8).

The action plan shall include activities that address the goals of the program:

- a. Promote information, education, awareness, and understanding of family planning, and male sexual and reproductive health. FP

Community Health Educators will work in collaboration with CBOs, FBOS, and/or clinical providers to improve strategies to reach male populations in need such as individuals from low-income families, the homeless, uninsured, and adolescents. Activities should include community-based information and education that are age and culturally appropriate (activities that are responsive to and respectful of the history, traditions and cultural values of different ethnic groups). Also, emphasis should be placed on both the rationale for family planning and male involvement in family planning, male sexual and reproductive health, and the complete range of family planning choices (including postponing sexual involvement for youth).

- b. Improve the health status of populations in areas of the State designated as in need of services as identified in the 2007 Primary Care Needs Assessment Data Book published by the Family Health Services Division, DOH. (See Section 1 Administrative Overview; Paragraph II, Website Reference.)

The action plan must:

- Demonstrate how the FP Community Health Educator will coordinate activities with clinical resources. These activities with clinical resources shall include the restructure of the clinic (making it male-friendly), training of clinical and health education and outreach staff on delivery of male services, and community outreach strategies to promote these services. The need is to support strategies which will reach males in need of access to clinical reproductive health care services and provide them with the necessary referrals. The agency must also enter into a memorandum of agreement with a family planning clinic or clinics that will take male referrals and provide males with family planning and reproductive health services.
- c. Submit Quarterly Reports on all information and education activities within one month after each quarter ends.
- d. Provide family planning and reproductive health informational and educational services to males of hard-to-reach populations, in addition to the male general population. Hard-to-reach populations include uninsured or underinsured persons, immigrants, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents. Presentations shall be delivered directly to those at-risk individuals as well as to

agency staff working with these populations. Culturally appropriate approaches and resources shall be utilized accordingly.

- e. Provide support to schools, community-based, faith-based organizations, or others upon request to promote family planning, reproductive, and sexual health information. This would include but not be limited to education relating to male development and reproductive health, condom use, relationships, fatherhood, and/or clinical services, including contraceptive services (emergency contraceptives) and sexually transmitted infection (STI) prevention and testing. These activities should include one (1) or more lesson plan(s) and/or activity which is evidence based.

If activities are conducted in schools, activities should include one (1) or more lesson plan(s) and/or activity which is developed to promote the Hawaii Department of Education health standards related to sexual health and responsibility for the specific age groups. If using a specific curriculum, this curriculum should be reviewed and approved by the Department of Education.

The action plan would also include a related pre and post test activity which measures these outcomes. Lesson plan(s)/activities and pre and post tests should be included as an attachment to the action plan showing anticipated outcomes for the specific age group. The awardee shall also include as part of any lesson plan/activity, information about community-based family planning resources. (Attachment E - Performance Measures, Attachment F - Outcome Measures, and Attachment G - Sample of Pre/Post Tests.)

- f. Provide education, upon request, to community and professional groups, including teachers, CBOs, and FBOs focusing on the importance of family planning and the procedure for accessing subsidized clinical services through FPP's contracted clinics statewide to assist with increasing the number of unduplicated clients.
- g. Provide presentations and/or in-service training to FPP health educators on their project and male-focused family planning and reproductive health education and services once per contract year, towards the end of the contract period.
- h. Provide indirect information and education targeting males, through exhibits, distribution of printed information, and/or media contacts.

- i. Be a member on DOH FPP's Community Information and Education and Participation Committee to provide input on male-friendliness and appropriateness of health education materials and activities.
- j. Attend the family planning community health information, education, and outreach meetings convened by FPP. If unable to attend, an appropriate alternate shall represent the member. In addition, presentations and/or in-service training to FPP health educators on their project and male-focused family planning and reproductive health education and services once per contract year, towards the end of the contract period must be provided.
- k. Participate in coalitions that focus on Title X family planning priorities.
- l. Participate in trainings sponsored and supported by FPP and Region IX's FP training center, the Center for Health Training, as applicable and/or required.

B. Management Requirements

1. Applicants shall describe how they will fulfill the personnel requirements of the Title X Program. Also, the applicant shall keep the FPP informed of personnel changes that impact the program. (See Section 2.)
2. Applicants shall describe how they will administratively fulfill the requirements of the Title X Program.
 - a. Provide family planning community information and education services to clients solely on a voluntary basis. Individuals must not be subjected to coercion to receive services or to use or not to use any particular method of birth control. Acceptance of family planning services must not be a prerequisite for a client to be eligible for, or to receive any other service or assistance from or participation in any other programs of the applicant. (Administrative Overview, Paragraph II, Website Reference for FPG, Page 5 and Attachment I, Title X Assurance of Compliance.)
 - b. Comply with Federal regulations regarding the use of Title X clients in research. (See Section 1 Administrative Overview; Paragraph II, Website Reference for Title 45 CFR, Part 46.)
 - c. Comply with all applicable policies and procedures of the DOH.

3. Applicant shall describe how they will participate in required meetings, trainings, and other events, to include, but not limited to:
 - a. Attend the family planning community health information, education, in-service trainings, and outreach meetings convened by FPP. Members shall attend meetings; and if unable, an appropriate alternate shall represent the member.
 - b. Joint meetings with FP clinical providers will be held and will include appropriate training and opportunities to strengthen approaches, that were outlined in action plans, to increase statewide utilization and access to family planning services. **FP Community Health Educators are required to attend these joint provider meetings or an appropriate alternate shall represent the member.**
 - c. Coalitions that focus on Title X family planning priorities.
 - d. Trainings sponsored and supported by FPP and Region IX's FP training center, the Center for Health Training, as applicable and/or required.
4. The applicant shall describe how they will fulfill the financial management requirements of the Title X Program that meets the standards specified in Subpart C of 45 Code of Federal Regulations ("CFR") Part 74 or Subpart C of 45 CFR Part 92, and which complies with Federal standards to safeguard the use of funds. (See Section 2, Paragraph III.)
 - a. Documentation and records of all income and expenditures must be maintained as required.
 - b. Describe current policies and procedures for charging, billing, and collecting funds for the services provided by the project or develop and implement new policies and procedures as appropriate.
5. Applicants shall identify their baseline for the FP output and performance measures. The applicant shall formulate both reasonable and achievable performance activities and describe the approach to be taken in meeting the objectives and their activities for the fiscal year contract period. Refer to Section 5, Attachment E Performance Measures and Attachment F Output Measures. These tables must be completed and attached to the Application Proposal.

V. Financial

A. Pricing Structure

Applicant shall submit a cost proposal utilizing the pricing structure designated by the state purchasing agency. The cost proposal shall be attached to the Proposal Application. (See Section 2, Paragraph III, 7 and 8.)

1. Pricing Structure Based on Cost Reimbursement

The cost reimbursement pricing structure reflects a purchase arrangement in which the State pays the contractor for budgeted costs that are actually incurred in delivering the services specified in the contract. Please **note** that contractors' overhead costs should be kept at a **minimum**. The major funding allocation should go towards: FP Community Health Educator's (HE) salary, payroll taxes and assessments, fringe benefits, adequate **mileage reimbursement** for area of service, **training**, **airfare** for a minimum of one round trip to Oahu as applicable, and FP educational supplies.

All budget forms, instructions and samples are located on the SPO website. (See Section 1, Paragraph II, Websites referred to in this RFP.) The following budget form(s) shall be submitted with the Proposal Application:

SPO-H-205, 206A, 206B, 206C, 206D, 206E, 206F, 206G, 206H, 206I, 206J.

All budget forms, instructions and samples are located on the SPO website (see Section 1, paragraph II Websites referred to in this RFP). The following budget form(s) shall be submitted with the Proposal Application:

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgment. If applicable, please explain.

Section 4

Proposal Evaluation

Section 4

Proposal Evaluation

I. Introduction

The evaluation of proposals received in response to the RFP will be conducted comprehensively, fairly and impartially. Structural, quantitative scoring techniques will be utilized to maximize the objectivity of the evaluation.

II. Evaluation Process

The procurement officer or an evaluation committee of designated reviewers selected by the head of the state purchasing agency or procurement officer shall review and evaluate proposals. When an evaluation committee is utilized, the committee will be comprised of individuals with experience in, knowledge of, and program responsibility for program service and financing.

The evaluation will be conducted in three phases as follows:

- Phase 1 - Evaluation of Proposal Requirements
- Phase 2 - Evaluation of Proposal Application
- Phase 3 - Recommendation for Award

Evaluation Categories and Thresholds

<u>Evaluation Categories</u>	<u>Possible Points</u>
<i>Administrative Requirements</i>	
<i>Proposal Application</i>	
Program Overview	0 points
Experience and Capability	25 points
Project Organization and Staffing	15 points
Service Delivery	50 points
Financial	10 Points
TOTAL POSSIBLE POINTS	100 Points

III. Evaluation Criteria

A. Phase 1 - Evaluation of Proposal Requirements

1. Administrative Requirements

2. Proposal Application Requirements

- Proposal Application Identification Form (Form SPO-H-200)
- Table of Contents
- Program Overview
- Experience and Capability
- Project Organization and Staffing
- Service Delivery
- Financial (All required forms and documents)
- Program Specific Requirements (as applicable)

B. Phase 2 - Evaluation of Proposal Application (100 Points)

Program Overview:

The applicant has demonstrated a thorough understanding of the purpose and scope of the service activity. The goals and objectives are in alignment with the proposed service activity. The applicant has described how the proposed service is designed to meet the pertinent issues and problems related to the service activity.

No Points are assigned to Program Overview. The intent is to give the applicant an opportunity to orient evaluators as to the service(s) being offered.

A five (5)-point rating scale will be used to rate the proposal content. Only whole numbers will be assigned (1, 2, 3, 4, or 5), half numbers are not utilized in this five (5)-point rating scale. This scale is based on the semantic differential developed by William E. Arnold, James C. McCroskey, and Samuel V.O. Prichard of the University of Connecticut, as well as the Information Skills Rating Scale developed by the Oak Harbor Schools and Jamie McKenzie.

5 – Outstanding	<ul style="list-style-type: none"> ▪ Each bullet identified and addressed clearly. ▪ Consistently exceeded required elements by clearly proposing additional services or strategies for implementation to achieve the RFP requirements.
4 – Above Average	<ul style="list-style-type: none"> ▪ Bullets addressed clearly in subheading under the appropriate numbered heading. ▪ More than met expectations by providing additional details or specific examples of the services or strategies for implementation.

3 – Satisfactory	<ul style="list-style-type: none"> ▪ Competent; general description of “what we do” for all required elements. ▪ No additional details, specific examples, or additional services or strategies to achieve RFP.
2 – Marginally Adequate	<ul style="list-style-type: none"> ▪ Not all bullets or all components of a bullet were evident under the appropriate numbered heading of the RFP. ▪ Did not answer the question completely in terms of approach, strategies, services, or descriptions.
1 – Unsatisfactory	<ul style="list-style-type: none"> ▪ Not all bullets or components of a bullet were addressed or evident in the proposal. ▪ Only reiterated the wording of RFP or other attached DOH materials.

1. *Experience and Capability (25 Points)*

The State will evaluate the applicant’s experience and capability relevant to the proposal contract, which shall include:

A. Necessary Skills

- | | |
|--|---|
| <ul style="list-style-type: none"> • Demonstrated skills, abilities, and knowledge relating to the delivery of the proposed services. | <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p><u>2 Points</u></p> |
| <ul style="list-style-type: none"> • Demonstrated ability to work with various hard-to-reach male population groups such as low-income, uninsured or underinsured persons, immigrants, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents. | <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p><u>2 Points</u></p> |
| <ul style="list-style-type: none"> • Demonstrate ability to incorporate cultural competency in the service delivery requirements. | <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <p><u>1 Point</u></p> <hr style="border: 0; border-top: 1px solid black; margin-top: 5px;"/> |

B. Experience

- Demonstrated FP Community Outreach and Health Education experience with projects or contracts for the most recent five years that are pertinent to the proposed services.
- Possess relevant skills, abilities, knowledge of, and experience related to delivery of proposed services.

2 Points**1 Point****C. Quality Assurance and Evaluation**

- Sufficiency of **quality assurance** and **evaluation plans** for the proposed services, including methodology. (This will include, but not be limited to, a review of the Action Plan and Performance Measures/Output table).
- Sufficiently describes **quality assurance plans** that include the following: data/billing forms and submission of invoices; staff supervision; meeting performance/output measures; and compliance with applicable guidelines.

3 Points**2 Points****D. Coordination of Services**

- Demonstrated capability to coordinate services with other agencies and resources in the community such as faith based and other community based organizations.
- Demonstrated capability to collaborate with family planning clinics and have a referral system in place as well as a memorandum of agreement with family planning clinic(s).

5 Points**5 Points****E. Facilities**

- Adequacy of facilities relative to the proposed services.

2 Points**2. *Project Organization and Staffing (15 Points)***

The State will evaluate the applicant's overall staffing approach to the service that shall include:

A. Staffing

- Proposed Staffing: That the proposed staffing pattern, client/staff ratio, and proposed caseload capacity is reasonable to insure viability of the services.
- Staff Qualifications: Minimum qualifications (including experience) for staff assigned to the program.

4 Points

5 Points

B. Project Organization

- Supervision and Training: Demonstrated ability to supervise, train and provide administrative direction to staff relative to the delivery of the proposed services.
- Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the overall service activity and tasks.

5 Points

1 Point

3. Service Delivery (50 Points)

Evaluation criteria for this section will assess the applicant's approach to the service activities and management requirements outlined in the Proposal Application. The evaluation criteria may also include an assessment of the logic of the **action plan** for the major service activities and tasks to be completed, including clarity in work assignments and responsibilities, and the realism of the timelines and schedules, as applicable.

Evaluation criteria will include:

a. Service Activities

- Specifically describes the coordination of activities, such as making the clinic male-friendly, training of staff on delivery of male services, and community outreach strategies targeting males, for males with family planning clinical resources. Provided assurance of obtained data which demonstrates improvement in delivery of male services. Adequacy of strategies to reach male populations in need of services.
- Adequacy of strategies and approaches in

5 Points

6 Points

provision of male family planning and reproductive health educational services to male contacts, with emphasis on males of hard-to-reach populations such as individuals from low-income families, the homeless, uninsured or underinsured persons, substance abusers, and adolescents.

- Adequacy of strategies and approaches that will be used to reach hard-to-reach male populations such as individuals from low-income families, the homeless, uninsured, and adolescents. **6 Points**
- Adequacy of male family planning evidence based curricula, lesson plans, and pre and post tests. **6 Points**
- Adequacy of strategies and approaches in provision of male family planning education to other health educators and Title X programs, community organizations, faith based organizations, professional groups, and teachers. **3 Points**
- Adequacy of strategies and approaches in provision of indirect information and education targeting males, through exhibits, distribution of printed information, and/or media contacts. **3 Points**

b. Management Requirements (Output and Performance Objectives)

- Are the applicant's performance and output measures both reasonable and achievable? **7 Points**
- Adequacy of applicant's approach in meeting targeted performance objectives. **7 Points**
- Adequacy of applicant's methodology for data collection relative to performance measures. **7 Points**

5. Financial (10 Points)**a. Pricing structure based on cost based reimbursement:**

- | | |
|---|--------------------------|
| i. Personnel costs are reasonable and comparable to positions in the community. Non-personnel costs are reasonable and adequately justified | 3 Points
<hr/> |
| ii. Non-personnel costs are at a minimum and adequately justified. | 3 Points
<hr/> |
| iii. Extent that the budget supports the scope of services and requirements of the Request for Proposal. | 4 Points
<hr/> |

C. Phase 3 - Recommendation for Award

Each notice of award shall contain a statement of findings and decision for the award or non-award of the contract to each applicant.

Section 5

Attachments

- A. Proposal Application Checklist
- B. Sample Table of Contents
- C. Action Plan
- D. Quarterly Report
- E. Table A – Performance Measures
- F. Table B – Output Measures
- G. Sample of Pre and Post Tests
- H. Interpersonal Relationships between Staff and Clients/DOH
- I. Title X Assurance of Compliance
- J. Federal Certifications

Proposal Application Checklist

Applicant: _____

RFP No.: _____

The applicant's proposal must contain the following components in the order shown below. This checklist must be signed, dated and returned to the purchasing agency as part of the Proposal Application. SPOH forms are on the SPO website. See Section 1, paragraph II Website Reference.*

Item	Reference in RFP	Format/Instructions Provided	Required by Purchasing Agency	Completed by Applicant
General:				
Proposal Application Identification Form (SPO-H-200)	Section 1, RFP	SPO Website*	X	
Proposal Application Checklist	Section 1, RFP	Attachment A	X	
Table of Contents	Section 5, RFP	Section 5, RFP	X	
Proposal Application (SPO-H-200A)	Section 3, RFP	SPO Website*	X	
Tax Clearance Certificate (Form A-6)	Section 1, RFP	Dept. of Taxation Website (Link on SPO website)*		
Cost Proposal (Budget)				
SPO-H-205	Section 3, RFP	SPO Website*	X	
SPO-H-205A	Section 3, RFP	SPO Website* Special Instructions are in Section 5		
SPO-H-205B	Section 3, RFP,	SPO Website* Special Instructions are in Section 5		
SPO-H-206A	Section 3, RFP	SPO Website*	X	
SPO-H-206B	Section 3, RFP	SPO Website*	X	
SPO-H-206C	Section 3, RFP	SPO Website*	X	
SPO-H-206D	Section 3, RFP	SPO Website*		
SPO-H-206E	Section 3, RFP	SPO Website*		
SPO-H-206F	Section 3, RFP	SPO Website*		
SPO-H-206G	Section 3, RFP	SPO Website*		
SPO-H-206H	Section 3, RFP	SPO Website*	X	
SPO-H-206I	Section 3, RFP	SPO Website*	X	
SPO-H-206J	Section 3, RFP	SPO Website*		
Certifications:				
Federal Certifications		Section 5, RFP	X	
Debarment & Suspension		Section 5, RFP	X	
Drug Free Workplace		Section 5, RFP	X	
Lobbying		Section 5, RFP	X	
Program Fraud Civil Remedies Act		Section 5, RFP	X	
Environmental Tobacco Smoke		Section 5, RFP	X	
Title X Assurance of Compliance			X	
Program Specific Requirements:				
Table A- Performance Measures Table			X	
Table B- Output Measures Table			X	

Authorized Signature

Date

Sample

Proposal Application Table of Contents

I.	Program Overview.....	1
II.	Experience and Capability	1
	A. Necessary Skills	2
	B. Experience.....	4
	C. Quality Assurance and Evaluation.....	5
	D. Coordination of Services.....	6
	E. Facilities.....	6
III.	Project Organization and Staffing	7
	A. Staffing.....	7
	1. Proposed Staffing.....	7
	2. Staff Qualifications	9
	B. Project Organization	10
	1. Supervision and Training.....	10
	2. Organization Chart (Program & Organization-wide) (See Attachments for Organization Charts)	
IV.	Service Delivery.....	12
V.	Financial.....	20
	See Attachments for Cost Proposal	
VI.	Litigation.....	20
VII.	Attachments	
	A. Cost Proposal	
	SPO-H-205 Proposal Budget	
	SPO-H-206A Budget Justification - Personnel: Salaries & Wages	
	SPO-H-206B Budget Justification - Personnel: Payroll Taxes and Assessments, and Fringe Benefits	
	SPO-H-206C Budget Justification - Travel: Interisland	
	SPO-H-206E Budget Justification - Contractual Services – Administrative	
	B. Other Financial Related Materials	
	Financial Audit for fiscal year ended June 30, 1996	
	C. Organization Chart	
	Program	
	Organization-wide	
	D. Performance Measurement Table	
	E. Output Measurement Table	
	F. Program Specific Requirements	

Sample

Organization: _____
 RFP No: _____

ATTACHMENT C

<u>Information & Education Action Plan</u> July 1, 2010 through June 30, 2011 Two Fiscal Year Plan (based on one year's activity) <b style="color: red;">Name of Service Provider				
OBJECTIVE [Direct/Indirect]	ACTIVITIES	TIMELINE	TARGET	BUDGET
<i>Direct:</i>				
Comments:				
<i>Indirect:</i>				
<i>Special/Innovation Project:</i>				
Comments:				

ATTACHMENT C

<u>EXAMPLE</u>				
<u>Information & Education Action Plan</u>				
July 1, 2010 through June 30, 2011				
[Based on one year's activity]				
Name of Service Provider				
OBJECTIVE [Direct/Indirect]	ACTIVITIES	TIMELINE	TARGET	BUDGET
<i>Direct:</i>				
Conduct information and education programs emphasizing Family planning/birth control, male reproductive health, and sexuality topics.	A. Provide male education presentations at elementary, intermediate and high schools with (geographic areas as applicable).	Sept to June	8 schools, 100 classes, 1,500+ students.	\$1,995 at \$19.95/class at \$1.33/student
	B. Provide male presentations to community agencies within (geographical area is applicable).	Throughout the year	6 community agencies, 12+ sessions, 24 total	\$280/\$40/session
	C. Provide male education and information to the homeless and agency(s) staff.	Throughout the year	12 education and outreach to homeless population	\$239.40 at \$19.95/session and/or activity.
			2-4 presentations to agency staff	\$186.70/\$40/session
<p><i>Budget calculated on an average of educator's hourly salary to include presentation time only. Education materials should be based on \$.25/brochure; i.e. 100 participants x average of 2-3 brochures each = \$.75. Packets for mailing to schools, agencies and the like may cost approximately \$3 to \$4 each. These are estimates only. Please do not under estimate expenses, and at the same time, do not inflate expenses. Your Action Plan may serve as a tool for other funding sources, grants, and the like.</i></p>				
<i>Indirect:</i>				
Conduct male information and education through indirect activities throughout (geographical area).	A. Compile and disseminate packets to teens on "Teen Clinic" days and during regular clinic hours – new/repeat for information and/or	Throughout each year	500 Teens	\$750.00 at \$1.50/ Packet

Sample

	services.			
	B. Participate in community health fairs/ FP Exhibits.	3 times/year	3,000/year	\$450.00 at \$150/Event

Special/Innovation Project:

Increase information outreach and Coordination with males to family planning clinical service providers to increase numbers of unduplicated Title X priority clients served.	A. Coordinate w/school staff, agencies working w/TX pop, and FP clinical providers to target hard-to-reach males. Offer incentive opportunities for these males to receive peer outreach fees of \$50 or redeemable merchandise coupons for every new TX priority clients who utilize FP services for first visit.	20 Peer Incentive presentations/yr	Min. 250 new TX clients/yr.	\$2,500 plus \$500 in promotional advertising
	B. Parent and Teen Voices Panel to facilitate parent-child connectedness and introduce them to FP clinical services and social services to support males and families in preventing unintended pregnancies.	1-2 presentations/yr	50 parents/teens	\$150 food & advertising

The above are only examples, and your Action Plan does not have to be infinitely detailed, but should have enough information in each category that is appropriate, observable, and measurable, and can be evaluated annually.

Sample

Organization: _____
RFP No: _____

**QUARTERLY REPORT FORM
MALE FAMILY PLANNING INFORMATION SERVICES**

**ATTACHMENT D
EDUCATION/OUTREACH ACTIVITIES**

AGENCY NAME: _____ **QUARTER** _____ **FISCAL YEAR** _____

1. EDUCATION/OUTREACH PROGRESS: Indicate 1st.-4th. & Fiscal Year

DIRECT CONTACTS

Quarterly Projections	Quarterly Actual	Year-to-Date Projections	Year-to-Date Actual	Year-to-Date +/- Percent

INDIRECT CONTACTS

Quarterly Projections	Quarterly Actual	Year-to-Date Projections	Year-to-Date Actual	Year-to-Date +/- Percent

2. EDUCATION/OUTREACH ACTIVITIES FOR QUARTER:

General Categories DIRECT Contacts	Total Number of Direct Presentations	Number of Direct Adolescents Presentations	Number of Title X Priorities / Mandates	Number of Individuals contacted DIRECTLY			
				Male	Adolescents	Total	Number of direct contacts that were referred and received health services
Schools (Specify)							
Faith Based Organizations: (Churches, other religious groups, etc.) (Specify)							
Community Based Organizations: (Clubs, Health & Social Service Agencies, etc.) (Specify)							
Clinics (Other than patient visit)							
COLUMN TOTALS							

NOTE: For all "Specify" categories, please list on a separate sheet the name of the organization or school and what lesson plan or topic was discussed and/or what curricula was used. Also specify the categories of the priorities/mandates population being reached.

Number of Presentations giving Pre/Post Tests _____	Number of Tests Completed _____	Number of Participants tested demonstrating ≥ 25% increase in knowledge _____
General Categories INDIRECT CONTACTS	(a) Number of fairs, placement announcements, etc.	(b) Estimated number of individual exposure to effort (General Population)
Health Fairs, Exhibits, Displays		
Posters, flyers, business cards, etc.		
Mass media (T.V., radio, newspaper, periodicals, etc.)		
Other: (Specify)		

Organization: _____

RFP No: _____

TOTALS:		
----------------	--	--

3. HEALTH EDUCATION Technical Assistance: IDENTIFY ANY EDUCATIONAL AND OUTREACH TECHNICAL ASSISTANCE NEEDED. **CONTINUE ON ANOTHER SHEET OF PAPER AS NECESSARY.**
August 2009

Revised

ATTACHMENT E

**Table A – Performance Measures
Family Planning Community Education Services**

* Hard to reach populations defined as teens (abstinence-based programs), males, the homeless, disabled and substance abusers, including community-based and faith-based organizations.

+ Programs include, but not limited to puberty, self-esteem and/or family planning/reproductive health topics.

Column A Performance Measure	Column B Baseline for FY 2007	Column C Annual Performance Objective for FY 2009	Column D Annual Performance Objective for FY 2010
1. Of the total direct male family planning education, information, and outreach contacts, increase the percentage (minimum of 5%) that are made to hard-to-reach populations*.	_____ % of the total direct male family planning education, information and outreach contacts that were made to hard-to-reach populations*.	The estimated percentage of the total direct male family planning education, information and outreach contacts that will be made to hard-to-reach populations* is _____%.	The estimated percentage of the total direct male family planning education, information and outreach contacts that will be made to hard-to-reach populations* is _____%.
2. Increase the percentage of participants who demonstrate 25% increase in knowledge of male sexual and reproductive health and family planning, as demonstrated through pre/post tests as a result of presentations at schools, community-based and faith-based organizations, or others organizations. Sample: a minimum of 25 percent of school presentations .	There was _____ % of participants in presentations who demonstrated 25% increase in knowledge of male sexual and reproductive health and family planning presented through pre and post tests.	The estimated proportion of participants in presentations who will have demonstrated 25% increase in knowledge of male sexual and reproductive health and family planning presented as demonstrated through pre and post tests is _____%.	The estimated proportion of participants in presentations who will have demonstrate 25% increase in knowledge of male sexual and reproductive health and family planning presented as demonstrated through pre/post tests is _____%.
3. Increase the percentage of males that are referred to family planning clinic(s).	There was _____% of males that were referred to family planning clinic(s).	There was _____% of males that were referred to family planning clinic(s).	The estimated proportion of males that were referred to family planning clinic(s) is _____%.
4. Increase the percentage of males that receive services in family planning clinic(s).	There was _____% of males who received services in family planning clinic(s).	There was _____% of males that received services in family planning clinic(s).	There was _____% of males that received services in family planning clinic(s).

* Hard-to-reach populations include males who are low-income, uninsured or underinsured, immigrants, persons with limited English proficiency, homeless, substance abusers, persons with disabilities, and adolescents.

Sample

Organization: _____
RFP No: _____

ATTACHMENT F

**Table B – Output Measures
Family Planning Community Education Services**

	Baseline	Estimated	Estimated
Program Activity	FY 2009	FY 2010	FY 2011
A. The total number of direct family planning community education, information and outreach contacts.			
B. The total number of indirect family planning community education, information and outreach contacts.			

ATTACHMENT G



Sample

STUDENT BIRTH DATE: _____

Pre Test

Family Planning Information & Education

1. If a sexually active teenager doesn't use birth control their chance of getting pregnant within one year is 90% T F

2. Chlamydia is a common, dangerous sexually transmitted disease teens can get if they have sex. T F

3. A person does not have to have intercourse if they are in a relationship. T F

4. A person can greatly reduce their chance of getting pregnant or getting a sexually transmitted disease by using a condom correctly every time they have sexual intercourse. T F

5. Circle any answers that apply:
How would my life change if my partner or I became pregnant?
 - a) I would have to give up my free time and privacy and stay home to raise a child.
 - b) I would have to manage going to school, working and raising a child.
 - c) I am not ready for pregnancy right now.
 - d) I am not ready to have sexual relations at this time.

6. If I wanted information about birth control and condoms I would go to: (choose any that apply)
_____ a family planning clinic _____ school health aide, counselor or teacher
_____ my parent _____ Public Health Nurse
_____ a friend _____ don't know
_____ my sister/brother

other _____

7. Write at least one or more anonymous questions:

-

-

-

Sample

Organization: _____
RFP No: _____

ATTACHMENT H

LINDA LINGLE
GOVERNOR OF HAWAII



CHIYOME L. FUKINO, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. BOX 3378
HONOLULU, HI 96801-3378

In reply, please refer to:
File:

INTRA-DEPARTMENTAL DIRECTIVE 04-01
May 3, 2004 Page 1 of 5

TO: All Deputies, Division and Branch Chiefs, Staff Officers, District Health Officers, and Administrators of Attached Agencies

FROM: Chiyome Leinaala Fukino, M.D.
Director of Health *Chiyome Fukino*

SUBJECT: **INTERPERSONAL RELATIONSHIPS BETWEEN STAFF AND CLIENTS/PATIENTS**

04-1.1 **PURPOSE**

This directive provides the policy for the State of Hawaii, Department of Health on interpersonal relationships between staff and clients/patients.

04-1.2 **POLICY**

- A. Staff shall not use their professional position to exploit others for any reason.
- B. Staff shall avoid engaging in dual/multiple relationships with clients/patients or former clients/patients. When dual/multiple relationships are unavoidable, staff shall take steps ensure that the nature of the dual/multiple relationship shall neither harm nor exploit the client/patient.
- C. Sexual relationships with any client/patient or former client/patient are prohibited. Staff shall not have financial relationships with clients/patients or former clients/patients.

- D. Staff are prohibited from engaging in sexual relationships with clients/patients' relatives or other individuals with whom clients/patients maintain close personal relationships, or to whom clients/patients are reliant upon. Staff are required to set clear, appropriate and culturally sensitive boundaries.
- E. Staff shall neither initiate, assume, nor maintain a treatment relationship to individuals with whom they have had prior sexual relationships. Staff shall inform their supervisor if there have been past relationships with potential clients/patients and arrange to have the care of such patients/clients provided by another qualified staff person.
- F. Staff shall not engage in physical contact with clients/patients when there is a possibility of psychological harm to the clients/patients as a result of the contact (such as cradling or caressing clients/patients). In providing services, staff who are required to have physical contact with clients/patients are responsible for setting clear, appropriate and culturally sensitive boundaries that govern such physical contact.
- G. Staff who anticipate the potential for sexual relationships with former clients/patients shall consult in depth with their supervisors, exploring the various risks and concerns.

04-1.3 **SCOPE**

This directive applies to all Department of Health employees, including volunteers, who provide treatment and/or services and individuals or agencies that are contracted to provide treatment and/or services on behalf of the Department of Health.

04-1.4 **DEFINITIONS**

- Clients/Patients: Persons under observation, care, treatment, or receiving services.
- Department: Department of Health
- Director: Director of Health

Dual/multiple relationships:	When an employee has, or has had, more than one relationship with a patient or client, either presently or in the past. These may include professional, business, social, or personal relationships. Dual/multiple relationships can occur simultaneously or consecutively.
Staff:	Department employees, including volunteers, and individuals or agencies that are contracted to provide services on behalf of the Department.
Health:	Includes physical and mental health.
Providers:	Any persons, public or private vendors, agencies, or business concerns authorized by the department to provide health care, services, or activities.
Services:	Appropriate assistance provided to a person with a medical illness, developmental disability, mental illness, substance abuse or dependency disorder, or mental retardation. These services include, but are not restricted to assessment, case management, care coordination, treatment, training, vocational support, testing, day treatment, dental treatment, residential treatment, hospital treatment, developmental support, respite care, domestic assistance, attendant care, habilitation, rehabilitation, speech therapy, physical therapy, occupational therapy, nursing counseling, family therapy or counseling, interpretation, transportation, psychotherapy, and counseling to the person and/or to the person's family, guardian or other appropriate representative.
Treatment:	The broad range of services and care, including diagnostic valuation, medical, psychiatric, psychological, and social service care, vocational rehabilitation, career counseling, and other special services which may be extended to a person in need or with a disabling condition.

Sample

Organization: _____

RFP No: _____

ATTACHMENT I

EXHIBIT A

TITLE X ASSURANCE OF COMPLIANCE

_____ assures that it will:
(Name of Organization)

1. Provide services without subjecting individuals to any coercion to accept services or coercion to employ or not to employ any particular methods of family planning. Acceptance of services must be solely on a voluntary basis and may not be made a prerequisite to eligibility for, or receipt of, any other services.
2. Provide services in a manner which protects the dignity of the individual.
3. Provide services without regard to religion, race, color, national origin, handicapping condition, age, sex, number of pregnancies, or marital status.
4. Not provide abortions as a method of family planning.
5. Provide that priority in the provision of services will be given to persons from low income families.

Further: _____ certifies that it will:
(Name of Organization)

1. Encourage family participation in the decision of the minor seeking family planning services.
2. Provide counseling to minors on how to resist coercive attempts to engage in sexual activities.

From Part 59--Grants for Family Planning Services, Subpart A, Section 59.5(a) 2, 3, 4, 5, and 6.

(Signature)

(Title)

(Date)

ATTACHMENT J

CERTIFICATIONS

1. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

By signing and submitting this application, the prospective primary participant as defined in 45 CFR Part 76 is providing certification regarding debarment and suspension as set out in Appendix A of 45 CFR Part 76. The applicant agrees that by submitting this application it will include, without modification, the clause in Appendix B of 45 CFR Part 76 in all lower tier covered transaction and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76. Should the applicant not certify regarding debarment and suspension, an explanation as to why should be placed after the assurances page in the application package.

2. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

By signing and submitting this application, the applicant is providing certification regarding drug-free workplace requirements as set out in Appendix C to 45 CFR Part 76. For purposes of notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

Division of Grants Policy and Oversight
Office of Management and Acquisition
Department of Health and Human Services
Room 517-D
200 Independence Avenue, S.W.
Washington, D.C. 20201

3. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

By signing and submitting this application, the applicant is providing certification set out in Appendix A to 45 CFR Part 93.

4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The authorized official signing for the applicant organization certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The official signing agrees that the applicant organization will comply with the DHHS, PHS, and OPHS terms and conditions of award if a grant is awarded as a result of this application.

5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the applicant organization certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the

Sample

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Act. The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

OPHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the DHHS and OPHS mission to protect and advance the physical and mental health of the American people.

Organization: _____

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