EXHIBIT A

STANDARD GRANT AGREEMENT (SGA) REQUEST FOR APPLICATIONS (RFA) (COMPETITIVE)

PROCUREMENT ID NUMBER - PHPA-20-403 MDM0031045197

Issue Date: May 24, 2019

Regrounding Our Response Training Grants – A Public Health Approach to the Opioid Overdose Epidemic

NOTICE

A Prospective Applicant that has received this document from the Maryland Department of Health, or that has received this document from a source other than the Procurement Officer, and that wishes to assure receipt of any changes or additional materials related to this RFA, should immediately contact the Procurement Officer and provide the Prospective Offeror's name and mailing address so that addenda to the RFA or other communications can be sent to the Prospective Offeror.

Minority Business Enterprises Are Encouraged to Respond to this Solicitation

STATE OF MARYLAND MARYLAND DEPARTMENT OF HEALTH SGA KEY INFORMATION SUMMARY SHEET

Request for Applications:

Regrounding Our Response Training Grants

Solicitation Number:

PHPA-20-403 MDM0031045197

RFA Issue Date:

May 24, 2019

RFA Issuing Office:

Maryland Department of Health Center for Harm Reduction Services

Procurement Officer:

Robert Bruce

Chief Operations Officer

Prevention and Health Promotion Administration 201 W. Preston St. Baltimore, Room 322, MD 21201

Phone: (410)767-0783 Fax: (410) 333-5995

Email: Robert.bruce@maryland.gov

Contract Monitor:

Marie Stratton

Center for Harm Reduction Services 500 N Calvert Street Baltimore, MD 21211

410-767-5686 (office phone)

Email: marie.stratton@maryland.gov

Applications are to be sent to:

Maryland Department of Health

Prevention and Health Promotion Administration 201 W. Preston St. Room 322, Baltimore, MD 21201 Attention: Robert Bruce /PHPA-20-403 MDM0031045197

Closing Date and Time:

June 7, 2019 2:00 p.m. Local Time

SECTION 1 - GENERAL INFORMATION

1.1 Summary Statement

1.1.1 The Maryland Department of Health (MDH or the Department), Center for Harm Reduction Services is issuing this Request for Applications (RFA) to build a statewide multi-disciplinary network of presenters who can deliver content on four public health concepts and able to address the common misunderstandings around substance use that uphold stigma. This training network will seek to raise awareness about public health approaches to the opioid epidemic through community education, provide a framework for proactive community action to reduce overdose deaths and equip communities to pursue strategies demonstrated to reduce the harms and costs associated with the opioid overdose crisis. Master Presenter training events will recruit participants from varying sectors and regions to support rapid dissemination across Maryland.

Vendors will have the skills, knowledge, and capacity to adapt existing curricula to a substance use and opioid crisis context and to deliver the Master presenter training events.

- 1.1.2 Projects that may be funded include, but are not limited to, those listed in Attachment C. The anticipated duration of the grant award provided under this Standard Grant Agreement is July 1, 2019 November 29, 2019.
- 1.1.3 The Department intends to award up to 6 grant agreements on a competitive basis as a result of this announcement. Award amounts will vary.
- 1.1.4 Applicant, either directly or through their subcontractor(s), must be able to provide all services and meet all of the requirements requested in this announcement and the successful Applicant (the Grantee) shall remain responsible for Grant performance regardless of subcontractor participation in the work.

1.2 Contract Type

The Contract resulting from this solicitation shall be a firm fixed price.

1.3 Procurement Officer

The sole point of contact in the State for purposes of this announcement prior to the award of any Grant is the Procurement Officer at the address listed below:

Robert Bruce Chief Operations Officer Prevention and Health Promotion Administration 201 W. Preston St. Baltimore, Room 322, MD 21201 Phone: (410)767-0783 Fax: (410) 333-5995

Email: Robert.bruce@maryland.gov

The Department may change the Procurement Officer at any time by written notice.

1.4 Grant Monitor

The Grant Monitor is:

Marie Stratton
Maryland Department of Health
Center for Harm Reduction Services
500 N Calvert Street Baltimore, MD 21211
410-767-5686 (office phone)
Email: marie.stratton@maryland.gov

The Department may change the Grant Monitor at any time by written notice.

1.5 Questions

Written questions from prospective Applicants will be accepted by the Procurement Officer. Questions to the Procurement Officer shall be submitted via e-mail to the following e-mail address: Robert.bruce@maryland.gov. Please identify in the subject line the Announcement Number and Title.

Questions are requested to be submitted at least three business days prior to the Application due date. The Procurement Officer, based on the availability of time to research and communicate an answer, shall decide whether an answer can be given before the Application due date.

1.6 Applications Due (Closing) Date and Time

Applications, in the number and form set forth in Section 4.2 "Applications" must be received by the Procurement Officer, at the address listed on the Key Information Summary Sheet, no later than 2:00 p.m. Local Time on June 7, 2019 in order to be considered.

Requests for extension of this time or date will not be granted. Applicants should allow sufficient mail delivery time to ensure timely receipt by the Procurement Officer. Applications received after the due date and time listed in this section will not be considered.

Applications may be modified or withdrawn by written notice received by the Procurement Officer before the time and date set forth in this section for receipt of Applications. Multiple and/or alternate Applications will not be accepted.

Applications must be mailed or hand-delivered. Applications may not be submitted by email or facsimile.

1.7 Award Basis

The Grant shall be awarded to responsible Applicants submitting Applications that have been determined to be the most advantageous to the State, considering price and evaluation factors set forth in this RFA, for providing the activities as specified in this RFA. See RFA Section 5 for further award information.

1.8 Revisions to the RFA

If it becomes necessary to revise this RFA before the due date for Applications, the Department shall endeavor to provide addenda to all prospective Applicants that were sent this RFA or which are otherwise known by the Procurement Officer to have obtained this RFA. Addenda made after the due date for Applications will be sent only to those Applicants that submitted a timely Application and that remain under award consideration as of the issuance date of the addenda.

Acknowledgment of the receipt of all addenda to this RFA issued before the Application due date shall be included in the Transmittal Letter accompanying the Applicant's Project Narrative. Acknowledgement of the receipt of addenda to the RFA issued after the Application due date shall be in the manner specified in the addendum notice. Failure to acknowledge receipt of an addendum does not relieve the Applicant from complying with the terms, additions, deletions, or corrections set forth in the addendum.

1.9 Cancellations

The State reserves the right to cancel this RFA, accept or reject any and all Applications, in whole or in part, received in response to this RFA, to waive or permit the cure of minor irregularities, and to conduct discussions with all qualified or potentially qualified Applicants in any manner necessary to serve the best interests of the State. The State also reserves the right, in its sole discretion, to award a Grant based upon the written Applications received without discussions or negotiations.

SECTION 2 – MANDATORY REQUIREMENTS

2.1	Applicant Mandatory Requirements	

There are no Applicant Mandatory Requirements for this procurement.

SECTION 3 - SCOPE OF WORK

3.1 Background and Purpose

3.1.1 Background and Purpose

The Maryland Department of Health received funds from the CDC Cooperative Agreement for Emergency Response: Public Health Crisis Response – 2018 Opioid Crisis Cooperative Agreement to enhance the state capacity to rapidly respond to the opioid overdose crisis, through improved data collection and prevention efforts and support emergency response for those effected by the opioid overdose epidemic.

Regrounding Our Response initiative aims to build a multi-disciplinary network of presenters trained in public health concepts and able to address the common misunderstandings around substance use that uphold stigma. Regrounding Our Response aims to raise awareness about these public health approaches through community education to reduce stigma, and seeks to provide a framework for proactive community action to reduce overdose deaths. This training network can help to improve community readiness and support for evidence-based harm reduction strategies and equip communities to pursue the strategies demonstrated to reduce the harms and costs associated with the opioid overdose crisis.

Curriculum and Master Presenter training events will be focused on the following content areas of Regrounding Our Response with a harm reduction framework and in the context of Maryland's opioid overdose crisis: Stages of Change, Adverse Childhood Experiences, Social Determinants of Health, and MAT as Overdose Prevention. Each Master Presenter training event will recruit participants from a wide range of sectors and regions across Maryland to facilitate horizontal learning. Modeled off of the successful and effective ACE Interface Initiative, the intensive training provides an environment and foundation for a cohort that continues to support each other, share resources and fulfill their commitment to provide the training in their communities.

Outcomes include a) packaged curriculum and training materials that support rapid mass dissemination, b) a cohort of up to 25 Master Presenters for each content area committed to providing the training at no cost, and c) an increased number of stakeholders with an understanding of public health concepts related to substance use that are critical to reducing stigma and overdose deaths.

Through this multi-disciplinary network of trained presenters, the initiative seeks to provide trainings to multi-stakeholder groups like OITs, OMPPs and OFRs. Utilizing feedback from these groups on how best to share the information with their communities, the training network can then provide trainings to health service providers, community-based organizations, public safety and public health providers.

Stigma negatively impacts our ability to think about, include, interact with and effectively help people who use drugs. Regrounding Our Response aims to provide community education on fundamental areas of public health that are necessary to reduce stigma. As a result, the training network will support the Center for Harm Reduction's mission to:

- a) Provide services to people who are actively using drugs, without the expectation that they stop using drugs, and;
- b) Engage people who use drugs in a non-judgmental and non-stigmatizing manner; and,
- c) Acknowledge the harms associated with drug use while presenting accurate and complete information about ways to reduce these harms as much as possible.

3.2	Ap	plication	Catego	ries

The Applicant shall:

3.2.1 Application Categories

3.2.1.1 Grants will support a variety of projects. To organize proposals, MDH requests applicants indicate under which category their proposed project falls: a) Curriculum Development and Master Presenter Training Event Delivery, b) Master Presenter Training Event Planning and Master Present Cohort Support, and/or c) Regrounding Our Response Media Development. Grant activities may fall into multiple categories.

Applicants that select *a) Curriculum Development and Master Presenter Training Event Delivery* should indicate one of the following topic areas: Stages of Change, Adverse Childhood Experiences, Social Determinants of Health or MAT as Overdose Prevention.

- a) Curriculum Development and Master Presenter Training Event Delivery
 - 1. Stages of Change

Stages of Change curriculum should be adapted to set the foundation for a process of cultural change to deconstruct stigma and mythology around substance use and misuse. The curriculum should describe each stage and what motivations and barriers exist to progression across the stages. The curriculum should also explain harm reduction and how harm reduction interventions meet people in the first three stages of change. The curriculum should include training on staging clients (identifying what stage of change they are in), and on motivational interviewing techniques. Lastly, the curriculum should provide opportunities for self-reflection to identify where a person and their community is at in their readiness to accept evidence-based strategies to reduce overdose deaths.

The grantee should prepare for and deliver a 1.5 to 2 day Master Presenter Training event, in which at least 10 and no more than 25 participants are prepared to deliver the Stages of Change curriculum. The grantee will work with MDH to recruit participants, review applications and select participants. The Master Presenter Training event should provide an environment and foundation for a cohort that continues to support each other, share resources and fulfill their commitment to provide the training in their communities.

Outcomes include:

- Tools provided to stakeholders for individual and collective self-reflection.
- Increased number of stakeholders able to address common misunderstandings around how behavior changes.
- Co-branded Stages of Change curriculum materials informed by the opioid overdose epidemic and Master Presenter materials including 1 hour, 3 hour and (optional) 6 hour trainings.
- Cohort of at least 10 and no more than 25 Master Presenters committed to providing Stages of Change trainings at no cost, modeled after ACE Interface Initiative commitments.

Activities include:

- Create curriculum materials including 1 hour, 3 hour and (optional) 6 hour trainings that include action oriented strategies for Maryland.
- Collect feedback from community-based organizations and content experts to inform curriculum materials.
- Work with MDH and other curriculum partners to ensure curriculum coheres with remaining Regrounding Our Response content areas.
- Prepare and conduct 1.5 to 2 day Training of Trainer event for 10 25 participants.
- Host a convening for Master Presenters.
- 2. Adverse Childhood Experiences

Adverse Childhood Experiences curriculum should be adapted to set the foundation for a process of cultural change to deconstruct stigma and mythology around substance use and misuse. The curriculum should raise awareness and knowledge about the harmful effects of ACEs and how trauma affects individual and community health, and also provide opportunities to reflect on what one can do differently to help build resilient families and self-healing communities. The curriculum should encourage a shift to understanding that substance use can be a coping mechanism, and from asking "what did this person do?" or "what is wrong with them?" to "what happened to them?". The ACEs curriculum should also make the connection to how building core capabilities and healing from trauma can occur through evidence-based harm reduction approaches and utilizing the principles of Trauma Informed Care.

The grantee should prepare for and deliver a 1.5 to 2 day Master Presenter Training event, in which at least 10 and no more than 25 participants are prepared to deliver the ACEs curriculum. The grantee will work with MDH to recruit participants, review applications and select participants. The Master Presenter Training event should provide an environment and foundation for a cohort that continues to support each other, share resources and fulfill their commitment to provide the training in their communities.

Outcomes include:

- Increased number of stakeholders able to describe the connection of ACEs, trauma and substance use.
- Co-branded ACEs curriculum materials informed by the opioid overdose epidemic and Master Presenter materials including 1 hour, 3 hour and (optional) 6 hour trainings.
- Cohort of at least 10 and no more than 25 Master Presenters committed to providing ACEs trainings at no cost, modeled after ACE Interface Initiative commitments.

Activities include:

- Create curriculum materials including 1 hour, 3 hour and (optional) 6 hour trainings that include action oriented strategies for Maryland.
- Collect feedback from community-based organizations and content experts to inform curriculum materials.
- Work with MDH and other curriculum partners to ensure curriculum coheres with remaining Regrounding Our Response content areas.
- Pilot curriculum with multi-stakeholder groups, gather feedback, and make refinements based on feedback received.
- Prepare and conduct 1.5 to 2 day Training of Trainer event for 10-25 participants.

3. Social Determinants of Health

Social Determinants of Health curriculum should be adapted to set the foundation for a process of cultural change to deconstruct stigma and mythology around substance use and misuse. The curriculum should shift understanding of environmental, demographic and socioeconomic factors and how they impact individual and community health. The curriculum should include the connection of how the Social Determinants of Health overlap with and influence the harms associated with drugs, and how that overlap impacts individual and community wellness. The curriculum should include how evidence-based harm reduction interventions are also able to mitigate the impacts of the Social Determinants of Health.

The grantee should prepare for and deliver a 1.5 to 2 day Master Presenter Training event, in which at least 10 and no more than 25 participants are prepared to deliver the SDOH curriculum. The grantee will work with MDH to recruit participants, review applications and select participants. The Master Presenter Training event should provide an environment and foundation

for a cohort that continues to support each other, share resources and fulfill their commitment to provide the training in their communities.

Outcomes include:

- Increased number of stakeholders able to describe how the Social Determinants of Health impact the harms associated with drugs, and how they impact individual and community wellness.
- Co-branded SDOH curriculum materials informed by the opioid overdose epidemic and Master Presenter materials including 1 hour, 3 hour and (optional) 6 hour trainings.
- Cohort of at least 10 and no more than 25 Master Presenters committed to providing SDOH trainings at no cost, modeled after ACE Interface Initiative commitments.

Activities include:

- Create curriculum materials including 1 hour, 3 hour and (optional) 6 hour trainings that include action oriented strategies for Maryland.
- Collect feedback from community-based organizations and content experts to inform curriculum materials.
- Work with MDH and other curriculum partners to ensure curriculum coheres with remaining Regrounding Our Response content areas.
- Pilot curriculum with multi-stakeholder groups, gather feedback, and make refinements based on feedback received.
- Prepare and conduct 1.5 to 2 day Training of Trainer event for 10-25 participants

4. Medication Assisted Treatment as Overdose Prevention

MAT as Overdose Prevention curriculum should be adapted to set the foundation for a process of cultural change to deconstruct stigma and mythology around substance use and misuse. The curriculum should develop the understanding of the importance of MAT in reducing overdose deaths in Maryland and its effectiveness as a frontline tool for overdose prevention. The curriculum should dispel the myths and misunderstandings around MAT, including that it is simply "substituting one drug for another," and prepare participants to be able to address those misunderstandings. The curriculum should highlight the importance of MAT in criminal justice settings and upon release to reducing overdose deaths, and the importance of increasing public awareness of MAT as an effective intervention. The curriculum should address the many barriers and challenges that people who use drugs face to receive MAT and present action-oriented strategies to address these barriers in Maryland.

The grantee should prepare for and deliver a 1.5 to 2 day Master Presenter Training event, in which at least 10 and no more than 25 participants are prepared to deliver the MAT as Overdose Prevention curriculum. The grantee will work with MDH to recruit participants, review applications and select participants. The Master Presenter Training event should provide an environment and foundation for a cohort that continues to support each other, share resources and fulfill their commitment to provide the training in their communities.

Outcomes include:

- Increased number of stakeholders able to describe how MAT is a primary frontline tool for overdose prevention.
- Increased support of MAT as an effective intervention among stakeholders

- Co-branded MAT as Overdose Prevention curriculum materials informed by the opioid overdose epidemic and Master Presenter materials including 1 hour, 3 hour and (optional) 6 hour trainings.
- Cohort of at least 10 and no more than 25 Master Presenters committed to providing MAT as Overdose Prevention trainings at no cost, modeled after ACE Interface Initiative commitments

Activities include:

- Create curriculum materials including 1 hour, 3 hour and (optional) 6 hour trainings that include action oriented strategies for Maryland.
- Collect feedback from community-based organizations and content experts to inform curriculum materials.
- Work with MDH and other curriculum partners to ensure curriculum coheres with remaining Regrounding Our Response content areas.
- Pilot curriculum with multi-stakeholder groups, gather feedback, and make refinements based on feedback received.
- Prepare and conduct 1.5 to 2 day Training of Trainer event for 10-25 participants
- b) Master Presenter Training Event Planning and Master Presenter Cohort Support Provide consultation and technical assistance to Regrounding Our Response Training partners to guide the Training of Presenter events and Master Presenter Cohort Support. This includes but is not limited to:
 - Sharing best practices for preparation, recruitment and coordination of Training of Presenter events.
 - 2. Share best practices for Trainers and Master Presenter support, such as monthly TA calls, quarterly events and meet-ups, additional training opportunities, and a shared materials drive.
 - 3. Provide sample materials and templates, including but not limited to:
 - i. Sample Master Presenter application
 - ii. Sample training materials
 - iii. Sample recruitment plan
 - iv. Sample Master Presenter Training agenda
- c) Regrounding Our Response Media Development

Create Regrounding Our Response promotional and educational materials. Applicants may select from the list below and include suggested media materials in their proposal.

- 1. 1 − 2 Page Regrounding Our Response Overview Flyer
- 2. 1 2 Page Overview Flyer and palm card for Stages of Change
- 3. 1 2 Page Overview Flyer and palm card for Adverse Childhood Experiences
- 4. 1 2 Page Overview Flyer and palm card for Social Determinants of Health
- 5. 1 2 Page Overview Flyer and palm card for MAT as Overdose Prevention
- 6. Promotional video for Master Presenters to solicit opportunities to present Regrounding Our Response to organizations across the state
- 7. Educational videos to provide an overview of the public health concepts that address the common misunderstandings around substance use that uphold stigma, to provide a framework for proactive community action to reduce overdose deaths, and/or to improve community readiness and support for evidence-based harm reduction strategies and equip communities to pursue these strategies.

3.3 Scope of Work - Requirements (to be provided as part of Project Narrative, see section 4.3)

3.3.1 Proposed project:

Describe the proposed project or proposed enhancements to an existing project, including the following components:

- a) Need statement: describe the issue the proposed project activities address
- b) Proposed project activities
- c) Resources needed, including differentiating between what applicant is requesting funding for versus what is already in place (do not include pricing here)
- d) Population the project will serve
- e) Evidence base for the proposed project and activities

3.3.2 Work Plan

- a) The Applicant shall give a definitive description of the proposed plan to meet the requirements of the RFA, i.e., a Work Plan. The Work Plan shall include the specific methodology and techniques to be used by the Applicant in providing the required services as outlined in RFA Section 3, Scope of Work. The description shall include an outline of the overall management concepts employed by the Applicant and a project management plan, including overall timelines. Project deadlines considered grant deliverables must be recognized in the Work Plan.
- b) A Work Plan template can be found in Attachment C.
- c) Be sure to highlight ways that individuals with lived experience may have a role in project planning and/or implementation.
- d) Be sure to include any project deliverables in the Work Plan.

3.3.3 Evaluation

The Work Plan should include information about what data will be collected to evaluate the project objectives, and how that data will be collected.

3.4 Data and reporting

Grantees will be required to adhere to the following data and reporting requirements. Please note, MDH may change format and content requirements for reporting documents such as the quarterly narrative report, as needed.

- 3.4.1 Submit a monthly progress report, including the following (1-2 pages):
 - a) Description of activities conducted
 - b) Progress as related to project objectives described in Work Plan
 - c) Barriers and successes
 - d) Other information as requested by MDH.
- 3.4.2 Submit a final report by December 30, 2019. MDH will issue guidance to grantees on the content of this report, which will include evaluation outcomes that measure the extent to which the understanding of public health concepts has changed, abilities to address common myths and misunderstandings of substance use, and preparedness to present the materials.

3.4.3 Monthly and final reports should be submitted in accordance with the following schedule:

Report	Performance period	Due date
Month 1 Report	July 1, 2019 – July 30, 2019	Due August 15, 2019
Month 2 Report	August 1 – August 31, 2019	Due September 15, 2019
Month 3 Report	September 1, 2019 - September 30, 2019	Due October 15, 2019

Month 4 Report	October 1, 2019 - October 31, 2019	Due November 15, 2019
Month 5 Report	November 1, 2019 - November 29, 2019	Due December 15, 2019
Final report	July 1, 2019 - November 29, 2019	Due December 30, 2019

3.4.4 Participate in MDH evaluation activities, which may include trainings, technical assistance, interviews, surveys, and/or site visits.

3.5 Invoicing

Grantees will be required to adhere to the following invoicing requirements:

3.5.1 General

- a) All invoices for services shall be signed by the Grantee and submitted to the Grant Monitor. All invoices shall include the following information:
 - Grantee name:
 - Remittance address;
 - Federal taxpayer identification number (or if sole proprietorship, the individual's social security number);
 - Invoice period;
 - Invoice date:
 - Invoice number
 - State assigned Grant number;
 - State assigned (Blanket) Purchase Order number(s);
 - Goods or services provided; and
 - Amount due.

Invoices submitted without the required information cannot be processed for payment until the Grantee provides the required information.

b) The Department reserves the right to reduce or withhold Grant payment in the event the Grantee does not provide the Department with all required deliverables within the time frame specified in the Grant or in the event that the Grantee otherwise materially breaches the terms and conditions of the Grant until such time as the Grantee brings itself into full compliance with the Grant.

3.5.2 Invoice Submission Schedule

The Grantee shall submit invoices in accordance with the following schedule:

Month	Period of performance	Invoice due date
Month 1 Invoice	July 1, 2019 – July 30, 2019	Due August 15, 2019
Month 2 Invoice	August 1 – August 31, 2019	Due September 15, 2019
Month 3 Invoice	September 1, 2019 – September 30, 2019	Due October 15, 2019
Month 4 Invoice	October 1, 2019 - October 31, 2019	Due November 15, 2019
Month 5 Invoice	November 1, 2019 - November 29, 2019	Due December 15, 2019
Final Invoice	July 1, 2019 - November 29, 2019	Due December 30, 2019

SECTION 4 - APPLICATION FORMAT

4.1 Two Part Submission

Applicants shall submit the following documents in separate sealed envelopes:

- Project Narrative
- Budget Justification

4.2 Applications

- 4.2.1 Each Application shall contain an unbound original, so identified, and three (3) copies and one labeled "*PIA Proposal Narrative". Unless the resulting package will be too unwieldy, the State's preference is for the Application to be submitted in a single package including a label bearing:
 - The RFA title and number.
 - Name and address of the Applicant, and
 - · Closing date and time for receipt of Applications

To the Procurement Officer prior to the date and time for receipt of Applications (see Section 1.6 "Applications Due (Closing) Date and Time").

- 4.2.2 Applications will be shown only to State employees, members of the Evaluation Committee, or other persons deemed by the Department to have a legitimate interest in them.
- *Redacted Public Information Act (PIA) Copy: All information submitted as part of this proposal is subject to release under the Public Information Act. Please submit a redacted PIA copy of the Proposal Narrative. The Procurement Officer must receive justifications for each section redacted as to how those sections qualify for redaction pursuant to General Provisions § 4-335 or 4-336, Annotated Code of Maryland, or under other provisions of the Public Information Act.

4.3 Project Narrative

Note: No pricing information is to be included in the Project Narrative. Pricing information is to be included only in the Budget Narrative.

4.3.1.1 Transmittal Letter:

- Applicant;
- Solicitation Title and Solicitation Number that the Application is in response to;
- Signature, typed name, and title of an individual authorized to commit the Applicant to its Application;
- Federal Employer Identification Number (FEIN) of the Applicant, or if a single individual, that individual's Social Security Number (SSN);
- Applicant's MBE certification number (if applicable);
- Applicant's SBR number (if applicable)

4.3.1.2 The Project Narrative shall include the Scope of Work, including the Work Plan (as described in Section 3.3).

4.3.1.3 Mandatory Requirements Documentation

Does not apply.

4.3.1.4 Applicant Technical Response to RFA Requirements and Proposed Work Plan:

a. The Applicant shall address each Scope of Work requirement (Section 3.2) in its Project Narrative and describe how its proposed services, including the services of any proposed subcontractor(s), will meet or exceed the requirement(s). If the State is seeking Applicant agreement to any requirement(s), the Applicant shall state its agreement or disagreement. Any paragraph in the Project Narrative that responds to a Scope of Work (Section 3.2) requirement shall include an explanation of how the work will be done. Any exception to a requirement, term, or condition may result in having the Applicant deemed non-responsive.

4.4 Budget Narrative

- 4.4.1 Under separate sealed cover from the Project Narrative and clearly identified in the format identified in Section 4.2 "Applications," the Applicant shall submit an original unbound copy of the Budget Narrative. The Budget Narrative shall contain all price information in the format specified in Exhibit B. The Applicant shall complete the Budget Narrative Form only as provided in the Budget Narrative Form.
- 4.4.2 The Applicant shall attach to the Budget Form a Budget Narrative document that details the total cost of the proposed activities. The budget categories may include: Personnel (salary and fringe), Consultants; Travel; Contractual; Supplies; Operating Costs; and Other project-related costs.
- **4.4.3** The State reserves the right to approve or deny budget line items and require that Applicants revise budget prior to award approval.
- 4.4.4 Allowable and unallowable costs:
 - a) The mileage rate is 54.5¢/mile.
 - b) While lobbying activities and advocating or organizing for particular legislation are unallowable, funded strategies may include policy information, education, and/or training.
 - c) No more than 10% indirect costs due to the funding source CDC Cooperative Agreement for Emergency Response: Public Health Crisis Response - 2018 Opioid Crisis Cooperative Agreement.
 - d) Grantee and sub-grantees shall not use CDC Crisis CoAg grant funds to:
 - Support the costs of operating clinical trials of investigational agents, equipment or treatments;
 - Make payments directly to recipients of services, except for reimbursement of reasonable and allowable out-of-pocket expenses associated with consumer participation in State or consortia activities;
 - Support legal services;

- Provide direct maintenance expenses of privately owned vehicles or any other costs associate with a vehicle, such as lease or loan payments, vehicle insurance, or license registration fees;
- Purchase or improve land, or to purchase, construct, or make permanent improvements to any building, except for minor remodeling;
- · Pay property taxes;
- · Fund capital improvement projects;
- Supplant personal costs and/or other activities;
- Prepare, distribute, or use of any material (publicity/propaganda) or to pay the salary
 or expenses of grants, contract recipients, or agents that aim to support or defeat the
 enactment of legislation, regulation, administrative action, or executive order
 proposed or pending before a legislative body.

SECTION 5 – EVALUATION COMMITTEE, EVALUATION CRITERIA, AND SELECTION PROCEDURE

5.1 Evaluation Committee

Evaluation of Applications will be performed by a committee established for that purpose and based on the evaluation criteria set forth below. The Evaluation Committee will review Applications, participate in Applicant oral presentations and discussions, and provide input to the Procurement Officer. The Department reserves the right to utilize the services of individuals outside of the established Evaluation Committee for advice and assistance, as deemed appropriate.

5.2 Project Narrative Evaluation Criteria

The criteria to be used to evaluate each Project Narrative are listed below.

- a) Does the applicant show fidelity to and commitment to harm reduction framework and evidence-based practices?
- b) Does the applicant have existing curriculum ready to be adapted?
- c) Does the applicant have existing training event planning and cohort support experience?
- d) Does the applicant have existing experience in media development, promotional or educational?
- e) Is the proposal high quality and clarity?
- f) Are there evaluation plans included that will accommodate MDH requests for reports and other information?
- g) Does the proposal include an appropriate timeline?

5.3 Budget Narrative Evaluation Criteria

All Qualified Applicants will be ranked from the lowest (most advantageous) to the highest (least advantageous) based on the rating of the Project Narratives. The Budget Narrative (including the Budget Form and Budget Narrative), will be evaluated based on reasonable cost given the time and effort described in the Project Narrative. The budget line items must be within the stated guidelines set forth in this RFA and as submitted on Exhibit C – Budget Narrative.

5.5 Selection Procedures

5.5.1 General

The Grant will be awarded in accordance with the Standard Grant Agreement method outlined in the Announcement. The State may determine an Applicant to be non-responsive and/or an Applicant's Application to be not reasonably susceptible of being selected for award at any time after the initial closing date for receipt of Applications and prior to Grant award. If the State finds an Applicant to be not responsive and/or an Applicant's Project Narrative to be not reasonably susceptible of being selected for award, that Applicant's Budget Narrative will be returned if the Budget Narrative is unopened at the time of the determination.

5.5.3 Award Determination

Upon completion of the Project Narrative and Budget Narrative evaluations and rankings, each Applicant will receive an overall ranking. The Procurement Officer will recommend award of the Grant to the responsible Applicant that submitted the Application determined to be the most advantageous to the State. In making this most advantageous Application determination, technical factors and financial factors will be weighted equally.

RFA ATTACHMENTS

EXHIBIT B - Budget Narrative Form

This must be completed and submitted with the Project Narrative in a separate envelope.

EXHIBIT C—Budget Justification

This must be completed and submitted with the Project Narrative, along with the Budget Narrative Form, in a separate envelope.

ATTACHMENT A - Standard Grant Agreement

This is the sample grant agreement used by the Department. It is provided with the RFA for informational purposes and is not required to be submitted at Application submission time. Upon notification of recommendation for award, a completed standard grant agreement will be sent to the recommended awardee for signature. The recommended awardee must return to the Procurement Officer three (3) executed copies of the Standard Grant Agreement within five (5) Business Days after receipt. Upon award, a fully-executed copy will be sent to the Grantee.

ATTACHMENT B - RFA Document Checklist

Use this checklist to ensure that the required documents for the Project Narrative and Budget Narrative are completed.

ATTACHMENT C - Work Plan Template

EXHIBIT B – BUDGET FORM

BUDGET FORM

The Budget Narrative shall contain all price information in the format specified on these pages. Complete the Budget Form only as provided in the Budget Form format. Do not amend, alter or leave blank any items on the Budget Form. Failure to adhere to any of these instructions may result in the Budget Narrative being determined non-responsive and rejected by the Department.

Submitted By:				
Authorized Signature:		Date:		
Printed Name and Title:				
Company Name:				
Company Address:				
Location(s) from which services will be performed (City/State):			
FEIN:				
Telephone: (Fax: ()		
E-mail:				

Budget Summary

Line Item	Qty	Unit Cost	Total Cost
Salary			The second secon
Fringe		Personal de la companya de la compan	
Contractual			
Travel			The state of the s
Operating Costs			
Supplies			
Other			
TOTAL			

EXHIBIT C-BUDGET NARRATIVE

BUDGET NARRATIVE TEMPLATE

Sample Line Item Justification

Personnel (Preventionist): \$15,600

Justification: The Preventionist will be responsible for: conducting project-related relationship-building activities with new and existing partners; developing informational materials for community leaders and the public, including fact sheets and social media posts related to the project topic; coordinating and facilitating monthly project meetings with partners; conducting awareness-building activities within key demographic areas in the community to engage the project target audience; developing and providing professional training at targeted local governmental agencies and private businesses; attending community events relevant to the project and the project's partners. The Project Coordinator will also attend RISEMD meetings, collect data, conduct evaluation activities, prepare reports, and act as a liaison with the MDH Grant Monitor.

\$30/hr x 520 hours = \$15,600

ATTACHMENT A - STANDARD GRANT AGREEMENT

ORGANIZATIONS RECEIVING APPROPRIATIONS FROM THE STATE STANDARD GRANT AGREEMENT

This Agreement, which is exe	ecuted in compliance with Section 7-402 of the State Finance and	d Procurement Article of the Annotated
Code of Maryland, is made this 1st day	of July, between the State of Maryland (the "State"), acting the	rough the Maryland Department of
Health (the "Department"), located at	500 N Calvert St. Baltimore, MD 21201 and	(the "Grantee"), located at
in	County, Maryland, a Maryland Corporation.	

- 1. Effective on the date of execution of this Agreement, the State is extending to the Grantee a grant in the amount of twenty-five thousand Dollars (\$25,000.00) (the "Grant"), which the Grantee shall use only for the following purposes: to-develop curriculum and hold Master Presenter training events in Maryland for the purposes of building a state-wide, multi-disciplinary network of presenters who can deliver content on public health and substance use in the context of the current opioid overdose crisis.
- 2. Any expenditure of Grant funds that is not consistent with purposes stated in paragraph 1 may, at the sole discretion of the Department, be disallowed. Should any expenditure be disallowed or should the Grantee violate any of the terms of this Agreement, the State may require repayment to the State Treasury, an offset from any State Grant to the Grantee in the current or succeeding fiscal year, or other appropriate action. The Grantee shall repay to the State any part of the Grant that is not used for the purposes stated in paragraph 1 within 3 months after the date of this Agreement.
- 3. The Grantee may not sell, lease, exchange, give away, or otherwise transfer or dispose of real or personal property, or any part of or interest in real or personal property, acquired with Grant funds without the prior written consent of the Department. This includes transfer or disposition to a successor on the merger, dissolution, or other termination of the existence of the Grantee. The Grantee shall give the Department written notice at least 30 calendar days before any proposed transfer or disposition. Any proceeds from a permitted transfer or disposition shall be applied to repay to the State a percentage of that portion of the Grant allocable to the particular real or personal property transferred or disposed of, unless the Department and the Grantee agree to other terms and conditions. The percentage shall be equal to the percentage of the unadjusted basis of the property that would remain if the property had been recovery property placed in service after December 31, 1980 and if all allowable deductions had been taken up to the time of disposition under the Accelerated Cost Recovery System (ACRS) specified in the United States Internal Revenue Code, Section 168(b)(1).
- 4. For any item of real or personal property that is acquired with Grant funds and has an original fair market value of Five Thousand Dollars (\$5,000) or more, the Grantee shall, at its own expense, and for the reasonable useful life of that item or for 5 years, whichever is less, obtain and maintain insurance. The insurance shall provide full protection for the Grantee and the State against loss, damage, or destruction of or to the real or personal property. The Grantee shall, on request, provide the Department with satisfactory evidence of its compliance with this requirement. Proceeds of insurance required by this paragraph shall be applied toward replacement of the real or personal property or toward the partial or total repayment of the State of the Grant, in the sole discretion of the Department.
- 5. The Grantee may not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, or any other characteristic forbidden as a basis for discrimination by applicable laws, and certifies that its Constitution or by-laws contains a non-discrimination clause consistent with the Governor's Code of Fair practices.
 - 6. The person executing this Agreement on behalf of the Grantee certifies, to the best of that person's knowledge and belief, that:
 - A.) Neither the Grantee, nor any of its officers or directors, nor any employee of the Grantee involved in obtaining contracts with or grants from the State or any subdivision of the State, has engaged in collusion with respect to the Grantee's application for the Grant or this Agreement or has been convicted of bribery, attempted bribery, or conspiracy to bribe under the laws of any state or of the United States;
 - B.) The Grantee has not employed or retained any person, partnership, corporation, or other entity, other than a bona fide employee or agent working for the Grantee, to solicit or secure the Grant or this Agreement, and the Grantee has not paid or agreed to pay any such entity any fee or other consideration contingent on the making of the Grant or this Agreement;
 - C.) The Grantee, if incorporated, is registered or qualified in accordance with the Corporations and Associations Article of the Annotated Code of Maryland, is in good standing, has filed all required annual reports and filling fees with the Department of Assessments and Taxation and all required tax returns and reports with the Comptroller of the Treasury, the Department of Assessments and Taxation, and the Department of Labor, Licensing and Regulation, and has paid or arranged for the payment of all taxes due to the State; and
 - D.) No money has been paid to or promised to be paid to any legislative agent, attorney, or lobbyist for any services rendered in securing the passage of legislation establishing or appropriating funds for the Grant.

- E.) Neither the Grantee, nor any of its officers or directors, nor any person substantially involved in the contracting or fund raising activities of the Grantee, is currently suspended or debarred from contracting with the State or any other public entity or subject to debarment under the Code of Maryland Regulations, COMAR 21.08.04.04.
- 7. Within 60 calendar days after the close of any grant period in which the Grantee receives funds under this Agreement, the Grantee shall provide to the Department an itemized statement of expenditures, showing how the funds were expended for that grant period. In addition, a copy of the statement shall be mailed to the Director, General Accounting Division, Office of the Comptroller of the Treasury, Room 200, Louis L. Goldstein Treasury Building, Annapolis, Maryland 21401. The Grantee shall retain bills of sale or other satisfactory evidence of the acquisition of any real or personal property for at least 3 years after the date of this Agreement. The Department, the Department of Budget and Management, the State Comptroller, and the Legislative Auditor, or any of them, may examine and audit this evidence, on request, at any reasonable time within the retention period.
- The Grantee shall comply with Section 7-221, 7-402, and 7-403 of the State Finance and Procurement Article of the Annotated Code of Maryland, as applicable.
 - 9. The laws of Maryland shall govern the interpretation and enforcement of this Agreement.
 - 10. This Agreement shall bind the respective successors and assigns of the parties.
- 11. The Grantee may not sell, transfer, or otherwise assign any of its obligations under this Agreement, or its rights, title, or interest in this Agreement, without the prior written consent of the Department.
 - 12. No amendment to this Agreement is binding unless it is in writing and signed by both parties.
 - 13. The following items are incorporated by referenced and made a part of this Agreement

IN TESTIMONY WHEREOF, WITNESS the hands and seals of the parties.

	GRANTEE		<u>DEPARTMENT</u>
, methodological and application	(Name of Corporation or Association)		Maryland Department of Health ame of Corporation or Association)
D ₁		Ву:	
Name:	SEAL	Name:	SEAL Fran Phillips, RN MHA
Title:		Title: Deputy S MDH	Secretary, Public Health Services,
Date:		Date:	

ATTACHMENT B - RFA Document Checklist

Projec	t Narrative Checklist:
	Transmittal Letter
	Project Narrative including Scope of Work (See Section 3.2 Scope of Work - Requirements)
	Work Plan (See Attachment C)
Budge	t Narrative Checklist:
	Budget Form (See Exhibit B – Budget Form)
	Budget Narrative (See Exhibit C – Budget Narrative)

Attachment C-Work Plan template

Maryland Department of Health Regrounding Our Response Work Plan July 1, 2019 – November 29, 2019

Work Plan Program Componen	t:
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Objectives	Activities Planned To Achieve This Objective	Estimated Completion Date
Create timely and relevant curriculum	 Compile existing curriculum materials Reach out to partners to acquire relevant Maryland data 	
Pilot curriculum with multi-stakeholder groups	 Coordinate with MDH to schedule trainings with relevant multi-stakeholder groups Create and utilize evaluation tool 	
Prepare Master Presenters to schedule and perform trainings with multi-stakeholder groups	 Coordinate with MDH to connect Master Presenters with multi-stakeholder groups in their jurisdiction Plan effective Master Presenter Training Event to prepare participants to perform trainings 	

Work Plan Program Component	•
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Project goal:		
Objectives	Activities Planned To Achieve This Objective	Estimated Completion Date