Request for Proposals:

Global Public Health Emergency Management Training Needs Analysis and Curriculum Development

Deadline for Submission:
5:00 p.m. ET, January 17, 2017

The Opportunity

With funding from the CDC Office of Public Health Preparedness and Response, Global Emergency Management Capacity Development Branch (GEMCDB), the National Coordinating Center for Public Health Training (NCCPHT), housed at the National Network of Public Health Institutes (NNPHI), seeks a partner to complete an in-depth training needs analysis and design a standardized curriculum plan for emergency management training modules that address competencies and key behaviors for basic through expert proficiency levels.

Background

This opportunity is part of a larger body of work to support the Global Health Security Agenda (GHSA). The GHSA framework was developed to strengthen global health security to prevent avoidable epidemics, detect threats early, and respond rapidly and effectively. GHSA efforts help countries actualize International Health Regulations (IHR) by creating clear goals and activities that support achievement of the regulations.

Specifically, the work completed under this funding opportuning will support the *Respond* objective of the GHSA, which states that countries will have a public health emergency operations center functioning according to minimum common standards[1]; maintaining trained, functioning, multi-sector rapid response teams[2]

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[1] *"Minimum common standards" are defined as emergency management program standards such as the International Organization for Standardization (ISO) 22300 family of standards, or national equivalents to include the WHO Emergency Response Framework (www.who.int).*

and "real-time" bio-surveillance laboratory networks and information systems[3]; and trained EOC staff capable of activating a coordinated emergency response within 120 minutes of the declaration of a national public health emergency[4]. It is important to note that the concept of a public health EOC is viewed broadly in the scope of GHSA priorities. Establishing an EOC entails the allocation of physical space to collect, analyze, and display disease surveillance information to conduct or coordinate a public health response. Also inherent in EOC development is the need for trained staff and emergency management systems to underpin and guide use of available resources.

As implementation of GHSA continues over the next 5 years, demands for public health emergency management training to meet priority country needs will increase. Additionally, as countries increase IHR (2005) capacity for response, demand will shift from delivery of basic emergency management training to the training of staff in more advanced emergency management tools and applications, as well as training staff in developing comprehensive emergency management programs that meet international accreditation and certification standards. These more complex content elements have not yet been developed by CDC.

In recent years, the Office of Public Health Preparedness and Response, Division of Emergency Operations (OPHPR/DEO) has developed training programs designed to build public health emergency management capacity for international preparedness and response professionals. These training programs were developed for delivery both in-country and at CDC headquarters in Atlanta, Georgia. In-country training programs have covered tenets of emergency management ranging from Incident Command/ Incident Management Systems to standard operating procedure development, and have been delivered to countries including Ethiopia, Cameroon, China, Vietnam, India, Jordan, Thailand, and Uganda. CDC-Atlanta based trainings include 2 to 3-week focused intensives in public health emergency management, 1 to 2-month intensives in specific emergency management functional areas, and the Public Health Emergency Management Fellowship – a 4-month program designed to provide an understanding of the management and operations of a public health EOC during steady-state and response modes. CDC subject matter experts (SME) have been responsible for both the development and instructional delivery of training content.

In nearly all cases, training was tailored to country-specific needs as determined by

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[2] *"Rapid response teams" are rostered, trained, multidisciplinary teams able to deploy to a public health emergency in any part of the country within 24 hours to investigate and characterize the epidemic, evaluate patients, collect clinical specimens, oversee containment measures, and communicate with public health authorities.*
[3] *A "real-time" network or system is one in which information generated by one node in the network or system can be distributed to another node within the network or system within 120 minutes.*
[4] *"Activating a coordinated emergency response" is defined as conducting a first conference call or meeting including all relevant emergency management sectors and functions (e.g., command/management, operations, planning, logistics, administration/finance, and communications).*

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the CDC SME in coordination with US representatives of the country's training need. The developed training products are housed in various locations, often personal CDC internet files, and not always readily available to SME needing to develop similar training products for other countries. This can result in duplication of effort in training development and potential inconsistencies in content across audiences. While the training program is expected to be mapped to competencies, there is currently no mapping of competencies to a curriculum. Additionally, no formal curriculum has been developed by an instructional designer using cultural competence as a cornerstone.

The public health emergency management training products developed for Atlanta-based training and in-country training were created drawing on one or more of the following sources of information: World Health Organization standards, regional standards including strategies like the Asia Pacific Strategy for Emerging Diseases and guidelines for Integrated Disease Surveillance and Response (IDSR) in the African Region, available in-country emergency preparedness and response doctrine, U.S. Federal Emergency Management Agency-based standards, resources available from U.S. educational institutions (designated Preparedness and Emergency Response Learning Centers and others), and CDC tailored emergency management standards. These training products were then amended by the personal knowledge and expertise of the instructor and what s/he assumed were the desired learning objectives of a designated country audience. Despite the development of many training plans for public health emergency management and EOC, a single source library of standardized and agreed upon training products has not been available for public health emergency management training.

Purpose

Through this request for proposals (RFP), CDC and NCCPHT seek support to complete an in-depth training needs analysis and design a strategy for a standardized curriculum of emergency management training modules that address competencies and key behaviors for basic through expert proficiency levels.

The analysis will be conducted along with CDC to identify specific content development needs and to gain a clear understanding of the target audiences. CDC staff will provide the subject matter expertise, informing the identification of training needs in the countries they support. This is an exploratory analysis and review of all existing in-country and fellowship curricula and training modules to identify gaps. Existing modules require review to identify specific modifications needed, including their relevancy to the international audience (e.g., module update, re-design/re-develop/merge modules, develop new modules).

The analysis will inform design of a comprehensive, standardized curriculum plan for emergency management training for 17 priority countries. The curriculum plan must align with the basic, intermediate, advanced, and expert Global Public Health

[Emergency Management (GPHEM) Proficiency Levels](#) and map to the competencies and key behaviors outlined in the [GPHEM Core Competency Model.](#)

The training needs analysis and the curriculum plan will be presented to GEMCD Branch leadership and SMEs to obtain their feedback.

Eligibility

This RFP is open to all organizations that have experience and capacity to effectively meet project deliverables. If necessary, applicants may partner with other persons or organizations to ensure access to needed content and technical expertise to fulfill the deliverables. One primary point of contact/fiduciary agent will be required.

Funding and Timeline

Up to $155,000 is available to support the contract with the selected applicant. The selected applicant will be required to work closely with NCCPHT and CDC and be responsive to their guidance to achieve the approved programmatic goals. It is estimated that the primary expenses will be staff time and other direct costs. Please also allocate funds for at least two trips to CDC in Atlanta for an in-person project kick-off meeting and presentation of findings and proposed curriculum plan.

Use of Funds: Funds may be used for project staff salaries and benefits, consultants, contractual costs, supplies, and other direct costs, and indirect costs. Applicants are recommended to utilize their federally negotiated indirect rate or the maximum allowable indirect rate at/or below 22% on direct costs and an 8% indirect rate on contractual services.

The project period will begin February 13, 2017, and all activities in the Scope of Work must be implemented by April 30, 2017. There is potential for continued engagement beyond April 30, 2017 to support 1) the development of training modules outlined in the curriculum plan, as well as 2) the creation of a training resource library to house the modules and related resources. However, applicants are advised that neither solicitation nor any contractual agreement stemming from it creates a guarantee of an additional, no-cost extension period beyond April 30, 2017.

Scope of Work & Deliverables

The selected sub-recipient will work collaboratively with the team (NCCPHT, CDC and other stakeholders) to lead the following activities:

1. **Collaborate with CDC to conduct a training needs analysis** that will identify gaps in the current curricula (e.g., Identify modules that need to be developed and/or revised and the most effective medium for each, such as classroom

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and/or eLearning). At a minimum, the training needs analysis methodology should include: review of all training currently available (developed by CDC), competencies, a bank of learning objectives for each competency/key behavior (developed by CDC) and other relevant resources, as well as key informant interviews or focus groups with approximately 10 CDC team members who provide direct training and technical assistance to GHSA countries.

DELIVERABLE: Training Needs Analysis Report

2. Using the CDC-developed Instructional Design frameworks, design a comprehensive and standardized GPHEM curriculum plan, including eLearning and classroom-based learning as well as modules to be translated into French, Portuguese, and/or Spanish which align with the proficiency scale of Basic-Intermediate-Advanced-Expert. The GPHEM curriculum plan should include:
    a. Training module needs for each proficiency level (basic, intermediate, advanced, expert).
    b. Training module needs for eLearning and classroom-based learning.
    c. Specific training modules and length, pre-requisites, and supporting materials (toolkits, job aids, templates, etc.)
        i. Recommended changes to module title, content, length, pre-requisites, and/or supplemental learning needs for existing training modules.
        ii. Recommended modality for presentation, interactivity and accessibility of education and resources for new training modules.
    d. Learning evaluation plan and tools for the curriculum, based on industry standards.
    e. Consideration for adaptation to country context without loss of fidelity, including identification of training modules that need or will need translation into French, Portuguese, and/or Spanish.
    f. Assurance that all 7 GPHEM competencies and 33 key behaviors are effectively addressed.
    g. Systems requirements, including plans to adhere to Section 508 compliance requirements and all federal government requirements for electronic information security, and hosting requirements/ recommendations for online training modules.

DELIVERABLE: Comprehensive, Standardized Curriculum Plan

3. Present a) training analysis report and b) recommended GPHEM curriculum plan to GEMCD Branch leadership and teams to obtain their feedback and approval of the overall curricula design plan.
    a. Ensure opportunities for feedback loops to occur prior to finalization of report and curriculum plan

DELIVERABLE: Presentation to CDC Leadership

How to Apply

Informational Webinar
All applicants are encouraged to join an Informational Webinar on **December 21, 2016 at 12:00 p.m. ET** to review the RFP and ask questions. The webinar will be recorded and available to those unable to participate. [Register](#) here for the Webinar.

Applicant Questions
For questions regarding this RFP, email training@nnphi.org. In the email, please note the name of the RFP in the subject line. Expect responses within 3 business days, if not sooner. All questions and responses (as well as the recording of the Informational Webinar) will be made available through the [FAQ Link.](#) The deadline to submit questions is **5 p.m. ET, December 21, 2016.**

Application Submission (2 steps)
Step 1: Please submit a brief letter of intent to apply to: training@nnphi.org **by 5 p.m. ET, December 27, 2016.** You will receive confirmation within 24 hours via email. The letter of intent should be as brief as possible, please include name of applicant and organization.

Step 2: Please submit your proposal using the Application Template and Budget Narrative Template, available on subsequent pages. Email your completed application as an email attachment to training@nnphi.org no later than **5 p.m. ET, January 17, 2017.**

After submitting your proposal, if you do not receive a confirmation of receipt within 24 hours, please email training@nnphi.org to ensure receipt. **In fairness to all applicants, NNPHI will not accept any proposals received after the deadline for any reason and will not review incomplete applications.**

Review and Interview Process
NCCPHT, CDC and other members of the selection team will review and score applications based on the selection criteria noted below. **The finalists *may* be contacted to participate in a brief 30-minute interview on February 9 or 10.** Interview candidates will be asked to share more about their experience with and approach to the project activities. All applicants will be notified of their selection status by **February 13, 2017.**

Selection Criteria
Applications will be reviewed by an external review panel as well as the project team. Selection will be based on the following criteria (note the point values for each criteria):
1. Demonstrated experience conducting training needs analyses or similar work (15 points).

2. Demonstrated knowledge, experience and expertise in the design of training curricula, including (25 points total):
    a. Application of instructional design standards, core competencies, and proficiency scales (10 points)
    b. Application of industry standard learning evaluation methods for measuring learning levels that occur post-training (3 points)
    c. Inclusion of adult-learning principles as well as opportunities for the users to engage with the material (5 points)
    d. Adaptation of trainings/modules for international audiences of different contexts without loss of fidelity. This includes language translation needs. (5 points)
    e. Ability to adhere to all federal government requirements for electronic information security and Section 508 compliance (2 points)
3. Demonstrated knowledge, experience and expertise in public health emergency management, including in international contexts (15 points).
4. The proposed approach to work is sound (based on instructional design and project management principles), and timeline for completion is feasible (25 points).
5. The key staff supporting the project have the defined expertise and experience as stated in items 1-3 above (10 points).
6. The budget is sound with effective and realistic use of resources (5 points).
7. The proposal is well-written and complete (5 points).
8. If previously engaged as a sub-recipient with NCCPHT/CDC, ability to meet deliverables on time and within budget (unscored).

Summary of Milestone Dates	
December 12, 2016	RFP released
December 21, 2016, 12:00 p.m. ET	Informational webinar: Register Here
December 21, 2016, 5:00 p.m. ET	Deadline to submit questions
December 27, 2016 by 5:00 p.m. ET	Letter of Intent due to training@nnphi.org
January 17, 2017 by 5:00 p.m. ET	Proposals due to training@nnphi.org
February 9-10, 2017	Interviews conducted with finalists (as needed)
February 13, 2017	All applicants notified of selection status
Week of February 13, 2017	Project kick-off call
February 15 – April 30, 2017	Project period

Notice to Applicants

Please be advised that NNPHI reserves the right to modify the terms of the RFP with reasonable notification to all interested parties. This RFP and any related discussions or evaluations by anyone create no rights or obligations whatsoever. NNPHI may cancel or delay this solicitation at any time at its own discretion. Anything to the contrary notwithstanding, the contract executed by NNPHI and

the selected applicant, if any, will be the exclusive statement of rights and obligations extending from this solicitation. Applicants are further advised that all information submitted in response to this solicitation shall remain in the public domain.

Suggested reading:

- [CDC Global Health Security Agenda website](#)
- [CDC's Global Public Health Emergency Management (GPHEM) Core Competency Model.](#)
- [CDC's Global Public Health Emergency Management Proficiency Scale](#)
- [CDC Instructional Design Template](#)

Application Template: Global Public Health Emergency Management Training Needs Analysis and Curriculum Development

[Download Application Template in Google Docs](#)

In no more than ten (10) single-spaced pages, 12 pt. Calibri font, please respond to the questions below. The budget narrative and sample files do not count against the ten- page limit. As a reminder, finalists may be asked to participate in an interview to provide more detail on their capacity to successfully complete this project.

Please combine the application and attachments as a single PDF document and submit via email to training@nnphi.org no later than January 17, 2017. Late submissions will not be accepted and incomplete applications will not be reviewed.
_____

Legal Name of Organization:

Tax Identification Number:

Contact person for this application:

Email address:

Phone:

1) Interest and Capacity: Describe your interest in this work, and provide a brief description of your organization's capacity and expertise relevant to this project.

2) Demonstration of Experience: Describe 1-2 past experiences/projects that *demonstrate* your ability to complete the scope of work as outlined. Please include experience related to:
    a. Conducting training needs analysis including review and analysis of existing courses
    b. Design of training curricula that:
        i. Apply instructional design standards, core competencies, and proficiency scales
        ii. Include adult-learning principles as well as opportunities for the users to engage with the material
        iii. Consider adaptation for different contexts without loss of fidelity
        iv. Include learning evaluation plans and tools
    c. Knowledge of public health emergency management, including in international contexts
    d. Engaging appropriate subject matter expertise
    e. Ability to adhere to all federal government requirements for electronic information security and Section 508 compliance

3) Approach to work: If you were awarded a contract to complete this work, what would your approach be? Please include a timeline for project and deliverables and address the following in your response:
   a. Describe how you would complete the training needs analysis as outlined in the scope of work.
      i. What would be your methodology for collecting and analyzing data?
      ii. How would you identify gaps, trainer and audience needs, required changes, and prerequisites?
      iii. How would you ensure opportunities for feedback loops with the CDC prior to presenting finalized report?

   b. Describe your approach to designing the curriculum plan.
      i. What would your process be to determine alignment with the proficiency scale (Advanced-Expert)?
      ii. What types of instructional design components and effective learning modalities or techniques would you recommend or explore using?
      iii. How would you ensure that the curriculum plan is adaptable to be culturally competent in different country settings?
      iv. What types of evaluation methodologies and/or techniques would you use to demonstrate training outcomes, successes, and areas needing improvement?
      v. How would you ensure feedback loops with CDC prior to presenting finalized plan?

4) Provide a sample training needs analysis that your organization developed. Briefly describe how you envision this analysis would be similar and how it would be different than your sample with regard to review, analysis, and development of recommendations. *Please include links or attach a copy of the needs analysis to your application. Include your narrative in the ten-page limit. Please note, however, that the sample itself is not included in the page limit.*

5) Who will be the primary staff person(s) completing the work? List each staff person and describe their qualifications for this work, including experience. *Please attach a copy of staff CVs to your application. The CVs are not included in page limit.*

6) Provide a brief budget narrative for up to $155,000 clearly stating how your organization will utilize the funds for the project period. It is estimated that the project's primary expense will be staff time and other direct costs. Document additional sources of funding or in-kind support, if any. Note that applicants will be asked to confirm that the funds from NNPHI will not be used to purchase food or for lobbying/advocacy efforts. *Use the Budget Narrative Template in Appendix A of this document. Your Budget Narrative is not included in the ten-page limit.*

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Appendix A: Budget Narrative Template

Complete the table below and the budget narrative portion on the following page.
The Budget Narrative is <u>not</u> included in the ten-page limit.

Line Item		Quantity	Cost	Notes (include in-kind support)
Personnel: Name, Title & Wages	*Annual Salary*	*FTE %*	*Total*	
Fringe Benefits				
Personnel TOTAL				
Consultant Costs				
Contractual Services				
Supplies (office)				
Travel Costs				
Other Expenses				
Telephone				
Printing				
Postage				
Copying				
IT				
Other Direct Costs - subtotal				
Total Direct Costs				
Indirect Costs *				
TOTAL BUDGET				

Applicants are recommended to utilize their federally negotiated indirect rate or a maximum indirect rate at/or below 22% on direct costs and an 8% indirect rate on contractual services.

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A. **Personnel Salaries:** For each requested position, please describe the scope of responsibility and assets for each position, relating it to the accomplishment of program objectives.

B. **Fringe Benefits:** Provide information on the rate of fringe benefits used and the basis for their calculation. If a fringe benefit rate is not used, itemize how the fringe benefit amount is computed.

C. **Sub-contractual Costs**: A subcontractor is an entity that performs duties that are either the same as or directly related to the scope of work of the project. Their efforts contribute directly to the outcome of the project. Please provide the method of selection of a subcontractor, the name of the contractor if known, scope of work, method of accountability, and budget.

D. **Consultant Costs:** This category is appropriate when hiring an individual to give professional advice or services (e.g., technical or skilled consultant, etc.) for a fee but not as an employee of the contracted organization. If applicable, please describe the method of selection for a consultant, name (if known), scope of work, and expected rate of compensation, including travel.

E. **Travel:** Please provide clear travel information regarding who, when, where, why, and how, as well as how travel relates to or supports specific project objectives. Please include funds for at least two trips to CDC in Atlanta for project kick-off and presentation of findings.

F. **Supplies:** Individually list each item requested showing the unit cost of each item, number needed, and total amount. Provide justification for each item and relate it to specific program objectives.

G. **Other**: This category contains items not included in the previous budget categories. Individually list each item requested and provide appropriate justification related to the program objectives.