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## FUNDING OPPORTUNITY

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**Published:** August 16, 2022

**Funding Amount:** Up to \$75,000 for a Contractor

**Project Period:** October 1, 2022 to July 31, 2023

**Eligibility:** This opportunity is available to members of the National Network of Public Health Institutes (NNPHI) and private/public institutions of higher education, including Health Resources and Services Administration (HRSA)-supported Public Health Training Centers, and consultants/contractors.

**Award Mechanism:** NNPHI anticipates making one subaward for Project Firstline support under CFDA 93.421 Centers for Disease Control and Prevention Cooperative Agreement 6 NU38OT000303-02-04.

### Timeline:

Request for Proposals (RFP) released	August 16, 2022
Deadline to submit questions	September 1, 2022 at 5:00 PM ET
Proposal submission deadline	September 16, 2022 at 5:00 PM ET
Review and interview period	September 17 to 23, 2022
Notice of selection status	September 28, 2022
Project period	October 1, 2022 to July 31, 2023

### Objective

NNPHI seeks a partner to recruit participants and conduct listening sessions about essential skills and other training needs of the public health workforce (PHW) involved in infection prevention and control (IPC) and healthcare-associated infections/antibiotic resistance (HAI/AR) activities. Upon selection, we anticipate the project work to begin on October 1, 2022 or no later than November 1, 2022.

### Background

Mobilizing more than 40 public health institutes throughout 32 states along with ten university-based regional training centers and 40 training affiliates, the National Network of Public Health Institutes (NNPHI) supports national public health system initiatives and strengthens public health institutes to promote multisector activities resulting in measurable improvements of public health structures, systems, and outcomes. To learn more about NNPHI, visit [www.nnphi.org](http://www.nnphi.org).

Project Firstline is a multi-year national training collaborative focused on healthcare infection prevention and control (IPC) that aims to train all frontline healthcare personnel in the United States. The project will build an infection control foundation of knowledge and culture of expertise in the healthcare and the public health communities that will help protect patients, healthcare workers and the public. The Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services funded the "Project Firstline: National

Healthcare Workforce IPC Training Initiative” cooperative agreement to increase IPC knowledge and related skills of the public health workforce involved in IPC and HAI/AR activities.

The purpose of this non-research project is to collect qualitative data through listening sessions about essential skills and other training needs of the IPC- and HAI/AR-involved PHW. The listening sessions are part of a larger non-research learning needs assessment (LNA) being planned and conducted by NNPHI’s Evidence to Action (E2A) team. The listening sessions aim to 1) further operationalize essential skills identified in previous projects and identify any additional essential skills, 2) identify training and education needs related to these skills, and 3) provide recommendations for future training topics and modalities of training.

### **Scope of Work (SOW)**

The purpose of this RFP is to establish an agreement with a partner (herein referred to as “contractor”) to conduct at least five listening sessions expected to take place between October 1, 2022, and March 31, 2023, and provide the final report by July 31, 2023. The report will include an analysis of themes and subthemes about essential skills training and education needs and recommendations on future training topics and training modalities.

In addition to these primary activities, the following tasks will be within the scope of work for the contractor:

- Participate in NNPHI kick-off meeting to review scope of work and roles and responsibilities of selected contractors
- Biweekly meetings with NNPHI staff and key partners to coordinate activities outlined in the contractor’s workplan
- In partnership with NNPHI and CDC, the contractor will:
  - Identify and recruit participants for least five virtual listening sessions with the following audience segments:
    - Directors or training managers of national IPC- and HAI/AR-involved organizations
    - State-level IPC and HAI/AR directors and managers in states with centralized governance models
    - State-level IPC and HAI/AR directors and managers in states with decentralized governance models
    - Non-clinical public health workers involved in IPC and HAI/AR in healthcare settings
    - Non-certified and non-credentialed early career individuals (e.g. public health nurses, epidemiologists) or students working in IPC and HAI/AR
    - Other audiences as needed or identified by collaborators
  - Facilitate at least five virtual listening sessions recorded using Zoom or a similar platform
  - Analyze data from completed listening sessions
  - Present findings via a final written report and corresponding slide deck(s) for presentation(s) to internal and external partners

The contractor will work in collaboration with NNPHI and CDC. The contractor is expected to conduct at least five listening sessions between October 1, 2022 and March 31, 2023; provide the first draft of the full report from the listening sessions by March 31, 2023; and submit the final report by July 31, 2023.

The contract end date is July 31, 2023, with a potential for extension based on project needs and the availability of funding. Up to \$75,000 is available for the current project period.

**Deliverables**

- 1) Notes from meetings with NNPHI and/or CDC
- 2) Descriptive report of listening session participants containing job titles, types of organizations, and states/territories/Indian Health Services regions
- 3) Detailed listening session notes from at least five listening sessions with identified audience segments of the PHW involved in IPC and HAI/AR activities
- 4) Written report on essential skills training and education needs and recommendations for future training topics and modalities of training

The contractor should:

- Demonstrate prior professional experience conducting qualitative research
- Demonstrate expertise in qualitative data analysis and identifying emergent themes from coding of qualitative data
- Submit required findings and reports with respect to the project timeline
- Experience collecting qualitative data from healthcare and public health staff
- Have current or previous experience and familiarity with the staff involved in IPC and HAI/AR activities in healthcare facilities

**Contractor Selection Criteria**

Contractor selection will be made by NNPHI based on qualifications in accordance with the provisions of this RFP.

The following criteria will guide NNPHI's selection of a contractor for this project:

- Qualifications and experience of the entity, including capability and experience of key personnel and experience with other public or private agencies to provide these services and meet any required timelines and other requirements
- Demonstrated expertise in conducting listening sessions and experience in qualitative methodology and data analysis, specifically thematic coding of emergent themes
- Trained staff with capability to complete at least five listening sessions and produce the first draft of a summary report by March 31, 2023
- Access to Zoom or similar virtual meeting software
- Ability to conduct virtual listening sessions using Zoom or a similar platform
- Experience collecting qualitative data from healthcare and public health staff
- Verified completion of CITI training or similar human subjects research training
- Proposed approach including demonstrated understanding of work to be performed, a clear budget following the guidelines provided inclusive of a timeline for the projected project period
- Demonstrated capacity to manage a federal sub-award in a fiscally compliant manner
- Completeness and quality of the proposal

**Funding**

Funds may be used for salaries and benefits for staff engaged in the project, meetings and meeting supplies, pre-approved project-related travel, research and database software, data collection and analysis, supplies, communications, marketing, and graphic design. Funds are not intended to supplant state or federal funding. Funds may not be used for: lobbying activities; ongoing general operating expenses or existing deficits; items for which third-party reimbursement is available; endowments; meeting meals; or capital costs, including construction or renovation.

## How to Apply

NNPHI is utilizing a *Smartsheet Online System* for the proposal submission process. Submit your proposal and all additional documents through the link provided below.

Submit your proposal and required attachments by 5 PM ET on Friday, September 16, 2022. Click ["Here"](#) to submit your proposal via the NNPHI Smartsheet system.

If you have any technical difficulties, please contact [E2A@nnphi.org](mailto:E2A@nnphi.org).

## Questions

Submit questions about this funding opportunity here by 5:00 pm ET on September 1, 2022. NNPHI will respond to questions within 24 hours. Please check back frequently to review latest questions/answers.

## Proposal

Please respond to the following. Do not exceed ten (10) single-spaced pages, Arial or Times New Roman 12-point font, with 1-inch margins. It is helpful to reviewers if you respond in the order presented below. Click ["Here"](#) to submit your proposal via the NNPHI Smartsheet system.

- a. Introduce yourself and organization (as applicable), and interest in the opportunity. Explain why you are particularly well-suited to successfully complete the SOW.
- b. Describe how your expertise applies to the SOW. Be specific about methodologies you have used.
- c. Describe the background and experience of staff at your organization who will lead, who will be assigned to the project, and any partners that will be engaged in this work.
- d. Describe at least one example of similar work that speaks to your organization's capacity to perform the SOW, including information about key staff and partners, approach and methodologies used, and timeframe in which the work was completed.
- e. Describe work experience with a project supported by federal funding (either as direct recipient or as a subrecipient).
- f. Include the budget spreadsheet and detailed narrative that aligns with the SOW (access [CDC Budget Guidelines here](#)).
- g. Include a curriculum vitae, professional resume, or biosketch of staff leading the work

You will receive confirmation of receipt within 24 hours of the deadline. NNPHI strictly enforces the submission deadline. **Proposals received after the deadline will not be reviewed. In your application, please indicate your available start date (October 1, 2022 or no later than November 1, 2022).** One partner will be selected.

Note: If you do not receive a confirmation email or have any technical difficulties, please contact [E2A@nnphi.org](mailto:E2A@nnphi.org). We recommend submitting early to avoid any problems.

## 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.

*Funding for this opportunity has been provided to NNPHI through a Cooperative Agreement with the Centers for Disease Control and Prevention (CDC 6 NU38OT000303-02-04). NNPHI is collaborating with the CDC's National Center for Emerging and Zoonotic Infectious Diseases, Division of Healthcare Quality Promotion on this project. Content of this RFP is solely the responsibility of NNPHI and do not necessarily represent the official views of CDC or the US Department of Health & Human Services.*