



**Grant Funding Opportunity and
Request for Proposals (RFP)**

Evaluation of End Hep C SF Community Navigator Program

Key Dates:

RFP Issue Date:	May 8, 2024
E-Question Period:	May 8, 2024 - May 17, 2024
Proposals Due Date:	June 10, 2024
Award Decisions Announced:	June 21, 2024
Project Period:	July 1 - Dec 15, 2024

I. INTRODUCTION

End Hep C SF is a multi-sector collective impact initiative. We envision a San Francisco where hepatitis C (HCV) is no longer a public health threat, and hepatitis C-related health inequities have been eliminated.

End Hep C SF has based our work on our beliefs that:

- All people living with HCV deserve access to the most effective HCV treatment.
- Everyone living with or at risk for HCV should have equal access to prevention and care regardless of individual characteristics, including but not limited to race/ethnicity, insurance status, housing status, appearance, gender identity, sexual orientation, age, mental health status, and substance use.
- Our work is most effective when people who have lived experience with HCV are involved in all aspects of planning and implementation.
- It is imperative to draw on the wisdom of service providers, activists, people who use drugs, and others in the community who have been most impacted and most engaged in the fight against HCV over many years.

We are committed to working together to:

- Provide interventions that are evidence-based, and continuously review our progress to determine areas where we need to improve, through the regular collection and use of local data related to HCV.
- End stigma about HCV and against people living with HCV.
- Maximize the health and wellness of people who use drugs by treating them with respect, ensuring access to appropriate services, and empowering them to reduce harm and make choices to improve individual and community health.
- Continue to invest in populations that have frequently been characterized as “difficult to engage”, as we realize that these groups often have the greatest unmet need for services and support.

HCV elimination strategies necessitate testing, linkage and retention in care, and provision of HCV curative treatment in a variety of settings. While San Francisco has made great strides in improving access to these interventions, many people in highly impacted populations are living with untreated HCV. To help address this, in 2018 End Hep C SF launched a pilot of a Community Navigator program. Three local community-based organizations (CBOs) were awarded funding to develop and host programs for people with lived and living experience of HCV and/or substance use act as advocates for individuals living with or at risk for HCV. Staff at each CBO recruit, support, and supervise the Community Navigators who are embedded at their agency. The program operates in 6-month cohort cycles. Upon entering the program, Community Navigators participate in a foundational training series that is led by End Hep C SF.

Following this training, navigators support community engagement, health education and other activities at the host CBO. Navigators from each CBO team come together to participate in ongoing training and community-building activities that are facilitated by End Hep C SF.

This funding opportunity will facilitate the evaluation of End Hep C SF's Community Navigator program.

II. FUNDING OPPORTUNITY

End Hep C SF seeks to award \$12,000 for the evaluation of the Community Navigator program.

End Hep C SF is currently finalizing a theory of change for the Community Navigator program, which may be helpful for influencing the aims and design of the evaluation. It is already determined that the program aims to train and support people with lived experience of HCV to engage community members in HCV care including prevention, testing, and navigation with the ultimate goal of curing people of HCV.

An evaluation of the Community Navigator program was conducted in 2019, shortly after it had begun. The evaluation report included recommendations for End Hep C SF to strengthen the program by developing resources that Community Navigators could use for community engagement, providing uniforms to participants, and continuing to fund and/or expand funding to CBOs for dedicated program staff. These changes were made and indeed improved the program; however, eight more cycles have been completed since the program's inception, and the ninth will begin in July 2024. End Hep C SF now seeks another more comprehensive evaluation of this program, to determine the effects of the program on participants and broader HCV elimination activities over time.

Total awards anticipated: 1
Expected award amount: \$12,000

III. APPLICATION TIMELINE

May 8, 2024 This RFP is available online at endhepcsf.org as of May 8, 2024.

May 9 - May 17, 2024 **E-Question Period**
The e-question period is an opportunity to submit questions via email to jakerley@endhepcsf.org. All e-questions must be received by 5:00pm PST on May 17, 2024. Responses to all e-questions will be published at endhepcsf.org no later than May 21, 2024.

June 10, 2024

Proposals Due

Completed proposals must be received via email to Jordan Akerley at jakerley@endhepcsf.org by 5:00 pm on June 10, 2024. Late applications will not be accepted under any circumstances – no exceptions.

After the date proposals are due, an External Review Panel will be convened to review all completed applications and make an award recommendation based on the evaluation criteria outlined in this RFP.

June 21, 2024

Award Decisions Announced

Letters will be emailed to applicants regarding award decisions no later than June 21, 2024.

End Hep C SF will conduct contract negotiations with the applicant selected for funding between June 21 and July 1, 2024.

July 1, 2024

Grant Period Begins

December 15, 2024

Grant Period Ends

IV. APPLICATION REQUIREMENTS

A. MINIMUM ELIGIBILITY CRITERIA

End Hep C SF is committed to diversity, inclusion, and broad-based community access, and to funding a variety of San Francisco’s community organizations, non-profit agencies, and service providers. All qualified applicants are cordially invited to submit applications. However, failure to meet the minimum qualifications will eliminate applicants from further consideration for funding.

1. Applicant must have significant experience and expertise evaluating public health programs.
2. Applicant must possess strong communication skills and the ability to share present information in an accessible manner.
3. Applicant must have demonstrated history and experience working with community-based public health programs including with people who have lived and living experience of HCV and/or substance use.

B. PROJECT REQUIREMENTS

1. Requirements

Applicants should possess an understanding of End Hep C SF mission and values. Proposals should demonstrate a clear understanding of the goals, objectives, and target population of the public health program being evaluated. Applicants should be able to tailor evaluation methods to align with End Hep C SF's objectives for the evaluation.

Evaluation activities should be designed to maximize engagement opportunities for diverse stakeholders. Data collection, such as interviews or focus groups must be designed to maintain confidentiality and protect the privacy of stakeholders.

2. Components of the Evaluation

Applicants are required to design an evaluation proposal that includes opportunities for key stakeholders, including Community Navigators, staff at End Hep C SF, and staff at the CBOs that host the program to share their perspectives, experiences, and any impacts attributed to the program.

Opportunities to engage stakeholders, who are current or former Community Navigators, must be designed in a low-threshold manner. This means that the burden for navigators to provide feedback and/or participate in interviews or focus groups should be minimal. The applicant will work with End Hep C SF staff members to ensure Community Navigators receive appropriate compensation that recognizes the value of their time and experience in this process. End Hep C SF will provide stipends to navigators who participate in evaluation activities led by the Applicant. These stipends will be allocated by End Hep C SF, independent of the funding amount cited in the RFP.

C. APPLICATION FORMAT

Please read all instructions carefully and include all information required. Incomplete applications may not be reviewed. The burden is on the applicant to demonstrate qualifications. Be advised that End Hep C SF has the right to reject any and all proposals/applications.

- Use single-spaced line spacing, in Arial or Times New Roman font no less than 11 points, and 1" margins.
- Number pages on the upper right corner.
- Submit one electronic version of your application via email to jakerley@endhepcsf.org, as a single PDF document.

D. PAGE LIMITS

Proposals must include:

Document	Page limit
Cover letter	1
Proposal Narrative	3
Budget	1

No attachments or supplemental material beyond the 5 pages above will be accepted.

E. PROPOSAL NARRATIVE REQUIREMENTS

In a proposal narrative of up to 3 single-spaced pages, answer the following:

1. Applicant Capacity (10 points)

Discuss your organization’s background in program evaluation and engagement with community-based organizations. Explain why you believe your organization is well-positioned to design and conduct a successful evaluation of the End Hep C SF Community Navigator program. Discuss your skills and capacity for the activities outlined in section B2 of this RFP.

2. Population of Focus (15 points)

Describe your experience working with community members to support program evaluation. In this context, we define “community members” as people with lived or living experience of HCV and/or people from communities most impacted by HCV. Please describe your experience working with the specific subpopulation(s) that the Community Navigator program serves (e.g. people who are unhoused, people who use drugs).

3. Evaluation Design (50 points)

Describe your proposed program evaluation of End Hep C SF’s Community Navigator program. Keep in mind that limited quantitative data are available; approximately 72 navigators have participated in the program since 2021, with many of them participating in multiple cohorts. Data on HCV navigation and treatment in San Francisco are sparse overall, and while End Hep C SF does have some data not publicly available (e.g., shift logs with Community Navigator names, dates, locations, activities), it would need to be assessed for data quality. While there are navigation-related data on the End Hep C SF Data Dashboard, much of those data points are reported by SFDPH-funded community-based organizations, not by the Community Navigator program. As such, we anticipate that much of this evaluation will utilize qualitative data methods, but it is important to keep in mind that there are numerous barriers to reaching and/or engaging current or former program participants; only low threshold engagement strategies are likely to be successful with this population. In-person meetings provide opportunities to engage Community Navigators. Phone and email communication are supportive of

attendance at in-person events. Virtual and phone-based meetings create barriers that limit engagement among Community Navigators. Given this, please describe the method and format you propose to use for data collection, along with your proposed strategies for analysis and reporting. Discuss any training your team has completed to gain capacity in trauma-informed approaches and respectful conduct in research. Discuss any challenges you anticipate during this evaluation process, and strategies you have planned to address and overcome these expected challenges.

4. Dissemination Strategies (15 points)

Describe how you plan to partner with End Hep C SF to disseminate the findings of this evaluation. We hope that evaluation findings will be actionable, and useful to End Hep C SF for both program improvement and funding advocacy. With this in mind, please talk about how you will help disseminate the findings within the community to End Hep C SF stakeholders. What strategies will you employ to ensure that Community Navigators past and present also receive information about the findings?

G. BUDGET REQUIREMENTS

Your proposal should contain a brief, one-page budget that covers the total costs of the project (not including incentives for participants, which End Hep C SF will supply). Any indirects, should you wish to include them, would need to be included within the maximum total amount available (\$12,000).

Budgets should be accompanied by a one-page budget justification that makes clear how the total amounts allocated in each line of your budget were calculated.

V. TERMS AND CONDITIONS

A. ERRORS AND OMISSIONS IN RFP

Applicants are responsible for reviewing all portions of this RFP. Applicants are requested to promptly notify End Hep C SF, in writing, if the applicant discovers any ambiguity, discrepancy, omission, or other error in the RFP. Any such notification should be directed to End Hep C SF promptly after discovery, but in no event later than five working days prior to the date for receipt of proposals. Modifications and clarifications will be made by addenda as provided below.

B. INQUIRIES REGARDING RFP

Inquiries regarding the RFP and all oral notifications of an intent to request written modification or clarification of the RFP must be directed to:

Jordan Akerley, Strategic Director, End Hep C SF; jakerley@endhepcsf.org.

C. CHANGE NOTICES

End Hep C SF may modify the RFP, prior to the proposal due date, by issuing Change

Notices, which will be posted at endhepcsf.org. The applicant shall be responsible for ensuring that its proposal reflects any and all Change Notices issued by End Hep C SF prior to the proposal due date, regardless of when the proposal is submitted. Therefore, End Hep C SF recommends that the applicant consult the website frequently, including shortly before the proposal due date, to determine if the applicant has downloaded all Change Notices.

D. REVISION OF PROPOSAL

An applicant may revise their proposal at any time before the deadline for submission of proposals. The applicant must submit the revised proposal in the same manner as the original, and it must clearly be marked as “REVISED” in the footer of the proposal package itself. A revised proposal must be received on or before the proposal due date. No revisions will be accepted after the due date for proposals.

At any time during the proposal evaluation process, End Hep C SF may contact the applicant for clarification or correction of minor errors or deficiencies in their proposals prior to deeming a proposal to be non-responsive. Clarifications are “limited exchanges” between End Hep C SF and a proposer for the purpose of clarifying certain aspects of the proposal, and do not give a proposer the opportunity to revise or modify its proposal in any way other than the requested clarification. Minor errors or deficiencies are defined as those that do not materially impact End Hep C SF’s evaluation of the proposal; for example, failing to label a “revised” proposal as “revised”.

E. ERRORS AND OMISSIONS IN PROPOSAL

Failure by End Hep C SF to object to an error, omission, or deviation in the proposal will in no way modify the RFP or excuse the vendor from full compliance with the specifications of the RFP or any contract awarded pursuant to the RFP.

F. FINANCIAL RESPONSIBILITY

End Hep C SF accepts no financial responsibility for any costs incurred by an agency in responding to this RFP.

VI. GRANT AWARD PROCESS

A. APPLICATION SCREENING

End Hep C SF staff or members will screen applications to ensure that they meet the minimum eligibility requirements and are eligible for review before being forwarded to the Review Panel. Three basic requirements must be met for applications to merit further review. This preliminary staff screening is not a qualitative review. All applications that meet the following eligibility criteria are forwarded to the Review Panel for evaluation:

1. Received by 5:00pm PST on June 10, 2024 (late applications will not be accepted)
2. Completeness (incomplete applications may not be reviewed)
3. Address the RFP minimum eligibility criteria (Applications that do not meet the criteria are disqualified from further consideration)

B. REVIEW PANEL

The proposals will be evaluated by a Review Panel composed of members of End Hep C SF, who are knowledgeable about the Community Navigator Program. The Panel is established to review, discuss, and make an award recommendation regarding applications based on the evaluation criteria outlined herein. Reviewers will evaluate only the application materials submitted and base their scoring strictly on the requirements of the RFP and the contents of the application. End Hep C SF will review award recommendations and make all final decisions.

C. EVALUATION CRITERIA

The Review Panel will assess and score applications according to the following matrix:

Category	Scoring Considerations	Max Pts
Applicant Capacity	<ul style="list-style-type: none"> • How well does the applicant meet the minimum requirements? • What is the applicant’s experience with evaluation of community-based programs? • What is the applicant’s experience with low-threshold data collection activities such as would be required here? • Does the applicant demonstrate a history of completing high quality work on time? 	10
Population of Focus	<ul style="list-style-type: none"> • What is the applicant’s experience working with people with lived and living experience of HCV? • What is the applicant’s capacity to engage people with lived and living experience of HCV in an evaluation process? 	15

<p>Evaluation Design</p>	<ul style="list-style-type: none"> • Is the evaluation design clear and convincing as described? • Does the applicant describe a solid plan for engaging Community Navigators and program alumni in the proposed evaluation activities? • Does the applicant describe a solid plan for engaging staff at End Hep C SF and the CBOs that host the Community Navigator program in the proposed evaluation activities? • Does the proposed evaluation design seem realistic given the limited funding available? • Does the proposed method and format for data collection, along with proposed strategies for analysis and reporting, seem to make sense given the limitations in existing quantitative data and ability to contact past navigators for data collection? • Does the applicant seem to be aware of likely challenges they may encounter during the evaluation, and have thoughtful contingency plans for how to overcome them? 	<p>50</p>
<p>Dissemination Strategies</p>	<ul style="list-style-type: none"> • Does the applicant describe a comprehensive plan for community dissemination of evaluation findings, in ways that will assist End Hep C SF with both program improvement and funding advocacy? • Does the applicant describe convincing strategies to ensure that current Community Navigators and program alumni directly receive information about the findings? 	<p>15</p>
<p>Budget</p>	<ul style="list-style-type: none"> • Do the total budget and line-item budget allocations seem reasonable for the scope of work proposed? • Does the budget justification provide clear information about how all budget subtotals were calculated? • Does the total budget remain at or below the \$12,000 cap? 	<p>10</p>
<p>MAXIMUM POSSIBLE POINTS</p>		<p>100</p>

D. FINAL DETERMINATION

Final decisions regarding proposal awards will be made by the Coordinating Committee of End Hep C SF, after recommendations have been received by the Review Panel. No appeals will be permitted. Coordinating Committee members deemed to have any real or perceived conflict of interest with any proposing organization will be excluded from the process for determination of awards. Recommendation by the Review Panel of any proposal for funding shall not imply acceptance by End Hep C SF of all terms of the proposal, which may be subject to further negotiations and approvals before contracts are finalized. Members of the End Hep C SF Coordinating Committee will initiate the process for formalizing grant agreements. Funding may be contingent upon the submission of additional information, budget revisions, and/or program design changes. If a satisfactory contract cannot be negotiated in a reasonable amount of time, End Hep C SF, in its sole discretion, may terminate negotiations with the applicant and begin contract negotiations with another applicant.