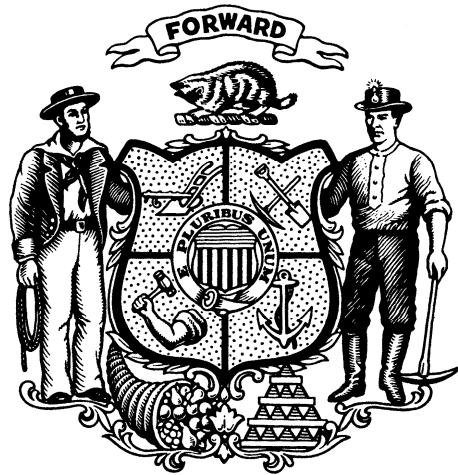


REQUEST FOR PROPOSAL (RFP)

Intravenous Drug Enhancement Grant

Short title: IV Drug Grant

RFP # DMHSAS – G202



Issued by:

**STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES
DIVISION OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES
BUREAU OF PREVENTION TREATMENT AND RECOVERY**

**Proposals must be submitted
no later than 4:00 PM CST
October 21, 2011**

**For further information regarding this RFP contact
Tanya Bakker
tanya.bakker@wisconsin.gov
(608) 267-7707**

LATE PROPOSALS WILL BE REJECTED

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**IV DRUG GRANT
REQUEST FOR PROPOSALS TIMELINE**

9-09-11	Release Date of RFP
9-19-11	Proposers Conference (Available by Adobe Connect Pro)
9-23-11	Due Date of Optional Letter of Intent to Apply
10-21-11	Due Date for Proposals
11-30-11	Issue Intent to Award Notices
1-1-12	Contract Start Date

PART I

I. GENERAL INFORMATION

1.0 INTRODUCTION AND BACKGROUND

The purpose of this document is to provide interested parties with information to enable them to prepare and submit a proposal for Intravenous Drug Use (IVDU) funds. The Division of Mental Health and Substance Abuse Services intends to use the results of this process to award contracts for IVDU funds for Treatment, Street Outreach or Prevention Programs.

Socioeconomic complications of IV Drug use play a major role in many individuals' ability to function successfully in today's world. Results of illicit drug use include: reduced family and community cohesiveness, increased unemployment and underemployment, economic and social marginalization and increased crime. These factors combined play a significant role in the drug-addicted individual from accessing needed services and assistance. Likewise, there are challenges in treating and sustaining individuals who are addicted to substances as they begin a life of abstinence and recovery.

Health complications of IV drug use, including HIV and Hepatitis, pose a health risk to those utilizing injectable drugs and others that may share the needles. The Centers for Disease Control and Prevention estimates that there are up to 230,000 new HCV infections—and 10,000 to 12,000 resulting deaths—in the United States every year. Wisconsin has seen an increase in Hepatitis C among IV drug users particularly among a younger population. The estimated costs of care for a person with Hepatitis C are around \$30,000 per year.

This Request for Proposal (RFP) is to solicit proposals from vendors to provide prevention and treatment to persons using IV drugs. The Division of Mental Health and Substance Abuse Services (DMHSAS) expects that funds will be used to implement prevention and treatment programming to serve the target population. The Division intends to use the results of this process to award one or more contract(s) for innovative and evidenced based practices for the prevention and treatment of IV drug users.

Target Population

The target population for this grant is persons who utilize IV drugs.

Priority Populations

Pregnant women who seek or are referred for and would benefit from Block Grant funded treatment services are considered a priority population.

1.1 AVAILABLE FUNDS

A total of \$2,000,000 is available for IVDU through the Substance Abuse Block Grant. The monies will be divided into two categories: prevention and treatment. Each category has amounts delineated for services:

- 1) The maximum award for treatment is \$500,000.
- 2) The maximum award for prevention is \$250,000.

According to 45 CFR 96.131, pregnant women receive priority to treatment or prevention services.

Additionally, areas of the state that have a high prevalence of Hepatitis C or HIV or a high prevalence of factors that would lead to Hepatitis C or HIV will be given priority.

NOTE: Programs must exhaust other governmental and private resources (e.g., Medicaid, Badger Care, health insurance, etc.), and collaborating agencies are required to utilize existing resources to pay for treatment and other services before using funds provided by this grant.

1.2 ISSUING AGENCY

This RFP is issued for the State of Wisconsin by the Division of Mental Health and Substance Abuse Services. The Division is the sole point of contact for the State of Wisconsin during the selection process.

1.3 PROGRAM GOALS

IV Drug Grant has three primary goals:

1. Prevent or reduce the complications associated with IV Drug Use.
2. Improve access to treatment for persons who use IV Drugs.
3. Provide outreach, prevention and treatment for IV drug abusers.

Injection drug users (IDUs) are at risk for Hepatitis B virus (HBV) and Hepatitis C virus (HCV) infection through the sharing of needles and drug-preparation equipment

Prevention and reduction of complications associated with IV Drug are essential in stopping the increase of HIV, Hepatitis C and other transmittable diseases. The development of prevention programming in counties where there is a high prevalence of IV Drug users is necessary due to the high correlation between IV drug use and Hepatitis C and HIV.

Access to services, prompt and adequate care and providers who are culturally competent are essential component for persons needing assistance. Programs must consider the gender, culture and environmental background of the person being served in order to render the most appropriate and effective services.

Outreach services extend beyond usual agency activities to engage individuals who have, or are at risk of developing, a substance use or related health problem. Outreach often focuses on reaching those who are "hard to reach or hidden" and not in contact with other services. Outreach activities may also be designed to reach people already in contact with services but who need accessible substance abuse treatment services.

The development of outreach services should be based on a careful assessment of the characteristics, life circumstances, and needs of the specific group who will receive the services. In some cultures, men and women live more segregated lives and this must be taken into account in planning outreach services. In some cases, such as homeless women, safety may be the primary concern.

Peer outreach can be an effective way to reach persons who are not in contact with professional services or who live in places with strong resistance to substance use and treatment. Peer outreach workers can provide users with information on how to reduce risk behaviors, can teach by example, and can link those who use substances with treatment and other health and social services.

1.4 **PROJECT DESIGN**

The Division is soliciting proposers that demonstrate evidenced based strategies and innovative approaches for expanding and/or enhancing the services to IV drug users including but not limited to:

Potential Elements:

- a) Outreach/Education: Funds may be used for outreach and education to persons with IV drug abuse.
- b) Pretreatment Services: Funds may be used for brief interventions including providing literature and other materials to support behavior change, facilitating access to drug treatment, HIV/AIDS testing and counseling services
- c) Staff Development Training: Funds may be used for staff development training of evidence based strategies including design, delivery quality assurance and evaluation of the IVDU program being proposed, co-occurring disorders, corrections, public health, care coordination, culturally competent assessment and treatment, cultural sensitivity, motivational interviewing and neuroscience of addiction.
- d) Medication Assisted Treatment: Funds may be used to implement medication assisted treatment by offering clients injectable naltrexone.
- e) Treatment: Funds may be used to provide evidence based treatment strategies. All grantees must provide documentation regarding the use of evidence based treatment.

According to the State of Wisconsin Division of Public Health, in 2001 there were 335 cases of HIV infection in the state of Wisconsin; in 2010, there were 271 cases reported. Of those 271 cases, 82 were AIDS and 189 were non-AIDS diseases. Individuals with injection drug use-attributed HIV infection make up 10% of cases reported in 2009. Reported cases among injection drug users have declined 27% since 2001. Although there has been a decrease in HIV infections in the State of Wisconsin, Hepatitis C has increased.

In 2009, there were a total of 2,455 cases of Hepatitis C reported; of those reported, 1,852 were confirmed. White males ages 45-54 were more likely to contract Hepatitis C than any other ethnicity or age group. The following table lists the number of reported cases of Hepatitis C by county.

2009 Reported Cases of Hepatitis C by County			
Adams - 16	Florence – 1	Marathon – 31	Rusk-4
Ashland – 2	Fond Du Lac – 37	Marinette – 11	St. Croix – 17
Barron – 15	Forest – 2	Marquette – 4	Sauk – 17
Bayfield – 4	Grant - 4	Menominee – 6	Sawyer – 4
Brown - 83	Green – 6	Milwaukee – 695	Shawano – 18
Buffalo – 2	Green Lake – 8	Monroe – 10	Sheboygan – 44
Burnett – 5	Iowa – 4	Oconto – 10	Taylor – 4
Calumet – 5	Iron – 6	Oneida – 23	Trempealeau – 5
Chippewa – 18	Jackson – 33	Outagamie – 38	Vernon – 6
Clark – 17	Jefferson – 39	Ozaukee – 17	Vilas – 11
Columbia – 14	Juneau – 15	Pepin – 0	Walworth – 37
Crawford – 6	Kenosha – 114	Pierce – 8	Washburn – 4
Dane – 151	Kewaunee – 1	Polk – 19	Washington – 34
Dodge – 16	La Crosse – 35	Portage – 13	Waukesha – 59
Door – 12	Lafayette – 1	Price – 4	Waupaca – 13
Douglas – 33	Langlade – 12	Racine – 94	Waushara – 4
Dunn – 6	Lincoln – 12	Richland – 1	Winnebago – 56
Eau Claire – 45	Manitowoc – 33	Rock – 81	Wood – 17
Correctional System – 180		Unknown - 53	
*Data courtesy of Division of Public Health – Wisconsin Hepatitis C Surveillance Summary			

1.5 **DEFINITIONS**

The following definitions are used through the RFP.

Division means the Division of Mental Health and Substance Abuse Services (DMHSAS).

Bureau means the Bureau of Prevention, Treatment and Recovery (BPTR).

Proposer means an organization submitting a proposal in response to this RFP.

State means State of Wisconsin.

Grant Recipient means proposer awarded funds for direct benefit of the community.

Proposal means response to RFP.

IVDU means intravenous drug user.

Department means Department of Health Services (DHS).

Program means designed plan for carrying out the applicant’s proposal.

Agency means the vendor agency.

Vendor means a proposer that submits a proposal in response to the RFP; also known as applicant.

AODA means alcohol and other drug abuse.

Applicant means the legal entity that assumes the liability for the administration of the grant funds and is responsible to DHS for the performance of the project activities.

NOMS refers to the National Outcome Measurement System that are reportable to the State on a biannual and annual basis.

HSRS refers to the Human Services Reporting System that NOMS data is recorded in for counties.

SAPSIS refers to the Substance Abuse Prevention Services Information System that prevention data is recorded in.

1.6 **OUTCOMES**

Vendors receiving treatment funds shall report and use data on federal required National Outcome Measures (NOMS) in accordance with guidelines provided through the Human Service Reporting System (HSRS) or comparable reporting system. NOMS reporting is required in order to receive the full allocation of funds. All agencies receiving grant funds through the RFP are required to have in place the mechanisms to report timely, accurate, and complete NOMS data. Data on all program participants in the project must be entered into HSRS or comparable reporting system, even if public funding is not utilized to provide services. Federal NOMS data include:

1. Reduced Alcohol/Drug Use
2. Improved employment/Education
3. Reduced Crime and Criminal Justice
4. Reduced Homelessness
5. Improved Social Support for Recovery
6. Retention in or Completion of Treatment

As well, vendors receiving prevention funds shall report prevention information in the Substance Abuse Prevention Services Information System (SAPSIS). SAPSIS data includes:

1. Number of persons served by age gender race and ethnicity.
2. Total number of evidenced based programs and strategies; percentage youth seeing, reading, watching or listening to a prevention message.
3. Services provided within cost bands
4. Total number of evidenced-based programs and strategies

1.7 **WHO MAY SUBMIT A PROPOSAL**

Any tribal government, county department of community programs, non-profit organization, county department of human services in the state of Wisconsin is eligible to apply. The vendor must specify whether their application is for a prevention or a treatment grant

Substance abuse treatment services must be provided by certified substance abuse treatment agencies under the appropriate section(s) of DHS 75, Wisconsin Administrative Code, before the vendor is eligible to receive funding.

Consortium application are allowed under this solicitation when the following conditions are met and maintained: Consortiums are defined as the formation of two or more agencies combined to undertake an enterprise beyond the resources of any one agency in order to better meet the needs and goals of the IV Drug Grant as described in the RFP.

Consortium applications are permitted with the following conditions:

1. Consortiums must have the capacity to serve all IV Drug clients.
2. The formation of a consortium of providers offers a stronger and more effective program.
3. A consortium would realize more efficient administrative cost benefits and would be evaluated accordingly.
4. A consortium proposal must identify the member of the organizations and their specific roles and the lead agency to whom the grant will be awarded with letters of commitment from each of the subordinate agencies indicating their agreement to award to the identified lead agency.
5. A consortium application will be reviewed and evaluated as a single application so it is necessary for individuals/agencies within the consortium to clearly identify in the single application their areas of responsibility.
6. The consortium can demonstrate the prevention of duplicating services.
7. The lead agency is solely responsible for the IV Drug program activities, and will ensure the reporting requirements of the entire consortium.
8. The maximum amount awarded for treatment would be: \$750,000 and \$500,000 for prevention.
9. The vendor must specify whether their application is for a prevention or a treatment grant.

1.8 REASONABLE ACCOMMODATIONS

The Department will provide reasonable accommodations, including the provision of informational material in alternative format, for qualified individuals with disabilities. For special needs contact:

Jamie McCarville, Disabilities Coordinator
 Division of Mental Health and Substance Abuse Services
 Bureau of Prevention Treatment and Recovery
 1 W. Wilson Street
 Madison, WI 53703
 Telephone: (608) 267-7712
 Fax: (608) 261-7800
 E-mail: Jamie.McCarville@wisconsin.gov

1.9 CALENDAR OF EVENTS

Listed below are specific dates and times of actions related to this RFP. The actions with specific dates must be completed as indicated unless otherwise changed by the State. In the event that the State finds it necessary to change any of the specific dates and times in the calendar of events listed below, it will do so by issuing a supplement to this RFP. There may or may not be formal notification issued for changes in the estimated dates and times.

September 9, 2011	Date of issue of the RFP
September 19, 2011	Proposers Conference (see 4.2 for details)
September 23, 2011	Letters of Intent Due (optional)
October 21, 2011	Proposals Due
November 30, 2011	Notification of intent to award sent
January 1, 2012	Contract start date

II. SPECIAL PROGRAM REQUIREMENTS

2.0 INTRODUCTION

The following is a list of the obligations agencies will be expected to fulfill during the funding period. Failure to fulfill these obligations will result in the withdrawal and reallocation of funding.

2.1 PROGRAM CONDITIONS

Proposals will need to meet the specific conditions described below.

2.1.1 PROTECTION FROM POTENTIAL RISKS

- a) Identify and describe any foreseeable physical, medical, psychological, social, legal, or other risks or adverse effects, besides the confidentiality issues addressed below that are due either to participation in the project itself or to the evaluation activities.
- b) Where appropriate, describe alternative treatments and procedures that might be advantageous to the participants and the rationale for their non-use.
- c) Describe the procedures that will be followed to minimize or protect participants against potential risks, including risks to confidentiality.
- d) Where appropriate, specify plans to provide needed professional intervention in the event of adverse effects to participants.

2.1.2 ABSENCE OF COERCION

Explain whether participation in the project is voluntary or mandatory. Identify any potentially coercive elements that may be present (e.g., court orders mandating individuals to participate in a particular intervention or treatment program).

2.1.3 PRIVACY AND CONFIDENTIALITY

Specify the procedures that will be implemented to ensure privacy and confidentiality, including by whom and how data will be collected, procedures for administration of data collection instruments, where data will be stored, who will/will not have access to information, and how the identity of participants will be safeguarded (e.g., through the use of a coding system on data records; limiting access to records; storing identifiers separately from data).

Vendors must maintain the confidentiality of alcohol and other drug abuse client records in accordance with the provisions of Title 42 of the Code of Federal Regulations, Part 2 (42 CFR, Part 2), Health Insurance Portability and Accountability Act (HIPAA) 45 CFR Parts 160 and 164, Wis. Stat. 51.30, and DHS 92.

2.1.4 RISK/BENEFIT DISCUSSION

Discuss why the risks to participants are reasonable in relation to the anticipated benefits to participants and in relation to the importance of the knowledge that may reasonably be expected to result.

2.2 MINIMUM REQUIREMENTS

Vendors are required to meet the following criteria before an application will be considered:

- a) Funds may not be used for construction or to improve grounds or buildings.
- b) Funds may not be used for hospital-based inpatient treatment services.
- c) Funds may not be used for religious instruction or for the purchase of materials for religious

- instruction.
- d) Substance abuse treatment services must be provided by certified alcohol and other drug abuse programs under the appropriate section(s) of DHS 75, Wis. Admin. Code.
 - e) The vendor must include at least three letters of support (references) from coordinating and collaborating organizations.
 - f) The vendor shall verify that it had an independent financial audit (and a compliance audit, if applicable) completed within the past 12 months, that its accounting principles are sound, and its financial statements are free of any material misstatement. If applicable, there is a corrective action plan for any exceptions, variances, or issues of noncompliance.
 - g) The vendor providing treatment services must accurately report NOMS data for adult clients into HSRS or comparable reporting system.
 - h) The vendor providing prevention services must accurately report NOMS in SAPSIS.
 - i) The vendor must ensure that IV Drug Grant funds are being use to serve only IVDU clients.
 - j) The vendor must ensure that IV Drug Grant funds will not be used to provide cash assistance to clients.

III. GENERAL PROGRAM REQUIREMENTS

The following items are required to assure the continuation of funds. These requirements will form part of the contract awarding these funds. Failure to comply with these requirements may result in disallowances and/or termination of the agreement for funds.

3.0 ACCEPTANCE OF PROPOSAL CONTENT

Grant recipients receiving awards will be mandated to meet all requirements of this RFP.

3.1 ALLOWABLE COSTS

A grant recipient will be required to comply with the Department of Health Services Allowable Cost Policy Manual,
<http://www.dhs.wisconsin.gov/Grants/Administration/AllowableCost/ACPM.htm>

3.2 CAPITAL EQUIPMENT

Funds may be used to purchase capital equipment with prior written approval from the Division. Capital equipment costs are defined as all costs associated with the acquisition of assets having a value in excess of \$5,000 and a useful life in excess of one year. Funds can be used to purchase/rent supplies such as adaptive and communication equipment.

3.3 SALARIES

Funds cannot be used to supplant current salaries for duties unrelated to this grant. In addition, no more than 15 percent of grant funds may be used for administrative costs.

3.4 REPORTS

Reports of both programmatic, evaluation and fiscal activity will be required for the purpose of documenting the satisfactory meeting of project objectives, in accordance with the application. Reporting requirements will be specified in the agreement between the successful proposer and the Division. Failure of the successful proposer to accept these obligations may result in cancellation of the award.

The grantee shall, at the option of the Division, appear before DHS administrators to clarify findings and to answer any questions at any time during the grant agreement or after the grant agreement is completed.

3.5 NEWS RELEASES

News releases pertaining to this award or any part of the proposal shall not be made without the prior written approval of the Division.

Copies of any news releases regarding this grant during the contract year(s) shall be submitted to the Division.

A copy of this RFP and a question and answer site will be maintained on the DHS Internet web site for the duration of the grant application period. You may access this site at <http://www.dhs.wisconsin.gov/rfp/>.

3.6 LEGAL SERVICES

Use of these funds is restricted under federal law and regulation including federal Office of Management and Budget (OMB) Circulars A-87, A-102, A-110, A-122, and A-133.

3.7 EMPLOYMENT

The proposer will not engage the services of any person or persons now employed by the state, including any department, commission or board thereof, to provide services relating to this agreement without the written consent of the employer of such person or persons and of the Division.

3.8 DUAL EMPLOYMENT

Section 16.417, Wis. Stats. prohibits an individual who is a state employee or who is retained as a consultant full-time by a state agency from being retained as a consultant by the same or another agency where the individual receives more than \$12,000 as compensation. This prohibition applies only to individuals and does not include corporations or partnerships.

3.9 SUBCONTRACTING

If the applicant plans to use subcontractors, this should be clearly explained and budgeted separately in the application; however, the primary contractor (applicant) will be responsible for contract performance whether or not subcontractors are used.

3.10 TERMINATION OF AGREEMENT

The Division may terminate this agreement at any time at its sole discretion by delivering thirty (30) days written notice to the grant recipient. Upon termination, the Division's liability will be limited to the pro rata cost of the services performed as of the date of termination plus expenses incurred within the prior written approval of the Division. In the event that the grant recipient terminates this agreement, for any reason whatsoever, it will refund to the Division within fourteen (14) days of said termination, all payment made hereunder by the Division to the grant recipient for activities not completed. Such termination will require written notice to that effect to be delivered by the grant recipient to the Division not less than thirty (30) days prior to said termination.

3.11 INCURRING COSTS

The State of Wisconsin is not liable for any cost incurred by proposers in replying to this RFP.

3.12 WAIVER OF TECHNICALITIES

The RFP Evaluation Committee reserves the right to accept or reject any or all responses to the RFP and waive minor technicalities. The determination of whether an RFP condition is substantive or a mere technicality shall reside solely with the RFP Evaluation Committee.

3.13 PROPRIETARY INFORMATION

Any restrictions on the use of data contained within a proposal must be clearly stated in the proposal itself. Proprietary information submitted in response to this RFP will be handled in accordance with applicable State of Wisconsin procurement regulations. Data contained in the proposal, all documentation provided therein, and materials and innovations developed as a result of this grant award can not be copyrighted or patented without written authorization from the Department of Health Services.

All data, documentation and innovation become the property of the State of Wisconsin, Department of Health Services. The grant recipient agrees that the Division shall have royalty free, non-exclusive and irrevocable rights to reproduce, publish, or otherwise use and authorize others to use any materials and innovations developed as a result of this grant award. Any copyright material authorized by the Department or distribution of materials developed through this agreement will acknowledge use of DHS funds.

3.14 AFFIRMATIVE ACTION

Successful proposers who are awarded contracts of twenty five thousand dollars (\$25,000) or more shall have included in their contracts the following clause:

"A written affirmative action plan is required as a condition for the successful performance of the contract. Excluded from this requirement are grant recipients whose annual work force amount to less than twenty five employees. The affirmative action plan shall be submitted to the state agency within fifteen (15) working days after the award of the contract."

3.15 NON-DISCRIMINATION AGAINST EMPLOYEES OR APPLICANTS FOR EMPLOYMENT.

In connection with the performance of work under this contract, the grant recipient agrees not to discriminate against any employee or applicant for employment because of age, race, religion, color, handicap, sex, marital status, physical condition, arrest or conviction record, developmental disability, as defined in s. 51.01 (5), sexual orientation or national origin.

This provision shall include, but not be limited to the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Except with respect to sexual orientation, the grant recipient further agrees to take affirmative action to ensure equal employment opportunities.

The grant recipient agrees to post in conspicuous places, available for employees and applicants for employment, notice to be provided by the contracting officer setting forth the provisions of the nondiscrimination clause.

3.16 TOBACCO SMOKE FREE ENVIRONMENT

Public Law 103-227, also known as the Pro-Children Act of 1994, prohibits tobacco smoke in any portion of a facility owned or leased or contracted for by an entity that receives federal funds,

either directly or through the State, for the purpose of providing services to children under the age of 18.

3.17 PATIENTS/CLIENTS RIGHTS POLICY

Each vendor shall have a written policy stating that the service will comply with patient rights requirements as specified in DHS 94, Wisconsin Administrative Code.

3.18 ELIGIBILITY CRITERIA

Proposers shall state clearly in writing the criteria for determining the eligibility of individuals for services in the project or program.

3.19 STAFF SELECTION POLICY

Each vendor shall develop written policies and procedures stating that in the selection of staff, consideration will be given to each applicant's sensitivity toward and training in the characteristics of the service's patient population, including gender, age, cultural background, and sexual orientation; developmental, cognitive or communication barriers, and physical or sensory disabilities.

IV. CLARIFICATION AND/OR REVISIONS TO SPECIFICATIONS AND REQUIREMENTS NOTICE OF INTENT TO APPLY

4.0 NOTICE OF INTENT

Prospective proposers are requested, but not required, to submit a Notice of Intent to apply to Division of Mental Health and Substance Abuse Services. The Notice of Intent form should be returned to the Division by 4:00 PM. CST on 9/23/11. Submittal of the Notice of Intent does not commit an agency to submitting an application.

Any supplemental written information related to this RFP developed by the Division will be provided only to those agencies who have filed a Notice of Intent, or to agencies who request such information. Notices should be mailed, e-mailed, faxed, or hand delivered to:

Tanya Bakker, State Opioid Treatment Authority
Division of Mental Health and Substance Abuse Services
Bureau of Prevention Treatment and Recovery
1 West Wilson Street, Room 850
Madison, WI 53703
Fax: (608) 266-2579
E-mail: Tanya.Bakker@wisconsin.gov

4.1 CLARIFICATION AND/OR REVISIONS TO SPECIFICATIONS AND REQUIREMENTS

Any questions concerning this RFP should be addressed in writing and sent by mail, email or fax to:

Tanya Bakker, State Opioid Treatment Authority
Division of Mental Health and Substance Abuse Services
Bureau of Prevention Treatment and Recovery
1 West Wilson Street, Room 850
Madison, WI 53703
Fax: (608) 266-2579
E-mail: Tanya.Bakker@wisconsin.gov

Email is the preferred method of communication

COLLECT CALLS WILL NOT BE ACCEPTED

Proposers are expected to raise any questions, exceptions, or additions they have concerning the RFP at this point in the RFP process. If a proposer discovers any significant ambiguity, error, conflict, discrepancy, omission, or other deficiency in this RFP, the proposer should notify, immediately, the above named individual of such error and request modification or clarification.

In the event that it becomes necessary to provide additional clarifying data or information, or to revise any part of this RFP, revisions/amendments and/or supplements will be posted on the Department's website <http://www.dhs.wisconsin.gov/rfp/> to all recipients of this initial RFP.

Each proposal shall stipulate that it is predicated upon the requirements, terms, and conditions of this RFP and any supplements or revisions thereof.

Any contact with State employees concerning this RFP is prohibited, except as authorized by the RFP manager during the period from date of release of the RFP until the notice of intent to award contract is released.

4.2 PROPOSERS CONFERENCE

A Proposers' conference will be held on 9/19/11 from 1:00pm-3:00pm, at the Department of Health Services, 1 W. Wilson Street, Room 850A, Madison, WI; or via Adobe Connect Pro at this link: <https://connect.wisconsin.gov/r94348314/>. The purpose of this conference is to provide an opportunity for potential applicants to ask questions of Division of Mental Health and Substance Abuse Services staff about the application procedures, and grant requirements. Applicants are not required to attend this conference.

V. SUBMITTAL OF APPLICATION

5.0 APPLICATION FORMAT

All applications must be typed. All narrative sections are to be completed using an 11-point or larger font, with 1" or greater margins, typed single space. Applications are not to exceed 15 pages, not including budgets, budget justifications, appendices or letters of commitment. Charts that support narrative sections may be included in a smaller font than 11 point.

5.1 NUMBER OF APPLICATIONS PER APPLICANT

Under this proposal no more than one prevention program and one treatment program will be funded in any given county with the exception of those counties where tribal governments are located. However, a single program may provide services in more than one county.

5.2 NUMBER OF COPIES

The proposer must submit 1 (one) signed original and 5 (five) copies of the application to the Division.

5.3 CLOSING DATE

The closing date for the receipt of all applications under this solicitation will be **10/21/11**. Applications may be mailed or hand delivered. An application will be accepted and considered received on time if:

- a. The application is received by the DHS mail room by 4:00 p.m. CST on 10/21/11, addressed to:

Tanya Bakker, State Opioid Treatment Authority
Division of Mental Health and Substance Abuse Services
Bureau of Prevention Treatment and Recovery
1 West Wilson Street, Room 850
Madison, WI 53703

- b. The application is hand delivered to the Division of Mental Health and Substance Abuse Services by 4:00 p.m. CST on, 10/21/11

Tanya Bakker, State Opioid Treatment Authority
Division of Mental Health and Substance Abuse Services
Bureau of Prevention Treatment and Recovery
1 West Wilson Street, Room 850
Madison, WI 53703

NO FAXES, EMAIL, OR ELECTRONIC PROPOSALS WILL BE ACCEPTED.

Proposers are cautioned to allow sufficient time for delivery by the U.S. Post Office, because it can sometimes take several days to receive mail from outlying areas. Respondents/Applicants are cautioned that receipt of the RFP by the United State's Postal Service, the State of Wisconsin mail system or a commercial courier does not constitute receipt of a RFP by the Division of Mental Health and Substance Abuse Services for the purposes of this RFP. All responses to this solicitation which are received after the closing date and/or time will not be reviewed and will be returned to the respondent/applicant. **No exceptions will be allowed.**

- c. Supplemental and clarifying information. Unless requested by the Division, no additional information will be accepted from a proposer after the deadline for submittal of applications.

VI. AWARDING FUNDS INFORMATION

6.0 EVALUATION CRITERIA, POTENTIAL POINTS TO BE AWARDED AND PROCEDURES

All applications received will be reviewed by an evaluation committee and ranked accordingly. The evaluation committee will evaluate all proposals against stated criteria. Proposals from eligible applicants will be scored according to the following competitive criterion that is described under Part Two Technical Specifications.

Maximum Points (100 Total)

EVALUATION CRITERIA	MAXIMUM POINTS
• Organizational Experience including Staffing and Qualifications	5 points
• Problem/Need Statement	15 points
• Goals and Performance Expectations	10 points
• Target Population(s)	10 points
• Work Plan	10 points
• Care Coordination Service Delivery	10 points
• Data Collection and Evaluation	5 points
• Program Design	15 points
• Innovative, evidence based strategies	15 points
• Cultural Competence	5 points
TOTAL	100 POINTS

6.0.1 ORGANIZATIONAL EXPERIENCE INCLUDING STAFFING AND QUALIFICATIONS (5 Points):

The vendor has fully documented experience in providing IV Drug prevention or treatment services for the target population and is qualified to carry out the proposed program in a cost-effective manner.

The narrative should include at a minimum:

- a) A documented discussion of the organization's ability to provide timely prevention and/or treatment services to carry out the provisions of the grant.
- b) The proposed budget is clearly targeted to achieving the project outcomes. The budget should be appropriate for the scope of the program, other agency's involvement, and the financial contribution is well defined.
- c) A clear description of the criteria used to measure the successes of the organization in providing IV Drug services to persons using IV Drugs.
- d) If a subcontractor is to be used, documentation of the subcontractor's qualifications and experience.
- e) The applicant agency (or subcontractor, if applicable) either has existing qualified personnel or has proposed a functional staffing or volunteer pattern that is capable of supporting program activities.
- f) Staff costs that will be charged to the grant have been fully justified and are reasonable and necessary for carrying out the program.
- g) For those programs with significant minority populations within the service area, the agency has made or will make an effort to recruit, hire, and train minority staff/volunteers and provide in-service sensitivity training about gender responsive treatment, cultural

- competence, language and sexual orientation for all staff/volunteers.
- h) For those programs that have Native American Tribes within the service area, the agency has made or will make an effort to coordinate culturally competent treatment and referrals.
 - i) An organizational chart that indicates current and proposed positions that will implement this program.

6.0.2 PROBLEM/NEED STATEMENT (15 Points)

The vendor's response shows that they have an excellent understanding of the programs and unmet needs in their community related to providing services to IV Drug users. The proposal fully documents with statistical data, where available, the extent of the problem and fully demonstrates the inadequacy of existing programs in the program area to deal with the problem. This may include inadequate resources and other unmet assessment, treatment or other needs.

The narrative should include at a minimum:

- a) A clear discussion of how this project will deliver IV drug prevention or treatment.
- b) A full discussion of the exact unmet needs the program will address.
- c) Any data available to document the problems or unmet needs the program intends to address.
- d) A full discussion of how grant funds would expand/enhance service delivery and not supplant state and federal funds currently in use, if this is not a new program.

6.0.3 GOALS AND PERFORMANCE EXPECTATIONS (10 Points):

The goals and objectives of the vendor's program are clearly stated and consistent with the goals and performance expectations of the RFP and the core values as reflected in this RFP. The goals are stated for clients as well as the service delivery and system goals. The vendor has made it very clear how these grant funds will be utilized in the development of a new program or to strengthen the current program so that it meets these goals. The strategies described are logical and appropriate responses to the description of the problems and unmet needs. The discussion indicates an excellent understanding of how this program will impact target populations and/or expand/enhance current service delivery with clear outcomes and effective strategies to achieve these outcomes.

The narrative should, at a minimum, include:

- a) A statement of goals and objectives for the organization's proposed program regarding specific treatment or prevention outcomes and how grant funds will be used to achieve these goals.
- b) A discussion of strategies the program will use to achieve outcomes and performance expectations, and address the problems and unmet needs identified; state why these strategies will be effective; discuss how you plan to overcome obstacles or barriers to service delivery; and state what you anticipate as the overall impact of your program.
- c) Statement of the organization's ability to meet the integrated service provision philosophy of care in all aspects of its program service delivery, design, and treatment and its ability to measure this practice in day-to-day operations.

6.0.4 TARGET POPULATION (10 Points):

The target populations described in the proposal in Section 1 must be consistent with the stated goals of the RFP. If the proposal is for funds to develop a new program or expand or enhance the scope of existing programs, the proposal identifies the program's new target population. The agency will identify a reasonable number of new individuals to be served by the program. The vendor will provide specific demographic information about the target population. In general, the

composition of the target group should reflect the needs of the demographic community; however, the adequate inclusion of racial/ethnic minorities should be clearly demonstrated in the target population where feasible and appropriate.

The narrative should, at a minimum, include:

- a) A description of the target population(s) that the program will serve.
- b) An estimated number of participants that will be served annually with the grant funds
- c) If expanding and/or enhancing an existing program, clearly specify the increase in participants who will be served through these grant funds.
- d) If appropriate, a description of how participant eligibility will be determined.

6.0.5 WORK PLAN (10 Points):

The work plan described in the proposal is related to the goals of the program listed in Section 1.4, will facilitate the program accomplishing what has been proposed, and is sequentially reasonable. Activities in the work plan are clearly assigned to personnel. The work plan is consistent with the objectives and can be accomplished given the time frames, staffing, and the budget proposed. Time frames for all tasks and activities in the work plan are appropriate to ensure that sufficient effort is planned.

When writing narrative for this section, keep in mind that:

- a) The work plan must detail all tasks, activities and procedures in a logical progression that will be used to achieve the goals.
- b) The work plan includes the assignment of responsibility to specific personnel and the timetable for each task or activity to be started and to be completed.

6.0.6 CARE COORDINATION SERVICE DELIVERY (10 Points):

The vendor demonstrates that necessary community agencies have been or will be involved in the planning and execution of the program to achieve a coordinated approach to meet the needs of IV Drug users involved in various service systems. The application includes a description of how the vendor will work with appropriate law enforcement agencies, court system, treatment agencies and providers, probation/parole agents and others to achieve multi-system coordination at the direct service worker level, and a detailed explanation as to how these coordination efforts will relate to the proposal.

The application must include letters of cooperation, memorandums of understanding or inter-agency agreements from all agencies whose involvement is essential for the success of the program; these should be included in the attachments.

The narrative should, at a minimum, include:

- a) A description of how the agency and direct service staff will work with appropriate community agencies (e.g., court system, treatment providers, law enforcement, technical colleges, corrections, mental health services, etc.).
- b) A detailed explanation as to how these community support systems will assist in achieving the proposed goals for the IV Drug users and service system including discussion of how joint service plans are developed and how various fiscal resources are shared or assigned to this project.
- c) The use of recovery support coordinators to provide comprehensive support services. The recovery support coordinators' role in working with IV Drug clients and other service providers.

6.0.7 DATA COLLECTION AND EVALUATION (5 Points):

The vendor will evaluate the grant program by use of outcome measurements that the Department approves.

The vendor's evaluation plan should follow the Goals and Work Plan. The vendor will discuss criteria of measurement that will demonstrate if the intended results have or have not been achieved. The vendor will be required to enter additional data fields into HSRS to identify clients receiving new or enhanced services.

The narrative should, at a minimum, include:

- a) How the prevention or treatment NOMS data (see Section 1.6) will be collected.
- b) Person responsible for collecting and analyzing this data.
- c) Person responsible for supervising the data collection and for taking corrective actions based on the results of the evaluation.
- d) Preparation, distribution, and use of reports summarizing program results.
- e) Procedures to be implemented to ensure privacy and confidentiality

6.0.8 PROGRAM DESIGN (15 Points):

The vendor describes how the program design will include all aspects described in Section 1.5 and in Section 2.1, with emphasis on ensuring effective services to IV Drug clients.

6.0.9 INNOVATIVE, EVIDENCE BASED STRATEGIES (15 Points)

The vendor describes in detail how it intends to incorporate new and innovative strategies into its existing IV Drug services. Vendors who propose implementation of strategies defined by the Substance Abuse and Mental Health Service Administration (SAMHSA) are not required to submit documentation other than to note SAMHSA's approval; <http://nrepp.samhsa.gov/>. If an applicant proposes strategies not listed by SAMHSA as evidence-based, it must include research documenting the strategy's efficacy.

The narrative should, at a minimum, include:

- a) A description of how the applicant will incorporate the strategy into its existing IV Drug services.
- b) Person responsible for assuring the implementation of the strategy.
- c) Reputable research showing the strategy's efficacy.
- d) Other states or programs that have implemented the strategy and their outcome data.

6.0.10 CULTURAL COMPETENCE (5 Points):

All vendors are required to incorporate cultural competence as they work through the elements of the IV Drug Grant. Cultural Competence means "A set of congruent behaviors, attitudes and policies that come together in a system, agency or among professionals and enable that system, agency or those professionals to work effectively in cross-cultural situations." (HRSA/DHHS,2002). See the National Center for Cultural Competence at: <http://www.ncccurricula.info/>.

The narrative should, at a minimum, include:

- a) Organizational Experience: The organization should have a documented history of positive programmatic involvement with the population or community to be served. The organizations' staff, its board, and volunteers should have a history of involvement with the target population

- or community to be addressed that is verifiable by the general cultural group and by the specific community to be served.
- b) Language: If an organization is providing services to a multi-linguistic population, there should be multi-linguistic resources, including use of skilled bilingual and bicultural translators whenever a significant percentage of the target community is more comfortable with a language other than English. There should be printed and audio/visual materials sufficient for the program.
 - c) Materials: It should be demonstrated that audio/visual materials, training guides, print materials, and other materials to be used in the program are culturally appropriate or will be made culturally consistent with the community to be served.
 - d) Screening and Assessment Tools: Additional program instruments used should be appropriate to the population/community being served. There should be a rationale for the use of instruments that are chosen, including a discussion of the validity of the instruments in terms of the gender/age/culture of the group or groups targeted.

6.1 PROPOSER RESPONSES

Proposals submitted in reply to this RFP shall respond to the specifications stated herein. Failure to respond to the specifications may be a basis for an application being eliminated from consideration during the selection process.

In the event of an award, the contents of this RFP (including all attachments), RFP addenda and revision and the proposal from the successful proposer(s) will become contractual obligations. The Division reserves the right to negotiate the award amount, the programmatic goals, and the budget items with the selected proposer(s) prior to entering into an agreement.

Justifiable modification may be made in the course of the agreement only through prior consultation with and written approval of the Division. Failure of the successful proposer to accept these obligations may result in cancellation of the award.

6.2 WITHDRAWAL OF APPLICATIONS

Proposals may be withdrawn by written notice. Proposals may be withdrawn in person by the proposer or his/her authorized representative, providing his/her identity is made known and he/she signs a receipt for the proposal.

6.3 AWARD PROCEDURES

The Evaluation Committee's scoring will be tabulated and proposers will be ranked according to the numerical score received. The evaluation committee has the option to conduct interviews and/or on-site inspections of the top ranked proposers to include those results in the consideration of the evaluation points. The Division Administrator will make a final decision if a contract will be awarded. The Division reserves the right to reject any or all proposals and to negotiate the award amount, authorized budget items, and specific programmatic goals with the selected proposer(s) prior to entering into an agreement. No more than one prevention grant and one treatment grant will be awarded in any given county with the exception of those counties where tribal governments are located. However, a single program may provide services in more than one county.

6.4 NOTICE OF INTENT TO AWARD A CONTRACT

Each proposer whose proposal is reviewed by the Evaluation Committee shall receive written notice of the determination of approval or non-funding of the proposed project.

Each proposer whose project has not been approved shall be given an opportunity to discuss with the Division representative the reasons for non-funding or may write the Division representative requesting the reason for the decision.

Upon request, the Division representative will clarify non-funding reasons verbally or will respond in writing explaining the reasons for the project not being funded.

6.5 PUBLIC INFORMATION

It is the intention of the state to maintain an open and public process in the submission, review, and approval of awards. All material submitted by proposers will be made available for public inspection after notice of intent to award or not to award a contract based on the evaluation(s) of the application, which were submitted. No entire proposal submitted to the state may be marked as confidential, and any materials so marked, by being included in the application, will be considered public information.

6.6 ASSURANCES

An authorized official must sign the Assurances of Compliance with the Department of Health Services regulations form, and comply with all the requirements contained therein. This signed form is to be included in this section of the applicant's proposal.

**PART II
TECHNICAL SPECIFICATIONS (APPLICATION INSTRUCTIONS)**

I. APPLICATION INSTRUCTIONS

1.0 GENERAL INSTRUCTIONS

Please read this section carefully. Vendors are cautioned that in completing the following Technical Specifications they are to provide complete information as possible. The only information evaluators will be given about a program is that which is contained within the proposal. For that reason, each copy must be a duplicate of the entire original, including any attachments.

The focus of the funding is for agencies to enhance services to IV Drug clients through evidence-based strategies designed to provide prevention and treatment to IV drug users. In order to determine the potential for a proposed program to achieve this aim, applications must fully address the program requirements and specifications that follow.

Proposals must include the following items submitted in the order listed.

- I. Outline and Table of Contents (checklist form)
- II. Application Summary
- III. Abstract
- IV. Narrative
 - Section A - Administration
 - Section B - Program
- V. Detailed Budget Request
- VI. Assurance
- VII. Attachments

2.0 APPLICATION SUMMARY FORM INSTRUCTIONS

Complete the Application Summary following the instructions below. The Application Summary should be the second page in your proposal.

Section A - Agency Information

- Item 1 Enter the Project Title
- Item 2 The "Applicant Agency" is defined as the legal entity which assumes the liability for the administration of the grant funds and is responsible to DHS for the performance of the project activities.
- Item 3 Enter name, address, and telephone number of project director.
- Item 4 Enter name, address, and telephone number of project fiscal agent. The fiscal agent is the individual who is responsible for the receipt and administration of the project funds and for the submission of all fiscal reports to DHS.
- Item 5 Enter the Internal Revenue Services number assigned to the agency which is responsible for the employees hired under these project funds.
- Item 6 Enter the geographic boundaries. If the application is for coalition programming, indicate the other counties served.

- Item 7 If all or parts of the project will be subcontracted, fill in the name and address of the subcontractor.
- Item 8 Budget Summary
- The budget summary contains the total projected costs by cost category. All figures on this form should be rounded to the nearest dollar.
- Item 9 Enter the name, title, telephone number and signature of official.

II. IV DRUG ENHANCEMENT GRANT APPLICATION SUMMARY

Section A - AGENCY INFORMATION

1. Project Title

2. Applicant Agency

Telephone

Street Address

City

State Zip

3. Project Director

Telephone

Street Address

City

State Zip

4. Fiscal Agent

Telephone

Street Address

City

State Zip

5. Employer Identification No.

6. Describe Geographic Area Being Served including Cities and Tribes

7. Provide or attach (Identify attachment number below) names and addresses of all sub-contractors funded through this project

8. Annual Budget Summary (January 1, 2012 through December 31, 2012)

Budget Item

Amount

1. Salaries

2. Fringe

3. Travel

4. Equipment

5. Supplies and Operating Expenses

6. Contractual and Consultant Costs

7. Training

8. Other

9. TOTAL

9. NAME, TITLE AND TELEPHONE NUMBER OF OFFICIAL AUTHORIZED TO COMMIT APPLICANT ORGANIZATION TO THIS AGREEMENT

Typed Name of Official

Telephone Number

Title

Signature

Date

APPLICATION FOR IV DRUG ENHANCEMENT GRANT

Agency Name: _____

Proposal Title: _____

Vendors are required to number all pages and to organize their application according to the following format. This form serves as a checklist of application contents and facilitates application evaluation. This page must be completed and attached to the front of the completed application as the first page.

I	Outline and Table of Contents (This page)	Page 1
II	IVDU Grant Application Summary	Page 2
III	Abstract	Page 3
IV	Narrative	Page
	Administration	Page
	Organizational Experience including Staffing and Qualifications	Page
	Program	Page
	Problem/Need Statement	Page
	Goals and Performance Expectations	Page
	Target Population	Page
	Work Plan	Page
	Care Coordination and Service Delivery	Page
	Data Collection and Evaluation	Page
	Program Design	Page
	Evidence-based Strategies	Page
	Cultural Competence	Page
V	Budget	Page
	Budget Request	Page
	Budget Justification	Page
VI	Assurance of Compliance	Page
VII	Attachments	Page
	Letters of Support	Page
	Letters of Commitment	Page

Abstract (One Page)

Narrative

- A. Administration
 - 1. Organizational Experience including Staffing and Qualifications

- B. Project
 - 1. Goals and Performance Expectations
 - 2. Problem/Need Statement
 - 3. Target Population
 - 4. Work Plan
 - 5. Care Coordination and Service Delivery
 - 6. Data Collection and Evaluation
 - 7. Program Design
 - 8. Evidence-Based Strategies
 - 9. Cultural Competence

Budget

- 1. Budget Request
- 2. Budget Justification

3.0 ABSTRACT

The abstract must be one page only. The information in the abstract should provide a brief description of your IV Drug services and provide documentation that you are clearly expanding the scope of your current program to serve IV Drug Clients, highlighting the main points from the Detailed Budget Request and Narrative Sections of your proposal.

4.0 NARRATIVE

A. ADMINISTRATION

1. Organizational Experience including Staffing and Qualifications (5 Points)

The applicant has fully documented experience in providing services for intravenous drug users and is qualified to carry out the proposed program in a cost-effective manner.

The narrative should address all the elements in 6.0.1

B. PROGRAM

1. Problem/Needs Statement (15 Points)

The vendor's response shows that they have an excellent understanding of the programs and unmet needs in their community related to providing intravenous drug user's services. The proposal fully documents with statistical data, where available, the extent of the problem and fully demonstrates the inadequacy of existing programs in the program area to deal with the problem. This may include caseload information and unmet treatment need. If an agency has an existing program, documentation is provided that an expanded program is needed.

The narrative should address all the elements in 6.0.2

2. Goals and Performance Expectations (10 points)

The goals and objectives of the vendor's program are clearly stated and consistent with the goals and performance expectations of the RFP and the core values as reflected in this RFP. The goals

are stated for offenders as well as the service delivery and system goals. The vendor has made it very clear how these grant funds will be utilized in the development of a new program or to strengthen the current program so that it meets these goals. The strategies described are logical and appropriate responses to the description of the problems and unmet needs. The discussion indicates an excellent understanding of how this program will impact target populations and/or expand/enhance current service delivery.

The narrative should address all the elements in 6.0.3

3. **Target Population (10 Points)**

The target populations described in the proposal in Section 1 must be consistent with the stated goals of the RFP. If the proposal is for funds to develop a new program or expand or enhance the scope of existing programs, the proposal identifies the program's new target population. The agency will identify a reasonable number of new individuals to be served by the program. The vendor will provide specific demographic information about the target population. In general, the composition should reflect the needs of the demographic community; however, the adequate inclusion of racial/ethnic minorities should be clearly demonstrated in the target population where feasible and appropriate.

The narrative should address all the elements in 6.0.4

4. **Work Plan (10 Points)**

The work plan described in the proposal is related to the goals of the program listed in Section 1.4, will facilitate the program's accomplishing what has been proposed, and is sequentially reasonable. Activities in the work plan are clearly assigned to personnel. The work plan is consistent with the objectives and can be accomplished given the time frames, staffing patterns and the budget proposed. Time frames for all tasks and activities in the work plan are appropriate to ensure that sufficient effort is planned.

The narrative should address all the elements in 6.0.5

5. **Care Coordination Service Delivery (10 Points)**

The vendor demonstrates that necessary community agencies have been or will be involved in the planning and execution of the program to achieve a coordinated approach to meet the needs of IV Drug users involved in various service systems. The application includes a description of how the vendor will work with appropriate treatment agencies, court systems, and/or corrections to achieve multi-system coordination at the direct service worker level, and a detailed explanation as to how these coordination efforts will relate to the proposal.

The narrative should address all the elements in 6.0.6

6. **Data Collection and Evaluation (5 Points)**

The vendor will evaluate the grant program by use of NOMS outcome measurements identified in Section 1.6 that the Department approves.

The vendor's evaluation plan should follow the Goals and Work Plan. The applicant will discuss criteria of measurement that will demonstrate if the intended results have or have not been achieved.

The narrative should address all the elements in 6.0.7

7. **Program Design (15 Points)**

The vendor must describe how the program design will include all aspects described in Section 1.5 and in Section 2.1.

The narrative should address all the elements in 6.0.8

8. Evidence-Based Strategies (15 Points)

The vendor must describe the evidence-based strategies and describe how they will enhance their current IV Drug services.

The narrative should address all the elements in 6.0.x

10. Cultural Competence (5 Points)

All vendors are required to incorporate cultural competence as they work through the elements of the IV Drug Grant.

“Cultural Competence includes: Attaining the knowledge, skills, and attitudes to enable administrators and practitioners within system of care to provide effective care for diverse populations, i.e., to work within the person’s values and reality conditions. Recovery and rehabilitation are more likely to occur where managed care systems, services, and providers have and utilize knowledge and skills that are culturally competent and compatible with the backgrounds of consumers from the four underserved/underrepresented racial/ethnic groups, their families, and communities. Cultural competence acknowledges and incorporates variance in normative acceptable behaviors, beliefs and values in determining an individual’s mental wellness/illness, and incorporating those variables into assessment and treatment.” U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Services.

The narrative should address all the elements in 6.0.10

5.0 BUDGET

All vendors are required to attach a detailed budget and narrative budget justification that supports the proposed program. A sample budget template is attached for assistance. It is not necessary to use the attached budget; a vendor may use a budget template of their choice as long as it addresses the elements in the attached sample template.

6.0 ASSURANCE OF COMPLIANCE

All vendors are required to complete the attached Assurance of Compliance form and include it in their proposal.

7.0 VENDOR’S ATTACHMENTS

All vendors are required to submit letters of support and letters of commitment from collaborative agencies.

ANNUAL BUDGET DETAIL (sample)
 Period: January 1, 2012 – December 31, 2012

Personnel

Title of Position	% of Time	Hourly Rate	Hrs./Month	# of Months Budgeted	Total Cost
		\$			\$
		\$			\$
		\$			\$
		\$			\$
		\$			\$

1. Total Salary Cost Total \$ _____

2. Fringe Benefits for Project Personnel (Employers FICA; Employees Insurance; etc., please list below) \$ _____ (%)

3. Travel
 - a. Professional Staff \$ _____
 - b. Volunteer Workers \$ _____

4. Equipment (attach separate sheet detailing) \$ _____

5. Supplies and Operating Expenses (attach a separate sheet detailing) \$ _____ (%)

6. Contractual and Consultant Costs (attach a separate sheet detailing) \$ _____

7. Training \$ _____

8. Other Expenses (attach a separate sheet detailing; flexible funds may be included here) \$ _____

10. TOTALS (lines 1 through 9) \$ _____

*NOTE: BUDGET DETAIL IS TO BE PROVIDED IN THE BUDGET JUSTIFICATION FOR (4) TRAVEL, (5) EQUIPMENT, (6) SUPPLIES, ETC. (7) CONTRACTUAL AND CONSULTANT COSTS, AND (12) OTHER EXPENSES.

ASSURANCE OF COMPLIANCE

Assurances of Compliance with Department of Health Services Regulations

(Completion of this form is consistent with the intent of Title VI, Civil Right Act & 45 CFR Part 80)

(Name of Applicant Agency, hereinafter called the "Applicant") **HEREBY AGREES THAT** it will comply with the following assurances:

The undersigned possesses legal authority and capacity to enter into this contract and a motion has been duly passed as an official act of the governing body of the application, authorizing the execution of this agreement, including all understandings and all assurances contained therein, and authorizing the person identified as the official representative for the Applicant to act in connection with the Applicant and to provide such additional information as may be required.

The Applicant agrees that (a) funds granted as a result of this request are to be expended for the purposes set forth in this application and in accordance with all applicable laws, regulations, policies and procedures of the State of Wisconsin or the Federal Funding Agency, as applicable; (b) no expenditures will be eligible for inclusion if occurring prior to the effective date of the grant; funds awarded by the Wisconsin Department of Health Services may be terminated at any time for violation of any terms and requirements of this agreement.

The Applicant ensures compliance with the Title VI of the Civil Rights Act of 1964 (P.L. 88-342), and all requirements imposed by or pursuant to the regulations of the Department of Health and Human Services (45 CRF Part 80) issued pursuant to that title. To that end, and in accordance with Title VI of that act and the regulations, no person in the United States shall, on the grounds of race, color or national origin, be excluded from participating in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity in which the designated agency received federal assistance, or financial assistance from the Department; and **HEREBY GIVES ASSURANCE THAT** it will immediately take any measures necessary to effectuate this agreement.

The Applicant ensures compliance with Title IX of the Education Amendment of 1972 which state that no person in the United States shall, on the basis of sex, be excluded from participating in, be denied the benefit of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives or benefits from Federal financial assistance.

The Applicant shall comply with Section 504, Rehabilitation Act of 1973 which prohibits discrimination on the basis of a physical condition or handicap and the Age Discrimination Act of 1975 which prohibits discrimination because of age.

The Applicant shall ensure the establishment of safeguards to prevent employees, consultants, or members of governing bodies from using their position for purpose that are, or give the appearance of being, motivated by a desire for private gain for themselves or others, such as those with whom they have family, business, or other ties as specified in Wisconsin Statutes 946.10 and 946.13.

(Type Name of) Applicant Organization: _____

(Type Name of) Authorized Representative: _____

(Signature of) Authorized Representative: _____ Date: _____