Organization Overview
The National Association of Community Health Centers (NACHC) is a national organization supporting 330-Funded and Look-Alike Health Centers, and expanding health care services for the medically underserved and uninsured. Founded in 1971 to promote efficient, high-quality, comprehensive health care that is accessible, culturally and linguistically competent, community-directed, and patient-centered for all, NACHC's mission and strategic pillars continue to guide our values and priorities as an organization representing the national health center movement.

Background
As a trusted resource, NACHC delivers training and technical assistance (TTA) to preserve, strengthen, and expand the health center movement by assisting existing and potential 330-Funded and Look-Alike Health Centers in addressing clinical and operational demands. In addition, NACHC empowers health center professionals with strategies and best practices by maintaining a cadre of practitioners and subject matter experts who provide quality educational instruction and technical assistance utilizing adult learning principles, advanced instructional design, and the understanding and application of technology to advance learning and engagement.

Some of our vendor opportunities are supported by the U.S. Health Resources and Services Administration (HRSA) Bureau of Primary Health Care (BPHC) to improve existing and potential 330-Funded and Look-Alike Health Centers operational and clinical outcomes through the provision of coordinated, collaborative TTA. NACHC seeks experienced and innovative professionals knowledgeable of Section 330 of the Public Health Service Act, as well as the leadership and operational implications of the BPHC Compliance Manual and Health Center Program Requirements.
Health Center Growth and Development Objectives

As part of NACHC’s portfolio of services offered through its National Training and Technical Assistance Program (NTTAP), NACHC seeks qualified organizations and/or individuals to serve as faculty, provide technical assistance, and support the development of resources related to Health Center Growth and Development. NACHC’s staff lead, who is responsible for content planning, will develop trainings and resources in partnership with the selected vendor(s). NACHC staff will be on-site/online to assist with the overall delivery of all trainings.

The objectives for NACHC’s Health Center Growth and Development trainings and resources are rooted in core competencies:

- Provide an overview of the fundamental components of HRSA’s Health Center Program
- Define Section 330 compliance requirements
- Outline processes, requirements, and strategies for starting a 330-funded Health Center and/or a Health Center Program Look-Alike
- Identify essential components for high performing health centers in terms of governance, operations, finance, and clinical services
- Highlight and describe special models of health centers, such as Public Centers
- Select and apply relevant HRSA resources and tools
- Strengthen newly funded health centers in their first 120 days and first year of operations (and beyond)
- Provide support on activities related to Health Center Enabling Services (i.e. outreach, enrollment, community health workers, etc.)

### Health Center Growth and Development Schedule

<table>
<thead>
<tr>
<th>Deliverable Name</th>
<th>Timing</th>
<th>Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intro to the Health Center Program</td>
<td>2 day training in January</td>
<td>Virtual</td>
</tr>
<tr>
<td>Outreach and Enrollment Learning Collaborative</td>
<td>Series of workshops from March through April</td>
<td>Virtual</td>
</tr>
<tr>
<td>Look-Alike Learning Collaborative</td>
<td>Series of workshops from April through May</td>
<td>Virtual</td>
</tr>
<tr>
<td>Needs Assessment Learning Collaborative</td>
<td>Series of workshops from May to June</td>
<td>Virtual</td>
</tr>
<tr>
<td>Operational Site Visit Webinar</td>
<td>3 day training in July</td>
<td>Virtual</td>
</tr>
<tr>
<td>Community Health Institute Expo (CHI)</td>
<td>Conference sessions in August</td>
<td>In Person</td>
</tr>
<tr>
<td>Financial, Operations Management and Information Technology (FOM IT)</td>
<td>Conference sessions in October</td>
<td>In Person</td>
</tr>
<tr>
<td>Publications, eLearning Modules and Resources</td>
<td>Ongoing</td>
<td>Virtual</td>
</tr>
</tbody>
</table>
Qualified Vendor List

Through this Request for Proposal (RFP), NACHC seeks to develop a diverse and expansive list of faculty, advisors, and experts (Qualified Vendor List, “QVL”) across many Health Center Growth and Development domains. Selected vendor(s) will be qualified to engage in upcoming procurement opportunities for Health Center Growth and Development deliverables. Vendors work in close coordination with NACHC staff to develop and deliver deliverables including conference sessions, webinars, virtual or in-person workshops and training sessions, publications, and resources as part of NACHC’s Health Center Growth and Development portfolio and/or provide direct technical assistance to 330-Funded and Look-Alike Health Centers or other stakeholders as identified by NACHC staff.

Time Period

The Health Center Growth and Development Schedule below outlines tentative timeframe for projected technical assistance and resources. Time period for services may begin as of July 1, 2024 to June 30, 2025. Vendor(s) may be retained for a multi-year period of service through June 30, 2026, based upon successful performance during the period of initial service and on-going availability of funds. Please review the Health Center Growth and Development Schedule above for tentative dates of the deliverables.

Emerging Issues

Selected vendor(s) may support NACHC with addressing new and emerging issues by developing and/or delivering TTA products through deliverables to be determined based on audience needs. NACHC staff will determine the content area and delivery modality in anticipation of or in response to emerging issues.

Required Components for Proposals

Domains, Capability Statement, and Evidence of Work

Appendix A contains a list of Domains, within which trainings and resources may be delivered by the Health Center Growth and Development team. Please complete Appendix A by checking the boxes of the Domains for which you have subject matter expertise and would like to be considered for Health Center Growth and Development deliverables. For the domains indicated in Appendix A, please provide corresponding information describing your ability and experience within the Domains in the Capability Statement and through your Evidence of Work. See Evaluation Criteria for descriptions of what constitutes the Capability Statement and Evidence of Work.

Funding & Budget Information

Activities produced under the Health Center Growth & Development Portfolio are funded by various sources, including NACHC, the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) and other sources. Funders’ requirements must be agreed upon by selected vendors.

Vendor(s) must include the daily and hourly rates for all expert(s) and staff engaged in work. Budget may also include the ideal methodology and process used to meet the desired services, scope of work and
deliverables (i.e. estimated project rate for a webinar, Learning Collaborative, etc). Budget negotiations may occur.

Information Requested

Proposals must contain the below items, which are evaluated based on the specific criteria outlined in the Evaluation table below.

- Point of Contact Information
- Name / Description of Organization
- Appendix A: Domains
- Evidence of Work
- References
- Capability Statement
- Proposed Budget
- Resume(s)
- Signed Statement (see below)

Proposals must be submitted using NACHC’s web-based portal by the end of the day on **June 3, 2024**. Incomplete proposals will not be considered. NACHC will notify all applicants on or around **June 21, 2024**.

Online Submission Portal:
https://nachc.co1.qualtrics.com/jfe/form/SV_3qqB5LnRfIyRiRYW

Upon submission of a complete application, NACHC’s review team will evaluate the applicant’s qualifications in response to this RFP. Determining "qualified" enables a vendor(s) to engage in procurement opportunities.
ATTESTATION

By my signature below, I hereby certify that this Proposal reflects my best estimate of the capability of organization and the true and necessary costs for the project, and the information provided herein is accurate, complete and current as of the date of my signature below.

By signing below, I certify that the information provided in the application is true and accurate.

Print Name:
Title:
Organization:
Signature:
Date:
## Evaluation Criteria

<table>
<thead>
<tr>
<th>Rating Domain</th>
<th>Application Selection Criteria</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Capability Statement</strong></td>
<td>To earn full points in each domain, the applicant must demonstrate: Provide a brief document highlighting your company’s ability to deliver technical skills and/or subject matter expertise. Please ensure this statement clearly and directly addresses your subject matter expertise for each of the domains indicated in Appendix A. You will be scored on your expertise and ability demonstrated in each domain and category. Evidence Limit for Capability Statement: 7 pages</td>
<td>30</td>
</tr>
<tr>
<td><strong>Evidence of Work</strong></td>
<td>Evidence of work must demonstrate the ability to deliver technical skills as a subject matter expert (SME) within the Domains indicated in Appendix A. In addition, an understanding of adult learning needs and content knowledge should be evident where appropriate. Evidence of work includes the following: Sample presentation (excerpts are accepted to accommodate page limit), supplementary training product(s), and/or publications developed and delivered by vendor. A comprehensive summary of prior work on each of the domains may also be accepted. Page Limit: 20 pages</td>
<td>20</td>
</tr>
<tr>
<td><strong>References</strong></td>
<td>References required in this RFP include the following: Past client evaluations, reference letters, and/or testimonials demonstrating quantitative and/or qualitative feedback from at least two audiences, clients, or engagements occurring within the past three years of the RFP application date. Page Limit: 10 pages</td>
<td>15</td>
</tr>
<tr>
<td><strong>Proposed Budget</strong></td>
<td>The budget proposal must include the daily and hourly rates for all expert(s) and staff engaged in work. Rates should reflect the overall cost rate, including any fringe, overhead, and/or general &amp; administrative expense (G&amp;A) if required. Please specify costs for deliverables identified in RFP such as webinar cost, conference session cost, etc.</td>
<td>20</td>
</tr>
<tr>
<td><strong>Resume(s)</strong></td>
<td>Resume(s)/CV(s) of expert(s)/staff clearly show tenure, professional experience, and/or education that reflects knowledge and ability in content expertise and training. Page Limit for Resume(s)/CV(s): 2 pages per key expert/staff</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>100</td>
</tr>
</tbody>
</table>
Scoring Matrix

Review team members will assign scores on a scale of zero (0) to five (5) where the end and midpoints are defined as follows:

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
<th>Discussion</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No Value</td>
<td>The Response does not address any component of the requirement, or no information was provided.</td>
</tr>
<tr>
<td>1-2</td>
<td>Below Average</td>
<td>The Response only minimally addresses the requirement and the Bidders ability to comply with the requirement or simply has restated the requirement.</td>
</tr>
<tr>
<td>3</td>
<td>Average</td>
<td>The Response shows an acceptable understanding or experience with the requirement. Sufficient detail to be considered &quot;as meeting minimum requirements&quot;.</td>
</tr>
<tr>
<td>4-5</td>
<td>Above Average</td>
<td>The Response is thorough and complete and demonstrates firm understanding of concepts and requirements.</td>
</tr>
</tbody>
</table>

a. A score of zero (0) on any scored requirement may cause the entire application to be eliminated from further consideration.

b. Application scores will be calculated by multiplying the average (mean) score assigned by the review committee members by the weight assigned to each scored element: Average Score x Weight = Points Awarded
Appendix A: Health Center Growth and Development Domains

Check the boxes of the domains for which you have subject matter expertise and would like to be considered for Health Center Growth and Development projects. For each domain indicated, please provide corresponding information about your ability and experience within the domain in the Capability Statement and through the Evidence of Work.

Becoming a Health Center

☐ New Access Point Application
☐ Look-Alike Application
☐ Service Area Competition Application
☐ Organizational Readiness and Strategic Planning for Applying for 330-funding and/or Look-Alike Status
☐ Other Health Center Models (i.e. Public Entity, Tribal Health Centers, Certified Community Behavioral Health Clinics, etc.)

Health Center Program Overview & Fundamentals

☐ HRSA Health Center Program Overview
☐ Health Center Program Compliance, Operational Site Visit Preparation + Continuous Compliance
☐ Scope of Project (Form 5A, 5B, 5C)
☐ Look-Alike Health Center Finance, Operations, and Service Delivery
☐ Service Line Expansion Considerations
☐ Fundamentals of Staffing Your Health Center
☐ Fundamentals of Health Center Finance (Revenue Cycle, Sliding Fee, Budgeting, etc.)
☐ Fundamentals of Health Center Clinical Quality Improvement
☐ Fundamentals of Health Center Board Governance

Health Center Community Needs Assessment

☐ Innovative Approaches to Community Needs Assessments
☐ Leveraging Staff, Partners, and Consultants to Conduct Needs Assessment
☐ Qualitative methods (Focus Groups, Surveys, Stakeholder Interviews)
☐ Quantitative methods (Data Analysis, Data Sources, etc.)
☐ Service Area Needs Assessment Methodology (SANAM)
☐ Unmet Needs Score (UNS)
☐ Leveraging the Needs Assessment for Strategic Planning
☐ Other Models of Needs Assessments (Health departments/MAPP, Hospitals, CCBHCs, etc.)

**Enabling Services**

☐ Outreach and Enrollment Best Practices
☐ Outreach and Enrollment Assister Workflow
☐ Return on Investment (ROI) of Outreach and Enrollment
☐ Federal/State Enabling Services Policies
☐ Community Health Worker Best Practices
☐ Integrating Enabling Services Workforce into Care Coordination

**General Training and Technical Skills**

☐ Lean Methods and Process Improvement
☐ Human-Centered Training Design and Development
☐ Facilitation Services
☐ Project Management