

BID BOARD SPECIFICATION

PROCUREMENT ID NUMBER: PHPA-S1872

EMARYLAND MARKETPLACE BID NUMBER: MDM0031020151

ISSUE DATE: April 14, 2015

TITLE: Maryland Colorectal Cancer Control Program Evaluation

THIS SOLICITATION SHALL BE MADE IN ACCORDANCE WITH THE SMALL PROCUREMENT REGULATIONS DESCRIBED IN COMAR 21.05.07

BACKGROUND

The Centers for Disease Control and Prevention (CDC) funded Maryland Colorectal Cancer Control Program (MCRCCP) is housed within the Center for Cancer Prevention and Control at the Maryland Department of Health and Mental Hygiene (DHMH) in the Prevention and Health Promotion Administration. The goal of the CRCCP is to increase high quality colorectal cancer (CRC) screening among all persons aged 50 years and older in Maryland to 80% by 2018 and to reduce health disparities in colorectal cancer screening, incidence, and mortality. Program activities over the past six years have included the provision of colorectal cancer screening and patient navigation and screening promotion initiatives such as the development of patient navigation tracking software, process and quality improvement/systems change at federally qualified health centers and community health centers, and the use of other evidence-based interventions to meet program goals.

SCOPE OF WORK

The purpose of this agreement is to attain a vendor to develop a comprehensive written program evaluation report for the MCRCCP, covering activities completed during fiscal years 2010 to 2015. This evaluation will focus on analyzing the quantitative and qualitative components of selected MCRCCP initiatives. The resulting report will be shared with internal and external partners, as well as with the program funder, CDC.

DESCRIPTION OF SERVICE

The Vendor shall conduct a program evaluation of the MCRCCP, to include:

1. Analysis and evaluation of selected program activities and the short-term outcomes of MCRCCP as defined in the program logic model.
2. Preparation of a written evaluation report of quantitative and qualitative data acquired in the six (6) fiscal year period of MCRCCP, focusing on evidence-based practices to

promote quality CRC screening implemented in multiple projects and settings.

3. Regular in-person and/or telephone meetings to discuss required documentation and data as well as any project related concerns or needs.
4. Assurance that all personnel working on this project sign a confidentiality statement.
5. Compliance with applicable state laws and regulations on confidentiality and data use.

MANDATORY REQUIREMENTS

The Vendor shall meet the following requirements in order to place a bid for the project:

- A.) A minimum of a Master's degree in public health from an accredited program.
- B.) A minimum of five (5) years' experience synthesizing public health program data into written monitoring/evaluation reports.
- C.) Documented experience working with quantitative and qualitative public health data.
- D.) Ability to provide three (3) professional references which can attest to the contractor's skills and abilities in the area of public health program evaluation, time management, and interpersonal skills.
- E.) Ability to provide two (2) writing samples demonstrating skills and abilities in the area of public health program evaluation and written communication.

CONTRACT MONITOR

Michael Dark
Maryland Colorectal Cancer Control Program
201 West Preston Street, 3rd Floor
Baltimore, MD 21201
Telephone: 410-767-0816
E-mail: michael.dark@maryland.gov

CONTRACT TERM

The term of this contract shall be from May 1, 2015 until June 30, 2015.

BILLING

The Vendor may bill the department twice: Up to one half of the total budget allowed for the project (no more than 50% or \$12,500) at the mid-point of the award (May 31, 2015) and the remainder being invoiced by July 31, 2015 via a final invoice (not to exceed a project total of \$25,000), certifying thereto that the work and services have been performed, that payment for said work has not been received and that the amount specified is due and owing. The final invoice must state **FINAL INVOICE**.

All invoices must (at a minimum) be signed and dated, and include the following:

- The Vendor's name and mailing address,
- The Vendor's Federal Tax Identification or Social Security Number,
- The State assigned Contract Control Number,
- The State assigned ADPICS number,
- The goods or services provided (hours worked, documents provided),
- The time period covered by the invoice,
- The amount of requested payment, and
- Documentation to support invoice requested amount

Submit invoices to: Michael Dark
 Maryland Colorectal Cancer Control Program
 Maryland Department of Health and Mental Hygiene
 201 West Preston Street, 3rd Floor
 Baltimore, MD 21201
 Telephone: 410-767-0816
 E-mail: michael.dark@maryland.gov

PROPOSAL SUBMISSION INFORMATION

Interested parties should submit bids using the attached "Bid Page" and should submit the following:

- The bidder's qualifications and experiences as related to responsibilities and the evaluation criteria described in this bid notice.
- A description of experience in public health program evaluation, utilizing both quantitative and qualitative data sources and any cancer-related experience.
- Proposed solution for work required and timeline to accomplish solution identified (not to exceed five (5) pages).
- Resumes of individuals assigned to this project.
- Contact information for at least three (3) professional references.
- The hourly rate at which the Vendor would be paid.

AWARD

This is a multi-step bid. Vendors must first meet all of the mandatory requirements; afterwards an award will be made on the basis of the most advantageous offer to the State of Maryland considering lowest price and that requirements listed in the Mandatory Requirements section are met.

TIE-BIDS

If bids are received from responsive and responsible bidders that are identical in prices, terms, and conditions and which meet all requirements set forth in the Invitation of Bids, an award will be made in accordance with State Regulations 21.05.02.14B. If a tie still exists, the bidder with the most experience shall be used to determine the successful bidder.

SUBMISSION DEADLINE

Bids must be mailed or hand-delivered and must be received by the **Procurement Officer NO LATER than 1:00 p.m. on April 20, 2015** in order to be considered. Submission envelope

must show the Procurement ID number. **Bidders cannot submit multiple responses and only one bid permitted per envelope.**

Bidders who hand-deliver bids are requested to please ask the building's security desk for a visiting pass and go to the third (3rd) Floor, Room 306 and ask for Chuck Bailey. *NOTE: When dropping off the bid, please obtain a receipt indicating bid was received.

Bidders that have a courier deliver bids are requested to please ask the building's security desk to telephone the PROCUREMENT OFFICER (Chuck Bailey, 410-767-5601). *NOTE: When dropping off the bid, please obtain a receipt indicating bid was received.

Bidders who mail bids should allow sufficient mail transit time to ensure timely receipt by the PROCUREMENT OFFICER. Bids and/or unsolicited amendments to bids arriving after the closing hour and date noted above will not be considered. For any response that is not hand-delivered, the offers must confirm, at least 60 minutes before the deadline, that the bids were received in PHPA Procurement. **PHPA is not responsible for bids dropped off in the mailroom.** Questions regarding this solicitation should be directed (by e-mail only, no phone call will be accepted) to the PROCUREMENT OFFICER.

PROCUREMENT OFFICER

Chuck Bailey
Procurement Specialist
Prevention and Health Promotion Administration
Maryland Department of Health and Mental Hygiene
201 West Preston Street, 3rd floor
Baltimore, MD 21201
Phone: 410-767-5601
Fax: 410-333-7106
E-Mail: chuck.bailey@maryland.gov

ISSUING OFFICE

Courtney Lewis
Director
Center for Cancer Prevention and Control
Maryland Department of Health and Mental Hygiene
201 West Preston Street, Room 303
Baltimore, MD 21201
Phone: 410-767-0824
E-Mail: courtney.lewis@maryland.gov

MINORITY BUSINESS ENTERPRISES ARE STRONGLY ENCOURAGED TO RESPOND TO THIS SOLICITATION.

Bid Page

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SUBMISSION DEADLINE: April 20, 2015; 1:00 p.m.

Bidder Information

Company or Individual Name _____

Federal Tax ID or FEIN # _____

Contact Person _____

Address _____

Telephone _____

FAX _____

Hourly rate for this project _____

Attachments:

- Resumes of individuals assigned to this project
- Explanation of experience with public health evaluation and cancer issues
- Proposed project solution and timeline
- Three professional references: Names and contact information
- Two writing samples demonstrating skills and abilities in public health evaluation and written communication

Authorized Vendor Signature

Date