



Rapid Start Pilot Program Learning Collaborative Facilitator

Bureau of Infectious Diseases

March 7th, 2024

I. Overview

The Boston Public Health Commission (BPHC) is the local public health department for the City of Boston. BPHC's mission is to work in partnership with communities to protect and promote the health and well-being of all Boston residents, especially those impacted by racism and systemic inequities. The Infectious Disease Bureau (IDB) is one of six bureaus of the Boston Public Health Commission. Strengthened by the Boston Public Health Commission's two hundred years of leadership in public health, IDB strives to reduce the impact of infectious diseases, prevent morbidity associated with these diseases, and create healthier lives for the residents of Boston. Work within the Infectious Disease Bureau includes disease surveillance, investigation of cases and outbreaks, funding a continuum of HIV/AIDS-related education and care, community and provider education related to other communicable diseases and the operation of a tuberculosis (TB) clinic.

Brief Background and Context for Rapid Start Pilot Program Evaluation:

Rapid START or early initiation of ART is the administration of antiretroviral therapy as early as possible after an HIV diagnosis and, ideally, at the same clinic visit as the HIV diagnosis, or re-engagement in care of clients lost to treatment, but in all cases within 7 days. Rapid ART is the standard of HIV treatment. Clinic processes to adopt rapid ART include development of protocols, staff training, development of teams that can facilitate delivery of rapid ART, and client education.

This year-long initiative aims to assess and evaluate current capacity and delivery of Rapid ART, align institutional efforts to Rapid ART standards, advance Rapid ART objectives, build capacity and infrastructure, and develop more effective service delivery models.

All service contracts awarded by the Boston Public Health Commission may be subject to following the City of Boston's living wage ordinance. This ordinance requires that all employees working on sizable city contracts earn an hourly wage that is enough for a family of four to live at or above the federal poverty level. This wage amount called the living wage, is recalculated every year. For more information, please visit <https://www.boston.gov/worker-empowerment/living-wage-division>.

As part of BPHC's efforts to have an equitable procurement process, BPHC will consider and encourage underrepresented businesses that includes; Minority-owned Business Enterprises (MBE), Women-owned Business Enterprises (WBE), Veteran-owned Business Enterprises (VBE), Disability-owned Business Enterprise (DOBE), Lesbian Gay Bisexual Transgender Business Enterprises (LGBTBE), Minority Non Profit (MNPO), Women Non Profit (WNPO), Minority Women Non Profit (MWNPO) and local businesses to apply to this RFP.

II. RFP Timeline

Thursday, March 7, 2024	Posted in the Boston Globe
Thursday, March 7, 2024	Posted on BPHC.org/RFP
Wednesday, March 13, 2024	Written Questions due via email by 5:00 PM EST to: Glanza@bphc.org Subject – Rapid ART Pilot Program Evaluation Questions
Monday, March 18, 2024	Responses to questions available for viewing on www.bphc.org/RFP by 5:00 PM EST
Thursday, March 28, 2024	Please submit your Proposal by 9:00 AM EST - Submit via email to RFR@bphc.org & Glanza@bphc.org Subject – Rapid Start Pilot Program Evaluation RFP NO EXCEPTIONS TO THIS DEADLINE
Any time from Monday, April 15 2024 to Monday April 29, 2024	Notification of Decision: Desired date to award. BPHC has the discretion to extend this time period without notice to the proposers. All proposals shall remain valid and open for a period of one hundred twenty (120) days from the proposal submission date, unless a proposer notifies BPHC of its withdrawal.

III. Scope of Work

Project Overarching Goals

- Assess baseline capacity for delivery of Rapid ART.
- Assess and evaluate ongoing capacity and delivery of Rapid ART.
- Establish agreed upon shared definitions, provide education & training, and build support systems that align with Rapid ART standards.
- Advance Rapid ART objectives to shorten time to viral suppression, increase retention in care, help clients achieve undetectable HIV viral load levels, and reduce HIV transmission.
- Build Capacity and create an infrastructure to deliver Rapid ART as a standard of care in Suffolk County.
- Based on evaluation/Pilot findings, develop more effective, and replicable service delivery models that can be easily individualized to adapt to institutional settings.

Learning Collaborative Facilitator Goals

- Offers effective, motivating, and collaborative learning facilitation to participants of up to seven Rapid ART provider teams (about 3 to 4 participants per team).
- Designs engaging and content driven agendas that are interactive, peer learning, and problem solving.
- Identifies detailed objectives and goals and creates action plans for the collaborative.
- Plans meeting structure and pre-work assignments for participants.
- Identifies gaps and needs and assesses team participation and learning.

- Fosters ongoing communication between teams.
- Working collaboratively with IDB and the Evaluation team to support participating programs to create, implement, and/or continuously assess a rapid start protocol for their organization, using a Plan-Do-Study-Act (PDSA) model.

Intended Outcomes

- Increase capacity among providers to deliver an efficient and systematic Rapid ART service and treatment.
- Develop a model for Rapid ART implementation that can be easily replicable and individually tailored to meet the needs of various settings.
- Reduce treatment delays for newly diagnosed clients and reengage to care clients lost to follow up.
- Help clients achieve undetectable HIV viral load levels.

Project Period: May 1, 2024 – February 28, 2025

Final Deliverables: Create a Rapid Start learning collaborative curriculum and toolkit that can be easily adapted and individualized by participants.

IV. Minimum Qualifications

- Demonstrated experience conducting Public Health Learning Collaboratives Facilitation.
- Experience with the Public sector, and familiarity with public health approaches to prevention and treatment of infectious disease is a plus.
- Knowledge and experience incorporating process and outcome evaluation findings in Collaborative learning objectives.
- Demonstrated understanding of the root causes of health inequities.
- Demonstrated familiarity and expertise with participatory Learning Collaborative practices.
- Demonstrated knowledge and expertise using a Plan-Do-Study-Act (PDSA) model for interactive quality improvement strategies.
- Demonstrated knowledge and experience planning, preparing, and facilitating collaborative meetings.
- Demonstrated knowledge of HIV care continuum including treatment modalities, Rapid Start, etc. **is a requirement.**
- Demonstrated knowledge and expertise using CLAS Standards to advance health equity.

IV. Proposal Requirements

Please submit the following documents:

- Narrative scope of the proposed project including:
 - Description of your approach to a facilitated learning collaborative process, including examples of strategies to engage stakeholders to ensure equitable participation.
 - Description of how a health equity lens will be incorporated into all aspects of the work, including planning, facilitation, assessment, and deliverables.
 - Calendar activities related for up to 10 months, 3 in-person meeting hours per month, depending on project start date related to period of performance from on or about May 1, 2024 to February 28, 2025
- Brief description of relevant experience including but not limited to HIV or other communicable disease learning collaboratives.
- Samples of prior similar Facilitation work a plus (does not count as part of the page limit)
- CVs or resumes for all individuals involved with this project.

- Not to exceed 10 pages including budget. CVs may be included as attachments and not count toward page limit.
- Two professional references related to this project.

V. Period of Performance and Location

The effective date of providing the required product and services shall be from date of contract execution for 9 months, with potential to extend.

Location: Remote and onsite meetings at 1010 Mass Ave. Boston MA. 02118

VI. Submission Instructions

Please submit your Proposal by **9:00 am EST** - Submit via email to RFR@bphc.org & Glanza@bphc.org

Boston Public Health Commission
1010 Massachusetts Avenue
Boston, MA 02118