

**City of New York  
Department of Health and Mental Hygiene (DOHMH)  
Request for Proposals (RFP) for  
Community Emergency Network (CEN) Leaders  
PIN: 21EP000900R0X00  
Addendum #1**

**June 10, 2020**

This Addendum contains the materials from the Pre-Proposal Teleconference held on May 26, 2020, responses to all questions received by DOHMH on or before May 29, 2020, revisions to the RFP and extends the due date and time for submission.

Except as otherwise stated in the attached and by any subsequent Addenda to the above-referenced RFP the solicitation remains unchanged.

**Proposers are reminded that as indicated in Section V.A (p. 22) of the RFP, proposals submitted by New York State or City certified M/WBEs that meet or surpass the minimum threshold score (which is 70) will be given a 10% point preference of the total technical points earned in the evaluation of the proposal.**

**The deadline for submitting a Request for Waiver of M/WBE Participation Requirement is June 17, 2020. If you are considering requesting a Waiver, you are strongly encouraged to submit a Waiver Request before the deadline.**

**The Proposal Due Date has been extended to June 24, 2020 at 2:00 P.M. If you have submitted a proposal prior to receiving this addendum, you may amend your proposal and it will be considered as if submitted before the proposal due date.**

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**I. Pre-Proposal Teleconference Materials:**

Attached as Annex A are the PowerPoint presentation slides and the sign-in sheet from the Pre-Proposal Teleconference held on May 26, 2020

**II. Answers to Questions Received about the RFP:**

Answers to questions received by DOHMH are contained in Annex B.

**III. Changes to the RFP:**

The following sections of the RFP have been revised as follows.

**Attachment C: Acknowledgment of Addenda** has been revised to reflect the issuance of this Addendum. Please see Annex C to this Addendum. **Proposers are required to use this version of Attachment C in their proposal packages**

**IV. Revisions to RFP Language (deletions are crossed-out; new language is underlined in bold-face type):**

**A. RFP Section I.D. – Page 2 revision**

D. Proposal Due Date and Time:

- ~~June 16, 2020~~ **June 24, 2020**
- 2:00 p.m.

The Agency requires proposers to deliver proposals electronically via email at [RFP@health.nyc.gov](mailto:RFP@health.nyc.gov). Mailed or hand-delivered proposals will not be accepted by the Agency.

**B. RFP Section IV – Page 15 revision**

Instructions: Proposers should provide all information required in the format below. ~~The proposal should be typed on both sides of 8 1/2" X 11" papers. The City of New York requests that all proposals be submitted on paper with no less than 30% postconsumer material content, i.e., the minimum recovered fiber content level for reprographic papers recommended by the United States Environmental Protection Agency (for any changes to that standard please consult: <http://www.epa.gov/cpg/products/printing.htm>. Pages should be paginated. The proposal will be evaluated on the basis of its content, not length. Failure to comply with any of these instructions will not make the proposal non-responsive. Proposers should clearly mark any section of their proposal that is confidential, proprietary information or trade secrets, and provide why such materials, upon request, should not be disclosed by the City. Such information must be easily separable from the non-confidential sections of the proposal.~~

**City of New York  
Department of Health and Mental Hygiene (DOHMH)  
Request for Proposals (RFP) for  
Community Emergency Network (CEN) Leaders  
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Addendum #1**

**Pre-Proposal Teleconference Materials**  
(PowerPoint presentation slides and the sign-in sheet)

# RFP FOR COMMUNITY EMERGENCY NETWORK (CEN) LEADERS

PIN: 21EP000900R0X00

EPIN: 81620P0008

*Please sign into the Chat*

NYC DEPARTMENT OF HEALTH & MENTAL HYGIENE

PRE-PROPOSAL CONFERENCE

MAY 26, 2020



## Conference Timeline

- Pre-Proposal Conference : 3:00 p.m.
- Q & A Intermission : 3:30 p.m.
- Question Submission Deadline : 3:45 p.m.
- Q & A Reading and Closing : 4:30 p.m.

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# Conference Code of Conduct

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- Participants on Microsoft Teams must call the number provided in the invitation and enter the access code to join the audio portion of the presentation.
- Participants other than city employees are required to sign in by clicking on the Chat icon on the left column of the screen and sending the following in the meeting chat: first and last name, organization, email address, and contact number.
- Please mute all microphones at all times during the presentation.
- Please refrain from typing in the meeting chat other than to sign in.



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# Welcome and Overview of Conference

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- Questions – all questions must be in writing. DOHMH keeps track of all questions, and answers to all questions will be sent, in writing, to all potential proposers.
  - During the conference, attendees will be given up until 3:45 p.m. to submit their questions to [RFP@health.nyc.gov](mailto:RFP@health.nyc.gov) with the subject “CEN LEADERS QUESTIONS”. Questions received after this time will not be provided a response at the conference but will be addressed along with all other questions received by the question submission due date of May 29, 2020.
  - After the presentation is concluded, DOHMH staff will temporarily leave the conference line and attempt to answer, to the extent possible, the questions submitted to the [RFP@health.nyc.gov](mailto:RFP@health.nyc.gov) inbox **at** this conference.



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# Conference Agenda

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1. Summary of the RFP from a Programmatic perspective
2. RFP Guidelines: Review of basic information, submission instructions, and basis of contract award
3. Updates on PASSPort
4. M/WBE Goals and Instructions
5. Q&A Intermission – DOHMH staff will temporarily leave the conference line and attempt to address the questions raised during this conference
6. Q&A Reading and Closing - The answers provided during this conference are preliminary. Official answers will be published in an addendum to this RFP



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# RFP Programmatic Summary

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## PROGRAM BACKGROUND AND KEY SCOPE ELEMENTS

- COMPLETE LIST OF REQUIREMENTS IS LISTED IN THE RFP DOCUMENT



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

## Program Background (pg. 4)

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- DOHMH seeking up to five (5) qualified Contractors who will each lead a Community Emergency Network (CEN) that will enhance DOHMH's ability to mitigate the public health impacts of emergencies in NYC. The five (5) contracted partners will be based on the 8 zones listed in Section II.B. of this document.
- Focus on hyperlocal preparedness and response planning within their community (e.g. information sharing, identifying needs and gaps in services and offering a structure for community-based emergency collaboration during all phases of emergencies).
- Coordinate community-based service providers (i.e. nonprofits, businesses, congregations, clinics, associations, individual leaders, and other nongovernmental providers) in the preparedness, response, recovery, and/or mitigation phases of emergency management.
- Contractors must have experience coordinating and developing a CEN with community-based service providers in a community in which they serve, reside, and/or have a proven track-record of collaboration with community members



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## Goals and Objectives (pg. 4-5)

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The Agency's goals for this RFP are to:

- Expand the emergency preparedness capabilities of the Contractor-led CEN
- Integrate the Contractor-led CEN efforts into DOHMH information sharing, operations and programs, and planning for public health emergencies; and
- Collaborate with and advise DOHMH on how to support hyperlocal preparedness with other CENs across NYC.



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## Program Expectations: Experience (pg. 8-9)

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The Contractor would:

- Have at least one (1) year in the past five (5) years of experience in emergency preparedness, response, recovery, and/or mitigation;
- Have at least one (1) year of experience in the past five (5) years coordinating and developing a CEN with community-based service providers, serving a Highest Vulnerability census tract in the CDC's SVI Map.
  - The geographic zone selected must be one in which the Contractor served, resided in, and/or has a proven track-record of collaboration with community members
- Currently lead a New York City based CEN serving a Highest Vulnerability census tract in the CDC's SVI Map.
- Have experience coordinating and developing a community-based emergency plan that can be activated (12-72 hours after an incident) during the response or recovery phases of the disaster cycle..
- Have participated in events and initiatives in the past five (5) years in partnership with or offered by DOHMH, FEMA, or other federal/state/city agencies that have emergency management functions.



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

## Program Expectations: Organizational Capability (pg. 9)

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- Employ and retain sufficient in-house staff to perform the work of the contract, and have adequate managerial, administrative and financial capability to support the work of the contract;
- Appoint a Project Manager for each proposed zone, who will respond in a timely manner to DOHMH, assure organizational commitment and support of this program, and assure timely planning and completion of all deliverables;
- Have the capability to rapidly (within 24-72 hours) communicate and mobilize both their own staff and organizations within their sector;

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

## Program Expectations: Organizational Capability (cont'd)

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- Have the capability to train other organizations to prepare for and respond to public health emergencies;
  
- Have the capability to facilitate coalition convenings in the community they are proposing to serve, with administrative, technical and communication capability to support hyperlocal emergency preparedness.

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO RFP@HEALTH.NYC.GOV UNTIL 3:45 P.M.

## Program Expectations – Approach (pg. 9-12)

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- Expand the emergency preparedness capabilities of the Contractor-led CEN
  - Develop and/or enhance CEN's Emergency Response Framework
    - Create, and/or enhance an existing emergency response framework for engaging membership and/or community during an emergency, ensuring disproportionately impacted populations identified in the community have representation and are within the catchment of CEN member services
    - Submit (annually) the Emergency Response framework report to DOHMH that includes recommendations of roles and responsibilities of the sector after a disaster within ten (10) months of the contract registration date and annually thereafter
  - Maintain and strengthen CEN membership
  - Strengthen organization of the CEN through strategic coordination of members

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO RFP@HEALTH.NYC.GOV UNTIL 3:45 P.M.

## Program Expectations – Approach (cont'd)

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- Integrate the Contractor-led CEN efforts into DOHMH information sharing, operations and programs, and planning for public health emergencies
  - Develop and enhance CEN's Outreach and Communications Strategy
  - Align CEN Emergency Response Plan with DOHMH Emergency Planning (as defined by DOHMH)
  - Develop and implement an annual meeting and/or training session for the Community Leadership Sector (as defined by DOHMH)
- Collaborate with and advise DOHMH on how to support hyperlocal preparedness with other CENs across NYC
  - Evaluate and offer recommendations on best practices for sustaining and growing the CEN's Model

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

## RFP Guidelines

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REVIEW OF BASIC INFORMATION, SUBMISSION INSTRUCTIONS, AND  
BASIS OF CONTRACT AWARD



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# RFP Guidelines

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## RFP Components

- RFP – Solicitation Elements (Sections I – VI)
- Appendix A - General Provisions Governing Contracts for Consultants, Professional, Technical, Human and Client Services
- Appendix B – CDC Social Vulnerability Index Snapshot for New York City
- Attachment A – Proposal Cover Letter
- Attachment B – Price Proposal Form
- Attachment C – Acknowledgement of Addenda
- Attachment D – Doing Business Data Form
- Attachment E – Hiring and Employment Rider (HireNYC)
- Attachment F – Notice to all Prospective Contractors (M/WBE)
- Attachment G – Schedule B: M/WBE Utilization Plan/Waiver Application
- Attachment H – Iran Divestment Act Compliance Rider for NYC Contractors
- Attachment I – SBS Capacity Building Services
- All of these documents are available on the Department of Health’s Contracting Opportunities Web Page:  
<https://www1.nyc.gov/site/doh/business/opportunities/contracting-opportunities.page>



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## Anticipated Contract Term (pg. 6)

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- January 1, 2021 – December 31, 2026 (6 year term)



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## RFP Timetable (pg. 2)

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- RFP Release date: May 13, 2020
- Pre-Proposal Conference: May 26, 2020
- M/WBE Waiver Application Due: June 9, 2020
- All Proposals due by 2:00 p.m. on June 16, 2020
- Agency Contact Person: Erik Vaklinov – [RFP@health.nyc.gov](mailto:RFP@health.nyc.gov)
- Questions regarding this RFP must be transmitted in writing to the Agency Contact Person by [May 29, 2020, by 5:00 p.m.](#)
- The Agency cannot guarantee a timely response to written questions regarding this RFP received less than one week prior to the proposal due date.



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

## Anticipated Funding & Payment Structure (pg. 6-7)

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- Total Anticipated Funding Amount for the full term of the contract is \$1,800,000.
- Estimated number of Contracts: 5
- Anticipated payment structure: DOHMH anticipates that the payment structure of the contracts that result from this RFP will be performance-based. Payments would be based on the satisfactory completion of contract deliverables outlined in the Scope of Work and delineated on the Price Proposal Form.



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# Proposal Submission Instructions (pg. 2)

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- All Proposals must be submitted to the Agency contact electronically via email at [RFP@health.nyc.gov](mailto:RFP@health.nyc.gov) by **June 16, 2020 at 2:00 p.m.**
- Mailed or hand-delivered proposals will not be accepted by the Agency.
- Please allow sufficient time to complete and submit Proposals. Proposals received after the proposal due date and time are late and shall not be accepted by the Agency, except as provided under New York City's Procurement Policy Board Rules.
- Unless the Agency issues a written addendum to the RFP that extends the Proposal Due Date and Time for all proposers, the Proposal Due Date and Time prescribed above shall remain in effect.



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# Proposal Package Contents and Attachments (pg. 21) "Checklist"

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1. Proposal Cover Letter (Attachment A)
2. Technical Proposal (Narrative, 2 Letters of Reference for the Proposer, Table of Contracts, Evidence of participation in prior emergencies, Resumes and/or Description of Qualifications for Key Staff Positions, Organizational Chart, Latest Audit Report or Certified Financial Statement (or a statement as to why no report or statement is available), and a Roster of active CEN members)
3. Acknowledgment of Addenda Form (Attachment C)
4. Price Proposal Form (Attachment B)
5. Subcontractor Utilization Plan (Attachment G)
6. Doing Business Data Form (Attachment D)
7. Iran Contractor Compliance Form (Attachment H)



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## Evaluation Criteria (pg. 22)

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Proposals will be evaluated and scored based on the following evaluation criteria and will be assessed according to responses in the corresponding sections of the RFP:

A. Demonstrated quantity and quality of successful relevant experience	40 Points
B. Demonstrated level of organizational capability	20 Points
C. Quality of proposed approach	40 Points
<hr/>	
Total	100 Points

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO RFP@HEALTH.NYC.GOV UNTIL 3:45 P.M.

## Basis of Award and Procedures (pg. 22-23)

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- Contract awards will be made to the responsible proposers whose proposals are determined to be the most advantageous to the City, taking into consideration the factors or criteria which are set forth in the RFP.
- Up to five awards will be made to the proposers achieving the highest average technical score that offer a price that does not exceed the maximum available funding set forth in the RFP.
- DOHMH reserves the right to skip over one or more proposals to ensure appropriate distribution of services across the zone neighborhoods indicated in section II.B.
- DOHMH reserves the right to award less or more than the full amount of funding requested and to modify the allocation of funds among contractors in the best interests of the City.
- DOHMH reserves the right to negotiate with viable proposers to provide services in zones they did not propose to serve.



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO RFP@HEALTH.NYC.GOV UNTIL 3:45 P.M.

# Basis of Award and Procedures

## (pg. 22-23)

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- In the event that a proposer is eligible for award in more than one zone, DOHMH reserves the right to determine, based on the best interest of the City, how many and for which zone(s) the proposer will be awarded a contract.
- DOHMH reserves the right to make more awards, or to make more than one award per zone, if additional funding becomes available.
- DOHMH reserves the right, prior to contract award, to determine the length of the initial contract term.
- DOHMH reserves the right not to make awards depending on the availability of funding or the City's needs.

Contract award shall be subject to the timely completion of contract negotiations between the Agency and the selected proposer and a determination of vendor responsibility. .



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# PASSPort

## Procurement and Sourcing Solutions Portal

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- All Vendors wishing to do business with the City must enroll in PASSPort (Formerly VENDEX).
- To complete the online disclosure process, please create an online account in PASSPort and file all disclosure information here:  
<http://www1.nyc.gov/site/passport/index.page>
- If you have any questions regarding enrollment please contact  
[help@mocs.nyc.gov](mailto:help@mocs.nyc.gov)

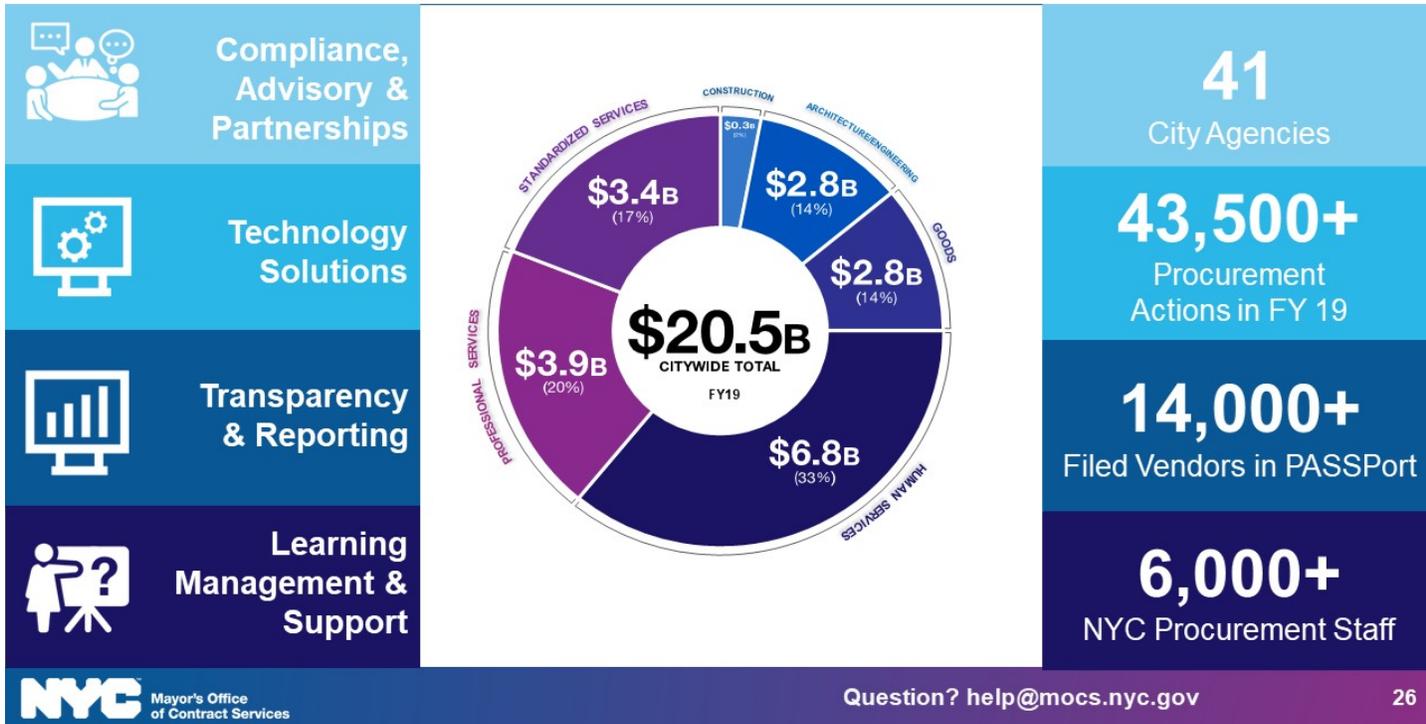


QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# PASSPort: Leveling the Playing Field



## MOCS and NYC Procurement



Question? [help@mocs.nyc.gov](mailto:help@mocs.nyc.gov)

# Procurement & PASSPort Implementation



Release 1	Release 2	Release 3	Release 4
<p>✓ <b>Launched August 2017</b></p> <p><b>Key Features:</b></p> <ul style="list-style-type: none"> <li>Self-service vendor accounts</li> <li>Responsibility determinations</li> </ul> <p><b>Outputs and Achievements:</b></p> <ul style="list-style-type: none"> <li>14,000 vendors filed</li> <li>Cycle time reduction by 10 weeks</li> </ul> <p>System Sunsets: VENDEX</p>	<p>✓ <b>Launched April 2019</b></p> <p><b>Key Features:</b></p> <ul style="list-style-type: none"> <li>Requirements Contracts Catalog</li> <li>Online Requisition, Receipt, Invoice, Payment management</li> </ul> <p><b>Outputs and Achievements:</b></p> <ul style="list-style-type: none"> <li>Full payment pipeline functional</li> </ul> <p>System Sunsets: DCAS Direct Order</p>	<p>Coming Spring 2020</p> <p><b>Key Features:</b></p> <ul style="list-style-type: none"> <li>RFx Roadmap</li> <li>Digital RFx</li> <li>Milestone tracking</li> <li>Online registration process</li> <li>E-signature, eliminate notaries</li> <li>Amendment/Change Order mgmt.</li> </ul> <p>System Sunsets: APT, HHS Accelerator (RFPs, except open-ended)</p>	<p>Coming Winter 2020/21</p> <p><b>Key Features:</b></p> <ul style="list-style-type: none"> <li>Citywide Invoicing and Payment</li> <li>Prequalification for all vendors</li> </ul> <p>System Sunsets: HHS Accelerator (Prequalification, all RFPs)</p>

## Preparing to Do Business with the City of New York

- 1 Create NYC.ID at [nyc.gov/passport](http://nyc.gov/passport)
- 2 Using NYC.ID, log in to PASSPort and submit account request
- 3 Once approved, complete vendor enrollment package

## Resources and Support for Vendors and Agencies

MOCS deploys people, technology and learning resources to maximize the benefits of e-procurement



## M/WBE Goals and Instructions (Attachment G – Schedule B)

The Department of Health and Mental Hygiene (DOHMH) is committed to ensuring that there is diversity in City contracting- as per Local Law 1 of 2013, M/WBE goals have been applied to this contract.

### M/WBE Contract Goal – 13.9%

- General rule - contract goals can be met with the use of M/WBE prime *and/or* subcontracting (minus dollars awarded to non-M/WBEs).
- Requests for full or partial **waivers** to the goal must be submitted to [bids@health.nyc.gov](mailto:bids@health.nyc.gov) no later than **June 9, 2020**. **DOHMH strongly recommends that if you plan to request a waiver, you submit the Waiver Request as soon as possible.**
- Bid package must include *either*:
  - a completed "Schedule B – Part II: M/WBE Participation Plan" *or*
  - a *fully approved* "Schedule B – Part III – Request for Waiver of M/WBE Participation Requirement"

To search and find qualified M/WBEs, visit [www.nyc.gov/buycertified](http://www.nyc.gov/buycertified)

### For assistance:

DOHMH M/WBE unit – P:(347)396-6708; E: [mwbe@health.nyc.gov](mailto:mwbe@health.nyc.gov)

NYC Small Business Services – Certification Helpline: (212) 513-6311

# Schedule B: New Part 1- M/WBE Participation Plan



## SCHEDULE B – M/WBE Utilization Plan

### Part 1: M/WBE Participation Goals

Contract Overview (To be completed by contracting agency)

APT E-Pin#	#####A#####	FMS Project ID#	#####
Project Title	Widgets Service	Agency PIN#	##AB#####C#D##
Contracting Agency	Dept. Health & Mental Hygiene	Bid/Proposal Response Date	###/##/####
Agency Address	45-09 28th St	City	Long Island City State NY ZIP 10111
Contact Person	Jane Doe	Title	Procurement Coordinator
Telephone	###-###-####	Email	jdoe@health.nyc.gov

Project Description (attach additional pages if necessary)

The Department of Health and Mental hygiene seeks an appropriately qualified contractor to provide Widget Services. (Please provide full description)

Bidder or proposer  is required OR  is not required to specifically identify the contact information of all M/WBE firms they intend to use as a subcontractor on this contract, including the M/WBE vendor name, address and telephone number in the space provided below in Part 2 Section 4.

### M/WBE Participation Goals for Services

Enter the percentage amount for each category or for an unspecified Goal.

Prime Contract Industry: Standard Srvc

Category and Breakdown:

Unspecified	13.90	%
Black American		%
Hispanic American		%
Asian American		%
Women		%

Total Participation Goals **13.90** %  
Line 1

Part 1 is completed by DOHMH. It contains the M/WBE Participation Goal for Services.

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO RFP@HEALTH.NYC.GOV UNTIL 3:45 P.M.

# Schedule B: New Part 2- M/WBE Participation Plan

### Part 2: M/WBE Participation Plan

(To be completed by the bidder/proposer unless granted a full waiver, which must be submitted with the bid/proposal in lieu of this form)

#### Section 1: Prime Contractor Contact Information

Tax ID#	##-#####	FMS Vendor ID#	#####
Business Name	ABC Widgets	Contact Person	John Doe
Business Address	123 ABC Way	City	XYZ State NY ZIP #####
Telephone	###-###-####	Email	jdoe@ABCWidgets.com

#### Section 3: Contractor M/WBE Utilization Plan

Please review the Notice to Prospective Contractors for more information on how to obtain credit for M/WBE participation. Check applicable box. The Proposer or Bidder will fulfill the M/WBE Participation Goals:

- As an M/WBE Prime Contractor that will self-perform and/or subcontract to other M/WBE firms a portion of the contract the value of which is at least the amount located on Lines 2 or 3 in the panels in Section 2, as applicable. The value of any work subcontracted to non-M/WBE firms will not be credited towards fulfillment of M/WBE Participation Goals. Please check all that apply to Prime Contractor:  MBE  WBE
- As a Qualified Joint Venture with an M/WBE partner, in which the value of the M/WBE partner's participation and/or the value of any work subcontracted to other M/WBE firms is at least the amount located on Lines 2 or 3 in the panels in Section 2, as applicable. The value of any work subcontracted to non-M/WBE firms will not be credited towards fulfillment of M/WBE Participation Goals.
- As a non-M/WBE Prime Contractor that will enter into subcontracts with M/WBE firms the value of which is at least the amount located on Lines 2 or 3 in the panels in Section 2, as applicable.

#### Section 2: M/WBE Utilization Goal Calculation

##### Prime Contractor Adopting Agency Participation Goals

For Prime Contractors (including Qualified Joint Ventures and M/WBE firms) adopting Agency M/WBE Participation Goals.

Total Bid/Proposal Value \$ 1,000,000.00  
multiplied by x  
Total Participation Goals **13.90** %  
(Line 1 above)

Calculated M/WBE Participation Amount \$ 139,000.00  
Line 2

OR

##### Prime Contractor With Partial Waiver Approval Adopting Revised Participation Goals

For Prime Contractors (including Qualified Joint Ventures and M/WBE firms) adopting Revised M/WBE Participation Goals.

Total Bid/Proposal Value \$ 1,000,000.00  
multiplied by x  
Total Revised Participation Goals **10.00** %

Calculated M/WBE Participation Amount \$ 100,000.00  
Line 3

Vendor will complete if agreeing to goal or denied waiver request; must complete and sign Schedule B Parts 1 and 2.

Vendor will complete if they received an approved partial waiver request; must complete and sign Schedule B Parts 1-3

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO RFP@HEALTH.NYC.GOV UNTIL 3:45 P.M.

## Schedule B: New Part 2- Subcontracting Plan

**Section 4: General Contract Information**

What is the expected percentage of the total contract dollar value that you expect to award in subcontracts for services, regardless of M/WBE status?  %

Enter a brief description of the type(s) and dollar value of subcontracts for all services you plan to subcontract if awarded this contract, along with the anticipated start and end dates for such subcontracts. For each item, indicate whether the work is designated for participation by an M/WBE. Where the contracting agency's solicitation has indicated a requirement that the bidder or proposer specifically identify the contact information of all M/WBEs they intend to use on this contract, vendors must also include the M/WBE vendor name, address and telephone number in the space provided below. Use additional sheets if necessary.

Description of Work	Start Date (MM/YY)	End Date (MM/YY)	Planned \$ Amount	Designated for M/WBE		M/WBE Vendor Name	M/WBE Address	M/WBE Telephone
				Y	N			
1.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
2.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
3.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
4.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
5.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
6.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
7.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
8.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
9.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -
10.	/ /	/ /	\$	<input type="checkbox"/>	<input type="checkbox"/>			( ) -

There are separate columns for subcontract descriptions, estimates and M/WBE designations.

Where required by the solicitation, vendors will also need to specifically identify the contact info, including name, address and telephone number, of the M/WBE vendors they intend to use to meet participation goals on the anticipated contract.

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [BIDS@HEALTH.NYC.GOV](mailto:BIDS@HEALTH.NYC.GOV) UNTIL 2:45 P.M.

## Schedule B: New Part 2- Responsive Vendor Submission

**Section 5: Vendor Certification and Required Affirmations**

I hereby:

- acknowledge my understanding of the M/WBE participation requirements as set forth herein and the pertinent provisions of Section 6-129 of the Administrative Code of the City of New York ("Section 6-129"), and the rules promulgated thereunder;
- affirm that the information supplied in support of this M/WBE Utilization Plan is true and correct;
- agree, if awarded this Contract, to comply with the M/WBE participation requirements of this Contract, the pertinent provisions of Section 6-129, and the rules promulgated thereunder, all of which shall be deemed to be material terms of this Contract;
- agree and affirm that it is a material term of this Contract that the Vendor will award the total dollar value of the M/WBE Participation Goals to certified MBEs and/or WBEs, unless a full waiver is obtained or such goals are modified by the Agency; and
- agree and affirm, if awarded this Contract, to make all reasonable, good faith efforts to meet the M/WBE Participation Goals, or if a partial waiver is obtained or such goals are modified by the Agency, to meet the modified Participation Goals by soliciting and obtaining the participation of certified MBE and/or WBE firms.

Signature  Date

Print Name  Title

As part of a responsive bid or proposal, the vendor **must sign** the Schedule B, Part 2 acknowledging and affirming their understanding of the M/WBE goal requirements and intent to make all good faith efforts to meet the final goal. If a vendor has been granted a full waiver, the vendor must include the approved waiver determination (Part 3) with their bid/proposal submission, in lieu, of a signed Schedule B, Part 2 in order to be considered responsive.

**Failure to sign this section of the Schedule B will make a vendor non-responsive.**

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [BIDS@HEALTH.NYC.GOV](mailto:BIDS@HEALTH.NYC.GOV) UNTIL 2:45 P.M.



## Schedule B: New Part 3- Waiver Requests (Vendor Certification)

<b>Vendor Certification</b>	
Identify/list all the work areas you intend on subcontracting on the current anticipated contract for which you are submitting this waiver request.	
<i>I hereby affirm that the information supplied in support of this waiver request is true and correct, and that this request is made in good faith. I further affirm that the work that I did not list as work that will be subcontracted on this contract for which I am submitting this waiver request is work that I have performed on past contracts and will not subcontract if awarded this contract.</i>	
Signature _____	Date _____
Print Name _____	Title _____
<b>Approvals (for Agency completion only)</b>	
ACCO Signature _____	Date _____
CCPO Signature _____	Date _____
<b>Waiver Determination</b>	
<input type="checkbox"/> Full Waiver Approved	
<input type="checkbox"/> Waiver Denied	
<input type="checkbox"/> Partial Waiver Approved	
Revised Participation Goal _____%	
Page 5 of 5	

The Vendor Certification section includes both a subcontracting identification section. Vendors will be required to list all work areas they intend to subcontract. Upon signing the certification, they affirm that they will **self-perform all work not identified in the subcontracting section.**

QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [BIDS@HEALTH.NYC.GOV](mailto:BIDS@HEALTH.NYC.GOV) UNTIL 2:45 P.M.

# Q & A Intermission

Thanks For Your Patience



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

# Q & A Reading and Closing

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THE ANSWERS PROVIDED DURING THIS CONFERENCE ARE PRELIMINARY. OFFICIAL ANSWERS WILL BE PUBLISHED IN AN ADDENDUM TO THIS RFP.

Thanks for your interest in DOHMH's RFP for COMMUNITY EMERGENCY NETWORK (CEN) LEADERS



QUESTIONS MAY BE SUBMITTED VIA EMAIL TO [RFP@HEALTH.NYC.GOV](mailto:RFP@HEALTH.NYC.GOV) UNTIL 3:45 P.M.

**Attached is the Sign-in Sheet from the Pre-Proposal Teleconference:**

<b>Name</b>	<b>Organization</b>	<b>Email</b>
<b>Sonja Sharif</b>	<b>Hey Girlie Travel LLC</b>	<b>heygirlietravel@gmail.com</b>
<b>Karen Jackson</b>	<b>Staten Island Long Term Recovery Organization</b>	<b>N/A</b>
<b>Tanya Hardy Menard</b>	<b>N/A</b>	<b>N/A</b>
<b>Mark Foggin</b>	<b>Mark Foggin Consulting</b>	<b>mfoggin@gmail.com</b>
<b>Adrian Hamblin</b>	<b>Hamblin Marketing Consulting</b>	<b>Adrian@hamblinmarketing.co</b>
<b>Diana Hamlett</b>	<b>Hey Girlie Travel</b>	<b>heygirlietravel@gmail.com</b>
<b>Priyanka Jain</b>	<b>3x3 Design</b>	<b>priyankajain@3x3.co</b>
<b>Sacred Walker</b>	<b>Kuumba Health LLC</b>	<b>sacred@sacredwalker.net</b>
<b>Lisa Gaon</b>	<b>CAMBA - FRANQ Queens Recovery &amp; Resiliency Committee</b>	<b>Lisag@camba.org</b>
<b>Sharmila Rao Thakkar</b>	<b>Staten Island NFP Association/Staten Island COAD</b>	<b>sharmila@sinfpa.org</b>
<b>Priscilla Novas</b>	<b>Future Prints Childcare, Inc.</b>	<b>futureprintschildcare@gmail.com</b>
<b>Leslie Boden</b>	<b>Collective for Community, Culture and Environment</b>	<b>lboden@collectiveforcce.com</b>
<b>Sara Chamama</b>	<b>Jewish Community Council of Greater Coney Island</b>	<b>s.chamama@jccgci.org</b>
<b>Wendy Tyson-Wood</b>	<b>Jean Kristensen Associates</b>	<b>Wendy@JeanKristensenAssoicates.com</b>

<b>Ayo Harrington</b>	<b>LES Ready</b>	<b>N/A</b>
<b>Damaris Reyes</b>	<b>Good Old Lower East Side, Inc / LES Ready</b>	<b>dreyes@goles.org</b>
<b>Harold Jean-Louis</b>	<b>Smart Coos, Inc.</b>	<b>harold@smartcoos.com</b>
<b>Favio German</b>	<b>Public Works Partners LLC</b>	<b>Fgerman@Publicworkspartners.com</b>
<b>Michelle McClymont</b>	<b>YouthBuild Staten Island</b>	<b>mcclymontm@youthbuildstatenisland.com</b>
<b>Al Adams</b>	<b>Vivid Marketing Group</b>	<b>Info@vmgny.com</b>
<b>Brenda Ng</b>	<b>The Wright Media Group</b>	<b>Drmwinfo@gmail.com</b>
<b>Floyd Wright</b>	<b>The Wright Media Group</b>	<b>drmwinfo@gmail.com</b>
<b>Ray Emmanuel</b>	<b>Amethyst Environmental Consulting, LLC</b>	<b>admin@amethystenvironmentalllc.com</b>
<b>Denean Ferguson</b>	<b>FRANC QR<sup>2</sup></b>	<b>N/A</b>
<b>Megan Marini</b>	<b>3x3</b>	<b>MeganMarini@3x3.co</b>
<b>Anthony Mampilly</b>	<b>STEM Success Inc.</b>	<b>N/A</b>
<b>Hashim Campbell</b>	<b>The Wright Media Group</b>	<b>drmwinfo@gmail.com</b>

**City of New York  
Department of Health and Mental Hygiene (DOHMH)  
Request for Proposals (RFP) for  
Community Emergency Network (CEN) Leaders  
PIN: 21EP000900R0X00  
Addendum #1**

Below are answers to the unduplicated questions received by DOHMH at the Pre-Proposal Teleconference and/or in writing by the Questions Due Date of May 29, 2020. Proposers are advised to read all questions and answers in order to have the most complete information.

Answers provided in writing herein should be considered the final and official responses to these questions.

- 1. I am interested in submitting a proposal. I was previously contracted as an individual vendor, does that still apply or are you looking to contract businesses?**

Answer: The Contractor could be any type of entity that leads a Community Emergency Network as defined in Section II.A. of the RFP, and would have the experience set forth in Section III.B.1. of the RFP.

- 2. Will you share the list of attendees on this call, along with contact info, with all participants?**

Answer: Please refer to Annex A of this addendum for the list of attendees at the pre-proposal teleconference.

- 3. The MWBE information is confusing. Are they saying that an organization must contract out to a MWBE company? And if so, what will we be contracting out for? How can we get a better understanding of this information?**

Answer: Please refer to Attachment F: Notice to All Prospective Contractors and Attachment G: Schedule B, which sets forth an M/WBE participation goal of 13.9%. The goal may be met by self-performing the work **if** the proposer is a City-certified M/WBE, or it may be met through subcontracting to City-certified M/WBE firms if the proposer is not a City-certified M/WBE. Proposers are required to either meet that participation goal, or request a Waiver on or before June 17, 2020. **In addition to the MWBE participation goal**, proposals submitted by New York State or City certified M/WBEs that meet or surpass the minimum threshold score will be given a 10% point preference of the total technical points earned in the evaluation of the proposal.

- 4. Would we get a copy of the PowerPoint?**

Answer: Please refer to Annex A of this addendum for the PowerPoint presentation slides from the pre-proposal teleconference.

**5. Is there an electronic Proposal Packet? How do organization access the packet with all of the forms and attachments?**

Answer: The RFP, including all attachments, is available for download on the DOHMH website at:  
<https://www1.nyc.gov/site/doh/business/opportunities/contracting-opportunities.page>.

**6. Is there a file limit to the proposal? Or is a dropbox link acceptable to submit the proposal?**

Answer: There are no DOHMH mandated file size limits. Proposals must be submitted in a Portable Document Format (PDF) as an attachment to the email. Proposals submitted in a dropbox link will not be accepted.

**7. Who has this current contract?**

Answer: There is no current contract for these services.

**8. Award Allocation is that an equal split for each awardee or is it based on the cost proposal?**

Answer: As indicated in Section II.D of the RFP, it is anticipated that the maximum available funding for each Contractor will be \$60,000 annually for the six-year term, for an estimated total of \$360,000 per contract, contingent on the availability of funds.

**9. On p. 2 RFP talks about e-mail submission, but p. 15 talks about paper submission. Please clarify.**

Answer: As indicated in Section I.D. of the RFP, the Agency requires proposers to deliver proposals electronically via email at [RFP@health.nyc.gov](mailto:RFP@health.nyc.gov). Mailed or hand-delivered proposals will not be accepted by the Agency. Please see section IV.B. of this addendum for clarification.

**10. As an MWBE company, what form does our company need our non-MWBE sub-contractor complete?**

Answer: All Proposers except for those that are incorporated as non-profit organizations under Section 501(c)(3) of the U.S. Internal Revenue Code are required to complete Attachment G: Schedule B at the time of proposal. If awarded a contract, the Contractor must complete the Subcontractor Approval Form in order to obtain approval from DOHMH before any subcontractor's work can commence.

**11. Will we be able to contact Erik or just submit questions to RFP@health.nyc.gov for questions before the bid date if we have additional questions or concerns?**

Answer: Questions regarding this RFP must be transmitted in writing to the Agency Contact Person at [RFP@health.nyc.gov](mailto:RFP@health.nyc.gov) by May 29, 2020, by 5:00 p.m. The Agency cannot guarantee a timely response to written questions regarding this RFP received less than one week prior to the proposal due date.

**12. Once the questions submitted are answered will they be posted for review as we prepare our bids? This would be good to have immediately as questions arise as we complete the bid.**

Answer: Yes. Please see Annex B of this addendum.

**13. Are there organizations that are already formally designated by DOHMH or other agencies as CEN Leaders?**

Answer: DOHMH does not formally designate any organization as a "CEN Leader." However, Section II.A of the RFP outlines the expectations of a CEN leader.

**14. Curious if the funding covers staff hires and what kinds of grant amounts are we looking at?**

Answer: Please see answer to question 8 above for information on contract award amount(s). As indicated in Section IV.1.3 of the RFP, proposers must provide for each deliverable delineated in Attachment B of the RFP, an all-inclusive price that includes all costs associated with the performance of work, including (but not limited to) materials, labor, insurance, statutory and fringe benefits, taxes, overhead and profit.

**15. Are vendors able to utilize a subcontractor to assist with fulfilling the contract?**

Answer: Yes. However, subcontractors must be approved by DOHMH prior to commencement of subcontractor's work as indicated in Section V.C. of the RFP, DOHMH reserves the right to award less or more than the full amount of funding requested and to modify the allocation of funds among contractors in the best interests of the City.

**16. In regards to Not-For-Profit & MWBE Organizations. Not-For-Profits cannot be an MWBE Organization. So are you asking only for MWBE organizations only for this contract? Or can any organization apply?**

Answer: Any organization can apply. Proposals submitted by New York State or City certified M/WBEs that meet or surpass the minimum threshold score will be given a 10% point preference of the total technical points earned in the evaluation of the proposal.

**17. For experience is the contractor him/herself required to have all the experience or is**

**the organization and the TEAM?**

Answer: The Contractor as defined in Section II.A of the RFP would have the experience set forth in Section III.B.1 of the RFP.

**18. Regarding the contract total, we understand that the contract can be awarded to up to 5 companies or more. Is the \$1.8 million divided amongst the 5 companies over the 6 year period [example: (\$1.8 million divided by 5 companies) divided by 6 yrs = \$60,000 a company] or is the contract for \$1.8 million dollars divided amongst the 5 companies but renewed annually [example: (\$1.8 million / 5 companies) x 6 yrs]**

Answer: Each contract resulting from this RFP has a term of 6 years with no option to renew. Please also see answer to question 8 above.

**19. Re. Goals of RFP - Will we have to focus on the three areas: Expansion; Integration; Collaboration; or can a CEN focus on 1 or 2 areas?**

Answer: The Contractor is expected to complete all deliverables set forth in the RFP to achieve all three goals as described in Section II.A of the RFP.

**20. Under the Plan section for expectations does Thrive Mental Health 1st aid education for New York City qualify as an initiative, also?**

Answer: As indicated in Section III.B.1.e. of the RFP, prospective contractor must have participated in events and initiatives in the past five (5) years in partnership with or offered by DOHMH, FEMA, or other federal/state/city agencies that have emergency management functions. Greater consideration will be given to proposers who have participated in response and/or recovery during past emergencies.

**21. During the pre-bid conference, the DOHMH representative mentioned that they would provide technical assistance and capacity building support on the CEN model besides funding. Can you elaborate on what the technical assistance and capacity building activities might look like?**

Answer: Capacity building from DOHMH will include but may not be limited to project coordination, emergency planning, training, and exercising in addition to providing guidance on developing best practices for a Community Emergency Network (CEN). Please research Community Organizations Active in Disaster (COAD) and/or Long-term Recovery Groups to learn more about the geneses of CENs and the models they leverage.

**22. Section III.B.3.c.i mentions that the progress of hyperlocal preparedness within CEN would need to be presented to DOHMH on an ongoing basis as determined by DOHMH through participation in the community leadership sector at DOHMH-hosted meetings and events, soliciting feedback. Can DOHMH provide an estimate of the number of events that might be required to be attended?**

Answer: On average there are 6-12 DOHMH-hosted meetings and events a year. DOHMH will coordinate with the Contractor to determine which and how many meetings and events the Contractor will be required to attend throughout each contract year.

**ATTACHMENT C**

**ACKNOWLEDGEMENT OF ADDENDA  
COMMUNITY EMERGENCY NETWORK (CEN) LEADERS  
PIN: 21EP000900R0X00**

**Directions: Complete Part I or Part II, whichever is applicable, and sign your name in Part III.**

**Part I**

Listed below are the dates of issue for each Addendum received in connection with this RFP:

- Addendum # 1, Dated **June 10, 2020**
- Addendum # 2, Dated \_\_\_\_\_, 20\_\_
- Addendum # 3, Dated \_\_\_\_\_, 20\_\_
- Addendum # 4, Dated \_\_\_\_\_, 20\_\_
- Addendum # 5, Dated \_\_\_\_\_, 20\_\_
- Addendum # 6, Dated \_\_\_\_\_, 20\_\_
- Addendum # 7, Dated \_\_\_\_\_, 20\_\_
- Addendum # 8, Dated \_\_\_\_\_, 20\_\_
- Addendum # 9, Dated \_\_\_\_\_, 20\_\_
- Addendum #10, Dated \_\_\_\_\_, 20\_\_

**Part II**

\_\_\_\_\_ No Addendum was received in connection with this RFP.

**Part III**

Proposer's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Authorized Representative: \_\_\_\_\_