# REQUEST FOR PROPOSALS:

## Consultant for workgroup facilitation and technical writing to identify recommendations for improved reporting of pregnancy status of COVID-19 pregnancy surveillance to inform data to action

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## PART I: OVERVIEW INFORMATION

**Issuing Organization:** Council of State and Territorial Epidemiologists (CSTE) at www.cste.org

**Participating Organizations:** CSTE and Centers for Disease Control and Prevention (CDC) – Cooperative Agreement number **1 NU38OT0002970-03-00.**

## PART II: FULL TEXT OF ANNOUNCEMENT

### Section I. Funding Opportunity Description

***Statement of Purpose***

The purpose of this request for funding proposal (RFP) is to select a consultant or consultant team to complete the following:

1) Facilitate monthly workgroup calls of stakeholders and subject matter experts convened by CSTE to identify issues and needs around pregnancy status reporting via Electronic Lab Reports (ELR) or other mechanism for COVID-19 to identify consensus recommendations to improve accuracy and completeness.
2) Complete a summary environmental scan report of current practices, opportunities, and limitations for reporting of pregnancy status for COVID-19 and other relevant conditions that may serve as examples (such as perinatal hepatitis, Zika virus, others)
3) Lead the development and technical writing of a recommendations document that outlines the workgroup's recommendations.

***Background***

Pregnant people or recently pregnant people are at increases risk of severe illness from Coronavirus disease 2019 (COVID-19)[1]. A recent study found that pregnant women with COVID-19 are more likely to be hospitalized, admitted to the intensive care unit, receive mechanical ventilation or can die compared to nonpregnant people of reproductive age with COVID-19[2]. Pregnant people with COVID-19 are also at increased risk for preterm birth and might be at increased risk for other poor pregnancy outcomes.[3] The national COVID-19 case surveillance, in which state and jurisdictional health departments voluntarily send case data to CDC using the National Notifiable Disease Surveillance System (NNDSS), is being used to monitor cases of confirmed and probable SARS-CoV-2 infection, including cases among pregnant people. However, only about a quarter of cases had complete information records in the pregnancy status variable. The Coronavirus Aid, Relief, and Economic Security (CARES) Act and its June 4 implementation guidance require every CLIA certified COVID-19 testing site to report every diagnostic and screening test result (both positive and negative results) performed to detect SARS-CoV-2 or to diagnose a possible case of COVID-19 (e.g., molecular, antigen, antibody) to the appropriate state or local public health department, based on the individual's residence[4]. Ongoing integrated and timely surveillance of pregnancy status for infectious disease reporting is essential for understanding and responding to the needs of pregnant and recently pregnant people with infectious diseases and their infants[5].

***Objectives***

CSTE seeks a consultant or consultant team to facilitate a workgroup of public health partners and subject matter experts via virtual monthly calls to identify recommendations for improved accuracy and more complete reporting of pregnancy status through timely data sources, primarily electronic

laboratory reporting (ELR), for COVID-19 pregnancy surveillance that will help to inform data to action, and to develop a document of final recommendations. The consultant or consultant team will collaborate with CSTE staff, health department staff, CDC partners, and other key stakeholders to create monthly call agendas to facilitate dialogue and identify needs, challenges and effective practices related to ELR of pregnancy status as part of COVID-19 surveillance, which could extend to other disease reporting. The consultant(s) will facilitate call discussion and may create and analyze relevant assessment(s) for State, Tribal, Local and Territorial (STLT) input, conduct review of literature, other documents identify current practices and needs and summarize findings in an environmental scan report. The consultant(s) will be responsible for compiling workgroup call summaries that synthesize all discussion, summary report of any assessment analysis and literature review findings for stakeholder review and discussion. The consultant(s) will lead the workgroup development of a final document of that outlines the recommendations identified by the workgroup by creating an outline and drafting content for additional stakeholder review and input and finalizing the Recommendations Document by incorporating edits and feedback.

***Deliverables***

To meet the objectives mentioned above, the awardee will be required to meet the following deliverables:

- **Check-in meetings**: consultant(s) will participate in regular check-in meetings with CSTE staff, CDC, SMEs, and additional identified stakeholders throughout the project period.
- **Assessment, literature review, environmental scan report:** consultant(s) will develop an assessment of jurisdictional practices related to pregnancy status reporting as part of their ELR for COVID-19 and review available data and literature (including but not limited to grey literature and online sources) on existing ELR practices, other relevant reporting methods, and gaps in pregnancy status reporting. This may also include relevant practices used for other infectious diseases such as viral hepatitis or Zika virus. These findings will be summarized in a report and shared with CSTE and the workgroup to inform development of recommendations. Assessment methods may include workgroup participant polls, STLT surveillance practice questionnaire, key informant interviews or other approaches to effectively collect key information.
- **Workgroup meetings:** consultant(s) will plan, join, and facilitate up to 8 workgroup meetings with relevant stakeholders to lead discussion on needs and practices related to pregnancy status reporting for COVID-19, including the bidirectional sharing of information on assessments and literature reviews to inform data collection instruments and provide both preliminary and results of analysis. The consultant will plan and facilitate discussion to elicit substantive input and develop group consensus on calls.
- **Drafting of Recommendations Document:** consultant(s) will collaboratively develop a Recommendations Document of workgroup developed recommendations to improve pregnancy status reporting for COVID-19 through ELR that reflects the workgroup's input and complete a draft for review and workgroup discussion.
- **Final Recommendations Report with an executive summary:** After final stakeholder review and approval, the consultant(s) will incorporate final edits to the publication ready Recommendations Document and submit to CSTE. The consultant will also complete an executive summary that consolidates the key points of the final Recommendations Document and submit the aggregate data from assessment(s).

***Project Timeline****

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| **March 14, 2022** | Application due date |
| **Week of March 21** | • Notification of award<br>• Project Initiation and kick-off call with CSTE |
| **March 2022 – May 2022** | • Facilitate monthly workgroup calls (4th Monday of each month at 1:00 pm ET)<br>• Draft assessment of relevant STLT practices, present on workgroup call for stakeholder feedback<br>• Integrate all<br>• Complete literature review, assessment and environmental scan that summarizes key findings and feedback. |
| **May - July 2022** | • Facilitate monthly workgroup calls<br>• Outline Recommendations document content for workgroup input<br>• Draft Recommendations Document for workgroup review and edits – multiple drafts may be required<br>• Incorporate final stakeholder review edits into final Recommendations Document. |
| **July /August 2022** | • **Project Completion** |

**Subject to change*

## Section II. Award Mechanisms

***Mechanism of Support***
CSTE will manage matters related to financial support for this project.

***Funds Available***
Funding for this project will be firm-fixed. CSTE intends to commit up to **$65,000.00** to the awardee. The final award amount is contingent on submitting a detailed and reasonable budget proposal to be approved by CSTE.

Funding is provided by CDC Cooperative Agreement Number **1 NU38OT000297-03-00**. Funds awarded to contractors under this announcement are subject to the laws, regulations, and policies governing the U.S. Public Health Service grant awards. All estimated funding amounts are subject to the availability of funds.

## Section III. Eligibility Information

***Eligible Applicants***
Eligible applicants are non-federal public health professionals (including, but not limited to, those from institutions of higher education, nonprofit organizations, communication firms, public health agencies,

or private consultants) with knowledge and expertise in STLT disease surveillance systems, infectious disease, and electronic lab reporting. Applicants should also have demonstrated writing skills (for technical and non-technical audiences) and a proven track record of group facilitation, consensus building and synthesis of stakeholder input.

Applicants who are employed or work on behalf of STLT health agencies are required to submit an outside activity form or secondary employment request (actual form may vary) that has been approved by their employer.

## Section IV. Application and Submission Information

***Content and Form of Application Submission***

The application should be no longer than **six** pages and should be written using a 12-point, single-spaced, 8.5x11-inch paged paper with one-inch margins. Additional pages or appendices that are not required may not be reviewed. Please include the headings below in the order listed and address all the issues included under each heading.

1. Contact information (½-page limit)
    a. Provide applicant contact information, including email address, phone number, and mailing address.
2. Experience (2-page limit)
    a. Describe relevant experience (i.e., including examples of activities and deliverables previously accomplished) as it relates to:
        i. Remote meeting facilitation including development of agendas, discussion topics and consensus building across varied stakeholder groups.
        ii. Writing skills
            - Including writing of technical reports that synthesize information from a variety of discussions and sources.
            - Experience writing for STLT audiences and non-technical audiences
        iii. Experience collaborating with federal, state, territorial, local, and tribal partners
        iv. Knowledge of and expertise in STLT disease surveillance systems and electronic lab reporting.
    b. Include all relevant experience of team members who would be assigned to this project
3. Work plan (1 ½ page limit)
    a. Describe the implementation plan to complete the outlined deliverables
    b. Include a timeline for critical activities and milestones
    c. Identify any potential risks to timeline
4. Budget and justification (1 -page limit)
    a. Provide a detailed budget and budget justification, including expected levels of effort and rates of compensation by role
5. Other required supplemental documentation (include as an appendix)
    a. Writing sample
    b. Outside activity form/secondary employment request (if applicable)

6. Other supplemental documentation (optional, do not count toward total page limit)
    a. CV/resume(s)

For further assistance, technical questions, or inquiries about the application, contact Mia Israel at CSTE (770-458-3811 or misrael@cste.org).

***Submission Dates and Times***

Submission, Review, and Anticipated Start Dates:

- Application Submission Receipt Date: **Submissions due by March 14, 2022, by 11:59 pm EDT**
- Award Notification Date: **Week of March 21, 2022**
- Anticipated Start Date: **Week of March 21, 2022**

Submitting an Application:

Application materials should be sent to Mia Israel at misrael@cste.org by 11:59 pm EDT, **Monday, March 14, 2022.** Applications submitted after this deadline may not be reviewed. Notification of successful receipt of the application will be sent to the applicant upon request.

**Section V. Application Review Information**

***Criteria***

Note: any supplemental documentation provided will not be scored, and its content will not be viewed as part of the proposal and fulfilling application requirements. All project-relevant information must be included with the page-limit application.

The following criteria will be used to review all (outlined sections) submitted applications:

1. Overall Application *(10 points)*
    *a.* Followed application formatting requirements *(5 points)*
    *b.* Writing skills, clarity *(5 points)*
2. Relevant Skills and Experience *(30 points)*
    a. Demonstrated prior relevant experience and skills (i.e., including examples of activities and deliverables previously accomplished) as it relates to:
        i. Meeting facilitation (*10 points)*
        ii. Writing skills *(10 points)*
            - Including writing of technical reports that synthesize information from a variety of discussions and sources.
            - Experience writing for STLT audiences and non-technical audiences
        iii. Collaboration with federal, state, territorial, local public health personnel, and expertise in STLT disease surveillance systems *(5 points)*
        iv. Knowledge of disease surveillance and electronic lab reporting *(5 points)*
3. Workplan *(40 points)*
    *a.* Applicant's understanding of the project and deliverables *(15 points)*
    *b.* Detailed work plan and method for completing work in timeframes listed above, including timeline to complete work in the timeframe listed above, the feasibility of proposed workplan, and identified potential risks to timeline *(25 points)*
4. Detailed Budget and Justification *(20 points)*
    *a.* Detailed budget breakdown of costs *(10 points)*
    b. Reasonability of justification *(10 points*)

***Review and Selection Process***

Eligible applications that are complete will be evaluated for scientific and technical merit by CSTE in accordance with the review criteria stated above. A review panel of CSTE National Office staff, CSTE Surveillance/Informatics Steering Committee members, and subject matter experts will score the applications. Funding awards will be made based upon the quality of the submitted proposal and the ability of the applicant to meet the criteria stated above.

## Section VI. Award Admission Information

***Award Notices***

All applicants will be notified via email no later than **March 25, 2022.**

***Award Recipient Responsibilities***

The award recipient will have primary responsibility for the following:

1. Participating in a kick-off call with CSTE and CDC to outline objectives and expectations of the project.
2. Joining regular calls with CSTE and CDC to provide project updates.
3. Actively engaging project stakeholders (e.g., lab associations, partner organizations, STLT, federal partners)
4. Sharing drafts of all developed materials (e.g., reports and slides) with CSTE before finalization.
5. Joining and facilitating up to 8 monthly workgroup calls
6. Gathering information and communicating through multiple avenues regularly for discussion and feedback with stakeholders (e.g., conference calls, emails, etc.)
7. Accomplishing the objectives and completing the deliverables listed in this announcement.
8. Providing regular invoices to CSTE as required in the contract agreement.

***CSTE Responsibilities***

CSTE will have the primary responsibility for the following:

1. Participating in a kick-off call with awardee and CDC to outline objectives and expectations of the project.
2. Serving as the awardee's principal point of contact.
3. Providing avenues for communication between awardee and stakeholders.
4. Providing review (e.g., grammar, formatting, consistency) on awardee-developed materials throughout the project's course.
5. Sending communications to stakeholders (e.g., call calendar events, reminders, communications from awardee).
6. Holding regular calls with awardee and CDC to receive project updates and provide input and feedback.
7. Publishing and disseminating final Recommendations Document to CSTE and CDC audiences.
8. Monitoring the terms of the agreement.
9. Funding according to the terms of the contract agreement.

***For More Information***

For more information, contact:
Mia Israel
misrael@cste.org

**References**

1. Centers for Disease Control and Prevention website: https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnant-people.html, retrieved January 26, 2022.
2. Zambrano LD, Ellington S, Strid P, et al. Update: Characteristics of Symptomatic Women of Reproductive Age with Laboratory-Confirmed SARS-CoV-2 Infection by Pregnancy Status — United States, January 22–October 3, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1641–1647. DOI:http://dx.doi.org/10.15585/mmwr.mm6944e3
3. Woodworth KR, et al.; Birth and Infant Outcomes Following Laboratory-Confirmed SARS-CoV-2 Infection in Pregnancy - SET-NET, 16 Jurisdictions, March 29-October 14, 2020. MMWR Morb Mortal Wkly Rep. 2020 Nov 6;69(44):1635-1640. doi: 10.15585/mmwr.mm6944e2.
4. COVID-19 Pandemic Response, Laboratory Data Reporting: CARES Act, Section 18115 https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf
5. Woodworth KR, et al.; A Preparedness Model for Mother-Baby Linked Longitudinal Surveillance for Emerging Threats. Matern Child Health J. 2021 Feb;25(2):198-206. doi: 10.1007/s10995-020-03106-y. Epub 2021 Jan 4.