Leadership Development

Open Request for Information

Contact
Shannon Jorgenson, Contract Specialist
sjorgenson@ruralcenter.org

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U65RH31261, Delta Region Health Systems Development, $4,000,000 (0% financed with nongovernmental sources). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
PURPOSE

The National Rural Health Resource Center (The Center) seeks potential subcontractor(s) to provide leadership development, management training and/or service excellence education.

BACKGROUND

The Center is a nonprofit organization dedicated to sustaining and improving health care in rural communities. The Center provides technical assistance, information, tools and resources for the improvement of rural health care. It serves as a national rural health knowledge center and strives to build state and local capacity. The Center operates at a $5.1 million annual budget.

Through the Delta Region Community Health Systems Development (DRCHSD) Program, The Center, along with the Delta Regional Authority (DRA), and the Health Resources Services Administration’s Federal Office of Rural Health Policy (FORHP) have partnered to support selected hospitals, clinics and communities with an opportunity to receive technical assistance (TA).

The DRCHSD Program supports selected hospitals and clinics with in-depth and long-term TA. TA is provided through a multi-pronged approach that is delivered in a phased-in method over multiple years (up to three years). The approach consists of stepwise processes that allow each hospital and community to tailor the community health plan to fit their needs, as well as to help them to meet the following eight (8) goals:

1. Improve financial position and increase operational efficiencies
2. Implement quality improvements that support an evidenced-based culture for improved health outcomes
3. Address workforce recruitment and retention needs
4. Increase use of telemedicine to fill service gaps and access to care
5. Ensure access to and availability of Emergency Medical Services
6. Integrate social services to address socio-economic challenges
7. Enhance coordination of care and develop a community care coordination plan
8. Strengthen the local health care delivery system to position for population health

The objective of this project is to educate leaders and providers to enhance their leadership, management and communication skills to build internal
capacity that supports the organization in adopting strategies for the future and sustains performance gains post-project. The goal for the training is to develop a culture of excellence (focused on quality and value) that promotes ongoing performance improvement. Because of the wide range of leadership development, management training and service excellence needs at each of the sites, the Contractor should clearly indicate the areas of expertise, training experience and approach to TA. The Contractor’s TA approach and design should be flexible to meet the variety of needs and topics. Provision of services could be delivered through a one day onsite direct, hands-on training session and/or virtual TA. Virtual TA could include, for example, one-on-one coaching calls, group coaching calls, and educational webinars.

The Center and the selected hospitals and clinics will identify the specific training needs. The Contractor shall work collaboratively with The Center to coordinate the planning and delivery of TA. The Contractor shall utilize available resources, where appropriate, and at a minimum, share information with leaders to build the organization’s knowledge base and promote sustainability. The Contractor shall report to The Center through regularly scheduled meetings to review progress and discuss next steps. Contractor shall provide a summary of TA activity to The Center and the selected organization. The summary should include, but is not limited to, general recommendations for ongoing training and development. Contractor shall work closely with The Center to develop and coordinate a post-training assessment, which could be conducted via SurveyMonkey or other online evaluation and/or polling tool(s). The Center shall assist the contractor in the training assessment to evaluate impact of TA for future planning to improve services and report impact of the training to the FORHP.

This RFP supports professional fees to provide the TA services, but does not cover additional assessments, planning and development activities, nor the Contractor’s proprietary resources and tools.

**TASKS TO COMPLETE**

The selected Contractor will complete the following tasks.

1. Develop training topic(s) with The Center
   1. Submit work plan to The Center for review and comments to include:
      a. Strategy and activities
      b. Purpose, goals and objectives
      c. Service delivery date(s)
d. Completion dates
 e. Milestones, if applicable
 f. Anticipated outcomes and expected impact statements
 g. Training evaluation

2. Review workplan in coordination with The Center and hospital / clinic CEO

3. Work with The Center to finalize evaluation process

4. Schedule regular/weekly standing meeting with The Center throughout the term of the project

5. Submit summary to The Center in word compatible format

6. Submit summary to the hospital /clinic CEO in pdf format

7. Provide training assessment data and results in excel format to The Center

PROPOSAL SUBMISSION REQUIREMENTS

Please provide:

A. Organization Name, Address, Point of Contact, and Contact information

B. Basic description of areas of expertise, services, include method of delivery, personnel, materials

C. Estimate of cost to complete, separate based on the outlined scope of work. For example, equipment, personnel for training, implementation support, travel expense, etc.
   a. Break cost down by site and provide an hourly rate for follow up coaching and or support

D. Provide expected timeline to complete work

E. Describe the organization’s liquidity management plan, or how liquid assets are managed to meet cash needs for expenditures during the contract period

F. Describe previous experience in scope of work, with emphasis on Delta Region, rural organizations (hospitals and clinics), and the needs of rural communities

G. Provide location of organization headquarters, note if located in a DRA county

H. Attest that organization and employees that will work on this project are not debarred, suspended, or proposed for debarment by the Federal government and consents to a search of the Excluded Parties List System (FAR 9.404) to verify the contractors written acknowledgement that the contractor, or its principals, is not
debarred, suspended, or proposed for debarment by the Federal Government (FAR 52.209-6).

I. Attest that the organization and/or employees of the organization do not have a financial interest in The Center or any of the facilities supported in the DRCHSD program. If a conflict or potential conflict exists, disclose the details of the relationship to The Center.
   a. A financial interest can be directly or indirectly, through business, investment, or family:
      i. An ownership or investment interest in any entity with which the Organization has a transaction or arrangement,
      ii. A compensation arrangement with the Organization or with any entity or individual with which the Organization has a transaction or arrangement, or
      iii. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the Organization is negotiating a transaction or arrangement.
   b. A financial interest is not necessarily a conflict of interest. A person who has a financial interest may have a conflict of interest only if the appropriate governing board, committee or Federal Office of Rural Health decides that a conflict of interest exists.

J. Two references or letters of support with contact information (phone/email) from past or current clients that can provide feedback on performance

DRA Region, Small Businesses, Service Disabled Veteran Owned, or Women-Owned Small Business concerns are encouraged to respond.

Submit proposals to Shannon Jorgenson at sjorgenson@ruralcenter.org.