



**TEXAS**  
**Health and Human Services**

**Cecile E. Young, Executive Commissioner**

**Request for Applications (RFA)**  
**For**  
**Workplace Violence Against Nurses Prevention**  
**Program**  
**RFA No. HHS0010240**

**Date of Release: August 30, 2021**  
**Responses Due: November 29, 2021 by 10:30 a.m. Central Time**

**NIGP Class/Item Code:**  
**962/58, Professional Services (Not Otherwise Classified)**

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# **ARTICLE I. EXECUTIVE SUMMARY, DEFINITIONS, AND AUTHORITY**

## **1.1 EXECUTIVE SUMMARY**

The Department of State Health Services with support and oversight provided by the Health and Human Services Commission, collectively referred to as Health and Human Services (“HHS”), announces the availability of grant funds managed by the Texas Center for Nursing Workforce Studies (TCNWS) to support innovative approaches for reducing verbal and physical violence against nurses in hospitals, freestanding emergency medical care facilities, nursing facilities, and home health agencies.

The intent of this RFA is to stimulate the development, evaluation, and adoption of innovative solutions to reduce workplace violence against nurses.

To be considered for award, Respondents must execute **Exhibit A, HHS Solicitation Affirmations**, of this Solicitation and provide all other required information and documentation as set forth in this Solicitation.

## **1.2 DEFINITIONS**

Refer to **Exhibit B, HHSC Uniform Terms and Conditions – Grant** for additional definitions. Additionally, as used in this Solicitation, unless the context clearly indicates otherwise, the following terms and conditions have the meanings assigned below:

**“Addendum”** means a written clarification or revision to this Solicitation issued by the System Agency.

**“ANA”** means American Nurses Association.

**“Apparent Awardee”** means an organization that has been selected to receive a grant award through response to this RFA but has not yet executed a grant agreement or contract. May also be referred to as **“Apparent Grant Recipient”** or **“Apparent Grantee.”**

**“Applicant”** means the entity responding to this Solicitation. May also be referred to as **“Respondent”**.

**“DSHS”** means Department of State Health Services.

**“Direct Cost”** are costs that can be identified specifically with a particular final cost objective.

**“FEC”** means freestanding emergency medical care facility.

**“Grantee”** means the Party receiving funds under this Grant Agreement. May also be referred to as “Subrecipient” or “Contractor” in this document.

“Health and Human Services” or “HHS” includes the Department of State Health Services (DSHS), in addition to the Health and Human Services Commission (HHSC).

“Health and Human Services Commission” or “HHSC” has the same meaning as the definition in **Exhibit B**.

“Health Care Facility” or “Facility” means any of the following, as defined in Texas Health and Safety Code, Section 105.001:

1. “Freestanding Emergency Medical Care Facility” means a facility licensed under Texas Health and Safety Code, Chapter 254.
2. “Home Health Agency” means a home and community support services agency licensed under Texas Health and Safety Code, Chapter 142.
3. “Hospital” means a:
  - a. general or special hospital licensed under Texas Health and Safety Code, Chapter 241;
  - b. private mental hospital licensed under Texas Health and Safety Code, Chapter 577; or
  - c. hospital that is maintained or operated by this state or an agency of this state.
4. “Nursing Facility” means an institution licensed under Texas Health and Safety Code, Chapter 242.

“HUB” has the same meaning as the definition in **Exhibit B**.

“Indirect Cost” are costs (a) incurred for a common or joint purpose benefiting more than one cost objective, and (b) not readily assignable to the cost objectives specifically benefited, without effort disproportionate to the results achieved.

“Indirect Cost Rate Proposal Package” is the documentation prepared by an organization requesting an indirect cost rate.

“Key Personnel” means a Respondent organization's Project Contact, Fiscal Contact, and Executive Director and/or any other key stakeholders in the Proposed Project.

“OSHA” means the Occupational Safety and Health Administration.

“Project” means specific activities of the Grantee that are supported by funds provided under this Grant Agreement.

“Respondent” means the entity responding to this Solicitation. May also be referred to as “Applicant.”

“Solicitation” means this RFA including all Exhibits and Addenda, if any.

“State” means the State of Texas and its instrumentalities, including HHSC, the System Agency and any other state agency, its officers, employees, or authorized agents.

“Successful Respondent” means an organization that receives a grant award as a result of this RFA. May also be referred to as “Grantee,” “Awarded Applicant,” “Subrecipient,” or “Grant Recipient.”

“System Agency” has the same meaning as the definition in **Exhibit B**.

“TCNWS” means Texas Center for Nursing Workforce Studies.

“WVAN” means Workplace Violence Against Nurses.

### **1.3 AUTHORITY**

DSHS is requesting applications under Texas Health and Safety Code, Section 105.011.

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## **ARTICLE II. SCOPE OF GRANT AWARD**

### **2.1 PROGRAM BACKGROUND**

House Bill 280, 85<sup>th</sup> Texas Legislature, Regular Session, 2017 added Section 105.011 to the Health and Safety Code to allow TCNWS to administer a grant program to fund innovative approaches for reducing verbal and physical violence against nurses in hospitals, freestanding emergency medical care facilities (FECs), nursing facilities, and home health agencies. The intent of this RFA is to stimulate the development, evaluation, and adoption of innovative solutions to reduce workplace violence against nurses.

OSHA reports that each year almost two (2) million Americans are victims of violence in the workplace.<sup>1</sup> Violence in the workplace has become a serious concern for nurses because they have the highest risk among health professionals to become victims due to having the most interaction with patients.<sup>2</sup> A 2011 ANA study found that concerns of on-the-job assault among nurses increased from twenty-five percent (25%) in 2001 to thirty-four percent (34%) in 2011.<sup>3</sup> Key findings from the ANA in 2016 also found that twenty-five percent (25%) of nurses and nursing students were physically assaulted, and half of nurses claimed they were bullied in some manner in the workplace.<sup>4</sup> The number of reported incidents may be higher as well because a vast amount of violent incidents are not reported.<sup>5</sup>

The effects of workplace violence include minor and serious physical injury, psychological trauma, and even death.<sup>6</sup> Violence in the workplace also has negative organizational consequences, including low worker morale, increased worker turnover, a hostile working environment, and reduced trust of management and other coworkers.<sup>7</sup> Research suggests that a comprehensive workplace violence prevention program can effectively reduce workplace violence.<sup>8</sup>

In 2016, TCNWS conducted a study on workplace violence that consisted of two surveys: one of individual nurses and their personal experience with workplace violence and one of employers of nurses that included questions related to practices and strategies used by their organizations to prevent workplace violence against nurses.<sup>9</sup>

The individual nurse study found that most nurses had experienced some kind of violent act in the workplace in the past twelve (12) months. Verbal abuse was the most common type of workplace violence experienced by responding nurses; and patients were the most commonly reported group to commit violence.<sup>10</sup>

Results from the employer survey found that the majority of responding facilities had implemented a program or policy that includes prevention of workplace violence against nurses. Most facilities' policies included workplace violence prevention training, assessment of work areas for risk factors, required reporting of incidents, and investigation of reported incidents.<sup>11</sup>



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<sup>1</sup> OSHA, Safety and Health Topics, Workplace Violence, available at <https://www.osha.gov/SLTC/workplaceviolence/index.html>.

<sup>2</sup> National Institute for Occupational Safety and Health, *Violence: Occupational Hazards in Hospitals*, DHHS (NIOSH) Pub. No. 2002-101, at 3 (April 2002) (Who is at risk?), <https://www.cdc.gov/niosh/docs/2002-101/pdfs/2002-101.pdf>.

<sup>3</sup> ANA, 2011 ANA Health and Safety Survey, Nurses' Top Concerns available at <https://www.nursingworld.org/practice-policy/work-environment/health-safety/health-safety-survey/>.

<sup>4</sup> ANA, *Health Risk Appraisal (HRA), Executive Summary* at 4 (Key Findings: October 2013-October 2016), [https://www.nursingworld.org/~4aeeeb/globalassets/practiceandpolicy/work-environment/health--safety/ana-healthriskappraisalsummary\\_2013-2016.pdf](https://www.nursingworld.org/~4aeeeb/globalassets/practiceandpolicy/work-environment/health--safety/ana-healthriskappraisalsummary_2013-2016.pdf)

<sup>5</sup> OSHA, Safety and Health Topics, Workplace Violence Overview, Who is at risk of workplace violence? available at <https://www.osha.gov/SLTC/workplaceviolence/index.html>;

OSHA, *Workplace Violence in Healthcare: Understanding the Challenge*, OSHA 3826 at 2 (12/2015), <https://www.osha.gov/sites/default/files/OSHA3826.pdf>

<sup>6</sup> National Institute for Occupational Safety and Health, *Violence: Occupational Hazards in Hospitals*, DHHS (NIOSH) Pub. No. 2002-101, at 3 (April 2002) (What are the effects of violence?), <https://www.cdc.gov/niosh/docs/2002-101/pdfs/2002-101.pdf>.

<sup>7</sup> *Id.*

<sup>8</sup> See generally *id.* at 8 (Case Reports: Prevention Strategies That Have Worked); OSHA, *Workplace Violence in Healthcare: Understanding the Challenge*, OSHA 3826 at 4 (12/2015), <https://www.osha.gov/sites/default/files/OSHA3826.pdf>

<sup>9</sup> DSHS, *Workplace Violence Against Nurses in Texas*, (December 2016), <https://www.dshs.texas.gov/legislative/2016-Reports/DSHS-Report-HB2696.pdf>

<sup>10</sup> *Id.* at 1 (Executive Summary).

<sup>11</sup> *Id.*

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## 2.2 GRANT AWARD AND TERM

### 2.2.1 Available Funding

The total amount of state funding available for the Workplace Violence Against Nurses (WVAN) Prevention grant is **\$667,000.00**, and it is DSHS's intention to make multiple awards. The maximum amount awarded per selected applicant will not exceed \$150,000.00 for the life of the grant. Large requests for state funding may not be fully funded in order to ensure that funds are available for the broadest possible array of communities and programs.

Grant Agreements awarded as a result of this RFA will be funded on a cost reimbursement basis. Under the cost reimbursement method of funding, Grant Recipients are required to finance operations with their own working capital, with grant payments made by DSHS to reimburse the Grant Recipients for actual, allowable, and allocable costs supported by adequate documentation.

Upon execution of Grant Agreements resulting from this RFA and issuance of a related purchase order, DSHS may disperse an advance payment of no more than twenty-five percent (25%) of the state award. Demonstrated need and plan for the expenditure of the advancement must be included in **Form F, Budget Narrative** and **Form G, Budget Template**. Eligible respondents who receive written authorization from the DSHS Program will be allowed to invoice the Agency for up to 25% of their award upon receipt of an executed Grant Agreement and purchase order, where such costs are necessary for efficient and timely performance of the scope of work. Successful Respondents will be responsible for providing DSHS with documentation of costs associated with the advance within 120 days from the start of the grant.

### 2.2.2 Grant Term

The grant funding period for this grant will be approximately twenty (20) months. It is anticipated that the grant funding period for this program will be **June 1, 2022** through **December 31, 2023**. Subject to the availability of funds, DSHS, at its sole discretion, may extend this Contract for any period(s) of time, provided the Contract term, including all extensions or renewals, does not exceed five years.

Reimbursement will only be made for those allowable expenses that occur within the term of the grant. No pre-award spending will be allowed. Awarded Applicants will have contractual obligations that extend beyond the grant period.

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## 2.3 ELIGIBLE APPLICANTS

In order to be awarded a contract as a result of this RFA, a Respondent must be:

1. A Health Care Facility as defined in **Section 1.2, Definitions**, located in Texas; or
2. A partnership between a Health Care Facility located in Texas and an institution of higher education; or
3. A partnership between a Health Care Facility located in Texas and a researcher, consultant, or community entity with relevant expertise in workplace violence prevention.

In the event Respondent is applying as a partnership, the Health Care Facility must be the primary Applicant as awards will only be made to Health Care Facilities.

## 2.4 PRIORITY APPLICANTS

In addition to priority for selection being given to applicants that demonstrate an innovative approach to reducing verbal and physical violence, priority for funding, in no specific order, will be given to Projects that have demonstrated the greatest need for services to mitigate the risk of workplace violence and to:

1. Small and rural hospitals, nursing facilities, home health agencies, and freestanding emergency medical centers.
2. Partnerships between Health Care Facilities or partnerships between a health care facility and a researcher, consultant or community entity.
3. Eligible applicants who have not previously been awarded funding under the Workplace Violence Against Nurses Grant Program.

## 2.5 PROGRAM REQUIREMENTS

To meet the mission and objectives of the Workplace Violence Against Nurses Prevention Grant program, Respondents must:

1. Provide a detailed explanation of the applicant's workplace violence prevention program or plan, including a timeline for development and implementation, description of population identified to participate in the program, detailed description of budget, and detailed information related to administration and support for the program;
2. Explain what makes the Applicant's proposed program or plan innovative;
3. Document how the workplace prevention program or plan would achieve the goals of reducing verbal and physical violence against nurses in the Applicant's respective Health Care Facility; and

4. Propose performance metrics for measuring short- and long-term outcomes of the program including any change in the severity and frequency of verbal and physical violence against nurses.

## 2.6 SCOPE

Grantee will administer a workplace violence prevention program intended to identify and implement innovative efforts to reduce verbal and physical violence against nurses in hospitals, freestanding emergency medical care facilities, nursing facilities, or home health agencies. Grantee will report activities funded through the grant, the change in severity and frequency of verbal and physical violence against nurses, program performance based on stated performance metrics, and budget expenditures. In developing proposals in response to this RFA, Respondents must complete **Form A through Form E** to address the following:

1. **Form A, Face Page:** Respondents must provide primary contact information for the Respondents on **Form A, Face Page**, including facility name and type, Respondent name(s), and total amount of funds being requested. Attached to **Form A, Face Page** must be the curriculum vitae (“CV”)/resume of each project director.
2. **Form B, Nonprofit or For Profit Entity or Form B-1, Governmental Entity:** Respondents must provide primary contact information on Form B or Form B-1, as applicable.
3. **Form C, Narrative Proposal:** Respondents must complete all parts of the proposal narrative. Respondents must address the project scope and description, what makes the project innovative, goals, implementation methodology, project evaluation, sustainability of the project after the grant period ends, and contextual information. More details about these elements of the proposal narrative can be found in **Article 5, Section 5.1**.
4. **Form D, Project Timeline:** Respondents must provide a timeline of all key activities, benchmarks, or milestones for the project in chronological order. Each entry in the timeline should include the date for accomplishing the activity, a description of the activity, benchmark, or milestone, and any additional relevant comments about the entry.
5. **Form E, Performance Measures:** Respondents must propose at least two performance measures, one for short-term outcomes and one for long-term outcomes of the program.

### 2.6.1 Expenditure Proposal

Respondents must complete **Form F, Budget Narrative** and **Form G, Budget Template** to:

1. Demonstrate project costs outlined in the Expenditure Proposal are reasonable, allowable, allocable, and developed in accordance with applicable state and federal grant requirements.
2. Identify costs to be requested from DSHS.

## **2.7 GRANTEE PERFORMANCE**

DSHS will monitor the performance of Grantee awarded under this RFA. All services and deliverables under the Grantee shall be provided at an acceptable quality level and in a manner consistent with acceptable industry standard, custom, and practice.

If Grantee has any subcontractors involved or funded under any Grantee awarded under this RFA, Grantee is required to enter into formal contracts with subcontractors, maintain records of the subcontracts, notify DSHS of any updates, and make all subcontracts available upon request by DSHS.

DSHS staff shall monitor and oversee the WVAN Grantee's progress and compliance through required quarterly project and expenditure reports to ensure that grant commitments are fulfilled and that the financial matters related to the grant award are accurate and appropriate. Reports must include any subcontractor-related project and expenditure updates or information. If a required report is not submitted to DSHS, then DSHS may, at its sole discretion, reduce awarded funding and Grantee may be deemed non-compliant and subject to termination.

Contractor's failure to meet the above objectives may result in any of the following actions to be taken by DSHS:

1. Temporary or permanent withholding of payments.
2. Reduction of funding commensurate with the failure to perform.
3. Demanding repayment of funds from Contractor.
4. Suspension or termination of this contract.
5. Delay in execution of a new contract or contract renewal.

DSHS owns all data and reporting that is created as a part of the Contract.

## **2.8 PROHIBITIONS**

Grant funds may not be used to support the following services, activities, and costs:

1. Inherently religious activities such as prayer, worship, religious instruction, or proselytization;
2. Lobbying;
3. Any portion of the salary of, or any other compensation for, an elected or appointed government official;

4. Vehicles or equipment for government agencies that are for general agency use and/or do not have a clear nexus to terrorism prevention, interdiction, and disruption (i.e., mobile data terminals, body cameras, in-car video systems, or radar units, etc. for officers assigned to routine patrol;)
5. Weapons, ammunition, tracked armored vehicles, weaponized vehicles or explosives (exceptions may be granted when explosives are used for bomb squad training;)
6. Admission fees or tickets to any amusement park, recreational activity or sporting event;
7. Promotional gifts;
8. Food, meals, beverages, or other refreshments, except for eligible per diem associated with grant-related travel or where pre-approved for working events;
9. Membership dues for individuals;
10. Any expense or service that is readily available at no cost to the grant project;
11. Any use of grant funds to replace (supplant) funds that have been budgeted for the same purpose through non-grant sources;
12. Fundraising;
13. Any other prohibition imposed by federal, state, or local law;
14. The acquisition or construction of facilities;
15. Costs incurred prior to the Grant Period;
16. Incentive payments, including but not limited to gift cards or gas cards; and
17. Conference registration costs and conference-related travel for the purpose of sharing results of the project.

## **2.9 STANDARDS**

Grantees must comply with the requirements applicable to this funding source cited in the *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* ([2 CFR 200](#)); the *Texas Grant Management Standards (TxGMS)*, and all statutes, requirements, and guidelines applicable to this funding.

Grantees are required to conduct Project activities in accordance with federal and state laws prohibiting discrimination. Guidance for adhering to non-discrimination requirements can be found on the Health and Human Services Commission (HHSC) Civil Rights Office website at: <https://hhs.texas.gov/about-hhs/your-rights/civil-rights-office>.

Upon request, a Grantee must provide the HHSC Civil Rights Office with copies of all the Grantee's civil rights policies and procedures. Grantees must notify HHSC's Civil Rights

Office of any civil rights complaints received relating to performance under the contract no more than 10 calendar days after receipt of the complaint. Notice must be directed to:

HHSC Civil Rights Office  
701 W. 51st Street, Mail Code W206  
Austin, TX 78751  
Phone Toll Free (888) 388-6332  
Phone: (512) 438-4313  
TTY Toll Free (877) 432-7232  
Fax: (512) 438-5885

A Grantee must ensure that its policies do not have the effect of excluding or limiting the participation of persons in the Grantee's programs, benefits or activities on the basis of national origin, and must take reasonable steps to provide services and information, both orally and in writing, in appropriate languages other than English, in order to ensure that persons with limited English proficiency are effectively informed and can have meaningful access to programs, benefits, and activities.

## **2.10 CONFIDENTIALITY**

By entering into a Grant Agreement with DSHS as a result of this Solicitation, the Parties agree to safeguard confidential information in compliance with all applicable federal and state privacy, security and breach notification laws and regulations.

## **2.11 NO GUARANTEE OF VOLUME, USAGE OR COMPENSATION**

The System Agency makes no guarantee of volume, usage, or total compensation to be paid to any Respondent under any awarded Grant, if any, resulting from this Solicitation. Any awarded Grant is subject to appropriations and the continuing availability of funds.

The System Agency reserves the right to cancel, make partial award, or decline to award a Grant under this Solicitation at any time at its sole discretion.

There should be no expectation of additional or continued funding on the part of the Grant Recipient. Any additional funding or future funding may require submission of an application through a subsequent RFA.

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## ARTICLE III. ADMINISTRATIVE INFORMATION

### 3.1 SCHEDULE OF EVENTS

EVENT	DATE/TIME
Solicitation Release Date	August 30, 2021
Respondent Conference (optional)	September 15, 2021
Deadline for Submitting Questions	September 29, 2021 by 2PM
Tentative Date Answers to Questions Posted	October 6, 2021
<b>Deadline for Submission of Solicitation Responses [NOTE: Responses must be RECEIVED by HHSC by the deadline.]</b>	November 29, 2021 by 10:30 a.m. Central Time
Anticipated Notice of Award	May 1, 2022
Anticipated Contract Start Date	June 1, 2022

**Note:** All dates are tentative, and HHS reserves the right to change these dates at any time. At the sole discretion of HHS, events listed in the Schedule of Events are subject to scheduling changes and cancellation. Scheduling changes or cancellation determinations made prior to the Deadline for Submission will be published by posting an Addendum to the [HHS Grants website](#). After the Deadline for Submission, if there are delays that significantly impact the anticipated award date, HHSC, at its sole discretion, may post updates regarding the anticipated award date to the [Procurement Forecast](#) on the HHS Procurement Opportunities web page. Each Respondent is responsible for checking the [HHS Grants website](#) and Procurement Forecast for updates.

### 3.2 CHANGES, AMENDMENT, OR MODIFICATION TO SOLICITATION

The System Agency reserves the right to change, amend or modify any provision of this Solicitation, or to withdraw this Solicitation, at any time prior to award, if it is in the best interest of the System Agency, and System Agency will post such on the [HHS Grants website](#). It is the responsibility of Respondent to periodically check the [HHS Grants website](#) to ensure full compliance with the requirements of this Solicitation.

### 3.3 IRREGULARITIES

Any irregularities or lack of clarity in this Solicitation should be brought to the attention of the Sole Point of Contact listed in **Section 3.4.1** as soon as possible so corrective Addenda may be furnished to prospective Respondents.



## 3.4 INQUIRIES

### 3.4.1 Sole Point of Contact

All requests, questions or other communication about this Solicitation shall be made in writing to the HHS's Sole Point of Contact addressed to the person listed below. All communications between Respondents and other HHS staff members concerning the Solicitation are strictly prohibited, unless noted elsewhere in this RFA. **Failure to comply with these requirements may result in disqualification of Respondent's Solicitation Response.**

Name: Amy Pearson, CTCD  
Title: Grants Specialist  
Address: Procurement & Contracting Services, HHSC, 1100 West 49th St, MC2020  
Building S, Austin, TX 78756  
Phone: (512) 406-2638  
Email: amy.pearson@hhs.texas.gov

**However, if expressly directed in writing by the Sole Point of Contact, Respondent may communicate with another designated System Agency representative, e.g., during contract negotiations, if any.**

### 3.4.2 Prohibited Communications

All communications between Respondents and other HHS staff members concerning the Solicitation may not be relied upon and responded should send all questions or other communications to the Sole Point of Contact. This restriction does not preclude discussions between affected parties for the purposes of conducting business unrelated to this Solicitation. **Failure to comply with these requirements may result in disqualification of Respondent's Solicitation Response.**

### 3.4.3 Questions

HHS will allow written questions and requests for clarification of this Solicitation. Questions must be submitted in writing and sent by U.S. First class mail or email to the Sole Point of Contact listed in **Section 3.4.1, Sole Point of Contact** above. Respondents' names will be removed from questions in any responses released. Questions shall be submitted in the following format. Submissions that deviate from this format may not be accepted:

1. Identifying Solicitation number;
2. Section number;
3. Paragraph number;

4. Page number;
5. Text of passage being questioned; and
6. Question.

**Note: Questions or other written requests for clarification must be received by the Sole Point of Contact by the deadline set forth in Section 3.1, Schedule of Events, above. However, the System Agency, at its sole discretion, may respond to questions or other written requests received after the deadline. Please provide entity name, address, phone number, fax number, e-mail address, and name of contact person when submitting questions.**

#### **3.4.4 Clarification Request Made by Respondent**

Respondents must notify the Point of Contact of any ambiguity, conflict, discrepancy, exclusionary specifications, omission or other error in the Solicitation in the manner and by the deadline for submitting questions.

#### **3.4.5 Responses**

Responses to questions or other written requests for clarification may be posted on the [HHS Grants website](#). HHS reserves the right to amend answers prior to the deadline of Solicitation Responses. Amended answers may be posted on the [HHS Grants website](#). It is Respondent's responsibility to check the [HHS Grants website](#) or contact the Sole Point of Contact for updated responses. HHS also reserves the right to decline to answer any question or questions or to provide a single consolidated response of all questions they choose to answer in any manner at the HHS's sole discretion.

#### **3.4.6 Respondent Conference**

HHSC will conduct an **optional** pre-submittal webinar on **September 15, 2021**. Applicants will need to register for the webinar using the following link at <https://attendee.gotowebinar.com/register/4936178704542155277>. After registering, Applicant should receive a confirmation email containing information about joining the webinar.

### **3.5 SOLICITATION RESPONSE COMPOSITION**

All Applications must be:

1. Clearly legible;
2. Sequentially page-numbered and include the respondents name at the top of each page;

3. Organized in the sequence outlined in **Article IX, Submission Checklist**;
4. In Arial or Times New Roman font, size 12 or larger for normal text, no less than size 10 for tables, graphs, and appendices;
5. Blank forms provided in the Attachments must be used (electronic reproduction of the forms is acceptable; however, all forms must be identical to the original form(s) provided); do not change the font used on forms provided;
6. Correctly identified with the RFA number and submittal deadline;
7. Responsive to all RFA requirements; and
8. Signed by an authorized official in each place a signature is needed (copies must be signed but need not bear an original signature.)

### **3.5.1 Exceptions**

Applicants are highly encouraged, in lieu of including exceptions in their Applications, to address all issues that might be advanced by way of exception or assumptions by submitting questions or requests for clarification pursuant to **Section 3.4.3 Questions and Section 3.4.4 Clarification Request Made by Respondent**.

Any exceptions to the requirements, terms, conditions, or certifications in the RFA or attachments, addendums, or revisions to the RFA or General Provisions, sought by the Applicant must be specifically detailed in writing by the Applicant on **Exhibit C, Exceptions** in this proposal and submitted to HHSC for consideration. HHSC will accept or reject each proposed exception. HHSC will not consider exceptions submitted separately from the Applicant's proposal or at a later date.

No exception, nor any other term, condition, or provision in an Application that differs, varies from, or contradicts this RFA, will be considered to be part of any Grant Agreement resulting from this RFA unless expressly made a part of the Grant Agreement in writing by the System Agency.

## **3.6 SOLICITATION RESPONSE SUBMISSION AND DELIVERY**

### **3.6.1 Deadline**

Solicitation Responses must be received at the address in **Section 3.6.3** and be time-stamped by HHSC no later than the Submission Deadline of the Solicitation at date and time specified in **Section 3.1**.

### **3.6.2 Labeling**

Solicitation Responses submitted via USB by mail or hand delivery shall be placed in a sealed box and clearly labeled as follows:

SOLICITATION NO.: HHS0010240  
SOLICITATION NAME: Workplace Violence Against Nurses  
Prevention Program  
SOLICITATION RESPONSE DEADLINE: November 29, 2021 by 10:30AM  
PURCHASER NAME: Amy Pearson, CTCD  
RESPONDENT'S NAME: \_\_\_\_\_

HHS will not be held responsible for any Solicitation Response that is mishandled prior to receipt by HHS. HHS will not be responsible for any technical issues that result in late delivery, inappropriately identified documents, or other submission error that may lead to disqualification (including substantive or administrative) or nonreceipt of the Respondent's application.

### 3.6.3 Delivery for Individual Submission Options

Respondent must correctly deliver Solicitation Responses by one of the methods below. Solicitation Responses submitted by any other method (e.g., facsimile, telephone, email) will NOT be considered.

**Submission Option #1:** Respondent shall submit the following through the Online Bid Room utilizing the procedures in **Exhibit F, HHS Online Bid Room:**

1. One file named "Original Proposal" that contains the Respondent's entire proposal in searchable portable document format (PDF).
2. In accordance with **Section 8.1.3**, one file named "Public Information Copy" that contains the Respondent's entire proposal in searchable PDF, if applicable.

**Submission Option #2:** Respondent shall submit responsive applications via USB on two USB drives – One (1) labeled "Original" and One (1) labeled "Copy"- to the correct mailing address that is dependent upon mailing method identified in this section:

1. Each USB must contain one file named "Original Proposal" that contains the Respondent's entire proposal in searchable portable document format (PDF).
2. In accordance with **Section 8.1.3**, if applicable, one additional file named "Public Information Copy" that contains the Respondent's entire proposal in searchable PDF.

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U.S. Postal Service	Overnight/Express Mail or Hand Delivery
HHSC Procurement and Contracting Services (PCS) Bid Room Attn: AMY PEARSON P.O. Box 149166 Austin, TX 78714-9166	HHSC Procurement and Contracting Services (PCS) Bid Room Attn: AMY PEARSON 1100 West 49 <sup>th</sup> Street; Mail Code 2020 Building S Austin, TX 78756

**All Solicitation Applications become the property of HHSC after submission and will not be returned to Applicant.** It is the Applicant’s responsibility to appropriately mark and deliver the Solicitation Application to HHSC by the specified date. A U.S. Postal Service (USPS) postmark; a mail receipt with the date of mailing, stamped by the USPS; a dated shipping label, invoice of receipt from a commercial carrier; or, any other documentation in lieu of the on-site time stamp by submission deadline may not be considered an eligible application under this Solicitation.

#### 3.6.4 Alterations, Modifications, and Withdrawals

Prior to the Solicitation submission deadline, a Respondent may: (1) withdraw its Solicitation Response by submitting a written request to the Sole Point of Contact identified in **Section 3.4.1**; or (2) modify its Solicitation Response by submitting a written amendment to the Sole Point of Contact identified in **Section 3.4.1**. The System Agency may request Solicitation Response Modifications at any time.

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## **ARTICLE IV. SOLICITATION RESPONSE EVALUATION AND AWARD PROCESS**

### **4.1 GENERALLY**

A three-step selection process will be used:

1. Eligibility screening;
2. Evaluation based upon specific selection criteria; and
3. Final Selection based upon State priorities.

### **4.2 ELIGIBILITY SCREENING**

Applications will be reviewed for eligibility qualifications and completeness. All complete applications meeting the eligibility qualifications will move to the Evaluation stage.

### **4.3 EVALUATION**

Applications will be evaluated and scored using **Exhibit E, Evaluation Tool**.

#### **4.3.1 Specific Evaluation Criteria**

Grant applications shall be evaluated based upon:

1. Demonstrated Need (25%)
2. Innovation (35%)
3. Demonstrated Ability (20%); and
4. Cost Effectiveness (20%)

### **4.4 FINAL SELECTION**

DSHS intends on making multiple awards. After initial screening for eligibility, application completeness, and initial scoring of the elements listed above in **Section 4.3**, a selection committee will look at all eligible applicants to determine which proposals should be awarded in order to most effectively accomplish state priorities and reduce violence toward nurses in the workplace.

DSHS will make all final funding decisions based on eligibility, geographic distribution across the state, state priorities, reasonableness, availability of funding, cost-effectiveness, and other priorities including funding Priority Applicants in **Section 2.4**.

### **4.5 NEGOTIATION AND AWARD**

The specific dollar amount awarded to each selected Applicant will depend upon the merit and scope of the Application and the recommendation of the Selection Committee. Not all Applicants who are deemed eligible to receive funds are assured of receiving an award.

The negotiation phase will involve direct contact between the successful Applicant and HHSC representatives via phone and/or email. During negotiations, selected Applicants may expect:

1. An in-depth discussion of the submitted proposal and budget; and
2. Requests from HHSC for clarification or additional detail regarding submitted Application.

The final funding amount and the provisions of the contract will be determined at the sole discretion of HHSC staff.

HHSC may announce tentative or apparent grant recipients once the DSHS Deputy Commissioner or designee has given approval to initiate negotiation and execute contracts.

**Any exceptions to the requirements, terms, conditions, or certifications in the RFA or attachments, addendums, or revisions to the RFA or General Provisions, sought by the Applicant must be specifically detailed in writing by the Applicant on Exhibit C, Exceptions Form in this proposal and submitted to HHSC for consideration. HHSC will accept or reject each proposed exception. HHSC will not consider exceptions submitted separately from the Applicant's proposal or at a later date.**

HHSC will post to the [HHS Grants website](#) and may publicly announce a list of Applicants whose Applications are selected for final award. This posting does not constitute HHSC's agreement with all the terms of any Applicant's proposal and does not bind HHS to enter into a contract with any Applicant whose award is posted.

#### **4.5 QUESTIONS OR REQUESTS FOR CLARIFICATION BY THE SYSTEM AGENCY**

HHS reserves the right to ask questions or request clarification from any Respondent at any time during the application process.

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## ARTICLE V. NARRATIVE PROPOSAL

### 5.1 NARRATIVE PROPOSAL

Utilizing **Form C, Proposal Narrative**, provide a high-level overview of the Respondent's approach to meeting the RFA's requirements. The summary must demonstrate an understanding of the goals and objectives of the Grant.

#### 5.1.1 Project Scope and Description

Describe how Workplace Violence Against Nurses Prevention Program funds, if awarded, would reduce violence in your Health Care Facility by identifying existing issues of workplace violence in your facility and how your proposed program will effectively address these issues. Include a description of the overall approach, its relevance and effectiveness, as well as the population that will benefit from the implementation of this proposal.

#### 5.1.2 Innovation

Describe what makes your proposal innovative and how your approach is different from current practices. Include a description of what makes your proposal original or creative, or how you are advancing an existing approach to preventing violence against nurses. Address the potential for widespread applicability of your innovative approach.

#### 5.1.3 Project Goals

Specify the goals of your proposed project or plan. The goals should be linked to the project scope and description and should address how violence will be reduced and the types of violence that will be reduced.

#### 5.1.4 Implementation Methodology

Provide a detailed description of how the project will achieve the proposed goals. Outline a progression of related activities and strategies that will occur during the grant period, and use **Form D, Project Timeline** to provide greater detail.

#### 5.1.5 Project Evaluation

Describe how the project will demonstrate whether the proposed goals have been successfully achieved. The description should be linked to your project scope and description, project goals, and implementation methodology. The project evaluation should address the performance measures listed in **Form E, Performance Measures** and should include an explanation of baseline measures and any relevant information on the quality of the data or information used.

#### 5.1.6 Sustainability

Describe how your facility will continue the project or plan after the grant period ends.



### 5.1.7 Contextual Information

Provide the items on page 2 of **Form C, Program Narrative** as of the Health Care Facility's most recently completed fiscal year. Include the beginning and ending date of your facilities most recently completed fiscal year, as well as the facility size and staff size on both the beginning and ending date of the most recently completed fiscal year.

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## **ARTICLE VI. REQUIRED RESPONDENT INFORMATION**

### **6.1 ADMINISTRATIVE ENTITY INFORMATION**

Respondent must provide satisfactory evidence of its ability to manage and coordinate the types of activities described in this Solicitation. As a part of the Solicitation Response requested in **Article III**, Respondent must provide the information requested in Sections 6.1 through 6.4 using **Exhibit D, Entity Information and Contract and Litigation History**.

### **6.2 LITIGATION AND CONTRACT HISTORY**

Respondent must include in its Solicitation Response a complete disclosure of any alleged or significant contractual failures.

In addition, Respondent must disclose any civil or criminal litigation or investigation pending over the last five (5) years that involves Respondent or in which Respondent has been judged guilty or liable. Failure to comply with the terms of this provision may disqualify Respondent.

Solicitation Response may be rejected based upon Respondent's prior history with the State of Texas or with any other party that demonstrates, without limitation, unsatisfactory performance, adversarial or contentious demeanor, or significant failure(s) to meet contractual obligations.

### **6.3 MAJOR SUBCONTRACTOR INFORMATION**

Respondent must identify any major subcontractors whom Respondent intends to utilize in performing fifteen percent (15%) or more of any Contract. Respondent must indicate whether or not Respondent holds any financial interest in any major subcontractor. It may be required as a condition of award that an authorized officer or agent of each proposed major subcontractor sign a statement to the effect that the subcontractor has read, and will agree to abide by, Respondent's obligations under any contract awarded pursuant to this Solicitation.

### **6.4 CONFLICTS**

Respondent must certify that it does not have any personal or business interests that present a conflict of interest with respect to the RFA and any resulting contract. Additionally, if applicable, the respondent must disclose all potential conflicts of interest. The respondent must describe the measures it will take to ensure that there will be no actual conflict of interest and that its fairness, independence, and objectivity will be maintained. The System Agency will determine to what extent, if any, a potential conflict of interest can be mitigated and managed during the term of the contract. Failure to identify actual and potential conflicts of interest may result in disqualification of a Solicitation Response or termination of a contract.

Please include any activities of affiliated or parent organizations and individuals who may be assigned to this Contract, if any.

Additionally, pursuant to Section 2252.908 of the Texas Government Code, a successful respondent awarded a Contract with a value of \$1 million dollars or more or awarded a Contract that would require the successful respondent to register as a lobbyist under Texas Government Code Chapter 305 must submit a disclosure of interested parties to the state agency at the time the business entity submits the signed contract. Rules and filing instructions may be found on the Texas Ethics Commissions public website and additional instructions will be given by HHSC to successful respondents.

#### **6.5 NON-TRANSFER OF AWARDED CONTRACT**

Contract will be awarded based upon the information provided at the time of Proposal submission. Any changes to staff or services or location of services must be requested in writing in advance and approved by DSHS staff. Failure to get said approval could result in the termination of contract and or rejection of reimbursement for those services and staff by the System Agency. Transfer of Grants to entities other than the awarded facility is not allowed.

#### **6.6 GRANT APPLICATION DISCLOSURE**

In an effort to maximize state resources and reduce duplication of effort, HHS, at its discretion, may require the Respondent to disclose information regarding the application for or award of state, federal, and/or local grant funding by the Respondent or Community Collaborative member organization within the past two year to stimulate the development, evaluation, and adoption of innovative solutions to reduce workplace violence against nurses.

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## **6.7 AFFIRMATIONS, CERTIFICATIONS, AND EXHIBITS**

Respondent must complete and return all of the following affirmations, assurances, certifications, and exhibits.

1. Exhibit A, HHS Solicitation Affirmations;
2. Exhibit C, Exceptions Form, if applicable;
3. Exhibit D, Entity Information, Conflicts, and Contract and Litigation History; and
4. Exhibit H, HHS System Indirect Cost Rate Questionnaire

A complete list of exhibits is included as Article X.

## **6.8 OTHER REPORTS**

### **6.8.1 Financial Capacity**

All Respondents must supply evidence of financial capacity sufficient to demonstrate reasonable stability and solvency appropriate to the requirements of this RFA.

### **6.8.2 Financial Statements and Financial Solvency**

1. Respondent must submit electronically in a word searchable .PDF format an annual report, which must include:
  - a. Last three (3) years of Audited Financial Statements, including all supplements, management discussion and analysis, and actuarial opinions.
  - b. If applicable, last three (3) years of consolidated statements for any holding companies or affiliates
  - c. A full disclosure of any events, liabilities, or contingent liabilities that could affect Respondent's financial ability to perform this Contract.

At a minimum, such financial statements must include:

- i. Balance sheet,
  - ii. Income Statement,
  - iii. Statement of Changes in Financial Position,
  - iv. Statement of Cash Flows, and
  - v. Capital Expenditures.
2. If the Respondent is a corporation that is required to report to the Securities and Exchange Commission (SEC), Respondent must submit its three (3) most recent SEC Form 10K, Annual Reports, pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934. Financial materials must be submitted electronically in a word searchable .PDF format.

3. If Audited Financial Statements are not available, Respondent must submit unaudited financial information and any other information the Respondent believes meets the requirements of this section. See **Section 6.7.3, Alternate Report**. If the submitted documents do not provide adequate assurance of financial stability or solvency, HHSC reserves the right to request additional information or to disqualify the Respondent.
4. Substantial Ownership or Wholly Owned by another Corporate Entity. If the Respondent is either substantially or wholly owned by another corporate (or legal) entity, the Respondent must include the information required in this Section 6.6.2 for each such entity, including the most recent detailed financial report for each such entity.
5. If HHS determines that an entity does not have sufficient financial resources to guarantee the Respondent's performance, HHS may require the Respondent to obtain another acceptable financial instrument or resource from such entity, or to obtain an acceptable guarantee from another entity with sufficient financial resources to guarantee performance.

### **6.8.3 Alternate Report**

If Respondent(s) is unable to provide the annual report specified above, Respondent(s) may, at the discretion of HHS, provide the following alternate report:

1. Last three (3) years un-audited financial statements, including all supplements, management discussion and analysis, and actuarial opinions.;
2. An un-audited financial statement of the most recent quarter of operation; and
3. A full disclosure of any events, liabilities, or contingent liabilities that could affect Respondent's financial ability to perform this Contract.

At a minimum, such financial statements must include:

- a. Balance sheet,
- b. Income Statement,
- c. Statement of Changes in Financial Position,
- d. Statement of Cash Flows, and
- e. Capital Expenditures.

### **6.9 HUB**

If a Successful Respondent chooses to contract for goods and services using the funding awarded in this grant, HHS encourages the Respondent to use HUBs to provide those goods and services where possible.

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## ARTICLE VII. EXPENDITURE PROPOSAL

### 7.1 EXPENDITURE PROPOSAL

Attached **Form F, Budget Narrative** and **Form G, Budget Template** of this RFA includes the template for submitting the Expenditure Proposal. Respondents must complete these forms and place in a separate, sealed package, clearly marked with the respondent's name, the RFA number, and the RFA submission date.

Respondents must base their Expenditure Proposal on the Scope of Work described in **Article II**. This section should include any business, economic, legal, programmatic, or practical assumptions that underlie the Expenditure Proposal. HHS reserves the right to accept or reject any assumptions. All assumptions not expressly identified and incorporated into the contract resulting from this RFA are deemed rejected by HHS.

Respondents must demonstrate that project costs outlined in the Expenditure Proposal are reasonable, allowable, allocable, and developed in accordance with applicable state and federal grant requirements.

Respondent must utilize the HHS template provided and identify costs to be requested from HHS and costs to be matched. Costs must be broken out to a degree that is sufficient to determine if costs are reasonable, allowable, and necessary for the successful performance of the project.

Costs will be reviewed for compliance with TxGMS and federal grant guidance found in 2 CFR Part 200, with effective given to whichever provision imposes the more stringent requirement in the event of a conflict.

Costs included in the Expenditure Proposal will be entered into budget tables and supported by narrative descriptions describing the need for the requested cost and a calculation demonstrating how the cost was arrived at.

If applicable, matching funds must also be identified in the expenditure proposal, including both anticipated matching funds and funds being certified in the proposal. Matching funds may be provided through local philanthropic, private, or city or county funds, pooled or braided funds from collaborative partner organizations, donated resources, or in-kind contributions committed specifically for the proposed project. State or federal funds may not be used as match.

As described in **Section 2.2.1**, requests for an advance payment must be justified in **Form F, Budget Narrative** and identified in **Form G, Budget Template**.

### **7.1.1. Indirect Cost Rate**

Applicants must have an approved indirect cost rate (ICR), request an indirect cost rate, or request the de minimis to recover any indirect costs. All Applicants are required to complete and submit **Exhibit H, HHS System Indirect Cost Rate Questionnaire**, together with required supporting documentation. The questionnaire initiates the acknowledgment or approval of an ICR for use with the System Agency cost-reimbursable contracts. Entities declining the use of indirect cost cannot recover indirect costs on any System Agency award or use unrecovered indirect costs as match.

HHS typically accepts the following approved ICRs:

- A. Federally Approved Indirect Cost Rate Agreement
- B. State of Texas Approved Indirect Cost Rate

The System Agency, at its discretion, may request additional information to support any approved ICR agreement.

If the Applicant does not have an approved ICR agreement, the Applicant may be eligible for the ten percent (10%) de minimis rate or request to negotiate an ICR with HHS.

For Applicants requesting to negotiate an ICR with HHS, the ICR Proposal Package will be provided by the HHS Federal Funds Indirect Cost Rate Group to successful Grantees. The ICR Proposal Package must be completed and returned to the HHS Federal Funds Indirect Cost Rate Group no later than three (3) months after Contract execution.

The HHS Federal Funds Indirect Cost Rate group will contact applicable Grantees after Grant Agreement execution to initiate and complete the ICR process. Grantees should respond within thirty (30) business days or the request will be cancelled, and indirect costs may be disallowed.

Once HHS acknowledges an existing rate, or approves an ICR, the Grantee will receive one of the three indirect cost approval letters: ICR Acknowledgement Letter, ICR Acknowledgement Letter – Ten Percent De Minimis, or the ICR Agreement Letter.

If an Indirect Cost Rate Letter is required but it is not issued at the time of Grant Agreement execution, the Grant Agreement will be amended to include the Indirect Cost Rate Letter after the ICR Letter is issued.

Approval or acceptance of an ICR will not result in an increase in the amount awarded or affect the agreed-upon service or performance levels throughout the life of the award. Grantee performance levels may not be impacted due to the election of indirect cost use. Use of indirect cost category is intended to correctly categorize direct and indirect costs.

### **7.1.2. Personnel Cost**

All staff costs associated with the proposal must directly benefit the operation and implementation of the project. Reimbursement of these cost will require supporting documentation of time spent on the project.

### **7.1.3. Capital Expenditures**

The use of Grant funds to make capital improvements to the facility in which the project will be located, or its surroundings, is expressly prohibited.

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## ARTICLE VIII. GENERAL TERMS AND CONDITIONS

### 8.1 GENERAL CONDITIONS

#### 8.1.1 Costs Incurred

Respondents understand that issuance of this Solicitation in no way constitutes a commitment by any System Agency to award a contract or to pay any costs incurred by a Respondent in the preparation of a response to this Solicitation. The System Agency is not liable for any costs incurred by a Respondent prior to issuance of or entering into a formal agreement, contract, or purchase order. Costs of developing Solicitation Responses, preparing for or participating in oral presentations and site visits, or any other similar expenses incurred by a Respondent are entirely the responsibility of the Respondent, and will not be reimbursed in any manner by the State of Texas.

#### 8.1.2 Contract Responsibility

The System agency will look solely to Respondent for the performance of all contractual obligations that may result from an award based on this Solicitation. Respondent shall not be relieved of its obligations for any nonperformance by its contractors.

#### 8.1.3 Public Information Act - Respondent Requirements Regarding Disclosure

Proposals and contracts are subject to the Texas Public Information Act (PIA), Texas Government Code Chapter 552, and may be disclosed to the public upon request. Other legal authority also requires System Agency to post contracts and proposals on its public website and to provide such information to the Legislative Budget Board for posting on its public website.

Under the PIA, certain information is protected from public release. If Respondent asserts that information provided in its Solicitation Response is exempt from disclosure under the PIA, Respondent must:

1. Mark Original Proposal:
  - a. Mark the Original Proposal, on the top of the front page, the words “CONTAINS CONFIDENTIAL INFORMATION” in large, bold, capitalized letters (the size of, or equivalent to, 12-point Times New Roman font or larger); and
  - b. Identify, adjacent to each portion of the Solicitation Response that Respondent claims is exempt from public disclosure, the claimed exemption from disclosure (NOTE: no redactions are to be made in the Original Proposal);
2. Certify in Original Proposal (Attach **Exhibit A, HHS Solicitation Affirmations** to this Solicitation):

- i. Certify, in the designated section of the Affirmations and Solicitation Acceptance, Respondent's confidential information assertion and the filing of its Public Information Act Copy; and
3. Submit Public Information Act Copy of Proposal:

Submit a separate "Public Information Act Copy" of the Original Proposal (in addition to the original and all copies otherwise required under the provisions of this Solicitation). The Public Information Act Copy must meet the following requirements:

- a. The copy must be clearly marked as "Public Information Act Copy" on the front page in large, bold, capitalized letters (the size of, or equivalent to, 12-point Times New Roman font or larger);
- b. Each portion Respondent claims is exempt from public disclosure must be redacted (blacked out); and
- c. Respondent must identify, adjacent to each redaction, the claimed exemption from disclosure. Each identification provided as required in Subsection (c) of this section must be identical to those set forth in the Original Proposal as required in Subsection (a)(2), above. The only difference in required markings and information between the Original Proposal and the "Public Information Act Copy" of the proposal will be redactions - which can only be included in the "Public Information Act Copy." There must be no redactions in the Original Proposal.

**By submitting a response to this Solicitation, Respondent agrees that, if Respondent does not mark the Original Proposal, provide the required certification in the HHS Solicitation Affirmations, and submit the Public Information Act Copy, Respondent's proposal will be considered to be public information that may be released to the public in any manner including, but not limited to, in accordance with the Public Information Act, posted on the System Agency's public website, and posted on the Legislative Budget Board's public website.**

**If any or all Respondents submit partial, but not complete, information suggesting inclusion of confidential information and failure to comply with the requirements set forth in this section, System Agency, in its sole discretion and in any solicitation, reserves the right to (1) disqualify all Respondents that fail to fully comply with the requirements set forth in this section, or (2) to offer all Respondents that fail to fully comply with the requirements set forth in this section additional time to comply.**

Respondent should not submit a Public Information Act Copy indicating that the entire proposal is exempt from disclosure. Merely making a blanket claim that the entire proposal is protected from disclosure because it contains any amount of confidential, proprietary, trade secret, or privileged information is not acceptable, and may make the entire proposal subject to release under the PIA.

Proposals should not be marked or asserted as copyrighted material. If Respondent asserts a copyright to any portion of its proposal, by submitting a proposal, Respondent agrees to

reproduction and posting on public websites by the State of Texas, including the System Agency and all other state agencies, without cost or liability.

The System Agency will strictly adhere to the requirements of the PIA regarding the disclosure of public information. As a result, by participating in this solicitation process, Respondent acknowledges that all information, documentation, and other materials submitted in the proposal in response to this Solicitation may be subject to public disclosure under the PIA. The System Agency does not have authority to agree that any information submitted will not be subject to disclosure. Disclosure is governed by the PIA and by rulings of the Office of the Texas Attorney General. Respondents are advised to consult with their legal counsel concerning disclosure issues resulting from this process and to take precautions to safeguard trade secrets and proprietary or otherwise confidential information. The System Agency assumes no obligation or responsibility relating to the disclosure or nondisclosure of information submitted by Respondents.

For more information concerning the types of information that may be withheld under the PIA or questions about the PIA, please refer to the Public Information Act Handbook published by the Office of the Texas Attorney General or contact the attorney general's Open Government Hotline at (512) 478-OPEN (6736) or toll-free at (877) 673-6839 (877-OPEN TEX). To access the Public Information Act Handbook, please visit the attorney general's website at <https://www.texasattorneygeneral.gov/>.

#### **8.1.4 News Releases**

Prior to final award a respondent may not issue a press release or provide any information for public consumption regarding its participation in the procurement. Requests should be directed to the HHSC Point of Contact Identified in **Article III**.

#### **8.1.5 Additional Information**

By submitting a proposal, the Respondent grants HHS the right to obtain information from any lawful source regarding the respondent's and its directors', officers', and employees': (1) past business history, practices, and conduct; (2) ability to supply the goods and services; and (3) ability to comply with contract requirements. By submitting a proposal, a respondent generally releases from liability and waives all claims against any party providing HHSC information about the respondent. HHS may take such information into consideration in evaluating proposals.

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## **ARTICLE IX. SUBMISSION CHECKLIST**

This checklist is provided for Respondent's convenience only and identifies documents that must be submitted to be considered responsive. Any Solicitation Response received without these requisite documents may be deemed nonresponsive and may not be considered for contract award.

### **Original Solicitation Response Package**

The Solicitation Package must include the Solicitation Response in one of the approved submission methods identified in **Section 3.6**.

**a. Administrative Information**

- 1. Form A: Face Page \_\_\_\_\_
- 2. Form B: Nonprofit or For-Profit Entity (if applicable) \_\_\_\_\_
- 3. Form B-1: Governmental Entity (if applicable) \_\_\_\_\_

**b. Narrative Proposal Forms**

- 1. Form C: Proposal Narrative \_\_\_\_\_
- 2. Form D: Timeline \_\_\_\_\_
- 3. Form E: Performance Measures \_\_\_\_\_

**c. Expenditure Proposal**

- 1. Form F: Budget Narrative \_\_\_\_\_
- 2. Form G: Budget Template \_\_\_\_\_

**d. Applicable Exhibits (Section 6.7)**

- 1. Exhibit A: HHS Solicitation Affirmations \_\_\_\_\_
- 2. Exhibit C: Exceptions, if applicable \_\_\_\_\_
- 3. Exhibit D: Entity Information, Conflicts, Contract and Litigation History \_\_\_\_\_
- 4. Exhibit H: HHS System Indirect Cost Rate Questionnaire \_\_\_\_\_

## **ARTICLE X. LIST OF EXHIBITS AND FORMS**

Exhibit A	HHS Solicitation Affirmations
Exhibit B	HHSC Uniform Terms and Conditions - Grant
Exhibit C	Exceptions
Exhibit D	Entity Information, Conflicts, and Contract and Litigation History
Exhibit E	Evaluation Tool
Exhibit F	HHS Online Bid Room
Exhibit G	HHS Additional Provisions – Grant Funding - Version 1.0
Exhibit H	HHS System Indirect Cost Rate Questionnaire
Form A	Face Page
Form B	Nonprofit or For-Profit Entity
Form B-1	Governmental Entity
Form C	Proposal Narrative
Form D	Project Timeline
Form E	Performance Measures and Outcomes
Form F	Budget Narrative
Form G	Budget Template