

**DETERMINATION AND FINDINGS
FOR
SOLE SOURCE PROCUREMENT**

Agency: Department of Health (DOH)
Caption: HIV/AIDS Research Partnership.
Requisition No.: TBD
Contractor: George Washington University (GWU).

FINDINGS

1. AUTHORITY

D.C. Official Code §2-354.04 and Title 27 DCMR §§1705

2. MINIMUM NEED

The District of Columbia Department of Health (DOH) is seeking the continued services of the Contractor to provide collaboration and expansion of the HIV/AIDS Research Partnership.

The period of performance will be one year from the date of award.

3. FAIR AND REASONABLE PRICE

The estimated fair and reasonable price is \$904,105.00.

4. FACTS THAT JUSTIFY A SOLE SOURCE PROCUREMENT:

The Contractor is the sole collaborator with DOH on the following multi-year research initiatives to expand the study of human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) under the HIV/AIDS Research Partnership.

- a. DC Partnership for AIDS Progress (DCPFAP): A collaborative research initiative between National Institutes of Health and DOH designed to decrease the rate of new HIV infections in the city, improve the health of district residents living with HIV infection, and strengthen the city's response to the HIV/AIDS epidemic. The partnership is being co-led by the National Institute of Allergy and Infectious Diseases (NIAID), part of NIH, George Washington University DOH. The project is currently in year two of a \$26 million dollar multi-year grant. The four pillars involve three subcontractors and 19 clinical and non-clinical provider organizations. The Contractor has unique capacity and technical expertise to continue as role of secretariat and technical advisor.
- b. As the only Center for AIDS Research (CFAR) in the District, the Contractor is directly funded by the National Institutes of Health (NIH) for an evaluation of the Enhanced Comprehensive HIV Prevention Planning (ECHPP) and Implementation for Metropolitan

Statistical Areas (MSA) project. ECHPP is a program for MSAs most affected by the HIV epidemic in order to reduce HIV risk and incidence in those areas. Nationally, 12 CFARs, including the Contractor, have been funded to assist in developing the best available evidence for expansion of HIV prevention portfolio and tailored by the jurisdiction with intensive guidance from Department of Health and Human Services and the Centers for Disease Control and Prevention (CDC). This current project is a multi-year evaluation with a structured national protocol involving 12 cities.

- c. HIV Prevention Trials Network: The HIV Prevention Trials Network (HPTN) is a worldwide collaborative clinical trials network that develops and tests the safety and efficacy of primarily non-vaccine interventions designed to prevent the transmission of HIV. The Contractor as the Districts only CFAR, is currently collaborating with the Department of Health on three HPTN studies; HPTN 061, Young MSM of Color, HPTN 064, African American Women, HPTN 065 Assessing the feasibility of Test and Treat in DC. These multi-year, multi-site studies must be conducted by appropriate researchers and technical staff at a CFAR or associated school of public health (ASPH) with epidemiology/biostatistician capacity. Currently, HPTN studies are in year two of a multi-year data collection, analysis and dissemination protocol.
- d. National HIV Behavioral Surveillance (NHBS): Special cooperative agreement awarded by CDC to selected metropolitan areas and states for the assessment of prevalence and trends in risk behaviors, including sexual and drug-use risk, HIV testing behaviors, and exposure to, use of, and success of prevention services. The Contractor's staff has attended six CDC sponsored mandatory trainings to receive the appropriate approvals from CDC to participate in the study. NHBS is a 22 city multi-site protocol with a start up time of six months. Currently, the Contractor has completed the first two parts of the MSM-3, 2011 study cycle and is scheduled to begin part three on August 1, 2011. NHBS must be approved by multiple IRBs and the contractors must have experience with specific data collection, sampling methods and analysis.

Changing vendors in the middle of complex, multi-year research initiatives would cause unmet deliverables on several federal grants, cooperative agreements and contracts; loss of federal and cooperative agreement and contract funding to the District and loss of funding to directly funded providers and clients currently participating in active research and evaluation protocols.

5. CERTIFICATION BY AGENCY HEAD AND CONTRACTING OFFICER:

I hereby certify that the above findings are true, correct and complete.

Date

Dr. Mohammad N. Akhter
Director, Department of Health

6. CERTIFICATION BY CONTRACTING OFFICER:

I have reviewed the above findings and certify that they are sufficient to justify the use of the sole source method of procurement under the cited authority. I certify that the sole source notice of Intent to Award a Sole Source Contract was posted on the OCP website and no valid responses were received regarding the posting. I recommend that the Chief Procurement Officer approve the use of the sole source procurement method for this proposed contract.

Date

Drakus Wiggins
Contracting Officer

DETERMINATION

Based on the above findings and in accordance with the cited authority, I hereby determine that it is not feasible or practical to invoke the competitive bidding process under Section 404 of the District of Columbia Procurement Practices Reform Act (PPRA), D.C. Law 18-371; D.C. Official Code § 2-354.04. Accordingly, I determine that the District is justified in using the sole source method of procurement.

Date

James D. Staton, Jr., Chief Procurement Officer
Director, Office of Contracting and Procurement