



*Delaware Health
And Social Services*

DIVISION OF MANAGEMENT SERVICES

PROCUREMENT

DATE: May 9, 2011

HSS -11-054

Gambling Prevention Across the Lifespan and Treatment Services for
Adult Residents of Delaware
for

Division of Substance Abuse and Mental Health

Date Due: June 15, 2011
By 11:00 AM Local Time

ADDENDUM # 3
Questions and Answers from Pre-bid Meeting

PLEASE NOTE:
THE ATTACHED SHEETS HEREBY BECOME A PART
OF THE ABOVE MENTIONED RFP.

Bruce Krug
Procurement Administrator

Kim Harvey
Kim Harvey
Division of Substance Abuse
And Mental Health

**Questions from Gambling RFP Pre-Bid Meeting
May 3, 2011**

- Are start up costs taken out of the total amount available?

We will review the line-item start up budget to determine whether or not the item is a one time cost or if it will be an annual recurring cost – some items will be considered start up and will not be included in the annual allocation amount. Others will be considered “operating costs” and will be considered as part of the annual operating budget.

- Is this one program from a contractual basis?

If both components are awarded to the same vendor, it will be combined into one contract.

- Question about components 1 & 2—When you say administrative cost savings for doing both components, would A and B exceed C?

If both components are awarded to the same vendor, we would expect there to be some cost savings in the administrative costs of operating the program. These costs could include anything not involved in performing direct client services.

- On p.45, Personnel Detail sheet, should it read FY12?

Yes, a corrected version is being distributed via email

- How should staff name be listed on the Personnel Detail Sheet?

If the applicant knows which specific staff will be assigned to the program, the employee name and title should be listed.

If it is a position that will need to be filled, it should be listed as “Vacant” and the position title should be listed.

- What elements go into administrative costs?

For assistance in how to classify costs, please refer to the Proposal Budget Guidelines beginning on page 47 of the RFP. These guidelines outline DSAMH’s expectation of how program costs are to be classified. The classification depends primarily on the applicant’s organizational structure.

DSAMH’s expectation of “minimizing administrative costs” is best defined as having the majority of the funding being allocated towards direct client services and not on office staff, as an example. We realize that administrative functions

need to be accomplished but we are requesting that they be accomplished in the most cost-effective manner.

- If you are going for one program component or the other can the advertising and media costs be budgeted within treatment services the way it is written for component A or do you collaborate closely with the successful applicant for A to provide B?

As discussed during the pre-bid, if the two program components are awarded to separate providers, there is an expectation that the successful applicant who receives the advertising and media component (Public Information and Prevention) will include the information regarding the successful organization running the treatment program component (Early Intervention and Treatment). Advertisement, brochure printing, etc are allowable in the line-item budget for both program components. Again, it is DSAMH's expectation to do this in the most cost effective and collaborative manner.

- Are start up costs within the budgeted amount or additional? How should that be accounted for in the budget?
The revised budget format will be utilized to clearly identify any start up item. DSAMH will review and determine if the item will be funded with start up funds or be considered part of the annual operating budget. We will fund the contracts accordingly.
- Can you expound about evidence based practices because in the gambling field there is not a lot out there?
We recognize this. We expect applicants to be comprehensively reviewing (and citing) the addictions literature are referencing any best practices and/or evidence based programs for the prevention (Public Information and Prevention) and treatment (Early Intervention and Treatment) components.
- Can it be a one time educational piece or does it need to be ongoing?
We prefer the gambling awareness and prevention educational components in the schools to be part of a curricula and ongoing.
- Are you currently working with an agency providing the educational materials for gambling?
Currently, The Gambling Council is contractually responsible to DSAMH for these activities.
- Under media on p. 12 it states regular consultation with a stakeholders media committee. Is it established, do you have one in mind, or would the agency set this up?
We would expect the successful applicant to set up a stakeholder's media committee that meets regularly and advises the successful applicant.