



*Delaware Health
And Social Services*

DIVISION OF MANAGEMENT SERVICES

PROCUREMENT

DATE: March 13, 2012

HSS 12 017

**DIABETES COMMUNITY SCREENINGS, EDUCATION AND
REFERRAL PROJECT**

FOR

DIVISION OF PUBLIC HEALTH

Date Due: APRIL 19, 2012
11:00 AM

ADDENDUM # 1

Please Note:

THE ATTACHED SHEETS HEREBY BECOME PART OF THE
ABOVE MENTIONED BID.

Responses to questions addressed at the pre-bid meeting on March
13, 2012 are attached.

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REQUEST FOR PROPOSAL NO. HSS 12 017
DIABETES COMMUNITY SCREENINGS, EDUCATION AND REFERRAL PROJECT
PRE-BID MEETING MARCH 13, 2012
QUESTIONS AND ANSWERS

QUESTIONS SENT VIA EMAIL PRIOR TO PRE-BID MEETING

1. Page 7, Section I.A. - Screenings will be implemented at the community level (e.g. health fairs, community events, pharmacies, places of employment and worship, senior centers, medical clinics and community centers). The contractor must develop methods for impacting high-risk population.

Question: Regarding screenings at community level, do they mean this is where the spec will be drawn? Who does the draw?

Answer: There are several methods that can be utilized in a community setting (e.g. A1C disposable, blood monitor and/or analyzer). The contractor will draw the blood (finger prick) and/or administer an A1C test.

2. Contractor must develop methods for impacting high-risk population? Develop what methods, for what purpose?

Answer: The contractor will determine the best method on ways to reach the highest risk populations (Hispanic, African and Asian Americans and older adults) in Delaware who are at greatest risk for developing diabetes.

3. Page 8, Section I.A. - Provide random sampling of blood sugar readings of people with diabetes through the use of disposable A1C (quarterly blood sugar reading) machines.

Question: Who provides the disposable A1c machines?

Answer: The contractor will provide the A1C disposables. These are used determine level of compliance on those with diabetes who attend community the screening.

4. Page 9, Section II.A1.1. - Conduct Commission-approved screening (including random A1C), education and referral activities that are primarily, but not exclusively, targeted to high risk populations.

Question: What are the specifics that the contractor has to do related to education and referral program?

Answer: That methodology needs to be provided and determined by the contractor as part of the RFP process. Each screening provides a teachable moment at the time the results are provided to the participant. In particular, those referred to their provider.

5. Page 10, Section II.A1.4 - To the extent that media is used to advertise activities carried out under this project, the contractor can use locally produced media when and if appropriate, to tailor the campaign to the Delaware audience. At the same time, the project must achieve high penetration within the targeted at-risk populations. All media used under this project must complement the diabetes media campaign that the Diabetes Prevention and Control Program will be conducting during the same timeframe.

Question: Is the contractor required to advertise on behalf of the program?

Answer: The contractor is representing the funder, so all marketing must acknowledge/ recognize Public Health, the Diabetes Prevention and Control Program and the Delaware Health Fund. The media campaign can include bulletins, posters, notices and other sources at the community level.

6. Page 10, Section II.A1.7. - Provide an end-year evaluation of the penetration and effectiveness of the project, with interim quarterly reporting as required.

Question: Does the contractor provide year end evaluation and interim quarterly reports?

Answer: Yes a comprehensive yearend report is required. In addition, monthly invoices and quarterly reports are required as well.

7. Page 10, Section II.A1.8 - The screening, education and referral events and activities must be geographically equitable in distribution.

Question: Who is the owner of the education and referral events and activities?

Answer: Delaware Division of Public Health

8. The messages communicated under this project must be culturally, age and otherwise appropriate to increase acceptance and increase the likelihood they will be acted upon.

Question: Who creates the message?

Answer: The contractor, but approved by Delaware Division of Public Health.

9. Page 11, Section II.A1.13 - Apply methods for education among those being screened on the importance of **A1C, Blood Pressure, lipid control and smoking cessation**

Question: Who applies the methods for education?

Answer: The contractor is required to provide the education component.

10. Page 11, Section II.A2. - The contractor will market, schedule and staff community diabetes screening, education and referral events, record demographic information, provide referrals and follow up of referred individuals and analyze and report on specific interventions that were initiated as a result of a referral, including new diagnosis of diabetes.

Question: The contractor will be responsible for A.2?

Answer: Yes

11. Page 11, Section II.A3. - The Diabetes screening, education and referral program will contain the following components:

- Diabetes screening and education events for the general public.
- Diabetes screening events for high risk groups.
- Follow up and reporting on all program participants.
- Target high risk communities for screenings
- Marketing and public relations campaign to promote screening awareness
- Refer identified high risk people who are screened to the Diabetes Self-Management Program

Question: The contractor will be responsible for A.3?

Answer: Yes

12. Page 11, Section II.A4. - The contractor will develop network of health professionals that staff the screening events. This network will be provided an opportunity to meet for an educational session and be provided with updated information on ADA standards of care, the specifics of the screening project and an overview of existing resources that are available to health care practitioners and patients.

Page 11, Section II.A5. - The contractor will identify and provide a list with this RFP for appropriate sites for screening events. In addition, contractor will respond to requests for screenings that are received from the Delaware Helpline and may be requested by the Diabetes Prevention and Control Program.

Question: The contractor will be responsible for A.4 and A.5?

Answer: Yes

QUESTIONS ASKED DAY OF PRE-BID MEETING

13. Do we need to provide letters of support?

Answer: No

14. Does DPH currently have a PSA or pamphlets to use for media?

Answer: The advertising you will do is more marketing the screenings, i.e.: church bulletins, posters, community sites, barber shops, etc. Not a media TV campaign.

15. Does the state provide the A1c machines/tests?

Answer: The contractor provides the A1c tests and all supplies needed

16. Is the blood screening to be statewide?

Answer: Yes this is to be statewide by population proportion to reach the high risk community. Example: 25% Sussex county, 25% Kent county, 50% New Castle county.

17. Will you provide predetermined reporting? Required to do web based reporting?

Answer: We will provide reporting forms. No, there is no web based reporting

18. How long has the blood screening project been in place?

Answer: 9 to 10 years

19. Will multiple vendors be awarded for the contract?

Answer: Our preference would be to have one bidder provide all the services requested. However, if a single bidder does not submit a proposal that is deemed acceptable for all the services requested, the bid could be split among two or more bidders based on their proposed work plan and ability to provide the services requested.