



*Delaware Health
And Social Services*

DIVISION OF MANAGEMENT SERVICES

PROCUREMENT

DATE: August 6, 2013

HSS 13 034

SOCIAL MARKETING CAMPAIGNS IN SUPPORT OF
THE DELAWARE CANCER CONSORTIUM
AND THE DIVISION OF PUBLIC HEALTH'S CHRONIC DISEASE BUREAU

FOR

DIVISION OF PUBLIC HEALTH

Date Due: September 23, 2013
11:30AM

ADDENDUM # 1

Please Note:

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

Responses to questions discussed at the pre-bid meeting on August 6,
2013 are attached.

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Social Marketing Campaigns in Support of the Delaware Cancer Consortium and
the Division of Public Health's Chronic Disease Bureau

Questions & Answers

RFP: HSS 13 034

August 6, 2013

DHSS Herman M. Holloway Sr. Campus, Procurement Branch, Main
Administration Building, First Floor Conference Room #198, 1901 N DuPont
Hwy, New Castle, DE 19720

1. How much has been allocated for the contract?

\$250,000 has been allocated for the first six months of the contract.

2. Are you working with a contractor or is this new work?

Yes, we have been working with a contractor.

3. Can you tell us about the contract and who else has held the contract?

Aloysius, Butler and Clark is the current contractor. No one else has held the contract.

4. Has the budget changed over the course of the contracts?

Yes the budget varies based on the availability of funds.

5. The scope of work was not definitive as far as the expectations. It was very general. Is there any guidance?

Bidders should utilize the following resources to help form their bid:

- Delaware cancer Incidence and mortality report:
<http://dhss.delaware.gov/dhss/dph/dpc/cancer.html>
- Delaware Cancer Consortium's 5 year plan: attached (titled All Committees Blue Book)
- Delaware Cancer Consortium Website: www.delawarecancerconsortium.org

6. Is there a media schedule available?

We can make a media schedule from a campaign available. (attached titled DDPH Breast and Cervical Cancer Media Plan SAMPLE)

7. Would the past media schedule contain information on the budget for past fiscal year?

No.

8. The RFP asked for a plan for 5 years. Would we assume funding at the same level?

\$500,000 is currently allocated for this year. Funding is subject to change.

9. Can we have information on your current plan?

The Delaware Cancer Consortium's 5 year plan is attached (titled All Committees Blue Book)

10. Have you seen wide fluctuation in funding?

Yes.

11. Can you give us a range of funding?

The contract amounts over the last five years have ranged from \$423,300.00 to \$1,420,513.29.

12. Will you email responses?

No, the responses will be posted to the RFP website by August 26, 2013.

13. Are there grants? The program receives money from state grants or there are other grants?

The program does not receive state grants. The program currently receives grant funding from the Center for Disease Control for Colorectal Cancer, Breast and Cervical Cancer, Screening for Life, Comprehensive Cancer Control and Prevention and Chronic Diseases.

14. Is the 500,000 the total?

\$500,000 is currently allocated for marketing activities for Fiscal Year 2014 (July 1, 2013-June 30, 2014).

15. Has there been any testing? Is there somewhere we can find that or information on the success.

The program will make a report available. (titled ProstateFocusGroupReport9_08)

16. How often have you reposted the bidding?

The request for proposal is reposted every 5 years.

17. Is it unusual for the awarded vendor to be given a contract for 1 year with the possibility of renewal for 4 years?

No.

18. Is the State receptive to out of state bidders?

Yes. The request for proposal process is designed to be open and competitive, and advantages are not given to anyone.

19. References from State agencies? Do you give priority to people who have worked with other state agencies?

No. The request for proposal process is designed to be open and competitive, and advantages are not given to anyone.

20. Letters of support?

Anything that you think supports your proposal. However, Bidders are advised not pursue letters of support from the Division of Public Health.

21. The budget page- can someone review that?

That is generic template that can be changed, updated and manipulated as you see fit. Itemize as much of your budget as you can.

22. Is the state is interested in the cost of what personnel expense is or an hourly rate preferred?

The bidder should itemize costs the way that they see fit. If you think providing hourly rates will help your proposal than you should include that, but if you feel a more general rate will strengthen your proposal include that.

23. Can you provide your budget documents for the last three years?

You would have to put in a request under the Freedom of Information Act.

24. Can we have results tracking information? We would like to know what is being done and what is working.

The program can make a report from a campaign available (titled DDPHCA Quarterly Report Jan-Mar 2012)

25. Does the funding come in, does it have to go against a certain project, is there a percentage of the budget?

The funds from the various grants have to be tied back to the goals and objectives of the grant.

26. Is the state funding more of the umbrella?

Some of the state funds are for the Delaware Cancer Consortium's activities, and the other state funds are allocated for cancer screening and early detection activities.

27. For prostate cancer guidelines will you take the CDC's stance?

The program recommends that men talk to their doctor about prostate cancer screening. In light of the United States Preventive Services Task Force recommendation against prostate-specific antigen (PSA)-based screening for men that do not have symptoms Delaware's Comprehensive Cancer Control Program has not been promoting prostate cancer screening as heavily as they did in the past.

28. Over the past 10 years there are usually national materials? Have existing materials been used?

Yes, we have used CDC produced materials when deemed appropriate.

29. The request for proposal references campaigns in different languages. Is that English and Spanish?

Yes the program has run campaigns, and printed materials in English and Spanish.

30. Will the affordable care act have an impact on the campaigns?

The affordable care act may change the income guidelines for both the Screening for Life and the Delaware Cancer Treatment Program. Both programs require that applicants be deemed ineligible for Medicaid, and meet the income guidelines. Currently Medicaid is for individuals at or below the federal poverty level; however it will change to up to 138%. When that happens we anticipate that the income guidelines for the programs will change.

Screening for Life: Currently 101%-250% of FPL; Anticipated change: 139%-250% federal poverty level

Delaware Cancer Treatment Program: Currently 101%-650% of the FPL; Anticipated change: 139%-650% FPL

31. When print materials have been used is there a printing number? Is there a printing requirement? I think we need a common ground as far as deliverables. Is there a number we can give out?

No. Print quantities vary from project to project and based on the availability of funds. The program is looking for the bidders' recommendation on what activities should be carried out over the next five years in order to reach the goals and objectives in the Request for Proposal.

32. Will anyone outside of the Division of Public Health be involved in the evaluation and reviewing of the bids?

The review panel has not been selected. This RFP will be reviewed by an evaluation team composed of representatives of the Division of Public Health, Delaware Health and Social Services, and others as may be deemed appropriate by the Department.

33. Does the program work with other programs were it would be beneficial if the contracts were with the same contractor?

No.

34. Is this the only RFP that goes out for cancer?

This is the only media/communications request for proposal for the cancer program.

35. Do you have page restraints on the RFP?

No.

36. Would you advise against putting links to websites in proposals?

Bidders may include links if they feel they add to their proposal, but should keep in mind that reviewers will be handed a paper copy of the proposal to review.

37. Are there things working well that you would like to continue?

The Center for Disease Control has placed an emphasis on evidence based approaches to promoting and increase cancer screening and early detection rates.

38. Can you talk about what you think is your primary target audience?

The priority populations are spelled out in the request for proposal. The priority population is different cancers. The Cancer Incidence and mortality report is an excellent resource for Cancer rates broken out by census tract level.

39. Regarding subcontracts, do they need to be disclosed?

For the purpose of the request for proposal process you can state that you intend to use subcontractors if you are unsure of whom you would use. If you know which subcontractor you will utilize you should include that information in your proposal.

40. Is there anything about women and minority owned businesses?

Yes in Appendix H of the request for proposal.

41. Is there any preference?

No. The request for proposal process is designed to be open and competitive without giving an advantage to anyone.

42. In terms of it being competitive I know that they usually make available what is currently being spent?

Information on spending can be found at

- mymarketplace.delaware.gov
- <http://checkbook.delaware.gov/>

If the information that the bidder is looking for is not available online than they can make a request for the information through the freedom of information act.

43. Is there a charge for making a freedom of information act request? What is the charge?

The first several pages are free, but after that there is a fee.

44. What is the timing for Freedom of Information Act requests?

Timing can vary depending on the workload of the person working on the request. You can request a timeframe at the time you make the request.

45. Is the printing currently done by the state?

No the vendor currently prints the materials.

46. Is there a specific budget allotted for each of the outcomes and strategies under the scope of services?

No, the budget allotted for a particular strategy is based on what is proposed.

47. Can the State narrow down more specifically which outcomes and strategies will be utilized for the priority audiences listed?

The desired outcomes are listed on page 8 and 9 in section C. The bidders should propose the strategies that they think would be the most effective avenue to reach each of the populations.