



*Delaware Health
And Social Services*

DIVISION OF MANAGEMENT SERVICES

PROCUREMENT

DATE: January 7, 2014

HSS-13-057

RAPE PREVENTION EDUCATION SERVICES

FOR

DIVISION OF PUBLIC HEALTH

Date Due: February 7, 2014
11:00AM

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 January 7,
2014 are attached.

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Rape Prevention Education Services

Questions & Answers

RFP: HSS 13 057

January 7, 2014

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

Q1. Budget related questions:

Q1a. Will proposals have budgets in the \$10-25K range, over 25, over 50, over 100? I heard the RPE funds were recently recalculated and had increased for the smaller states, but I have no idea what kind of dollars have even historically been granted. Can you let me know the maximum project funding award and the total budget for funding?

A1a. The funding for this project is coming solely from the Rape Prevention and Education Grant (RPEG). This is a grant funded by the Center for Disease Control and Prevention (CDC) office. There have been several recent changes surrounding this grant to include the formula in which the funds are allocated to states. In the past it was strictly a population based allocation. They have changed that to include a base amount of \$150K. The grant with this new calculation has yet to be awarded. It has been significantly delayed due to the government shut down in the fall of 2013. Because we do not know how much money the federal government will grant Delaware we cannot establish any parameters for this RFP at this time. We do not anticipate establishing a minimum bid. A maximum amount will be dependent on the number of bid submissions and the amount of funding received.

Q1b. Can a vendor apply for only a portion of the available funds/work?

A1b. Yes.

Q1c. Are you seeking a 12 month budget for purposes of this RFP?

A1c. Yes, but it would be smart to look at this from a longer period also, there is the possibility of contract renewal for up to 4 additional years.

Q1d. How much did Contact Lifeline get in their contract?

A1d. Contact Lifeline was the primary vendor for the Rape Prevention and Education Services for the state of Delaware for several years primarily because the former RFP included a requirement for a crisis helpline. This requirement has been separated out from the current RFP. The RPEG still provides funding for this service but will be covered under a separate contract. Therefore the amounts provided to Contact Lifeline are not relevant to this RFP.

Q1e. When will funding be known?

A1e. We anticipate receiving notification of status of our grant by January 15, 2014.

Q2. What is the contract or program period, April to March? April to June?

A2. The contract period will depend on when the CDC awards the funding and what timeframe they assign to it. The last award was extended. As a consequence the new grant award may be for less than 12 months to put the grant back on cycle. Regardless, proposals should be submitted for a full 12 month period.

Q3. Does proposal have to encompass whole state? Or could it be just Wilmington?

A3. Proposals should consider statewide planning even if the vendor can only support a smaller geographic location. Bidders need to outline what their focus area is (geographic, population based, gender, age, etc.) and define how services will be rendered accordingly. DPH expects all vendors to be able to collaborate with a larger state-wide prevention plan.

Q4. Will you consider proposals that already include multiple partners or subcontractors? Are you okay with others doing the work up front to submit a collaborative statewide proposal so that the prevention strategies are comprehensive and part of a larger evaluation plan.

A4. As indicated in question 3, vendors must be willing and able to work with multiple partners to incorporate a state-wide approach to prevention. As program director I will work to coordinate all agencies to ensure proper collaboration and evaluation. Subcontractors are allowed provided they are approved in advance by DPH. If subcontractors are known at the time of proposal submission, they should be included by name in the proposal.

Q5. How will collaboration work between selected vendors?

A5. DPH will establish a forum comprised of all parties involved in the state RPEG work. DPH will develop a method for communicating with all forum members, to include technical assistance site visits and participation in the evaluation component as needed.

Q6. Does the proposal have to cover all the project goals, have to answer all of them?

A6. No, not necessarily. Respond to the goals that your organization will be able to adequately address.

Q7. Will training be provided on the monthly usage report?

A7. DPH will work with the successful vendor(s) to be able to provide the information needed to satisfy this requirement. Additional technical assistance from the CDC may be available.

Q8. Do we need to include information on our evaluation process in our proposals?

A8. Yes.

Q9. Can we get a copy of the Sexual Assault Prevention State Plan?

A9. Yes.

Q10. What is the definition of Primary Prevention as it is used in this RFP? Explain difference between Primary and Universal.

A10. DPH views rape, sexual assault and domestic violence as a public health issue and is treating it as such. The RPEG's focus is on primary prevention at all tier levels as described below.

Level	Definition
Primary prevention	Methods to avoid occurrence of disease. Most population-based health promotion efforts are type.
Secondary prevention	Methods to diagnose and treat existent disease in early stages before it causes significant morbidity.
Tertiary prevention	Methods to reduce negative impact of existent disease by restoring function and reducing disease-related complications.
Tier	Definition
Universal prevention	Involves whole population (nation, local community, school, and district) and aims to prevent or delay occurrence. All individuals, without screening, are provided with information and skills needed to prevent the problem.
Selective prevention	Involves groups whose risk of developing problems of alcohol abuse or dependence is above average. Subgroups may be distinguished by traits such as age, gender, family history, or economic status. For example, drug campaigns in recreational settings.
Indicated prevention	Involves a screening process, and aims to identify individuals who exhibit early signs of risk and other problem behaviors. Identifiers may include falling grades among students, known problems or conduct disorders, alienation from parents, school, and positive peer groups etc.

Q11. My company offers several rape prevention training programs, some of which include physical hands on self defense for women. Is hands on self defense something that you would want included in the program or would you prefer one of our programs that focuses on awareness and prevention strategies?

A11. DPH is looking for primary prevention for all populations groups, not victim services. Hands on self defense training can fit into the category of primary prevention as long as appropriate risk behavior education is provided alongside the hands on training.

Q12. One of the programs that we are considering offering is a student led high school program. Would we be responsible for informing the high schools that the program is available to them or are they informed about it by Health and Human Services?

A12. There are 23 school districts within the state of Delaware who work independently from each other to a greater or lesser degree depending on the district. DPH will work with vendors to facilitate collaboration with the school districts. However, vendors should plan a comprehensive approach to perform the services to which they are applying.

Q13. Our high school prevention program involves training two adult leaders from each high school. Would we be responsible for locating and leasing a space for this training or would space be provided to us? Because of the layout of the state we believe we may require three training locations to accommodate the adult students.

A13. DPH will work with vendors to share resources as needed and available. However, it will be the vendor's responsibility to acquire these resources if not available at no cost through the state.

Q14. We understand, as set forth in the Introduction to the RFP (Paragraph I.A, page 7) that the RPE program is meant to engage community leaders and educators. Are the targeted media campaigns referred to (Paragraph I.A, page 8) therefore meant to be aimed at the referenced teachers, professors, little league coaches, faith-based leaders, PTAs and parents of convicted youth (I.B, pp. 9-10), or the children, teens and college students with whom these adults work? Alternatively, should the media campaign be tailored for each of these groups (children, teens, college students, community leaders/educators/parents)?

A14. The RPEG is a state-wide program. Consequently this RFP is directed at as broad an application as is fiscally possible and still able to provide measurable impact to the goals of the program. A proposal for a media campaign can include all or only some of the above population demographics. The proposal must define which population is targeted and why.

Q15. Is there a proposed budget set aside for the development and implementation of the media campaign?

A15. Yes, however the exact amounts are yet to be determined. See questions answered in first paragraph above.

Q16. Has the state conducted any similar targeted media campaigns?

A16. DPH is not currently conducting any similar targeted media campaigns in the area of rape prevention and education. Because the scope of the federal funding, objectives and measures have changed within the last year as well as the social parameters regarding sexual assault have changed, any historical campaign is unlikely to be pertinent to this RFP.

Q17. Is any other information available about the intended media mix? That is, for media campaigns, what are the media channels in which DHSS is interested (*i.e.*, transit, billboard, print, social media, digital online)?

A17. DPH would like to implement a media campaign that encompasses the at risk populations in an appropriately targeted manner. However, proposals should be prepared with the knowledge that the media campaign is only a portion of the overall scope of this RFP. Media proposals will be considered and fiscally balanced with other forms of state wide prevention education.

Q18. Kindly describe DHSS's interest in maximizing earned media coverage and public attention as part of a media campaign.

A18. DPH utilizes earned media coverage and public attention as a primary tool for educating the public and our community partners. This will occupy the bulk of any media campaign in response to the RPEG and this RFP due to competing fiscal priorities.

Q19. Does DHSS seek to focus on any particular sub-groups within the target population?

A19. Proposals can target any sub-group within the state of Delaware provided the reasoning behind the group selection is well defined and supported with data.

Q20. Is it the preference of DHSS to work with one prime contractor or, in light of the statement that "bidders may submit a proposal for one or more of the targeted areas" (Section II, p.

10), will it work with several contractors who are not together engaged in a prime contractor/sub-contractor relationship?

A20. It is the goal of this RFP to seek multiple bidders to ensure a broad statewide application of the RPEG. DPH expects all applicants to be willing to work with other vendors and agencies regardless of their status or formal relationship.

Q21. Related to Question 7, above, if a bidder submits a proposal to perform all of the tasks articulated in the entire Scope of Services, might DHSS award that bidder a contract covering only a portion of those tasks, and award another bidder one or more of the remaining tasks?

A21. Yes, if awarding bids to multiple vendors better serves the scope and goals of the RFP.

Q22. Page 17, Par. VIA: In lieu of CDs, may respondents submit USB flash drives in addition to the requested hard copy documents?

A22. No. CDs must be submitted as described in the RFP.

Q23. We understand that the successful bidder must obtain a Delaware Business License after award of the contract. Are there any prerequisites to obtaining this license with respect to the location in which the work is to be performed?

A23. No.

Q24. Can DHSS define sexual assault, rape and sexual violence for purposes of this RFP? That is, is DHSS interested in prevention of gender-based violence broadly (to include sexual violence, sexual assault, intimate partner violence and rape) or is the state interested in the prevention of the crime of rape?

A24. DHSS is very interested in the prevention of gender-based violence broadly (to include sexual violence, sexual assault, intimate partner violence and rape.) However, respondents to this RFP can narrow their scope as it applies to their particular abilities and expertise.

Q25. Can multiple bidders submit in partnership (p.10)? Or if DHSS selects more than one bidder for the RFP, how does the state envision those bidders working together or in tandem?

A25. As outlined in A5 above, DPH will facilitate appropriate communication between vendors and agencies.

Q26. Is there an existing curriculum on dating and sexual violence for high school students in grades 9-12? If so, can bidders have access to this curriculum (p. 9. Par. I.B.(b))?

A26. DPH does not have curriculum on dating and sexual violence for high school students in grades 9-12. A search of national organizations such as the National Sexual Violence Resource Center (NSVRC) could provide vendors with more information in this area. Additional information regarding the CDC funded RPEG can be found at <http://www.cdc.gov/violenceprevention/rpe/states.html>.