



*Delaware Health
And Social Services*

DIVISION OF MANAGEMENT SERVICES

PROCUREMENT

DATE: July 10, 2008

PSC #825

TOBACCO PREVENTION SOCIAL MARKETING

FOR

DIVISION OF PUBLIC HEALTH

Date Due: August 18, 2008
11:00 AM

ADDENDUM # 1

Please Note:

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

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Tobacco Prevention Social Marketing
RFP PSCO 825
Pre-Bid Meeting Questions and Answers

Q1: My company is registered in Pennsylvania. Are you looking for firms only located in Delaware?

A1: No, it is not a requirement of this RFP that a firm be located in Delaware.

Q2: I have never done any business with the state of Delaware. One of your requirements is that all firms list the contracts awarded by the state of Delaware. Is your organization looking for firms who have only done business with Delaware?

A2: No. We just want to know if you had any contracts with any State of Delaware agencies. It is not a requirement of this RFP that a firm has done business with the State of Delaware.

Q3: Given that media placement is a service which does not require liability insurance, is there still a requirement for liability insurance for this RFP?

A3: The requirement for liability insurance would be for the contract resulting from this RFP, not for the RFP itself.

Q4: Can we have copies of all media plans, including reach and frequency reports for the last two years?

A4: Copies of media plans for the last two years will be provided at the pre-bid meeting.

Q5: Can we have copies of any primary research conducted on the effectiveness of this program over the last two years?

A5: A resource list containing the location of research will be provided at the pre-bid meeting.

Q6: Who is are the incumbent(s)? How long have they had the business? Why is the option of splitting the creative from the tactical being considered?

A6: Aloysius, Butler, & Clark (AB&C) is the incumbent. They have been the vendors since 2000. The decision to make changes to the original RFP and have 2 categories was made by DPH administration.

Q7: In Category I- Social Marketing, Section F. States: Target audiences to be determined with input from DPH. Does this mean that we make assumptions of target audiences for media planning?

A7: Evaluation data will be used to determine target audiences. Much of that data is available from various sources on the resource list. The media plans will be developed after DPH meets with the selected vendor.

Q8: What public relations efforts have occurred during the campaigns? Can we have copies of any recent releases? Has the Equivalent Ad Value of PR been calculated and if so what has it delivered over the last two years?

A8: Press releases can be found on the DHSS website. Promotion of programs includes appearances at health fairs and public events, promotion of quitline by audio personalities on air. Equivalent Ad value of PR has not been calculated.

Q9 How has online advertising been used in these campaigns?

A9: We ran some banner ads for Delaware Quitnet and the quitline.

Q10: Can we get web statistics on number of page hits, time on site, etc?

A10: Delaware Quitnet received 13,880 hits in the first three quarters of FY08. Page hits for that time period was 292,261.

Q11: Has CDC creative material been used in any Delaware specific campaigns to date? If so which campaigns?

A11: Yes. We utilized materials for the CDC media resource center for our first quitline campaign. We also used materials for secondhand smoke and youth prevention.

Q12: Are there any statistics or other data points to measure effectiveness (or lack thereof) for the efforts to date?

A12: See the resource list for surveillance and data sources.

Q13: How has the media budget been apportioned among the various campaigns over the last two years?

A13: The media campaigns over the past two years have been approximately budgeted at the following:

Cessation: 31%
Secondhand Smoke: 19%
Youth: 21%
Merchant Education: 4%

Q14: Are there other states whose success rates are notable [not campaigns per se, but actual results? And, if so, to what is it attributed?

A14: Yes. There are several states that have been successful in their tobacco prevention efforts. See the CDC best practices document from the resource list.

Q15: Are there partners in this effort – that is, organizations that will be putting resources to this besides the state (e.g., Clean Air Council)?

A15: The contract with DPH includes funds from the Centers for Disease Control and Prevention (CDC) and the Delaware Health fund. The Delaware Health Funds include funds recommended by the Delaware Cancer Consortium. No Delaware general funds are included in the contract. Partners in the tobacco prevention and control include the IMPACT Delaware Tobacco Prevention Coalition, which has a state plan and the Delaware Cancer Consortium.

Q16: Are you currently working with a communications and marketing agency? If so, are you able to tell us which one and if they are participating in this bidding process?

A16: Yes, our current contract is with Aloysius, Butler, & Clark. It is their decision if they want to submit a bid.

Q17: What characteristics are you looking for in a new agency? What would make an agency standout for you and your team?

A17: We don't have any preconceived ideas on characteristics. We are looking for vendors who best address the items in the scope of services.

Q18: Is our primary goal to promote existing plans and programs for youth through adult, or create a new innovative program, or create an umbrella plan that ties all existing programs together?

A18: The primary goal is to promote services such as the quitline and de.quitnet, educate and inform the public on the dangers of secondhand smoke, prevent youth from starting to use tobacco or get them to quit if they do use tobacco, educate and inform youth and tobacco merchants about Delaware's youth access to tobacco laws, and to counter-market tobacco industry promotions. Proposals should include your ideas on how to accomplish this.

Q19: Is favorability in the selection process given to in-state vendors/in-state agencies over out-of state vendors/agencies?

A19: There is no preference for in-state vendors. We will review the submitted proposals and select the vendor that we feel will provide the best services.

Q20: The RFP states that the contractor may be monitored on-site on a regular basis by representatives from the Division of Public Health. Does this imply a requirement for a representative to be “on-site” (in Delaware) during the planning and implementation of the social marketing plan?

A20: As contract managers we are required to conduct a site visit to audit files and review procedures. A representative is not required to be on site during the planning and implementation process, your proposal should address the means of communication with DPH, for the social marketing planning and implementation process.

Q21: The new RFP places more emphasis on “Tobacco Prevention Social Marketing” versus “Tobacco Prevention Media Campaign Development,” in the last proposal. Can you define the intended strategic differences given the new wording?

A21: We felt that the term "media campaigns" implies that we are looking for just TV, radio, billboards and print ads. Social marketing is much more than just that as shown in the definition footnoted in section VII A., selection process (on page 18) of the RFP. We have been utilizing the social marketing concept for quite some time and this name change reflects that.

Q21a: Is this merely a different way of asking for the same approach, or does it represent a change in the strategy and forms of media you're looking for?

A21a: It's just a title change that better reflects what we have been doing and what we want to continue to do.

Q22: Do you have an online database of registered Minority and Women Business Enterprises in Delaware?

A22: The website for the Office of Minority and Women Business Enterprise is <http://omwbe.delaware.gov/>. I believe they have an online database.

Q23: In Category 1 of page eight of the proposal you list eight specific services (A-H) that the bidder must address; does DPH have a preferred breakdown of the percentage of the budget that should be allocated to each service?

A23: We have no preference on the budget breakdown for each category.

Q23a: Must bidders address all services in year one of the contract?

A23a: Yes.

Q24: On page nine of the RFP, bullet “F.”, notes that “Target audiences will be determined with input from DPH.” Since defined target audiences are important in developing responses to an RFP, will DPH be able to provide bidders target audience breakdowns over the next week or so?

A24: The resource list includes data sources and other information provided which will help agencies determine the needs of Delaware and develop their proposals. Once a contractor is selected DPH will work with them using that data and any new data to determine target audiences and messages. What is probably more important from a proposal standpoint is for vendors to tell us how they would collect data on target audiences to determine messages needed to reach the target audience.

Q25: Page 10, under Category II – Creative Services: Must all spec creative samples be posted in this section of the proposal, or can spec creative samples be displayed alongside campaigns developed in Category I of the proposal?

A25: The services provided under category II will not be known until after a vendor for category I is selected and new materials are approved. Bidders are not required to submit creative samples.

Q26: For year one of the contract, would you prefer to see a greater emphasis on youth prevention or adult cessation activities?

A26: Both are important to success of the program. Delawareans need to know how to access the cessation programs such as the quitline and de.quitnet so they can use the services to attempt to quit. It is important for youth to understand that they should not start to use tobacco products.

Q27: Do you have a set breakdown of preferred mediums or tactics, such as paid media advertising, earned media, grassroots media?

A27: We don't have a preference. We are looking for proposals to show what the agency feels would work best.

Q28: Does DPH have a preferred location for the placement of Appendix B and Appendix D in the completed proposals?

A28: They are to be in a tabulated response under "Forms" as outlined by Sandra Skelley.

Q29: If the prime bidder works with a key subcontractor on a majority of the project, should each submit three references in the proposal?

A29: If the bidder knows who the sub contractor(s) are going to be, they need to be included in the proposal and DPH reserves the right to approve / disprove the sub contractor.

Q29a: Does only the prime bidder need to hold a Delaware Business License, or do all subcontractors need to as well?

A29a: The sub contractor is held to the same requirements as the primary contractor, and will need a Delaware Business License.

Q30: Historically, what percentage of the budget has been spent on the actual placement of advertising? Does DE expect a similar percentage in the future?

A30: Over the past two years 52% of the media budget was spent on placement of advertising. We are not tied to a specific percent of the budget to be allocated to placement. In the past we have moved funds to and from placement lines as needed. This flexibility was important to us during the year to address changing needs as issues arose.

Q31: Can you please clarify the funding and period of performance? Page 4 indicates that the “funding covers the period from approximately November 1, 2008 through June 30, 2009” and that “there is a maximum of \$2,100,000 available for implementing tobacco prevention social marketing”. Page 10 indicates that the “contract term is 32 months with the possibility of renewal for up to 24 months contingent on funding and additional needs to be addressed”. Can bidders assume that the \$2,100,000 available for implementing tobacco prevention social marketing will be used in the 11/1/08 – 6/30/09 period and that additional funding may be added to cover the remaining 24 months of the initial contract term? Or is the \$2,100,000 expected to cover the initial 32 months?

A:31 The \$2,100,000 is to be used for the initial fiscal year of 2009. The State fiscal year runs from July 1st through June 30th. Since this new contract is anticipated to start on November 1, 2008 to June 30, 2009, there will be only nine months of funds on the first year of the contract. The contract term under this RFP is for 32 months. It will cover the remainder of FY09 and the full FY of 2010 and 2011. The contract term ends June 30, 2011. The funding available for the remaining 2 fiscal years of this contract can potentially change from fiscal year to fiscal year. So far the funding has been relatively consistent. The contract will have to be amended prior to July 1, 2009 to add the funds for FY10. The contract can be renewed for additional two years (24 months) for FY12 & 13. See page 10 of the RFP.

Q:32 Are the three letters of support referenced on page 7 the same as the three bidder references discussed on page 13?

A32: Yes.

Q32: Are the funds for creative and media buy or just creative and implementation?

A32: The funds under Category I are for media buy (placement), creative and implementation. Category II funds are to produce the creative materials developed under Category I.

Q33: If the funds are not for media buys, will your agency direct place the media purchase?

A33: The funds under Category I will include media buys. DPH will not buy media.

Q34: Do you have a preference for print or a broadcast campaign?

A34: We have no preference. Whatever media placement will work best for a particular campaign for a particular audience can be used.

Q35: What media outlets, if any, have covered your past initiatives? Do you have special arrangements, relationships etc. with any of the state media outlets?

A35: We don't have special relationships with any media outlets. Our current vendor used a wide variety of outlets depending on the campaign and target audience.

Q36: Will there be a spokesperson for the campaign from your agency? Are there any aversions to using public service announcements with national or local talent?

A36: We don't have a selected spokesperson from DPH. PSAs can be used with local or national talent.

Q37: Do you have any relationships that we can leverage to expand the reach of this campaign to community base organizations?

A37: DPH has relationships with a variety of partners. They include but are not limited to the IMPACT Delaware Tobacco Prevention Coalition, Delaware Cancer Consortium and other tobacco program contractors and their partners.

Q38: What are your typical payment terms? Are invoices paid on a 30, 45 or 60 day cycle?

A38: We ask that vendors submit their invoices for services rendered on a monthly basis. We process the invoices through our state fiscal system. Payment is normally made within 30 days. There are times such as the end year fiscal closeout and the beginning of a new fiscal year that the payment of invoices may not be made within 30 days.

Q39: After the meeting, if needed, will we be able to ask questions regarding the bid?

A39: No. All questions must be asked prior to or at the pre-bid meeting. Answers will be emailed or faxed by July 17th. The responses will also be posted on our website as an addendum to the RFP.
<http://www.dhss.delaware.gov/dhss/rfp/dhssrfp.htm>

Q40: If there is an incumbent, how would you describe the incumbent agency's performance?

A40: Very Good.

Q41: Is the incumbent permitted to participate?

A41: Yes.

Q42: What was the year-by-year budget for the incumbent agency?

A42: The following are the original contract amounts:

FY02	\$1,305,000	FY06	\$2,310,000
FY03	\$1,375,000	FY07	\$2,235,000
FY04	\$1,780,000	FY08	\$2,310,000
FY05	\$1,730,000		

Q43: Is there a historical archive of all the campaign advertising and marketing materials? Is there a way to get this?

A43: Yes, on the resource list, go to the Delaware Cancer Consortium web site and there will be campaigns listed there.

Q44: Please describe the TATU program further and the relationship between the DPH and the TATU program?

A44: TATU stands for Teens Against Tobacco Use, the American Lung Association currently administers our contract for youth prevention services that includes the TATU program. To find out more about the youth prevention services you can visit www.ysmoke.org web site.

Q45: How is the program performing against the goals outlined in the 2005 plan for a tobacco-free Delaware?

A45: Delaware is doing well and we are pleased to be able to say the smoking rates are the lowest ever. For adults since 2007, the adult smoking rate has dropped from 25% to 18.8% and the youth smoking rate has dropped to under 20%. This information is also contained in the resources in the resource list.

Q46: Where is the campaign over performing and underperforming?

A46: The contract is managed so that this does not occur. Campaigns are adjusted based on volume to the quitline, focus group evaluations, and the availability of funds.

Q47: Will a list of all bidder meeting attendees be provided?

A47: Yes. It was provided at the pre-bid meeting.

Q48: Can you talk about what is expected in the three letters of support and should they come from our bidder's reference or be in addition to them?

A48: They are the same three letters and we do not have any expectations as to the content of the letters.

Q49: If you want to bid on Category 1 and 2 but would be fine with being awarded only one Category of the business how should you express that? Do you turn in two proposals (one for both categories and one for only one category) or can you address that in your one proposal for both categories?

A49: How ever works best for you as long as we know what you want, and how you would coordinate with other vendors if you were not awarded the contract for both categories. What category you are bidding on, and the budget for the category, need to be clearly stated in your Proposal.

Q50: Can you clarify who your priority populations are? For example: young adults, Hispanic, pregnant women, African Americans etc.

A50: You can see in the data sources, on the resource list, that the statistics show for adults, the higher smoking rates are among young adults, lower socioeconomic status, and individuals with lower education levels. We also focus on minority populations and stopping all youth from initiation. There is no significant statistical difference between races and ethnicities in smoking rates for adults, for youth over all Caucasians smoke more. As we get more data we may decide to develop different messages.

Q51: Can you clarify the role of Category 2 more clearly? Is Category 2 just producing campaign materials developed by the Category 1 vendor?

A51: Yes, the Category II vendor produces the campaign material after it is approved by DPH. Once the Category I Vendor develops the campaign it will be sent to the DPH contract manager for review, then it will be sent to the Office of Health and Risk Communications for approval. Once it is approved, the contract manager will send it to the Category II vendor for production. When production is finalized the Category II vendor will send it back to the Category I vendor for placement.

Q52: For the communications vendors that have social marketing program and evaluation planners on staff, would we be expected/able to create social marketing/behavior change programs in collaboration with DPH staff?

A52: Yes, what ever data can be collected to show target audiences, second hand smoke exposure, and supporting data for campaign development would be beneficial and helpful in the approval process.

Q53: Is the 2.1 million for FY 09 only or is it for more than just FY09?

A53: The 2.1 million is for the remaining FY 09 fiscal year from November 1, 2008 through June 30th 2009. Sometimes funding changes and we add or we may need to take away funds. The recommendations from the CDC for the amount for each state is on the web site and the CDC recommends more for DE but this is what we have for now.

Q54: At the first contract bidders meeting it was mentioned that DPH did not want to split the contract, now that it is split how are you planning to manage it?

A54: DPH will have to manage how ever many contracts are awarded and each contractor is going to have to work together with the other contractors because the work will be handed off to one another.

Q55: Can you provide us with the amount of printing materials that have been printed over the past contract period?

A55: Information below was not available at the pre-bid meeting:

Cessation Campaign

“No Nagging” Handouts	30,000
“No Nagging” Handouts Spanish	13,000
Distract-A-Pack Kits	2,500
News Paper Inserts	384,000
Prescription Pads	600 pads, 60,000 pages
Quitline Posters	500
Voucher Cards	10,000
No Nagging Posters	100

ETS (secondhand smoke) Campaign

“Pledge” Brochures	75,000
Pledge News Paper inserts	385,000
CIAA Pocket Folder	250

Merchant Education

Merchant Packets	1,500
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Q56: Will the printing materials go through the state?

A56: No the printing will be done by the Category II vendor. The amount will be decided by the campaign that is developed by the Category I vendor.

Q57: Who are the partners that manage the Quitline and TATU and how would we interact?

A57: The Quitline vendor is the American Cancer Society out of Austin Texas, and TATU is part of the programs under the youth tobacco prevention contract with the American Lung Association. The Social Marketing contractors will assist in marketing the Quitline and its services. It does not necessarily develop brochures for these vendors but it does support or assist in other areas as needed. For example, the Youth contract has a web site, ysmoke.org that we add to the social marketing campaigns when targeting youth. Also, if our community contract which is currently held by the American Lung Association is having training for the Mini- Grantees on advertising or Social Marketing the Social Marketing vendor has assisted in the development of the training.

Q58: Can you clarify the needs in Category I and Category II and is Category II only \$300,000?

A58: Category I develops the campaign and the Creative. Category II develops the product and Category I does the placement. Yes, it is \$300,000. for Category II.

Q59: If Category II is predicated on Category I, then how do you bid on just Category II?

A59: I understand it is difficult...Response was not finished when Q60 was asked

Q60: I am at a loss, because here you have a perfect opportunity to do youth marketing, minority marketing, general cessation, and merchant campaign. Why didn't DPH put their brains together to split this contract to be more inclusive of the minority contractors and small business? There is just no way it can be done, it has to be done together.

A60: It is our intent that this RFP provide a comprehensive program focused not on splitting things up by certain types of vendors but finding the best resources to provide the services necessary to achieve the goals of the "Plan for a Tobacco-free Delaware". Our hope was this would bring more people together.

Q61: You address this as if it is already split in your mind do you have to have two vendors?

A61: No, you can have one proposal that addresses both categories; one thing to remember is that vendors are allowed to have sub-contractors and they can or may be agencies in this room.

Q62: There was a statement made that the primary contractor is responsible for the subcontractors, but the sub contractors have to meet the same responsibilities as the primary is there a difference legally?

A62: The primary contractor is responsible for the subcontractor and their performance, the subcontractor has to meet the same contractual requirements such as business license and insurance as the primary contractor does.

Q63: If I was going to partner with two other subcontractors would I want to outline who they are in the proposal and what their expertise would be?

A63: Yes that is a way to do it.

Q64: So, there could be a prime contractor for Category I and a subcontractor for category II?

A64: Yes it can be set up that way.

Q65: If a contractor has a different Minority business certification should they include that, and is the state going to award more points to a bidder with a minority business certification?

A65: Yes include the certification of Minority Business regardless of what type of certification. The state is not awarding any extra points to bidders for being a Women or Minority owned business. We are encouraging the use of different (diverse) vendors as prime contractors or subcontractors.

Q65A: Is there something in the RFP that the vendor would collect extra points if they were going to be a prime vendor and using a subcontractor?

A65A: No

Q66: Is the contractor responsible for providing content for ysmoke.org?

A66: No.

Q67: Should the budget cover the full 32 month period or just the 9 months?

A67: It should cover just the 9 months, November 1st through June 30th.

Q68: Are the evaluators subject to side confidentiality /agreements?

A68: That has not been decided but it is being considered.

Q69: Since the proposals are property of the state, if the state chooses a contractor but likes an idea in a different vendor's proposal can they use the other vendors idea with the new vendor?

A69: That has never happened that I am aware of. That's not, to say it hasn't happened. In other contracts. DPH is looking more for process, experience, and message evaluation rather than full campaign creative development in the proposals.

Q70: So, you are saying is you really can't come up with media buy in the proposal for Category II since the Category I vendor controls the creative. It's silly to put media buys in the proposal

A70: No, I didn't say it is silly. I know it is difficult but we are looking for creativity in proposals on how you will address this issue. For example how many TV or radio spots can you do for this amount of money.

Q71: Are there any materials we will have to create for the state such as an annual report?

A71 Nothing is planned at this time, but occasionally a directive comes down that requires a change in the original contract plans and at this time we make contract amendments or change focus to address the new needs. For example, we may have to print an update to the state tobacco plan.