

**2019 Health Communications Program, Hawai'i Tobacco Prevention and Control Trust Fund
Request for Proposal (RFP)
Frequently Asked Questions (FAQs)**

The following is a list of questions about the RFP received by staff of the Hawaii Community Foundation from potential applicants, and the responses provided. Content has been edited to remove identifying information. Where we receive the same question multiple times, we are only listing the question and response once. This list will be updated periodically as we receive new questions and responses.

Question	Response
[Note from HCF staff: After the Health Communications RFP was released, errors were discovered in Table 1.1 on Page 4. The initial version of the RFP has been replaced with a new, corrected version on September 25, 2019. Only Table 1.1 has been changed.]	-
How large is the youth council in terms of reach across all islands? What is the estimated # of youth participating?	The membership of the youth council fluctuates each year because of graduations and other changes, but averages in the range of 20 to 30 students. This leadership group usually has representation from the 4 largest islands (Hawai'i, Maui, O'ahu and Kaua'i), and sometimes Moloka'i and Lāna'i also are represented. The youth council and related youth education and advocacy activities have established broad networks in schools and community groups that can reach many more youth in all four counties.
Are there expectations on how to split the budget? In other words, can we allocate different budgets to each communications program (HTQL and ESD Prevention) - or is an even split of budget allocation preferred?	An even split of the budget is not preferred or required. Rather, applicants should allocate the total contract amount between the two communications programs based on their best judgment for cost-effective use of finite funds to achieve maximum impact, and explain the rationale for the allocation in the proposal.
Page 25 of the RFP, Appendix B-5 states \$1.2 million for the 18-month term of the contract. Should we assume the estimated contract is \$1.5 for a 12-month contract period as noted earlier in the RFP (page 3)?	Yes, the correct contract figures are \$1.5 million for 12 months. Our apologies for missing this error.
Is 808NoVape owned by the Hawai'i Dept of Health?	Yes. In accordance with the terms of the applicable contracts and State policy, all intellectual property interests in 808NoVape belong to the Department of Health.

<p>I was wondering if I would be able to view the last winning bid for the last Hawai'i Tobacco Quitline RFP.</p>	<p>We prefer not to provide copies of proposals for any of our programs, in part because they contain confidential or proprietary information. Please refer to the resources listed in the Health Communications RFP for information related to the Hawai'i Tobacco Quitline and the operations of quitlines generally.</p>
<p>With regard to past projects - Do you have a preference for how we should format past project examples? For example, would you prefer to see a case study/narrative description or a format similar to Table 3.1.1 on page 9 of the RFP?</p>	<p>We don't have a preference. The objective of asking for past projects is to give the proposal evaluators an accurate understanding of the applicant's relevant experience, expertise, and capacity to do the work and achieve the goals of the RFP for Hawai'i. You can use any format that would meet that objective clearly and concisely.</p>
<p>Does Department of Health or the Hawaii Tobacco Quitline already have a certification with LegitScript or other certifying organizations, or is the selected vendor expected to hold such compliance?</p>	<p>To our knowledge, neither the Department nor the Quitline have such a certification. At this point, it is undecided whether the selected vendor will be expected to hold such a certification. To be clear, the vendor selected from the Health Communications RFP will not be expected to provide Quitline services.</p>
<p>Is a refresh of the Hawaii Tobacco Quitline website (https://hawaiiquitline.org/) desired as part of the scope of this RFP?</p>	<p>At this point, it is undecided whether a refresh of the website is necessary. Any decision will be based on functional need and whether changing circumstances require a refresh in order to improve outcomes. If the selected vendor will be expected to do a refresh, it will be included in the contracted scope of work at the appropriate time during the term of the contract.</p>
<p>Since youth are a priority population for cessation, is it up to the contractor to decide if they can be reached through cessation marketing or youth marketing?</p>	<p>The underlying problem is that evidence-based cessation treatment methods for adults, particularly regarding the use of nicotine replacement therapies (NRTs) like patches, gum or lozenges, or the use of prescription medications like Chantix, are not approved for youth. The Hawai'i Tobacco Quitline does provide cessation counseling services to youth ages 13-17 without NRTs, and there are other resources available such as the Truth Initiative's This is Quitting program, but the science generally has not caught up with the increasing need for cessation services for youth. For these reasons, we expect that in the next statewide tobacco strategic plan, youth will be identified as a priority population for prevention, but not for cessation, in alignment with current guidance from the Centers for Disease Control and Prevention (CDC). Therefore, the focus of youth-targeted marketing in</p>

	<p>the RFP is prevention, while cessation marketing for the Quitline is focused on adult smokers. The focus may change during the extended term of the communications vendor contract if circumstances change, particularly with respect to evidence-based cessation methodologies for youth. Either way, the day-to-day decisions on marketing strategy under the vendor contract will be made by the Department of Health.</p>
<p>For the Stakeholder meetings that happen quarterly, is it expected that the contractor will be there in person?</p>	<p>Communication is always better face-to-face in coordination meetings such as these where there are multiple stakeholders and lengthy agendas, especially at the outset. Attendance at the meetings in person is preferable but not required. In most cases, remote participants should be able to participate by video link.</p>
<p>In Appendix B-4, the Percentage of Staff Allocations table, is there a preferred format for showing staff and percentages? Should there be a dollar equivalent? Can we add columns to indicate firm/subcontractor?</p>	<p>The form provided in Appendix B-4 is a suggested format to enable reviewers to see how the work will be staffed, the roles and responsibilities for each assigned staff person within each budget category, and the full-time equivalent workloads. The format is not required and can be adapted as needed to accurately describe how the contracted work will be staffed. A dollar equivalent is not necessary but can be included as an option. Yes, columns can be added to indicate firm/subcontractor, as that will help us understand roles and responsibilities to get the contracted work done.</p>