



Department of Health and Social Services
Finance and Management Services
Grants and Contracts Support Team
350 Main Street, Room 6
Juneau, Alaska 99801

RFIP #0615-063

**Improving Provider Communication Related to Chronic Disease
Prevention and Health Promotion Preventive Screening Plan**

Amendment #1

Amendment Issue Date: October 22, 2014

Please alter the following language to match the amendment.

IMPORTANT NOTE TO OFFERORS: Only the following items referenced in this amendment are to be changed. All other sections of the RFIP remain the same. This amendment serves to answer questions submitted by interested parties. A copy of the amendment is available on the State's Online Public Notice website.

- **Vendor questions have been answered as follows:**

1. Will DHSS provide contact information for providers?

ANSWER: DHSS will be able to provide a list of potential providers and addresses.

2. Page 10, Scope of Work states, "The contractor must work with the project director to develop a plan to recruit participants in the target audience of the focus group to ensure at least 8 and no more than 12 participants attend the focus group." Will DHSS provide a list of potential participants as a starting point for key informant interviews and focus group participant recruitment, or does that need to be developed by the contractor?

ANSWER: DHSS will be able to provide a list of potential providers and addresses.

3. Page 11, Deliverable 3 states, "All interviews must be recorded by audio and video (if possible), with approval of the interviewee, and provided to the project director within one week of the interview's completion." Will audio recordings be sufficient for the key informant interviews?

ANSWER: Audio recordings are sufficient for key informant interviews.

4. Page 11, Deliverable 4 states, "The contractor will recruit no fewer than eight and no more than 12 focus group participants for the focus group." Will the information gathered during a focus group be ineligible for inclusion in the final report if there are more than 12 attendees?

ANSWER: It is possible that the contractor will need to recruit more than 12 providers in order to achieve a minimum of 8 and a maximum of 12 providers at the focus group. DHSS plans to limit the number of focus group participants at 12, however.

5. The RFIP refers to materials that CDPHP is currently using in their social media campaign to increase preventive screenings, such as brochures, rack cards, and posters targeted to the general population, and a provider resource chart outlining the available materials. Are these materials available on the Internet, or how can we obtain copies of the materials?

ANSWER: Examples of these materials can be found at this website: <http://dhss.alaska.gov/dph/Chronic/Pages/SafeAndHealthyMe/screening/materials.aspx>

6. Can one of the letters of reference be from the Alaska Department of Health and Social Services?

ANSWER: Letters of reference can come from DHSS, but they cannot come from program staff who work for the Section of Chronic Disease Prevention and Health Promotion.

7. On page 8, the RFIP states that the key informant interviews will be conducted with twelve different private sector health care providers. On page 9, the RFIP states that each key informant interview will be of a unique health care provider currently in private practice. Please define "private sector health care providers" and "private practice," for the purpose of this RFIP.

ANSWER: These providers work at clinics that are not tribal clinics, community health centers or public health centers.

8. Are letters of reference required to be submitted or are references sufficient?

ANSWER: Provide letters of reference are required.

9. Are video recordings required for both the key informant interviews and the focus groups? On page 16, methodology, indicates that respondents must have a plan for video and audio recording of interviews and focus groups. Page 11, deliverables indicates that video recording is a preference, although interviews may be conducted telephonically. Generally, we find that video recording can inhibit honest responses from participants, especially during interviews. Given the limited budget, video recording of interviewees across the State may be prohibitively expensive. Please clarify where video is required, and when audio recording may suffice.

ANSWER: Audio recordings are sufficient for key informant interviews. DHSS would like an audio and video recording of the focus group.

10. When video recordings are needed, we utilize a professional subcontractor to provide the service. However, on page 5 of the RFIP it states that subcontracts are not allowed. Can the video recording (if required) of the focus group be subcontracted?

ANSWER: The RFIP does not allow subcontracts. DHSS does not expect professional quality video production; all that is required is a stationary camera that captures the focus group, comments shared and people speaking.

11. Please elaborate on the expectations for a screening guide that is referred to in the first paragraph of page 11 and again in the last paragraph of page 11.

ANSWER: A screening guide is used to establish questions that assist DHSS and the contractor in recruiting members of the target audience for the key informant interviews and focus group. The guide would ask questions of potential participants, such as if the provider is in private practice in Alaska or if the provider typically provides medical care to Alaskans ages 45 and older.

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