

Request for Information 1624-078



State of Alaska
Department of Health
Division of Public Health

Date Issued: May 2, 2024
Deadline: May 13, 2024, 2:30PM AKST

Partnership to Promote Student Physical Activity & Improve Health & Academics

Introduction:

The Department of Health, Division of Public Health (Physical Activity & Nutrition Unit), is requesting information from interested parties who can provide physical activity promotions and increased opportunities for Alaska children and youth to be more physically active. The service provider will 1) run at least two (2), three-month, school-based physical activity challenges annually; 2) address health equity by supporting low-cost, family-friendly physical activity events and small grants to reduce barriers to participation; and 3) conduct ongoing program management and program participation data collection, evaluation, and quality-improvement activities.

Background Information:

Physical activity is key to improving the health of the nation. One out of three Alaska children are overweight or obese and children today may be the first generation to live shorter, less healthy lives than their parents. Nationally, 300,000 premature deaths each year are associated with people being overweight or obese. The issue is costing hundreds of millions of dollars in medical costs in Alaska and billions across the nation.

Childhood obesity is a complex social issue. It will take a multitude of strategies and agencies working concurrently to impact childhood obesity rates. Increasing student physical activity is one way to prevent and reduce childhood obesity and improve health benefits beyond preventing obesity. Regular physical activity promotes growth and development in youth and has many benefits for physical, mental, and cognitive health. Physical activity is related to lower body fat, greater muscular strength, stronger bones, and improvements in cardiovascular and metabolic health, as well as improvements in mental health. Physical activity has immediate health benefits. It can reduce anxiety and blood pressure and improve quality of sleep and insulin sensitivity.

Scope of Work:

This partnership to promote student physical activity addresses two Healthy Alaskans 2030 health objectives. Physical activity promotion will (1) help increase the percentage of adolescents who meet the physical activity guidelines of 60 minutes every day, which will meet the Healthy Alaskans 2030 target of 22%, and will (2) help increase the percentage of students in grades K-8 who meet criteria for healthy weight, which will meet the Healthy Alaskans 2030 target of 66%.

The school-based physical activity challenge is a social support intervention in the school setting. The school coordinators who promote the challenge implement a variety of social supports to encourage students to participate. Coordinators provide a supportive classroom environment, help students develop a contract to complete a specified level of physical activity, provide regular reminders to students encouraging students to meet their physical activity goals, and develop a classroom culture that supports physical activity. The physical activity log forms provide a way for the students and the coordinator to monitor progress toward established goals. If physical activity goals are met, students are rewarded verbally and/or given a tangible prize. While the

social supports utilized vary by school and coordinator, even low levels of social support help increase the duration of time participants are physically active.

This partnership will implement several of the state-level activities by coordinating a school-based physical activity challenge and by hosting and supporting low-cost physical activity events for families and their children. Consideration for health equity (e.g. reaching Alaskan children who are at highest risk for being in an unhealthy weight range, those who do not meet physical activity guidelines and/or attend a Title I or remote Alaskan school) and children with special health care needs will be integrated and prioritized into all program work.

CDPHP Health Equity Values Statement

Health equity is a value of the Section of Chronic Disease Prevention and Health Promotion (CDPHP). To achieve optimal health for Alaskans, the section engages in and supports activities that promote health equity and respect for diversity.

Achieving health equity means addressing unjust health disparities through the modifiable social and economic conditions that policies can shape. These conditions include education, income, poverty, and housing, as well as access to safe places to play and be active and the availability of transportation, good schools, and nutritious food. Health equity is aligned with the acknowledgement and respect of diversity within a community.

To this end, we expect our Health Promotion Partner to incorporate this value into the work they do on behalf of CDPHP.

Definitions

Health Equity - When everyone has the opportunity to attain their full health potential, and no one is disadvantaged from achieving this potential because of their social position or other socially determined circumstance. These social circumstances are what have become known in public health as the social determinants of health.

Social Determinants of Health - "...life-enhancing resources, such as food supply, housing, economic and social relationships, transportation, education and health care, whose distribution across populations effectively determine length and quality of life." (World Health Organization)

Children and Youth with Special Health Care Needs - For children and youth, the term "special health care needs" is used more frequently in public health than "disability" and includes many children who experience functional limitations. Children with special health care needs have been defined as "those who have or are at increased risk for a chronic, physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally." Some children are born with a disabling condition (e.g. Down syndrome) or demonstrate conditions early in life (e.g. autism, bipolar disorder), and others acquire disabilities through injury (e.g., spinal cord injury).

Children with special health care needs may experience exclusion from full participation in their communities which may result in disability-related inequities in health behaviors and outcomes. In an effort to reduce disability-related inequities, the Physical Activity & Nutrition Program is integrating considerations to promote the explicit inclusion of children with special health care needs and prevent the inadvertent exclusion. The goal is to increase the number of children with special health care needs participating in the school-based physical activity challenge, and the low-cost physical activity events for families and their children.

Budget:

The State estimates between \$400,000 to \$450,000 dollars through completion for this five-year project.

Deliverables:

CDPHP's Health Promotion Partner would provide at a minimum the following:

- 1. Run at least two (2) three-month, school-based physical activity challenges each year by:**
 - A. Recruiting and supporting staff at schools to coordinate the challenge (targets as mutually agreed upon by the Health Promotion Partner and the State's Project Manager).
 - B. Providing incentives and/or school reimbursements for incentives for students who complete physical activity challenge logs.
 - C. Recognizing and rewarding schools, teachers, and/or administrators for participating in the challenge.
 - D. Promoting and supporting the challenge through multiple venues (e.g. social media, mailings, events).

- 2. Address health equity to remove barriers to participation in physical activity, sports, and recreation by:**
 - A. supporting and promoting low-cost, family-friendly physical activity events as mutually agreed upon by CDPHP's Health Promotion Partner and the State's Project Manager. Promotion will periodically include Olympians and related spokespeople to promote physical activity for children and youth.
 - B. promoting the challenges/events with explicit inclusion of children having a higher chance of being at an unhealthy weight (for example, Alaska Native children and youth in families with lower incomes or levels of completed education); those attending a Title 1 or remote schools off the road system; and children with special health care needs to support their unique needs and prevent inadvertent exclusion.
 - C. providing small grants to youth from families with income barriers to participate in physical activity, sports or recreation (such as equipment, fees, and transportation costs).
 - D. collaborate with agencies that service children and youth to address the systemic barriers and facilitators to physical activity.

- 3. Conduct ongoing program management and program participation data collection, evaluation, and quality-improvement activities:**
 - A. Meet with SOA Project Manager upon initial execution of potential contract to review scope of work. Meet with the SOA Project Manager at least monthly or as needed throughout the life of the contract to discuss the work in progress.
 - B. Conduct outreach to education partners/ participants in the challenge for ongoing quality improvement/ remove barriers to participation (topics including staff and student incentives, registration and reporting processes, communication channels).
 - C. Submit annual budget for review/approval within 30 days upon potential contract execution. Monitor the project budget.
 - D. Develop and produce progress reports and documents as negotiated in collaboration with the SOA Project Manager (example measures to include #s of participants by school district, region, Title I status or other priority outreach status, narrative summary of outreach efforts and feedback, etc.).
 - E. Report to the SOA Project Manager on a scheduled quarterly basis using format and procedures developed in collaboration with the Project Manager. Submit billings w/narrative reports on mutually agreed upon schedule.

Preferred Minimum Experience:

For potential CDPHP Health Promotion Partners to be considered responsive, respondents must meet the following minimum prior experience requirements. Please ensure start and end dates (month and year) are indicated, and that experience is detailed sufficiently to ensure verification of all aspects of minimums below.

1. A minimum of three (3) years of experience within the past five (5) years promoting, co-sponsoring, and facilitating statewide physical activity events and school-based physical activity challenges for children and youth.
2. A minimum of three (3) years of experience within the past five (5) years collecting, verifying, and reporting data related to student physical activity.
3. Have a proven record of reaching the following children and youth: those at the greatest risk of not meeting the physical activity recommendations of at least 60 minutes of daily physical activity; children having a higher chance of being at an unhealthy weight (for example, Alaska Native children and youth in families with lower incomes or levels of completed education); and those attending a Title 1 or remote schools off the road system.
4. A minimum of three (3) years of experience within the past five (5) years spent working with well-known athletes, Olympians and related spokespeople to promote physical activity for children and youth.

Response Information:

How to Participate

Interested CDPHP Health Promotion Partners who believe they can provide the services described above should indicate their interest by submitting an electronic response (.pdf format is preferable) with the following information:

- Company name
- Contact information (email) for the individual(s) who should be notified if DOH releases a solicitation.
- A summary that clearly describes your company's capabilities and experience related to providing the services described in the Scope of Work and Deliverables sections of this RFI.
- A summary that clearly describes how the applicant/firm meets or exceeds the *preferred minimum experience* shown above.
- A statement confirming that the company anticipates the project deliverables, as shown in the budget above, are reasonably within the estimated budget provided. Or, if not, why not?
- A summary of any concerns regarding the project as described. What potential obstacles should be anticipated?

Submission Instructions:

CDPHP Health Promotion Partner prospects must submit their response as a PDF file, sent via emailed attachment, by May 13, 2024, by 2:30PM, Alaska Standard Time. Response should be submitted to Annalisa Haynie at the email listed below:

Annalisa Haynie

Procurement Specialist

Alaska Department of Health

Annalisa.Haynie@alaska.gov

It is the responsibility of the interested party to follow up with the procurement specialist listed above to ensure your response was received prior to the time and date specified at the top of this RFI.

Important Notice:

This Request for Information does not constitute a formal solicitation. The purpose of the RFI is to determine if there are qualified offerors out there who would be interested in bidding on these services. The State will use this information to potentially develop a future solicitation.

The State of Alaska is not responsible for any costs associated with the preparation of responses. The issuance of the Request for Information does not obligate the state to purchase any goods or services, extend any rights to prospective vendors nor guarantee that the State of Alaska will proceed with a formal solicitation.