RFP #: 23-0904006-007- OPIOID ABUSE & MISUSE PREVENTION PUBLIC EDUCATION CAMPAIGN

Response to writer inquires

Combined Agencies Answer in Red

Questions are arranged by topic area

Local

1. Whether companies from Outside USA can apply for this? (like, from India or Canada)

We are open to all vendors as long as they meet the local requirements spelled out in sections 4.11, 6.1.4, and 6.1.4 in the RFP.

2. Whether we need to come over there for meetings?

Most meetings can be conducted virtually

We would expect our vendor to attend the yearly planning meeting in person. In addition, there might be events that we would like our vendor to attend.

3. Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada)

We are open to all vendors as long as they meet the local requirements spelled out in sections 4.11, 6.1.4, and 6.1.4 in the RFP.

4. Is there a preference for the selected vendor to be local to South Dakota?

We are open to all vendors as long as they meet the local requirements spelled out in sections 4.11, 6.1.4, and 6.1.4 in the RFP.

5. Is the submitting firm required to have a physical presence in South Dakota?

We are open to all vendors as long as they meet the local requirements spelled out in sections 4.11, 6.1.4, and 6.1.4 in the RFP.

Proposal Submission/layout

6. Can we submit the proposals via email?

A proposal may only be submitted via email. Please refer to section 1.5 of the RFP.

An electronic PDF version must be emailed to Rebecca.piroutek@state.sd.us

Please place the following in the subject line:

OPIOID ABUSE & MISUSE PREVENTION PUBLIC EDUCATION CAMPAIGN-RFP # 023-0904006-007.

- If the file is too large to send via email, please provide an alternative option through an FTP site or Drop Box with secured access. Please inform Rebecca Piroutek of this in an email with instructions on accessing.
- 7. Are new creative concepts part of the overall scope of work?

Yes, new creative concepts are encouraged. The vendor will work collaboratively with State staff on all creative development, including but not limited to the following: advertising concepts, messages, themes, slogans, design of advertising and publication layouts, production of videos from concept through storyboard to final production, copywriting for print, video, radio, television, social and digital media, a high-quality digital photo collection (South Dakota specific), design of promotional items, and web development.

Contracts and Functionality:

- 8. With 2 separate budgets does each department require/prefer separate account and creative personnel teams?
 - Each department will have their own contract with the vendor and will require separate budgets. The departments will work with the vendor's same creative personnel team.
- 9. With 2 separate departments, is there a joint internal committee how's role is to ensure SMART goal message and media are consistent, effective and efficient?
 - An assigned internal committee representing both departments will collaborate with the vendor to ensure all messaging is cohesive and upholds the strategic

plan's goals.

10. Please outline your approval process and timelines. Is it the same for both stakeholders? If not, how are they different?

Both agencies use the same approval process: once we have proof, we will respond back within ten business days, with either need for changes or approval. All materials require leadership approval. This will be handled by the contract point of contact.

11. Can you describe the relationship between DSS and DOH as it relates to this contract in more detail? In the RFP it states, "Each department will have its own contract and will have separate projects." can you give any context as to what campaigns/activities will fall under each department?

DSS will oversee behavioral health-related prevention and treatment topics. DOH will oversee public health-related topics. An assigned internal committee representing both departments will collaborate with the vendor to ensure all messaging is cohesive and upholds the strategic plan's goals.

12. Are you open to responses that address individual components or are you looking for one partner to manage all components?

We are looking for one vendor to manage all components of our Avoid Opioid campaign. We do allow vendors to outsource specific components such as video production as long the vendor handles the arrangements.

Goals/ Objectives:

- 13. Would this campaign build upon the current 4 primary objectives, or would the objectives potentially be updated based on research findings?
 - Build awareness
 - Promote treatment
 - Destigmatize
 - Promote safety

The state is supportive of evolving, refreshing, and building off current objectives so that these messages stay relevant and appropriate.

13. How will you measure success? Particularly as they pertain to the 4 primary objectives.

We do formal evaluations on activities that allow us to compare program success for a specific period. These evaluations are handled both internally and by a contracted evaluation team.

Social Media:

14. If deemed relevant, can TikTok be one of the social platforms used for advertising? Asking due to the governor's recent ban of the app on state devices.

No, at this time, TikTok cannot be used.

Are there social media reports that can be shared from the initial campaign?

Please see the example monthly report

15. What metrics are currently included in the monthly reports?

Please see the example monthly report

Can the state provide clarification on paid social versus managed social and if both are expectations of the chosen agency to handle and maintain?

The expectation is for the vendor to manage both paid and managed social media content within the established budget.

- 3.1.2.5.1 The Vendor will develop content, maintain, track, monitor, provide reports and implement strategies to increase the reach and engagement of the website and social media accounts. The Vendor will provide expertise in using appropriate digital communication strategies and Internet-based communication tools, including elements like longerform videos and native advertising. The AvoidOpioidSD campaign currently is on the following social media platforms:
 - Facebook
 - Snapchat
 - YouTube

16. 3.1.2.6.1 - Can the state elaborate on the current metrics being used on social media platforms to show website effectiveness?

We currently use a click-through rate/ swipe-up rate. We also look at the number of views on videos. Other metrics we look at are impression, reach, and frequency. We require this data monthly and yearly for grant reporting. We are open to other recommendations.

Research:

17. Was research conducted prior to launching the initial campaign in 2019? If so, can that be shared?

No, the initial campaign was based on the recommendations from the CDC and other national programs. Once the campaign launched, we started developing South Dakota-specific campaign objectives based on South Dakota-specific research. All the information can be found in the South Dakota Vulnerability Assessment. https://doh.sd.gov/statistics/VulnerabilityAssessment.aspx.

18. Research is part of the scope - was research conducted in 2019 prior to this campaign launch? If yes, will the findings be provided?

No, the initial campaign was based on the recommendations from the CDC and other national programs. Once the campaign launched, we started developing South Dakota-specific campaign objectives based on South Dakota-specific research. All the information can be found in the South Dakota Vulnerability Assessment. https://doh.sd.gov/statistics/VulnerabilityAssessment.aspx.

Campaign Materials:

19. "The vendor will be required to build on and use existing campaign resources and materials from the DOH/DSS." In general terms, what resources and materials does this refer to?

Please refer to the materials on this page: https://www.avoidopioidsd.com/take-action/print-materials/

20. Were there specific benchmarks outlined for the initial campaign, and if so, what were they?

The initial Campaign benchmarks were:

The CDC has developed and piloted campaign materials and has made them available for states to use. Campaign elements include: TV, radio, out of home, and social media content. To view the campaign materials visit: https://www.cdc.gov/rxawareness/resources/index.html. We expect that shortly after contract execution an initial campaign will be planned and placed by the Contractor using these materials.

- Develop a local brand to be used for tagging national campaign materials as well as for future South Dakotaspecific materials.
- Develop and launch a microsite for the campaign featuring South Dakota-specific resources and campaign elements. Develop plan for developing and implementing South Dakota-specific campaign elements.
- 21. Was the Resource Hotline heavily used? How was it promoted?

The Treatment Resource Hotline has been steady in the number of calls with increases occurring in certain months which could be directly related to promotional awareness efforts. The Treatment Resource Hotline is promoted through all of our social media and through various print materials and has been the primary resource for South Dakotans.

22. For videography and photography, does your staff have on-site production capabilities that our team can gather assets from for editing, or will the vendor be responsible for capturing those assets on-site?

No, the state does not have production capabilities, our selected vendor will be responsible for all production.

23. What is your current media mix - i.e. paid media, social media, SEO, etc - and spend?

We depend on our media vendor to provide us with recommendations on what our media mix should be and what should be spent on each platform. Our media mix might vary depending on the situation and past performance.

24. What previous tactics have been used that worked well?

We have found that having a mix of different types of media work well. For example, running broadcasts, radio, and social media at the same time with the same message. We also rely on statewide data to drive the type and placement for specific media. For example, if we see an increase in overdoes for a particular age group, we would target our materials and choice of media platform accordingly.

25. What is your current project initiation process and materials i.e., brief etc.? What would you change, if you could, to increase the odds of success in this process?

Please refer to the materials on this page: https://www.avoidopioidsd.com/take-action/print-materials/. We would expect the proposal to include recommended changes to increase the odds of success in this process.

26. Do you have audience information to share that would be helpful in designing our response?

The vendor's response should cover all South Dakotans.

27. Given the high population of Native/ Indigenous residents in South Dakota, are Native audiences a particular target for this campaign?

Yes. DSS is currently utilizing the GoodHealth TV narrowcast network to deliver culturally connected health and wellness education directed towards Native American audiences specific to opioid misuse/abuse prevention and awareness. Airtime is played throughout all participating clinics and health centers in South Dakota.

28. Are there examples of existing work in this issue space that the State of South Dakota considers a benchmark or that you admire?

No

29. Has the state of South Dakota had an agency with a similar scope on the AvoidOpioidSD campaign during this 2019 - 2022 period?

DOH and DSS has worked collaboratively on the AvoidOpioidSD campaign during this time period.

30. Does the state have existing primary market research (performed in the past five years) either developed by the state or obtained through its

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association to national organizations, that the state has relied on to describe the mindset and decision-making process of prospective target audiences of the program?

No, we would like recommendations from the vendor on what market research should be done.

Website:

31. Regarding web development, will the hosting of your website remain where it is currently or is that a service you expect of your chosen vendor?

The awarded vendor would host the website, but will need to grant access to both agencies to make changes.

32. Section 3.1.2.4.3 of the RFP states that content management systems such as Drupal, WordPress or Joomla are not supported by BIT. Your current website uses WordPress as its CMS. Please expand on what your expectations are regarding your current website since it does not comply with BIT's web standards. Will it remain in WordPress? Will your chosen vendor be expected to re-program the entire site using a different CMS, or none at all?

We would expect our vendor to re-program the website to be compliant with BIT's web standards.

33. Would you be open to a proprietary CMS solution?

Yes, as long as it meets our state BIT specification, and the vendor must be able to give the state admin access.

34. Are you looking to completely rebuild your website?

The state is always looking to ensure our websites are user friendly and meeting the intended need. We are open to the vendor providing recommendations regarding the website.

35. Does the site have any ecommerce functionality?

No

36. What do you like about your site currently? Dislike?

The state would ask the vendor to provide their input about website functionality and improvements.

37. Do you currently have editing access to the website?

No, the current vendor edits the website.

38. What feedback have you received on your website since 2019?

It is not the most user friendly and links do not go where they should.

39. Regarding the website, are there specific compliance standards and requirements that we need to adhere to?

The vendor will be able to comply state BIT specification, and the vendor must be able to give the state admin access.

40. Are your current website maintenance needs related to content or technical updates?

Currently, it is both.

Data Specific:

41. Does the state know the percentage breakdown of abuse, prescribed versus off the streets? If so, what is that percentage?

In 2021, there were 43 opioid-related overdose deaths in South Dakota. 42 were attributed to prescription opioids, and 2 were attributed to illicit opioids. This is from our vital records data.

42. Are there current South Dakota stats that focus on specific regions of the state for opioid abuse that can be shared?

Yes, and this information can be found at https://doh.sd.gov/statistics/VulnerabilityAssessment.aspx

43. Does the state have a breakdown of opioid-related death rates for the American Indian population compared to the white population per capita? (Based on percentage of the state's ethnic breakdown)

Yes, and this data can be found at https://www.avoidopioidsd.com/key-data/ under the Opioid Related Deaths tab.

44. Within the data you shared on opioid-related deaths https://www.avoidopioidsd.com/key-data/, are there any known reasons for the years that our state saw declines in the number of deaths?

We do not have research available on the reasons for the decline in the number of deaths.

45. 3.1.1.2 - Can the state provide a list or general description of the data to be migrated? Including platform and format.

We use Tableau to input our data dashboards.

Budget:

46. What is the maximum budget for the scope of work outlined in the RFP?

For year one, both departments will have approximately \$300,000.00 each or \$600,000 in total. Please refer to sections 5.2.4, 7.0, and Attachment A of the RFP for specifics on budget proposals.

47. Do you require each assignment to be estimated to establish budget and resource allocation against annual budget?

Yes, we normally discuss upcoming projects with our vendors prior to our yearly planning meeting. Then during that meeting, we will develop a budget plan.

48. How many change orders do you expect/require per assignment? If the number exceeds allotment, how and when are cost overages reconciled?

Normally we have a vendor develop a proof and then we will provide feedback. Then the vendor makes any changes, and we submit it for approval. We also ask at the beginning of major projects to provide a project narrative that includes a budget breakdown.

49. Is there a previously defined budget or budget range for this project?

Our funding has always been grant funding and will vary depending on what is allocated in the grant guidance.

50. The RFP mentions Attachment A budget template, but no attachment is included in the PDF. Where would we find the file for Attachment A?

Attachment A can be found at this link:

https://sourcing.esmsolutions.com/postingboard/entities/3444a404-3818-494f-84c5-2a850acd7779 It is located right under the RFP PDF



51. Can the state describe its expectations for the % of the overall budget dedicated to paid media execution?

We rely on vendor to provide us with recommendations on what our paid media should be. We also know this can vary year to year.

Evaluation

52. What are your top 3 KPIs for awarding this contract?; Evaluating account management moving forward? and; c) Evaluating creative i.e., what constitutes success?

Please refer to section 6.0

- 53. Rate (on a scale of 1-5, 5 being the highest), how the current agency partner is performing in these areas. What the strength/weaknesses/
 - Planning
 - Account management
 - Creative
 - Analysis
 - Reporting
 - Media
 - Communication
 - Risk Management and Resolution

Accounting

We feel like this question is not pertinent to this RFP

- 54. If you could improve 3 things affecting the current relationship, what would they be and why?

 We feel like this question is not pertinent to this RFP
- 55. Is having previous experience in public health marketing a requirement or a preference?

It is not a requirement but is preferred.