

RFQ #1008-23 – Community Health Assessment - Community Health Improvement Plan
CHA - CHIP
Amendment 1
11/28/22

Question 1: We are a privately held, for profit professional consulting firm. As such, our billing rates are not based on salary plus fringe. Our rates are fully loaded and inclusive of all costs (other than project-related expenses). Would it be acceptable to present our fully loaded rates in this proposal?

Answer: Fully loaded billing rates are acceptable; however, it is highly recommended that the total number of dedicated hours to project deliverables be identified in the budget breakdown.

Question 2: Can you share the budget allocated for this work?

Answer: Up to \$300,000.00 has been allocated for this work.

Question 3: What is the anticipated start date of the work?

Answer: It is anticipated that the start date will be late February, early March. As stated in the RFQ (page 4), the applicant must have the ability to begin project implementation within 1 month of being awarded the funds.

Question 4: Would you be comfortable if the consultant proposes adjustments to the timeline laid out in the RFQ?

Answer: Yes.

Question 5: What elements of the CHA are already completed?

Answer: Phases 1 and 2 of the MAPP process are complete, except for the process evaluation element. The Community Health Status Assessment in phase 3 is in its final completion stages. The following are pending: a) Community Themes and Strengths Assessment, b) Local Public Health System, and c) Forces of Change Assessment under Phase 3. MAPP Phases IV-VI have not started.

Question 6: How far along is DPH in the development of the strategic plan? To what extent can the findings from the remaining elements of the CHA help inform the strategic direction of the department?

Answer: The most current Public Health Department's Strategic Plan covered 2019-2023. In September 2022, the Strategic Planning Leadership Team amended the plan to extend to 2025. However, review and revisions to the Strategic Plan's content have not been started. It is anticipated that findings will help inform the strategic direction of the department.

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Question 7: Is a core group or steering committee already formed to advise this work? If not, is it the responsibility of the contractor to convene such a group?

Answer: Yes. There is an established Core Group and Steering Committee, as well as a larger stakeholder group, for the CHA/CHIP process. However, we anticipate that there are opportunities to enhance the existing groups as part of this process.

Question 8: Can you please share more about the Creation of Priority Area Dashboard and Priority Area Reporting Tools in the RFQ? Are you anticipating having an interactive webpage? Does DPH or other partners have resources to provide data to populate these tools and keep them up to date?

Answer: It is expected that a public facing and interactive webpage will be developed, along with electronic dashboards for each of the priority areas identified in the CHIP. In addition, it is expected that the consultant will develop reporting tools related to identified priorities in an effort to track and report progress and outcomes regularly.

Question 9: To what extent do you anticipate meetings being in person versus virtual? Can proposers include a combination of virtual and in-person meetings in their response?

Answer: A combination of virtual and in-person meetings are acceptable.

Question 10: We use fully loaded billing rates that are inclusive of staff salaries, fringe and indirect costs. Can we submit a budget that reflects these rates or do you need to see fringe and indirect itemized?

Answer: Fully loaded billing rates are acceptable; however, it is highly recommended that the total number of dedicated hours to project deliverables be identified in the budget breakdown.

Question 11: The RFQ mentions completing the “remaining phases” of the 2022-2027 CHA and CHIP process. Can you please describe the phases that have been completed and/or are still remaining?

Answer: Phases 1 and 2 of the MAPP process are complete, except for the process evaluation element. The Community Health Status Assessment in phase 3 is in its final completion stages. We are pending a) Community Themes and Strengths Assessment, b) Local Public Health System, and c) Forces of Change Assessment under Phase 3. MAPP Phases IV-VI have not started.

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Question 12: Have CHA/CHIP stakeholders already been identified? If so, can their roles be shared?

Answer: Yes. There is an established Core Group and Steering Committee, as well as a larger stakeholder group, for the CHA/CHIP Process. However, we anticipate that there are opportunities to enhance the existing groups as part of this process.

Question 13: Is there a pre-determined number of desired CHA stakeholder meetings or is there flexibility for that to be recommended by a potential contractor?

Answer: A pre-determined number of stakeholder meetings has not been determined. Yes, there is flexibility.

Question 14: Is there a preference for in-person versus virtual meetings throughout the engagement?

Answer: A combination of virtual and in-person meetings are acceptable.

Question 15: Have key informants been identified?

Answer: As part of the Community Health Status Assessment, key informants were identified, and key informant interviews were conducted.

Question 16: Will ICPHD be coordinating the set-up/logistics around these meetings?

Answer: Coordinating the set-up/logistics will be the responsibility of the funded entity.

Question 17: Is there a predetermined number of meetings with the community stakeholders and Imperial Valley organizations?

Answer: There is not a predetermined number of meetings that have been agreed on.

Question 18: Is there a particular budget range you're looking to stay within?

Answer: Up to \$300,000 has been allocated for this work.