

State of Hawaii
Department of Health
Family Health Services Division
Maternal & Child Health Branch
Women's Health Section – Family Planning Program

Addendum 1

December 12, 2007

To

Request for Proposals

HTH-560-CW-003

**Community Outreach, Information, and Health
Education Services: Family Planning and Reproductive
Health**

October 16, 2007

December 12, 2007

ADDENDUM NO. 1
To
REQUEST FOR PROPOSALS
HTH-560-CW-003

Community Outreach, Information, and Health Education Services: Family Planning and Reproductive Health

The Department of Health, Family Health Services Division, Maternal and Child Health Branch, Women's Health Section, Family Planning Program is issuing this addendum to HTH-560-CW-002 Title X Family Planning Services for the purposes of:

- Responding to questions that arose at the orientation meeting of October 30, 2007 and written questions subsequently submitted in accordance with Section 1-V, of the RFP.
- Amending the RFP.
- Final Revised Proposals

The proposal submittal deadline:

- is amended to <new date>.
- is not amended.
- for Final Revised Proposals is <date>.

Attached is (are):

- A summary of the questions raised and responses for purposes of clarification of the RFP requirements.
- Amendments to the RFP.
- Details of the request for final revised proposals.

If you have any questions, contact:

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Responses to Question Raised by Applicants for
HTH-560-CW-003 Community Outreach, Information, and Health Education Services:
Family Planning and Reproductive Health

1. **How is the 25% increase in knowledge calculated for Pre & Post Test Questions?**

Comparison between pre and post tests completed by the same individual.

2. **Is this measuring a 25% increase in knowledge or 25% of participants who increase in test scores (re: Pre & Post Test Questions)?**

Participants who demonstrate knowledge gained are those who scored a minimum of 25% higher on their post test score compared to their pre test score. For example, if an individual's pre-test score was 80%, the individual must score at least a 96% (which is a 25% increase from the previous score of 80%) on the post-test to demonstrate an increase in knowledge gained.

3. **How many pre/post tests are required?**

The Health Educator must administer pre and post-tests to at least 25% of their programs. For example, if a Health Educator has a total of 20 programs during the year, pre and post tests are required for a minimum of 5 (25%) of the 20 programs.

4. **Does the Health Educator submit all completed pre/post tests to the Family Planning Program (FPP)?**

No, all completed tests are kept by the individual health educator. At the conclusion of FPP's monitoring of the education program, the tests may be discarded.

5. **How long should the pre and post-tests be on file?**

Keep them for a minimum of a year or until FPP completes their annual monitoring of the health education program. Whichever comes first.

6. **Is there a consultant provided by DOH or FPP to assist with the Health Education data requirements, such as the pre/post test data?**

No, each agency is required to compile the data. Again, it's a simple comparison between pre and post tests.

7. **Does the Health Educator use the sample tests in the RFP or develop their own?**

No, the sample tests are only to be used as a guideline. You can either develop your own tests and/or consult with other Health Educators and adopt what tests they are using.

8. **Are we required to submit our pre/post tests to DOH Family Planning Program for approval?**

Yes, when creating your own tests, please submit copies to FPP.

9. **When are the Quarterly Reports due?**

The Health Educator must complete 4 quarterly reports for each fiscal year, and must submit the report within the month following the end of each quarter. The first quarter includes July, August, and September; therefore the first quarterly report is due by October 31. The second quarter includes October, November, and December; the second quarterly report is due by January 31, etc.

10. **Is a monthly expenditure report necessary for the Community Health Education RFP? Is it the same as the Clinical RFP?**

Yes, a monthly expenditure report is necessary for the Community Health Education. Once the contract is initiated, monthly expenditure reports are necessary for both Clinical and Community Health Education.

11. **Is the cost of Health Education printing materials included in the budget? What other supplies can be included?**

Yes, you may include Health Education printing costs and costs associated with printed materials in your budget. Any other items needed for presentations, Health Fairs and displays may also be included. Please note that the FPP prints most all the education materials used within the education program.

12. **Is there a list of recommended items to include in our Health Education curriculum?**

There is no comprehensive list of topics for Health Educators. FPP has, and will continue to forward information from national programs and websites that contain health education topics and general information that should be covered for various topics. If you are a new Health Educator, it is recommended that you consult with other Health Educators. FPP has also provided a Self-Study Manual which covers reproductive topics and what should be covered.

13. **What would a lesson plan consist of? Do we submit more than one lesson plan with the RFP? Is it up to the Health Educator to choose which lesson plan(s) to submit? Is the choice of target age/population determined by the Health Educator?**

The lesson plans should consist of a basic outline of what the Health Educator is presenting on each topic as it relates to each target population. Examples of target populations include schools, faith-based communities, teens, etc. The expected target population is described in the RFP. Lesson plans should be submitted for each of the various types of programs to be presented by the Health Educator.

14. **Would a part-time Family Planning Educator be required to meet the same number of direct/indirect contacts (8,000 indirect/ 2,000 direct) as a full-time FP Educator?**

No, Half-time educators are required to make exactly half the amount of direct/indirect contacts (4,000 indirect; 1,000 direct).

15. **What is an approximate salary for a Family Planning Health Educator?**

Salary should be commensurate with work experience and for the work expected of the individual. However, we do not determine salaries for your staff.

16. **If a full-time Health Educator position is split into two part-time positions, are we still able to get reimbursement?**

Yes, part-time positions are included in the cost-reimbursement system. The position needs to equal one full time equivalency (“FTE”).

17. **If a Health Educator conducts a 3-day class, consisting of 3 different program topics, but containing the SAME students, do we duplicate the number of contacts and record that we conducted 3 programs?**

Yes, Health Educators can count the same students repeatedly. The Health Educator should count each contact that they present to, regardless of how many times seen by the Health Educator.

HTH-560-CW-003 Title X Family Planning Services is amended as follows:

NO CHANGE