

Addendum 1

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

Request For Proposals (RFP) For Strategic Planning Services: 20250908RFP

The State of Connecticut Department of Public Health is issuing Addendum 1 to the Strategic Planning Services RFP 20250908.

Addendum 1 contains the Department's responses to questions submitted by interested parties. These responses shall clarify the requirements of the RFP as per Section I.B.9. Inquiry Procedures. In the event of an inconsistency between information provided in the RFP and information in these responses, the information in these responses shall control.

1. The RFP states that the current Strategic Plan remains effective until December 31, 2025. Is there a preferred timeline for completing the new strategic plan ahead of this date, or is the expectation that the final deliverable will be completed within the one-year contract period?
We are not expecting that the strategic plan will be completed by December 31, 2025. The exact contract term will be dependent on the scope of services to be provided and will be discussed during contract negotiations.
2. The RFP mentions that external stakeholders will be engaged, including other state agencies and community organizations. Could you provide a list of key stakeholders already identified for inclusion in this process?
External stakeholder engagement will include state agencies that DPH regularly works with, members of the legislature, local health districts and departments, regulated entities, and others identified throughout the planning process.
3. Is there an expectation that stakeholder engagement will involve public outreach, or will it be limited to structured stakeholder interviews and workshops?
Public outreach is not anticipated at this time.
4. The RFP states that DPH follows the **Public Health Accreditation Board (PHAB) guidelines** for strategic planning. Can you confirm whether DPH is currently accredited and if accreditation-related requirements should be considered in our proposed approach?
The Department is currently accredited by the Public Health Accreditation Board (PHAB). The strategic planning process will need to follow the requirements necessary for the Department to maintain Accreditation.
5. The RFP outlines evaluation criteria such as **organizational profile, staffing plan, work plan, and cultural competence**. Could you provide additional details on the specific weighting or priority of these criteria in the evaluation process?
The weights are confidential but can be made available upon completion of contracting with the selected vendor.

6. Is there a preferred format for the proposal beyond the submission outline, such as required templates for work plans or engagement approaches?

All formatting expectations are outlined in Sections I. General Information, III. Proposal Submission Overview, IV. Required Proposal Submission Outline and Requirements, and VII. Application Forms of the RFP. As long as the requirements outlined in these sections are met, respondents can use their discretion in other areas of formatting.

7. The RFP specifies that **in-person engagement will be required**, including attendance at an in-person retreat in Hartford. Apart from this, can other workshops and meetings be conducted virtually, or is there a minimum requirement for additional in-person engagements?

While virtual meetings are available for engagement, the specific requirements for in-person vs. virtual engagement, and under what scenarios the two platforms are appropriate, will be addressed during contract negotiations.

8. Will DPH staff be dedicated full-time to this engagement, or will scheduling need to accommodate their existing workloads?

There is a DPH staff member predominantly dedicated to this effort.

9. Has DPH already collected internal data or prior assessments that can be leveraged for the strategic planning process, or will the consultant be expected to conduct additional surveys and research?

Existing data will be shared with the Contractor; however, this is from a survey conducted several years ago. As described in the scope of services, proposals should include plans for a staff wide survey and an environmental scan.

10. The RFP specifies a total available funding of \$150,000. Are there any specific cost allocation expectations or restrictions that proposers should be aware of?

There are no specific cost allocation expectations. See section II.C.5. for the financial expectations and Section II.C.6. for budget expectations.

11. Does DPH have an existing list of pre-approved vendors for this type of work? If so, is this RFP limited to those vendors, or is it open to all qualified firms?

DPH does not have a list of pre-approved vendors.

12. Beyond the final Strategic Plan, are there specific interim deliverables (e.g., draft sections, progress reports) required at key milestones or deadlines? Is there flexibility in this timeline to accommodate unexpected challenges, if needed?

The workplan, which will be included as part of the contract, will reflect key activities, deliverables, and their respective due dates.

13. What types of external stakeholder groups does the Department expect to prioritize for engagement efforts?

External stakeholder engagement will include state agencies that DPH regularly works with, members of the legislature, local health districts and departments, regulated entities, and others identified throughout the planning process.

14. What are the Department's expectations regarding the frequency and duration of on-site meetings versus remote engagements? Beyond the in person retreat, are there expectations for a certain number of on-site engagements, or can most interactions be conducted remotely?

While virtual meetings are available for engagement, the specific requirements for in-person vs. virtual engagement, and under what scenarios the two platforms are appropriate, will be addressed during contract negotiations.

15. Will the Department work with the consultant's availability when scheduling in-person meetings, such as the retreat? Will the Department retreat be one day or multiple days?

Yes, the Department will work with the Consultant to identify times that work for all parties involved in in-person meetings. We are looking at doing the retreat over the course of one day.

16. What types of data sources does the Department want to be included in the environmental scan? What other types of data does that Department expect to be incorporated in the project? Will any of this data be provided by the Department?

The data sources will vary by programs and DPH areas of work. We anticipate much of the data to be available in-house. We also plan to work with the contractor to identify any data gaps that may need to be filled to complete the environmental scan.

17. Are there specific engagement methodologies or tools (e.g., surveys, focus groups) the Department has found effective in past strategic planning efforts?

The Department has used a staff survey in the past. We would like to identify other strategies to build off this survey to have a more well-rounded approach to our planning process this time around.

18. Can the Department make available the current version of the strategic plan that is effective through December 31, 2025?

The current Strategic Plan is posted on the Department's website and can be found here:

<https://portal.ct.gov/-/media/departments-and-agencies/dph/state-health-planning/strategic-planning/dph-2023-2025-strategic-plan.pdf>.

19. Are there restrictions related to the use of subcontractors for specific portions of the scope of work after contract award, if necessary?

The negotiated contract will define the scope of the work to be performed by the Contractor and any subcontractors. Any changes to the terms of the contract will require an amendment to the RFP.

20. Are there any specific preferences for proposers, such as being a local, small, women, or minority-owned business?

The RFP did not outline specific preferences for proposers.

21. Is the term of the contract July 1, 2025 – December 31, 2025?

The exact contract term will be dependent on the scope of services to be provided and will be discussed during contract negotiations.

22. On page 12 of the RFP, item 6 outlines style requirements but does not specify spacing. Can the proposal be single-spaced?

Yes

23. If a respondent is working with subcontractors, should each subcontractor complete the “Conflict of Interest- Disclosure Statement” (p. 13; Item 10)?

Yes

24. What is/are the funding source(s) for this work?

The funding source is the Preventive Health and Health Services Block Grant.

25. How many in-person meetings do you anticipate convening over the course of the project?

We are expecting the selected vendor to be onsite for the retreat. The specific requirements for in-person vs. virtual engagement, and under what scenarios the two platforms are appropriate, will be addressed during contract negotiations.

26. Regarding budgeting, are fees allowed to be charged in addition to using a federally negotiated indirect rate?

Yes. Please note, the budget and budget narrative will be evaluated as per Section III. B. 4. Evaluation Criteria of the RFP.

27. Will the DPH help identify internal and external stakeholders and assist with scheduling external interviews?

The stakeholders will be identified by DPH. The Department's expectations regarding scheduling interviews can be discussed in contract negotiations.

28. Will the DPH steering committee and key stakeholders be available for in-person workshops and planning sessions?

The DPH teams will be available for in-person meetings as needed. External stakeholder meetings may be virtual or in-person, depending on availability of all parties.

29. Approximately how many internal and external stakeholder interviews are anticipated?

The requirements for interviews will be dependent on the scope of services to be provided and addressed during contract negotiations. We anticipate between 10-15 interviews.

30. What is the purpose of and format of the in-person retreat that is referenced?

The purpose of the retreat is to pull staff from all levels of the Department (Steering Committee) together, with leadership to identify the strategic planning priorities, based off the information collected throughout the planning process to that point. We would also like to use this time to workshop these priorities to begin defining a new mission statement for the agency.

31. Is there a current governance structure over the strategic plan? If so, how is it managed today?

The Strategic Plan implementation is monitored by the Office of Policy and Strategic Initiatives, which is a part of the Commissioner's Office.

32. What would you like to see change in your strategic planning process to make the outcome more impactful (if anything)?

DPH is looking for a holistic approach to strategic planning with more engagement throughout the agency and with external partners.

33. Is there a date that the work needs to be completed?

The exact contract terms and deliverable dates will be dependent on the scope of services to be provided and will be discussed during contract negotiations.

34. What is the approval process for the strategic plan? Are there dependencies with the legislative session?
Section I.B.5

The Strategic Plan is approved by the leadership. There are no approval dependencies with the legislative session.

35. What is the vendor's role (if anything) after approval by the steering committee?
Once the Strategic Plan has been written and completed, the deliverables will be completed.

36. Are there timeline expectations or milestones that might impact the length of the engagement?
Deliverable due dates will be discussed and determined based on the work plan submitted and during the contract negotiation process.

37. Will the successful bidder who enters into an agreement under this RFP be precluded from bidding on and performing any potential follow-on work?

No

38. Federal Grant and Loan Disbursement Pause: In light of the recent White House directive to pause federal grant and loan disbursements for program reviews, could you confirm whether this development is expected to impact the funding or timeline for this project? If so, are there any contingency plans or adjustments to the project scope that we should consider while preparing our proposal?

There are many unknowns given the current federal situation and we will update bidders and the chosen vendor as things continue to change. We have not received any notice at this point that work under this funding stream must stop.

39. Potential Priority Adjustments: Given the recent administration memos and the evolving federal public health policy landscape, do you anticipate any shifts in the strategic priorities outlined in the RFP? If so, please specify.

We do not anticipate any changes to our planning priorities as they are written, however, as stated, there are many unknowns and the Department will remain adaptable as we must respond to any changes.

40. Pg. 6, *Section B. Service Overview* and Pg. 7, *Section C. Scope of Service Description*: Has the Department already engaged with the sister agencies/sister executive agencies that will be included in the strategic planning process? Do they have points of contact that are public health subject matter experts or familiar with the work at DPH?

The Department has not discussed this upcoming strategic planning process with our sister agencies, but we do work with them on our day-to-day operations. We will make introductions to the relevant people at our sister agencies for the purpose of external stakeholder engagement for the purposes of strategic planning.

41. Pg. 7, *Section 2. Service Expectations*, A. *Project Management*: Are there fixed dates for major milestones such as the stakeholder retreat or finalization of the strategic plan, or key dates the overall Department has scheduled that will impact or drive the project schedule?

Deliverable due dates will be discussed and determined based on the work plan submitted and during the contract negotiation process.

42. Pg. 7, Section 2. Service Expectations, A. Project Management: In developing a plan for the project's timeline and tasks, are there any approvals that must be received from any governing body, such as Boards or Commissions, that need to be considered?
No.

43. The RFP states that audited financial statements must be submitted along with the proposal. We are a small company organized as an LLC, and are not required to have audited financial statements, or even CPA-prepared statements except for taxes. Is there an exception for businesses too small to have such documents? Or is there something else we could submit instead?
The Department encourages all businesses to submit a proposal. Please refer to Section IV. I. Financial Profile of the RFP and provide documentation that best matches the requirement.

44. In reference to Section II.C.2.B - What types of resources and materials does the Department anticipate providing to support the development of the staff engagement framework?
The specific resources and materials will be dependent on the scope of services to be provided. In general, we anticipate providing dedicated staffing support to work with the Contractor in developing an inventory of existing staff engagement mechanisms and resources that could be used during the strategic planning process. Specific resource needs can be discussed in contract negotiations.

45. In reference to Section II.C.2.C-D - Does CT DPH have existing health priorities it expects to address—or support—through the strategic planning process? If not, will the plan include a focus on specific health priorities, or will it focus primarily on organizational capacity and functioning related to the Foundational Public Health Services?
The health priorities will be identified during the strategic planning process.

46. In reference to Section II.C.2.F - Does the Department anticipate also revisiting its Vision and/or Values as part of the strategic planning process?
Yes.

47. In reference to Section II.C.4 - Does the Department have preferred or required platforms for remote collaboration (e.g., video conferencing, electronic whiteboards, surveying)? Does the Department have restrictions or prohibitions on using any remote collaboration / communication platforms?
The use of platforms and any restrictions thereof will be addressed during contract negotiations.

48. Does the State currently have a strategic planning framework that addresses health equity, or does the State have a preferred framework identified for this process?
The Office of Health Equity at DPH is also undergoing a strategic planning process. The two plans should align with one another.

49. Does the State have a preference on the number and frequency of in-person meetings versus remote meetings?
No

50. Does the State anticipate the in-person retreat being conducted in one day or over multiple days?
We anticipate a one-day retreat.

51. At what frequency does the State prefer to have written progress reports submitted?
This will be addressed during contract negotiations.

52. As a privately held firm, we are not required to have financial statements (audited or unaudited) relating to its own financial results and operations. Would DPH consider allowing vendors to include proof of their financial stability (i.e. a graphical representation of our revenue from previous fiscal years and condensed financial information for the past 2 years) to satisfy this requirement?

The Department encourages all businesses to submit a proposal. Please refer to Section IV. I. Financial Profile of the RFP and provide documentation that best matches the requirement.

53. How do we sign up for additional e-mails announcing addendums to the RFP posted on the DAS CT-Source Bid Board?

There is no sign-up process for receiving additional emails. Emails announcing addendums that are posted on the portal are not guaranteed. It is strongly recommended that any Proposer or Prospective Proposer interested in this procurement periodically check the Bid Board for any solicitation changes. Please refer to Section I. B. 3. RFP Information of the RFP for links to CT-Source Bid Board and the Department's website.

54. Is the current CT DPH Strategic Plan available for proposers to review?

The current Strategic Plan is posted on the Department's website and can be found here:

<https://portal.ct.gov/-/media/departments-and-agencies/dph/state-health-planning/strategic-planning/dph-2023-2025-strategic-plan.pdf>.

55. The contract term is one year, beginning in July 2025, but the current strategic plan ends Dec 31, 2025. Is the due date for the new plan Dec 31, 2025, or June 30, 2026?

We are not expecting the new plan to be completed by December 31, 2025. The due date for the final plan will be dependent on the work plan submitted and contract negotiations.

56. For Budget justification Schedule B – do we need to include salaries from position schedule 2a on Schedule B?

Yes

57. It appears that Connecticut DPH was reaccredited by the Public Health Accreditation Board on 11/22/2024. How long was DPH reaccredited for?

The accreditation is for 5 years.

58. p. 7 of the RFP mentions that other sister Executive agencies and other external stakeholders will be expected to be engaged as part of the development of the next 5-year strategic plan. Can you provide a list of these agencies or refer to a list of stakeholders for the current or previous strategic plans?

External stakeholder engagement will include state agencies that DPH regularly works with, members of the legislature, Local health districts and departments, regulated entities, and others identified throughout the planning process.

59. Do you have an incumbent who provides similar services to those described in the RFP? If yes, what advantage, if any, would such a vendor have in competing for the current project? What was most and least useful about the experiences?

There is no incumbent who provides similar services to those described in the RFP.

60. What is your not to exceed budget or budget range or how much have you spent on similar work in the past?

\$150,000. Please refer to Section I. B. 5. Contract Awards of the RFP.

61. What is your preferred modality for meetings (in-person, virtual)? Will all meetings be conducted using the same modality except for the in-person retreat?

We anticipate a combination of in-person and virtual meetings. The specific requirements for in-person vs. virtual engagement, and under what scenarios the two platforms are appropriate, will be addressed during contract negotiations.

62. Do you have a preference for local consultants, or any other preferences?

No. Please refer to Section I. B. 6. Eligibility of the RFP.

63. Will answers to questions from all potential vendors be shared among them?

Yes.

64. Will we be able to learn who the other bidders are?

Yes, once the contract for the procured services has been executed.

65. In our proposal, may we include references and hyperlinks to electronic resources, e.g, to web pages?

No. Your proposal must be fully responsive to the question and conform with any page limit requirements.

66. How many years of public health issues experience is ideal?

There is no minimum number of years specified for specific public health experience.

67. We have worked with the Department of Surgery for a university hospital on process improvement and change management which involved elements of strategic planning. Does that count as experience with public health?

Experience in public health is preferred but not required. We cannot make a determination on this experience based on the description provided.

68. In the RFP you mentioned "Identify priorities during the retreat process hosted by the Department." Can you please share more information with us about the in-person retreat required? i.e. expected length of the retreat, estimated number of retreats and participants, any concrete deliverables, etc.

We are looking at doing a one-day retreat with the larger steering committee, which will include agency leadership, branch and section chiefs, and representatives from various levels of the agency. We expect anywhere from 30-50 people to participate in the retreat.

69. In the RFP you mentioned "the Department reserves the right in its sole discretion to decline to award contracts for activities in which the Commissioner or Department Head considers there are not adequate respondents." What is the minimum count of respondents typically considered adequate to grant the contract? Any past reference available?

The Department considers receipt of three acceptable proposals as a minimum for competitive procurement. However, there is no minimum count of respondents typically considered adequate to grant the contract.

70. Could you provide additional details about the retreat? Specifically, what is the planned duration? Which groups from CT DPH are expected to attend, and how many participants are anticipated?

We are looking at doing a one-day retreat with diverse agency staff, which will include agency leadership, branch and section chiefs, and representatives from various levels of the agency. There will be anywhere from 30-50 people.

71. What areas of the DPH portfolio will the strategic plan encompass?

The strategic plan will address the entirety of the agency, including operations, programs, regulations, and activities with the legislature.

72. 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?
Please refer to Section II. C. 6 Budget Expectations section of the RFP and complete the budget form to the best of your abilities.

73. We are not a CT based organization and wondered if travel is an allowable expense to include in the budget proposal or if this impacts the selection process.

Travel is an allowable cost.

74. We are also interested in whether the recent Executive Orders from the President related to DEI present any challenges to the implementation of this RFP or if you intend to alter the RFP in any way before making a final vendor selection.

The Department has no plans to change the scope of the responses required for this RFP. There may be discussions on this topic, with the selected vendor through the contracting process or in future amendments, based on funding requirements.