2019 Round 1 Rapid Cycle Opioid Applicants

9 Applicants Requesting $78,058.20
Goal: Increase availability and knowledge of Naloxone to BLS EMS responders and decrease number of opioid overdose deaths

Project Description:
- Develop BLS Intranasal Naloxone protocol for Chelan and Douglas Counties
- Provide opioid and naloxone training for all 22 EMS agencies within Chelan and Douglas Counties regarding proper administration of intranasal naloxone

Funding Requested: $8,160

Counties Served: Chelan, Douglas
Syringe Services Program in Grant County

Grant County Health District

Contributing Organizations

- Grant Integrated Services
- Moses Lake Community Health Center
- Washington State Department of Health
- Alcohol and Drug Abuse Institute
- Quincy Police Department
- Moses Lake Police Department
- Center for Opioid Safety Education
- University of Washington

Funding Requested: $10,000

2019 Round 1 Rapid Cycle Opioid Applicant

Goal: Use harm reduction framework that meets the clients where they are in their desire for treatment, wound care, and access to other healthcare needs

Project Description:

- Expand current SSP to Soap Lake, Ephrata, and Quincy
- SSP provides access to sterile supplies for injection drugs, safe injecting education, naloxone, condoms, education on the Good Samaritan Law, and caring staff and volunteers from community organizations
- SSP clients will receive referral or linkage to primary and behavioral healthcare, substance use treatment, social services, community resources, HIV/STD and Hepatitis C testing, and vaccinations

Counties Served: Grant
# Opioid Take Back Program

## Three Rivers Hospital

### Contributing Organizations
- None submitted

### 2019 Round 1 Rapid Cycle Opioid Applicant

**Goal:** Reduce opioid abuse and overdose deaths by providing education, increased access to naloxone, and a place to safely dispose of medications

### Project Description:
- Three Rivers Hospital will become a take back site
- Educate the public and hospital staff about proper storage and proper wastage of medications (especially opioids, sedatives and benzodiazepines), naloxone se and administration, local syringe exchange program
- Provide prescription to naloxone to high risk patients at discharge from the Hospital

**Funding Requested:** $10,000

**Counties Served:** Okanogan

“BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON”
Rapid Response to Resources Text “OPIOID” to 898211 Expansion

Washington 2-1-1
Contributing Organizations
• Community Choice

2019 Round 1 Rapid Cycle Opioid Applicant

Goal: Those with mobile phones will have instant access to local, state, and national resource information regarding opioid abuse, proper storage and disposal of opioids, and locations for treatment and support services.

Project Description:
• Provide outreach to promote the texting service
• Develop and identify additional opioid resources to add to the 2-1-1 resource database
• Identify frequency and types of clients utilizing system

Funding Requested: $10,000

Counties Served: Chelan, Douglas, Grant
Coulee Medical Center Opioid Project

Contributing Organizations
• Colville Confederated Tribes Health and Human Services Division including the Colville Tribal Chemical Dependency program and the Colville Tribal Behavioral Health program

Goal: Increase access to MAT and reduce opioid abuse

Project Description:
• Provide MAT training in partnership with Colville Confederated Tribes
• Provide training for nursing staff and providers to help recognize and diagnose Neonatal Abstinence Syndrome
• Purchase 100 medication lock boxes to give high risk chronic pain patients

Funding Requested: $10,000

Counties Served: Douglas, Grant, Okanogan
## Proposed Application Funding

<table>
<thead>
<tr>
<th>Applicant</th>
<th>Project Name</th>
<th>Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lake Chelan Community Hospital</td>
<td>BLS Intranasal Naloxone Administration and Training Program</td>
<td>$8,160</td>
</tr>
<tr>
<td>Grant County Health District</td>
<td>Syringe Services Program in Grant County</td>
<td>$10,000</td>
</tr>
<tr>
<td>Three Rivers Hospital</td>
<td>Opioid Take Back Program</td>
<td>$10,000</td>
</tr>
<tr>
<td>Washington 2-1-1</td>
<td>Rapid Response to Resources Text “OPIOID” to 898211 Expansion</td>
<td>$10,000</td>
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<td>Coulee Medical Center</td>
<td>Coulee Medical Center Opioid Project</td>
<td>$10,000</td>
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<td><strong>TOTAL PROPOSED FUNDING</strong></td>
<td></td>
<td><strong>$48,160</strong></td>
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</table>
Opioid Response Conference

Distributed Conference Model

- Focus on Prevention
- Planning Committee – first meeting on Dec. 6th.
  - Let Christal know if you want to join!
- Tentative date – March 15th
  - Any conflicts?!
- Keynote Speaker ideas?
Public Education

Draft Procedures

• Request for Proposals
• Selection Process
• Evaluation Criteria
• Timeline
Increase knowledge among the general public about opioid use, particularly in the following areas:

• Increase awareness about the dangers and addictive properties of opioids, including prescription medications.
• Reduce stigma of opioid use disorder
• Increase knowledge of locations and purposes of medication take back boxes in North Central Washington.
• Engaging pharmacists to increase opioid counseling at time of medication dispensing and offering locations of medication take back boxes in North Central Washington.
• Increased knowledge of treatment options and locations in North Central Washington.
• Increased knowledge of syringe exchange programs in North Central Washington.
• Benefits and availability of Naloxone as a rescue drug in the event of an opioid overdose.
Public Education RFP Timeline

- Nov 26: Request for Proposals issued
- Nov 30: Questions due – 5:00pm
- Dec 5: Responses to questions posted
- Dec 12: Proposals Due – 5:00pm
- Dec 13: Proposals sent to reviewers
- Dec 20: Reviews completed – 5:00pm
- Dec 21: Reviewer Conference – 9:00am
- Dec 21: Successful applicant notified
- Dec 31: MOU Signed and Executed

DECEMBER 2018

<table>
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<tr>
<th>SUNDAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
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<th>FRIDAY</th>
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</tbody>
</table>

“BUILDING HEALTHIER COMMUNITIES ACROSS NORTH CENTRAL WASHINGTON”
Other 2019 Initiatives

NCW Opioid Response Summit
• Focus on Recovery? Keynote speakers?

Dental Opioid Prescribing Workshop
• First committee meeting on Nov. 27

School-Based Prevention
• Project period 2019-2020 school year

Narcan Training and Distribution
• Procedure for review at December Workgroup Meeting

Recovery Initiatives/Events - TBD
Key Proposed Charter Updates:

- Workgroup membership is open to any stakeholder who signs the Membership Agreement and agrees to Member Responsibilities
- Meetings open to everyone
- Meet at least quarterly
- North Central Washington Opioid Addiction and Treatment Stakeholders Group has merged with the NCACH Regional Opioid Stakeholders Workgroup
- 75% attendance required

Proposed 2019 Opioid Stakeholders Workgroup Schedule

<table>
<thead>
<tr>
<th>January 18th</th>
<th>February 15th</th>
<th>March 15th</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Meeting</td>
<td>Wenatchee</td>
<td>Opioid Response Conference No Workgroup Meeting</td>
</tr>
<tr>
<td>April 19th</td>
<td>May 17th</td>
<td>June 21st</td>
</tr>
<tr>
<td>Omak</td>
<td>Moses Lake</td>
<td>No Meeting</td>
</tr>
<tr>
<td>July 19th</td>
<td>August 16th</td>
<td>September</td>
</tr>
<tr>
<td>No Meeting</td>
<td>Omak</td>
<td>Opioid Response Conference No Workgroup Meeting</td>
</tr>
<tr>
<td>October 18th</td>
<td>November 15th</td>
<td>December 20th</td>
</tr>
<tr>
<td>Moses Lake</td>
<td>Wenatchee</td>
<td>No Meeting</td>
</tr>
</tbody>
</table>
Mid-Valley Community Opioid Treatment Plan

Mid-Valley Clinic
Substance Abuse Prevention Program Pilot

Methow Valley School District
Rapid Response to Resources

Washington 211
Creating Resilience Against Opioids

Family Health Centers
Drum Disposal Kiosk
North Valley Hospital
Regional Opioid Stakeholder Workgroup Charter

Background
On January 9th, 2017 the Washington State Health Care Authority (HCA) signed an 1115 Waiver, now known as the Medicaid Transformation Demonstration Project (MTP). The goal of the Demonstration MTP is to improve care, increase efficiency, reduce costs and integrate Medicaid contracting. To align clinical integration with payment integration within the Demonstration Project MTP, HCA developed the Medicaid Demonstration Transformation Project Toolkit. One of the projects that all ACHs are required to select is to address the opioid use public health crisis. The project objective, as described in the toolkit, is to support the achievement of the state's goals to reduce opioid-related morbidity and mortality through strategies that target prevention, treatment, and recovery supports.

Charge
The Regional Opioid Stakeholder Workgroup will ensure that the North Central region implements effective evidence based practices that align with the milestones and approaches described in the Toolkit that will result in reducing opioid-related morbidity and mortality in North Central Washington. Specifically the Workgroup will complete the following:

- A primary aspect of this Workgroup’s approach will be to support and work through the Local Opioid Stakeholder Groups already working in Chelan-Douglas, Grant, and Okanogan Counties to promote connections to existing opioid efforts in the region, leverage current capacity, and address identified gaps.
- Provide specific recommendations to the NCACH Governing Board and staff on approaches to take for opioid prevention, treatment, overdose prevention, and recovery projects.
- As much as possible, ensure opioid projects and approaches align with all six projects NCACH selected to implement.
- Collect, synthesize, and use stakeholder and community input on opioid project planning and implementation.
- Determine how opioid prevention and treatment work is able to be financially sustainable after the Demonstration Medicaid Transformation period.
- As much as possible, ensure projects effectively connect patients with resources to mitigate the negative consequences of the social determinants of health.
- Identify how IT, workforce, and value-based payment strategies can support this project.

Composition
The Regional Opioid Stakeholder Workgroup will include representatives from Grant, Chelan, Douglas, and Okanogan Counties. Workgroup membership is not a prerequisite to receiving funding through the Demonstration Medicaid Transformation Project. As of January 2019, the Regional Opioid Stakeholders Workgroup membership is open to any stakeholder who signs the Membership Agreement and agrees to Member Responsibilities listed below. Each of the Local Opioid Stakeholders Group will be asked to identify three members to participate in the Regional Opioid Stakeholder Workgroup. The Executive Committee Director and NCACH staff will work to identify and ensure member representation from will recommend to the Governing Board additional members as needed to assure representation from:

- Emergency Medical Services (EMS) and First Responders
When the Regional Opioid Stakeholders Workgroup was formed in 2017, there were various local stakeholder groups already established in the NCACH region (see diagram below). As of December 2018, the North Central Washington Opioid Addiction and Treatment Stakeholders Group has merged with the NCACH Regional Opioid Stakeholders Workgroup. In response to this merger, Workgroup membership and meeting agendas have evolved to reflect the new composition and allow increased opportunity for collaboration and sharing during Workgroup meetings.
Additional representation will be added to the Workgroup by the Executive Director if it is deemed necessary. A Workgroup Chair will be appointed by the Executive Director. The Regional Opioid Stakeholder Workgroup is a sub-committee of the ACH board, and as such will be led by the Workgroup Chair and NCACH staff and must have a minimum of two board members serving on the Workgroup.

Meetings
Regional Opioid Stakeholders Workgroup meetings will be held once per month/quarter, with additional meetings scheduled as necessary. Meetings will be held in Chelan, Douglas, Grant, and Okanogan Counties; locations will vary and an effort will be made to hold meetings in each of the Local Health Jurisdictions throughout the year. Whenever possible, meetings will have an option to participate via teleconference or audioconference for those unable to attend in person, although in-person participation is encouraged. NCACH program staff and the Workgroup Chair shall be responsible for establishing the agendas. Notes for all meetings will be provided to the Workgroup by NCACH staff within two weeks of each meeting. Monthly meetings will be open and meeting minutes and materials will be posted on the NCACH website (www.ncach.org).

Member Responsibilities
1. Attend at least 75% of regular meetings of the Workgroup and actively participate in the work of the Workgroup.
2. Sign a Membership Agreement (attachment A).
3. Members who are active in Local Opioid Stakeholder Groups are expected to report Workgroup progress at County Stakeholder meeting to ensure bi-directional communication and provide direction to Regional Opioid Workgroup.
4. Work with Local Opioid Stakeholders Groups on the Opioid Project planning and implementation for the Medicaid Transformation Demonstration Project.

5. Assess current state capacity to deliver effective opioid use prevention and treatment interventions.

6. Select initial promising practices and/or evidence-supported approaches informed by the regional health needs assessment.

7. Review prepared data to recommend target population(s), guide project planning and implementation, and promote continuous quality improvement.

8. Assist in identifying, recruiting, and securing formal commitments for participation from implementation partners via a written agreement specific to the role each organization and/or provider will perform in the selected approach.

9. Recommend to the Board a project implementation plan, including a financial sustainability model and how projects will be scaled to full region in advance of HCAs project implementation deadline.

10. Monitor project implementation plan, including scaling of implementation plan across region, and provide routine updates and recommended adjustments of the implementation plan to the NCACH Governing Board.

11. Develop and recommend a process for primary care and outpatient behavioral health partners involved in the implementation of the Opioid Project to receive Medicaid Transformation funds.

12. Collaborate with NCACH staff on data and reporting needs related to Medicaid Transformation Project metrics, and on the application of continuous quality improvement methods in this project.

13. Use strategies, that are supported by regional data, to advance equity and reduce disparities in the development and implementation of the Opioid Projects.

**Authority**

The Regional Opioid Stakeholders Workgroup is an advisory body that will inform decision-making by the NCACH Governing Board and ensure regional priorities and local considerations are incorporated in program design decisions. Recommendations and input developed by the Workgroup will be shared in regular monthly progress reports to the NCACH Governing Board.
North Central Accountable Community of Health  
Regional Opioid Stakeholder Workgroup  
(Attachment A)

Membership Agreement

I acknowledge by my signature of this membership agreement that I have read, understood, and agreed to follow the guidelines and policies outlined in the North Central Accountable Community of Health Regional Opioid Stakeholder Workgroup Charter.

I understand that continued membership in the Workgroup is contingent on following the requirements of membership that are outlined in the Charter. Not meeting the requirements for membership could result in the loss of my membership status in the Workgroup.

Dated: ______________________________  Signed: ______________________________

Print Name: __________________________

Title: ________________________________
REQUEST FOR PROPOSALS FOR OPIOID AWARENESS AND EDUCATION MARKETING CAMPAIGN

November 26th, 2018
General Information
The purpose of this request for proposal (RFP) is to obtain proposals from qualified agencies interested in working with the North Central Accountable Community of Health (NCACH) to develop a social marketing campaign to raise awareness and education on the opioid crisis and opioid use in Chelan, Douglas, Grant, and Okanogan Counties.

RFP Process and Response Format
Submitting organizations are required to email completed proposals by 5:00pm, Wednesday, December 12th, 2018. Late responses will not be considered.

Proposals must be delivered electronically. Please ensure the file is a pdf and email it to christal.eshelman@cdhd.wa.gov.

NCACH reserves the right to select more than one, or none, of the organizations submitting proposals and to select proposals in whole or in part.

Proposals will be evaluated by a committee of communications, behavioral health, healthcare, and public health professionals. Applicants will be notified by December 21th, 2018 if they are selected.

All submitted materials will become property of NCACH and will not be returned.

Timeline
• This RFP is dated November 26th. Organizations may download a copy of the RFP from www.ncach.org.
• Questions are due by 5:00pm, November 30th (please see Questions Period in the Proposal Submission section).
• Proposals are due not later than 5:00pm, December 13th.
• Proposals will be evaluated immediately thereafter. Candidate firms will be notified by December 21th if they have been selected.
• Work on project should begin January 1, 2019 and all work in proposal should be completed and invoiced no later than December 31, 2019.

All dates are subject to change at the sole discretion of the NCACH.

Questions
Questions regarding this request must be submitted via email to christal.eshelman@cdhd.wa.gov by 5:00pm November 30th. Questions received after 5:00pm November 30th, will not be considered. Please include “NCACH Public Education Proposal Question” in the subject line of the email. To ensure fairness, all questions and answers will be placed on www.ncach.org on the Opioid Workgroup section of the site by 5pm December 5th.

Memorandum of Understanding (MOU)
NCACH will negotiate MOU terms upon selection. All MOUs are subject to review by NCACH legal counsel, and the project will be awarded upon signing of the MOU, which outlines terms, scope, budget, timelines, and other necessary items.
Organizational Overview
Through cross-sector, regional collaboration, NCACH is working to improve community health in North Central Washington. NCACH is uniquely situated to engage a broad range of stakeholders – from grassroots non-profits to government agencies – in discussion and action to improve population health. NCACH is one of nine Accountable Communities of Health formed in Washington through the Healthier Washington initiative. As part of this initiative, the NCACH is undertaking a regional project addressing the opioid use public health crisis in North Central Washington. The project objective, as described by the Washington State Health Care Authority, is to support the achievement of the state’s goals to reduce opioid-related morbidity and mortality through strategies that target prevention, treatment, overdose prevention, and recovery supports.

Project Overview
The primary objective of this project is to increase knowledge among the general public about opioid use, particularly in the following areas:

- Increase awareness about the dangers and addictive properties of opioids, including prescription medications.
- Reduce stigma of opioid use disorder
- Increase knowledge of locations and purposes of medication take back boxes in North Central Washington.
- Engaging pharmacists to increase opioid counseling at time of medication dispensing and offering locations of medication take back boxes in North Central Washington.
- Increased knowledge of treatment options and locations in North Central Washington.
- Increased knowledge of syringe exchange programs in North Central Washington.
- Benefits and availability of Naloxone as a rescue drug in the event of an opioid overdose.

The overarching communications strategy is focused on targeted, informed messaging to target audiences, with an emphasis and attention to the overall program objectives stated above, as well as with each audience-focused initiative. Through the utilization of an evidence-based approach, along with social marketing (including paid and social media) NCACH can effectively achieve the objectives listed above.

Project Target Audience
- General public
- People opioid use disorder
- Parents, family, and friends of those with opioid use disorder

Scope of Work
Coordinate messaging and timing of outreach and advertising with Local Public Health Department, and other partner initiatives.

- Creative concept refinement - Refine and localize existing campaign messaging utilizing materials from existing opioid campaigns (eg. Starts with One campaign).
- Paid media strategy and purchasing
- Social Media
  - Paid social media campaign – strategy and plan, implementation, optimizations, analytics reporting.
Social media management – campaign pages created, content development/calendar, daily management of presences, analytics reporting
  • Create a findings report and presentation of results
  • Participation in the 2019 NCACH Annual Summit

Budget
Not to exceed $30,000. Incudes all costs and estimates for services, productions costs, and traditional social media buys.

Organization Capabilities and Requirements
To be considered, response organizations should be able to exhibit at a minimum (but not limited to) the following:
  • Strong research and planning capabilities
  • Experience and proven success in planning for campaigns related to health awareness
  • Knowledge of planning and placement for traditional and nontraditional tactics for paid media campaigns
  • Experience with leveraging media buys to earn donated media air time.
  • Budget management and reporting
  • Strategic planning and implementation of social media, paid and engagement campaigns
  • The organization must demonstrate flexibility in handling unexpected requests for services (within the agreed scope of work) to support campaigns and be able to meet the set timelines.

Proposal Content
Proposal should be prepared as simply as possible and provide straightforward, concise description of the organization’s capabilities to satisfy the requirements of this RFP.
  • Cover letter (optional)
  • Provide and agency profile, indicating background, experience and core competencies
  • Provide examples of past marketing campaigns that exhibit the organization’s experience in planning and executing successful campaigns related to health awareness.
  • Identify the staff members that will be assigned to this project, their titles and what their roles will be on this project.
  • List any subcontractors and what their roles will be.
  • List any partners you will work collaboratively with on this project. Describe how you will work with these partners. List each partners key roles and/or responsibilities.
  • Describe the organizations approach to working with multiple stakeholders with competing priorities.
  • Describe the proposed planning and implementation of the campaign, including but not limited to media to be used, audiences targeted, and messaging.
  • Describe the anticipated reach, both number of people and specific population is, of this project. It is expected that this project will relatively equally address Chelan, Douglas, Grant, and Okanogan Counties
  • Provide the timeline, with milestones, for implementation and completion.
  • Describe your process for gathering information and content needed for the project.
  • Describe how this project will lead to lasting and sustainable increased awareness of opioids.
• Estimated budget to produce required deliverables, including analysis. Please include a line item budget as well as a narrative.
• What key indicators will you utilize to measure success of this project and how will you know the project has been impactful?

Evaluation Criteria
The following criteria, not necessarily listed in order of importance, will be used to review proposals:

1. Organizations demonstrated capability to provide the services, including organization experience, relationships, and staff that have resulted in successful, results-oriented campaigns
2. Demonstrated ability to develop evidence-based behavior change social marketing campaigns that utilize a unique mix of traditional and non-traditional media to engage audiences (including diverse and hard to reach populations), that are community and culturally appropriate at the local level and achieve measureable results.
3. Qualifications, experience, and fit of staff that would be assigned to this project
4. Effectively attributing roles and responsibilities of subcontractors.
5. Effectively attributing roles and responsibilities to partner organizations.
6. Understanding of and functional approach to working with multiple stakeholders with competing priorities
7. Effectively articulately and defining proposed project with sufficient detail to evaluate merits of proposed project.
8. Effectively defining the proposed scope of the project with sufficient detail.
9. Defining a realistic timeline for the implementation of this project.
10. Understanding of and functional approach to gathering information and content needed for the project.
11. Proposed sustainability of increased awareness
12. Cost structure and ability to efficiently and effectively allocate budget.
13. Evaluation and measurement criteria of this project

Limitations of Liability
NCACH assumes no responsibility or liability for costs incurred in responding to this proposal request or in responding to any further request for interviews, presentation, additional data, etc. NCACH also reserves the right to cancel this project at any time.
SCORING PROCESS AND EVALUATION CRITERIA
REQUEST FOR PROPOSALS FOR OPIOID AWARENESS AND EDUCATION MARKETING CAMPAIGN

Funding period: January 1, 2019 through December 31, 2019

Anticipated total available funding for the Opioid Awareness and Education Marketing Campaign (January 2019 – December 2019) is $30,000.

Timeline

- November 26th: Request for Proposals issued
- November 30th: Questions due
- December 5th: Responses to questions posted on NCACH Opioid Workgroup webpage
- December 12th 5:00pm: Proposals due
- December 13th: Screening completed by NCACH staff
- December 13th: Proposals sent to RFPEC for review
- December 20th 5:00pm: Reviews completed by the RFPEC
- December 21st 9:00am: Reviewer Conference
- December 21st: Successful applicant is notified of award and contract negotiation begins
- December 31st: Signed MOUs due to NCACH staff successful applicant

Scoring Process

Stage 1: Screening
Each application will be screened by NCACH Staff to determine it meets the minimum qualifications of the RFP and is complete. Screening will be completed by December 13th. If information is missing, NCACH may request the missing information and the applicant will have 48 hours to provide a response to the missing information.
Stage 2: Scoring
All reviewers will be provided with an electronic scoring template. Reviewers will submit a separate completed scoring template for each application scored. Reviewers will complete and submit reviews by December 20th.

Reviewers will be a mix of community stakeholders, technical assistance consultants, and NCACH staff who do not have an actual or perceived conflict of interest. Each proposal will be reviewed by three reviewers. No reviewer will be asked to review more than 5 proposals. The total number of reviewers will be dependent on the number of proposals.

Stage 3: Reviewer Conference Call
After all scores have been submitted by reviewers, the Review Manager will hold a conference call with all reviewers to ensure there are no outstanding questions or concerns with the highest ranked bidder. During the call, reviewers will be provided with the high and low score for each proposal and average relative rank of each proposal.

Stage 4: Score Tabulation
For each reviewer, the proposal will be ranked with a value equal to the rank assigned to the proposal. The proposal summing to the lowest total will be selected for this project. If there is a tie in the lowest total sum, it will be broken by awarding the applicant with the highest average score. An example of the score tabulation is below:

<table>
<thead>
<tr>
<th>Applicant</th>
<th>Review 1</th>
<th>Review 2</th>
<th>Review 3</th>
<th>Rank 1</th>
<th>Rank 2</th>
<th>Rank 3</th>
<th>Sum</th>
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</thead>
<tbody>
<tr>
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<td>100</td>
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<td>1</td>
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<td>Applicant 3</td>
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<td>85</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>6</td>
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</tbody>
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In this example, Applicant 1 would be the successful bidder.

Stage 5: Notification
The Successful applicant will be notified December 21st, 2018 with an award letter/email. An MOU will be distributed to the successful applicant December 21st and will be due back to NCACH staff by December 31st. Additionally, on December 21st information needed to register in the Financial Executor Portal will be requested (ie. EIN number.) Registration in the Financial Executor Portal is required prior to distributing any funding.

Note: All dates are subject to change at the sole discretion of the NCACH and funding is contingent on availability of funds.
### Evaluation Criteria

Scores should be selected as follows:

1 – **Poor**: very few strengths and numerous major weaknesses  
3 – **Good**: Strong but also some moderate weaknesses  
5 – **Exceptional**: Exceptionally strong with essentially no weaknesses

<table>
<thead>
<tr>
<th>Proposal Content</th>
<th>Evaluation Criteria</th>
<th>Criteria Question</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide and agency profile, indicating background, experience and core competencies</td>
<td>Organizations demonstrated capability to provide the services, including organization experience, relationships, and staff that have resulted in successful, results-oriented campaigns</td>
<td>Does the organization have sufficient experience, staff, and relationships to produces a successful, results-oriented campaign?</td>
<td></td>
</tr>
<tr>
<td>Provide examples of past marketing campaigns that exhibit the organization's experience in planning and executing successful campaigns related to health awareness.</td>
<td>Demonstrated ability to develop evidence-based behavior change social marketing campaigns that utilize a unique mix of traditional and non-traditional media to engage audiences (including diverse and hard to reach populations), that are community and culturally appropriate at the local level and achieve measureable results.</td>
<td>Does the organization have the ability to develop a marketing campaign that utilizes traditional and non-traditional media to engage hard to reach populations that are community and culturally appropriate at the local level and achieve measureable results?</td>
<td></td>
</tr>
<tr>
<td>Identify the staff members that will be assigned to this project, their titles and what their roles will be on this project.</td>
<td>Qualifications, experience, and fit of staff that would be assigned to this project</td>
<td>Does the applicant show adequate qualifications, experience, and fit of the staff that will be assigned to this project?</td>
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<tr>
<td>List any subcontractors and what their roles will be.</td>
<td>Effectively attributing roles and responsibilities of subcontractors.</td>
<td>If subcontractors are listed, does the applicant sufficiently describe the role of each subcontractor. Note: If no subcontractors are listed, applicant should receive full points for this section.</td>
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<tr>
<td>List any partners you will work collaboratively with on this project. Describe how you will work with these partners. List each partners key roles and/or responsibilities.</td>
<td>Effectively attributing roles and responsibilities to partner organizations.</td>
<td>Does the applicant attribute a role or responsibility to each partner listed?</td>
<td></td>
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<tr>
<td>Describe the organizations approach to working with multiple stakeholders with competing priorities.</td>
<td>Understanding of and functional approach to working with multiple stakeholders with competing priorities</td>
<td>Does the applicant express an adequate understanding of and approach to working with multiple stakeholders with competing priorities?</td>
<td></td>
</tr>
<tr>
<td>Describe the proposed planning and implementation of the campaign, including but not limited to media to be used, audiences targeted, and messaging.</td>
<td>Effectively articulating and defining proposed project with sufficient detail to evaluate merits of proposed project.</td>
<td>Does the applicant articulate an approach that logically leads to increased awareness and understanding of opioid use? Does the applicant clearly articulate the proposed project? Does this project provide sufficient detail of the proposed project? Does the applicant address community and culturally appropriate messaging? Does the applicant address implementation of the project?</td>
<td></td>
</tr>
</tbody>
</table>
| **Describe the anticipated reach, both number of people and specific population is, of this project. It is expected that this project will relatively equally address Chelan, Douglas, Grant, and Okanogan Counties** | Effectively defining the proposed scope of the project with sufficient detail. | Does the applicant describe the number of people they are expecting to reach with the proposed project?  
Does the applicant describe specific populations they intend to reach with the proposed project?  
Does the applicant describe how all Counties in North Central Washington will be reached |
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<tr>
<td><strong>Provide the timeline, with milestones, for implementation and completion.</strong></td>
<td>Defining a realistic timeline for the implementation of this project.</td>
<td>Does the applicant describe major milestones and the implementation timeline and demonstrate?</td>
</tr>
<tr>
<td><strong>Describe your process for gathering information and content needed for the project.</strong></td>
<td>Understanding of and functional approach to gathering information and content needed for the project.</td>
<td>Does the applicant demonstrate and understanding of and functional approach to gathering content needed for the project?</td>
</tr>
<tr>
<td><strong>Describe how this project will lead to lasting and sustainable increased awareness of opioids.</strong></td>
<td>Proposed sustainability of increased awareness</td>
<td>Does the applicant state how the proposed project will lead to lasting and self-sustaining improvement?</td>
</tr>
<tr>
<td><strong>Estimated budget to produce required deliverables, including analysis. Please include a line item budget as well as a narrative.</strong></td>
<td>Cost structure and ability to efficiently and effectively allocate budget.</td>
<td>Does the applicant demonstrate a suitable cost structure and ability to efficiently and effectively allocate budget?</td>
</tr>
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</table>
| **What key indicators will you utilize to measure success of this project and how will you know the project has been impactful?** | Evaluation and measurement criteria of this project | Does the applicant state key indicators they will be utilized to measure success?  
Does the applicant clearly articulate how they know if the project is impactful? |

**Total (maximum score available = 100)**