

## **Proposer's meeting (advertising and PR RFP)**

January 31, 2012

Panelist:

**Katherine Meerse**-Director of "It's Your Future" Project

**Glynis Shea**- Communications Director of the University of Minnesota Prevention Research Center

**Paul Lennander**-Vendor Selection Coordinator- Hennepin County Human Services and Public Health Department (HSPHD)

**Meg Bion**-Senior Contract Services Analyst- Hennepin County HSPHD

### **The RFP**

This is a huge communications challenge with diverse players and agendas paid for with carry over money from the U.S. Office of Adolescent Health. We're completely open to your ideas: the project comes with plenty of picky stipulations, but none (we hope) that dictate your creative process.

"It's Your Future" (IYF—the umbrella under which TOP and SSI fall) does not have a brand yet, and what we come up with (internally) will be low key. The overall IYF project is just too complicated to pitch on large scale. We do know at this point that it will be a Hennepin County brand but we want to make sure that the sponsoring schools get plenty of limelight. You will want to emphasize the great partnership between the County and the schools. We're very open to your input on branding.

### **PR campaign/Teen Outreach Program (TOP)**

The situation: We need 20-30 more teachers and have 70 more schools to approach. We have to make the sell to superintendents, principals, and teachers.

The goal: create an educational environment in which TOP is the cool thing and well known to teachers before they even take a meeting with us. In our experience, districts are most responsive to parents asking, "Why doesn't our district have this program?"

Target audience: the decision-making strata of each school district.

Challenges:

- Every district has a different decision-making hierarchy.
- Getting schools to fit in to core subjects/testing
- Getting schools to agree to be a randomized control (non-participant) after they've gone through the mental paces of agreeing to do TOP in the first place.
- We also have money to help youth do their own media project about TOP and hope to fit this in to the PR plan.

## TOP questions

	Question	Answer
	<u>How many middle schools participate vs. high schools?</u>	19 high schools and 5 middle schools currently participating.
	<u>Is earlier intervention more effective in preventing teen pregnancy?</u>	In general, yes. But the studies show that TOP is equally effective in middle school and high school settings.
	<u>What is service learning?</u>	It's "volunteering on steroids." It's not just volunteering but the learning cycle around volunteering. TOP classes first do a community assessment to see where they can make a difference. Then they design a project to meet the need. One class in a community with obesity issues planned a 5K run for the whole community. Then they go back to class and reflect on the project's goals, implementation, and results. It surprises most people to learn that TOP programs prevent pregnancy with very little class emphasis on sex or birth control.
	<u>How is the "Changing Scenes" curriculum different from the service learning component?</u>	Service learning is actually built in to the Changing Scenes curriculum.
	<u>Can we use success stories from TOP?</u>	Yes, we have testimonials from teachers, participants, and superintendants. Getting patient feedback from clinics is more complicated but we can ask (Katherine thinking about this).

	<p><u>How does Hennepin County support existing TOP schools?</u></p>	<p>We meet monthly with the health educators (co-facilitators of TOP classrooms) that work for our three community-based organizations. We do not meet regularly with teachers or administrators (their time constraints) but hope to put into place a community advisory council.</p>
	<p><u>What do teachers think of the TOP trainings?</u></p>	<p>They come in skeptical, and leave very excited. We notice that there's a big gap between educational pedagogy and youth development best practices. These trainings seem to affirm for teachers what they instinctively know about supporting kids' development, and put this knowledge into a system that they can use right away. They tell us that the kids they teach are more engaged during the rest of the week, too, because of what they do on TOP days.</p>
	<p><u>Can we get copies of the curriculum?</u></p>	<p>Not the full curriculum, but we can post summaries of each level of the curriculum.</p>
	<p><u>Is there data showing that youth development increases test scores?</u></p>	<p>There's "soft" data that supports it but no big studies so far.</p>
	<p><u>Does it cost anything for a school to do TOP?</u></p>	<p>No. We actually pay them a \$2,000 stipend, provide each participating teacher with a \$500 curriculum, cover the cost of program supplies and provide a co-facilitator from one of our community partner agencies.</p>
	<p><u>What is the timeline of key deadlines/dates?</u></p>	<p>Late March/early April – Schools on spring break (exact dates vary by district)  Late May – Final exam prep, general end-of-the-year craziness, schools have a lot on their plates</p>

		<p>Early June – Schools out for summer (exact dates vary by district)</p> <p>August – Training for newly recruited TOP teachers</p> <p>End of August/Beginning of September – School starts (exact dates vary by district)</p> <p>3<sup>rd</sup> week of September – Data collection for evaluation study</p>
	<p><u>Which schools are participating now?</u></p>	<p>Armstrong “A” School</p> <p>Augsburg Fairview Academy</p> <p>Brooklyn Center Academy</p> <p>Brooklyn Center High School</p> <p>Cooper High School (Robbinsdale)</p> <p>Edgewood Area Learning Center</p> <p>Four Directions Charter School</p> <p>High School for Recording Arts</p> <p>Highview Alternative Program</p> <p>Lake Nokomis Community School – Keewaydin Campus</p> <p>Lucy Craft Laney</p> <p>Main Street School for the Performing Arts</p> <p>MERC Alternative High School</p> <p>MERC Alternative Middle School</p> <p>Minnesota Internship Center (3 sites)</p> <p>North High School</p> <p>North Vista Education Center</p> <p>Perpich Center for Arts Education</p> <p>Sojourner Truth Academy</p> <p>South Education Center Alternative</p> <p>Richfield Career Education Program</p> <p>Robbinsdale Middle School</p>
	<p><u>Which schools are on the list to approach?</u></p>	<p>Any middle or high school, public or charter, that is not currently participating and is located in one of the eight cities in our project area. Those cities are Brooklyn Center, Brooklyn Park, Crystal, Hopkins, Minneapolis, New Hope,</p>

		Richfield, and Robbinsdale.
	<u>When is the best time to roll out the campaign?</u>	We don't know: our audience is less concentrated in the summer (teachers are gone) and the pace slows down, but superintendants and principals are still around. The money has to be spent by August 31. Teachers must be trained this August, so must be recruited this spring.

### Advertising campaign/Safer Sex Initiative (SSI)

SSI is in 17-20 teen clinics, community clinics, and school-based clinics. Only 20% of eligible patients accepting offer to participate

Goal: drive teens to clinics in general so that they can opt in to SSI.

Target audience: low income/GLBT/new immigrants/kids of color in the urban core and first ring suburbs. Scary for them to seek care, wonder about cost; don't know where to go and worry parents will find out.

Guidelines:

- The general public perception of teens is bad: they're perceived as a composite of their health problems. We want this PR to also promote teens' awesomeness, and to not use any scare tactics.
- We're not trying to change anyone's behavior with this campaign (like Target Market): we're trying to get them to come to clinics.

Challenges:

- We can't advertise the SSI program itself because contaminates the study. Even mentioning it on a clinic website would be potentially misleading because each client only has a 50% chance of actually accessing the program during this evaluation phase.
- We must send a clear message about clinic services and accessibility but one that doesn't make Hennepin County appear to be promoting irresponsible behavior
- In a perfect world, your proposal would include using some of our targeted youth in the advertising effort (as per youth development best practices).

### SSI questions

	Question	Answer
	<u>Does each clinic "own" their SSI program? Is participant recruitment the</u>	Yes, each clinic owns it, and no, recruitment is not the same in each clinic.

	<p><u>same in each clinic?</u></p>	<p>Different clinics have very different “patient flows.” One clinic may have the doctor recruiting new participants; another may screen patients at the front desk. We bring SSI program staff together every month to compare successes and challenges.</p>
	<p><u>Do the SSI clinics currently communicate with each other?</u></p>	<p>Yes, they meet monthly, and have an intranet site. But we hope this campaign will strengthen our relationships with clinics and their relationships with each other.</p>
	<p><u>Is there any research available on this demographics’ usage of technology?</u></p>	<p>No hard research (yet) but many projects serving youth nationally are trying to tap this potential. The most innovative so far is a texting clinic hotline developed by South Carolina’s teen pregnancy prevention coalition.</p>
	<p><u>Which clinics participate in this project?</u></p>	<p>Annex Teen Clinic (Robbinsdale)  Brooklyn Center Community Clinic  Hennepin County Public Health Clinic (Minneapolis)  Midwest Health Center for Women (Minneapolis)  Minneapolis School-Based Clinics:  Edison High School  Patrick Henry High School  Roosevelt High School  South High School  Southwest High School  Washburn High School  Neighborhood Involvement Program (NIP) Community Clinic (Minneapolis)  Neighborhood Health Source (3 locations) (Minneapolis)</p>

	<p>People’s Center Health Services/Teenage Medical Services (Minneapolis)          Southside Community Health Services (Minneapolis)          West Suburban Teen Clinic (2 locations) (Hopkins and Excelsior)</p>
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**General questions**

	<b>Question</b>	<b>Answer</b>
	<u>You referenced focus groups you conducted with teens. Can we see the focus group results?</u>	Yes, but its five years old and only from Richfield and Brooklyn Center. A better source for more recent focus group data may be the National Campaign to Prevent Teen Pregnancy.
	<u>Will there be other grant money available in the future for PR and advertising?</u>	Not as far as we know but an awesome impact in this field could potentially snowball into new opportunities. And there may be a small amount of carry forward money for next year.
	<u>Does HC want each advertising agency to have a PR partner included in their proposal?</u>	Not necessarily, but our goal is to keep Katherine’s coordination and management of this project to a minimum.

Budget clarifications

- Our \$500K advertising budget is what we've allocated just for the actual advertising—it doesn't include production costs, etc.
- Likewise the PR budget minimum is \$80K.
- Don't spend much time on the small details: tell us how and to which outcome you'd allocate each portion.
- Both budgets are subject to change, but will only potentially go up—not down.
- Re: the texting hotline idea: we'd be in charge of tracking clinic numbers; you'd be in charge of tracking the hotline usage metric.

#### What's the process from here?

- Submit further questions to Paul in writing, and we'll post the information for everyone. We usually have an end date for questions, but recognize that this RFP is time sensitive and complicated, so we'll keep posting Q&A up to February 10. Make sure you subscribe to our site to get these updates.
- Proposals are due February 10 by 4:00 by mail, courier or in person. Paul will be in the office that day from 10-12 if you'd like to deliver it personally.
- A 5-7 person selection committee (with no conflicts of interest) will do the review and selection between 2/13 and 2/17. HC will notify you either way. HC's vendor selection person recognizes that this project is fast-tracked.
- If a presentation is needed, we would schedule that for February 20. Ideally, we'll be able to decide based on your proposal. Note: we don't expect spec work, and recognize that government applications don't visually dazzle. We are most interested in learning about your vision and your capacity to carry it out.
- The contract approval process can be cumbersome (accountants/attorneys/ board approval). After HC negotiates with you and writes up the contract, you sign it and we all hope that the board approves it in less than a month. The next dates for board action meetings are March 13 and March 27. The board is supportive of this initiative so we don't anticipate any political hold-ups. We hope to develop and approve contracts by April 15. HC has a boilerplate, non-negotiable insurance requirement.
- The contract start date will be somewhere between March 30 and April 30.
- Basically, we'll have the month of May to rollout in classrooms and media.
- Technical support is available through Paul.
- Note: by law, all proposals become public information. The names of applicants are public information during the proposal stage, and when a contract is signed your full proposal is public information unless you specify that disclosure would hurt your business. For what it's worth, no one ever asks for copies of proposals.

#### Additional resources to be aware of

### Teen Pregnancy Prevention Resources

- National Campaign to Prevent Teen and Unplanned Pregnancy
- Advocates for Youth
- Siecus
- Rutgers University: *Answer & Sex*, etc.
- Guttmacher
- Planned Parenthood
- TeenWise (local)

### Youth/Technology Resources

- Pew Internet & American Life Project
- Isis/TechsexUSA: Youth Sexuality and Reproductive Health in the Digital Age
- North Carolina Text line <http://appcnc.org/brdsnbz-text-message-warm-line>