



**REQUEST FOR PROPOSALS —  
Strategic Communications Plan  
to Address the Opioid Epidemic in South Central PA  
Due: April 28, 2017**

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## **Context**

Ten Pennsylvanians die every day due to opioids. Yet despite many actions being taken at the state and federal levels, the epidemic continues to worsen. Between 2013 and 2014, most counties saw a 20 percent increase in deaths related to drug poisoning.<sup>1</sup> In 2014, the Pennsylvania State Coroners Association reported nearly 2,500 drug-related deaths, half of which were caused by opioid medications and non-legal drugs. Death rates for 2015 and 2016 increased, and emergency responders in South Central Pennsylvania are struggling to keep pace with the crisis.

Data suggest that enough prescription painkillers are prescribed to medicate every American adult, every four hours, for one month.<sup>2</sup> With just 5 percent of the world's population, Americans consume 75 percent of the world's prescription drugs.<sup>3</sup> An estimated 1 in 15 people who take nonmedical prescription pain relievers will try heroin within 10 years.<sup>4</sup>

Until stronger solutions are developed on the supply-side of the opiate epidemic and more consistent action is taken across health care providers, our region risks continuing to deal with these grim outcomes one death at a time.

## **Project Focus**

The purpose of this RFP is to engage a communications firm in launching a strategic communications campaign to address the opiate epidemic in Cumberland and Perry Counties. With many existing addiction resources and physician materials upon which to build, we seek a firm that brings deep expertise in developing educational campaigns that stand to impact the practices of professionals who are in leadership and decision-making roles.

In the fall of 2016, Partnership for Better Health and the Cumberland-Perry County Drug & Alcohol Commission convened a *Task Force on Opiate Prescribing* to explore more effective ways of engaging the health care community in curbing the epidemic by changing the culture and practice of pain management. Our task force is comprised of leaders from three major health systems serving South Central Pennsylvania (i.e., Carlisle Regional Medical Center, Holy Spirit—A Geisinger Affiliate, and PinnacleHealth), the Pennsylvania Medical Society, the Pennsylvania Association of Community Health Centers and the Pennsylvania Dental Association, as well as independent physicians.

The Pennsylvania Medical Society has developed an [Opioid Abuse Resource Center](#), which features a sophisticated set of online and print materials to assist physicians in addressing the opioid crisis. The materials include: a four-part, free online training series; an [Opioids for Pain](#) advocacy initiative and

accompanying patient materials; prescribing guidelines for prescription painkillers; and relevant state and federal policy information. The Pennsylvania Medical Society has invited our task force to more proactively and strategically disseminate these materials to local physicians and other health care providers in our region. Drawing upon these resources, **our task force seeks to pilot a robust physician communications campaign in Cumberland and Perry Counties.**

This project's aim is to more effectively engage the health care community in curbing the epidemic by increasing the use of best practices in pain management, drug prevention and addiction treatment referrals. Knowing that myriad efforts are already underway to communicate with busy physicians, dentists and oral surgeons about the significance of their roles in addressing the epidemic, careful thought and expertise will be required to hone new messages and strategies that resonate with advanced professionals. For example, noting that most clinicians don't seek guidance on how to write prescriptions, are there ways to share meaningful research with them that makes a stronger case about the high risk of addiction that accompanies the use of prescription painkillers? Consideration should also be given to accompanying grassroots or patient-driven educational strategies that educate patients on what to ask their doctors about medications (e.g., Is this medicine addictive? Are there other alternatives?). Complementary, integrated strategies that simultaneously engage health care providers and patients may be ideal.

Firms with significant experience working on health-related communications campaigns in Pennsylvania, and specifically with communications to health care providers, are encouraged to apply. Proposals are due on April 28, 2017 to the Partnership for Better Health. A scope of work, proposal requirements, project timeline and application instructions are shared below.

## Scope of Work

Proposed bids should include two project phases. The first phase is expected to last two to three months and encompass project planning and strategy development. The second phase is anticipated to last up to 12 months and feature project implementation. Projects may focus on, but are not limited to, the following steps:

### **PHASE I PLANNING (2 to 3 months)**

1. Review physician and patient education materials from the Pennsylvania Medical Society. Review regional addiction, overdose and mortality data.
2. Meet with task force members and area health care providers to develop a strong understanding of best channels and methods for communications that target providers.
3. Develop a Communications Plan to disseminate Pennsylvania Medical Society materials to physicians and other care providers throughout Cumberland and Perry Counties. Incorporate multiple channels for physician/health system communications. Tailor strategies for hard-to-reach/hard-to-engage providers.
4. Craft a simple monitoring and evaluation plan.
5. Propose a more detailed budget for Phase II Implementation.

### **PHASE II IMPLEMENTATION (12 months)**

1. Launch a multi-channel communications strategy that shares critical information, tools and resources with health care providers, in ways that are readily accessible and compelling. Include the dissemination of patient education materials that area practices may promote.
2. Target and engage champions in the campaign.
3. Communicate regularly with task force members to report on progress.
4. Regularly gauge and report progress, and refine strategies as needed.
5. Summarize overall results of the campaign, consider prospects for replication in other communities and make recommendations for future efforts.

Toward ensuring the campaign's success, additional ideas and adjustments related to this general scope of work are welcomed.

## Proposal Requirements & Contact Information

Proposals should be clear and compelling but need not be lengthy and may be 5 pages or less (excluding biographies and references). Please include the following components:

- **Qualifications:** Provide a summary explaining why your organization is well qualified for this project. Include organizational profile, length of time engaged in health-related communications campaigns, plus examples of relevant projects.
- **Project Plan:** Describe your proposed approach to developing and implementing a communications campaign that assists health care providers in addressing the opiate epidemic. What steps will be taken to accomplish core goals? During the planning and implementation phases, what will be achieved? How will the campaign impact how physicians address the epidemic moving forward? Please also note any changes to the proposed project timeline, if recommended.
- **Evaluation Plan:** How will progress be documented and how will we know if the campaign is successful? Describe a potentially lean but meaningful assessment plan that documents whether strategic communications result in desired changes related, but not limited, to the following types of measures: the total number of physicians working in Cumberland and Perry County who have completed online opioid trainings hosted by the Pennsylvania Medical Society; the total number of physician practices in Cumberland and Perry Counties displaying patient posters and distributing informational brochures about addiction prevention and treatment resources; a decline in the annual number of opioid-related deaths in Cumberland and Perry Counties; a decline in the number of opiates prescribed by physicians in our counties (i.e., through Medicaid, insurance companies and the PA Drug Monitoring Program data on opiate prescription trends may be available).
- **Budget:** Provide a detailed budget confirming plans for the use of funds for Phase I Planning (up to \$8,000) and Phase II Implementation (up to \$42,000) of the project. Budget expenditures should be well justified and may not exceed \$50,000. Please include hourly fees (with number of hours estimated) or flat rates.
- **Biographies:** Include brief bios for key individual(s) leading the project. Describe their respective roles and responsibilities for this project. If you are selected as a finalist, you will be encouraged to bring key individuals to the interview.
- **Three References:** Please include three references and list the type of work provided for each client. Include company name, address, phone number and contact person.

**TIMELINE & DELIVERABLES:** Projects are expected to begin July 1, 2017. The first two to four months may be dedicated to a planning phase, partnership engagement and resource development. The next 12 months will be dedicated to implementation.

| <b>Proposed Project Timeline</b>           |                           |
|--|---------------------------|
| Release of RFP                             | February 16, 2017         |
| Proposals Due                              | April 28, 2017            |
| Finalists Notified                         | May 12, 2017              |
| Finalist Interviews                        | May 15 to 26, 2017        |
| Selection Announced                        | June 8, 2017              |
| <b>Anticipated Start Date</b>              | <b>July 1, 2017</b>       |
| <i>Projected</i> Planning - Phase I        | July 1 – October 15, 2017 |
| <i>Projected</i> Implementation - Phase II | October 16, 2017          |
| <i>Projected</i> Completion Date           | October 16, 2018          |

**APPLICATION PROCESS:** Final proposals may be submitted via email to Casandra Jewell at: [CJewell@ForBetterHealthPA.org](mailto:CJewell@ForBetterHealthPA.org). Please feel free to direct possible questions about this RFP to Executive Director, Becca Raley (717-960-9009 x4) or Heather Swartz, Communications Specialist (717-960-9009 x6).

- **Confirmation:** You will receive an email confirming our receipt of your proposal within two business days. If you have not heard from us by then, please call so that we can ensure we have received all of your materials (Casandra: 717-960-9009 x0).

## Proposal Review Process

Select members of the Task Force on Opiate Prescribing, the Cumberland-Perry Drug & Alcohol Commission and the Partnership for Better Health will consider each proposal carefully and base their selection upon the following steps.

**Step 1 — Review of Qualifications:** We will determine which groups are best qualified to complete the project based upon: quality of proposals, fit with *strategic communications campaign* goals and expertise in working with health-related organizations.

**Step 2 — Interviews with Finalists:** We will invite finalists to meet with us and make a presentation of their proposed approach and desired outcomes. We anticipate that 2 to 3 individuals/groups will be selected for interviews.

**Step 3 — Calls to Listed Project Partners & Collaborators:** Our group will contact collaborating partners to affirm their commitment to and specific interests in the proposed project.

## References

<sup>1</sup> Pennsylvania State Coroners Association, *Report on Overdose Statistics 2014*. Harrisburg, PA: Pennsylvania State Coroners Association, December 2015.

[http://www.pacoroners.org/Uploads/Pennsylvania\\_State\\_Coroners\\_Association\\_Drug\\_Report\\_2014.pdf](http://www.pacoroners.org/Uploads/Pennsylvania_State_Coroners_Association_Drug_Report_2014.pdf)

<sup>2</sup> Kane, Jason. "Prescription Drug Abuse: Top 10 things CDC Says You Should Know." *PBS News Hour*, 2013.

<http://www.pbs.org/newshour/rundown/prescription-drug-abuse-top-10-things-cdc-says-you-should-know/>

<sup>3</sup> United Nations Office on Drugs & Crime, *World Drug Report 2011*. New York, NY: United Nations, 2011.

[http://www.unodc.org/documents/data-and-analysis/WDR2011/World\\_Drug\\_Report\\_2011\\_ebook.pdf](http://www.unodc.org/documents/data-and-analysis/WDR2011/World_Drug_Report_2011_ebook.pdf) (PDF, 10MB)

<sup>4</sup> National Institute on Drug Abuse, analysis of the National Survey on Drug Use & Health, 2010.

<https://www.drugabuse.gov/related-topics/trends-statistics/infographics/abuse-prescription-pain-medications-risks-heroin-use>