



**Florida Association of Healthy Start Coalitions, Inc.
Professional Development of Home Visiting Programs Project**

**Request for Proposal: Outreach and Social Media Campaign
RFP #2022-02**

Proposal Deadline: June 15, 2022

Florida Association of Healthy Start Coalitions, Inc.
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Tallahassee, Florida 32301
850.999.6200
www.healthystartflorida.com



REQUEST FOR PROPOSAL

Outreach and Social Media Campaign in Support of Professional Development of Home Visiting Programs

Section I: Purpose

The Florida Association of Healthy Start Coalitions, Inc. (FAHSC) is the recipient of the State of Florida, Department of Education (DOE), Division of Early Learning (DEL) contract, #SR310, which provides funding for the Professional Development of Home Visiting Programs Project, which is hereby incorporated by reference. Contract(s) resulting from this solicitation will incorporate by reference FAHSC's DOE DEL contract, #SR310. A copy of contract #SR310 is available upon request.

FAHSC is requesting proposals to support the Professional Development of Home Visiting Programs Project. The purpose of this professional development project is to improve local service networks' awareness of and coordination with home visiting programs; improve local communities' awareness of and enrollment in home visiting programs; and to establish a sustainable infrastructure to maintain ongoing professional development, awareness, and coordination in support of home visiting services for families. This project has two primary areas of work. First, development and delivery of professional development products and services for home visiting and partner agencies to expand access and information to families on Florida's home visiting programs. Second, development and delivery of outreach and social media products and services to expand access and information to families and local service providers on Florida's home visiting programs. The Professional Development of Home Visiting Programs Project will target five high-needs Florida communities. This project is planned to begin June 20, 2022, and be completed by June 30, 2023.

This RFP requests proposals for the development and delivery of outreach and social media products and services to expand access and information to families and local partner agencies on Florida's home visiting programs, including the design and production of a Social Media Plan and Toolkit. The Social Media Plan and Toolkit will include a variety of content developed specifically for various social media platforms as well as communication guides for partner agencies to facilitate customization and use at the local level. Content will be informed by the research and policy work of leading national experts in the fields of maternal and child health and early childhood education, including, but not limited to: Zero to Three; Start Early (formerly known as the Ounce); the Pew Charitable Trusts Home Visiting Project; the federal Office of Head Start; and the federal Health Resources and Services Administration. Content will focus on key messages to promote the benefits of home visiting to families, educate families about available home visiting programs in their communities, connect families with these services, as well as provide general positive parenting tips and strategies. In addition to creating original content for local

programs, the Social Media Plan and Toolkit will include content that incorporates links to vetted early childhood education and care related websites, social media venues, and other platforms of interest to families with young children. All content should be made available in English and Spanish. The Respondent will design, propose a schedule, and deliver the planned social media campaign in each of the five high-need Florida communities, to include standard reporting of posts and views.

The Social Media Plan and Toolkit will be produced in a format that will be easily shared with local partner agencies during virtual professional development events.

When issuing statements or other documents describing projects or programs funded in whole or in part with a FAHSC contract resulting from this solicitation, the contractor shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.” P. L. 103-333, the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act of 1995, § 508 – “Public Announcements and Press Releases”.

In addition, as required by s. 286.25, F.S., if the contractor is a nongovernmental organization which sponsors a program financed wholly or in part by state funds, including any funds obtained through a FAHSC contract resulting from this solicitation, the contractor shall, in publicizing, advertising, or describing the sponsorship of the program, state: “Sponsored by the Florida Association of Healthy Start Coalitions, Inc., and the State of Florida, Division of Early Learning.” If the sponsorship reference is in written material, the words “State of Florida, Division of Early Learning” shall appear in the same size letters or type as the “Florida Association of Healthy Start Coalitions, Inc.”

A. Objective

FAHSC is required to develop an Outreach and Social Media Campaign Plan and Toolkit to support the Professional Development of Home Visiting Programs Project initially in targeted communities and statewide in the future.

The Outreach and Social Media Campaign Plan will include the following information.

1. Identification of key target audiences for outreach based upon the high-needs communities identified in the Outreach and Social Media Campaign Plan.
2. Identification of key links and information to be shared on social media platforms.
3. Identification of the platforms where the links and information will be shared.
4. A schedule for regular releases to target audiences to ensure the resources and information about home visiting are accessible to families. The schedule will include the social media platforms to be used (such as Twitter, Facebook, Instagram, etc.) as identified in the approved Outreach and Social Media Campaign Plan and Toolkit and provide for a minimum of two (2) unique social media posts on a weekly basis throughout the term of this project.
5. Survey of stakeholders to solicit input on Outreach and Social Media Plan and content.

The Outreach and Social Media Campaign Plan will support the following project goals in the targeted high-need communities.

1. Assist partner agencies with connecting families in high-needs communities to home visiting programs.
2. Increase families’ knowledge and awareness of available home visiting programs in their communities and services the home visiting programs provide.
3. Increase families’ knowledge and awareness of the benefits of participating in a home visiting program.
4. Increase families’ knowledge of positive parenting strategies.
5. Increase partner agencies, including specifically Early Learning Coalitions’ Community Resource and Referral Programs’ knowledge and awareness of home visiting programs.
6. Increase local home visiting agencies’ knowledge and awareness of partner agencies, including specifically Early Learning Coalitions’ Community Resource and Referral Program services available in the targeted communities.

B. Deliverables and Timeline

Below is a list of deliverables and an estimated timeline for implementation of the Outreach and Social Media Campaign. Respondent should include any revisions to the timeline that may be needed.

Deliverables

1. Identification of key target audiences/communication contacts, key links, and key social media platforms
2. Review and update of Draft Outreach and Social Media Plan (See Attachment II)
3. Final Outreach and Social Media Plan
4. Draft and Final Outreach and Social Media Tool Kit
5. Survey of stakeholders (communication capacity and Draft Social Media Kit) and report of survey results
6. Technical assistance to support training on local use of Social Media Tool Kit

Timeline

The table below provides an estimated timeline for planning and implementation of the Outreach and Social Media Plan and Toolkit. If deliverables can be met earlier, or if more time is needed, please include this in your proposal.

	Month:	1	2	3	4	5	6	7	8	9	10	11	12	13	14
OUTREACH AND SOCIAL MEDIA CAMPAIGN															
	Compile list of local communications contacts.														
	Conduct survey on local stakeholders' communications capacity.														
	PR firm to assist in finalizing the social media toolkit														
	Gather input on the draft toolkit														
	Submit toolkit to DEL														
15 days	DEL feedback														
15 days	Submit final toolkit to DEL														
	2 social media postings per week														
	Two outreach activities: Community 1 Hendry and Glades														
	Two outreach activities: Community 2 Hamilton and Suwanee														
	Two outreach activities: Community 3 Lafayette														
	Two outreach activities: Community 4 Jackson and Holmes														
	Two outreach activities: Community 5 Franklin														

Budget

Grant funds budgeted for completion of all components of the Social Media Outreach Campaign may be awarded up to \$60,000.

100% percentage of the grant funds budgeted for this project are financed with Federal funds. No costs are financed by nongovernmental sources.

Section II. Evaluation and Selection/Rejection Process

A. Evaluation and Selection Criteria

In order for an RFP Respondent to be considered for a FAHSC Professional Development of Home Visiting Programs Project contract, the Respondent must clearly demonstrate prior successful experience with the development and delivery of outreach and social media products and services. Preference will be given to Respondents with demonstrated, successful prior experience with the development and delivery of outreach and social media products related to promoting home visiting programs, connecting families to services, and child and maternal health information. The table below outlines selection criteria and response scoring.

The specific details shown herein shall be considered minimum unless otherwise indicated. The specifications, terms and conditions included with this RFP shall govern in any resulting contract(s) unless approved otherwise in writing individually by FAHSC.

1. Social Media Campaign Experience (Max Score = 15.00)	15.00
a. Demonstrated experience developing and delivering outreach and social media campaigns, including reporting results.	
b. Demonstrated experience developing targeted content to inform diverse audiences.	
c. Demonstrated experience developing targeted content in both English and Spanish.	
2. Social Media Campaign Experience with Maternal/Family Health Messaging in High-needs Communities (Max Score = 15.00)	15.00
a. Demonstrated experience promoting home visiting programs and connecting families with young children to these services.	
b. Demonstrated experience in developing and promoting social media messaging for families with young children 0-5 years.	
3. Social Media Campaign Toolkit Development (Max Score = 15.00)	15.00
a. Evidence of past successful projects developing social media toolkits for local, independent use, including templates and instructions in a format easily share via virtual training/electronically.	
4. Performance Related to Due Dates (Max Score = 20.00)	20.00
a. Demonstrated experience and success in meeting delivery and reporting timelines/due dates.	
b. Demonstrated experience developing and adhering to a social media campaign delivery schedule.	
5. Prior experience working with diverse stakeholders to implement statewide training and social media activities. (Max Score = 10.00)	10.00
a. Experience participating in meetings/decision making discussions and developing positive solutions to challenges.	

B. Request for Additional Information

FAHSC reserves the right to conduct personal interviews, require presentations or request additional information prior to selection. FAHSC is not responsible for expenses which Respondents may incur in connection with a request for additional information.

The Respondent shall furnish such additional information as FAHSC may reasonably require. This includes information, which indicates resources as well as ability to provide the services. FAHSC reserves the right to investigate the qualifications of the Respondent as it deems appropriate, including but not limited to, background investigations at the entity level, and that of officers, directors, executives, and any individuals identified to be involved in providing RFP related services to FAHSC. Failure to provide additional information requested may result in disqualification of the proposal.

C. Selection Process

Submissions will be reviewed and scored by reviewers with expertise in child and maternal health and experience in working with families in high-need communities.

D. Proposal Rejection

FAHSC reserves the right to reject proposals with or without cause and for any reason, to waive any irregularities or informalities, and to solicit and re-advertise for other proposals. Incomplete or non-responsive proposals may be rejected by FAHSC as non-responsive or irregular. FAHSC reserves the right to reject any proposal for any reason, including, but without limitation, if the Respondent fails to submit any required documentation; if the Respondent is in arrears or in default upon any debt or contract to FAHSC; or has failed to perform faithfully any previous contract with FAHSC or with other organizations. All information required by this RFP must be supplied to constitute a proposal.

Proposals may NOT be accepted unless cost proposals and all required attachments are included. Since terminology may vary, Respondents are required to conform to the RFP Response Template. Exceptions to the proposal specifications should be listed separately and defined, or they will be invalid.

FAHSC reserves the right to award, at its sole discretion, all, or part of the required service(s) to one or more qualified Respondents.

Late submittals, additions, or changes will not be accepted and will be returned to the respondent unopened.

Section III: Terms and Conditions

A. Use of Grant Funds

Allowable and unallowable expenditures are delineated in Federal Public Laws, Catalog of Federal Domestic Assistance (CFDA), and Code of Federal Regulations (CFR).

B. Proposals Binding

All proposals submitted shall be binding for at least one hundred twenty (120) calendar days following opening. FAHSC may desire to accept a proposal after this time. In such case, Respondents may choose whether or not to continue to honor the proposal terms.

C. Representations and Warranties

In submitting a proposal, Respondent warrants and represents that:

1. Respondent has examined and carefully studied all information provided, and any applicable addenda; receipt of which is hereby acknowledged.
2. Respondent is familiar with and compliant with all federal, state, and local laws and regulations that may affect cost, progress, and performance of the goods and/or services in their proposal.
3. Respondent has given FAHSC written notice of all conflicts, errors, ambiguities, or discrepancies that the Respondent has discovered in this RFP and any addenda thereto, and the written resolution thereof by the FAHSC is acceptable to Respondent.
4. The RFP is generally sufficient in detail and clarity to indicate and convey understanding of all terms

and conditions for the performance of the proposal that is submitted.

5. No person has been employed or retained to solicit or secure award of the contract upon an agreement or understanding for a commission, percentage, brokerage or contingent fee, and no employee or officer of FAHSC has any interest, financially or otherwise, in the RFP or contract.

D. Contracting

1. The terms, specifications and conditions of this proposal constitute the total agreement and no further conditions will be accepted.
2. The successful Respondent shall be awarded a contract effective from the date of the contract. This contract may be renewable by mutual agreement of the parties. Option for renewal will only be exercised upon mutual written agreement and with the original terms, conditions and unit prices adhered to with no deviations. Any renewal will be subject to appropriation of funds by the FAHSC. FAHSC, in its sole discretion, reserves the right to negotiate terms and conditions with the successful Respondent.
3. FAHSC shall retain the right to cancel the contract at any time for cause. Such cause for cancellation may include the failure of the contracted Respondent to complete or provide the specified services. If the Respondent is not performing within the terms and conditions set forth by FAHSC, FAHSC will notify the Respondent that the contract will be terminated within ten (10) calendar days for cause from the date of the notification letter. If the contract is canceled, FAHSC may elect to award the contract to the next ranked Respondent or reissue the RFP, whichever is in the best interest of FAHSC. The contract may be canceled in whole or in part by either party by giving a thirty (30) calendar day prior notice in writing to the other party. Any such notice or demand hereunder by either party to the other shall be affected by registered or certified mail, return receipt requested and shall be deemed communicated forty-eight hours after mailing, or by email with read receipt requested and confirmed. The obligations of FAHSC under this award are subject to the terms and conditions established by HRSA.
4. Any and all costs associated with the preparation of a response to this RFP are the responsibility of the Respondent and are not to be passed on to FAHSC.

Section IV: Instructions and Timeline

A. Questions

Questions concerning this RFP shall be directed to Monya Newmyer, Director of Contracts and Grants Administration, at e-mail address **MNewmyer@fahsc.org**, and to no other person or department at the FAHSC. Questions and requests must be sent by e-mail and must be received no later than **May 23, 2022**. All questions should contain the following information: RFP #2022-02, Respondent name, address, phone number, email address, and specific questions or comments. Questions and answers will be posted to the FAHSC website at www.HealthyStartFlorida.com

B. Submission and Deadline for Submission and Withdrawal

The deadline for submission of proposals is **June 15, 2022**. All proposals should be submitted electronically in pdf format to Monya Newmyer, Director of Contracts and Grants Administration at **MNewmyer@fahsc.org**. Please include "FAHSC Professional Development RFP Response" in the subject line of your email submission. Email must be sent with read receipt requested.

Respondents may withdraw their proposals by notifying Monya Newmyer, at e-mail address MNewmyer@fahsc.org in writing at any time prior to the proposal opening date.

Proposals, once opened, become property of FAHSC and will not be returned.

C. Technical Assistance Zoom Meeting

A technical assistance Zoom meeting will be held on **May 25, 2022, at 10:00 am Eastern time** to review this proposal and respond to questions. A Q&A document will be posted on the FAHSC website after the webinar at <https://www.HealthyStartFlorida.com/>

To join the TA Zoom meeting:

Register in advance for this meeting:

<https://us02web.zoom.us/join/register/tZ0lf--tqTsvHdfHajre5JEGFDZEQvY33RIw>

After registering, you will receive a confirmation email containing information about joining the meeting.

D. Format

In order to ensure a uniform review process and to obtain the maximum degree of comparability, it is required that the proposals be organized and include a Table of Contents, Timeline, and clear Scope of Work. All information submitted by the Respondent shall be printed, typewritten, or competed in ink. Proposals shall be signed in ink or use a legal electronic signature.

All proposals shall be submitted as specified in this RFP. Any attachments shall be clearly identified. If publications are supplied by a Respondent to answer to a requirement, the response should include reference to the document number and page number.

Respondents shall prepare their proposals using the format provided in Attachment I.

E. Estimated Timeline

May 19, 2022	RFP posted at www.HealthyStartFlorida.com
May 23, 2022	Submission of Questions Due
May 25, 2022 @ 10:00 am	Technical assistance Zoom meeting
June 15, 2022	Proposals due
June 17, 2022	Award announcement posted at www.HealthyStartFlorida.com
June 20, 2022	Anticipated project start

ATTACHMENT I: RFP RESPONSE FORMAT

COVER PAGE

This Cover Page shall be completed, signed, and included in the Respondent's submission.

**FLORIDA ASSOCIATION OF HEALTHY START COALITIONS, INC.
Professional Development for Home Visiting Programs Project
REQUEST FOR PROPOSAL (RFP) #2022-02**

Entity's Legal Name: _____

Entity's Mailing Address: _____

City, State, Zip: _____

Telephone Number(s): (Including area code) _____

Email Address: _____

Website Address, if any: _____

Federal Employer Identification Number (FEIN): _____

DUNS Number, if any: _____

Amount Requested: _____

Entity's Fiscal Year End Date: _____

Contact Person for Application: _____

Authorized Signature: _____

Printed Name of Authorized Signature: _____

Title: _____

Date: _____

1. Letter of Transmittal

This letter will summarize in a brief and concise manner, the Respondent's understanding of the scope of services and make a positive commitment to provide its services on behalf of FAHSC. The letter must name all persons authorized to make representations for or on behalf of the Respondent, and must include their titles, addresses, and telephone numbers. An official authorized to negotiate and execute a contract on behalf of the Respondent must sign the letter of transmittal.

2. Table of Contents

Include a clear identification of the material by section and by page number.

3. Respondent Organization Profile and Qualifications

This section of the proposal must describe the Respondent, including the size, range of activities, and experience providing similar services.

Each Respondent must include:

Documentation indicating that it is authorized to do business in the State of Florida and, if a corporation, is incorporated under the laws of one of the States of the United States.

Resumes and professional qualifications of all primary individuals and identify the person(s) who will be the Respondent Organization's primary contact and provide the person(s) background, training, experience, qualifications, and authority.

Disclosure of any officer, director, or agent who is related to or is an employee or director of FAHSC or the Healthy Start MomCare Network, Inc.

4. Experience

The Respondent must describe its expertise in and experience with providing services similar to those required by this RFP. Describe previous experience relating to the services requested in this RFP. Respondent should also include three references that FAHSC may contact.

5. Cost Detail

Respondent must include a price for each of the deliverables specified in Section 1.B., of this RFP.

6. Timeline

Respondent must include a proposed timeline of activities and deliverables to be completed which may be different than the timeline included in Section 1.B., of this RFP.

7. Additional Information

Any additional information which the Respondent considers pertinent for consideration should be included in a separate section of the proposal.

ATTACHMENT II: DRAFT OUTREACH AND SOCIAL MEDIA PLAN FROM THE OEL CONTRACT

4.0 Outreach/Social Media Campaign

4.1 Social Media Draft Plan

It is suggested that the Project Team, determined by OEL, should develop an outreach/social media campaign consisting of The Helping Hands for Growing Families (HHGF) Social Media Toolkit, complete with communication guides, graphics, web-links, and branded content to assist Early Learning Coalitions and other stakeholders with connecting families in targeted high-needs communities to home visiting programs. Customizable social media content should be introduced during the trainings, along with guidance for implementation at the local level. The Project Training Team should have the Toolkit ready for dissemination at the trainings.

The HHGF Social Media Toolkit content development should be informed by the research and policy work of leading national experts in the fields of maternal and child health and early childhood education, including, but not limited to: Zero to Three, Start Early (formerly known as the Ounce), the Pew Charitable Trusts Home Visiting Project, the federal Office of Head Start, and the federal Health Resources and Services Administration. It is suggested that the visual content be created with input from a graphic art designer to be identified by the Project Team. A small group of local stakeholders should be invited to provide feedback on various elements of the HHGF Social Media Toolkit prior to the dissemination and training.

4.2.1 During the ten stakeholder Zoom calls held in early May of 2021, the Center's Project Team shared the purpose of the social media campaign and invited participants to provide input through the follow-up survey, also disseminated in May of 2021. The Center's Project Team informed call participants that there would be future information requests completed during the second phase of the project to gather their input on these activities. Additional input may be sought on issues specific to local stakeholders that may inform the Toolkit content development, such as the perceived social, cultural, and structural barriers to families participating in home visiting services in their communities.

Based on responses from the survey and May 2021 stakeholder meetings, the feedback regarding types of social media most often used will influence the recommended social media schedule and types of graphics designed. To date, the platforms most universally used include Facebook, Instagram, Twitter, as well as provider websites and email blast tools such as MailChimp.

4.2.2 Identification of high-needs communities throughout the state was completed using the previously published 2020 MIECHV Needs Assessment, which identifies at-risk communities by county, subcounty and zip code. Please see the attached list of counties at the end of this plan. Zip code level data could be shared at the regional trainings as a resource to ensure local programs are aware of the highest need zones within their service areas.

4.2.3 It is suggested that the HHGF Social Media Toolkit include a variety of content developed specifically for various social media platforms, as well as communication guides for stakeholders to facilitate customization and use at the local level. Content should focus on key messages to promote the benefits of home visiting to families, educate families about the available home visiting programs in their communities, connect families with these services, as well as provide some general positive parenting tips and strategies. In addition to creating original content for local programs to share, it is suggested the Toolkit include content that incorporates links to vetted early childhood education and care related websites, social media venues, and other platforms of interest to families with young children.

The Center's Project Team suggests that the HHGF Social Media Toolkit contain graphic and video posts, and written content to support the key messages listed above. Some content could be more general and ready to share on various platforms and some elements will need to be customized to provide community-specific information. For the customizable content, instructions should be provided to assist local programs. In addition to the original content created, it is suggested that blank templates be created as well so local stakeholders can extend the messaging in ways that are unique to their community. A Communication Guide on best practices for sharing on social media could be provided for local programs who may not have the benefit of a Communications or Public Relations professional in their organization.

4.2.4 As with the other phases in this project, it is suggested that the Project Team identified by OEL provide several options for local stakeholders that can be utilized as much or little as needed, based on the specific situation in each program and community. To that end, planning by the Center for the Social Media campaign does not include a specific schedule for content release, but instead a suggested strategy for regular releases to target audiences. The target audience includes those in high-needs communities identified by the 2020 MIECHV Needs Assessment map, home visitors, and Early Learning Coalition staff, specifically CCR&R. The HHGF Social Media Toolkit objectives, methods, and measures can be seen in the first table below. The second table contains the suggested overall timeline for the social media piece of the plan.

Table 1: Suggested Toolkit Objectives, Methods, and Measures

Objective	Social media platform	Weekly and Monthly Metric(s)
Increase <i>families'</i> knowledge and awareness of home visiting programs and how to access services.	Facebook, Instagram	Views, followers, shares, etc. Weekly social media post recommended.
Increase <i>families'</i> knowledge of the benefits of participating in a home visiting program.	Facebook, Instagram	Views, followers, shares, etc. Weekly social media post recommended.
Increase <i>families'</i> knowledge of positive parenting strategies.	Facebook, Instagram	Views, followers, shares, etc. Weekly social media post recommended.
Increase <i>local</i> CCR&R knowledge of home visiting programs in local communities, especially those most in need.	Website, Facebook, Twitter	Comments, likes, shares, @mentions, Views, etc. Weekly engagement recommended.
Increase <i>home visitor's</i> knowledge of services provided by referral agencies such as, CCR&R, HMG and 2-1-1.	Website, Facebook, Twitter, Instagram, Mailchimp	Website clicks, email signups, Views, followers, shares, etc. Monthly reminder engagements recommended.

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At this time, a contract has not been awarded to an entity to develop the HHGF Social Media Toolkit. The table below provides suggested activities to be completed in a five-month timeframe. The new grantee can modify as appropriate.

Table 2.

Suggested Activities	Suggested Timeline (Initiation-Completion)	Suggested Short Term Outcome/ Measures	Suggested Key Partners
Compile contact list of Communications contacts at local program level	August 1, 2021	List of contacts for follow up survey	Primary: DOE OEL, DOH HV, ELC HMG, 211, DCF, CCR&R
Survey original Survey participants and identified Social Media contacts with follow up survey specific to local stakeholders? Communications capacity and perceived barriers to home visiting services.	August 15, 2021	Data to influence the design of the Social Media toolkit to best meets the needs of local programs.	Primary: DOE OEL, DOH HV, ELC HMG, 211, DCF, CCR&R
Develop HHGF Social Media toolkit content	September-December 2021	Draft HHGF Social Media Toolkit	Graphic Designer
Gather input on various components of the Social Media Toolkit from small group of stakeholders and make revisions, where necessary	November-December 2021	Data to guide any necessary revisions to the Toolkit.	Primary: DOE OEL, DOH HV, ELC HMG, 211, DCF, CCR&R
Provide Toolkit and training in accordance with the Training Plan	December-March 2022	Final HHGF Toolkit & training materials and records	Primary: DOE OEL, DOH HV, ELC HMG, 211, DCF, CCR&R

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