

Dissemination and Implementation Action Plan

REQUEST FOR PROPOSAL

RFP # PCO-DIAP2013

KEY DATES	
RFP Released	August 30, 2013
Deadline for RFP Questions	September 16, 2013
Deadline for Proposals	October 25, 2013
Semifinalists Notified	November 15, 2013
Semifinalists Interviews in Atlanta, Georgia	November 20 or 21, 2013
Projected Award Date	November 29, 2013
Projected Start Date	December 2, 2013



About PCORI

PCORI was authorized by the Patient Protection and Affordable Care Act of 2010 as a non-profit, nongovernmental organization and is charged with helping patients, clinicians, purchasers, and policy makers make better-informed health decisions by “advancing the quality and relevance of evidence about how to prevent, diagnose, treat, monitor, and manage diseases, disorders, and other health conditions.” It does this by producing and promoting high-integrity, evidence-based information that comes from research guided by patients, caregivers, and the broader healthcare community.

PCORI’s strong patient-centered orientation directs attention to individual and system differences that may influence research strategies and outcomes. PCORI is charged with producing useful, relevant clinical evidence through the support of new research and the analysis and synthesis of existing research.

PCORI is committed to transparency and a rigorous stakeholder-driven process that emphasizes patient engagement. PCORI uses a variety of forums and public comment periods to obtain public input to enhance its work.

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Opportunity Snapshot

PCORI is seeking a contractor to develop an action plan for the dissemination and implementation (“D&I”) of comparative effectiveness research (CER) findings, as well as the process for evaluating those efforts.

Background

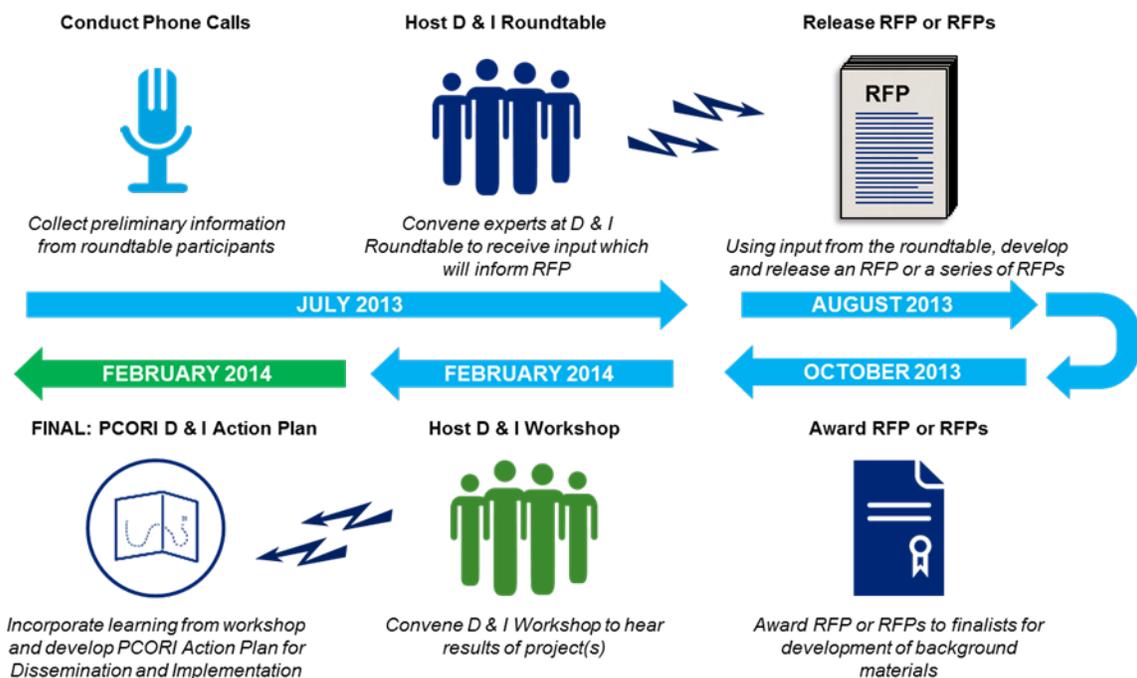
The Patient Centered Outcomes Research Institute (PCORI) was established to conduct research to provide the best available evidence to help patients, those who care for them, payers, policy makers, and others make better informed decisions. PCORI’s research is intended to give patients and their caregivers a better understanding of the prevention, diagnosis, treatment, and care options available and the science that supports those options. It is important that PCORI successfully disseminate research findings and evidence to ensure that patients, caregivers, and key stakeholders receive timely and relevant information to facilitate decision making.

The Patient Protection and Affordable Care Act, PCORI’s establishing legislation states in section (a)(2)(c), “The purpose of the Institute is to assist patients, clinicians, purchasers, and policy-makers in making informed health decisions by advancing the quality and relevance of evidence...**and the dissemination of research findings** [emphasis added] with respect to the relative health outcomes, clinical effectiveness, and appropriateness of the medical treatments, services, and items described in subsection (a)(2)(B).” However, a significant gap exists between research findings and their adoption into clinical practice. It can take upwards of 17 years for research findings to be used in practice. PCORI is interested in closing that gap by effectively disseminating its research findings to affect health outcomes, clinical effectiveness, and medical treatments and services. In accordance with the establishing legislation and due to its interest in speeding the implementation of CER, PCORI is seeking to develop a comprehensive action plan for its D&I activities.

PCORI began the process for developing its D&I Action Plan by convening multiple stakeholders at a roundtable and webinar event in July 2013 (see Figure 1). Roundtable panelists represented various stakeholder groups (e.g., patient advocacy groups, providers, clinicians, caregivers, payers, purchasers, medical education groups, professional and specialty societies, journalists, the media, and research and policy groups) who provided their advice on what PCORI’s D&I Action Plan should encompass. Participants shared their experiences, success stories, and insights into the barriers,

facilitators, frameworks, and strategies for dissemination, implementation, and evaluation. The roundtable was open to the public through a live webinar with over 300 participants. Input was garnered through the online chat, a web portal, Twitter, and email. The roundtable discussion was used to inform the scope of work outlined in this request for proposal (RFP). Below is a summary of the roundtable and high-level comments from the participants.

Figure 1: Process for Developing PCORI’s Blueprint for Dissemination and Implementation



Meeting Summary

Dr. Anne Beal, PCORI’s Deputy Executive Director and Chief Officer for Engagement, set the stage by sharing PCORI’s interest in developing a D&I Action Plan. Then Dr. Brian Mittman, Senior Advisor to the Center for Implementation Practice and Research Support at the Veterans Administration and member of PCORI’s Methodology Committee presented an overview of D&I terminology, challenges, successes, and barriers. He also described five common themes found in over 60 different frameworks that PCORI should consider in creating its action plan. Dr. Mittman presented multiple frameworks in his presentation; the framework he titled “Conditions for Practice Change” was used to initiate the roundtable discussion.

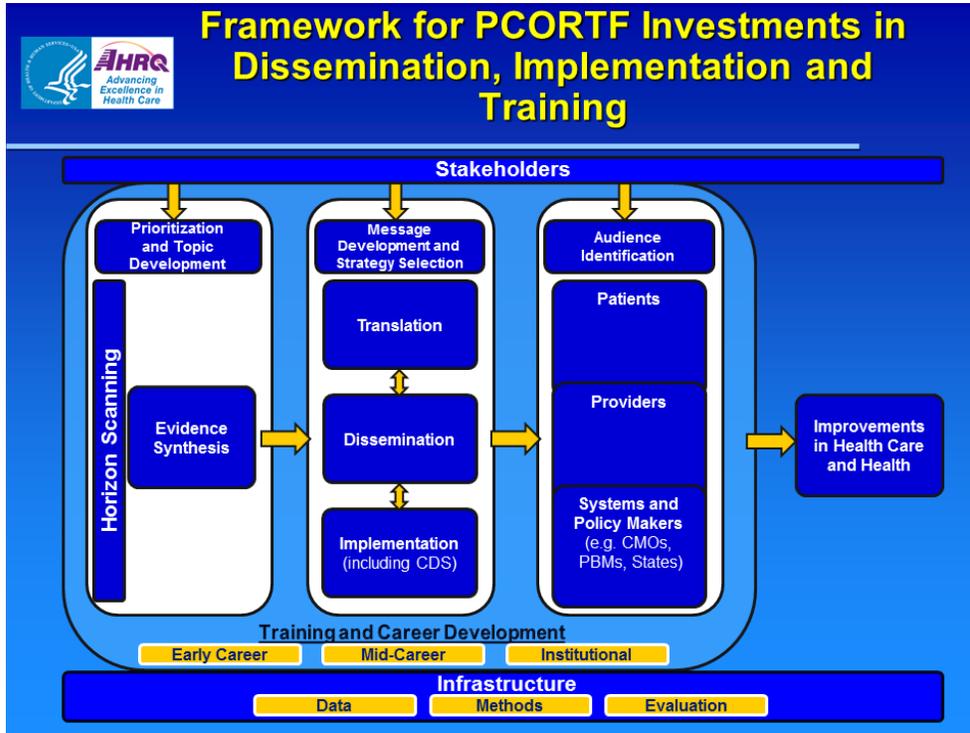
Framework: Conditions for Practice Change

- Valid, relevant, accepted evidence
- Knowledge, skill
- Evidence of quality/implementation gaps
- Requisite logistics, resources
- External expectations, pressure
- Supportive professional norms
- Facilitation, technical assistance
- Implementation gap etiology, planning

Next, Jean Slutsky, Director for the Center for Outcomes and Evidence, Agency for Healthcare Research and Quality (AHRQ), outlined AHRQ's framework for the Patient-Centered Outcomes Research Trust Fund (PCORTF) investment in dissemination, implementation, and training (Figure 2), as well as AHRQ's current D&I activities, so that PCORI can align its efforts with AHRQ and other key stakeholders. She described projects focused on dissemination, implementation, and translation, as well as training and career development. AHRQ's focus on D&I research activities related to PCOR findings include activities to identify:

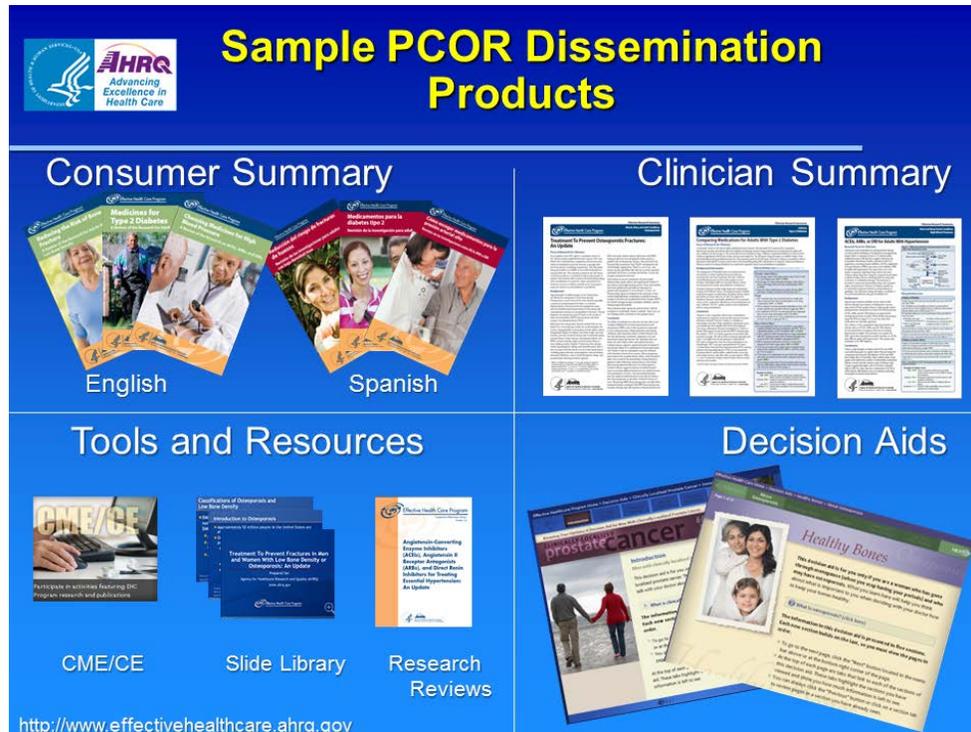
- Efficient and successful dissemination methods
- Successful methods of translation for intended audiences
- Methods for implementation of findings into practice

Figure 2: AHRQ's Framework for PCORTF Investment in Dissemination, Implementation, and Training



Additionally, Ms. Slutsky provided a sampling of the dissemination products AHRQ produces through their PCORTF investments, which include consumer summaries, clinician summaries, decision aids, and tools and resources (see Figure 3).

Figure 3: Sample of AHRQ's PCOR Dissemination Products



After the presentations, the roundtable panelists responded to the following questions:

- Given your personal experience in D&I, what are the lessons learned, barriers, and successful facilitators in D&I?
- What strategies can PCORI use to build on or complement AHRQ's current work in D&I?
- What key elements would you like to see in PCORI's blueprint to help your organization with implementing research findings?
- What is the best approach to develop a framework for implementing results of comparative effectiveness research (CER)?
- Which already existing frameworks would you recommend be reviewed for developing PCORI's blueprint for D&I?
- What would you include in the scope of work for the request for proposal (RFP), and what are the key abilities we should seek among applicants interested in developing a framework in response to the RFP?

Although panelists mentioned various frameworks throughout the event, they agreed that there is not a one-size-fits-all approach for D&I of research results. Instead, many

panelists emphasized the need for multiple D&I strategies, and an action plan that allows for local customization, strategic partnerships, effective communication, forward-thinking, and tailored messages. Key themes are listed below. Details for each theme, the comprehensive meeting summary, presentation slides, a list of panelists, and a recorded webinar [are available online](#).¹

Key Themes

- There are no standardized frameworks and strategies for D&I
- Multiple implementation challenges exist
- Many challenges are associated with technical assistance
- D&I efforts must be current, including focus on timely evidence and research information
- Investment in decision support tools for patients/providers are needed
- Leverage effective communication methods and best practices for D&I
- Identify incentives to speed the adoption of D&I efforts
- Understand all population needs, including those of traditionally underserved populations
- Engage key partners and stakeholders
- Leverage non-healthcare best practices and existing D&I frameworks/models
- Create a D&I Action Plan with focus on the future and supporting technology
- PCORI's plan must include evaluation and opportunities for course correction
- Highlights of competencies for D&I contractors
- Identify needs in translation, readiness, and appropriate channels of communication
- PCORI should align its D&I efforts with those of key stakeholders to avoid duplication

¹ Available at <http://pcori.org/events/dissemination-and-implementation-roundtable/?type=past>

Dr. Beal closed the meeting by highlighting the following goals for the PCORI D&I Action Plan:

- Gain feedback from experts on what PCORI should and should not do
- Understand key implementation and research gaps
- Identify key partnerships
- Gain stakeholders' input on an action plan to incorporate PCORI's findings into practice

Future Workshop

After the contractor is selected, the project period will begin, and will include a workshop in February 2014 where the PCORI D&I Action Plan will be made available for further public input. After the February workshop, the contractor will be responsible for incorporating the feedback into the final PCORI D&I Action Plan, which PCORI will use to disseminate and help implement research findings.

Role of the Contractor and Multi-Stakeholder Consortia

Given the diversity of stakeholder groups who would be targeted for PCORI's D&I efforts, it is clear that any single contractor is unlikely to have experience with the full range of target groups. Thus, the contractor for this project will provide both primary expertise in D&I and will be expected to convene a consortium of a diverse group of subcontractors to provide complete and comprehensive expertise for outreach to a broad range of target groups.

The contractor will work in collaboration with subcontractors to complete the requested tasks. The contractor will be responsible for coordinating and managing the work of its subcontractors to meet all requirements. PCORI recommends that the team of subcontractors include representation across the entire healthcare landscape, including: health systems, clinicians, journalists, the media, researchers, employer groups, public and private payers, and health technology organizations, including social media and app developers. However, the contractor may modify or enhance the makeup of the subcontractor team to include other representation important to the success of this scope of work. The purpose of the subcontractor team is to:

- Tap into the broad knowledge base and expansive networks of organizations experienced in local, regional, or national D&I
- Identify partners to collaborate with PCORI
- Explore and evaluate different frameworks for D&I
- Build upon the existing dissemination and communication frameworks

PCORI seeks organizations that have demonstrated experience in communications, dissemination, and evaluation in health and the healthcare community. The contractor should have ties to, and partner with, the various stakeholder groups involved in D&I of research results. They will perform operational report management and provide deliverables to PCORI. This reporting will help to ensure that PCORI monitors the development of the action plan.

In addition, the contractor must tie project activities, deliverables, and milestones to expenditures. In an organized fashion, the contractor must provide monthly invoices to PCORI that detail progress, results, and associated expenditures. This will facilitate timely recognition of expenditures by PCORI.

Funds Available, Budget, and Project Period

Because of the unique nature of the project, Scope of Work, and subcontracting arrangement, PCORI is not establishing a funding target. Rather, PCORI is seeking innovative proposals that will provide best value to the organization. Since PCORI expects to award a cost-reimbursable contract, budgets should clearly delineate all proposed direct and indirect costs. All key personnel should be listed with rates and hour/level-of-effort commitments. Commitments from all proposed subcontractors should be included in the Appendices of the Technical Proposal (these will not count toward page limitations) along with budget details/cost estimates. All proposed travel must be pre-approved by PCORI and will be reimbursed, at cost, according PCORI travel regulations. Budgets should list expenses from the award date (approximately December 2013) through March 2014, with an option estimate for continued work through July 2014.

Organizational Eligibility

Qualified applicants for the role of contractor include:

- Organizations with reach into the patient, consumer, and other key stakeholder groups (e.g., clinicians, plans, health systems, purchaser groups)
- Organizations with experience in communications, dissemination, and evaluation in health and the healthcare community across a diverse set of groups and whose experience is not limited to a specific disease type, one specific demographic group, or one type of stakeholder or researcher

Only US organizations can apply, and all applicant organizations must be recognized by the Internal Revenue Service.



Period of Performance

The expected period of performance is from date of award (approximately December 2013), includes the workshop in February 2014, and ends with the delivery of the final D&I Action Plan based on the background work and incorporation of feedback from the February workshop. It is expected the final version of the plan will be delivered within 30 days after the February workshop. There will be an option for work to continue, if necessary, through July 2014. The cost proposal should support the full engagement through July 2014.

Place of Performance

The contractor is required to provide their own facility for the services required. This function shall be staffed by the contractor personnel and located at its offices.

Hours of Service

It is expected that the contractor will be available for project support, Monday through Friday, between 8:30 am and 5:30 pm (ET). PCORI has regular observance of federal holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day.

Type of Contract

It is expected that the contract executed will be cost reimbursable with fully justified direct and indirect costs. All key personnel must be included along with actual salary rates and proposed hour/level-of-effort commitments. Also include resumes, curriculum vitae, and other support documentation for the rates requested for key personnel and subcontractors. Likewise, all indirect rates and fees must be fully disclosed and supported with either government-issued documents (Indirect Cost Rate Agreements or Facilities and Administrative Rate Agreements) or independently audited financial statements. Contractors will be expected to submit monthly invoices that detail prime expenditures, subcontractor expenditures, and associated progress reports.

Please refer to the Cost Proposal section in Step 3 ([page 14](#)) for additional details. Specific terms and conditions will be provided to the winning contractor and follow PCORI's standard contracting format. All contractors are required to execute Non-Disclosure Agreements (NDAs) and Conflict of Interest (COI) forms prior to final contract execution.



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Overview—PCORI Five-Step Process



Step 1. Review the Program Detail

Review the Scope of Work for enumerated tasks.

Step 2. Consider the Requirements

Consider the organization eligibility requirements and PCORI's specific requirements of the tasks to see if your organization, your interests, and your capabilities fit this request for proposal.

Step 3. Develop Your Solution

Design your response to accomplish the Scope of Work for the tasks, satisfy the expected deliverables on time, and provide services that demonstrate ingenuity and collaboration. Be sure to include a cost proposal that is clear and concise, along with justification for all direct and indirect costs.

Step 4. Know the Review Criteria

Understand PCORI's evaluation factors and how they are weighted.

Step 5. Submit Your Proposal

Compile and submit your proposal to include Volume I: Technical Proposal and Volume II: Cost Proposal, in addition to other materials and supporting documentation. All proposals must be submitted no later than 5 pm (ET) on October 25, 2013.



Step 1: Review the Program Detail

Scope of Work

The contractor is expected to develop its own approach, methodologies, processes, policies, and systems for performing the required Scope of Work. PCORI expects to assess innovative D&I solutions that can be evaluated and tested.

The main objectives of the PCORI D&I Action Plan are as follows:

- Conduct a landscape review to identify key players and related healthcare initiatives that engage in D&I of research findings and health information
- Develop a draft action plan for how PCORI will disseminate its research findings for implementation into practice
- Collaborate with multiple stakeholders to ensure the draft PCORI action plan is in alignment with, and includes full representation across, the healthcare landscape
- Develop processes for evaluating and measuring the impact of PCORI's D&I efforts
- Solicit input and feedback from stakeholder groups through the entire scope of work period to ensure that the proposed recommendations for the draft action plan are introduced to and vetted by key stakeholders
- Ensure draft action plan includes a focus on coordination and alignment with other groups, including AHRQ, to avoid duplication of D&I efforts
- Build on and leverage PCORI's current research activities and infrastructure projects
- Identify gaps for further research in dissemination, implementation, and respective evaluation methods and tools
- Identify key partnerships for PCORI's D&I efforts
- Create an action plan that provides a variety of practical tools or templates, such as step-by-step instructions and check lists

The Scope of Work in the proposal should address the following tasks:

- Task 1: Conduct landscape review and gap analysis and develop case studies of promising practices for D&I
- Task 2: Create draft PCORI D&I Action Plan
- Task 3: Solicit stakeholder feedback on the draft PCORI D&I Action Plan
- Task 4: Revise draft PCORI D&I Action Plan
- Task 5: Help plan and coordinate February D&I Workshop
- Task 6: Present draft PCORI D&I Action Plan at the February D&I Workshop
- Task 7: Deliver final PCORI D&I Action Plan incorporating feedback from February Workshop
- Task 8: Deliver recommendations for evaluating and measuring the impact of PCORI's D&I Efforts
- Task 9: Contingent—Conduct D&I test and evaluation using PCORI's Pilot Programs (expected release of findings in December 2013)

Task 1: Conduct Landscape Review, Gap Analysis, and Develop Case Studies of Promising Practices for Dissemination and Implementation

The contractor shall work with PCORI to develop a proposed plan for Task 1 that will provide an overview of the key players and priority patient populations, identify D&I best practices, describe how patients and consumers receive and use information, and identify gaps in D&I research and evaluation, as well as unique gaps that PCORI could address. In Task 1, the contractor and the subcontractor team will conduct a landscape review, interviews, and gap analysis and develop case studies that will inform the draft PCORI D&I Action Plan. The task will culminate in two major deliverables: the landscape review and the draft PCORI D&I Action Plan.

1.1. Project Kick-Off Meeting

The contractor shall conduct a project kick-off meeting with the client to discuss project objectives and expected plans.

1.2. Propose Plan for Task 1

1.2.1. The contractor shall verify and understand the studies that have been funded in the PCORI program areas to date and the studies that fall under the communication and dissemination research portfolio. The contractor shall also review PCORI's Pilot Programs, so that the research plan and D&I action plan recommendations build from current PCORI activities.

1.2.2. The contractor shall propose a plan to PCORI and revise the plan in response to client feedback.

1.3. Conduct Landscape Review and Interviews

1.3.1. Provide an inventory of key leaders, organizations, and players involved in the D&I of healthcare information:

- The contractor shall identify current efforts of key organizations and individuals; their mission specific to D&I; their preferences for communication frameworks, methods, infrastructure, and forums; stakeholder/audience groups PCORI should target; research topics disseminated; and evaluation processes, methods, and frameworks that are used to measure success. The contractor shall also identify unique areas PCORI could address to improve healthcare.
- The contractor shall ensure the inventory encompasses health systems, clinicians, journalists, the media, researchers, employer groups, public and private payers, and health technology organizations, including social and app developers. The contractor shall also provide other representations and/or stakeholder groups that would add value to the PCORI D&I Action Plan.

1.3.2. Identify and describe best practices for D&I and evaluation:

- The contractor shall demonstrate an approach for answering the following key questions about D&I efforts generally, as well as efforts specific to research and evidence findings:
 - What are the best practices for communicating evidence, including what works, what doesn't work, and best practices for implementation?
 - What methods and tools help with implementation and decision-making?
 - What are the standard formats and channels for communicating information in healthcare and research?
 - What methods or frameworks are currently being used successfully, and what are the limitations and barriers?
 - How might the current communication methods and strategies change over time?
 - How are messages tailored to various audience groups within healthcare?

- How do successful organizations evaluate and measure success of their D&I programs and activities? For example, what evaluation criteria, metrics, checklists, or other tools are successful organizations using to measure success?
- The contractor shall also identify areas PCORI should investigate to improve healthcare.

1.3.3. Analyze the communication and D&I needs of all stakeholder groups:

- The contractor shall demonstrate an approach for answering the following key questions:
 - How do stakeholder groups receive, consume, use, and implement healthcare communications?
 - What are the best methods, mediums, formats, and incentives to increase adoption of clinical effective research in making informed decisions?
 - What are the major barriers to disseminating and implementing evidence into practice?
 - What channels do stakeholders perceive as trustworthy and credible?
- The contractor shall demonstrate an approach to understanding the needs of all patient populations, including a focus on the general healthcare community and PCORI's priority populations:
 - Racial and ethnic minority groups
 - Low-income groups
 - Women
 - Children (ages 0–17)
 - Older adults (ages 65 and older)
 - Residents of rural areas
 - Individuals with special healthcare needs, including individuals with disabilities
 - Individuals with multiple chronic diseases
 - Individuals with rare diseases
 - Individuals whose genetic makeup affects their medical outcomes
 - Patients with low health literacy/numeracy and limited English proficiency
 - Lesbian, gay, bisexual, and transsexual (LGBT) persons.

- The contractor shall demonstrate an approach for addressing underserved populations and the methodologies that will be leveraged to identify gaps PCORI should fill.
- The contractor shall focus on effective communications for shared decision making, including guidance for caregivers.

1.3.4. Interview at least 20 organizations, including at least 15 in the health sector and 5 in the non-health sector:

- The contractor shall collaborate with PCORI to identify the targeted list of stakeholder interviews and shall propose an interview guide with key questions.

1.4. Conduct Gap Analysis

Based on the findings of the landscape review, the contractor shall conduct a gap analysis with focus on the following questions:

- What are the communication and D&I barriers PCORI should investigate further?
- What are unique gaps PCORI could fill to improve healthcare and research?

1.5. Develop Case Studies

The contractor shall develop five case studies of organizations in the health sector and three case studies of non-health sector organizations that serve as examples of successful and effective D&I and evaluation activities.

1.6. Summarize Findings and Submit Landscape Report

Based on findings from Task 1.1–1.5, the contractor shall submit the final landscape review, which includes an executive summary, to the designated PCORI point of contact.

Task 2: Create Draft PCORI D&I Action Plan

After completing Task 1, the contractor shall create a draft PCORI D&I Action Plan. The contractor shall include results from the landscape review, gap analysis, and case studies to inform and develop the draft PCORI D&I Action Plan. The draft plan should include:

- Executive Summary
- Methods and multi-level frameworks for D&I
- Engagement strategy for partnerships and stakeholder buy-in
- Evaluation plan, metrics, and proposed checklists

- Gaps and research PCORI should further investigate
- Quality improvement and safety framework
- Plan for testing and evaluation of the PCORI's Pilot Programs

Task 3: Solicit Stakeholder Feedback on the Draft PCORI D&I Action Plan

The contractor shall solicit feedback and input from multiple stakeholders by presenting the draft PCORI D&I Action Plan, which includes all components listed in Task 1.7. Engaging stakeholders will help PCORI gain buy-in and build relationships with key partners who will work with PCORI in its D&I efforts after the Action Plan is complete.

3.1 Confirm Stakeholders

The contractor shall work with PCORI to confirm the list of stakeholders for feedback.

3.2 Develop Approach

The contractor shall propose an approach for soliciting feedback from stakeholders. Workshops, webinar, teleconferences, or other formats will be considered. The contractor and the subcontractor team shall provide a summary of stakeholder input within one week of completing the task.

3.3 Solicit Input from Multiple Stakeholders

3.4 Plan to Incorporate Stakeholder Input into D&I Action Plan

The contractor shall meet with the designated PCORI point of contact (during weekly checkpoint meetings) to discuss inputs from Task 3 as well as propose revisions to the PCORI D&I Action Plan.

Task 4: Revise PCORI D&I Action Plan

The contractor shall incorporate stakeholder input from Task 3 and conduct research and/or additional interviews to complete identified gaps areas.

Task 5: Help Plan and Coordinate February D&I Workshop

In advance of the February Workshop, PCORI will send a copy of the landscape review and the revised PCORI D&I Action Plan to workshop participants. The purpose of the workshop is to present the PCORI D&I Action Plan publicly and to receive final input from key stakeholders and the general public. After the workshop, the contractor shall



submit a meeting summary and incorporate stakeholder feedback into the final PCORI D&I Action Plan. The contractor will also include a response table or an instrument which can be shared with the public and used to respond to contributors. It will identify the feedback/recommendation, the source, and how the input was or was not incorporated into the action plan. The response table will be made public to demonstrate responsiveness and ensure inclusion.

5.1 Confirm Stakeholders

The contractor shall work with PCORI to confirm the list of stakeholders for the workshop.

5.2 Determine Public Input

The contractor shall propose an approach to capture public input and implement how that feedback will be incorporated into the final PCORI D&I Action Plan, as well as communication to the contributors demonstrating what was done with their input.

5.3 Co-Host Workshop

The contractor will work with PCORI to convene stakeholders for the workshop. The contractor and the subcontractor team shall provide a meeting summary within 2 weeks of the workshop.

Task 6: Present PCORI D&I Action Plan at the February D&I Workshop

At the February workshop, the contractor will present the PCORI D&I Action Plan.

6.1 Incorporate Responses into Final PCORI D&I Action Plan

The contractor shall meet with the designated PCORI client (during the weekly checkpoint meeting) to discuss inputs from the February D&I workshop as well as propose final revisions to the PCORI D&I Action Plan and provide a response table to be made public. The final PCORI D&I Action Plan should be submitted in accordance to the date recorded in the deliverables table, along with the response table.



Task 7: Contingent—Conduct D&I Test and Evaluation using PCORI’s Pilot Programs (Expected December 2013)

The contractor shall test and evaluate the D&I PCORI Action Plan using the PCORI’s Pilot Programs. The contractor shall propose:

- An approach for testing and evaluation.
- Identify the infrastructure, facilities, and tools that will be used for testing and evaluation of the D&I Action Plan.

7.1 Submit Testing and Evaluation Plan

7.2 Execute Test(s)

7.3 Refine PCORI D&I Action Plan with Lessons Learned from Testing and Evaluation

Contingent on Task 1–6, the contractor may be required to submit a D&I testing and evaluation proposal for PCORI’s Pilot Programs.

2

Step 2: Consider the Requirements

Contractor Requirements

The contractor/subcontractors must have the following experience and meet the following mandatory requirements (identify which of these will be subcontracted in the proposal):

- Be familiar with PCORI's purpose and the principles of patient-centered outcomes research, recognizing the types of research that PCORI does and does not fund
- Be familiar with AHRQ's D&I activities to ensure that PCORI's action plan does not overlap
- Be qualified to coordinate and manage a consortium or subcontractor team to complete the work
- Have significant expertise in communications strategies and evaluation or testing of communication efforts, especially with health and healthcare groups
- Be able to partner and collaborate with key health stakeholder groups, such as providers, clinicians, patients, researchers, and societies
- Have significant experience and skill using social media, as well as mobile health and application technology for communications
- Be able to access and research PCORI's priority populations
- Have familiarity using shared decision making to implement CER
- Have familiarity working with registries.
- Have familiarity with implementation and decision-support tools, such as clinical guidelines and technical assistance for implementers
- Have experience with communications strategies in non-health industries
- Be prepared to participate in and present findings at a workshop
- Develop an approach to incorporate stakeholder and public input
- Include a plan to measure and evaluate the proposed strategies

Multi-Stakeholder Consortia

The contractor must manage a consortium of subcontractors with broad representation and diverse experience working with health and healthcare groups. The contractor will assemble and coordinate with a subcontractor team that includes health systems, clinicians, journalists, the media, researchers, employer groups, public and private payers, and health technology organizations, including social and app developers. The



contractor may modify or enhance the makeup of the subcontractor team to include other representation.

Deliverables

In support of the enumerated tasks, the contractor shall provide the following deliverables within the time frame noted below.

Task	Deliverable	Due Date
Task 1	Kick-off Meeting	Dec 4, 2013
Task 1	Research Proposal	Dec 12, 2013
Ongoing	Weekly Checkpoints with PCORI	Ongoing
Task 1	Landscape Review	January 14, 2014
Task 2	Draft PCORI D&I Action Plan	January 24, 2014
Task 3	Stakeholder Input Summary	1 week after input received
Task 4	Revised PCORI D&I Action Plan	1 week before February workshop
Task 5	Stakeholder Workshop	February 2014
Task 5	Stakeholder Workshop Summary	1 week after workshop
Task 6	Final PCORI D&I Action Plan (including proposal for testing and evaluation)	March 31, 2014
Task 7	Contingent—Testing and Evaluation Report	TBD, 2014

Technical Proposal Measurement Criteria

Criteria for measuring quality of the Technical Solution are shown below.

Service	Quality Level		
	Exceeds	Acceptable	Unacceptable
Communication Strategies	Demonstrates outstanding and innovative communications strategies to assist the health and healthcare community of patients, clinicians, purchasers, and policy makers in making informed health	Demonstrates moderate communications strategies to assist the health and healthcare community of patients, clinicians, purchasers, and policy makers in making informed health decisions, as well as familiarity with mobile and application	No or very limited experience with communications strategies

	decisions, as well as familiarity with mobile and application technologies	technologies	
Implementation Strategies	Demonstrates outstanding strategies for implementing research findings and providing assistance to implementers, including familiarity with clinical guidelines, registries, and shared decision making	Demonstrates moderate strategies for implementing research findings and providing assistance to implementers, including familiarity with clinical guidelines, registries, and shared decision making	No or very limited experience implementing research findings and providing assistance to implementers
Health and Healthcare Stakeholder Engagement	Demonstrates outstanding network with groups across the health and healthcare landscape, as well as outstanding ability to partner with and solicit feedback from these groups	Demonstrates moderate network with groups across the health and healthcare landscape, as well as moderate ability to partner with and solicit feedback from these groups	No or very limited network with groups across the health and healthcare landscape, as well as little ability to partner with and solicit feedback from these groups
Testing and Evaluation	Provides outstanding testing and evaluation tools, methodologies, and metrics to measure the success of D&I efforts	Provides moderate testing and evaluation tools, methodologies, and metrics to measure the success of D&I efforts	No or very limited testing and evaluation tools, methodologies, and metrics to measure the success of D&I efforts

3

Step 3: Develop Your Solution

Overview

Your proposal should be organized into Volume I: Technical Solution, Management Approach, and Past Performance; and Volume II: Cost Proposal.

The submitted proposal must explain in detail the approach that the contractor and subcontractor team would take to complete this work. This could include, but is not limited to, a proposed work plan including major project milestones, timeline, and fee structure; organization profile and history; past performance; and proposed plans to subcontract for completion of work, as well as the specific tasks to be assigned exclusively to each team member. The proposal should also detail any service options and costs.

The submitted proposal must also include a description of the composition of the project team and the subcontractor team, including key personnel and consultants. For each team member, include a resume that is no longer than one page. (Resumes are not included in the total page count.)

See additional details below for required information that must be included in Volume I and Volume II.

Volume I: Technical Solution, Management Approach, and Past Performance

Volume I should be no longer than 10 pages, exclusive of the title page, table of contents, and appendixes containing additional materials, such as key personnel resumes. See Step 5 for additional information ([page 18](#)).

Volume I must include:

- A proposal outlining how the contractor will accomplish the goals set forth in this RFP
- A list of the contractor key personnel and subcontractor teams, with key personnel or project managers)
- A description of previous successful communication strategies and frameworks used

The contractor shall demonstrate and describe its proposed solution based on the requirements in the Scope of Work. Proposals must include the information outlined



below. PCORI's ability to interpret and apply the proposal to elements of the Scope of Work will factor into its funding decision.

Technical Solution

1. Describe in detail your organization's proposal to address the requirements outlined in this RFP.
 - a) Affirm that your organization has the ability to deliver each and every element of the Statement of Work
 - b) Describe the project process and methodology your organization and the subcontractor team will follow to design and execute the RFP tasks

Management Approach

1. Provide a list of the project team members (including subcontractors) and short biographies of each team member. If using freelancers or outside resources, please identify them as such. PCORI reserves the right to approve/disapprove of selected resources. Indicate how many full-time staff your firm employs. Include resumes for key personnel. Resumes should be no longer than one page and can be included in an appendix. Resumes are not included in the page count.

Past Performance

1. Document examples of your organization's experience in designing/developing each of the project requirements, including sample deliverables from past projects of similar scope.
2. Identify at least three previous or existing clients within the last five years with a similar effort in the commercial or federal market. Include client name, dates of performance, the name/email/phone number of the point of contact, and a synopsis of work performed.

Volume II: Cost Proposal

Volume II should be submitted as a separate file (Word, Excel, or PDF format).

Cost Proposal

1. Provide a pricing proposal that supports the entire Scope of Work outlined in this RFP.
2. List key personnel, actual salary rates, and hours/levels of effort that are valid from the project start date through July 2014. Proposed subcontractors, with key personnel and other critical contributors, should also follow this format.

Provide a breakout of key tasks/events along with associated costs.

3. If needed, a brief budget narrative (no more than two pages) may be included to clarify unusual budget items or calculations. The Cost Proposal does not count toward the page count limitation; however, it must conform to PCORI's formatting guidelines. For more information, see Step 5 ([page 18](#)).
4. Cost Proposals must delineate all proposed costs of the contractor and subcontractors. This must encompass all design, development, implementation, administration, monitoring, reporting, and closeout.
5. The cost proposal must categorize costs separately as direct or indirect. Indirect costs must be openly listed, delineated, and supported with documentation.
6. Proposed travel should be listed in the budget documents. Estimates should be used, as needed, since travel costs must be pre-approved by PCORI and will be reimbursed (at cost) according to PCORI travel regulations.

Step 4: Know the Review Criteria

4

PCORI will evaluate all proposals for technical merit. The Technical Solution, Management Approach, and Past Performance will be evaluated first. This evaluation is conducted independent of the Cost Proposal. Second, the Cost Proposal will be evaluated for realism. The approved budget will be determined with regard to the fulfillment of the requirements outlined in Step 1 ([page 2](#)) and compared to industry averages for like services. PCORI will determine the contractor's acceptability by assessing the contractor's compliance with the terms of this RFP.

Evaluation Categories

Outstanding—The contractor has demonstrated that there is a high probability of success.

Good—The contractor has demonstrated that there is a good probability of success.

Fair—The contractor has demonstrated that there is marginal probability of success.

Poor—The contractor has demonstrated that there is a low probability of success.

Subsequent to receiving original proposals, PCORI reserves the right to notify all technically acceptable contractors within the competitive range and to provide them an opportunity to submit written Best and Final Offers (BAFOs) at the designated date and time. BAFOs will be evaluated and considered at PCORI's discretion. After receipt of a BAFO, no discussions will be reopened unless PCORI determines that it is clearly in PCORI's best interest to do so (e.g., it is clear that information available at that time is inadequate to reasonably justify contractor selection and award based on the BAFOs received). If discussions are reopened, PCORI will issue an additional request for BAFOs to all technically acceptable Offerors still within the competitive range.

At its discretion, PCORI reserves the right to also invite contractors who are technically acceptable to conduct a presentation for PCORI on the proposed effort for technical and management approaches identified in the submission. PCORI will notify vendors who meet the qualifications and provide the date, time, and format for the presentation.

An award will be made to the contractor who proposes the best framework for disseminating and implementing research across the health landscape, especially the populations named in this RFP. Ability to partner with key stakeholders, innovative approaches, and a framework for evaluating the results of those efforts will also be considered.



Evaluation Matrix for Function 1: PCORI's D&I Action Plan

Category	Weight of Rating Factor
Technical Solution	50%
Management Approach	30%
Past Performance	10%
Cost Proposal	10%



Step 5: Submit Your Proposal

Overview

Proposals must include Volume I: Technical Solution, Management Approach, and Past Performance and Volume II: Cost Proposal. Proposals must conform to the format and content instructions in this RFP and must address the Scope of Work and all deliverables. Questions should be submitted to rfp@pcori.org, referencing PCO-DIAP2013 in the subject line, no later than 5 pm (ET) September 16, 2013. All written questions submitted prior to the deadline will be answered and posted on [PCORI's website](#).² Proposals and all related materials should be submitted NO LATER THAN 5 pm (ET) October 25, 2013. PCORI will announce the successful applicants no later than November 29, 2013.

Format

All text should be Arial or Times New Roman font, no less than 11 points with one-inch margins and single spaced. Graphics and tables are acceptable and encouraged. Use MS Word, MS Excel, or Adobe PDF formats. Proposals exceeding the 10-page limit (exclusive of the title page, table of contents, appendixes, and Cost Proposal) will not be considered.

Cover Letter

The cover letter must contain the following:

- Contractor's name and mailing address
- Reference to the solicitation (RFP) number (PCO-DIAP2013)
- Technical and contract points of contact: name, phone number, and email address
- Business size (Large, Small, State/Federal Certifications—MBE, 8(a), HUBZone, etc.)
- Dunn & Bradstreet Number (DUNS)
- Federal Tax ID (EIN, TIN, SS)
- Affirmation that the quote (cost proposal) is valid for at least 30 days

² Answers will be posted at <http://pcori.org/funding-opportunities/other-contract-research/>



- Acknowledgment of any amendments by reference

Submission Deadline

- All proposals should be sent no later than 5 pm (ET) October 25, 2013, to rfp@pcori.org with PCO-DIAP2013 in the subject line.

Anticipated Award Date

- November 29, 2013

Late Submissions

Late proposals, requests for modification, or requests for withdrawal will not be considered, unless a late modification of a successful proposal makes terms more favorable for PCORI.

Retention of Submissions

All proposal documents will become the property of PCORI and retained by PCORI, and, therefore, will not be returned to the contractor.

Withdrawal or Modification of Submissions

A contractor may modify or withdraw its proposal upon written, electronic, or facsimile notice if received at the location designated in the solicitation for submission of proposals, but not later than the closing date and time for receipt of proposals.

Protection of Human Subjects (if applicable)

PCORI adopts, by reference, the Human Subjects requirements of 45 CFR Part 46. If the proposed research to be conducted will involve human subjects, refer to the Supplemental Instructions for Preparing the Protection of Human Subjects Section of the Research Plan in Part II of the Instructions for the PHS 398 Form, as found on the [National Institutes of Health \(NIH\) website](http://www.fda.gov/oc/ohrt/).³ The contractor will be responsible for ensuring compliance with all applicable standards.

Compliance

The contractor must comply with PCORI's Rules and Regulations (to be provided to awarded contractors), all required forms, and any changes in procedures. Contractors will remain informed of any such changes and updates within 30 days, as necessary, by the PCORI Finance Office. All records associated with PCORI awardees shall be properly maintained, updated, and made available to auditors. Upon the request of employees or other persons with disabilities participating in official business, the contractor must

³ Available at www.grants.nih.gov/grants/funding/phs398/phs398.doc.



arrange necessary and reasonable accommodations for the impaired individuals per Section 508 Compliance.

Organizational Conflict of Interest

The contractor, upon award, shall sign a statement confirming that it does not have and will prevent any organizational conflict of interest. If a conflict arises, the contractor will immediately advise PCORI.

Insurance

The contractor, at its own expense, shall provide and maintain at least \$1 million of general liability insurance during the entire period of performance of this contract.

Non-Disclosure Agreements

The contractor shall not release any sensitive, confidential, or proprietary information without prior written approval from PCORI. At the time of award, the contractor will be required to sign a non-disclosure agreement that is incorporated into the PCORI Service Agreement.

Furnishing of Equipment/Property

The contractor will furnish all equipment/property necessary to perform the work outlined in this RFP at no cost to PCORI.