



**City of New York
Department of Health and Mental Hygiene (DOHMH)
Request for Proposals (RFP) for
Community Health Survey
PIN: 21LL000100R0X00
Addendum #3**

April 30, 2019

This Addendum extends the due date and time for proposals and contains revisions to the RFP.

Except as otherwise stated in the attached and by any subsequent Addenda to the above-referenced RFP the solicitation remains unchanged.

The Proposal Due Date has been changed to May 15, 2019 at 2:00 P.M.

I. Changes to Addendum 1:

The following answer to Question 60 has been revised as follows. Language that is crossed-out has been deleted; language in bold type has been added.

Question 60: The experience section of the RFP calls for “providing routine reports that describe the progress and challenges of public health research and surveillance initiatives.” Could you please explain what type of reporting you are interested in?

Answer 60: ~~The RFP has been revised to remove this requirement (please see above).~~
Proposers would have experience reviewing and reporting on the latest literature on survey methodology, and have shared their work on methodological issues such as: approaches to increasing response rates; how to measure health trends over time when modes or sampling frames change in data collection; mixed modes; mixed frames; and other methodological issues.

II. Changes to RFP:

The following sections of the RFP have been revised and replaced as follows. Language that is crossed-out has been deleted; language in bold type has been added. **Proposers are required to use the new forms/sections in their proposal packages, or their proposal may be found non-responsive.**

A. RFP Section I(D) – Page 1 revision

D. Proposal Due Date and Time and Location:

- Date: ~~May 8, 2019~~ **May 15, 2019**
- Time: 2:00 p.m.
- Location: Office of the Agency Chief Contracting Officer

Department of Health and Mental Hygiene
42-09 28th Street, CN-30A
Long Island City, NY 11101
Attn: Scott Wagner, Esq.

B. RFP Section III (B)(1) – Page 5-6 revision

The Contractor would:

- a. Have at least four (4) years of experience of the last 7 years in all of the following areas:
 - i. Designing, developing, and implementing public health research and surveillance surveys.
 - ii. Hiring and training survey interviewers and other survey-related staff.
 - iii. Conducting surveys of adults that are of similar size and complexity in large urban areas via telephone or other methods.
 - iv. Conducting surveys in multiple languages (e.g. English, Spanish, Russian, simplified Chinese, Haitian Creole, and Bengali) via telephone or other methods.
 - v. Collecting telephone health survey data using Random Digit Dialing (RDD) landline telephone and cell phone sampling frames. (If Proposers are proposing a different survey sampling frame or survey mode(s), Proposers would have experience in conducting surveys using those frames and/or modes.)
 - vi. Collecting street address or cross-street information from survey respondents to geocode cases to specific geographic sub-areas (such as United Hospital Fund [UHF] neighborhoods and/or Community Districts), and imputing geographies for cases with missing geographic information.
 - vii. Conducting quality control on surveys and research and surveillance initiatives.
 - viii. Providing clients with weekly reports on the number of interviews conducted in geographic sub-areas such as UHF neighborhoods and/or Community Districts (CD), as well as tracking study progress and providing clients with weekly production and disposition reports utilizing American Association for Public Opinion Research (“AAPOR”) response and cooperation rates.

- ix. **Providing routine reports that describe the progress and challenges of public health research and surveillance initiatives**
- x. Calculating survey design weights to account for the probability of selection and post-stratification weights using raking procedures to provide unbiased survey estimates.

Greater consideration would be given to proposers with more than six years of such experience.

C. Section III(B)(3)(g) – Page 10 revision

- g. Provide Statistical Consulting and Pooled Survey Weights
 - i. Provide general statistical consulting to DOHMH and calculate Community District weights every two years by combining two years of CHS data (2021-2022, 2023-2024, 2025-2026).
 - ii. Provide general statistical consulting to DOHMH and calculate three sets of pooled survey year weights annually at the UHF level using the most recently available year of CHS data and earlier years (UHFs are defined by contiguous zip codes).
 - iii. **As described in sections III(B)(3)(g)(i) and III(B)(3)(g)(ii), general statistical consulting could include statistical consulting related to changes in survey frame and modes, if applicable. If an alternative sampling frame and/or mode is being proposed, include any methodological work to transition the CHS to a new sampling frame and/or mode, including the ability to continue to measure health estimate trends over time.**

D. Section IV (A)(2)(a) – Page 14-15 revisions

a. Experience

Describe the proposer’s successful relevant experience in providing the work described in Section III.B.1 of this RFP.

Specifically demonstrate successful relevant experience in all of the following areas and include the number of years of such experience:

1. Designing, developing, and implementing public health research and surveillance surveys.
2. Hiring and training survey interviewers and other survey-related staff.
3. Conducting surveys of adults that are of similar size and complexity in large urban areas.
4. Conducting surveys in multiple languages.
5. Collecting telephone health survey data using Random Digit Dialing (RDD) landline telephone and cell phone sampling frames. (If Proposers are proposing a different survey sampling frame or survey mode(s), Proposers would have experience in conducting surveys using those frames and/or modes.)
6. Collecting street address or cross-street information from survey respondents to geocode cases to specific geographic sub-areas (such as United Hospital Fund [UHF] neighborhoods and/or Community Districts), and imputing geographies for cases with missing geographic information.
7. Conducting quality control on surveys and research and surveillance initiatives.
8. Providing clients with weekly reports on the number of interviews conducted in geographic sub-areas such as UHF neighborhoods and/or Community Districts (CD), as well as tracking study progress and providing clients with weekly production and disposition reports utilizing American Association for Public Opinion Research ("AAPOR") response and cooperation rates.
9. **Providing routine reports that describe the progress and challenges of public health research and surveillance initiatives.**
10. Calculating survey design weights to account for the probability of selection and post-stratification weights using raking procedures to provide unbiased survey estimates.

In addition, include the following documents in the proposal submission:

- Letters of reference from at least two (2) different clients for whom work similar to the work specified herein has been performed in the past three (3) years, and who can attest to the proposer's experience, service quality, and organizational capability. References from DOHMH are not acceptable for this purpose. Note that the Agency may check the proposer's references.

E. Section IV (A)(2)(c)(7) – Page 19 revision

7. Provide Statistical Consulting and Pooled Survey Weights

Describe in detail and demonstrate the effectiveness of the proposer's proposed approach, as described in Section III.B.3.g of this RFP, for all of the following:

- a. Providing general statistical consulting to DOHMH and calculate Community District weights every two years by combining two years of CHS data (2021-2022, 2023-2024, 2025-2026).
- b. Providing general statistical consulting to DOHMH and calculate three sets of pooled survey year weights annually at the UHF level using the most recently available year of CHS data and earlier years (UHFs are defined by contiguous zip codes).
- c. **As described in sections IV(A)(2)(c)(7)(a) and IV (A)(2)(c)(7)(b), general statistical consulting could include statistical consulting related to changes in survey frames and modes, if applicable. If an alternative sampling frame and/or mode is being proposed, include any methodological work to transition the CHS to a new sampling frame and/or mode, including the ability to continue to measure health estimate trends over time.**

F. Attachment C: Acknowledgment of Addenda has been revised to reflect the issuance of this Addendum. Please see Annex A to this Addendum.

ATTACHMENT C
ACKNOWLEDGEMENT OF ADDENDA
RFP: Community Health Survey
PIN: 21LL000100R0X00

Directions: Complete Part I or Part II, whichever is applicable, and sign your name in Part III.

Part I

Listed below are the dates of issue for each Addendum received in connection with this RFP:

Addendum # 1, Dated April 12, 2019

Addendum # 2, Dated April 22, 2019

Addendum # 3, Dated April 30, 2019

Addendum # 4, Dated _____, 201__

Addendum # 5, Dated _____, 201__

Addendum # 6, Dated _____, 201__

Addendum # 7, Dated _____, 201__

Addendum # 8, Dated _____, 201__

Addendum # 9, Dated _____, 201__

Addendum #10, Dated _____, 201__

Part II

_____ No Addendum was received in connection with this RFP.

Part III

Proposer's Name: _____

Date: _____

Signature of Authorized Representative:
