

PUBLIC INFORMATION & COMMUNICATION SERVICES (PICS)
NIH - TASK ORDER

RFTOP# 106 TITLE: Clinical Studies Support Center

PART I – REQUEST FOR TASK ORDER (TO) PROPOSALS

A. Point of Contact Name: Elsa B. Carlton, Contracting Officer

Proposal Address: Research Contracts Branch, OM
[U.S. Mail] National Cancer Institute
6120 Executive Boulevard
Executive Plaza South
Suite 600, Room 6048
Bethesda, MD 20892-7193

Proposal Address: Research Contracts Branch, OM
[Hand Delivered] National Cancer Institute
Suite 6001, Room 6048
6120 Executive Boulevard
MSC 7193
Bethesda, MD 20892-7193

Billing Address: Research Contracts Branch, OM
National Cancer Institute
6120 Executive Boulevard
Executive Plaza South
Suite 6001, Room 6048
Bethesda, MD 20892-7193

B. PROPOSED PERIOD OF PERFORMANCE:

Base Period: December 3, 2002 - December 2, 2003
Option 1: December 3, 2003 - December 2, 2004
Option 2: December 3, 2004 - December 2, 2005
Option 3: December 3, 2005 - December 2, 2006
Option 4: December 3, 2006 - December 2, 2007

C. **PRICING METHOD:** Cost Plus Fixed Fee (Completion). A 12-month base year contract, with four 12-month options is anticipated. Please price Task Order accordingly.

D. **PROPOSAL INSTRUCTIONS:** Submit an original and 6 hard copies of the technical proposal and, an original and 6 hard copies of the business proposal. Technical proposals should not exceed 20 pages (excluding resumes). CVs are required for the Project Manager and the Call Center Manager. **Budget Submission:** Provide a line-item budget with a narrative justification for each line.

E. **RESPONSE DUE DATE:**

November 6, 2002, at 3:00pm EDT. Please notify the Point of Contact : Elsa Carlton via e-mail at: ec39g@nih.gov if you intend to submit a proposal.

F. **TASK DESCRIPTION:** The purpose of this contract is to provide comprehensive support and staffing for the CCR Clinical Studies Support Center (CSSC) outreach and patient recruitment effort under the direction of the Director, Outreach and Patient Recruitment. CSSC consists of a call center that responds to bi-lingual (primarily English and Spanish) phone and email inquiries, a community outreach program, and a study promotion program. The call center is a critical component of the program and handles as many as 600 to over 1000 calls per month from persons interested in the clinical studies at NCI. The community outreach program is responsible for communicating NCI initiatives and opportunities to health care providers, institutions, health maintenance organizations, advocacy organizations, prospective participants and the general community through planning and/or participating in appropriate activities and meetings. CCR study promotion is necessary to communicate specific information about new initiatives and available studies seeking specific participants.

Background: The mission of the Center for Clinical Research (CCR), NCI is to conduct basic and clinical research to improve the understanding of cancer and its diagnosis, treatment, and prevention. The CCR is responsible for performing pioneering clinical research on cancer, which translates fundamental research to the bedside in a bi-directional manner through the development of novel models and new paradigms for carrying out translational research. Currently, the CCR is responsible utilizes 40% of all NIH Clinical Center resources. Without effective patient recruitment and outreach efforts extended to all populations, outreach to referring physicians and the general public, the CCR cannot complete its mission. As a result of initiating a comprehensive outreach program for CCR studies following several years of a decline in new patients on study, accrual has been steadily increasing at a rate of 12-15% per year. However, continued growth of the

program is desired, especially in terms of increasing participation of persons from special populations and underserved groups. Cancer and cancer related disease continues to be a leading cause of death regardless of race, gender, or social status and continued progress in the fight against cancer requires vital participation of individuals in clinical trials.

TASK DESCRIPTION:

The contractor shall:

Provide a comprehensive outreach strategy that will facilitate the accrual of new patients to NCI clinical studies and also increase the public's awareness about the NCI Intramural program. The following are specific tasks as they relate to this effort.

1) Enhance communications among the extramural community and the NCI in order to increase patient referrals to the NCI. This will include educating the extramural community, managed care companies, cancer center directors and other referring physicians about the NCI clinical studies program. This will also include educating the general public and potential patients about the importance of clinical studies, specifically those conducted at NCI.

The contractor shall make contact with physicians, hospitals, and other health care providers (HCPs) within the Washington metropolitan area (generally within approximately a 90 mile radius of NIH as well as possible targeted physicians outside of this radius) for the purpose of educating these individuals about NCI clinical studies and the referral process. This will include meetings and coordination of speaking engagements, materials development and mailings, correspondence on behalf of NCI, development and delivery of informational brochures, development and placement of print and media advertisements, and facilitate media coverage when appropriate.

2) Investigate past and existing recruitment strategies which have been used and provide recommendations on successful and unsuccessful efforts and describe why (this includes media coverage).

- Conduct interviews/meetings with NCI staff and select principal investigators to assess what recruitment strategies have been used and/or are needed.
- Review existing reports and audits and provide recommendations for new, innovative solutions to current recruitment problems.
- Provide recommendations on successful and unsuccessful efforts. If requested by the Director, CCR, provide written report on strategies from the past, current, or suggestions.

3) Assess the needs of HCPs. (i.e. clinics, hospitals, private practices) to determine what resources would be required to enable participation and referral of patients to NCI's clinical program and provide a plan to the Project Officer/Director, Outreach and Patient Recruitment for overcoming any barriers to participation.

- Conduct interviews or meetings as mandated by the Director, Outreach and Patient Recruitment, CCR, with extramural HCPs to determine what their experience has been in patient referral to NCI. This will include convening several small focus groups (2-5) or coordinating a one-day seminar attended by interested physician/advocates/healthcare professionals.
- Develop a marketing plan to assist NCI in increasing provider referrals which might include 1) development of presentations to showcase intramural research efforts to managed care companies to that the referral option is a competitive advantage, 2) Implementation of a media campaign to place news articles on NCI in targeted medical journals, 3) Design and placement of print or broadcast public service or paid advertisements, 4) Development or expansion of a newsletter for the extramural community to provide information about protocols and longer term directions, 5) Coordination of a series of roundtable discussions with managed care directors and NCI leadership.

4) Promote selected clinical trials. The contractor will work with individual or groups of CCR investigators to promote and recruit patients for NCI clinical trials. Promotion strategies should be programmatic whenever possible, crossing branches to showcase multiple treatment options rather than stand-alone studies. Support may include some or all of the following:

- Development of as many as 20-40 mailings, 2-8 pamphlets or brochures, print advertisements, public service announcements, web materials, and other appropriate materials outlining the services of CSSC, trial, participation requirements, contact(s), etc.
- Coordinate meetings with appropriate referring physicians, health care groups, etc. to promote the trial(s).
- Track success of various methods used to target each group.
- Develop a best method to target specific patient populations, physicians, etc. for distribution to CCR investigators.

5) Provide manpower and equipment to answer and respond to emails to the CSSC and phone calls to the CSSC nationwide, toll-free number, 1-888-NCI-1937 from HCPs, patients, relatives, friends and others concerning specific NCI clinical trials or requests for information about the availability of trials linked to specific types of cancer. The individuals answering the toll-free phones must have knowledge of medical terminology and include at least one registered nurse with knowledge of clinical trials. A staffing contingency plan should be provided to identify how staffing shortages and excesses will be addressed. Methods to provide quality assurance regarding the handling and monitoring of telephone and email inquiries should be addressed. The source of cancer clinical trial information should be cancer.gov/PDQ, NCI Office of Cancer Communication, and possibly other NCI/NIH information systems as needed. Occasionally (likely \leq 25 trials) the contractor will be required to screen callers requesting information about a specific clinical trial. If requested to do so, CCR will

provide the contractor with a list of specific questions relating to that protocol. The contractor will provide this information to the appropriate principal investigator or team in a secure manner.

The contractor will also be expected to develop and mail or fax information packets containing potential studies based upon basic screening information obtained from email or phone inquiries.

The contractor is expected to conduct follow up calls and/or send letters/email to referring physicians and potential patients to be sure their contact with NCI staff was successful and/or meaningful. Report on numbers of phone calls received from referring physicians and patients, report on numbers of referrals leading to registration to NCI protocols and enter all screening information into a secure and confidential database for the purpose of tracking accrual and evaluating marketing strategies.

6) Enhance communications among NCI intramural community in order to provide cross Laboratory/Branch patient referral networks. This could include training, seminars, work groups, writing/editing newsletters, and making sure print materials are available on the CCR clinical trails web portal. The contractor will also work with the Director, Outreach and Patient Recruitment, through the Project Officer and staff to initiate and coordinate this effort.

7) Assess current communication systems within the NCI and NIH to develop/maintain a user-friendly environment for referring physicians and the general public. Provide recommendations to the Project Officer in writing.

8) Coordinate and implement outreach efforts. Special emphasis will be placed on the inclusion of minorities, women and underserved populations in studies of diseases, disorders and conditions that disproportionately affect them. These efforts should include the development of bi-lingual brochures (English and Spanish), descriptions of clinical trials, etc., hiring required bi-lingual (Spanish speaking) individuals to answer the toll-free phone line and provide linkages to resources that serve these groups.

9) Coordinate and provide meeting support as described in the basic contract. Examples of such meetings will include an annual CME conference targeting local physicians, a CEU for local community based nurses, and a half-day meeting targeting regional cancer advocacy groups.

G. DELIVERABLES/REPORTING REQUIREMENTS

The contractor is requested to submit the following deliverables and reporting requirements:

- A comprehensive outreach strategy within 4 weeks of contract award
- Written and/or Broadcast advertisements or public service announcements
- Written report on recommendations concerning communications systems for patient referral in #4 and #6 within 8 weeks of contract award
- Written informational brochures, advertisements, newsletters, correspondence, print or web materials development, as outlined above
- Meeting coordination and implementation as outlines above and as described in the basic contract, timeline to be decided with the Project Officer/Director, Outreach and Patient Recruitment
- Other deliverables as required by the basic contract
- Monthly and quarterly written analysis in the form of progress reports with graphic analysis of activity of the call center/emails and patient referrals. Monthly progress reports are due on the 10th day of the following month and should include, but are not limited to specific call related information such as volume of calls and emails, nature of inquiry, disease site, action taken, English or Spanish speaking, relationship of caller to patient, indicate if repeat caller, state of origin, hold time, abandoned calls, average length of call, and other call center related call statistics. Any complaints that are received will be logged and forwarded immediately to the Director, Outreach and Patient Recruitment. Quarterly reports will be similar and used to identify trends in call volume, patient accrual, and outreach efforts.
- An annual report will be required and will include detailed written analysis for the contract year initiatives related to call center activity and any and all outreach efforts that occurred. This report will be due four weeks from the end of 12-month contract period.

G. EVALUATION FACTORS

General: The technical proposal will receive paramount consideration in the selection of the Contractor for this Task Order. All evaluation factors, other than cost or price, when combined are significantly more important than cost or price. However, cost/price may become a critical factor in source selection in the event that two or more offerors are determined to be essentially equal following the evaluation of all factors other than cost or price. In any event, the Government reserves the right to make an award to that offeror whose proposal provides the best overall value to the Government.

Budget Evaluation: NCI will evaluate each budget line item based on its consistency with the purpose and objectives of the Task Order, and the extent to which it is economically reasonable.

EVALUATION CRITERIA:

You are advised that paramount consideration shall be given in the following order:

- Technical Approach (40 points): The offeror must demonstrate a clear understanding of the requirements and tasks/activities necessary to conduct a state of the art call center and effective outreach and patient recruitment and study promotion to the named audiences. Items that should be included are a comprehensive outreach strategy and measures for quality assurance.
- Management and Staff Experience and Capability (30 points): The offeror must demonstrate with the use of a staffing and management plan, their ability to perform the required tasks within the scope of work provided. The offeror must include and address plans for staffing the call center with bi-lingual (Spanish speaking) capabilities and a contingency plan for any staffing shortages or excesses that may arise.
- Organizational Experience and Past Performance (30 points): The offeror should demonstrate that the organizational capabilities are available to carry out this Task Order. The offeror must provide information about past performance on similar projects. It is important that the offeror have a demonstrated record of quality products, completion of tasks with budget constraints and established deadlines, and achieving project goals and objectives.

The government reserves the right to make and award to the best advantage of the Government, cost and other factors considered.

TO # NICS-106 TITLE: Clinical Studies Support Center
PART II - CONTRACTOR'S REPLY: CONTRACT #263-01-D-0 _____

Contractor:

Points of Contact:

Phone-

Fax- Address:

TOTAL ESTIMATED COST: Pricing Method
TOTAL ESTIMATED NUMBER OF HOURS:
PROPOSED COMPLETION DATE:

FOR THE

CONTRACTOR: _____
Signature Date

SOURCE SELECTION:

WE HAVE REVIEWED ALL SUBMITTED PROPOSALS HAVE DETERMINED THIS FIRM
SUBMITTED THE BEST OVERALL PROPOSAL AND THE PRICE/COST IS REASONABLE.

Billing Reference # _____
Appropriations Data: _____

RECOMMENDED:

FAX # Signature - Project Officer Date

APPROVED: _____
FAX # Signature - Contracting Officer Date

NIH APPROVAL -

CONTRACTOR SHALL NOT EXCEED THE ESTIMATED LABOR HOURS OR ESTIMATED TASK ORDER AMOUNT
WITHOUT THE WRITTEN APPROVAL OF THE CONTRACTING OFFICER & PICS COORDINATOR

APPROVED: _____
Signature -Anthony M. Revenis, J.D., NIH-PICS Coordinator Date