ADDENDUM NO. 2
First Responder Wellness Resources Application
RFPQ#HSS2022.W7
October 14, 2022

REQUEST FOR PROPOSALS FOR
San Francisco Health Service System
First Responder Wellness Resources Application
RFPQ#HSS2022.W7

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This Addendum is being issued to modify the requirements in the
above-referenced Request for Proposals (RFP) and to respond to
questions and requests for clarification received by or before 2:00 PM
Pacific Daylight Time on Friday, October 7th, 2022 (the “Deadline for
RFP Questions”). Please review the terms of the RFP and this
Addendum carefully. If there are any inconsistencies between the
RFP and the terms of this Addendum, then the terms of this
Addendum shall prevail. Section references below are to the RFP and
are provided for convenience of reference only.
Questions & Answers

1. Please provide confirmation of whether SFHSS is seeking a solution that is "off-the-shelf" versus one that is customized to the City’s needs.

   **SFHSS Response:**
   SFHSS is open to vendor recommendations on their overall approach to developing a mobile application that meets the Key Requirements of Respondent Mobile Health and Wellness Application (RFP Sec. 2.1.2), including its ability to provide customization for each of the four departments as described in Sec. 2.1.2 (d). It is also critical for any proposed solution to have the capability to retain the extensive and detailed information that City departments have already invested in the current solution.

2. Please clarify whether content must be “original to the vendor” (RFP Sec 2.1.2(f)iv). Does SFHSS already have content for the created? Which of these general types of content must be migrated to a new application?

   **SFHSS Response:**
   The content on the existing Application has been created by the incumbent's internal subject-matter experts and is proprietary to the vendor (Lexipol, fka Cordico). SFHSS cannot guarantee or be responsible for securing the right to reproduce copyrighted materials produced by the incumbent vendor. The City is seeking a vendor that can provide an equal or greater level of subject-matter expertise and develop content for the City’s review and approval for inclusion.

   SFHSS does not have internal subject-matter experts or content creators in the area of first responder mental and behavioral health. Our own content is limited to non-proprietary information such as City departments, locations and contact information of services available to first responders, and lists of approved clinicians. Collectively, the selected vendor will, at minimum, be able to migrate these resources and/or replicate those described in RFP Sec 2.1.2(f) for the application.

   In addition, SFHSS is interested in a solution with the ability to upload our own custom content (e.g., a flu clinic schedule or calendar of events), and can be customized by each department to support user adoption, engagement and utilization of the application by their respective personnel (e.g., an department choosing to share holiday recipes, while another department chooses to share pet photos, a scavenger hunt with clues embedded throughout, etc.). The desired outcome is for users of the application to
develop familiarity and comfort with using it when they are in crisis so they will know how to efficiently navigate to the right resource for help when needed.

3. What are SFHSS’s expectations regarding any legacy data from the assessments provided by the current vendor? Will the current vendor provide guidance to users on how to export their data for personal retention?

**SFHSS Response:**
The current solution does not have individual logins or accounts for individual users. All users from a given first responder department access their specific version of the application using the same login credentials. As such, any completed assessments not previously retained by a first responder would not be available for export. However, the City is able to provide aggregated and de-identified assessment results as needed.

4. Do you wish for something to happen after an employee takes a self-assessment such as a referral to a clinician or to be directed to specific content in the app? Please describe what capability is desired by the Self-Assessment Tools required by the RFP (Sec. 2.1.2(f)iii.).

**SFHSS Response:**
The application does not currently include this functionality for the self-assessment tools, and SFHSS is open to vendor recommendations on how to support a user navigating to the most suitable resources based on their self-assessment result(s).

5. Sec 2.1.2(f)iii. refers to self-assessment tools and asks respondents to identify, “its available and validated self-assessment tools for review as part of its proposal.” Please clarify what “validated” means for purposes of this solicitation. Does this refer to a publicly available tool provided by a government organization such as the National Institute of Mental Health or has gone through some formal scientific study?

**SFHSS Response:**
SFHSS is open to incorporating self-assessments that draw from validated instruments (e.g. PHQ-9) or are developed by the vendor based on other industry-standard tools and/or established scientific basis. SFHSS is able to recommend assessments for discussion with the selected vendor. However, some assessment tools may be associated with additional costs or required permissions to incorporate within the...
application. Additionally, we would expect that the vendor has a team of subject-matter experts in the field of mental health and emotional well-being where they would provide and suggest the type of assessment(s) that could be offered within the application.

Assessment topics would include, but not be limited to, those that are currently in the mobile application (e.g., alcohol use, sleep, anger management, compassion fatigue, PTSD, resilience, stress, and others). The results of the assessment should provide the user an idea of their risk level in various areas such as being a danger to self or others, or impairment leading to one’s inability to fulfill their personal or professional responsibilities. Ideally the solution would guide them to the most suitable resources based on their results.

6. In what formats should the wellness resources be in (e.g. print, video, another medium, or a combination thereof)?

**SFHSS Response:**
Content may be in a variety of formats or a combination thereof, including, but not limited to the following:
- text (e.g. PDF, HTML, articles)
- audio (e.g. podcasts)
- visual (e.g. images, videos)
- interactive (e.g. assessments, surveys, learning activities)
- hyperlinks (e.g. to approved content, peer reviewed studies)

Note that content may be required to comply with the City and County of San Francisco's Committee on Information Technology (COIT)'s Digital Accessibility and Inclusion Standard, approved November 18, 2021, and available at [https://sf.gov/reports/november-2021/digital-accessibility-and-inclusion-standard](https://sf.gov/reports/november-2021/digital-accessibility-and-inclusion-standard).

7. If selected as the winning vendor, is a vendor’s content curation process considered approved, or must all content on an ongoing basis be submitted for approval prior to inclusion in the application.

**SFHSS Response:**
SFHSS will work with the selected vendor to curate content prior to the go-live date. Ideally, the selected vendor will also have an in-house team of subject-matter experts who are able to develop high quality and culturally competent materials specifically geared towards the needs of first responders. As such, SFHSS expects that content development and curation would be a collaborative process with the selected vendor.
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8. Can the resources and/or services listed in the application charge for their services?

**SFHSS Response:**
If any services or resources listed in the application are not included within a first responder’s health plan and/or will or may incur a charge, SFHSS will review these resources on a case-by-case basis prior to their inclusion in the application. If they are rejected by SFHSS, the application must allow for those listings/resources to be removed for our members (first responder users). If a resource is approved by SFHSS to be included in the application, the application must clearly indicate the member’s share-of-cost or the fee for that service.

9. The RFP does not contain any information regarding existing wellness or resilience training. Does SFHSS have dedicated wellness staff who provide training to First Providers? Does SFHSS anticipate procuring any vendor-provided wellness or resilience training that the application is expected to support?

**SFHSS Response:**
SFHSS and the first responder departments have existing resources (e.g., critical incident response team, behavioral science unit, stress unit, behavioral health unit counselors and support staff, chaplains, and SFHSS EAP Counselors) as summarized in RFP Sec 2.1.2(f) (1). However, these teams may offer only limited training to their respective departments and are designed primarily to provide peer support and behavioral health counseling. Resilience training may more likely be in the form of webinars, articles, podcasts, or other resource formats described in Question 6.

10. Sec 1.2.2 of the RFP indicates SFHSS provides all employees with access to the CredibleMind, Inc. platform. Does SFHSS intend to continue to offer CredibleMind to its employees?

**SFHSS Response:**
The CredibleMind agreement is up for negotiation in November 2022 pending internal review by the City.

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11. The Scope of Work describes four (4) distinct First Responder populations. Please provide more information about the email domain convention used by these four groups.

SFHSS Response:
All City first responder departments use the @sfgov.org domain for email.

12. It's understood that currently there are four (4) different departments using the application, and each department has their own designated single sign-on (SSO) (RFP Sec. 2.1.2(a)). Please provide clarification on what that functionality looks like to the end-user.

SFHSS Response:
All users from a particular first responder department access their version of the mobile application customized for their specific department using the same login credentials. The login credential is only utilized to access to the Application and no other systems. In addition, the Application does not require personal information from any specific user, and there is no ability for a user to upload, or the Application to store or track, any HIPAA-protected information, user activity, location or voice, on or through the Application (RFP Sec. 2.1.2(b)).

13. Please describe how SFHSS envisions the process of scheduling appointments. For example, should users be able to directly schedule an appointment with a clinician through the application, or be referred to a third-party scheduler?

SFHSS Response:
SFHSS is open to vendor recommendations on how appointment scheduling may be achieved. Currently, users may select a provider’s information within the Application, where it redirects the user to the smartphone’s telephone application with the provider’s contact number. From there, the user can directly contact the provider to schedule an appointment.

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14. Regarding the feature that allows a user to connect to mental health services 24/7 (RFP Sec. 2.1.2(f)ii), do these hotlines need to be answered by clinicians or by peers/trained volunteers?

**SFHSS Response:**

At minimum, the Application will support users in navigating to mental health providers’ information approved and/or provided by the City. In the Application, navigation to that information may be in the form of links redirecting users to the smartphone’s telephone application, a preferred mapping software, or other third-party applications. For example, once a user navigates to a resource (e.g. Employee Assistance Program) a contact number is provided wherein they can click on the number, and the smartphone will dial that provider.

The selected vendor will not be responsible for determining the actual type of personnel providing the services.

15. Regarding the Therapist Network/Clinician Resources (RFP Sec. 2.1.2(f)i(3)), what types of visits do users have access to?

**SFHSS Response:**

The application will support users in navigating to mental health providers’ information approved and/or provided by the City. The types of visits that users of the application will be able to access is under the purview of the mental health provider and/or the relevant clinician network, and not the selected vendor.

16. Please confirm that a vendor may propose a product and/or solution that achieves simple and secure user access using a method other than sharing a single username and password.

**SFHSS Response:**

SFHSS is seeking a solution that will minimize barriers to utilizing the application, including contacting or navigating to a selected resource – especially for users who may work outside of normal business hours when technical support may not be available to assist with login challenges.

SFHSS is open to vendor recommendations and proposals for alternative secure approaches to accessing the application and its content, in addition to the option of replicating the existing login procedure. Any proposed solution must adhere to the City’s
data security standards and comply with all applicable laws regarding privacy for protected health information (PHI) and personally identifiable information (PPI).

17. Please confirm that the content required for the Appendix B “City Risk Assessment” pertains only to a vendor's internal processes and has no bearing on the security posture for actually delivering the application.

**SFHSS Response:**
The City and County of San Francisco (City) is dedicated to building a strong cybersecurity program to support, maintain, and secure critical infrastructure and data systems. The Cybersecurity Risk Assessment (Appendix B) enables the City to evaluate the vendor’s ability to deliver and support an application environment with adequate cybersecurity practices based on their proposed solution (e.g., a cloud-based SaaS technology or one that interacts with City systems and data).

18. What level of “marketing and promotion” engagement should be expected from the SFHSS team?

**SFHSS Response:**
SFHSS will partner closely with each first responder department to secure leadership support and assist with internal promotion of the application by leveraging the various communication channels they may have (e.g., trainings, intranet, e-mail communications, posters, flyers, and/or other marketing collateral).

The selected vendor will be expected partner with the City in designing department-specific materials (e.g., customize materials with each department’s logo and appropriate images) and/or drafting messaging that department leadership can review and distribute to their staff. The selected vendor will also partner with the City on ways to increase user adoption, engagement, and utilization of the application, including providing regularly reporting to assist us in understanding what content users are (not) engaging with.

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1 [https://sf.gov/sites/default/files/2021-05/CCSF%20Cybersecurity%20Policy%20Final_2.pdf](https://sf.gov/sites/default/files/2021-05/CCSF%20Cybersecurity%20Policy%20Final_2.pdf)
19. Please provide clarification on footnote 2 regarding the City's minimum competitive amount under the SF Administrative Code, Chapter 21. Does this imply that the minimum cost of the apps has to be $200,000?

**SFHSS Response:**

The maximum available budget for December 1, 2022 through June 30, 2023 is $135,500. This period covered the development of a new application or the customizing and onboarding of an existing application (Development), in addition to support during Go-Live (Application Go-live May 1, 2023) and Post-Go-Live Support (May 2 – June 30, 2022).

20. Can you clarify the City's Banned State/Chapter 12X ordinance and the location of work to be perform and a proposer’s headquarters as well as the process for securing a 12X Waiver?”

**SFHSS Response:**

As described in the San Francisco Administrative Code, Chapter 12X, the City has made a commitment to not fund employee travel or do business with certain states that have discriminatory LGBT(QIA+), restrictive abortion, or voter suppression laws (the “12X Contracting Ban”). This includes business headquartered in those states, or whereby services will be provided by employees or contractors located in those states. The list of banned states is available here: https://sf.gov/resource/2021/states-where-city-will-not-fund-travel-or-do-business. However, SFHSS can request to waive the 12X Contracting Ban and in the event that the highest ranked respondent to the RFP falls under the 12X Contracting Ban, SFHSS will request a waiver consistent with the terms of Chapter 12X. An approval or denial of the waiver request may extend the timeline for the RFP by one or more weeks.

21. Can you confirm the City vaccination policy and whether it will apply to the selected Contractor as a result of this RFP and/or their subcontractors?”

**SFHSS Response:**

The City’s vaccination policy will not apply to the Contractor selected as a result of this RFP.
22. How does SFHSS recommend a vendor respond to a section of the RFP that may not apply to their organization? For example, should a proposal omit that section, include a statement about its applicability, or some other approach?

**SFHSS Response:**

If a section of the RFP is not applicable, SFHSS recommends that a proposer clearly state that the section is not applicable and if appropriate, include a brief clarification as to why.

For example, under Section 3 (Executive Summary), subsection e) (covering any non-routine investigations, complaints, etc.), if this is not applicable, simply state, “Respondent is not aware of any non-routine investigations, examinations, complaints, disciplinary actions or other proceedings within the past three (3) years.”