

ADDENDUM 1

DATE: June 7, 2019
PROJECT: Campaign Creative Services
RFP NO: 744-R1915
OWNER: The University of Texas Health Science Center at Houston
TO: Prospective Proposers

This Addendum forms part of and modifies Proposal Documents dated, May 14, 2019, with amendments and additions noted below.

1. Questions & Answers

Question 1: In the RFP and in daily dialogue at UTHealth, are you using the phrases “case for support” and “case statement” interchangeably?
a. If no, please articulate the difference between the two. We don’t want to make any assumptions as we have found clients use these phrases to sometimes describe the same thing, and sometimes think of them as two very distinct deliverables.

Answer 1: Yes.

Question 2: Has UTHealth ever worked with, or is UTHealth now working with a communications partner/agency to execute the kind of work outlined in this RFP?
b. If yes, who is that partner/agency?
c. If yes, have you been generally satisfied with the performance of that partner/agency?
d. If yes, do you expect that partner/agency to submit a proposal in response to this RFP?

Answer 2: No

Question 3: What is the budget (or budget range) that has been identified to fund campaign communications support for each of the next three fiscal years? We want to prepare a proposal that provides greatest ROI for your available resources.

Answer3: \$200,000-\$300,000 TOTAL OVER THE NEXT THREE YEARS

Question 4: So we can meet your expectations for strategic and creative deliverables, can you share a case for support and sample creative assets (specifically a case statement) that were prepared for a prior UTHealth campaign? If these assets

are available for review online, please provide appropriate URL's. (Note: the example "see attachment A" link in the RFP item 5.4.6 appears to be broken)

Answer 4: THIS IS OUR FIRST COMPREHENSIVE CAMPAIGN SO WE DO NOT HAVE AN EXAMPLE. THE ATTACHMENT A IS A GOOD EXAMPLE FROM ANOTHER UNIVERSITY. Attachment A – Sample Campaign is added to the Bid Opportunities webpage with the RFP materials and added to this Addendum.

Question 5: For the microsite deliverable identified in RFP section 5.4.7 of the RFP, do we understand correctly that the final deliverable is simply a .pdf mock-up with accompanying documentation to describe the intended user experience? YES

- a. If yes, does UTHealth plan to do all microsite development based on our .pdf design?
- b. If yes, how many levels (or pages) of content (editorial) do you expect Vendor to deliver with the design?

Answer 5: Yes

- a. Yes
- b. DESIGN DELIVERABLES WILL BE HOME PAGE, PRIORITY OVERVIEW PAGE, PRIORITY DETAIL PAGE, STORY DETAIL PAGE. EDITORIAL DELIVERABLES WILL BE HOME PAGE, PRIORITY OVERVIEW PAGE, THREE PRIORITY DETAILS PAGES, ESTIMATE OF SIX TO EIGHT STORY DETAIL PAGES (INCLUDES VIDEO WITH EACH STORY HOWEVER VIDEOS ARE NOT TO BE PRICED WITH MICROSITE DELIVERABLE).

Question 6: RFP items 5.4.8 and 5.5.5 identify, "Creative materials needed through the final three years of the campaign and to close the campaign. Materials may include videos, print materials, signage, etc. that tell stories of donors, students, faculty and research highlights (ongoing September 2019-August 2022)" and "Create other creative materials such as videos, print materials, signage, web pages etc. that are needed throughout the final three years of the campaign and to close the campaign. These materials will be used to tell stories of donors, students, faculty and research highlights." Because this list is far from definitive at this moment, and because we are not at all comfortable with the practice of determining specifications for three years worth of creative deliverables before we can execute a thorough discovery and strategy development process with UTHealth, how would you like us to address specifications and pricing for this unspecified set of deliverables?

Answer 6: THIS DELIVERABLE DOES NOT HAVE TO BE PRICED AS IT IS INTENDED TO INDICATE FURTHER WORK YET IDENTIFIED

Question 7: RFP section 5.5.6 states, "Utilize bids from qualified printers for best value and for UTHealth prior-approval." However, item 5.5.3 state, "Write, design and print the campaign case statement brochure highlighting our message and priorities. Deliverable should also include PDF that UTHealth Web Services can convert to flappable PDF for online distribution. (See Attachment for example)." If you

require a printing estimate for the case statement, please provide print specifications and quantities.

- a. Would you like us to build print management fees into our proposal, or does UTHealth intend to manage all printing?

Answer 7: THE PRINTING COST IS NOT NEEDED AS PART OF THE RFP, JUST THE WRITING AND DESIGN COSTS. PRINTING COSTS WILL HAVE TO BE DETERMINED AFTER PIECE IS DESIGNED.

- a. YES INCLUDE PRINT MANAGEMENT FEES

Question 8: RFP item 5.5.7 states, "Attend all meetings and participate in all conference calls as requested and/or scheduled by UTHealth." Do you expect the selected Vendor to attend all meetings in person? Do you expect the selected vendor to attend key/high-priority meetings in person? Or will you accept participation in person for key meetings and via online conferencing technology for routine meetings?

Answer 8: ATTENDING KEY MEETINGS IN PERSON WILL BE ACCEPTABLE AND ROUTINE MEETINGS VIA CONFERENCE TECHNOLOGY.

Question 9: In the pricing and delivery schedule, there does not appear to be a line for travel expenses and other out-of-pocket costs like stock imagery and video, a photo shoot, etc. Do you expect these kinds of expenses and costs (which are wholly unknown at this time) to be "buried" in the total pricing estimates in RFP section 6.2? Or is it acceptable to submit this proposal with a "plus travel expenses and other out-of-pocket costs not to exceed..." line? If this is not acceptable, how do you prefer we address such expenses and costs in the Pricing and Delivery Schedule?

Answer 9: IT IS ACCEPTABLE TO HAVE EXCLUSIONS TO YOUR PRICING. THOSE EXCLUSIONS SHOULD BE LISTED IN DETAIL.

Question 10: Who is the Incumbent? Is the RFP a result of the end of a contract period or search for new (different) creative services?

Answer 10: THERE IS NO INCUMBENT. THIS IS THE FIRST COMPREHENSIVE CAMPAIGN AT UTHealth.

Question 11: Is this a 3-year contract?

Answer 11: THIS IS AN ANNUAL CONTRACT WITH THREE ANNUAL RENEWALS FOR A TOTAL OF FOUR YEARS

Question 12: Who are the review committee members?

Answer 12: This cannot be disclosed.

Question 13: Will in person meetings be part of the RFP process?

Answer 13: After the scoring process is completed; the top ranked Proposers (I.E. 3-5) WILL BE BROUGHT IN FOR IN PERSON PRESENTATIONS.

Question 14: Who will be the point of contact once awarded? Who is the client?

Answer 14: THE OFFICE OF DONOR RELATIONS AND COMMUNICATIONS IS MANAGING THIS PROJECT AND WILL BE THE DAY-TO-DAY CONTACT. THE OFFICE OF DONOR RELATIONS AND SEVERAL OTHER KEY EXECUTIVES, INCLUDING THE VICE PRESIDENT OF DEVELOPMENT AND PUBLIC AFFAIRS AND EXECUTIVE DIRECTOR OF PRINCIPAL GIFTS, WILL BE THE PRIMARY "CLIENTS" IN TERMS OF FINAL APPROVAL OF DELIVERABLES.

Question 15: How does the HUB percentage play into selection decision?

Answer 15: It does not.

Question 16: What would be on the microsite? Functionality?

Answer 16: SEE EXAMPLES OF OTHER UNIVERSITY CAMPAIGNS PROVIDED IN THE RFP IN SECTION 5.4.9 -- DESIGN DELIVERABLES WILL BE HOME PAGE, PRIORITY OVERVIEW PAGE, PRIORITY DETAIL PAGE, STORY DETAIL PAGE. EDITORIAL DELIVERABLES WILL BE HOME PAGE, PRIORITY OVERVIEW PAGE, THREE PRIORITY DETAILS PAGES, ESTIMATE OF SIX TO EIGHT STORY DETAIL PAGES (INCLUDES VIDEO WITH EACH STORY).

Question 17: Is there a link or site where addenda be posted that we should be checking? Or will they come in the form of an email?

Answer 17: Proposers should always check the Procurement Services – Bid Opportunities webpage located at <http://www.uth.edu/buy/bid-list.htm> for official communications; we will also send out the addenda to those Proposers who have submitted questions regarding this RFP.

Question 18: How does UTHHealth envision celebrating its 50th anniversary as part of this campaign effort? Regardless, will there be a separate campaign to celebrate this milestone?

Answer 18: THE 50TH ANNIVERSITY WILL BE CELEBRATED DURING OUR BIENNIAL GALA IN NOVEMBER 2022 ALONG WITH THE CAMPAIGN TOTAL ANNOUNCEMENT. WE WILL INTEGRATE THE 50TH INTO OUR LOGO IN SOME WAY BUT THIS WILL BE HANDLED BY OUR PUBLIC AFFAIRS DEPARTMENT INTERNALLY. WE WILL INCLUDE THE FACT WE ARE APPROACHING OUR 50TH ANNIVERSITY AS PART OF THE MESSAGING

FOR THE PUBLIC LAUNCH. THERE WILL NOT BE A SEPARATE CAMPAIGN FOR THE MILESTONE.

Question 19: What is meant by “describe your process for handling alterations/change orders requested by your client”? Is this in reference to addressing feedback, rounds of revisions, etc.?

Answer 19: YES THIS IS IN REFERENCE TO ROUNDS OF REVISIONS

Question 20: What is the current state of alumni engagement/donor relations at UTHealth? Is there a culture of giving back/annual giving to the institution/organization?

Answer 20: ALUMNI ENGAGEMENT HAS HISTORICALLY BEEN THE RESPONSIBILITY OF EACH INDIVIDUAL SCHOOL. THIS PAST YEAR A POSITION WAS CREATED IN THE DEVELOPMENT DEPARTMENT TO BEGIN ENGAGING THE ALUMNI AS A WHOLE VERSUS SCHOOL TO SCHOOL. WE ARE HAVING MORE ALUMNI ENGAGEMENT EVENTS INCLUDING NEW EVENTS IN DALLAS AND AUSTIN THIS COMING FISCAL YEAR. AS A GRADUATE SCHOOL, ALUMNI ENGAGEMENT IS MORE CHALLENGING THAN WITH AN UNDERGRADUATE UNIVERSITY. WE DO SET GOALS FOR ALUMNI PARTICIPATION AND MONITOR THAT PROGRESS.

Question 21: Did UTHealth conduct a feasibility study to earmark the overall goal of \$500M by 2022?

Answer 21: YES IN 2016

Question 22: Does UTHealth have any existing market research for this initiative (alumni/donor surveys, benchmarks, etc.)? Will the awarded partner have the opportunity to conduct a discovery/immersion phase at the onset of this initiative?

Answer 22: WE WILL SHARE THE FEASIBILITY STUDY AND FINDINGS WITH THE SELECTED VENDOR. OUR CURRENT BUDGET DOESN'T ALLOW FOR ADDITIONAL DISCOVERY PHASE WORK.

Question 23: Does UTHealth have any existing brand assets, imagery, footage, etc. to incorporate in the new campaign video? Or is this expectation to shoot/capture new, original footage?

Answer 23: WE DO HAVE SOME MORE RECENT FOOTAGE BUT WILL EXPECT TO SHOOT ORIGINAL FOOTAGE FOR MOST OF THE VIDEOS.

Question 24: Has UTHealth already planned a Launch Event for this engagement? Or should this be considered as part of this RFP response?

Answer 24: THE LAUNCH EVENT WILL TAKE PLACE IN SPRING 2021. WE HAVE NOT BEGUN PLANNING THIS EVENT. THE SELECTED VENDOR'S ROLE IN THE EVENT IS UNCLEAR RIGHT NOW OTHER THAN PROVIDING THE LAUNCH VIDEO. THE EVENT SHOULD NOT BE CONSIDERED PART OF THIS RFP.

Question 25: In addition to the Launch Event/UTHealth YouTube channel, where else will you show the new campaign video? Is there a TV/broadcast media buy in place?

Answer 25: THE VIDEOS WILL BE SHARED ON OUR SOCIAL MEDIA CHANNELS AND POTENTIALLY OTHER DEVELOPMENT FOCUSED EVENTS THAT TAKE PLACE AFTER THE LAUNCH EVENT. THERE IS NOT A PLAN FOR A MEDIA BUY AT THIS TIME.

Question 26: Just to confirm, should print production/management be considered as part of the case statement development? Or does UTHealth currently have a print production partner? Additionally, how many pieces are you seeking to print?

Answer 26: BECAUSE THE SPECS OF THE BROCHURE ARE NOT DEFINED, PRINTING PRICING DOES NOT NEED TO BE INCLUDED IN THE RFP. UTHEALTH DOES HAVE SEVERAL PRINT VENDORS THAT REGULARLY PRINT OUR PIECES. WE HAVE NOT DETERMINED A QUANTITY OF BROCHURES.

Question 27: What CMS does UTHealth currently use for web? What is the anticipated CMS for the new microsite?

Answer 27: DOTCMS


Question 28: What internal fundraising/development and marketing/communications staff/resources does UTHealth have? (e.g., development officers, volunteers, graphic designers, web developments, content writers, etc.). Does UTHealth work closely with marketing/communications personnel at the System level?

Answer 28: THE DEVELOPMENT DEPARTMENT HAS APPROXIMATELY 70 EMPLOYEES THAT INCLUDE FRONTLINE FUNDRAISERS, OPERATIONS, COMMUNICATIONS, STEWARDSHIP, EVENTS, ETC. UTSYSTEM DOES NOT PROVIDE MARKETING/COMMUNICATIONS SUPPORT TO THE SYSTEM ENTITIES.

Question 29: Should pricing be included as part of an "entire proposal" response? Or should pricing be submitting in a separate document?

Answer 29: You may submit only in the "Original" or if included in all binders; be sure it is a separate page marked Pricing & Delivery Schedule.

Question 30: Can you provide a Word doc version of the RFP so we can respond to Section 3 of Appendix One?

Answer 30: Proposers should view the Procurement Services – Bid Opportunities webpage located at <http://www.uth.edu/buy/bid-list.htm> and use the  symbol to expand the section and view all the documents related to this project.

Question 31: Is there a certain percentage of the work that needs to be subcontracted?

Answer 31: No; but we encourage that you use HUB subcontractors in your bidding efforts to help UTHealth obtain our goals in HUB participation.

Question 32: Will the contract go to a Texas-based firm, or will priority be given to a Texas-based firm?

Answer 32: No; all are considered on an equal basis; this being said you must be able to accomplish all task and participate in all meetings as directed; see RFP for minimum requirements and scope of work.

Question 33: What are the UT Health graphic and web standards and accessibility guidelines?

Answer 33: <https://www.uth.edu/graphicguide/2014UTHealthWebStandardsForRFPs.pdf>
<https://www.uth.edu/graphicguide/2014UTHealthGraphicStandards.pdf>
Web accessibility follows the WCAG 2.0 AA standards (these are global industry standards).

Question 34: Do you need digital marketing services? Do you already employ a company or have in-house talent for these services?

Answer 34: DIGITAL MARKETING SERVICES COULD BE PART OF THE OTHER DELIVERABLES NEEDED FOR THE PUBLIC LAUNCH. WE DO NOT HAVE A VENDOR OR IN HOUSE SUPPORT CURRENTLY.

Question 35: Do we need to print eight copies of all additional required paperwork (not including HUB form)?

Answer 35: Yes.

Question 36: Do we need to fill in, sign and print the agreement / T&Cs (Appendix 2)?

Answer 36: No; this is just informational.

Question 37: For section 5.4.5 "Campaign Video" - should price assume this video being shot or using stock footage? (agency would strongly prefer to shoot, however many of the campaign examples in section 5.4.9 appear to use stock footage)

Answer 37: WE HAVE SOME CURRENT FOOTAGE THAT CAN BE EVALUATED/USED BUT WE WOULD NEED TO SHOOT NEW FOOTAGE FOR THE MAJORITY.

Question 38: For section 3.2.4 "Reporting" - can University elaborate on the types of reports they are seeking? Would market research reports be of interest to University? Is the University seeking reporting on performance of media?

Answer 38: THE REPORTS NEEDED WOULD BE BUDGET, PAYMENT STATUS, TIMELINE UPDATES. MARKET RESEARCH AND MEDIA REPORTS WOULD NOT BE NEEDED.

Question 39: Will the campaign communications have paid media behind them? Is the University seeking agency assistance with planning and buying media for this campaign?

Answer 39: WE DO NOT HAVE ANY PLANNED MEDIA BUYS AT THIS TIME

Question 40: For section 3.2.2 - What is the ideal agency start date for the University?

Answer 40: AUGUST 2019

Question 41: For section 5.4.7 - Can University share examples of microsites similar to what they are looking for? For example: a.) How many tabs should the microsite have? b.) Will user have ability to donate via the microsite?

Answer 41: SEE EXAMPLES OF OTHER UNIVERSITY CAMPAIGNS PROVIDED IN THE RFP IN SECTION 5.4.9 -- DESIGN DELIVERABLES WILL BE HOME PAGE, PRIORITY OVERVIEW PAGE, PRIORITY DETAIL PAGE, STORY DETAIL PAGE. EDITORIAL DELIVERABLES WILL BE HOME PAGE, PRIORITY OVERVIEW PAGE, THREE PRIORITY DETAILS PAGES, ESTIMATE OF SIX TO EIGHT STORY DETAIL PAGES (INCLUDES VIDEO WITH EACH STORY). YES THERE WILL BE THE ABILITY TO DONATE ON THE MICROSITE.

Question 42: For section 3.6.3 - Can University elaborate on request for "contingency plan or disaster recovery plan in the event of a disaster"?

Answer 42: You may present any document that you may have regarding disaster recovery; for this project it may be what you will do if all project work is lost due to computer damage, theft, or personnel actions.

Question 43: How much has UTHHealth already raised toward this campaign?

Answer 43: WE'VE RAISED JUST OVER \$300MM. WE PLAN TO GO PUBLIC ONCE WE RAISED AROUND \$400MM.

Question 44: Is there a priority to raise funds for the TMC3 initiative within the campaign? Or does TMC3 have separate funds set aside?

Answer 44: TMC3 IS NOT PART OF THIS CAMPAIGN.

Question 45: Does UTHealth have a campaign messaging brief already in development?

Answer 45: WE HAVE DEVELOPED MESSAGING AROUND THE THEME AREAS (BRAIN AND BEHAVIORAL HEALTH, HEALTHY AGING, WOMEN'S AND CHILDREN'S HEALTH) BUT NOT THE PRIORITY AREAS.

Question 46: If not, what is the extent that UTHealth has already preformed campaign messaging?

Answer 46: WE HAVE PREFORMED IDEAS AROUND THE PRIORITY AREAS (ENDOWMENT GROWTH, SCHOLARSHIPS, AND ACADEMIC PRIORITIES) BUT NOT MESSAGING.

Question 47: Is there a need for media strategy and buying and placement?

Answer 47: POSSIBLY DIGITAL MEDIA STRATEGY BUT NOT TRADITIONAL MEDIA.

Question 48: Do subcontractors need to be identified in this stage of the RFP or is it simply an acknowledgement of using subcontractors?

Answer 48: It is very important to review, understand, and submit your HUB Subcontracting Plan with you bid response; failure to comply will result in disqualification. If you need assistance in understanding the HSP; please contact Shaun McGowan directly as instruction in Section 2.5.3.

For Section 5.3.10, we DO ASK THAT IF ANY OF THE SAMPLES PROVIDED WERE CREATED BY A SUBCONTRACTOR, THEY MUST INDICATE WHICH SAMPLE AND THE NAME OF THE SUBCONTRACTOR.

Question 49: Is there a maximum number of pages for the proposal?

Answer 49: As few as you can but still provide the information requested. You will not be scored on either a low or high page count.

Question 50: How critical is agency location to your criteria and scoring?

Answer 50: AGENCY LOCATION IS NOT A CRITICAL FACTOR IN SCORING

Question 51: Has a discovery already been completed for insights (e.g., personas) into crafting the campaign to be developed and implemented?

Answer 51: A FEASIBILITY STUDY WAS CONDUCTED IN 2016.

Question 52: How does UTHHealth currently track performance for its creative design and execution?

Answer 52: OUR CREATIVE DESIGN IS CURRENTLY COMPLETED IN HOUSE THROUGH THE CREATIVE SERVICES TEAM IN PUBLIC AFFAIRS.

Question 53: How are you currently measuring reputation and audience perceptions?

Answer 53: AN INITIAL STUDY WITH A TARGET AUDIENCE WAS CONDUCTED ALONG WITH OUR BRANDING CAMPAIGN IN 2014. ANOTHER FOCUS GROUP WAS CONDUCTED PART WAY THROUGH THE BRANDING CAMPAIGN TO GAGE EFFECTIVENESS. THESE RESULTS CAN BE SHARED WITH SELECTED VENDOR.

Question 54: Are there any challenges UTHHealth is currently facing in its path to meet its objectives/goals?

Answer 54: WE'VE RECENTLY HAD A REORGANIZATION WITHIN THE DEVELOPMENT DEPARTMENT SO WE HAVE SOME LEADERSHIP POSITIONS VACANT INCLUDING TWO POSITIONS THAT OVERSEE THE MAJOR GIFTS TEAM. WE HOPE TO HAVE THOSE POSITIONS FILLED IN THE COMING MONTHS. WE ARE ALSO WORKING TO STRENGTHEN OUR PIPELINE OF NEW DONORS THROUGH OUR GRATEFUL PATIENT PROGRAM AND OUR ALUMNI ENGAGEMENT ACTIVITIES. WE HAVE SOME DATA ISSUES WE ARE WORKING THROUGH TO HELP REMEDY THIS.

Question 55: What Key Performance Metrics will be used to determine the project's success?

Answer 55: MEETING THE TIMELINE/DEADLINES SET FORTH FOR EACH DELIVERABLE, ACHIEVING THE REVENUE GOAL OF \$500MM BY THE END OF THE CAMPAIGN. WE WILL DISCUSS AND SET OTHERS WITH SELECTED VENDOR AT THE LAUNCH OF THE PROJECT.

Question 56: Is there a current brand style guide for UTHHealth to be referenced when designing the creative pieces and advertising?

Answer 56: <https://www.uth.edu/graphicguide/2014UTHealthWebStandardsForRFPs.pdf>
<https://www.uth.edu/graphicguide/2014UTHealthGraphicStandards.pdf>

Question 57: The scope of work doesn't speak to completing a discovery prior to developing the campaign messaging. Is UTHHealth interested in completing a discovery for this campaign?

Answer 57: WE WILL SHARE THE FEASIBILITY STUDY CONDUCTED IN 2016 AND ITS FINDINGS WITH THE SELECTED VENDOR. OUR CURRENT BUDGET DOESN'T ALLOW FOR ADDITIONAL DISCOVERY PHASE WORK.

Question 58: "Create other creative materials" is a line item in Section 6. For our ability to provide accurate figures, can UTHHealth provide estimates of how many creative materials would need to be developed throughout the length of the contract? If not, should responding agencies identify hourly agency rates? If so, where should they be placed (as Section 6 doesn't allow for it)?

Answer 58: Please delete this line item; this will be requested at a later date.