

## QUESTIONS & ANSWERS

**Date:**

**Reference Request for Proposal Number: RFP-217772-CATALYZE-PHIL-2023-0002**

Dear Offerors,

Please see below answers to the questions submitted [catalyze.procurements@thepalladiumgroup.com](mailto:catalyze.procurements@thepalladiumgroup.com).

No	Question	Answer
1	Will the cohorts from Pasig and Naic all come from the same barangays, or will the cohorts be composed of participants from different areas?	Different brgys. Selection by CATALYZE.
2	Who are the point persons to be contacted from DSWD and the health departments?	That information is not available at the moment, but CATALYZE will coordinate once activity has begun.
3	Who selects the cohort participants? Will the project be tasked to identify target participants?	CATALYZE will be selecting participants in coordination with LGUs and DSWD.
4	What criteria has been used/should be used to profile participants? Is data on these participants available from local facilities?	
5	Who will be the trainers to be trained? Have these been identified in the community or is identifying talent part of this RFP?	Brgy health workers.
6	Please provide clarity on target population/audience: Item (c) on technical proposal indicates: "Review of the existing health training modules and designs for 18–24-year-olds" while project background states that "will engage adolescent girls (ages 12-17) belonging to 4Ps households"	The project will involve 12-17 yo through the mentorship RFP. Focus of the Health RFP are 18-24 yo and TOT for BHWs.
7	As per the 4P's IRR by the DSWD Rule XV (Exit from 4Ps), a household shall be deemed to exit from the program when: a) The last monitored child in the household reaches 19 years old b) The last monitored child finishes high school  Are these acceptable exclusion criteria for the selection of participants? o What about those who chose to pursue college but are still willing to work?	CATALYZE, not selected bidders, will be responsible for the selection of participants.
8	The identified "willing to enter into the labor force" would also exclude 18-24 that are already working, is that also an exclusion criteria for participation?	CATALYZE, not selected bidders, will be responsible for the selection of participants.

No	Question	Answer
9	Family planning and reproductive health, maternal and child health, mental health, and health literacy are specifically mentioned in the RFP. Is the curriculum required to cover all four topics?	Content to be finalized during the curriculum development workshop but for bidding purposes, focus on these topics specified in the RFP.
10	Do we have visibility on any ongoing health education in the local public schools? This is to avoid redundancy or confusion in subject material.	CATALYZE will conduct baseline assessment of existing programs and activities/curricula. This will be shared with selected bidders, but bidders should include own assessment in technical approach.
11	Will there be gender sensitivity and SOGIE in the topics? How do we cater to genderqueer participants in the gender mainstreaming component?	This will be co-developed with selected bidder.
12	Will the health literacy or mental health components also encompass substance use and smoking cessation?	Bidder should focus on core topics mentioned in RFP, but bidder can propose additional topics if part of their technical approach.
13	Will media literacy and handling disinformation also be included in the health literacy component?	Should be focused on navigation of health systems. Bidders can propose additional topics if part of their technical approach.
14	Is there a site already identified for training? Or will the venue be rented by the organization?	Bidders are encouraged to propose and include in the costing.
15	Will the training be entirely face to face? Will there be provision for asynchronous learning to accommodate participants who may have work or other commitments? Will devices be provided to the participants to access any online resources?	In person only.
16	Will the 100 person cohorts be broken up or stratified into smaller groups/classes? If so, will venues be available for small group discussions and a large plenary session (e.g. school, barangay hall with different rooms, etc)	Bidders can propose ways to group cohorts, but not required.
17	What is the proposed schedule for these sessions? Will participants be available on weekends?	Bidders should propose their ideal training schedule. Should be within the timeframe of the CATALYZE project lifecycle.
18	If participants are coming from different barangays, will there be provision for their transportation to the sessions?	LGUs committed to provide if there is a need.
19	Will there be a separate assessment for the training of trainers? Will this project include defining the readiness/competence criteria, or is there already a pre-set criteria for this? What M&E scheme is proposed for trainers after this program? What is the scope of measurement for a 4-month cohort – can there be, alongside short	Bidders should propose their own approach to this component. Long term capability measurement not part of the MEL plan, assessments will be done after each cycle/cohort.

No	Question	Answer
	term (immediately after), a long term (1 year, 5 year after) capability measurement?	
20	Knowledge about different health topics are different from navigating the health system itself, do we need to include this as part of the covered topics?	Focus on topics specified in the RFP including navigating health systems.
21	Can the comfort parameter (for being able to talk about reproductive health and health topics) be with their peers, for unattached young adults?	Bidder should propose their approach
22	The RFP indicates "Online or digital materials and resources are welcome". Does it mean printed materials are not needed/necessary?	Not necessary, but printed materials may still be needed in some instances specially for Naic
23	Who will have the IP rights for the curriculum after the project? Is the project intended to be scaled or replicated in other areas? Will the offerors be able to use the curriculum for other future projects?	IP will be the property of USG. There may be scaling in the future, but not in the near term.
24	Is there a pre-determined schedule for training activities? Or will it be defined by the project? How many days are we allowed to allot for the training proper?	Bidder to propose. Should fall within project lifecycle, ideally only within the first two weeks of June.
25	Based on the illustrative schedule of deliverables, there is a short time period for the review of existing curricula and design of the training. However, we think there is a need for in-depth training needs analysis and co-creation with target participants. Is this timetable flexible or is there a set target date for when delivery of the training should begin?	CATALYZE will conduct baseline assessment/scoping and share with the selected bidder. Selected bidder is free to conduct additional assessment if needed as long as the training can still be conducted early June.
26	Anticipated Contract Period of Performance indicates February– September 2024 (8 months) with the option for continuation year by year and 4-month long cycles/cohorts. Submission of the RFP is on March 15. When is the expected realistic start date and what is the duration?	Evaluation will be done immediately once RFP closes. Targeting to have the LSP onboard end of March to first week of April
27	What is the time-frame for performance-based milestones under the P4R model? Should these be accomplished by the end of the project?	Everything should be within the timeframe specified in the RFP (i.e. Sept 2024)
28	Is there a minimum or maximum number for team composition? How many consultants are permitted?	RFP requires 1 Activity Manager and up to 2 other team members. No restrictions on number of consultants. All personnel proposed should show reasonable LOE vis-a-vis the proposed scope of work.
29	How would you feel about doing the TOT BHW training/mentoring alongside the health training? So the BHWs are "trained" alongside	Priority is the health training for 4Ps youth considering other processes that will follow so the team recommends having the TOT once health training is done.

No	Question	Answer
	delivery of the health training? Experts by experience	
30	Do we have a baseline health profile status of the participants?	CATALYZE will conduct baseline assessment/scoping and share with the selected bidder.
31	How will the F2F sessions go? How many hours/days per week?	Bidder to propose. Should fall within project lifecycle.
32	Scoping. Will CATALYZE share info? If so, when?	Results will be shared during the curriculum development workshop or as soon as subcontractors have been selected.
33	What about out-of-school youth? Will they not be included? They're at higher risk of poorer health outcomes	Eligible participants must possess a senior high school diploma and not be currently enrolled in college.
34	Can one organization bid for two modules/topics?	Yes, but other RFPs already closed; only the Health RFP is active.
35	What is the role of bidders in doing baseline assessments?	Selected bidders can do their follow-up scoping if needed. But there is secondary data (e.g., from DSWD) that can be used on 4Ps and assessments on conducting trainings that can be used to inform bidders' proposals