RFP QUESTIONS AND ANSWERS

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<th>RFP Q&amp;A Number:</th>
<th>1036395-RFP-01</th>
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<tr>
<td>Project Title:</td>
<td>Meeting Facilitator - &quot;Building Capacity for Trauma-Informed Pediatric Care&quot; project</td>
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<tr>
<td>Application Deadline 11:59 pm CST:</td>
<td>November 25, 2022</td>
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<tr>
<td>Proposals must be emailed to:</td>
<td><a href="mailto:385RFP@aap.org">385RFP@aap.org</a></td>
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<tr>
<td>Questions about this RFP must be submitted to the application email address above and will be accepted until:</td>
<td>November 12, 2022</td>
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<tr>
<td>Responses to questions will post on:</td>
<td>November 15, 2022</td>
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QUESTIONS AND ANSWERS

**Question 1:** Are you amenable if we bring in a second team member to accurately capture the in-person meeting notes?

**Answer 1:** Yes.

**Question 2:** Can you share an estimated budget for this work? Does the budget include travel for the consultants for the in-person meeting in Illinois?

**Answer 2:** We are not able to provide an estimated budget for this work. The AAP will cover the travel costs for 1 consultant. If you wish to bring in a second team member, please include travel costs in your proposal.

**Question 3:** Relational health is often described in the context of the early years in the lives of children. Assuming some focus on the entire age spectrum, is the expectation that this project will have an emphasis on TIC in Pediatric Care for young children?

**Answer 3:** This project will focus on providing trauma-informed care to all pediatric patients, (including young children and adolescents) AND families.

**Question 4:** Has the National Partnership Council been established and if not, is the respondent expected to have a role in any recruitment of that body?

**Answer 4:** The National Partnership Council roster is being finalized. The respondent is not expected to have a role in recruitment of that group. AAP staff will be responsible for recruitment.

**Question 5:** What role, if any, will the applicant have in developing, refining and/or delivering curriculum? And who is the final audience for the curriculum?

**Answer 5:** The applicant will not have any role in developing, refining, and/or delivering the curriculum. The final audience for the curriculum is pediatric health care professionals. The role of the consultant is meeting facilitation and related tasks.

**Question 6:** Is the implementation vehicle to be only through the AAP Chapter structure or do you anticipate other avenues for spreading this (e.g., NCE, PREP, ALF sessions, ASHEW Learning Collaboratives of initiative, Pediatrics Supplement)?

**Answer 6:** We anticipate that content related to trauma-informed care will be shared through a wide range of avenues, including (but not limited to) national conferences, the Annual Leadership Forum (ALF), ECHO, self-directed learning, etc. However, the meeting facilitator would not be involved in implementing content.
Question 7: What is the nature of the final report? Is it a practice paper, a meeting summary, etc.?
Answer 7: The format of the final report can be decided upon in collaboration with AAP project staff but ideally would be a summary (in a word document) of work performed, lessons learned, and recommendations for future work.

Question 8: Would you consider granting an extension if the answers to questions are delayed, or due to the Thanksgiving holiday (given that proposals are due on Nov. 25)?
Answer 8: We are not able to extend the deadline for the RFP at this time.

Question 9: Is the date for the In-Person National Partnership Council in Illinois confirmed?
Answer 9: The date is not confirmed, but it will likely be held in late January 2023 or February 2023.

Question 10: Are the Consultants responsible for any aspect of coordinating the In-Person meeting (i.e., logistics, planning or production)?
Answer 10: The consultants would be responsible for assisting the AAP staff in the planning for the discussions that will take place during the in-person meeting, and for facilitation of the in-person meeting. Other logistics (travel, food, etc.) will be handled by the AAP. The AAP will provide and assist with in-room technology.

Question 11: Will community leaders be included?
Answer 11: The roster for the National Partnership Council is still being finalized, but it is possible that community leaders could be invited to participate.

Question 12: Will social workers be included?
Answer 12: The roster for the National Partner Council is still being finalized, but it is possible that social workers could be invited to participate.

Question 13: Will the Consultants be responsible for developing TIC and Relational Health Curriculum or modifying existing materials?
Answer 13: No, the consultant will not be responsible for any part of curriculum development or modifying existing materials.

Question 14: Can you clarify if the 3-4 subsequent virtual meetings are meant to build on the in-person session OR are these didactic trainings related to TIC and relational health that begin to build that content knowledge among AAP membership at large, or only for members of the National Partnership Council?
Answer 14: The 3-4 subsequent virtual meetings are meant to build upon the in-person National Partnership Council meeting and are only for members of the National Partnership Council. They are not meant to be didactic trainings to build on content knowledge or implement curriculum, but more so for strategic planning discussions related to the overall grant initiative.

The primary role of the National Partnership Council is to provide high-level strategic oversight for the Building Capacity for Trauma-Informed Pediatric Care initiative and work collaboratively to advance a national agenda to address barriers and gaps and integrate relational and trauma-informed care as the foundation of all pediatric care.

Question 15: Do you want the 3-4 sessions to be recorded with voice over technology for future accessibility? Or, will they be offered as one-time offerings/not recorded?
Answer 15: The 3-4 virtual sessions would likely be held over Webex as live events/virtual meetings. They may be recorded and shared with the National Partner Council, for those who could not attend. The AAP would handle the recording of the meeting (and permissions).

Question 16: Will AAP provide CME for the trainings?
Answer 16: CME will not be provided for the meetings.

Question 17: Will the final report be published or made available to anyone other than AAP or members of the National Partnership Council?
Answer 17: It is likely that the final report will only be shared with the AAP and relevant project partners (including the funder and subrecipients).

Question 18: Where will answers to questions be posted on November 15, 2022?
Answer 18: Answers will be posted on https://www.aap.org/en/about-the-aap/rfp-opportunities/

Question 19: Can references include individuals from AAP with whom we have worked as partners if we have never had AAP as a client?
Answer 19: Yes, references can include individuals from AAP with whom you have worked as partners.

Question 20: Has the National Partnership Council convened previously?
Answer 20: This will be the first iteration of this National Partner Council, but the group will likely include individuals who are familiar with ongoing trauma-informed care work at the AAP.

Question 21: Are the members of the NPC AAP, UCLA, and UMass Chan, or will it include other individuals? If so, have these individuals been identified? If not, would the contractor have a role in identifying attendees?
Answer 21: The National Partner Council will include project partners from the AAP, UCLA, and UMass Chan, but will also include individuals from other national organizations like National Child Traumatic Stress Network (NCTSN). The consultant will not be involved in identifying attendees – the AAP is leading this component.

Question 22: Based on the pricing sheet, the in-person meeting will be held at the AAP headquarters. Will the AAP cover the cost of food/drinks, or should this be included in the budget??
Answer 22: The cost of food and drinks for the in-person meeting will be covered by the AAP and does not need to be included in the budget from the respondent.

Question 23: Should the consultant incorporate the cost of meeting registration software in the pricing sheet?
Answer 23: No, this is not necessary to include in the pricing sheet.

Question 24: Will the contractor be responsible for designing the report?
The consultant will be responsible for designing the report. However, this does not need to be a formal document, and can simply be a summary of work performed, lessons learned, and key recommendations for future work, in a word document.