



McKNIGHT BRAIN RESEARCH FOUNDATION

Preserving memory, enhancing life

Meeting of the Communications Committee of the Board of Trustees

April 19, 2023
6:00 – 7:00 PM ET

Via Zoom

Zoom Link: <https://zoom.us/j/99519636033?pwd=cnpzZ0syR0o5Qnh3czNvWS9wS1JRZz09>

Meeting ID: 995 1963 6033

Meeting Password: 065220

Members: Dr. Patricia Boyle, Communications Committee Chair; Dr. Michael L. Dockery, MBRF Chair; Dr. John Brady; and Dr. Sue Pekarske

Also Attending: Dr. Angelika Schlanger and Ms. Valerie Patmintra

AGENDA

6:00 pm ET	1.	Call to Order/Welcome/Roll Call	Dr. Boyle
ACTION	2.	Approval of Minutes from January 23, 2023	Dr. Boyle
	3.	Review of Updated Activity Timeline	Dr. Boyle Ms. Patmintra
	4.	2023 Q1 Website and Media Tracking Report	Ms. Patmintra
6:10 pm ET	5.	MBRF Website Navigation Updates a. Overview of “user personas” b. Update on user testing plan	Dr. Boyle Ms. Patmintra
6:15 pm ET	6.	May’s Mental Health Awareness Social Campaign a. Review campaign creative theme, tagline and call to action b. Review planned outreach tactics	Dr. Boyle Ms. Patmintra
6:25 pm ET ACTION	7.	Review of Proposals and Budget levels submitted in response to the 2023-2024 Communications Plan RFP	Dr. Boyle Ms. Patmintra Dr. Schlanger
6:55 pm ET ACTION	8.	Next Steps and Adjourn	Dr. Boyle

MINUTES
MCKNIGHT BRAIN RESEARCH FOUNDATION
COMMUNICATIONS COMMITTEE OF THE BOARD OF TRUSTEES CONFERENCE CALL
January 23, 2023
Draft for Committee Approval

The McKnight Brain Research Foundation's Communications Committee conference call began at 4:00p.m. Eastern on Monday, January 23, 2023.

The following MBRF Trustees participated in the call:

Dr. Richard Isaacson, Chair
Dr. Mike Dockery, MBRF Chair
Dr. John Brady
Dr. Sue Pekarske

Dr. Angelika Schlanger and Ms. Valerie Patmintra also participated.

1. Call to Order and Roll Call

Dr. Isaacson welcomed the group to the call and took roll of who was participating. Dr. Schlanger mentioned that Dr. Boyle had a conflict come up at the last minute and wouldn't be able to participate in the meeting. Dr. Isaacson said he was looking forward to walking the group through the work that has been coming to shape over the last few months. He also noted that he received an email with a question from Patricia that he would share with the committee as part of the communications budget planning discussion.

Dr. Isaacson then asked the committee if there were any comments or changes to the August 11 meeting minutes. With no edits requested, the August 11 Communications Committee meeting minutes were approved.

2. Activity Timeline

Dr. Isaacson reviewed the current and updated items included in the Communication Activity Timeline. He updated the committee on the changes being made to the graph in the Cognitive Aging Explained brochure and mentioned the challenges with translating data from a research paper into a forward-facing, consumer-friendly chart. Ms. Patmintra confirmed the changes Richard suggested have been made to the chart and said she will send the updated brochure to Richard for a final review this week. Dr. Isaacson shared that the original data that informed the chart were in abstract form and there have been changes to the study data since the abstract was first published in 2019. The changes being made to the chart in the brochure are to only focus on results for the early prevention and treatment group

that participated in the trial and to note the longer time they were evaluated, increasing from 12 months to 18 months.

Dr. Isaacson also noted the Home Page Refresh section of the timeline, explaining that a link to review a proposed update for the website navigation was included in the email with the meeting materials and will be discussed later in the meeting.

Dr. Isaacson noted that the Primary Care Provider section of the website will be built out and developed further based on results from the landscape analysis being conducted by the education committee. He also mentioned the need to add fresh content and blog posts to the site weekly and said it's always helpful to feature articles including quotes from the Trustees and news on relevant research.

Dr. Isaacson noted that the Communications Working Group met in December and asked if a motion was needed to approve those minutes. Ms. Patmintra and Dr. Schlanger confirmed the minutes are for informational purposes only and will be approved by the Communications Working Group when they meet again in February.

3. Website Navigation Updates

After walking through the communications timeline, Dr. Isaacson opened discussion on the proposed website navigation updates. He noted that every couple of years it's helpful to take a look at your website with fresh eyes to see if anything should be changed or updated to better reflect how people are engaging with the site. Dr. Isaacson shared his screen to review the proposed navigation updates Ms. Patmintra and the web agency prepared for review. He shared that a best practice with website navigation is less content/words on the homepage is typically most effective to drive people to a call to action. He noted changing the main image call to action button to "Learn More about Brain Health" as a change that was made recently to drive people to explore more of the site's educational content.

Dr. Isaacson also pointed out that the new navigation will use less words across the top of the site and a dropdown menu will appear when you hover over each item to show more of the content available in each section of the site. He noted that as part of the effort to make the site more public facing and engaging to users, a new "Tips for You" landing page will be added to lead to the content on Cognitive Aging and Brain Health. Dr. Isaacson then mentioned that "For Researchers" is the next item in the navigation to reflect that researchers are a priority audience and we want to clearly direct them to information on scholarship and award opportunities.

Dr. Isaacson also noted that as the Foundation works to focus more effort on engaging with Primary Care, this section of the site was renamed "Primary Care Providers" to reflect the number of medical professions that fit under the umbrella term as opposed to "Primary Care Physicians" which only applies to physicians.

Dr. Isaacson mentioned that to engage users more with our educational content on the site, the “Who We Are” and “What We Do” tabs are on the far right of the navigation. He then noted that after the changes are implemented, we can use heat mapping to see what users click on the site and determine what’s working.

After walking through the proposed navigation, Dr. Isaacson asked the committee for their thoughts on the amount and types of words used. Dr. Dockery asked about using the terms “Who We Are” and “What We Do” and asked if using “About Us” as the header for that content is more relatable and common practice. Dr. Isaacson agreed and noted that the “Who We Are” and “What We Do” tabs would be collapsed under “About Us” going forward.

Dr. Isaacson also mentioned he has a user experience consultant that could be asked to review the site and provide suggestions. He noted that his contact has worked with major brands like Verizon and American Express and would offer objective feedback, but it could be critical as he has such high standards.

The committee members discussed if “Primary Care Providers” should go before “For Researchers” and Dr. Brady asked if there is a way to change the order of the navigation based on who is coming to the site/where they are coming from. Dr. Isaacson said it’s a great question, but not something that’s easily done. He said with the scripting that’s required to change the navigation, it would be too complicated to try and change for different web visitors.

Dr. Dockery suggested that if we’re confident Researchers will find the content they’re looking for on the site, we could list for “Primary Care Providers” before “For Researchers” to draw more attention to that content. Dr. Pekarske agreed with Dr. Dockery’s suggestions. Ms. Patmintra suggested leaving “Primary Care Providers” third in the navigation until a plan is in place to update that content with feedback from the education initiative.

Dr. Dockery asked how traffic could be studied to help with the navigation updates. Dr. Isaacson said that while we can study bounce rates and click throughs, we can’t boil down to see differences in who comes to the website as far as if the users are researchers or primary care providers, but testing is still very useful. He suggested that for around \$5,000 a very targeted advertising campaign could be launched along with the new navigation to get immediate feedback on what’s working,

Dr. Isaacson asked for a motion to approve updating the website navigation with what was presented, but collapsing the “Who We Are” and “What We Do” to one “About Us” tab and changing the order to put “Primary Care Providers” second in the navigation and “For Researchers” third. He also asked for approval to dedicate \$2,500 from the social media budget to a targeted advertising campaign to test the new navigation, Dr. Brady seconded and the motion was approved.

4. Update on Brain Health Video Series featuring Dr. Isaacson

Dr. Isaacson provided background on the video series being presented for consideration to license and rebrand for the MBRF website, noting that he filmed the videos as a pro bono project for BrainMind in 2020. The videos were shot in one day by a Hollywood Production Company for BrainMind Foundation to share with their donors and after about a year, BrainMind released the videos to the public. When Dr. Isaacson started his position at Florida Atlantic University, they paid \$50,000 for a licensing arrangement to post the videos to the FAU YouTube channel as the Master Brain Health Course offered. FAU also paid \$18,500 in editing to re-skin the videos to include the FAU logo and branding.

Since the Foundation could benefit from having video content on the website and to share with users, Dr. Isaacson would like to ask BrainMind for a new licensing agreement allowing MBRF to re-skin 10 of the videos with the Foundation logo and post them to the website. Dr. Isaacson would ask BrainMind for a licensing agreement between \$12-\$15,000 to use 10 videos. An additional \$12-\$15,000 will be needed to edit the videos to include the MBRF logo. Dr. Isaacson suggested using funds from his approved \$40,000 discretionary budget to cover the licensing and editing charges.

Dr. Isaacson suggested creating a landing page to host all of the videos on the MBRF website and including links to specific videos from relevant pages throughout the site. He also suggested editing a few videos down to short segments to post on social media.

Dr. Brady and Dr. Pekarske both complemented Dr. Isaacson on the video series, noting that they are an excellent resource and can be used to educate many different audiences – from primary care to patients and potentially even residents. Dr. Isaacson and Dr. Schlanger mentioned that if budget allows, they would also like to record new introductory and conclusion videos to tie them in with the MBRF mission and set up the series for use on the website.

Dr. Isaacson made a motion to approve licensing and re-skinning the 10 videos outlined in the accompanying document for use on the MBRF website using funds from his \$40,000 discretionary budget. Dr. Pekarske seconded the motion and the committee approved.

5. Communications Planning and Budget Ideas

Dr. Isaacson opened the discussion on the communications planning and budget ideas by reading an email from Dr. Boyle suggesting that continuing to increase the communications budget incrementally is likely the best approach. Dr. Isaacson agreed that incrementally growing the communications budget is a reasonable approach, it won't be successful in reaching the Foundation's broader goals of increasing brand awareness and being listed as the top organization for relevant Google searches.

Dr. Isaacson said that in his experience planning communications efforts one year as a time doesn't work and, that to be effective in increasing the MBRF reach, a two to three year-plan is needed as success isn't possible without a sustained investment.

Dr. Dockery admitted he doesn't know a lot about communications and social media, but does see the benefit in investing in communications, especially as it's one of the Foundation's three pillars.

Dr. Brady asked for clarification on the organization's communications goal – if it's to drive awareness for the name or the missions. He noted there are many ways to collaborate to increase reach if raising awareness for the mission is most important.

Dr. Dockery said that Dr. Brady's question brings many different discussions to the forefront and that ultimately the vision is most important to raise awareness for, but it would also be great to build recognition for the MBRF name. He then asked for clarification on what the communications committee is being asked to do. Dr. Isaacson responded that his ask is to get approval for a three-year \$2 million plan to reach the Foundation's communications goals of gaining name recognition with consumer audiences and rank at the top of Google searches.

Dr. Isaacson opened the budget presentation and noted the slide tracking the website traffic year over year since 2020, noting that the Foundation is wasting its time only reaching 10,000 web users per year and needs to commit to a three-year plan.

Ms. Patmintra clarified that the original ask of the committee was to approve drafting an RFP at one or more of the proposed budget levels and using the proposals received in response to get a sense for how a communications agency would approach the work and what they recommend to reach our communications goals. The proposals would help the Trustees determine what budget level is most reasonable after seeing what different campaign proposals and the engagement metrics (media impressions, search rankings, web traffic) that could be reached at each level.

Dr. Pekarske noted that the communications budget is a complex conversation and asked if it could be brought to all of the Trustees for discussion.

Dr. Schlanger suggested that since SCP is also recommending a public health/public awareness campaign as one of the outcomes from the education committee, John Beilenson could be asked to provide a 10-15 minute informational session during the February Trustees meeting to discuss the Foundation's communications goals, the different budget levels outlined in the presentation and how the goals could be met at each budget level.

Dr. Isaacson asked that John Beilenson react to the slides and provide perspective on if the budget levels are reasonable or not based on the anticipated outcomes and help scale out a budget that would be needed for a certain amount of time to raise visibility for MBRF.

Dr. Isaacson proposed a two-step motion to invite John Beilenson from SCP and potentially one other communications agency representative to attend the Trustees' February meeting to provide a reaction to the slides and describe the costs and timeline needed to reach the goals outlined at each

budget level. He also asked that the Communications Committee discuss and motion to approve issuing an RFP for a communications plan at specific timelines and budget levels once those are determined. Dr. Brady seconded the motion and the committee approved.

With the meeting running over time, Dr. Isaacson thanked the committee for their participation and adjourned the call at 5:20pm ET.

Communications Activity Timeline
As Outlined in the 2022-2023 Communications Plan
Updated April 12, 2023

Activity	Date/Status	Action	Responsible Party	Comments
Patient Education Brochure	January-September 2022	Draft content and design a new patient education brochure	V. Patmintra	Worked from patient education content posted on the McKnight website to draft content for the new patient education brochure. Worked with designers to come up with different cover designs and titles for the patient education brochure. Based on feedback shared by the Communications Committee during their March meeting, the brochure was separated into two versions – “Keeping Your Brain Healthy” and “Cognitive Aging Explained.” “Keeping Your Brain Healthy” was approved by the Communications Committee in August, posted to the website in September and promoted as part of Healthy Aging Month. “Cognitive Aging Explained” was approved by the Communications Committee in August pending an update to the chart showing data from Richard’s 2019 research study. Working with Richard to see if the chart is approved for inclusion in the brochure. Pending Richard’s feedback, the new brochure will be posted to the website and promoted in May as part of the Mental Health Awareness Month social campaign.
McKnight Brain Website	September 2022 ONGOING	Home Page Refresh and Ongoing Content Development	V. Patmintra	Working from images approved by the Communications Committee in August, the home page of the website was updated to include a carousel of images that change each time a user visits the home page. A new version of the website navigation was also

				developed to more clearly draw in and guide consumer/patient audiences to the site content most relevant to them. The Communications Committee approved the new navigation in January and a user testing plan is being developed to test the new navigation before it's implemented on the website. Developed content ideas and a calendar outlining timing to add a consumer-focused blog to the website as a way to share timely tips and information with site visitors and ensure new content is added to the site on a regular basis. Consumer-focused blog will be added to the site this May.
	May 2021 – COMPLETE March 2022 – ON HOLD	Develop content to build a dedicated area of the website for PCP education	V. Patmintra	Created web content to educate PCPs on the differences between Alzheimer's disease and cognitive decline/age-related memory loss. Content emphasizes the need for appropriate patient screening and offers vetted screening tools/resources PCPs can use with patients. PCP section of the website was added in early May 2021. Efforts to further build out the PCP web content and promote it to relevant audiences are on hold pending outcomes from the education landscape analysis and communications agency RFP process.
	Spring 2021 ONGOING	Expert Interview Blog Series	V. Patmintra	Interviewing McKnight Trustees and experts from the MBIs to post the bi-monthly "Three Questions with..." Expert Interview blog series. Coordinating with CWG members to interview an expert from one of the MBIs each month as outlined in the calendar presented to the CWG during their October meeting.
Social Media	ONGOING	Develop monthly content themes and make regular posts to the MBRF	V. Patmintra	Developing themes and drafting content on a monthly basis to make 2-3 posts per week. Leveraging boosted Facebook posts and Google ads to drive additional traffic

		Twitter, Facebook and LinkedIn pages		to the McKnightBrain.org website. Working to implement a Social Media Campaign in May leveraging Mental Health Awareness Month. Campaign ideas and creative assets will be shared with the Communications Committee during the April 19 meeting.
Tracking and Quarterly Reports	Began in 2019 ONGOING	Conduct media tracking and provide quarterly updates.	V. Patmintra	Tracking media and social media metrics and reach throughout the year and providing quarterly updates to the Trustees. Tracking topics include: brain health, age-related memory loss, cognitive aging, cognitive decline, age-related cognitive decline, McKnight Brain Research Foundation, McKnight Brain Institutes. Q1 2023 Media Tracking report will be included for review with materials for the May 3 Trustees meeting package.
Communications Working Group	Began in 2019 ONGOING	Zoom meetings with members of the Communications Working Group	A. Schlanger/V. Patmintra Upcoming Meetings: April 19, 2023 June 2023 August 2023 October 2023 December 2023	Meet with members of the Communications Working Group every other month to engage in ongoing activities, including: - Identifying core competencies needed for each MBI to move forward with communications outreach - Reviewing, vetting and approving materials - Providing input on upcoming studies with relevant consumer/medical media angles - Identifying young researchers and studies of note to highlight on the MBRF website
FY2023-2024 Communications Planning	ONGOING		A. Schlanger/V. Patmintra	An outline of three different budget options and related activities to continue communications efforts through FY 2023 -2024 was prepared for review by the Communications Committee. The Communications Committee met on January 23rd and reviewed the proposed budget levels and possibility of issuing an RFP to work with a new agency partner starting

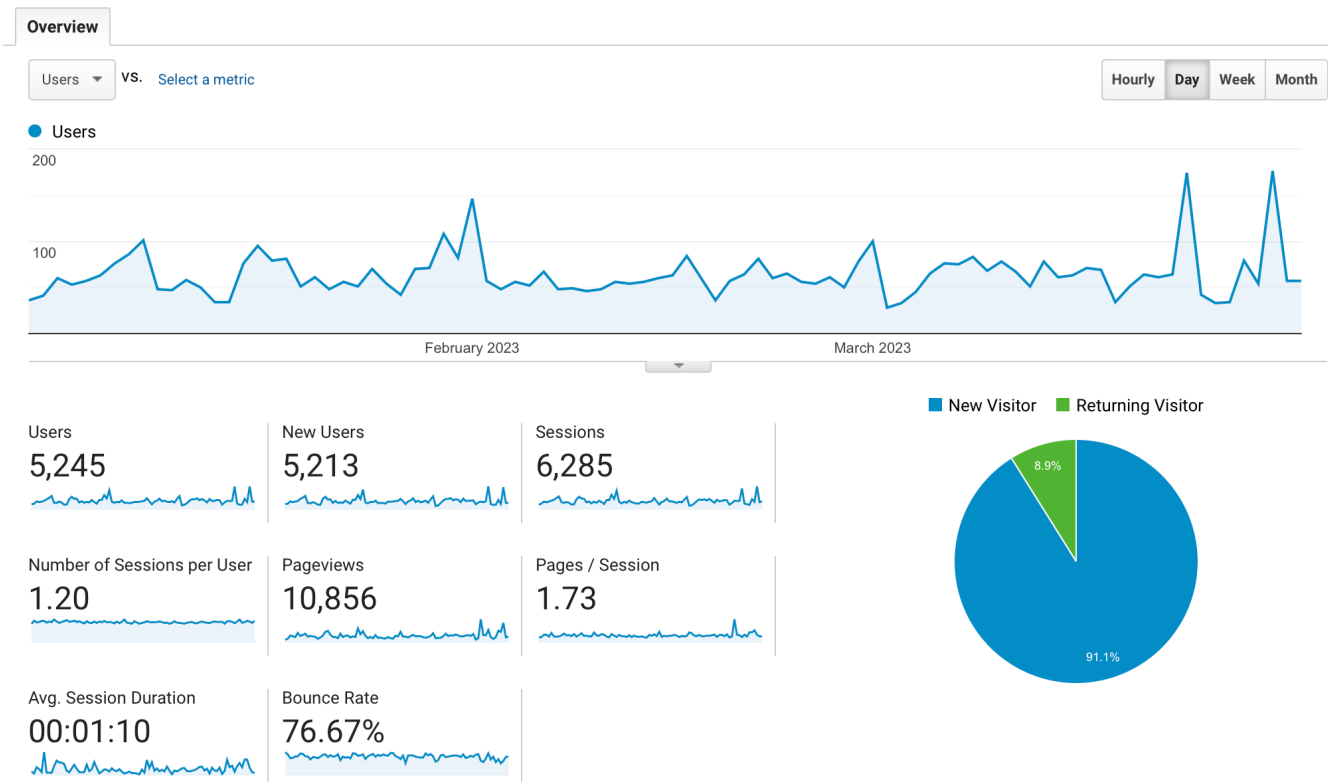
				July 2023. The discussion will continue at the Trustees meeting taking place on February 16, 2023. After approval during the February Trustees' meeting, an RFP was drafted requesting proposals for a three-year visibility campaign at three different budget levels. RFPs were sent to 5 agencies and responses were received in early April. Proposals have been reviewed and evaluated by Patricia, Angelika and Valerie and will be presented to the Communications Committee for review and discussion during the April 19 meeting.
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2023 McKnightBrain.org Traffic Report

	January	February	March	Q1 Totals
Users	1,792	1,613	1,906	5,245
Sessions	2,156	1,856	2,273	6,285
Page Views	3,700	2,882	4,274	10,856
Session Duration	1:16	:54	1:17	1:10

Q1 2023 McKnightBrain.org Traffic Totals



Definition of Key Terms

User: Any person who has visited the website. The moment a person lands on any page of the site, they are identified as a User.

Page Views: Total number of pages loaded by Users on the website, including when Users load the same page of the website.

Sessions: A group of user interactions within the website that take place within a given time frame. A single session may include multiple page views, events and social interactions. Sessions track the number of times a user interacts with the website.

Session Duration: How long a visitor remains on the website. Average session duration for direct traffic is 44 seconds.

2023 Media Highlights

Lindsay De Biase honored by McKnight Brain Research Foundation, UCLA Newsroom, April 4, 2023: <https://newsroom.ucla.edu/dept/faculty/de-biase-2021-mcknight-brain-research-foundation-award>

Giving for Neuroscience Research, Inside Philanthropy, March 15: <https://www.insidephilanthropy.com/state-of-american-philanthropy-pdfs/giving-for-neuroscience-research>

What We Learned from a Deep Dive Into Neuroscience Research, Inside Philanthropy, March 7: <https://www.insidephilanthropy.com/state-of-american-philanthropy-pdfs/giving-for-neuroscience-research>

From: [Angelika Schlanger](#)
To: [Patricia Boyle](#); [John Brady](#); [Mike Dockery, MD](#); [Sue Pekarske](#)
Cc: [Valerie Patmintra](#); [Cianciotto, Melanie](#)
Subject: Re: Communications Committee Meeting Materials (for April 19, 2023)
Date: Monday, April 17, 2023 8:48:13 PM
Attachments: [5. Summary Memo Three Year Communications Plan Proposal Comparison 4 17 23 FINAL.docx](#)

Good evening, everyone,

I hope you are doing well.

As promised, attached you will find an updated Summary Memo describing the proposals - the additions made to the document are the finalized rankings on the bottom of page 3, and the insertion of pages 5-7, which were added to summarize and compare the projected metrics and budget levels submitted by the top three agencies.

Also, for your reference, the following link provides concepts for our May Social Media Campaign, which we will briefly discuss on Wednesday. We will be moving forward with the second concept and have asked that the images of the individuals represent a diverse demographic throughout the campaign. Link is here: <https://xd.adobe.com/view/d3032bf5-f7d5-4b94-a617-3c9e6641cae1-8650/>

Many thanks to Valerie for her lead on these items. Please let us know if you have any questions. We look forward to hearing the discussion on Wednesday.

All the best,

Angelika

Angelika Schlanger, PhD
Executive Director
The McKnight Brain Research Foundation
www.mcknightbrain.org

On Fri, Apr 14, 2023 at 4:47 PM Angelika Schlanger <aschlanger@mcknightbrain.org> wrote:

Dear Members of the Communications Committee,

We are looking forward to our meeting on April 19th, when we will update you on our May social media campaign and discuss the communications proposals and budget levels submitted in response to our RFP.

The meeting documents are listed below in order of appearance on the agenda. The Summary Memo gives an overview and rankings for the top three submitted proposals.

1. Agenda

2. Minutes from the January 23, 2023 meeting
3. Committee Activity Timeline
4. Media Tracking Report
5. Summary Memo - Three-Year Communications Proposals (*please note: a comparison of the projected outcomes and budgets will be emailed to the committee on Monday)

For your reference, all five submitted proposals can be found by clicking [here](#).

Please let us know if you have any questions. Wishing you all a wonderful weekend.

All the best,
Angelika

Angelika Schlanger, PhD
Executive Director
The McKnight Brain Research Foundation
www.mcknightbrain.org



Three Year Communications Plan Proposal Comparison

Overview

With approval from the Communications Committee, a Request for Proposal for a Three-Year Communications Initiative was fielded to five communications agencies – BRG Communications, JPA Health, Qorvis, SCP and Whereoware. All five agencies expressed interest and excitement around the project and submitted proposals in time to meet the RFP deadline.

After reviewing the five proposals, two of the proposals submitted did not demonstrate the same level of creative thinking and background understanding of the MBRF and the field of cognitive aging. The proposals from Qorvis and Whereoware addressed the tactical components requested in the RFP, but didn't demonstrate how the agencies would work in partnership with the MBRF to better understand the issue area, craft unique messages, and successfully implement a measurable three-year campaign. For those reasons, the proposals from Qorvis and Whereoware are not included in the analysis below and only the top three agencies remaining in consideration as communications partners for the MBRF are highlighted in the proposal review and comparison chart below.

Based on the submitted proposals and introductory conversations, BRG, JPA and SCP appear to be strong candidates as partners for the MBRF communications initiative. They all presented very structured, detailed and well-thought-out proposals that demonstrated a strong understanding of the goals of the initiative, clearly outlined strategies and tactics recommended to achieve our goals, innovative ideas, and strong background experience conducting large-scale communications initiatives. They all have decades of experience with high-profile national clients and focus on the health, wellness and aging space.

The paragraphs below offer a brief summary to help distinguish the three proposals from one another, and the chart that follows compares the responses using a numeric grade to show the relative strengths of each agency across specific categories.

BRG Communications Proposal Review

BRG's proposal addressed all requirements of the RFP and highlighted the MBRF's unique positioning to continue advancing research on brain health and cognitive aging, while also raising awareness for the importance of the topic among consumers and primary care providers. BRG conducted a media audit to inform its proposal and found that brain health isn't a clear priority for most competing organizations in the space. By working to differentiate the MBRF messaging from what's currently offered by other organizations, BRG identified the unique opportunity for MBRF to drive behavior change while also building brand visibility.

With clients ranging from Fortune 500 companies to nonprofits, medical societies and industry associations, BRG focuses on communications initiatives to improve how people live through health and wellness. BRG expressed confidence that their team of experts as well as their background and expertise in health behavior change initiatives, make them a strong partner to advance the MBRF's communications efforts.

BRG is an integrated communications agency with in-house experts providing client services, including strategic planning, research and testing, brand strategy, influencer engagement, media relations, social media, digital marketing, content creation, and graphic design. BRG's unique approach to media storytelling consistently results in media impressions and placements that exceed client expectations.

Beyond the objectives we outlined in the RFP, BRG sees the potential to also build strategic partnerships, deepen our engagement with the research community, create a strong network of spokespeople and build relationships with media.

BRG recommends a strong foundation building process including an organizational assessment, marketplace review, program and message architecture development and consensus building to ensure the resulting integrated education and communications program is successful. The assessment findings would be delivered as two facilitated working group sessions to work through program goals and opportunities and used to develop an action plan to drive the communications initiative moving forward.

BRG did not share a suggested theme for the campaign, but said they will develop and share 2-3 creative themes for consideration after the foundation building process is complete. The proposal maps out how BRG would build visibility for MBRF through a range of activities including media relations, thought leadership, healthcare provider and researcher engagement, social media and influencer relationships and strategic partnerships. The proposal clearly describes the opportunity MBRF has to become a leading expert in the brain health field and demonstrates BRG's confidence that they can be a good partner to help us develop and build a successful outreach platform over the long term.

JPA Health Proposal Review

JPA submitted a proposal that addressed all elements of the RFP with an engaging visual and creative approach. The proposal expressed JPA's shared passion for the work the MBRF is doing and confidence in their ability to work with the MBRF to create an integrated communications plan that both raises awareness of brain health and elevates our organizational profile. JPA focuses exclusively on health and has an impressive list of national clients, including foundations, nonprofits, government agencies and biopharma companies. JPA is an integrated communications agency with in-house research, creative and digital teams.

One of JPA's distinguishing factors is their proprietary communications monitoring tool – GRETEL – that they leverage to understand the dynamics of a healthcare issue and how and where key audiences talk about the issue. This unique tool, which has a real-time dashboard, helps JPA identify opportunities to leverage connections and build engaging and targeted communications strategies. With initial exploration in GRETEL, JPA found there currently is no go-to organization offering evidence-based brain health for younger consumers and identified an opportunity for MBRF to fill the gap between the brain health community and consumers younger than age 60.

The proposal outlines a detailed planning process to include a traditional and social media audit; assessment of peer organizations; discovery sessions with MBRF Trustees, staff and stakeholders; online surveys to gauge awareness among consumers and primary care providers; in-depth interviews with researchers and online discussion boards to test messages and campaign concepts. The research findings will be used to form a strategic communications plan that includes strategies, tactics and a timeline to reach key audiences and a detailed measurement plan to track campaign success over time.

To bring their proposal to life, JPA suggested a campaign theme of "I Mind my Mind" and shared exciting ideas and innovative thinking, including out of the box partnership ideas like partnering with major consumer brands like Lululemon. JPA also expressed confidence in reaching all three of the MBRF's target audiences, including researchers, and has a proven track record of reaching and educating primary care providers.

SCP Proposal Review

The SCP proposal addressed all requirements of the RFP and outlined a detailed discovery and planning process to help inform the resulting communications campaign. SCP recommends conducting interviews with key MBRF Trustees and staff, as well as a landscape analysis of the consumer aspects of the brain health field, coupled with qualitative interviews and focus group research to inform a findings presentation that will outline SCP's key thoughts and ideas for the communications initiative.

With more than 30 years of experience in mission-driven communications, SCP focuses specifically on health and social change and has created a strong network of media, nonprofit, government, and academic connections. SCP works with clients spanning not-for-profit organizations, foundations, associations, and government agencies, helping them develop and implement communications initiatives designed to amplify their messages, engage their key stakeholders, and help them effect change.

SCP's core capacities include messaging and branding; thought leadership positioning; campaign development and implementation; traditional media outreach; social media planning, execution, and analysis; public opinion polls and surveys; writing and graphic design; website design; and video development.

With multiple high-profile national clients in this space, including AARP's Global Council on Brain Health initiative, Grantmakers in Aging, and Gerontological Society of America, SCP recommends establishing high profile national partnerships that could be activated quickly and suggests forming a unique partnership with the Hollywood Health & Society program of the University of Southern California Annenberg Norman Lear Center that provides the entertainment industry (notably TV and movies) with accurate and up-to-date information for storylines on health, safety and security. At the highest budget level outlined, SCP suggests MBRF could collaborate with HH&S to develop and distribute materials to help screenwriters write about brain health and dementia issues with greater accuracy and credibility.

As the core audience for the consumer campaign, SCP recommended focusing on people 40-60 years of age, as they are both thinking about their health and well-being and concerned about the health and well-being of their parents and older relatives, whereas people over 65 are already well served by AARP, Alzheimer's Association, and others. SCP also suggested some innovative interactive social media ideas, such as a "This Is My Brain On" contest, which would challenge people to submit photos or videos, accompanied by short text describing an activity (e.g., power walk with a friend, dance, music, meditation, community gathering, et al) that represents how they are building their brain health.

Comparative Rankings

The table below is an attempt to score the abilities of the agencies to deliver on various goals and expectations related to the proposal. While some of the scores were comparable, we found key distinctions in several categories. **BRG and JPA appear to be very strong in developing outreach/visibility campaigns rooted in Media Relations and Social and Digital Media. While SCP doesn't appear to be as strong in developing and implementing integrated communications campaigns, their distinct strength is the strong partnerships built over time with a variety of nonprofits/agencies engaging in various brain health initiatives that they could leverage for collaborative synergies.**

The current agency ranking order based on the submitted proposals from highest to lowest overall mean score is: BRG (mean score of 2.75); JPA (mean score of 2.71); and SCP (mean score of 2.23).

Communications Agency Proposal Comparison

The table below reflects rankings by Valerie Patmintra (VP) and Angelika Schlanger (AS)

****RANKINGS MAY BE ADJUSTED BASED ON FOLLOW UP MEETINGS AND Q&A****

Attribute	BRG (VP)	BRG (AS)	JPA (VP)	JPA (AS)	SCP (VP)	SCP (AS)
<i>Agency Background/Relevant Experience</i>	3	3	3	3	3	3
<i>Agency Reputation – Awards and Perception</i>	3	3	3	3	2	2
<i>Creativity of Proposal</i>	2	2	3	3	1	2
<i>Understanding of Opportunity</i>	3	3	3	3	2	3
<i>Excitement to Partner with MBRF</i>	3	3	2	3	2	3
Strength of Proposal Components						
<i>Planning</i>	3	3	3	3	2	3
<i>Media Relations</i>	3	3	3	3	1	2
<i>Social and Digital Media</i>	3	3	3	3	2	2
<i>Healthcare Provider Engagement</i>	3	3	3	3	3	2
<i>Researcher Engagement</i>	2	2	2	2	2	2
<i>Partnership Activation</i>	2	2	2	2	3	3
<i>Proposed Quantifiable Outcomes</i>	3	3	2	2	1.5	2
MEAN	2.75	2.75	2.67	2.75	2.04	2.42
OVERALL MEAN SCORE	2.75		2.71		2.23	

**Scale ranked from 0-3

0 = not included in proposal

3 = clearly articulated in proposal

Communications Agency Anticipated Outcomes Comparison by Budget Level

The metrics in the chart below were shared by each of the three ranked agencies to quantify estimated outcomes resulting from their outreach efforts over the three-year communications initiative. Each chart represents a budget level - \$1M, \$1.5M, and \$2M – as the three agencies submitted budgets at the same three amounts, allowing for a direct comparison. Please note, the metrics should be interpreted as rough projections based on the agencies’ past client initiatives and may shift as our communications priorities are solidified.

Anticipated Annual Metrics for Budget Level A: \$1 Million over 3 Years			
	BRG	JPA	SCP
Media	35-45 Media Placements 500+ Million Media Impressions 40-50 Media Interviews	30-40 Media Placements 400+ Million Media Impressions 15-20 Media Interviews	12-15 Media Placements 300 Million Media Impressions (based on achievements from a recent campaign)
Website	45,000 – 90,000 Users	40,000-60,000 Users	25,000-50,000 Users
Social	50% increase in followers	50% increase in followers 2,000 – 3,000 social engagements	10-15% increase in followers 15-20% increase in social engagements
Total Budget = \$1.255 Million <i>including \$85,000 annual fee for the Senior Communications Consultant to manage MBRF's ongoing communications efforts and oversee the communications agency</i>			

Anticipated Annual Metrics for Budget Level B: \$1.5 Million over 3 Years			
	BRG	JPA	SCP
Media	45-60 Media Placements 750+ Million Media Impressions 50+ Media Interviews	40-55 Media Placements 500+ Million Media Impressions 20-25 Media Interviews	15-18 Media Placements 300 Million Media Impressions (based on achievements from a recent campaign)
Website	90,000-120,000 Users	50,000-75,000 Users	30,000-75,000 Users
Social	75% increase in followers	75% increase in followers 3,000–4,500 social engagements	20-25% increase in followers 20-25% increase in social engagements
Total Budget = \$1.755 Million <i>including \$85,000 annual fee for the Senior Communications Consultant to manage MBRF's ongoing communications efforts and oversee the communications agency</i>			

Anticipated Annual Metrics for Budget Level C: \$2 Million over 3 Years			
	BRG	JPA	SCP
Media	900+ Million Media Impressions 75+ Media Placements 75-100+ Media Interviews	600+ Million Media Impressions 55-75 Media Placements 25-35 Media Interviews	300 Million Media Impressions (based on achievements from a recent campaign) 20-30 Media Placements
Website	120,000-150,000 Users	60,000-90,000 Users	40,000-100,000 Users
Social	100% increase in followers	100% increase in followers 5,000–7,500 social engagements	25-35% increase in followers 25-35% increase in social engagements
Total Budget = \$2.255 Million <i>including \$85,000 annual fee for the Senior Communications Consultant to manage MBRF's ongoing communications efforts and oversee the communications agency</i>			

Communications Agency Budget Approach

The narrative summaries below describe each agency's approach to leveraging the three different budget levels and how they prioritize using the budget across different areas of activity to grow the initiative and deliver results over three years. Please note, the budget allocations may shift based on the input we provide during the strategy and planning session with our selected agency partner. At the lower budget levels, all three agencies make trade-offs related to how they will spend the dollars. BRG proposes to introduce all strategies and target all three audience – consumers, PCPs, and researchers – by the end of three years at the \$1M level (adding in additional strategies as time progresses), while the other agencies make significant trade-offs that eliminate certain strategies or outreach to particular audiences at the lower budget levels.

BRG

The budget provided by BRG maps out an approach to include all requested strategies to reach consumers, primary care providers (PCPs), and researchers at all three budget levels, with the effort starting slower at the lower budget levels. For example, outreach to PCPs, and the development of strategic partnerships and thought leadership would begin in year two at the \$1 million budget level, but all activities would begin in year one at the \$2 million budget level.

BRG also puts a high investment of staff time behind media relations at all three of the budget levels, which will result in the higher number of media placements and media impressions than the other agencies estimated in the metrics charts. The majority of results achieved in terms of social media followers and web traffic would be generated by organic (unpaid content shared on our social media channels) efforts at the \$1 and \$1.5 million budget levels. Paid distribution and advertising would be implemented at the \$2 million budget level to increase the campaign's reach.

JPA

Like BRG, JPA maps out a budget strategy where the \$1 million budget level would include primarily organic outreach and distribution strategies to reach consumer audiences through media outreach and nonpaid search engine optimization digital strategies. Unlike BRG, JPA only integrates PCP outreach activities at the \$1.5 and \$2 million budget levels. JPA maps out a plan to conduct more in-depth research to inform the communications planning process at the higher budget levels – with online bulletin boards to test the campaign’s messaging and creative strategy and custom GRETTEL map creation added at the \$1.5 million budget level.

As opposed to BRG, who recommends implementing influencer engagement and PSA distribution across all of the budget levels while scaling the distribution to accommodate budget, JPA only recommends implementing an influencer engagement strategy and PSA distribution at the \$2 million budget level. JPA also only includes conducting a follow-up consumer survey to measure the campaign’s success at the \$2 million budget level, while BRG includes the survey as an annual initiative to build brand reputation for MBRF and gauge campaign success at all three of the budget levels.

SCP

Unlike the BRG and JPA budgets which focus heavily on media outreach and nonpaid search engine optimization and digital strategies to reach consumer audiences, the SCP budget focuses more resources on building a new consumer-focused website, creating multimedia content and promoting the site via digital advertising as the primary drivers to reach consumer audiences. Instead of a PSA distribution, at the \$2 million budget level, SCP introduces a partnership opportunity with the Hollywood Health & Society program of the University of Southern California to help get storylines on brain health and dementia included in mainstream TV shows. The SCP budget also places more priority on PCP engagement across all three levels and reserves between \$25,000 (at the \$1 and \$1.5 million budget levels) to \$50,000 (at the \$2 million budget level) to support the education initiative.