**PROPOSER INFORMATION**

Proposer Name: Click here to enter text.

Authorized Representative Name & Title: Click here to enter text.

Address: Click here to enter text.

Telephone: Click here to enter text.

Email: Click here to enter text.

Website: Click here to enter text.

Legal Status: [ ]  For-Profit [ ]  Nonprofit [ ] Sole Proprietor/Individual [ ] Partnership

Women Owned: [ ]  Yes [ ]  No

Minority Owned: [ ]  Yes [ ]  No

If yes, select the ethnicity:

[ ]  American Indian or Alaska Native [ ]  Black or of African decent

[ ]  Hispanic or Latino/a [ ]  Native Hawaiian/Pacific Islander

[ ]  Western Asian/Middle Eastern [ ]  East Asian/Far Eastern

[ ]  South Asian/Indian (Subcontinent) [ ]  Southeast Asian

[ ]  Other Asian [ ]  Multi-racial

Self-Describe: Click here to enter text.

Faith Based: [ ]  Yes [ ]  No

Partners included in this Proposal: Click here to enter text.

How did you hear about this RFP? *Please be specific.* Click or tap here to enter text.

**PROPOSAL INFORMATION**

Total dollar amount requested: Click here to enter text.

**REQUIRED CONTACTS**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Name** | **Phone** | **Email** |
| Chief Executive Officer | Click here to enter text. | Enter number. | Click here to enter text. |
| Contract Processing Contact | Click here to enter text. | Enter number. | Click here to enter text. |
| Chief Information Officer | Click here to enter text. | Enter number. | Click here to enter text. |
| Chief Financial Officer | Click here to enter text. | Enter number. | Click here to enter text. |
| MPER Contact\* | Click here to enter text. | Enter number. | Click here to enter text. |

*\** [*MPER*](http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Data-Processing/MPER.aspx) *is DHS’s provider and contract management system. Please list an administrative contact to update and manage this system for your agency.*

**BOARD INFORMATION**

*\* For the Board Chairperson, you must list an address, phone and email address different than the organization.*

Board Chairperson Name & Title: Click here to enter text.

Board Chairperson Address: Click here to enter text.

Board Chairperson Telephone: Click here to enter text.

Board Chairperson Email: Partners included in this Proposal: Click here to enter text.

How did you hear about this RFP? *Please be specific.* Click or tap here to enter text.

**REFERENCES**

Provide the name, affiliation and contact information [include email address and telephone number] for three references who are able to address relevant experience with your organization.

*Please do not use employees of the Allegheny County Department of Human Services as references.*

Click here to enter text.

**CERTIFICATION**

Please check the following before submitting your Proposal, as applicable:

[ ]  I have read the standard County terms and conditions for County contracts and the requirements for DHS Cyber Security, EEOC/Non-Discrimination, HIPAA and Pennsylvania’s Right-to-Know Law.

[ ]  By submitting this Proposal, I certify and represent to the County that all submitted materials are true and accurate, and that I have not offered, conferred or agreed to confer any pecuniary benefit or other thing of value for the receipt of special treatment, advantaged information, recipient’s decision, opinion, recommendation, vote or any other exercise of discretion concerning this RFP.

Choose one:

[ ]  My Proposal contains information that is either a trade secret or confidential proprietary information and I have included a written statement signed by an authorized representative identifying those portions or parts of my Proposal and providing contact information.

OR

[ ]  My Proposal does not contain information that is either a trade secret or confidential proprietary information.

**ATTACHMENTS**

Please submit the following attachments with your Response Form.

* + - * Partner commitment letters, if applicable
			* MWDBE and VOSB documents *(see Sections 6.1 and 6.2 of the RFP for more details)*
			* W-9

**REQUIREMENTS**

Please respond to the following. The maximum score a Proposal can receive is 95 points. Your response to this section should not exceed 15 pages. (Pages 1-3 are not included in the page count).

**Organizational Experience (20 points)**

1. Describe your organization’s experience serving the client population, either in a social services capacity, legal capacity, or both. (10 points)

Click here to enter text.

1. Describe your organization’s history of collaboration with the service sectors listed in Section 2: “Organizational Capacity.” (5 Points)

Click here to enter text.

1. Describe the proposed office location(s) and its transit accessibility to the client population (5 points)

Click here to enter text.

**Scope of Services (25 points)**

1. Describe your organization’s project plan and provide a timeline for implementation of CCP within 6 months of the award date. (10 points)

Click here to enter text.

1. Provide an organizational chart that includes the Core Services and Suggested Positions in Section 2, Table 1 “Core Services and Suggested Positions.” Proposers may combine, eliminate, or rename positions with accompanying explanations. If applicable, please include existing positions in your organization that will directly or indirectly support CCP. (5 points)
2. Describe your organization’s proposed centralized intake and assignment process for all cases. The case assignment process should detail how assignments will relate to existing child welfare/dependency regions and courtrooms (See Appendix A). (5 points)

Click here to enter text.

1. Describe your organization’s plan to make services accessible and welcoming for all clients, inclusive ofrace, ethnicity, sexual orientation, gender identity and expression (SOGIE), intellectual or physical ability, criminal history, diagnosis, English language proficiency or life experiences. (5 Points)

Click here to enter text.

**Client Engagement Scenarios (20 points)**

Describe the strategy your organization would use to engage and support individuals in each of the following four scenarios. Include what you foresee to be the greatest challenges and which, if any, partners you would engage.

1. **Scenario 1: A Client was minimally involved in the child's life previously, but now wants more involvement.**

You receive a new case. At the shelter hearing, the Attorney learns that the child has been removed from the other parent (mother) and is in foster care. Prior to the removal, the Client (father) was having monthly visits with the child. The Client wants to become more involved in the child’s life but isn’t sure where to start. (5 points)

Click here to enter text.

1. **Scenario 2: A Client has not responded after three outreach attempts via phone.**

The Executive Assistant has made three unanswered calls to the Client over the past week, leaving a voicemail each time. They have escalated the issue and now don’t know what to do. (5 points)

Click here to enter text.

1. **Scenario 3: A Client is simultaneously involved with the criminal justice system, with pending criminal charges relating to the dependency case.**

The Client has criminal charges pending related to the alleged abuse of his/her child. The Client has a public defender for the purpose of these criminal proceedings and the criminal court has issued a no-contact order. The Client would like visitation with the child. (5 points)

Click here to enter text.

1. **Scenario 4: A Client is experiencing behavioral health issues**

At a hearing, the child dependency caseworker testifies that the Client is not compliant with court-ordered mental health and substance use treatment. (5 points)

Click here to enter text.

**Staff Training and Qualifications (20 points)**

1. Describe your organization’s plan to recruit and retain qualified, diverse staff. (5 points)

Click here to enter text.

1. Describe your organization’s plan for staff training, including how staff will receive new-hire and ongoing training. (5 points)

Click here to enter text.

**Data Collection and Reporting (10 points)**

1. Describe your organization’s plan for collecting and reporting the client-level data indicators listed in Section 2, “Data Collection and Reporting,” including the software system you plan to use. If applicable, please include any indicators you expect to track above and beyond those described in the RFP, and how you would collect them (10 points)

Click here to enter text.

**Financial Management and Budget (10 points, not included in page count)**

1. Attach a detailed line-item annual budget that reflects a realistic estimate of the costs associated with implementing and sustaining CCP. If any startup costs are identified, they should be submitted as a separate budget (5 points)
2. Provide a budget narrative that clearly explains and justifies all line items in the proposed budget. (5 points)