Allegheny County Department of Human Services

REQUEST FOR PROPOSALS

Substance Use Treatment and Support Services Integrated into the Child Welfare System

RFP ISSUED	July 28, 2015	
INFORMATION SESSION	September 1,2015 10:00 AM-12:00 PM Homestead Gray's Room 1 Smithfield Street Pittsburgh, PA 15222	
QUESTIONS AND REQUESTS FOR	Until 5 Business Days	
CLARIFICATION ACCEPTED VIA EMAIL	Before Proposal Due Date	
RESPONSES (Q & A) POSTED ON WEBPAGE	Ongoing- Final Q&A Posted 1 Business Day Before Proposal Due Date	
PROPOSALS DUE	September 30, 2015	
ESTIMATED AWARD DECISION / NOTIFICATION	November, 2015	
ESTIMATED START DATE	January, 2016	

GLOSSARY

<u>Agreement</u>: The contract negotiated between Allegheny County and the Successful Proposer to provide the Contract Services.

<u>Allegheny County</u>: A home rule county and political subdivision of the Commonwealth of Pennsylvania.

<u>Contract Services</u>: The specific services which the Successful Proposer agrees to provide to the County in response to this RFP as more particularly described in the Scope of Services in the Agreement.

CYF: [The Allegheny County Department of Human Services] Office of Children, Youth and Families

DDAP: Pennsylvania Department of Drug and Alcohol Programs

<u>DHS</u>: [The Allegheny County] Department of Human Services.

OMHSAS: Pennsylvania Office of Mental Health and Substance Abuse Services.

<u>PCPC</u>: Pennsylvania Client Placement Criteria for Adults

<u>PROMISe</u>: The Commonwealth of Pennsylvania Department of Human Services' claims processing and management information system.

Proposal: The response submitted by a Proposer to this Request for Proposals.

<u>Proposer</u>: the entity or entities submitting a Proposal to the County in response to the RFP in an effort to become the Successful Proposer.

RFP: Request for Proposals

ROSC: Recovery-Oriented System of Care

SAMHSA: The Substance Abuse and Mental Health Services Administration

Successful Proposer: The Proposer selected by the County to provide the Contract Services.

GENERAL INSTRUCTIONS AND INFORMATION

Purpose

Allegheny County is soliciting Proposals to seamlessly integrate a set of comprehensive substance abuse-related services into the child welfare system that will serve child welfare-involved families. These services will be based upon Recovery-Oriented System of Care (ROSC) guiding principles and practices. ROSC focuses on the chronic nature of substance abuse and various pathways to recovery. ROSC practices include: substance abuse screening; level of care assessments; service referral and linkage; and peer recovery support to identified family members. The Successful Proposer will also be responsible for training, educating and providing technical assistance and case consultation to child

welfare staff. The County, on behalf of DHS, intends to enter into an Agreement with one Successful Proposer for approximately \$ 1.2 million per year for a term of two years. If the Proposer anticipates that the cost to provide the Contract Services will exceed this amount, justification for higher costs should be included in the Proposal.

General Information about a Request for Proposal

Allegheny County issues Requests for Proposals (RFPs) to identify entities with the ability to meet the identified needs and quality standards within specified program and funding guidelines. Evaluation criteria are included in an RFP to measure how well a Proposal meets these criteria. The County may request additional information and/or a presentation from the Proposer during the Proposal evaluation period. Following the evaluation period, an Agreement to provide the Contract Services may be awarded to the most qualified Proposer, that is, the Successful Proposer.

The issuance of this RFP does not obligate the County to enter into an Agreement with any Proposers.

Communication about this RFP

DHS is the "Issuing Office" for this RFP and is the sole point of contact for all questions and communication regarding this RFP. All communications about the RFP, including requests for additional information or clarification, should be submitted via email to: DHSProposals@alleghenycounty.us.

All information about the RFP, including changes, clarifications and responses to Proposer questions, will be posted on the RFP website at: http://www.alleghenycounty.us/dhs/solicitations.aspx
All questions and/or requests for clarification concerning this RFP must be submitted no later than five business days prior to the proposal due date in order to guarantee a response on the website.

Eligibility

Entities eligible to submit a Proposal in response to this RFP must be appropriately-credentialed providers of drug and alcohol services, experienced with substance use disorder treatment services and the recovery process. PROMISe enrollment (the Pennsylvania Department of Human Services' claims processing and management information system) and contract with HealthChoices (a managed care program for Medical Assistance recipients) is required. Proposers must possess the programmatic, financial and staffing capability to implement the services described in the Scope of Service Section of this RFP in accordance with all applicable guidelines, regulations and requirements, including those from the Pennsylvania Department of Drug and Alcohol Programs (DDAP).

Entities eligible to submit a Proposal in response to this RFP may be non-profit organizations, for-profit organizations or individuals. Two or more entities are permitted to collaborate on one Proposal. If a collaborative Proposal is submitted, the delivery of services to the individual(s) served will be seamless, and there will be a designated point of accountability and management.

In order to be considered under this RFP, Proposers must be willing and able to meet all of Allegheny County's contract requirements. These contract requirements are available at: http://www.alleghenycounty.us/dhs/contracting.aspx.

Minority, Women or Disadvantaged Business Enterprise (M/W/DBE) Requirements

This RFP contains requirements for Proposers to assist Allegheny County in meeting its M/W/DBE goal

(all contracts and other business activities entered into by Allegheny County having overall goals of 13% for MBEs and 2% for WBEs). A listing of M/W/DBEs certified by Allegheny County and the Pennsylvania Unified Certification Program can be found at www.county.allegheny.pa.us/mwdbe

For more information about M/W/DBEs, please review the following. An M/W/DBE Participation Statement or Waiver Statement is **REQUIRED** with proposal submission

MWDBE Contract Specifications Manual MWDBE Participation Statement form

MWDBE Waiver Statement form

Proposal Preparation Costs

The Proposer is responsible for all costs related to the preparation and submission of a Proposal. Allegheny County is not obligated, in any way, to pay any costs incurred in the preparation and submission of a Proposal.

BACKGROUND

About DHS

DHS was created in 1997 to consolidate the provision of human services across Allegheny County. It is the largest department within Allegheny County government. In addition to its Executive Office, DHS encompasses five program offices (Behavioral Health; Children, Youth and Families; Community Services; Intellectual Disability; and the Area Agency on Aging) and three support offices (Administrative and Information Management Services; Community Relations; and Data Analysis, Research and Evaluation). Last year, DHS served more than 210,000 individuals (approximately one in six County residents) through an array of 1,700 distinct services.

DHS is responsible for providing and administering publicly-funded human services to Allegheny County residents and is dedicated to meeting these human service needs, particularly for the County's most vulnerable populations, through information exchange, prevention, early intervention, case management, crisis intervention and after-care services. Over the past several years, Allegheny County DHS has prioritized leading the transformation of its human service delivery system to one that is recovery focused, person-centered and family informed.

DHS provides a wide range of services, including: services for older adults; mental health and drug and alcohol services (includes 24-hour crisis counseling); child protective services; at-risk child development and education; hunger services; emergency shelters and housing for the homeless; non-emergency medical transportation; job training and placement for public assistance recipients and older adults; and services for individuals with intellectual and/or developmental disabilities.

DHS provides services to eligible individuals without regard to race, color, sex, gender identity or expression, sexual orientation, age, religion, national origin, political affiliation, disability, familial status, military service, or religious, community or social affiliations.

About the DHS Office of Children, Youth and Families (CYF)

The mission of Children, Youth and Families (CYF) is: to protect children from abuse and neglect; to preserve families, whenever possible; and to provide permanent, safe homes for children either by assuring safety within the child's own family or by finding an adoptive home or another permanent setting for those children who cannot be reunified with their family. To achieve its mission, CYF

provides a wide range of preventive, protective, supportive and direct services through caseworkers, case aides and other support staff, as well as a network of contracted agencies. Front-line workers and direct services are based out of five CYF Regional Offices (encompassing seven offices) that cover all geographic areas of the County. (See Appendix for a map of Regional Office locations and catchment areas, as well as the daily caseloads within each office.)

Each year, CYF screens about 10,000 calls with allegations of child abuse or neglect. About half of those calls indicate safety risks that warrant an investigation; of these, approximately 1700 families will have a case opened as a result of that investigation. On average, 1,900 families are active with CYF at any point in time, with approximately 3,600 families served over the course of a year. These families include about 8,000 caregivers and 8,000 children. Caregivers are any adult, including biological, foster or adoptive parents, that is responsible for the care of the child-welfare involved child.

About the Intersection of CYF and Substance Use

DHS recognizes that many of the caregivers served by the child welfare system have challenges related to substance use. These challenges can easily go undetected, yet often impact caregivers' ability to safely care for their children. Caregiver substance use has been recognized as a significant contributing factor in families where there is child maltreatment and child welfare involvement (Institute of Medicine and National Research Council, 2013). Children whose parents abuse alcohol and drugs are three times more likely to be abused and/or neglected. National figures put the percentage of child welfare-involved parents with substance use disorders at 40-80 percent (Milliken, 2004). (Local data about the prevalence of substance use in child welfare-involved caregivers is insufficient.) In 2014, as part of the In-Depth Technical Assistance (IDTA) process to improve substance abuse services, DHS found evidence of substance abuse in 21 of 30 randomly-selected CYF cases (25 parents). However, only four parents had received a screening, 11 parents had received an assessment, and nine had been referred for treatment. In 2013, only 14 percent of CYF-involved families received treatment for substance abuse through publicly-funded services. Allegheny County has prioritized the need for better identification and increased referrals for substance use screening, assessment and interventions, including use of evidence-based practices, co-occurring treatment where indicated, and recovery supports throughout the process.

Caregivers whose children are active in the child welfare system may experience a variety of barriers when trying to access substance abuse assessment and treatment, including timely and seamless access to care. They may also fear that such assessment and treatment may lead to removal of their children from their care.

DHS has prioritized the improvement of substance abuse identification, assessment and intervention.

About ROSC

The Substance Abuse and Mental Health Services Administration (SAMSHA), the federal agency charged with reducing the impact of substance abuse and mental illness on America's communities, defines an ROSC as "a coordinated network of community-based services and supports that is person-centered and builds on the strengths and resiliencies of individuals, families and communities to achieve abstinence and improved health, wellness and quality of life for those with or at risk of alcohol and drug problems." ROSCs provide a wide range of resources to address substance abuse problems in communities, including prevention, early intervention, treatment, continuing care and recovery. These supports are

provided in conjunction with other services, such as mental health and primary care services. Services in an ROSC should be accessible and easy to navigate. For more information about ROSC, please see:

http://www.samhsa.gov/sites/default/files/rosc_resource_guide_book.pdf http://my.ireta.org/node/359

For more information about CYF, Substance Abuse and Child Welfare, please see:

Allegheny County's CYF:

http://www.county.allegheny.pa.us/dhs/cyf.aspx

http://www.county.allegheny.pa.us/WorkArea/DownloadAsset.aspx?id=22784

http://www.alleghenycounty.us/dhs/conferencing-teaming-CYF.aspx

National Center on Substance Abuse and Child Welfare:

https://www.ncsacw.samhsa.gov/

SCOPE OF SERVICES REQUESTED

DHS is soliciting Proposals to seamlessly integrate a set of comprehensive substance abuse-related services into the child welfare system that will serve child welfare-involved families. These services will be based upon ROSC guiding principles and practices, which focus on the chronic nature of substance use and various pathways to recovery. ROSC practices include: substance abuse screening; level of care assessments; service referral and linkage; and peer recovery support to identified family members. The Successful Proposer will be responsible for training, educating and providing technical assistance and case consultation to child welfare staff.

The Successful Proposer must demonstrate a commitment to delivering services and supports according to ROSC principles and the capability to deliver effective and/or evidence-based practices. The Successful Proposer must support effective implementation of these services and participate in ongoing quality monitoring and improvement.

Target Population

Services, as described on page 7 of this RFP, must be offered to all caregivers, of any gender, whose family is active in the child welfare system. When more than one caregiver is involved, services will be provided to any caregiver who agrees to participate, regardless of the agreement of the other caregiver(s).

Service Description

DHS requires that Proposers develop a service model that fits within the framework described in this RFP but expects that Proposers will take a variety of approaches to provide the services based on each Proposer's unique experience, ideas and set of skills. The Successful Proposer will administer the model and directly provide some or all of the services. For services that are not provided by the Successful Proposer, the Successful Proposer must collaborate and subcontract with partner agencies to design, plan and implement a seamless service model.

Components of the service model include Screening and Assessment, Service Referral and Coordination, Peer Recovery Supports, Case Consultation and Education and Collaboration and Consultation with CYF Staff.

Screening and Assessment

Caregivers appropriate for substance use screening & assessment will be identified through the existing CYF intake assessment, during which caseworkers will apply a uniform set of standardized questions to identify care-givers whose circumstances warrant a more thorough screening and level of care assessment by the Successful Proposer and/or partnering drug and alcohol provider. A referral will be made to the Successful Proposer, through a process to be developed. Generally, the referral for screening is a voluntary process and the caregiver, unless otherwise mandated by the court, has the option to decline. In that situation, the CYF caseworker may seek the assistance of the Successful Proposer in engaging the caregiver. Such assistance may include coaching and information sharing with the caseworker only, or in some cases, may include a decision to enlist the services of the Peer Recovery Specialist (described in the Peer Support section of this RFP) to assist with or without the caseworker present.

The Successful Proposer must be available to provide drug and alcohol screening and assessment on-site at the five CYF Regional Offices on a regular, agreed-upon schedule, with the ability to travel to family homes and other community locations as needed. Screenings for substance abuse disorders will be conducted using standardized and uniformly-applied screening tool(s). When indicated, the Successful Proposer will also perform a level of care assessment utilizing the Pennsylvania Client Placement Criteria (PCPC), a set of guidelines designed to provide clinicians with a basis for determining the most appropriate care for individuals with substance abuse disorders. The Successful Proposer will screen for the presence of co-occurring mental health disorders in the interest of making fully-informed and appropriate treatment recommendations to the CYF caseworker and caregiver. The Successful Proposer will provide CYF caseworker with a written and/or oral summary of the results of the screening/assessment. The summary will be provided in accordance with the needs of CYF, as determined by the case, and within the limits permitted by law, and will include recommendations for treatment and/or support services for the caregiver. The caregiver will be asked to sign consent forms to participate in the screening/assessment. If the caregiver is unwilling to give consent, the Successful Proposer will inform the CYF caseworker. The Successful Proposer and/or partnering providers shall document case progress in CYF's electronic record management system (KIDS).

• Service Referral and Coordination

If the assessment indicates that treatment is recommended, the Successful Proposer will assist the caregiver with referral to the appropriate level of treatment, and where appropriate, coordinate referral to community-based supports. If the caregiver is uncertain or tentative about accepting a referral to treatment and/or services, the Successful Proposer will engage the caregiver in treatment through the services of the recovery specialist, use of motivational interviewing, and/or other best- or promising-practice techniques. The Successful Proposer is responsible for navigating the managed care and payer system by referring to an in-network provider and providing clinical information necessary to obtain any necessary pre-authorization and support for the treatment referral. The Successful Proposer will work closely with the child welfare caseworker to ensure compatibility between the goals for substance use treatment and the child welfare plan developed by the CYF caseworker with the family through Conferencing and Teaming. Conferencing and Teaming is the DHS standard of practice that engages individuals, families, supports and professionals in assessing strengths and needs and developing a plan for keeping children, teens and adults safe and healthy while continually integrating individual and family actions with professional services. The Successful Proposer will participate in Conferencing and Teaming meetings (where teams of family, friends and service providers engage in conversation about the strengths and needs of the family), and inform the development of the family plan.

The Successful Proposer will work to ensure the integration of services to the fullest extent possible, and coordinate referral to treatment and services that are conducive to the caregiver's individual needs and, as appropriate, the needs of the family. The Successful Proposer will work to reduce, if not eliminate, the barriers to access and be responsible for connecting the caregiver to treatment provider(s). The Successful Proposer will remain engaged with the identified caregiver and CYF caseworker for a minimum of 60 days following the initial treatment admission in order to support the individual during post-treatment transition.

If referral to formal treatment services is indicated and the caregiver is unwilling or unable to attend, continued linkage with recovery specialist services and referrals to community-based supports/services are expected. In all cases, the Successful Proposer is to maintain ongoing communication with CYF caseworkers.

Peer Recovery Supports

The Successful Proposer will also provide Peer Recovery Specialists (described in the Screening and Assessment Section of this RFP), individuals with lived experience with substance abuse-related issues who provide peer coaching to support people on their individual recovery journey. The availability of a recovery specialist is as essential to the recovery journey as the professional treatment services an individual receives.

Peer Recovery Specialists must have completed the Certified Recovery Support (CRS) training and certification, a credential for those who provide mental health or co-occurring mental illness and substance abuse peer support to others, or receive this training and certification within the first year of the award of the Agreement to the Successful Proposer. Peer Recovery Specialists will work with the identified caregiver(s) throughout the process of engagement, assessment, referral and treatment, and assist with service coordination, engagement in self-help groups and community-based services/supports, and system/service navigation. Recovery specialists will meet caregivers in the CYF Regional Offices, the Court, caregiver's homes, or other locations in the community as needed.

Recovery specialists will be available to caregivers at multiple stages of recovery:

- Prior to formal treatment, in order to strengthen a caregiver's motivation for change
- During treatment, to continue to provide a community connection
- Following treatment, supporting wellness and relapse prevention, as appropriate and in consideration of the caregiver's needs
- As a stand-alone service, separate from a formal treatment plan, for a specified period and in collaboration with the caseworker, in the event that the caregiver cannot or chooses not to enter a formal treatment system

Recovery specialists will also determine whether a person is eligible for medical assistance, private insurance or county funding.

The Successful Proposer will ensure that the Peer Recovery Specialist's own recovery from substance abuse-related issues is not affected by the supports he or she provides to the caregiver.

Case Consultation and Education

Because CYF staff requires enhanced training and education regarding substance use and its impact upon families and children, the Successful Proposer must be available for case consultation and offer, on a

mutually agreed upon schedule, ongoing staff development for caseworkers and supervisors about substance abuse-related topics relevant to casework practice. Topics may include (but are not limited to) treatment options, trends and available supports; current trends in drug usage; impact of substance use on health and families; motivational interviewing techniques for child welfare; co-occurring disorders; understanding the recovery journey; and ROSC.

These educational and consultative functions are intended to reach beyond case-specific needs and assist CYF staff to develop additional knowledge and competencies. This education may be covered through scheduled trainings, information sessions, alerts, or brown bag discussions held within the CYF Regional Offices or other locations. The frequency will be determined collaboratively with CYF but will be at least quarterly.

The Successful Proposer will co-locate in the five CYF Regional Offices in order to facilitate ready-access for individual screening and assessment. Additionally, co-location will allow for easily-accessible consultation and collaboration.

Collaboration and Consultation with CYF Staff

The Successful Proposer must demonstrate the ability to collaborate and consult with CYF staff about case-specific and general topics of related interest. The Successful Proposer and must possess, or be willing to acquire, working knowledge of the child welfare system. The Successful Proposer will work collaboratively with CYF caseworkers and supervisors with a shared goal of meeting the needs of the caregivers in a comprehensive, effective and efficient manner through a uniform and best-practice approach to screening, assessment, support and referral to the appropriate services and treatment in the community. While much of this collaboration will be case specific, the Successful Proposer will share its subject expertise through general consultation, educational opportunities (formal and informal), and information sharing about community resources and options. In addition, the Successful Proposer may be asked to accompany a CYF caseworker to a family's home or an alternative, appropriate place in the community. Specifically, the Successful Proposer will:

- Participate in cross-training on key aspects of the child welfare and court systems
- Achieve proficiency in use of the electronic child welfare record system (KIDS)
- Maintain accurate and timely documentation of assessments, activities and/or services related to the specific case services provided
- Work closely with DHS to develop information-sharing protocols, innovative policies and mechanisms to facilitate and implement integrated services
- o Assist DHS in identifying and adopting best practices for the target population
- Participate in Conferencing and Teaming and other meetings as appropriate (see description in the Service Referral and Coordination section of this RFP)
- o Assist DHS in identifying and adopting best practices for the target population
- Provide appropriate administrative and clinical oversight and monitoring of the services provided

<u>Performance Measures and Reporting Requirements</u>

The Successful Proposer will be responsible for monitoring outcomes to assure the quality and effectiveness of the Scope of Services. The Successful Proposer will be expected to track quantitative and qualitative data, as determined in partnership with DHS, and enter regular, timely and accurate individual-level data into designated information systems. This data will be verified by DHS. DHS will begin incentivizing performance after the first year (i.e. creating a payment structure that awards agencies for better outcomes). Key

performance measures that must be met by the Successful Proposer include:

- Number of screenings
- Number of assessments
- Number of links to treatment
- Number of links to peer support
- Increase in the identification of need
- Increase in the percentage of caregivers who successfully attend their first treatment appointment

Budget

Allegheny County intends to use the results of this RFP to award one Agreement. Funding will support all services in the model (Screening and Assessment, Service Referral and Coordination, Peer Recovery Supports, Case Consultation and Education and Collaboration and Consultation with CYF Staff) that do not qualify for billing under Medical Assistance and HealthChoices rules, and will not exceed \$1.2 million for one year with the option to renew for two years. If the Proposer anticipates that the cost to provide the Contract Services will exceed \$1.2 million per year, justification for higher costs should be provided in the Proposal.

PROPOSAL INSTRUCTIONS AND FORMAT

A complete Proposal must include all of the components listed below, submitted as a word document or PDF (budget may be submitted in Excel). Use 1-inch margins, 12-point font and numbered pages. Single spacing is permissible. Please adhere to page limitations indicated below; other than required attachments, no additional attachments will be accepted (attachments may be included as a link).

I. Executive Summary (1 page)

- Proposer information including key staff and a description of organizational capacity to operate the service model
- A brief description of the proposed vision and strategy for administering the service model (as described on page 7 of this RFP).

II. Organizational Philosophy (2 pages)

- Describe your organization's philosophy and approach to service delivery, especially how your organization operates from a recovery-oriented framework.
- Describe any collaborative initiatives in which your organization has participated, naming partner organizations.
- Describe your organization's experience providing culturally-competent, linguistically-competent, trauma-informed and gender-responsive services. Include specific information on staff training, how staff skills and proficiency are assessed in this area, and what steps supervisors and managers take to ensure that services delivered meet the specified criteria.

III. Organizational Experience (3 pages)

- Provide evidence that your organization has the capacity to successfully provide this service.
 - Provide a brief overview of your entire organization, the range of all services you offer, current contracts, your geographic coverage, the size of your operating budget and your ability to meet the eligibility criteria (see Page 3).
- Describe your organization's experience in providing drug and alcohol screening and level of care assessment, service referral and coordination, case consultation and education, peer recovery

- supports and technical assistance, especially to families involved with child welfare services. Include specific examples of how you dealt with coordination or collaboration with other agencies, engagement and outreach.
- If your organization is entering into a subcontract or partnership with another party to provide all or one of the component services described in the Scope of Services section of this RFP, please describe the experience of that subcontractor or party.
- Describe your organizational experience using data to measure and improve program and client outcomes.

IV. Approach (15 pages)

The Proposer should respond to all components of the Scope of Services requested by DHS in the manner set forth below. For each component service, the Proposer should specify if it will be provided by the Successful Proposer's own staff or sub-contracted to specialized providers (please be specific).

Screening & Assessment

- Describe in detail your organization's plan, including a proposed timeframe from start-up to implementation, for providing screenings and assessments and communicating the results, and how this plan will eliminate barriers to recovery.
- Describe how your organization will communicate the status of the screening and assessment in accordance with the needs of CYF and within the limits permitted by law.
- Describe how your organization will incorporate evidence-based practices into your service approach.
- Describe your organization's plan for establishing rapport and engaging with people seeking services, especially how you will address caregivers who are unwilling or unable to participate in services.
- Describe your organization's staffing plan:
 - List staff, their roles and qualifications for each position.
 - Your organization's strategy for recruiting and retaining quality staff
 - Your organization's professional development and staff training program
 - Your organization's plan for performance management

Service Referral & Coordination

- Describe in detail your organization's plan, including a proposed timeframe from start-up to implementation, for accepting service referrals and linking caregivers to the appropriate level of treatment and community supports (where appropriate), and how this plan will eliminate barriers to recovery.
- Describe how your organization will incorporate evidence-based practices into your service approach.
- Describe how you will remain engaged with the identified caregiver and caseworker for a minimum of 60 days (following the initial treatment admission) in order to support the individual during posttreatment transition.
- Describe your organization's plan for establishing rapport and engaging with people seeking services, especially how you plan to address caregivers who are unwilling or unable to participate in services.
- Describe your organization's staffing plan:
 - List staff, their roles and qualifications for each position.
 - Your organization's strategy for recruiting and retaining quality staff
 - o Your organization's professional development and staff training program
 - o Your organization's plan for performance management

Peer Recovery Support Services

- Describe in detail your organization's plan, including a proposed timeframe from start-up to implementation, for providing Peer Recovery Support services and how this plan will reduce barriers to recovery. Specifically describe how your organization will:
 - Assist caregivers in navigating the treatment system
 - Assist caregivers in accessing community resources and natural supports
- Describe the method that recovery specialists will use to check caregivers' eligibility for medical assistance, private insurance or county funding.
- Describe how you will incorporate evidence-based practices into your service approach.
- Describe your organization's plan for establishing rapport and engaging with people seeking services, especially how you will address caregivers who are unwilling or unable to participate in services.
- Describe your organization's staffing plan:
 - o List staff, their roles and qualifications for each position.
 - Your organization's strategy for recruiting and retaining quality staff
 - Your organization's professional development and staff training program
 - Your organization's plan for performance management
 - Your organization's plan for how supervision will be used to help Recovery Specialists maintain wellness for themselves. Please also provide the credentials for the professional staff that will be providing the supervision.

Case Consultation and Education

- Describe in detail your organization's plan, including a proposed timeframe from start-up to implementation, for providing case consultation and education, and how this plan will reduce barriers to recovery.
- Describe how your organization will be available for case consultation and ongoing staff development about substance use-related topics/areas relevant to casework practice.
- Describe your organization's plan for establishing rapport and engaging child welfare staff.
- Describe your organization's staffing plan:
 - List staff, their roles and qualifications for each position.
 - Your organization's strategy for recruiting and retaining quality staff
 - Your organization's professional development and staff training program
 - o Your organization's plan for performance management

Administration and Management of the Service Model

- If your organization intends to submit a proposal with one or more of the component services to be delivered by more than one sub-contractor, describe your organization's plans for:
 - o ensuring a seamless system of delivery in which all providers share a commitment to serving caregivers based upon ROSC guiding principles and practices
 - o administration and management of the service model
 - o assigning accountability for specific service(s) within an accountability matrix

Collaboration and Consultation with CYF

- Describe your organization's plan for working in collaboration with CYF staff, including how your organization will consult and maintain regular communication.
- Describe how your organization will work with CYF caseworkers and supervisors to ensure compatibility between the goals for substance use treatment and the child welfare plan developed with the family through Conferencing & Teaming meetings.

- Describe your organization's experience working in collaboration with CYF or other systems of care.¹
- Describe what steps that your organization will take to develop a better understanding of the child welfare system.

V. Performance Measures and Reporting (1 page)

- Describe how your organization will track the key performance measures listed in the Scope of Services section and define, from your organization's perspective, any additional key administrative and client-based data that should be collected to monitor service provision and outcomes.
- Describe how your organization uses data to support continuous quality improvement.

VI. Budget and Budget Description (1 page) The page limit pertains to the budget narrative only. There is no page limit on the budget submission and the Proposer's financial audits.

- Provide a detailed two-year budget <u>for each service in the service model</u>. Funding, for services ineligible for billing under Medical Assistance and HealthChoices, will not exceed \$1.2 million per year. Funds available through this RFP will support services for individuals and/or services not eligible for insurance coverage.
- If your organization's Proposal to provide the component services described in the Scope of Services Section of this RFP will exceed \$1.2 million per year, the amount that DHS has budgeted for an Agreement for the Scope of Services, provide a justification for higher costs in your organization's Proposal. Please identify first year start-up costs and changes in subsequent years (due to start-up year variations) in your budget narrative.
- Please submit your organization's budget document in a separate Excel document
- Include a budget narrative that explains each component of the proposed budget.

Proposal Requirements::

- Executive Summary (1 page)
- Organizational Philosophy (2 pages)
- Organizational Experience (3 pages)
- Approach (15 pages)
- Performance Measures and Reporting (1 page)
- Budget and Budget Narrative (1 page). The page limit pertains to the budget narrative only. There is no page limit on the actual budget and financial audits.
- References (1 page): Include name, affiliation and contact information [include email address and telephone number] for four references who are able to address relevant experience with your organization. Two of the four references should be clients or family members of clients who can speak to their service experience with the Proposer.
- Required Attachments
 - Cover Page
 - MWDBE Participation Statement form
 - o W9
 - Vendor Creation Form

¹ The Georgetown University Center for Child and Human Development defines a system of care as any spectrum of effective, community-based services and supports for children and youth with or at risk for mental health or other challenges and their families, that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to function better at home, in school, in the community, and throughout life).

 Program and staff qualifications, including licenses and training certifications, where applicable

SCORING AND SELECTION PROCESS

Scoring Criteria

The narrative and budget sections of a Proposal will be evaluated on a scale of 120 points, based on the content of the Proposal as described above.

Organizational Philosophy (15 points)

Organizational Experience (20 points)

Approach (65 points)

Performance Measures and Reporting (10 points)

Budget (10 points)

Selection Process

DHS will use a formal evaluation process to select the Successful Proposer, including review of the Proposal and additional information/presentation as requested. DHS may contact individuals or entities with whom the Proposer has had dealings in the past, regardless of whether or not they are included as references in the Proposal.

DHS will perform an initial screening of all Proposals received. For a Proposal to be eligible for evaluation, the Proposal must be:

- Received from the Proposer by the due date/time
- Properly signed by the Proposer
- Properly formatted and include required forms and sections

Proposals that do not meet the initial screening criteria described above are subject to rejection without further evaluation.

After the initial screening has occurred, the evaluation process for Proposals is as follows:

- DHS will designate an evaluation committee to review and evaluate all Proposals submitted in response to this RFP. The evaluation committee may consist of some or all of the following individuals:
 - County employees/contractors
 - Representatives of foundations, educational institutions, community and civic organizations, businesses and/or non-profit agencies
 - Individuals selected for subject matter/content expertise or experience, or by virtue of other relevant experience/knowledge
- The evaluation committee will evaluate the Proposals based upon the Scoring Criteria.
- The County retains the exclusive discretion to shortlist a small number of Proposals for more

extensive review.

• If determined necessary, DHS may contact the Proposer for the purpose of clarifying any ambiguities in the Proposal, requesting Proposal modifications, or discussing Budget modifications.

Oral Presentations and Site Visits

DHS may create a short-list of Proposers who will be invited to give an oral presentation and demonstration of their tool(s). In that case, selected Proposers will be notified of the time and location, and will be provided with an agenda or topics for discussion. Questions asked during oral presentations or site visits will be for the purpose of clarifying the scope and content of the written Proposal and will be scored using the same criteria listed in this RFP.

Final Award Process

Following the evaluation process, which may include oral presentations and/or negotiations, the evaluation committee will tabulate and submit an award recommendation to the DHS Director. The DHS Director will then issue a recommendation to the County Manager who will make the final determination concerning award of an Agreement.

NOTHING HEREIN SHALL BE CONSTRUED OR INTERPRETED IN ANY WAY AS OBLIGATING THE COUNTY TO ENTER INTO AN AGREEMENT WITH ANY PROPOSER. THE COUNTY RESERVES THE RIGHT AT ALL TIMES NOT TO AWARD OR ENTER INTO AN AGREEMENT FOR THE SCOPE OF SERVICES FOR ANY REASON WHATSOEVER.

SUBMISSION INFORMATION

Proposals must be submitted by email to DHSProposals@alleghenycounty.us, no later than 3:00 p.m. EST on September 30, 2015. Proposals received after this time will not be accepted. The County reserves the right to extend or postpone the date and time for RFP activities; in the event of a change, the information will be posted on the website at http://www.alleghenycounty.us/dhs/solicitations.aspx.

If necessary, attachments may be sent via U.S. Mail, Courier or hand-delivery, by the date/time above, to:

Maria Wallace Allegheny County Department of Human Services One Smithfield Street – Suite 400 Pittsburgh, PA 15222-2221

You will receive an email confirmation of receipt of your Proposal. Please contact us (via email or by calling Maria Wallace at 412-350-7144) if you do not receive an email confirmation.

To be considered, the Proposal must include all of the specified information. DHS may request additional information and/or conduct investigation as necessary to determine the Proposer's ability to provide the requested service. This additional information may become part of the County's final award decision-making process.

All Proposals are the property of the County and may become part of any subsequent Agreement. Additionally, the Successful Proposer's Proposal will be posted online in the DHS Solicitations Archive.

CONTRACT TERMS AND CONDITIONS

Agreement Terms and Conditions

The Successful Proposer will enter into an Agreement with the County of Allegheny, on behalf of DHS, for performance of the Scope of Services specified in this RFP and set forth in the Proposal. The Scope of Services specified in the RFP and Proposal shall become the Contracted Services. Information about contracting with the County to provide services to DHS and the standard County terms and conditions for County contracts for services for DHS which will be included in the Agreement can be found on the DHS website at:

http://www.alleghenycounty.us/dhs/contracting.aspx HIPAA compliance

DHS is a "covered entity" under the Health Information Portability and Accountability Act (HIPAA). The Successful Proposer must describe how it will comply with HIPAA requirements.

CYBER Security

A significant portion of DHS business activities and related billing carried out under this RFP are done through information management systems or tools, including email. Proposers should meet the minimum computer specifications beginning on page 14 of the <u>DHS Contract Specifications Manual</u> and should make sure their computers, laptops and other electronic devices have sufficient security software and settings to minimize the risk of a breach of information. In addition, the Proposer should have policies and procedures in place to assure that their electronic devices are physically secure when not in use (e.g., locked in a vehicle trunk, password protected, etc.).

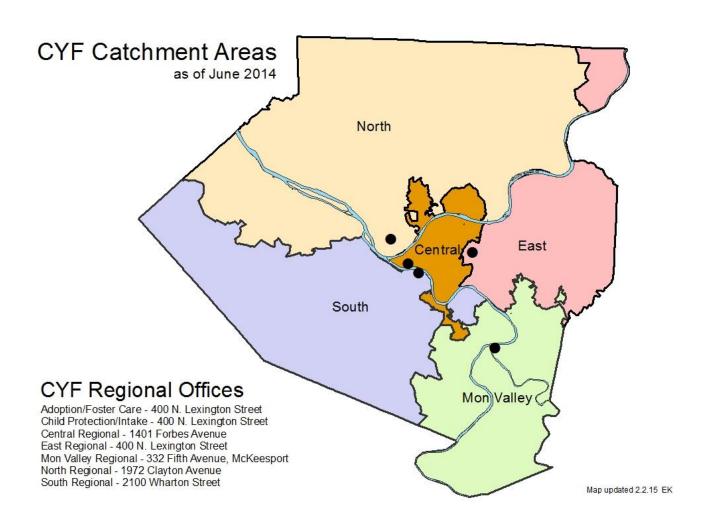
Conflict of Interest

By submitting a Proposal, the Proposer certifies and represents to the County that the Proposer has 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.

Equal Employment Opportunity/Non-Discrimination

Proposer agrees to not discriminate against any employee, applicant for employment, independent contractor, consumer or any other person on the basis of race, color, religion, national origin or ancestry, sex, gender identity or expression,; sexual orientation, disability, marital status, familial status, age (40 or over),or use of a guide or support animal because of blindness, deafness or physical disability of any individual or independent contractor or because of the disability of an individual with whom the person is known to have an association or on any other basis prohibited by federal, state or local law.

APPENDIX



REGIONAL OFFICES CASELOADS (Point-in-Time 2/3/15)

Families Active in Child Welfare

	Family Count	%
CRO	201	12%
ERO	333	20%
Adoption/Foster Care	55	3%
Intake	3	0.2%
MVRO	304	18%
NRO	460	27%
SRO	344	20%

Total 1700 100%