## CHILD ABUSE TREATMENT PROGRAM RFP QUESTIONS & ANSWERS

The following are answers to questions that were posed by prospective applicants:

1. We are really interested in the newest RFP on Child Abuse Treatment, and we were wondering if this is new programming or if it is a part of existing programming. If it is existing already, could you share the current provider?

This is an existing program that is currently being run by Edgewood Center for Children and Families.

2. In the last contract RFP for this program, the County indicated they intended to fund only sole providers. In the current RFP, is the county open to multiple contractors for portions of the contract - partnerships/collaborations, subcontractor arrangements, or any of the above?

Sole providers only.

3. Are any of the following documents included in the 20-page max: organization chart, resumes/CVs, project plan, Cultural Competency Plan?

You can add the Organization chart, resumes/CVs, and the Cultural Competency Plan as attachments that will not be included in the 20 page maximum. Assuming the "project plan" is a timeline of events, it may also be included as an attachment. However, there should be a narrative piece included in the RFP response that addresses and explains the project plan philosophy for service delivery. That narrative would be included within the 20 page limit.

4. Do we include the above in their respective Tabs? Or at the end of the proposal in an attachment section?

At the end of the proposal in an attachment section.

5. Will the County be emailing the Appendix 1 budget form ("Budget Worksheet") as an Excel document? If so, by when?

We will create the Budget Worksheet template as an excel document, which will be attached to the RFP and released at the same time when the RFP is released.

6. Must we use the Appendix 1 "Budget Worksheet" form as the Budget portion of the RFP, or may we use our own budget form, as long as it is readable and understandable?

You may use your own form if it contains, at a minimum, the items that are included in the Budget Worksheet template.

7. Should the submitted budget reflect one year of programming?

Yes.

8. Can the Cover Letter, Board Authorization Letter, and tables and charts be single spaced?

Yes.

9. If we include the RFP Questions in our response, can the RFP questions be single spaced?

Yes.

10. May we use a Table of Contents if we wish, and insert this directly after the Cover Letter?

Yes.

11. Who should the Cover Letter and the Board Authorization Letter be addressed to?

Address the cover letter to: Susann Reed, BHRS Contract Manager

12. Can the "Board authorization letter" be signed by one member of the Board, such as the Development Committee Chair (or another appropriate Committee Chair or Officer)?

It should be signed by whomever on your Board has authority to sign. If they all have that authority, then any Board member can sign.

13. Page 4, Section A and Page 17, Section K: Reference is made to the anticipated contract start date of July 1, 2018. In consideration of the RFP timeline which is due on Sept 24, 2018, what should organizations use as the timeline and time period for 1) creating the budget and 2) developing the work plan?

Please use July 1, 2018 through June 30, 2019. Should your agency be selected, and you are not the current provider, the budget will be prorated to the actual start date of the contract. Again, if you are not the current provider for these services, you should consider including start-up costs.

14. Page 15, Section E: As a subset to the timeline question above, if the timeline is moved to a later start date, is there still an expectation to serve 240 children/youth?

It is an annual target that can be adjusted to the start date.

15. Page 7, Section b.: In reference to the qualifications for the Intake and Assessment Coordinator as a Master's level clinician - Can this is an MSW or must it be an LCSW, Psychologist, or MFT?

This position requires a current California registration as either an Associate Clinical Social Worker (ASW) or Intern-Marriage and Family Therapist (IMF) or a current California license as either a Licensed Clinical Social Worker (LCSW) or Marriage and Family Therapist (MFT).

16. Page 7, Section b. : In reference to "A team approach in gathering data for CANS" can the county clarify who it sees as encompassing the "team" to seek information from?

We refer to the fundamental principles of the Continuum of Care Reform (CCR) which states the following: "Completion of the CANS assessment requires effective engagement using a teaming approach. The CANS must be informed by CFT (Child and Family Team) members, including the youth and family." (All County Letter (ACL) NO. 18-09).

17. Page 18, Section I.: In reference to the anticipated funding amount being \$1,690,335 - with \$886,924 being generated from third party Billings. Could the county clarify/specify if this means that the county only has a funding amount of \$803,411 available to be billed for this contract? and that the total amount of \$1,690,335 includes funds billed to third parties?

Correct, it is our funding combined with the MC billing received for the services they document to our Revenue and Reimbursement unit in the invoices.

18. Page 28, Section C: In reference to "any necessary exhibits or other information, including information not specifically requested by this RFP...should be attached to the end of the proposal" Is there a page limit on the amount of attachments that an organization can submit as additional supportive documentation? If so what is it?

There is no limit to the amount of attachments.

19. Page 29, Tab 2: In reference to "attach a project plan, if appropriate". would this attachment be considered part of the 20 page limit narrative or in addition to the 20 page limit narrative?

See question 3 above for answer.

20. Page 29, Tab 3: In reference to "attach your cultural competency plan if available" would this attachment be considered part of the 20 page limit narrative or in addition to the 20 page limit narrative?

See question 3 above for answer.

21. Page 30, Tab 6: "referencing Cooperative Purchasing: Not Used" could you he County clarify whether organizations should eliminate Tab 6, Modify Tab 6 to include Tab 7 contents of Program evaluation or leave Tab 6 as is with a note that says "Not Used"?

Eliminate Tab 6. Do not modify Tab 6 to include the information contained in Tab 7.

22. The expectation to serve 240 children/youth, is that the current level of service or a projected increase?

This is the current level of service and what is expected to continue.

23. Page 18, Section I.: In reference to the anticipated funding amount being \$1,690,335 - with \$886,924 being generated from third party Billings. Could the county clarify/specify if this means that the county only has a funding amount of \$803,411 available to be billed for this contract? and that the total amount of \$1,690,335 includes funds billed to third parties?

The total funding for the services in this RFP is \$1,690,335, which the County expects to pay the full amount. There is an expectation that the provider will provide services to enough clients, and provide documentation, so that the County will be reimbursed by the State, in the amount of \$886,924. Clinicians currently request private insurance information from the family/parent. The parent usually provides a copy of insurance information and the insurance provider arranges reimbursement if need be. Our Revenue and Reimbursement Department takes on that responsibility.

24. Would a proposal be rejected if it included a plan for multiple contractors for portions of the contract - partnerships/collaborations, subcontractor arrangements, or any of the above?

No, but the County has been clear that we are looking for a sole provider.

25. According to page 12 of the RFP "Access to Program Services," the Contractor shall have capacity to provide services in six locations in the County, as well as securing a location in the Half-Moon Bay Area from which to provide services. Does the Contractor need to have a physical site in all six of the listed locations (i.e. Daly City, South San Francisco, San Mateo, Redwood City, San Carlos, and East Palo Alto) or rather, the ability to serve all six regions of the county? Can you confirm that the Contractor must have a physical site in the Half-Moon Bay Area?

We want the Contractor to have the ability to serve all six regions. However, if the client and/or family needs to be seen at a site other than the home or school, the Contractor will need to locate and provide a physical environment.

26. With the contract scheduled to start midway through the fiscal year is the expectation still to serve 240 clients this year?

No, the clients served expectation will be prorated based on when services start

27. According to page 17 of the RFP "Projected Capacity and Length of Stay," the program will provide services to approximately 240 youth per year and their families. Can the County estimate how many youth the Contractor would be expected to serve at any given time? Can the County provide an estimate on the average length of stay?

A clinician will be expected to serve 12-15 clients at any given time; this includes individual therapy, family therapy, collateral sessions, intensive case management, crises intervention, and participation in required meetings related to the client. The provision of services by a clinician can range anywhere from 3 months to 3 years.

28. Will the provider be expected to enter information (treatment plans, etc) into the County's AVATAR System?

Contractors work through an AVATAR Portal system, which is worked out with our Quality Management Team.

## 29. Does all staff need to be licensed/waivered?

Providers with direct contact with clients require a current California registration as either an Associate Clinical Social Worker (ASW) or Intern-Marriage and Family Therapist (IMF) or a current California license as either a Licensed Clinical Social Worker (LCSW) or Marriage and Family Therapist (LMFT) If there is absolutely no therapeutic contact with a client or family member, administrative information can be done by those in an Administrative role.

## 30. What percentage of client youth does the County anticipate will be Medi-Cal eligible?

The majority of our referrals are Medi-Cal eligible.