

RFQ: #6 Intensive Family Reunification (IFR)



Saint Francis
MINISTRIES

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SECTION I

A. **Introduction**

- B. SFM is dedicated to providing services to children and families involved in the child welfare system in the least intrusive and least restrictive manner possible. Services offered are based on family voice and choice and designed to give children and families the opportunity to safely preserve their family whenever possible, engage with both formal and informal community resources, strengthen parents' protective capacity in order to keep children safe from harm, meet the needs of children and families as identified through the assessment process, be culturally humble, and include parents, siblings, and extended family.

SFM continuum of services includes prevention activities, coordination and services that focus on the safety, health and wellbeing of the child, parental and sibling engagement, family voice and choice in service provision, respite, independent living, adoption, domestic violence, safety, mental health, substance abuse and treatment services, as well as educational initiatives. These services are provided to children and families by Saint Francis personnel or through sub-contracted vendors. Specifically, Saint Francis is seeking providers whom are able and/or willing to provide services through the provision Well-Supported, Supported, and Promising Practice evidence-based models that strengthen families and build protective factors in families, in compliance with the federal Families First Prevention Services Act (FFPSA), part of the Bipartisan Budget Act of 2018 (H.R. 1892). Additionally, the Subrecipients will ensure services are culturally humble, trauma-informed, and engage and support the biological/legal parents in the process of family preservation or reunification.

Saint Francis is issuing this **Request for Qualifications (RFQ) #6** in order to qualify Providers to deliver **Intensive Family Reunification** to children and families throughout the Eastern Service Area. The Service Description detailed in this RFQ contains the mandatory minimum requirements Providers must meet in order to provide this service.

The subaward will be for the initial period of July 1, 2021 through February 28, 2023. Saint Francis reserves the right to extend the period of this subaward beyond the termination date when mutually agreeable to the Parties. The resulting subaward may not be an exclusive subaward as Saint Francis reserves the right to subaward for the same or similar services from other sources now or in the future. Under federal law, the resulting contract awarded will also be a "subaward", and the Contractor will also be a "subrecipient".

C. **Evaluation**

Responses will be evaluated based upon the criteria outlined in Section 3 of this document and scored accordingly. Providers' scores that meet the minimum standards set by Saint Francis will be presented with a contract and an offer to Join the Saint Francis Provider Network.

Contracts may be entered into with those Qualified Providers whose submissions are the highest scoring, taking into consideration the evaluation factors set forth herein. Saint Francis reserves the right to contact individual references and to consider other sources of information to determine evaluation scores.

Saint Francis may reject any or all responses or parts thereof and/or cancel this RFP and re-solicit, if such an action is in Saint Francis' best interest. Saint Francis may waive informalities and minor irregularities on responses received. This RFQ does not commit Saint Francis to award any contract or to pay any costs incurred in the preparation of responses.

SECTION II

A. Necessary Documents

Providers who wish to submit a response shall complete all necessary documentation as identified in Section 4 of this RFQ.

B. Specifications

The specifications included in this RFQ provide adequate information as to whether or not Provider can meet the needs of Saint Francis. Deviations from the specifications may result in lower scores or be grounds for disqualification.

C. Questions

Saint Francis believes this RFQ contains sufficient information to respond however will allow Providers to submit questions according to the Procurement Schedule in Section 4.

D. Provider Certification

By submission of a response, Provider certifies that Provider has neither paid nor agreed to pay any person, other than a bona fide employee, a fee or a brokerage resulting from the award of the contract.

E. Preparation of the Response

Providers are expected to examine all service requirements, rules, documents, forms, specifications, standard provisions, instructions, and review its response for accuracy before submitting its response: Failure to do so may result in lower scores or be grounds for disqualification.

F. Response Requirements

Responses should be completed and submitted electronically to ProviderRelationsNEESA@saintfrancisministries.org, hand delivered, or sent via certified mail Addressed to Saint Francis 9218 Bedford Ave Omaha, NE 68134 for Appendix A, Appendix B, and Letters of Recommendation.

Copies of the forms for Appendix A and Appendix B can be found on the Saint Francis Website.

SECTION III

RESPONSE EVALUATION CRITERIA

Responses will be evaluated through in depth analysis and will be based on the following criteria:

1. Provider's demonstration of understanding the Service Description requirements. (max of 30 points)
2. Provider's demonstration of experience, knowledge and education (or a combination thereof) in the following: (max of 30 points)
 - Family engagement
 - Wraparound principles
 - Trauma informed care
 - Skill training with directed practice
 - Engaging ongoing support in natural communities
 - Community resources and ability to collaborate
 - Child development
 - Skill building
 - Ability to incorporate FFPSA models
3. Provider's demonstration of experience with child welfare-involved youth and coaching and skill building in order to effect positive outcomes for youth and families. (max 30 points)
4. Provider's Rate Proposal (30 points)
5. Provider's Letters of Recommendation, reputation, professionalism, and completeness of response to this RFQ. (max 18 points)

The total possible scoring points per scorer is 138. There are 5 scorers and the total possible points is 540. Providers must score a minimum of 690 points to become a Qualified Provider for **Intensive Family Reunification**.

SECTION IV

TIMELINE/SUBMITTAL DOCUMENTS

A. Timeline

1. Provider Submittal Documents are due no later than 4:00 p.m. Central Standard Time ~~April 23, 2021~~ **May 14, 2021**.
2. Responses will be evaluated from ~~April 26, 2021~~ **May 14, 2021** through ~~May 7, 2021~~ **May 21 2021**. During this time, Saint Francis may require Provider to accommodate further discussions with evaluation team. Provider will be notified in writing or by phone if this is requested.
3. Discussion may be conducted with Provider(s) for the purpose of clarifying responses to ensure the evaluation team has a full understanding of the responses to this RFQ. In conducting discussions, there shall be no disclosure of any information derived from responses submitted by competing Providers. However, once this competitive procurement process is complete, all records and associated contracts are considered public record and may be released to third parties upon appropriately submitted public records request(s). Saint Francis reserves the right to conduct discussion if determined necessary. Discussions shall not constitute a contract award nor shall they confer any property rights on a Provider. Ward may be made without discussions, therefore, offers shall be submitted complete and on most favorable terms.
4. Providers selected to provide **Intensive Family Reunification** will be contacted by end of business on ~~May 1, 2021~~ **May 21, 2021**.
5. Providers not selected to provide the services, but that meet the minimum score threshold, are put on the Qualified Provider Listing and will remain on that Listing for the full RFQ cycle. Should there be a need for additional Providers to provide **Intensive Family Reunification** a Qualified Provider will be contacted, unless a Qualified Provider is unavailable for that service in ESA.

B. Submittal Documents

- a. Appendix A – Submittal Letter and Provider Profile
 - i. Appendix A is required by each provider. Provider will include a list of all services provider is seeking a contract for. This document is only required once per provider regardless of the amount of services the provider is seeking to contract for.
- b. Appendix B – Services Response Form
 - i. Appendix B is required for each individual service provider is seeking a contract for.
- c. Letters of Recommendation
 - i. Each provider requires three letters of recommendation. No specific format is required however the response should support the provider's ability to provide the service(s).

C. **Responses must utilize the printed Submittal Forms (do not submit handwritten forms) located on the Saint Francis website.**

1. Email submittal documents with the following attachments to:
 - a. Electronic submissions must be sent in the pdf. Format.
 - b. The Subject Line in the email for submissions must include the name of the Organization and Procurement April 2021. (e.g. ABC Company – Procurement April 2021.

- c. Submittal documents should be attached to the email and named pursuant to the naming conventions listed below.
 - Appendix A Submittal Letter and Profile: Providername-AppendixA.pdf
 - Appendix B-Service Response Form(s): Providername-AppendixB.pdf
 - 3 References: Providername-References.pdf

Example: When ABC Company responds to this RFQ, the Provider shall attach the following submittal documents to the email:

1. ABCCounseling-AppendixA.pdf
 2. ABCCounseling-AppendixB.pdf
 3. ABCCounseling-Recommendations.pdf
2. If submitting documents via hand delivery or certified mail, utilize the following instructions:
- a. Ensure all documents are in the following order
 - i. Appendix A Provider Submittal Letter and Profile
 - ii. Appendix B-Service Response Form(s)
 - iii. Three (3) Professional Letters of Recommendation
 - b. Ensure all documents are submitted at the same time.

SECTION V

Intensive Family Reunification

Service Appendix

DEFINITION

Intensive Family Reunification (IFR) provides intensive therapeutic and skill building interventions to families whose children have been removed and placed out of home for an extensive amount of time through the use of Evidence Based Practice(s) (EBPs). Interventions are designed to address the safety threats that led to a child's removal and continued out of home placement.

Additionally, this service improves parenting capacity as well as children's well-being, and families are safely reunified because of their change in behavior.

This service is designed to create rapid, sustainable change in the family unit by focusing on interventions that build on family strengths in order to eliminate safety threats and/or reduce the risk of child maltreatment.

This service must be delivered in the family home or in a natural family environment, be available 24 hours a day, 7 days a week, including holidays and weekends. This service must include multiple in-person direct contacts (face to face visits, secure video conferencing/Telehealth, and phone calls regarding the family's plan) and indirect contacts (e.g. e-mails, text messages, phone calls not regarding the family's plan) with the family each week. This service also includes discharge planning of specific community resources that connect families with concrete supports to build upon the parental resilience and foundational parenting knowledge initiated by the IFR team.

The Contractor will deliver IFR services through the utilization of an Evidence Based Practice rated Supported or Well Supported by the Title IV-E Prevention Services Clearinghouse. The EBP utilized by the provider may be in addition to Motivational Interviewing. The Contractor will maintain fidelity to the model.

The provider will complete the NCFAS with every family assigned and utilize this assessment along with collateral to drive the interventions for the family. The provider will utilize an FFPSA approved service model of well supported, supported or promising.

A minimum of 15 hours of intervention is required during the initial 30-day period. The Contractor will provide face-to-face contact at a rate or frequency which is in compliance with safety plan requirements and assessment of family need. Intensity of the service will be based on family need. Individualized youth and family needs will be determined based on service referral information, family voice, and formal assessment. Focus of service will be on improvement of the Protective Factors shown to strengthen families and build a family environment that promotes optimal child and youth development. Goals and interventions utilized will be directly related to mitigating the safety threat leading to involvement.

The Contractor shall develop a crisis intervention plan with the family, indicating availability of the IFR team 24 hours a day, 7 days a week. Details of this plan must be included in the initial weekly report.

TARGET POPULATION

Families whose children have been in out-of-home care for a minimum of 90 days, at least one parent is willing to reunify, the permanency plan is reunification with the parent who is willing to reunify, and the parent scores conditionally safe with services to reunify on the reunification assessment.

LENGTH OF SERVICE

The length of IFR service is determined by the success of the family achieving their goals for reunification.

ACCEPTING & RESPONDING TO REFERRALS

The Contractor shall be available to accept Saint Francis IFR Service Referrals 24 hours a day, 7 days a week, including weekends and holidays.

DISCHARGE

This service also includes discharge planning of specific community resources that connect families with concrete supports to build upon the parental resilience and foundational parenting knowledge initiated by the IFR team.

The Contractor shall provide a written discharge plan to the referring Case Manager, prior to discharging the family. The discharge plan shall include the family's involvement in the creation of the plan as well as specific community services and informal, social supports the family has been connected to during the IFR's length of service.

MINIMUM REPORTING REQUIREMENTS

The Contractor shall conduct a client-driven, family assessment across the family's life domains, including safety assessment and planning, domestic violence assessment, suicide assessment, and crisis planning.

The Contractor shall develop a crisis intervention plan with the family at the first point of contact, indicating availability of the IFR team 24 hours a day, 7 days a week. The plan must be submitted to the referring Case Manager within 3 calendar days.

The Contractor shall provide a written treatment plan for the family with the family's signature indicating agreement with the plan. This plan shall be submitted to the referring Case Manager within the first 7 calendar days from the date of the Referral.

Monthly written progress reports shall also be provided to the referring Case Manager. The monthly report shall include information regarding the family's progress with achieving goals identified in the treatment plan and a contact log. The Contractor shall maintain the contact log and make the contact log available to Saint Francis upon request. Progress reports should include documentation of interventions to include role-play, practice, homework, rehearsal, modeling, education, and review of performance.

The Contractor will retain individual session notes that will be available to Saint Francis upon request.

STAFF CREDENTIALS

Any Therapist providing this service must be either a fully Licensed Mental Health Practitioner, or a provisionally Licensed Mental Health Practitioner under the supervision of a fully Licensed Mental Health Practitioner. The Contractor may also consider individuals who are Master's Degree Level in Counseling and/or Social work, and have completed all of the required classes but are currently obtaining internship hours with the Contractor. Interns must be supervised by a fully Licensed Mental Health Practitioner. Documentation of intern supervision must be kept in accordance with Saint Francis record retention policies and submitted to Saint Francis upon request. The supervising fully Licensed Mental Health Practitioner must sign all reports from the intern until the intern is fully licensed.

The Skill Builder must have obtained a Bachelor's Degree in human services, such as, but not limited to, a degree in Social Work, Psychology, Sociology, and Early Childhood Development; or a related field. The Skill Builder may also be enrolled in college and be within two semesters of completing a Bachelor's Degree in human service or a related field. A person who is on semester, summer, or other break, but was enrolled the previous semester and will be enrolled after the break, shall be considered to be enrolled in college.

The Contractor may also consider individuals for the Skill Builder position who have an Associate's degree plus two years of experience in human services or a related field; and, individuals who are obtaining internship hours in a human services field while obtaining a Bachelor's Degree to be comparable to a Bachelor's Degree.

Upon the request by Saint Francis the Contractor shall provide a written plan that outlines additional training and supervision that will be provided to staff who do not have a Bachelor's Degree or are not working on a Bachelor's Degree.

If an employee does not meet the standards outlined above, the Contractor shall notify the Saint Francis Provider Relations Department, and provide the name of the employee, their job function, and education deficiencies which prevent them from meeting the contractual standards. This will be reviewed for an Educational Exception which the Contractor will document in their HR file.

The Contractor shall have a written, detailed training plan for staff and therapists that includes both pre-service and ongoing training requirements. The Contractor will provide their staff with access to training in Well Supported, Supported, or Promising Practices in alignment with the Family First Prevention Services Act of 2018 from which to establish a foundation from the appropriate teaching. The Contractor shall make the training plan available to Saint Francis upon request.

PERFORMANCE OUTCOME MEASURES

Contractors are responsible for reporting outcome data to Saint Francis Ministries via the current identified process by the 10th calendar day of the following month.

1. At service closing 90% of families whose children were in an out of home placement will have reunified with their parent(s).
2. Six months post service closing, 85% of families who had their children reunify will have been able to safely maintain their children without removal or placement outside of the home.
3. 100% of children will experience no incidents of substantiated maltreatment while involved in this service.

ESTABLISHED RATE

Rate Proposal will include an hourly rate for each full hour of direct, face-to-face contact time with the child(ren), juveniles, adults, and/or family.

Saint Francis reserved the right to pay the Contractor in 15 minute increments in those situations where the IFR worker(s) have face-to-face contact time with the child(ren) and/or family. In those situations, the proposed rate would include 15 minute increments equaling 25% of the agreed upon rate.

All other related service costs are included in the established rate. No additional costs for report writing, phone calls, or meetings when family members are not present will be paid by Saint Francis. If attendance at family team