

PROCUREMENT NOTICE

State of Connecticut

Department of Children and Families

LEGAL NOTICE

The State of Connecticut, Department of Children and Families is seeking proposals for **Multisystemic Therapy (MST)**.

The intent of this request is to procure six (6) MST teams to provide Connecticut families with statewide access to this intensive in-home service. It is anticipated that contracts will be awarded to three (3) providers each operating two (2) Teams, covering two (2) Regions each. With the procurement, the Department of Children and Families (DCF) will ensure MST service contracts are implemented with uniform team size and funding and across all of DCF's six (6) Regions.

MST is an Evidence Based Program (EBP) that DCF began implementing in 1999. MST provides clinical services for adolescents ages 12 through 18 who are struggling with drugs and alcohol use and complex behavioral health needs. MST improves the lives of adolescents and their families by working with the network of systems including family, peers, school, and neighborhood. The goals are to stabilize the adolescent's behaviors, strengthen the family unit, and identify appropriate community resources to support the adolescent and family during and after treatment. Sessions are conducted usually three (3) times per week over the course of 3-5 months in the home and a community setting.

The Request for Proposals is available in electronic format on the State Contracting Portal at:

https://biznet.ct.gov/SCP_Search/Default.aspx?AccLast=2

on the Department's website at:

<https://portal.ct.gov/DCF/Contract-Management/Home>

or from the Department's Official Contact:

Name: Stacie Albert
Address: 505 Hudson Street / Hartford, CT 06106
Phone: 860 550-6543
E-Mail: Stacie.Albert@ct.gov

A printed copy of the RFP can be obtained from the Official Contact upon request.

Deadline for submission of proposals is September 9, 2019.

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I. GENERAL INFORMATION

■ A. INTRODUCTION

1. **RFP Name or Number.** RFP #200717001 / Multisystemic Therapy (MST)
2. **Summary.** The purpose of this request is to rebid the MST Network and procure 6 MST teams of uniform size and funding in order to provide MST statewide to adolescents and families. It is anticipated that contracts will be awarded to three (3) providers each operating two (2) Teams, covering two (2) Regions each. With the procurement, the Department of Children and Families (DCF) will ensure MST service contracts are implemented with uniform team size and funding and across all of DCF's six (6) Regions.
3. **Synopsis (Optional).** DCF is seeking to procure six (6) MST teams through this procurement for a total of up to 3 providers. Each provider will be awarded two teams.

DCF Regions	MST Teams to Rebid	Providers
Region 1	1	1
Region 5	1	
Region 2	1	1
Region 3	1	
Region 4	1	1
Region 6	1	
Total	6	3

4. **Commodity Codes.** The services that the Department wishes to procure through this RFP are as follows:
 - 0600: Services (Professional, Support, Consulting and Misc. Services)
 - 1000: Healthcare Services
 - 2000: Community and Social Services

■ B. ABBREVIATIONS / ACRONYMS / DEFINITIONS

BFO	Best and Final Offer
C.G.S.	Connecticut General Statutes
CHRO	Commission on Human Rights and Opportunity (CT)
CT	Connecticut
DAS	Department of Administrative Services (CT)
DCF	Department of Children and Families (CT)
EBP	Evidence Based Program
FOIA	Freedom of Information Act (CT)
GAIN	Global Appraisal of Individual Needs
IRS	Internal Revenue Service (US)
LOI	Letter of Intent
MST	Multisystemic Therapy
OAG	Office of the Attorney General
OPM	Office of Policy and Management (CT)
OSC	Office of the State Comptroller (CT)
POS	Purchase of Service
P.A.	Public Act (CT)
QA	Quality Assurance
RFP	Request For Proposal
SEEC	State Elections Enforcement Commission (CT)
U.S.	United States

- *contractor*: a private provider organization, CT State agency, or municipality that enters into a POS contract with the Department as a result of this RFP
- *proposer*: a private provider organization, CT State agency, or municipality that has submitted a proposal to the Department in response to this RFP
- *prospective proposer*: a private provider organization, CT State agency, or municipality that may submit a proposal to the Department in response to this RFP, but has not yet done so
- *subcontractor*: an individual (other than an employee of the contractor) or business entity hired by a contractor to provide a specific health or human service as part of a POS contract with the Department as a result of this RFP

■ C. INSTRUCTIONS

- 1. Official Contact.** The Department has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Department. Proposers, prospective proposers, and other interested parties are advised that any communication with any other Department employee(s) (including appointed officials) or personnel under contract to the Department about this RFP is strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: Stacie Albert
Address: 505 Hudson Street / Hartford, CT 06106
Phone: 860 550-6543
E-Mail: Stacie.Albert@ct.gov

Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

- 2. RFP Information.** The RFP, amendments to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:

- Department's RFP Web Page
- <https://portal.ct.gov/DCF/Contract-Management/Home>
- State Contracting Portal
https://biznet.ct.gov/SCP_Search/Default.aspx?Acclast=2

It is strongly recommended that any proposer or prospective proposer interested in this procurement subscribe to receive e-mail alerts from the State Contracting Portal. Subscribers will receive a daily e-mail announcing procurements and addendums that are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFP.

Printed copies of all documents are also available from the Official Contact upon request.

- 3. Contract Awards.** The award of any contract pursuant to this RFP is dependent upon the availability of funding to the Department. The Department anticipates the following:

- Total Funding Available: **\$1,884,000**
- Number of Awards: **3**
- Per Contract Funding: **\$628,000** (\$314,000 per Team)
- Contract Term: 1-5 Years, at the discretion of the Department

- 4. Eligibility.** Private provider organizations (defined as nonstate entities that are either nonprofit or proprietary corporations or partnerships), CT State agencies, and municipalities are eligible to submit proposals in response to this RFP. Individuals who are not a duly formed business entity are ineligible to participate in this procurement.
- 5. Minimum Qualifications of Proposers.** To qualify for a contract award, a proposer must have the following minimum qualifications:
- The agency must be registered to do business within the State of Connecticut (through the Office of the Secretary of the State);
 - The agency must possess valid status as a nonprofit, proprietary corporation, partnership or be a state agency or municipality;
 - The agency must have the appropriate license(s) to provide clinical services to children;
 - The agency must ensure the ability to maximize billing for third party reimbursement for clinical and case management services with children with substance use and/or behavioral health problems;
- 6. Procurement Schedule.** See below. Dates after the due date for proposals ("Proposals Due") are target dates only (*). The Department may amend the schedule, as needed. Any change will be made by means of an amendment to this RFP and will be posted on the State Contracting Portal and, if available, the Department's RFP Web Page.
- RFP Planning Start Date: March 1, 2019
 - RFP Released: July 17, 2019
 - RFP Conference: July 26, 2019
 - Deadline for Questions: August 8, 2019
 - Answers Released: August 12, 2019
 - Letter of Intent Due: 3:00 PM / August 26, 2019
 - Proposals Due: 3:00 PM / September 9, 2019
 - (*) Proposer Selection: October 7, 2019
 - (*) Start of Contract Negotiations: October 15, 2019
 - (*) Start of Contract: November 15, 2019
- 7. Letter of Intent.** A Letter of Intent (LOI) **is required** for this RFP. The LOI is non-binding and does not obligate the sender to submit a proposal. The LOI must be submitted to the Official Contact via e-mail by the deadline established in the Procurement Schedule. The subject line of the email must read, "Parenting Support Services RFP / Letter of Intent". The LOI must clearly identify the sender, including name, postal address, telephone number, fax number, e-mail address and DCF Region and Area Office being applied for. It is the sender's responsibility to confirm the Department's receipt of the LOI. **If applying for multiple Regions, 1 Letter of Intent may be submitted, but each specific Region being applied for must be indicated.** The Department will not accept proposals from any applicant for a Region for which a Letter of Intent was not submitted. Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.
- 8. Inquiry Procedures.** All questions regarding this RFP or the Department's procurement process must be directed, in writing, to the Official Contact before the deadline specified in the Procurement Schedule. The early submission of questions is encouraged. Questions will not be accepted or answered verbally- neither in person nor over the telephone, except at the RFP Conference, during which questions will be accepted and answered verbally, recorded and included with the final release of Questions and Answers. All questions received before the deadline(s) will be answered. However, the Department will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFP or the procurement process will not be answered. At its discretion, the Department may or may not respond to questions received after the deadline. If this RFP requires a Letter of Intent, the Department reserves the right to answer questions only from those who have submitted such a letter.

The Department may combine similar questions and give only one answer. All questions and answers will be compiled into a written amendment to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the answers to questions on the date(s) established in the Procurement Schedule. The Department will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP Web Page.

- 9. RFP Conference.** An RFP conference will be held to answer questions from prospective proposers. Attendance at the conference is **non-mandatory**, but highly recommended. Copies of the RFP will not be available at the RFP Conference. Prospective proposers are asked to bring a copy of the RFP to the conference. At the conference, attendees will be provided an opportunity to submit written questions, which the Department's representatives may (or may not) answer at the conference. Any oral answers given at the conference by the Department's representatives are tentative and not binding on the Department. All questions submitted will be answered in a written amendment to this RFP, which will serve as the Department's official response to questions asked at the conference. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the amendment on the date established in the Procurement Schedule. The Department will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP Web Page.

- Date: July 26, 2019
- Time/Location: 1:00 PM / Beacon Health Options / Hartford Room
500 Enterprise Drive / Rocky Hill, CT

- 10. Proposal Due Date and Time.** The Official Contact is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be received by the Official Contact on or before the due date and time:

- Due Date: September 9, 2019
- Time: 3:00 PM

Faxed or e-mailed proposals, other than email submission of an electronic copy when submitted in conjunction with all other submission requirements, will not be evaluated. When hand-delivering proposals by courier or in person, allow extra time due to building security procedures. The Department will not accept a postmark date as the basis for meeting the submission due date and time. Proposals received after the due date and time may be accepted by the Department as a clerical function, but late proposals will not be evaluated. At the discretion of the Department, late proposals may be destroyed or retained for pick up by the submitters.

An acceptable submission must include the following:

- one (1) original proposal;
- eight (8) conforming copies of the original proposal; and
- one (1) conforming electronic copy of the original proposal.

The original proposal must carry original signatures and be clearly marked on the cover as "Original." Unsigned proposals will not be evaluated. The original proposal and each conforming copy of the proposal must be complete, properly formatted and outlined, and ready for evaluation by the Screening Committee.

The electronic copy of the proposal must be emailed to the Official Agency Contact for this procurement. The subject line of the email must read: **MST / Electronic Proposal Submission**. For the electronic copy, required forms and appendices may be scanned and submitted in Portable Document Format (PDF).

- 11. Multiple Proposals.** The submission of multiple proposals **is** an option with this procurement. The Department is requiring the submission of one (1) proposal per DCF consolidated Region (see chart in Section 1.A (3)). Proposals may be submitted for Regions 1 and 5, Regions 2 and 3 and/or Regions 4 and 6. Proposals may not be submitted for one (1) Region only or for any combination of Regions other than delineated herein.
- 12. Declaration of Confidential Information.** Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), the Privacy Act, and all rules, regulations and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL. In Section C of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).
- 13. Conflict of Interest-Disclosure Statement.** Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Department will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement. *Example: "[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

■ D. PROPOSAL FORMAT

- 1. Required Outline.** All proposals must follow the required outline presented in Section IV– Proposal Outline. Proposals that fail to follow the required outline will be deemed non-responsive and not evaluated.
- 2. Cover Sheet.** The Cover Sheet is Page 1 of the proposal. Proposers must complete and use the Cover Sheet form provided by the Department in Section IV.I – Forms.
- 3. Table of Contents.** All proposals must include a Table of Contents that conforms with the required proposal outline. (See Section IV.)
- 4. Executive Summary.** Proposals must include a high-level summary, not exceeding 1 page, of the main proposal and cost proposal.
- 5. Attachments.** Attachments other than the required Appendices or Forms identified in Section IV are not permitted and will not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions will result in disqualification.
- 6. Style Requirements.** Submitted proposals must conform to the following specifications:
 - Binding Type: Loose Leaf, Bound with a Binder Clip

- Dividers: No Dividers
- Paper Size: Standard Letter
- Print Style: 2-sided
- Page Limit: 30 Single-Sided (15 sheets of Paper, printed Double-Side) for Section IV.F (Main Proposal)
- Font Size: 12
- Font Type: Times New Roman
- Margins: Normal
- Line Spacing: 1.5

7. Pagination. The proposer's name must be displayed in the header of each page. All pages, including the required Appendices and Forms, must be numbered in the footer.

8. Packaging and Labeling Requirements. All proposals must be submitted in sealed envelopes or packages and be addressed to the Official Contact. The Legal Name and Address of the proposer must appear in the upper left corner of the envelope or package. The RFP Name or Number must be clearly displayed on the envelope or package. Any received proposal that does not conform to these packaging or labeling instructions will be opened as general mail. Such a proposal may be accepted by the Department as a clerical function, but it will not be evaluated. At the discretion of the Department, such a proposal may be destroyed or retained for pick up by the submitters.

■ E. EVALUATION OF PROPOSALS

1. Evaluation Process. It is the intent of the Department to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful proposers, and awarding contracts, the Department will conform with its written procedures for POS procurements (pursuant to C.G.S. § 4-217) and the State's Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85).

2. Screening Committee. The Department will designate a Screening Committee to evaluate proposals submitted in response to this RFP. The contents of all submitted proposals, including any confidential information, will be shared with the Screening Committee. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. Attempts by any proposer (or representative of any proposer) to contact or influence any member of the Screening Committee may result in disqualification of the proposer.

3. Minimum Submission Requirements. All proposals must comply with the requirements specified in this RFP. To be eligible for evaluation, proposals must (1) be received on or before the due date and time; (2) meet the Proposal Format requirements; (3) follow the required Proposal Outline; and (4) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. The Department will reject any proposal that deviates significantly from the requirements of this RFP.

4. Evaluation Criteria (and Weights). Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Screening Committee will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals. The criteria are weighted according to their relative importance. The weights are disclosed below.

- | | |
|--|-----------|
| • Organizational Requirements | 8 points |
| • Cultural & Linguistically Competent Care | 15 points |
| • Service Requirements | 30 points |
| • Staffing Requirements | 12 points |
| • Work Plan and Implementation Timeline | 8 points |

- Family Partnerships and Community Linkages 7 points
- Data and Technology Requirements 5 points
- Financial Requirements 5 points
- Budget and Budget Narrative 10 points

Note:

As part of its evaluation of the Staffing Plan, the Screening Committee will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

- 5. Proposer Selection.** Upon completing its evaluation of proposals, the Screening Committee will submit the rankings of all proposals to the Department head. The final selection of a successful proposer is at the discretion of the Department head. Any proposer selected will be so notified and awarded an opportunity to negotiate a contract with the Department. Such negotiations may, but will not automatically, result in a contract. Pursuant to Governor M. Jodi Rell's Executive Order No. 3, any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at the Department's discretion, about the outcome of the evaluation and proposer selection process.
- 6. Debriefing.** Within ten (10) days of receiving notification from the Department, unsuccessful proposers may contact the Official Contact and request information about the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days. If unsuccessful proposers still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Department to discuss the evaluation process and their proposals. If held, the debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. The Department will schedule and hold the debriefing meeting within fifteen (15) days of the request. The Department will not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.
- 7. Appeal Process.** Proposers may appeal any aspect the Department's competitive procurement, including the evaluation and proposer selection process. Any such appeal must be submitted to the Department head. A proposer may file an appeal at any time after the proposal due date, but not later than thirty (30) days after an agency notifies unsuccessful proposers about the outcome of the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for the Department to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.
- 8. Contract Execution.** Any contract developed and executed as a result of this RFP is subject to the Department's contracting procedures, which may include approval by the Office of the Attorney General.

II. MANDATORY PROVISIONS

■ A. POS STANDARD CONTRACT, PARTS I AND II

By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract" for POS:

Part I of the standard contract is maintained by the Department and will include the scope of services, contract performance, quality assurance, reports, terms of payment, budget, and other program-specific provisions of any resulting POS contract. A sample of Part I is available from the Department's Official Contact upon request.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the POS contract. Part II is available on OPM's website at: http://www.ct.gov/opm/fin/standard_contract

Note:

Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a proposer is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the proposer must inform the proposer's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected proposer (contractor), and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's Office.

■ B. ASSURANCES

By submitting a proposal in response to this RFP, a proposer implicitly gives the following assurances:

- 1. Collusion.** The proposer represents and warrants that the proposer did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the proposer's proposal. The proposer also represents and warrants that the submitted proposal is in all respects fair and is made without collusion or fraud.
- 2. State Officials and Employees.** The proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The Department may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the proposer, contractor, or its agents or employees.
- 3. Competitors.** The proposer assures that the submitted proposal is not made in connection with any competing organization or competitor submitting a separate proposal in response to this RFP. No attempt has been made, or will be made, by the proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the proposer knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.
- 4. Validity of Proposal.** The proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments

or attachments hereto. The proposal shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Department may include the proposal, by reference or otherwise, into any contract with the successful proposer.

5. **Press Releases.** The proposer agrees to obtain prior written consent and approval of the Department for press releases that relate in any manner to this RFP or any resultant contract.

■ C. TERMS AND CONDITIONS

By submitting a proposal in response to this RFP, a proposer implicitly agrees to comply with the following terms and conditions:

1. **Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.
2. **Preparation Expenses.** Neither the State nor the Department shall assume any liability for expenses incurred by a proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
3. **Exclusion of Taxes.** The Department is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.
4. **Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed through the entire term of the contract.
5. **Changes to Proposal.** No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Department may request and authorize proposers to submit written clarification of their proposals, in a manner or format prescribed by the Department, and at the proposer's expense.
6. **Supplemental Information.** Supplemental information will not be considered after the deadline submission of proposals, unless specifically requested by the Department. The Department may ask a proposer to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by the Department. At its sole discretion, the Department may limit the number of proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per proposer.
7. **Presentation of Supporting Evidence.** If requested by the Department, a proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Department may make onsite visits to an operational facility or facilities of a proposer to evaluate further the proposer's capability to perform the duties required by this RFP. At its discretion, the Department may also check or contact any reference provided by the proposer.
8. **RFP Is Not An Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Department or confer any rights on any proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the proposer and the Department and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the proposer or for payment of services under the terms of the contract until the successful proposer is notified that the contract has been accepted and approved by the Department and, if required, by the Attorney General's Office.

■ D. RIGHTS RESERVED TO THE STATE

By submitting a proposal in response to this RFP, a proposer implicitly accepts that the following rights are reserved to the State:

- 1. Timing Sequence.** The timing and sequence of events associated with this RFP shall ultimately be determined by the Department.
- 2. Amending or Canceling RFP.** The Department reserves the right to amend or cancel this RFP on any date and at any time, if the Department deems it to be necessary, appropriate, or otherwise in the best interests of the State.
- 3. No Acceptable Proposals.** In the event that no acceptable proposals are submitted in response to this RFP, the Department may reopen the procurement process, if it is determined to be in the best interests of the State.
- 4. Award and Rejection of Proposals.** The Department reserves the right to award in part, to reject any and all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Department may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Department reserves the right to reject the proposal of any proposer who submits a proposal after the submission date and time.
- 5. Sole Property of the State.** All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFP shall be the sole property of the State, unless stated otherwise in this RFP or subsequent contract. The right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.
- 6. Contract Negotiation.** The Department reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Department further reserves the right to contract with one or more proposer for such services. After reviewing the scored criteria, the Department may seek Best and Final Offers (BFO) on cost from proposers. The Department may set parameters on any BFOs received.
- 7. Clerical Errors in Award.** The Department reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a proposer and subsequently awarding the contract to another proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the proposer.
- 8. Key Personnel.** When the Department is the sole funder of a purchased service, the Department reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Department also reserves the right to approve replacements for key personnel who have terminated employment. The Department further reserves the right to require the removal and replacement of any of the proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the Department.

■ E. STATUTORY AND REGULATORY COMPLIANCE

By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:

- 1. Freedom of Information, C.G.S. § 1-210(b).** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the

content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.

- 2. Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive.** CT statute and regulations impose certain obligations on State agencies (as well as contractors and subcontractors doing business with the State) to insure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.
- 3. Consulting Agreements, C.G.S. § 4a-81.** Proposals for State contracts with a value of \$50,000 or more in a calendar or fiscal year, excluding leases and licensing agreements of any value, shall include a consulting agreement affidavit attesting to whether any consulting agreement has been entered into in connection with the proposal. As used herein "consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information or (C) any other similar activity related to such contract. Consulting agreement does not include any agreements entered into with a consultant who is registered under the provisions of C.G.S. Chapter 10 as of the date such affidavit is submitted in accordance with the provisions of C.G.S. § 4a-81. The Consulting Agreement Affidavit (OPM Ethics Form 5) is available on OPM's website at http://www.ct.gov/opm/fin/ethics_forms
IMPORTANT NOTE: A proposer must complete and submit OPM Ethics Form 5 to the Department with the proposal.
- 4. Gift and Campaign Contributions, C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8 and No. 7C, Para. 10; C.G.S. § 9-612(g)(2).** If a proposer is awarded an opportunity to negotiate a contract with an anticipated value of \$50,000 or more in a calendar or fiscal year, the proposer must fully disclose any gifts or lawful contributions made to campaigns of candidates for statewide public office or the General Assembly. Municipalities and CT State agencies are exempt from this requirement. The gift and campaign contributions certification (OPM Ethics Form 1) is available on OPM's website at http://www.ct.gov/opm/fin/ethics_forms
IMPORTANT NOTE: The successful proposer must complete and submit OPM Ethics Form 1 to the Department prior to contract execution.
- 5. Nondiscrimination Certification , C.G.S. §§ 4a-60(a)(1) and 4a-60a(a)(1).** If a proposer is awarded an opportunity to negotiate a contract, the proposer must provide the Department with *written representation* or *documentation* that certifies the proposer complies with the State's nondiscrimination agreements and warranties. A nondiscrimination certification is required for all State contracts – regardless of type, term, cost, or value. Municipalities and CT State agencies are exempt from this requirement. The nondiscrimination certification forms are available on OPM's website at http://www.ct.gov/opm/fin/nondiscrim_forms
IMPORTANT NOTE: The successful proposer must complete and submit the appropriate nondiscrimination certification form to the awarding Department prior to contract execution.

III. PROGRAM INFORMATION

■ A. DEPARTMENT OVERVIEW

The mission of the Department of Children and Families is: ***“Working together with families and communities for children who are healthy, safe, smart and strong.”*** To that end, the Department has issued seven (7) cross-cutting themes that guide all DCF operational units in advancing the mission and strategies of the Agency:

1. implementing strength-based family policy, practice and programs;
2. applying the neuroscience of early childhood and adolescent development;
3. expanding trauma-informed practice and culture;
4. addressing racial inequities in all areas of our practice;
5. building new community and agency partnerships;
6. improving leadership, management, supervision and accountability; and
7. becoming a learning organization.

Using these themes, the Department has implemented and strives to adhere to the following strategies:

1. increasing investment in prevention, health promotion, early intervention and educational success;
2. strengthening family-centered practice;
3. expanding regional networks of in-home and community services;
4. continuing congregate care rightsizing and redesign;
5. addressing the needs of identified populations of children and families;
6. increasing DCF and community partnerships;
7. supporting the public and private sector workforce;
8. managing ongoing DCF operations and change initiatives; and
9. improving revenue maximization and development of new investment resources

The Department of Children and Families was instituted by the Connecticut General Assembly as the Department of Children and Youth Services in May, 1969. In 1974, child welfare services were transferred to the Department, with children’s mental health services and a unified school district for children in the Department’s care and custody added one year later and substance use services for children and youth 13 years after that (in 1988). The Department’s name (Children and Families) was officially changed through legislation in 1993, to reflect the Department’s still-evolving mission of providing child-centered, family focused, community-based programs and services throughout Connecticut.

In 1987, the Department instituted a regional management model, strengthening community-based services through grants and child-centered social work practice. Six regions began managing grants and contracted services within assigned geographical locations, thus cementing the Department’s partnerships with local, area community service providers. Since that time, the Department’s contracted service milieu has grown to encompass 80 contracted services types provided by 95 community service agencies providing 400 individual programs to Connecticut’s children and their families.

■ B. PROGRAM OVERVIEW

MST is an evidence-based program that empowers adolescents and families in order to improve functioning over the long term. MST works within the network of systems including: family, peers, school, and neighborhood. MST teams have small caseloads and provide services in the home at times that are convenient to the family for approximately 3-5 months. This service is eligible for both DCF and community referrals, although DCF-involved families must be given priority access. All treatment, care, and support services must be provided in a context that is adolescent-centered, family-focused, strength-based, culturally and linguistically appropriate, and responsive to each adolescent’s psychosocial, developmental, and treatment care needs. The Global Appraisal of Individual Needs (GAIN) Q3 is required at admission and discharge and will be used in determining treatment needs during and after services.

The target population for this program are adolescents between the ages of 12-18 years, who meet the following admission criteria:

- present with significant behavioral health needs (mental health and substance use) impacting the family, school/work, community domains, and
- reside in a family setting.

Exclusionary criteria include:

- Currently suicidal, homicidal or psychotic. Children in need of immediate crisis psychiatric hospitalization or stabilization (a history of psychiatric hospitalization does not exclude children);
- Likely to be placed or incarcerated;
- Children living independently or in long term residential treatment settings. (Treatment can begin 30 days prior to discharge from a residential setting back into family home). Must have an identified caregiver;
- Primary behavior is a sexual offense;
- Diagnosis of Autism, PDD, Mild/Moderate/Severe MR (Pervasive Developmental Delay (PDD) (children may be of below average intelligence but if IQ score is below 70 with adaptive scores limitations in two or more domains, consultant approval is required)

Number of Clients to Complete MST annually:

REGION	CLIENTS COMPLETING MST ANNUALLY
Region 1	45
Region 2	45
Region 3	45
Region 4	45
Region 5	45
Region 6	45

Services shall be delivered in accordance with the tenets of the MST model and the DCF MST Practice Guide. The successful applicants must adhere to and implement all aspects and requirements of the MST model, maintain model fidelity, and achieve and maintain relevant credentialed status as determined by the model developers.

Therapists and provider agencies will be held accountable for achieving change and positive outcomes. The goals of MST are as follows:

- Stabilize the adolescent's symptoms and behaviors, and strengthening of the family unit through intensive therapeutic services;
- Enable the family to more effectively manage the behaviors of the adolescent; and
- Identify appropriate community resources to support the adolescent and family during the service and after discharge.

The MST team will develop linkages to natural and non-traditional supports necessary for positive functioning in the community and maintenance of treatment gains. At a minimum, the provider will develop and maintain linkages for priority access to the following services, when appropriate for the adolescent's treatment needs:

- Outpatient Psychotherapy
- Medication Evaluation
- Medication Assisted Treatment
- Mobile Crisis Services
- Local System of Care (SOC) Community Collaborative Care Coordination
- Concrete Services
- Social and Recreational Resources

Each provider awarded as a result of this RFP will be required to serve two (2) combined DCF Regions (as noted in Section I.A (3)), although each Region will be expected to maintain its own Team. Each MST Team will have responsibility to provide services to its entire Region. The MST Team shall consist of a part-time licensed Clinical Supervisor and 3 full time licensed Therapists. Each Therapist will be expected to carry caseload of five (5) with a Team capacity of fifteen (15) once trained and certified. Annual utilization for each Team will be 45 families completing MST annually.

Staffing model:

DCF Regions	Therapists	Supervisors
Region 1	3	1
Region 5	3	
Region 2	3	1
Region 3	3	
Region 4	3	1
Region 6	3	
Total	18	3

The supervisor will be licensed with at least a master's degree in a behavioral health field and no less than three (3) years experience in delivery of clinical services. Each supervisor will have three therapists, in accordance with the MST model. Therapists will be licensed with at least a Master's degree in a behavioral health field. Exceptions to the education or licensure requirements need prior approval from DCF and the MST Consultation and Evaluation provider.

Supervision must be delivered consistent with the MST model. The provider will participate in MST QA activities including but not limited to: group meetings, MST trainings, MST weekly consultations, site visits, and peer review of policies, procedures, and practice guide. Costs associated with standard MST training and QA will be paid for by DCF.

■ C. MAIN PROPOSAL COMPONENTS

1. Organizational Requirements (8 points)

- (a) Purpose / Mission / Philosophy: Briefly describe the purpose, mission and philosophy of the agency and the proposed program. This section should also describe how your program or agency will adhere to applicable state and federal laws, regulations and policies specific to the services to be provided. A Table of Organization for the applicant agency must be included as Appendix 4 of the proposal and must clearly identify where the proposed program will fall in the organizational structure of the agency.
- (b) Entity Type / Years of Operation: Please provide a brief history of the agency and the proposed program.
- (c) Community Presence: Please describe the level of current presence your agency has in the proposed communities of service. Proposals must also demonstrate your knowledge of the dynamics and diversity within the community you are proposing to serve.
- Note: This component is worth 50% of the total available points for this section.
- (d) Administrative Office Location: Please provide the location of the agency's administrative offices.
- (e) Qualifications / Certification / Licensure: Please describe your agency's experience providing the kinds of services being requested through this RFP. If the agency or program being proposed holds any certifications or licensures, please detail the type and how long it has been held. All applicants will be required to possess registration to do business in the State of Connecticut (through the Office of the Secretary of the State) and proof of business entity status. Proof of such must be provided in the applicant's proposal as Appendices 5 and 6. Applicants must also demonstrate that they possess appropriate licensure to provide clinical services to children. Such licensure must be provided in the applicant's proposal as Appendix 7.
- (f) Corrective Action: If the agency was under a Service Development Plan or a Corrective Action Plan for any DCF-funded program in the past two (2) years, proposals must identify the program, the primary problem(s), and how the problem(s) was (were) addressed.

2. Cultural & Linguistically Competent Care (15 Points)

Provide a detailed description of your agency's knowledge, expertise and understanding of diversity (including, but not limited to: racial, ethnic, gender and gender identity, sexual orientation, culture, linguistic, immigrant, disabilities, and religion) as it relates to the provision of services. (15 points overall)
Detail your response according to the following:

1. Culturally Diverse Communities: Describe your organization's successes & challenges serving diverse communities. Include any data your agency has that reveals the ability to effectively serve and achieve positive outcomes for children and families of multiple diverse groups. Additionally, describe how your organization overcame previous challenges. **(5 points)**
2. Culturally Diverse Families: Please detail how your program/service will effectively meet the needs of the community/communities you propose to service through this application. Describe policies, practices, and data collection mechanisms. Include supporting data about the race, ethnicity, and languages of the communities you are seeking to serve. Also, include how your organization works to establish rapport and trust with families related to experiences of racism and how this influences and guides client engagement and treatment planning. (Supporting data may be included as Appendix 8) **(5 points)**
3. Culturally Diverse Staff: Describe your plan and current activities to recruit, retain, train, supervise, and facilitate dialogue amongst a diverse staff, including those who are bicultural and bilingual, for this program/service and across all levels of your organization. Please include a description of what progress your organization made to increase the diversity of the workforce in the past three years. **(5 points)**

3. Service Requirements (30 points)

Proposals should address each of the following areas. The use of sub-contractors is **not** permitted for these services.

- (a) Referral Process: The referral process should be detailed about the criteria, provider staff who will do the initial screening of the referral, how the screening will occur, what assessments will be utilized and how communication will be facilitated with referral sources including DCF and others in the community. Proposals must also explain how DCF referrals will be prioritized over referrals from the community.

Proposals should delineate the maximum time periods between referral acceptance and initial intake appointment as well as the time periods between initial intake appointment and first scheduled treatment. Minimally, DCF expects that contact with the family be made within two (2) business days of referral receipt, that initial screening be conducted within seven (7) calendar days of referral receipt and that intake and initial treatment session be complete within fourteen (14) days of referral receipt.

- (b) Clients Served: Proposals should include a plan on how to ensure clients will be engaged in order to have them complete services and meet contract expectations. Minimally, DCF will expect each Therapist to carry a caseload of 5 at any given time, with an average of 15 unduplicated served annually.
- (c) Hours of Operation: Provide the proposed hours of operation for the program including how the program will ensure 24/7 availability for emergency situations. Since this is a service provided in the client's home or community settings, it is anticipated that programs will offer flexibility to include evening and/or weekend hours (if needed) to accommodate clients in certain situations (give examples of such situations).

- (d) Development of Individual Treatment Plans: Proposals must describe the methodologies to be used and the timelines for development and implementation of an Individual Treatment Plan. Program staff, in conjunction with the adolescent and parents, should work together to develop an Individual Treatment Plan that addresses the adolescent's needs. The plan should incorporate information obtained from assessments and should identify needed services and goals.
- (e) Treatment/Service Components: Proposals must describe services offered to the adolescents and families including the modality by which they are offered. For each of the components proposed, the proposal must clearly describe how services will be provided.
- The general treatment approach including:
 - Basics of the MST approach;
 - Frequency and type of contact with the family over the course of the treatment episode;
 - On-site urine screens and breathalyzers (if proposed); and
 - Crisis coverage.
 - MST Supervision
 - Describe how the various forms of MST supervision will be implemented, by whom, with whom, and how MST supervisor certification will occur.

4. Staffing Requirements (12 Points)

Applicants are to use the staffing model described in the MST Scope of Services (Attachment 5). This staffing model will be the required staffing structure for all contracts implemented as a result of this RFP.

Proposals must describe the following:

- (a) Staff Qualifications: The staff categories to be assigned to the proposed program, including the extent to which they have or will have the appropriate training and experience to perform assigned duties. The proposal must describe the extent to which staff is or will be multi-lingual and multi-cultural. All qualification must conform to the requirements of the MST Scope of Service (Attachment 5).
- (b) Staff Recruitment and Retention: Proposals must include the following:
- How Providers will ensure that all employment candidates receive a criminal record and DCF abuse/neglect background check;
 - A staff retention plan detailing measures taken to reduce staff turnover;
 - A description of how staff will be recruited and selected;
 - A description of how the staffing plan will be appropriate to the language, age, gender, sexual orientation, disability, and ethnic/racial/cultural factors of the target population; and
 - A description of how the program will continue to provide services that are timely, effective, and true to the model if sickness, training, vacancies, leaves of absence, etc. make regularly scheduled staff unavailable.

Note: Preference will be given, through the scoring tool utilized by the Review and Evaluation Committee for this RFP, to current applicants with a demonstrated ability to adhere to their current staffing plan and those who have a demonstrated history of maintaining low vacancy rates.

- (c) Staff Training: In addition to the mandated staff training requirements for MST providers, proposals must also describe any additional training provided by the agency to its staff, the intensity and the frequency.

5. Work Plan and Implementation Timeline (8 points)

Programs should be available by **November 15, 2019**. Proposals should clearly define the timelines and work processes leading up to availability of services to include a detailed start-up process and timeline, including a description of the following:

- Location of office(s) for use by the MST Team;
- The process for obtaining the physical setting/structure;
- The process for hiring, orienting and training staff; and
- The date and process for when the new hires will be trained in use of the GAIN-Q3.

6. Family Partnerships and Community Linkages (7 points)

- (a) DCF Communication: Describe the agency's plan to collaborate and communicate with the referral sources, including the DCF Area Offices. The Contractor will maintain frequent contact for open DCF cases with the DCF assigned case worker regarding each family's progress. The Contractor will be required to maintain a written case record on each family served.

Note: Preference will be given, through the scoring tool utilized by the Review and Evaluation Committee for this RFP, to current applicants with demonstrated positive history of communication and responsiveness to DCF, as measured at the Area Office level, through staff interaction.

- (b) Community Linkages: Describe the agency's effective mechanisms for fostering communication and coordination among families, service providers, and community supports during the treatment episode.

7. Data and Technology Requirements (5 points)

The Department will require awarded contractor(s) to submit child and family specific data, and administrative service and training data. Under the Results-based Accountability framework in place for service evaluation throughout the state, the Department will assist contractors to provide information about the modality provided, quantity of service delivered, its consistency with Strengthening Families principles and the effect of the services. The Department requires contractor(s) to use data to ensure the quality of their services, including identifying program challenges or barriers, identify potential best practices, and achievement of the program's goals, objectives and outcomes.

The child and family specific data for this service will be collected using electronic, web-based applications designed for the EBPs implemented. Monitoring program outcomes and model fidelity is an important part of implementing an evidence-based service.

The Contractor will submit individual, client level data to the department's Program Information Exchange (PIE) and/or other system as directed by the department. Complete, timely and accurate data is essential for both the Provider and the Department to help support service provision, identify trends and measure important outcomes. As such, while it is ideal to enter data ongoing and as soon after the event as possible, it is expected that data be entered within 20 days following the end of each month. Such a timeframe is consistent whether as a Contractor the data is batched or directly entered. The Contractor will ensure that the data submitted under PIE and/or other systems are in conformance with the applicable data specifications and picklists. Furthermore, the data must use the conventions and logic as determined by the department to ensure accurate, unduplicated client counts. These data, as set forth by DCF, will be sent to the department. For more information regarding PIE, go to the DCF website as follows: <https://portal.ct.gov/DCF/ORE/PIE>.

- (a) Outcome Achievements: Proposals must describe the agency's success in achieving positive outcomes related to the outcomes listed in the attached Scope of Service. Specific examples must be provided to support all claims.
- (b) Quality Improvement Experience: Describe your agency's prior experience collecting and reporting data for program administration, continuous quality improvement (CQI), and for reporting on program progress. Describe how this experience positions your organization to meet the data and reporting requirements of this RFP. Each Provider is required to develop a quality assurance plan to ensure model fidelity.
- (c) Quality Assurance Resources: Describe the resources (i.e., human, fiscal, physical plant, technology) your agency dedicates to information management, continuous quality improvement, and data analytics

D. COST PROPOSAL COMPONENT**1. Financial Requirements (5 points)**

Proposers must submit cover letters from their auditor for the last 3 annual audits of their agency and a copy of their most recent financial audit, included as Appendix 9 of the proposal. If the 3 most recent audits are available via the Office of Policy and Management's EARS system, such must be noted in the proposal, and cover letters and the last audit should **not** be included in the proposal.

If less than 3 audits were conducted, detail must be provided as to why, and any supporting documentation assuring the financial efficacy of the applicant agency should be included (i.e. an accountant prepared financial statement, a tax return, a profit and loss statement, etc.).

2. Budget Requirements (10 points)

Using the Consolidated Budget Form identified in the RFP, prepare an annualized program budget for 1 year using the state FY2020. Use the Budget Narrative to clarify and provide backup detail for proposed expenditures, in-kind contributions, and client incentives. The Budget and Budget Narrative should clearly relate to the program outcomes. The average salary range for Supervisors in an MST program is approximately \$60,000, while the average salary range for Therapists in an MST program is \$50,000. While applicants are free to propose the salary structure they believe is appropriate, narratives should justify any significant deviation from these salary ranges.

Startup costs in addition to Year 1 operating costs are not allowable under this procurement. Based on hiring and implementation dates, DCF will allow applicants to propose reasonable (non-capital) start-up expenditures using Year 1 funding provided that the implementation of services is not unduly delayed.

The final prepared budget must include all sources of proposed funding, to include all 3rd Party Revenue, non-DCF funding, private insurance reimbursement, and any other funding the applicant anticipates receiving.

To access the Consolidated Budget Form, please go to:

<https://portal.ct.gov/DCF/Contract-Management/Home>

The Budget and Budget Narrative must be included in the proposal as Appendix 10.

IV. PROPOSAL OUTLINE

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- H. Appendices**
- 1. Appendix #1 Gift & Campaign Contribution Certification**
- 2. Appendix #2 Consulting Affidavit**
- 3. Appendix #3 CHRO Contract Compliance Package, Parts I-III**

The CHRO Package should be accessed from the CT.gov CHRO Internet site
https://www.ct.gov/chro/lib/chro/Notification_to_Bidders.pdf

- 4. Appendix #4 Table of Organization**
- 5. Appendix #5 CT Business License**
- 6. Appendix #6 Proof of Non-Profit Status**
- 7. Appendix #7 Proof of Clinical Licensure**
- 8. Appendix #8 Cultural Diversity Supporting Data.**
- 9. Appendix #9 Financial Profile Documentation (if not available on EARS) .**
- 10. Appendix #10 Budget and Budget Narrative.**

To access the Consolidated Budget Form, please go to:
<https://portal.ct.gov/DCF/Contract-Management/Home>

V. ATTACHMENTS

I. Attachment #1: Letter of Intent

To be completed and submitted to the Official Agency Contact for this procurement by the due date delineated in this RFP.

II. Attachment #2: Proposal Cover Sheet

To be utilized as Page 1 of all proposals (as indicated in Section IV.A of this RFP).

III. Attachment #3: Gift & Campaign Contribution Certification

To be completed and submitted with all proposals (as indicated in Section IV.H (1) of this RFP).

IV. Attachment #4: Consulting Affidavit

To be completed and submitted with all proposals (as indicated in Section IV.H (2) of this RFP).

V. Attachment #5: MST Scope of Services

Attachment #1

LETTER OF INTENT

(MANDATORY NON-BINDING)

Date: _____

Our agency is planning to apply for funding in response to the RFP entitled **Multisystemic Therapy (MST) #20DCF0717001**

Site 1

DCF Region's 1 and 5

Site 2

DCF Region's 2 and 3

Site 3

DCF Region's 4 and 6

AGENCY NAME:
FEIN:
AGENCY ADDRESS: (street, city ,state, zip)
AGENCY CONTACT:
POSITION/TITLE:
TELEPHONE NUMBER:
FAX NUMBER:
EMAIL ADDRESS:

Mandatory Letter of Intent must be received by **3:00 p.m.** on **August 26, 2019** to **Stacie Albert**.

PROPOSAL COVER SHEET

Multisystemic Therapy
Request for Proposals
#20DCF0717001

Site 1
DCF Region's 1 and 5

Site 2
DCF Region's 2 and 3

Site 3
DCF Region's 4 and 6

Multisystemic Therapy
Request for Proposals

Name of Agency: _____

Address _____

Application
Contact Person: _____

Contact Person
Phone & Fax: _____

Contact Person
Email Address: _____

This application must be signed by the applicant's executive director or other individual with executive oversight for agency services delivered in Connecticut

By submitting this application, I attest that all the information included within the application is true.

Signature: _____ Date: _____

Name (Printed): _____ Title: _____



STATE OF CONNECTICUT GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION

Written or electronic certification to accompany a State contract with a value of \$50,000 or more in a calendar or fiscal year, pursuant to C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8, and No. 7C, Para. 10; and C.G.S. §9-612(g)(2)

INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (i) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

CHECK ONE: Initial Certification 12 Month Anniversary Update (Multi-year contracts only.)
 Updated Certification because of change of information contained in the most recently filed certification or twelve-month anniversary update.

GIFT CERTIFICATION:

As used in this certification, the following terms have the meaning set forth below:

- 1) "Contract" means that contract between the State of Connecticut (and/or one or more of its agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State agency below;
- 2) If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;
- 3) "Contractor" means the person, firm or corporation named as the contractor below;
- 4) "Applicable Public Official or State Employee" means any public official or state employee described in C.G.S. §4-252(c)(1)(i) or (ii);
- 5) "Gift" has the same meaning given that term in C.G.S. § 4-250(1);
- 6) "Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(B) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (B) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding **Gifts** by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a **Gift** to

any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

CAMPAIGN CONTRIBUTION CERTIFICATION:

I further certify that, on or after December 31, 2006, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(g)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support, any candidate for statewide public office, in violation of C.G.S. § 9-612(g)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after December 31, 2006 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(g)(1), to, or solicited on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support any candidates for statewide public office or the General Assembly, are listed below:

Lawful Campaign Contributions to Candidates for Statewide Public Office:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>

Lawful Campaign Contributions to Candidates for the General Assembly:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

Printed Contractor Name

Printed Name of Authorized Official

Signature of Authorized Official

Subscribed and acknowledged before me this _____ day of _____, 20__.

Commissioner of the Superior Court (or Notary Public)

Attachment #4

STATE OF CONNECTICUT CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. **If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1):** Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: _____]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, **except for the agreement listed below:**

Consultant's Name and Title

Name of Firm (if applicable)

Start Date

End Date

Cost

Description of Services Provided: _____

Is the consultant a former State employee or former public official? YES NO

If YES: _____
Name of Former State Agency

Termination Date of Employment

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

Printed Name of Bidder or Contractor **Signature of Principal or Key Personnel** **Date**

Printed Name (of above) Awarding State Agency

Attachment #5**Scope of Services**

The Contractor will provide the following specific services for the **Multisystemic Therapy (MST)** program and will comply with the terms and conditions set forth as required by the Department, including but not limited to the requirements and measurements for scope of services, contract performance, quality assurance, reports, terms of payment and budget. No provisions will be contained in this Part I that negate, supersede or contradict any provision of Part II. In the event of any such inconsistency between Part I and Part II, the provisions of Part II will control.

Program Specific Information		
Contractor Legal Name:		Program Name: (if applicable)
Service Type: Intensive Home Based Services: Multisystemic Therapy (MST)		
Towns Served:		DCF Area Offices Served by program: <input type="checkbox"/> Bridgeport <input type="checkbox"/> Middletown <input type="checkbox"/> Norwich <input type="checkbox"/> Danbury <input type="checkbox"/> Milford <input type="checkbox"/> Torrington <input type="checkbox"/> Hartford <input type="checkbox"/> New Britain <input type="checkbox"/> Waterbury <input type="checkbox"/> Manchester <input type="checkbox"/> New Haven <input type="checkbox"/> Willimantic <input type="checkbox"/> Meriden <input type="checkbox"/> Norwalk <input type="checkbox"/> Statewide
Program Contact Information		
Program Contact:		Title:
Phone:	Fax:	Email Address:
Fiscal Contact:		Title:
Phone:	Fax:	Email Address:
Program Site(s) Information		
Address # 1:		Contact Person (Name, Title, Phone, Email)

A portion of this program's funding may be provided through the Federal Temporary Assistance to Needy Families Block Grant; requirements in Part I, Section D. 5. of this contract apply to this program.

A. DESCRIPTION, CONTRACT CAPACITY AND FUNDING**1. Service Description**

Multi-Systemic Therapy (MST) is an evidence-based program that empowers adolescents and families in order to improve functioning over the long term. MST works within the network of systems including: family, peers, school, and neighborhood. All treatment, care, and support services must be provided in a context that is adolescent-centered, family-focused, strength-based, culturally and linguistically appropriate, and responsive to each adolescent's psychosocial, developmental, and treatment care needs.

The Contractor will follow all requirements outlined in the MST manual and MST Practice Guide

2. Contract Capacity

The Contractor will provide a total of ____ slots, serving a total of _____ adolescents and their families annually. Annual capacity is based upon the number of adolescents/families completing a full course of MST, as defined by the model. Adolescents/families who do not complete a full course of the service do not count toward the annual capacity.

3. Third Party Reimbursement

- a. The Contractor is required to enroll as a Medicaid provider with the Department of Social Services and to seek to negotiate a reimbursement rate from third party commercial payers for services offered through this contract.
- b. The Contractor is expected to bill for third party payment for participants covered by any government or private insurance program.

B. SERVICE DELIVERY REQUIREMENTS**1. Target Population**

The target population for this program is adolescents between the ages of 12-18 who meet the following admission criteria:

- present with significant behavioral health needs (mental health and substance use) impacting the family, school/work, community domains; and
- reside in a family setting.

Exclusionary criteria include:

- Currently suicidal, homicidal or psychotic. Adolescents in need of immediate crisis psychiatric hospitalization or stabilization (a history of psychiatric hospitalization does not exclude adolescents);
- Likely to be placed or incarcerated;
- Adolescents living independently or in long term residential treatment settings. (Treatment can begin 30 days prior to discharge from a residential setting back into family home). Must have an identified caregiver;
- Primary behavior is a sexual offense;
- Diagnosis of Autism, PDD, Mild/Moderate/Severe MR (Pervasive Developmental Delay (PDD) (Adolescent may be of below average intelligence but if IQ score is below 70 with adaptive scores limitations in two or more domains, consultant approval is required)

2. Access and Referral Process

Referrals are accepted from any source such as: the parent/caregiver, DCF, hospital, school, probation/court, police, or community provider. DCF referred adolescents and families will be given priority access.

The Contractor will be available to accept referrals Monday-Friday, 52 weeks per year during normal hours of operations and will make allowances for meeting with families during evening hours and weekends. If a

referral has met inclusionary criteria and when a slot is available, contact with the family be made within two (2) business days of referral receipt, that initial screening be conducted within seven (7) calendar days of referral receipt, and that intake and initial treatment session be complete within fourteen (14) days of referral receipt.

3. Length of Service

Length of service will be for an **average of 3-5 months** per adolescent/family. Services may be extended beyond this period in consultation with the MST Consultation and Evaluation provider.

4. Operating Hours

The Contractor will offer MST services congruent with the model, but minimally, from 9.00 am to 8.00 pm, Monday through Friday. Weekend hours must be provided. The program will ensure that flexibility exists with respect to service provision before 9.00 am and after 8.00 pm in order to best meet the needs of the families served. Twenty-four (24) hour coverage for crisis intervention will be available, including holidays and weekends. Service availability for MST will be 52 weeks per year.

5. Evaluation and Assessment Services

All adolescents referred for MST services will receive a comprehensive evaluation, which will result in the formulation of a DSM 5 diagnosis and individualized treatment plan.

A licensed or license-eligible clinical professional will conduct the assessment.

The assessment should provide a clinical integration of medical, psychosocial, educational and treatment histories and be comprehensive enough to address the needs of the adolescents within the context of the family and social community. If necessary, the Contractor will assist the family and/or DCF when referral to a specialized service is indicated.

As part of the initial assessment of adolescents 12 years and older, the Contractor will use the Global Appraisal of Individual Needs - Q3 (GAIN-Q3) for each adolescent at the start of services, submit the data to the web-based system, and use the resulting reports to inform treatment planning. The Contractor will use the GAIN-Q3 at the time of discharge, submit the data to the web-based system, and use the resulting reports to inform discharge planning. The GAIN-Q3 must be conducted by a staff member who is trained in GAIN-Q3 administration following a DCF-approved process.

Within 30 days of the occurrence of the initial intake interview, a strength-based Individualized Service Plan (ISP) will be completed. The ISP will be developed in partnership with the family and, as appropriate, the adolescents. The treatment plan will include the behavioral goals and set forth the interventions, services and supports that will address the issues and problems threatening the maintenance of the adolescents in the home and/or community, or facilitate the transition of the adolescents from residential, and/or will aid in improving the functioning of the adolescents and family. This plan will be reviewed and revised as necessary to ensure the provision of services in support of affecting positive outcomes for the adolescents and their family.

6. Staffing Model

The MST team will consist of the following staffing:

Staff Position	Full Time Equivalent (FTE)
Therapist	
Clinical Supervisor	

The supervisor will be licensed with at least a master's degree in a behavioral health field and no less than three (3) years experience in delivery of clinical services. Each supervisor will supervise three (3) therapists, in accordance with the MST model. Therapists will be licensed with at least a Master's degree in a behavioral health field. Exceptions to the education or licensure requirements need prior approval from DCF and the MST Consultation and Evaluation provider. Each therapist will maintain a caseload of five (5) families.

7. Treatment Approach

The contract will provide IHB services through the Multi-Systemic Therapy (MST) evidence-based treatment model. MST is a family and community based treatment for adolescents with complex clinical, social and educational problems. MST is delivered in homes, neighborhoods, schools and communities. A crucial aspect of MST is its emphasis on promoting behavioral change in the natural environment. Interventions with families seek to promote the parent's capacity to monitor and intervene positively with each adolescents. In addition, MST staff will interact with the adolescent's primary care doctor in order to facilitate sharing of the adolescent's behavioral health status.

The clinical supervisor and/or staff will have frequent, often daily, contact with the families, providing counseling to families to improve functioning. The adolescents and their families will have 24 hour a day, 7 day a week access to an MST therapist.

MST staff will also interact with the adolescent's educators to monitor the adolescent's academic performance and decrease anti-social behaviors leading to disciplinary action. Therapists will also monitor and provide follow-up regarding the child and/or youth's behavior in school and in the community.

MST staff will provide the necessary documentation for, and participate in the weekly phone consultation with the Contractor's MST Consultation and Evaluation system supervisor to improve the effectiveness of service delivery and interventions.

Clinical supervision will be provided weekly and as needed by the Contractor's MST Clinical supervisor. All service provision and case management activities will be fully documented.

8. Treatment Services

The Contractor will follow all of the prescribed interventions and client goals, as outlined in the MST manual, and will provide a combination of interventions and treatment options designed to meet the individual needs of adolescents and their families, consonant with the goal of maintaining the adolescent safely in the home and community. The provided services will include but are not limited to:

- a. **Clinical Services** including screening and assessments, individual and family treatment, consultation, linkage to parental substance use screening or other services, family sessions and age appropriate therapy.
- b. **Access to Psychiatric Consultation:** adolescents receiving MST services should be referred and have timely access to a Child and Adolescent psychiatrist, or an APRN working under the direction of a Child and Adolescent Psychiatrist, to provide consultation, assessment and evaluation when indicated.
- c. **Empowerment and Family Support Services** including: parental guidance; empowerment and support; inclusion in transition/discharge planning; linkage to other community services and supports; parent education; and instructional modeling.
- d. **Medication Management** including: consultation and assessment from a psychiatrist or an APRN under the direction of a psychiatrist

9. Supervision

The Contractor will ensure that each direct service staff person receives no less than 1 hour of weekly individual and/or group supervision, with additional access to supervision provided as needed. Supervision frequency and modality must agree with that dictated by the MST model.

10. Emergency and Crisis Intervention Services

The Contractor will provide 24-hour emergency and crisis intervention services to adolescents and their families by phone or pager. Local emergency mobile psychiatric services should not be used as common practice by this Contractor.

11. Service Linkage, Transition and Closure

The Contractor will operationalize a service model that is specifically designed to be available to the family and adolescent in varying levels of intensity. Critical to the continued success of this model will be the appropriate matching to and arrangement for step-down and aftercare including both traditional services and non-traditional supports. Adolescents are to be discharged or stepped down from MST services program when treatment goals and objectives have been met and the adolescent no longer requires the intensive level of individual, group and family intervention initially identified.

The Contractor will develop and set in motion a step-down or aftercare plan that is understood and supported by the family. The Contractor will ensure that appropriate linkage with alternative and/or transition services are in place prior to any discharge from MST. Adolescents and parents, as well as DCF when applicable, will be full partners in all discharge planning.

12. Safeguarding Client Information and Client Records

The Contractor will safeguard the use and disclosure of information concerning all clients who receive service through this contract in accordance with all applicable Federal and State laws concerning confidentiality. The Contractor will seek the guidance of DCF prior to any disclosure of personally identifiable information.

C. DATA AND OUTCOME REPORTING REQUIREMENTS**1. Reporting Requirements**

- a. The Contractor will adhere to recommendations made by the MST Consultation and Evaluation provider at the bi-annual Program Implementation Review (PIR).
- b. The Contractor will submit individual, client level data to the Department's **Provider Information Exchange (PIE)**, or other system as required by the Department such as MSTI and GAIN. The Contractor will ensure that the data submitted under PIE, or other system, is in conformance with the applicable data specifications and picklists. Furthermore, the data must use the conventions and logic as determined by the Department to ensure accurate, unduplicated client counts. This data will, as set forth by DCF, be sent to the Department and/or the Department's designated vendor(s) at an interval specified by DCF.
- c. The Contractor will participate in Therapist Adherence Measures (TAMS) and Supervisor Adherence Measures (SAMS) for data collection.

2. Performance Measures

The Contractor will work to achieve the following performance measures:

- a. A minimum of 45 adolescents/families will be served by the program annually
- b. 85% of adolescents/families will complete the program annually
- c. 95% of adolescents/families served will achieve an average length of service of –4 months
- d. 100% of MST teams will achieve an overall average adherence score of at least 0.61
- e. 85% of adolescents will be abstinent or show a reduction in use of substances

- f. 80% of adolescents will living at home at time of discharge
- g. 85% of adolescents will show improvement in school attendance at time of discharge
- h. 72% of adolescents will have no new arrests during treatment (not including parole violations)
- i. 80% of parent/caregivers will be provided with parenting skills

3. Special Conditions

The Contractor will:

- a. notify DCF of all vacancies and replacement hires;
- b. complete a work plan consistent with DCF expectations for all program components and make any changes as needed with DCF approval;
- c. participate in budget review meetings if program census and staffing falls below DCF expectations;
- d. seek DCF approval for all forms that will be used for the MST program.