**Overall Process and Submission Tool**

**Question:** Where exactly do we look on Biznet for amendments to the RFP and please clarify the Biznet process with a link?

***Answer:*** *This is the link to the RFP.* [*https://biznet.ct.gov/SCP\_Search/BidDetail.aspx?CID=51422*](https://biznet.ct.gov/SCP_Search/BidDetail.aspx?CID=51422)

*These questions are being emailed to everyone who submitted a timely and conforming mandatory notice of intent email.*

\_\_

**Question:** Will the recording of this WebEx be available before the questions are due?

**Question:** Will these slides be sent to the people who logged onto the presentation?

***Answer:*** *The link to the recording and the slides were emailed on Tuesday 10/22/2019 at 11:41 AM to everyone who submitted a timely and conforming mandatory notice of intent email.*

Here is a link to a recording of the slides presented online on October 21, 2019.

<https://www.screencast.com/t/y0pVtcy5Z9Fa>

\_\_

**Question:** Should all forms of correspondence in the RFP be addressed to Chris Beott?

***Answer:*** *Yes*

\_\_

**Question:** What is the best browser to use?

***Answer:*** *[For the Online Submission tool?] It has been tested using IE and Chrome. For more information you can Google Qualtrics Support.*

\_\_

**Question:** Can we include additional attachments that aren't named in the RFP?

***Answer:*** *No*

\_\_

**Question:** Is an applicant required to submit a budget with its proposal?

***Answer:*** *No*

\_\_

**Question:** Are hyperlinks allowed and are they counted in the page count?

***Answer:*** *No. Do not include hyperlinks in narrative items with character limits. There are no page counts in this RFP.*

\_\_

**Question:** Can scanned materials be two sided?

***Answer:****Electronic files do not have “sides”. You are welcome to submit scans of doublesided materials.*

\_\_

**Question:** Should programs focus on the questions on page 5 under Comprehensive EIS programs or those listed in the online submission tool? For example of page 5 under EIS program it describes leadership as "described program director competencies, quality assurance system, planning for staff development and supervision" however, the online tool list "describe the leadership practices demonstrated by the person or persons who will be in the primary contact role as the EIS program director or supervisor"? Competencies and practices can be interrupted as different qualities.

***Answer:*** *Use the wording of the items in the MS Word template and the Online Tool as written, a description of “practices demonstrated”.*

\_\_

**Question:** If we upload a document and then see an error, how do we delete an uploaded document and upload a revised document?

***Answer:*** *If you upload a second document in the same section, it will overwrite the first uploaded document.*

\_\_

**Question:** Can you release the names of entities that have provided notification of intent to respond. May be relative regarding numbers presented for enrollment per town?

**Question:** Could we please see a list of all providers that submitted a “notice of intent” email?

***Answer:*** *Not until the procurement process is complete (Spring 2020).*

\_\_

**Question:** Who will comprise the evaluation teams for the proposals?

***Answer:*** *From**Page 5 of Section 1, “Eight people will participate on the review team. This includes a parent of a child who previously participated in the CT Birth to Three System; two OEC staff with expertise in information technology, three OEC staff with expertise in the evidence-based practices being implemented in Connecticut as well as all aspects of Part C of the IDEA, and two OEC staff with expertise in fiscal processes and data.”*

\_\_

**Question:** Will each member of the review team be reviewing the entire proposal or only areas related to their expertise?

***Answer:*** *Continuing on page 5* “*The items in the proposals will be divided amongst the eight members of the team based on their areas of expertise and experience.” They will not review the entire proposal but they also will not be limited to only areas related to their expertise since the lead agency staff work on projects as a cross-division team.*

\_\_

**Question:** Would you be able to share the scoring, possible points, and weighting of those points in regards to these proposal questions/ sections?

***Answer:*** *The possible points for each section are on page 5 and 6 of the B23 RFP Section 1 – General Information file.*

\_\_

**Question:** Is there any advantage given to current providers in terms of scoring or evaluation?

***Answer:*** *No*

\_\_

**Question:** Does the primary program contact need to be the same person as the program supervisor? Both terms are used within the RFP documents, but I am unclear if they must be the same or if those can be listed separately.

**Question:** Are the primary contact(s) and primary supervisor(s) to be used interchangeably?

***Answer:*** *This will vary by agency. The primary contact may be the person* *with direct supervision of the program and staff, the person (or persons) who will be the Birth to Three program director or lead supervisor or none of the above.*

\_\_

**Question:** Will the RFP score the response based on a single supervisor/contact or can it take into consideration more than one?

***Answer:*** *Item 2.18 refers to “person or persons”.*

\_\_

**Question:** Can you give an example of who can be a fiscal agent/

**Question:** Who are you referring to when asking for the program fiscal agent? Is the Fiscal agent the name of the larger agency supporting the Birth to Three program?

Is the agency contact the name of the CEO of the agency, or the Finance Director?

***Answer:*** *The Fiscal agent may be the name of a larger agency supporting the Birth to Three program however in many cases the EIS Program primary contact person will be the same as the Fiscal Agent. Each proposer can determine who they want listed where. This is not scored.*

\_\_

**Question:** Can an applicant’s Program Name be adjusted from the original listed in the email notice of intent to apply?

**Question:** Can the files (pdf, xls, video) reference the program name as entered in the response to RFP 2.9 rather than the notice of intent (if slightly different)?

***Answer:*** *Yes – it can be changed at any time but for the OEC to assure that the NOI was for the same program the Fiscal Agent should align with was sent in the NOI.*

\_\_

**Question:** If selected for contract, may an applicant decline the offer for any reason?

***Answer:*** *Yes*

\_\_

**Question:** If an applicant is awarded a contract, is the program solely responsible for identifying and securing all members of a child’s multidisciplinary team (e.g., SLP, PT, OT, etc)?

***Answer:*** *Yes*

\_\_

**Question:** RFP section 2.12- how should we calculate FTEs?

***Answer:*** *According to the IRS, part-timers are those who work less than 130 hours a month, or 30 hours a week. Each program should divide the**number of hours each person works by the number of hours in a fulltime workweek (usually 35-40.) This item on the MS word Templates and in the Online Submission Tools has been updated to include “*In the FTE header include the number that was used in the denominator for a full-time work week.*”*

\_\_

**Question:** Is there a requirement to have a nurse on staff/available?

***Answer:*** *Not on staff, but nurses are qualified providers and there may be an IFSP that needs a nurse so the answer to “available” would be maybe.*

\_\_

**Question:** RFP section 2.12- If we are currently providing services as an autism specialty only program but plan to expand to include comprehensive services, should we list personnel we anticipate to hire for the comprehensive program portion?

**Question:** EIS-2.12: If the applicant currently specializes in applied behavior analytic service delivery and does not currently subcontract with providers outside of that scope of practice (e.g., OT, SLP, PT), is it required to have secured subcontracted personnel who would serve on the Intervention Team prior to submitting a proposal? That is, must the personnel list include confirmed subcontracted professionals to complete a child’s multidisciplinary team in order for the proposal to be considered?

***Answer:*** *The staff list should only include the names and other details of staff who “will be working as part of the Birth to Three Program including interventionists and support staff”.*

\_\_

**Question:** What is considered acceptable personnel-to-family ratio by the OEC?

***Answer:*** *This is up to each program to determine.*

***\_\_***

**Question:** Does Question 2.20 have a character limit?

***Answer:*** *No, only narrative items have limits, 2.20 is an upload.*

\_\_

**Question:** Will the process for rotation of referrals between programs remain the same?

**Question:** If a program chooses to only apply to work with children with autism how can they be assured that they will have equal access to serve children who will likely qualify for autism?

***Answer:*** *It is not anticipated that rotation system and the current processes for connecting families with specialty programs will change.*

\_\_

**Question:** Evaluation process- How will applicants with an autism designation only be awarded towns?

**Question:** In EIS 2.36 and 2.37 it states that there is an opportunity to be considered for a Specialty Designation –Autism (SDA) serving all children or just kids with autism. This creates three classes of Comprehensive EIS programs (CEIS) which include: a) CEIS only; b) CEIS with an SDA serving all children; c) CEIS with an SDA serving only children with autism. B23 has stated that all programs will be rank ordered according to their score on the RFP and then given a choice of towns. Please describe in detail how the interactions of rank ordering and these three designations will affect the awarding of towns.

**Question:** Will there be a certain amount of EIS *also* ASD programs as well as a certain amount of EIS *only* ASD program, or does EIS also ASD satisfy the need for ASD providers in each town?

***Answer:*** *The process for awarding towns will be the same for all Comprehensive EIS Programs. The highest ranked proposals will likely have their choice of towns and the lowest ranked may not be awarded any towns, and therefore no contract, if there is no need for an additional program in the towns the proposer has requested. Based on the capacity requested in each town by each proposer, the OEC will assign towns to assure there are enough programs to support the anticipated number of families in each town with at least two EIS programs in each town. Then as needed more programs will be added to assure that there are two programs with a specialty designation (two for ASD and two for DHH if available). If the highest ranked proposal included a designation form indicating that they also support families with children with an autism spectrum disorder or who are DHH, that one program would count as one of the EIS programs and one of the programs with a specialty designation. If the highest ranked proposal included a designation form indicating that they wanted to only support families with children with an autism spectrum disorder or who are DHH, that program would only count as one of the two programs with a specialty designation for the towns they want to cover.*

\_\_

**Question:** How are unpaid balances reviewed on a monthly basis?

**Question:** How does an applicant report any unpaid balances by non-workable insurance claims and/or additional early intervention services?

***Answer:*** *PCG’s EI Billing System calculates this. For more detail, please review the Insurance and Payment procedures on Birth23.org*

\_\_

**Question:** What is the reason for the significant drop in rates after 1.5 hours of service provided?

***Answer:*** *Those are the rates that were set by the OEC and DSS to balance the system and stay within the appropriation at the time.*

\_\_

**Question:** It has been noted that the recent change to a fee-for-service system has had significant impact on the B23 system. Are the fee-for-service rates fixed or based on specific applicant criteria? Do the rates change over time? If so, how often does a change in rate occur?

***Answer:*** *The state rates are set by DSS for Medicaid. The system has only been operating as fee for service since November 1, 2017 and the rates have not changed since then.*

\_\_

**Question:** Is general administrative payment only for those clients that are serviced less than 9 hours per month?

**Question:** What services are paid under GAP that are not billable but are needed for high quality early intervention?

***Answer:*** *Please refer to the Payment Procedure. GAP can be used for a variety of supports.*

==

**Minimum Qualification and Organizational History / Website**

**Question:** […] I wanted clarification regarding the minimum qualification of proposers. My team and I have been providing services to children under 3 who are also receiving services from Birth To Three but because we are not Birth To Three providers at this point, would this experience not qualify for your minimum qualifications: “the person with direct supervision of the program must have at least three years of experience administering a program for children and families under Part C of the IDEA.?”

***Answer:*** *To qualify for a contract award as a Comprehensive EIS Program, a proposer must document the following minimum qualifications:*

*• the person with direct supervision of the program and staff must have at least three years of experience administering a program for children and families under Part C of the IDEA,*

***or***

*• the organization has a history of providing supports to families with children with developmental delays for at least five years.*

\_\_

**Question:** Is a Director’s resume sufficient documentation for the “Minimum Qualifications” required?

***Answer:*** *Yes as long as the “Director” is* *the person with direct supervision of the program and staff.*

\_\_

**Question:** Will the system allow us to add more than one link that describes our agency and program history?

***Answer:*** *No*

\_\_

**Question:** Is there an alternate way to provide history other than providing a link to a website?

***Answer:*** *No*

\_\_

**Question:** EIS-2.39 Is it a requirement that a contractor have a website?

***Answer:*** *No*

\_\_

**Question:** In EIS 2.39 - can this description be a narrative separate from and downloaded along with the website?

***Answer:*** *Item EIS 2.39 asks for “a link to the About Us or equivalent section of your agency website that describes your agency's history”. If it is in a file on your website that is acceptable.*

==

**Assurances / OPM Forms**

**Question:** OPM ethics form 5:

What is supposed to be written in start and end date ?July 1, 2020-June 30, 2025

**Question:** Also, what goes on the cost line?

**Question:** EIS-2.4 Form 5 What is the contractor to enter as start date and end date and cost?

***Answer:*** *After talking with OPM it was determined that, because this is a no-bid RFP, Forms 5 and 6 are not required and have been noted as <<Removed>> from the Online Submission tools and struck through in the MS Word templates.*

\_\_

**Question:** OPM Iran Certification Form: Is this an initial certification or a renewal....?

**Question:** Do you want new Assurance forms currently dated or should we upload the Assurances dated 7/1/2019 that we upload annually to Biznet?

***Answer:*** *If a program currently has a contract with the state, a renewal is fine as is the version previously uploaded into Biznet. The following was added to the Online Tool and MS Word templates:* If you currently have a contract with the state of Connecticut you may upload a copy of a current renewal form.

\_\_\_

**Question:** EIS-2.7, does an applicant’s participation as a DDS Autism Waiver Provider qualify as participation in a state/federal program?

***Answer:*** *Yes*

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**Family Centered**

**Question:** RFP section 2.16- We are currently an autism specialty only provider. If we are submitting a proposal for an EIS program that supports all families including children with ASD, it is acceptable to submit current family handouts although they are currently focused on children with ASD only? Or should we submit modified handouts to be more in line with what we will give families when we become a comprehensive program with a designation?

***Answer:*** *This is up to each proposer.*

\_\_

**Question:** EIS-2.16 Does handouts refer to the contractor's brochures which includes descriptors of mission, personnel available to support families, and descriptors of services available?

***Answer:*** *This is up to each proposer.*

\_\_

**Question:** In EIS-2.16 section, Can we use forms from other sources along with our own created forms?

***Answer:*** *The RFP reads as, “Upload examples of any handouts created by your agency”*

==

**Evidence-Based / Video**

**Question:** The RFP calls for a video submission of a session. If a proposing agency is not a current provider, should they submit a video-taped mock session?

***Answer:*** *The submission tool and MS Word template read as “It does not have to be an actual visit but the video should represent what a typical early intervention visit looks like for the proposed program.”*

\_\_

**Question:** For the video, if we want to include video of RBT/ABA/OT and PT, should we have one continuous video for each discipline up to 5 minutes, or try to slice up the video for a total of 5 minutes for all capacities?

***Answer:*** *The review team will only watch one video per proposal submission.*

\_\_

**Question:** EIS-2.23 asks providers to upload a 3-5 minute video of an early intervention visit. Does the video need to include all elements of the coaching model?

**Question:** Can the video of an early intervention visit be samples of different parts of sessions, locations or families or is it a requirement to be one continuous 3-5 minute session?

***Answer:***  *Each proposer may determine what they want to include in their video.*

==

**Transition**

**Question:** How many additional points will school systems receive on their applications?

***Answer:*** *As listed in B23 RFP Section 1 – General Information on pages 5 and 6 there are 20 possible points in the Transition Section*

\_\_

**Question:** How many examples (in 1 PDF) of past or current collaborations with the State or LEAs should we provide?

**Question:** [….] for question 2.28, are you asking for evidence from each LEA that collaborate with, or evidence from a sampling of LEAs with whom we collaborate?

**Question:** Are you asking for evidence of past or current collaboration with one or all of the LEAs where we would like to support families in Connecticut's Birth to Three system?

***Answer:*** *This is up to each proposer to determine.*

\_\_

**Question:** The online application asks an applicant to submit evidence of past or current collaboration with LEAs where we would like to support families with B23. Does that evidence of collaboration have to be for a B23 program? Or can it be for another program on which an applicant might collaborate with an LEA (e.g., for a collaboration on School-Based Health Centers [SBHCs])?

***Answer:*** *This is up to each proposer to determine.*

\_\_

**Question:** RFP section 2.28- what type of examples are required and can you provide clarification on collaboration with LEA?

**Question:** What documentation is acceptable to show collaboration with LEAs

***Answer:*** *For this RFP please us the definition of Collaboration as “the action of working with someone to produce or create something”*

\_\_

**Question:** EIS-2.28 asks providers to upload evidence that demonstrates past or current collaboration with the LEAs where we would like to support families. Is OEC looking for MOUs or Letters of Agreement, or something else?

**Question:** Are you asking for a letter regarding our collaboration from the LEA Early Intervention/team member and/or a description of how we (the Birth to Three agency) specifically work with the LEA or both?

***Answer:*** *This is up to each proposer to determine.*

\_\_

**Question:** In EIS 2.28- can this reference be to a particular case-past or present, using their IFSP and Transition Plans and keeping the names off the forms?

***Answer:*** *This is up to each proposer to determine.*

\_\_

**Question:** EIS 2.29 asks for activities/practices that help prepare families and their children for transitioning from Birth to Three to Early Childhood Special Education. The term LEA is used in other places in the RFP. For this question is "Early Childhood Special Education" intentionally used to represent transitions to places other than LEAs? Children transfer out at all ages to a variety of services. Are you looking for strategies only related to transfers to the LEA, or all children transferring our to B23?

***Answer:*** *The RFP reads as “Describe activities/practices that help prepare families and their children for transitioning from Birth to Three to Early Childhood Special Education”.*

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**IT / Fiscal / Towns**

**Question:** Is there a plan for any start-up funding support?

***Answer:*** *No.*

\_\_

**Question:** For item EIS – 2.31 - Can you give us an example of comparable statements to an audited financial statement? Would you accept a Complied financial statement on the cash basis?

**Question:** What are acceptable replacements for audited financial statements? (e.g., P/L, Balance Sheet, etc.)

***Answer:*** *As long as it contains an income statement, balance sheet and cash flow statement for 2 years with footnotes and is prepared by an outside accounting firm.*

\_\_

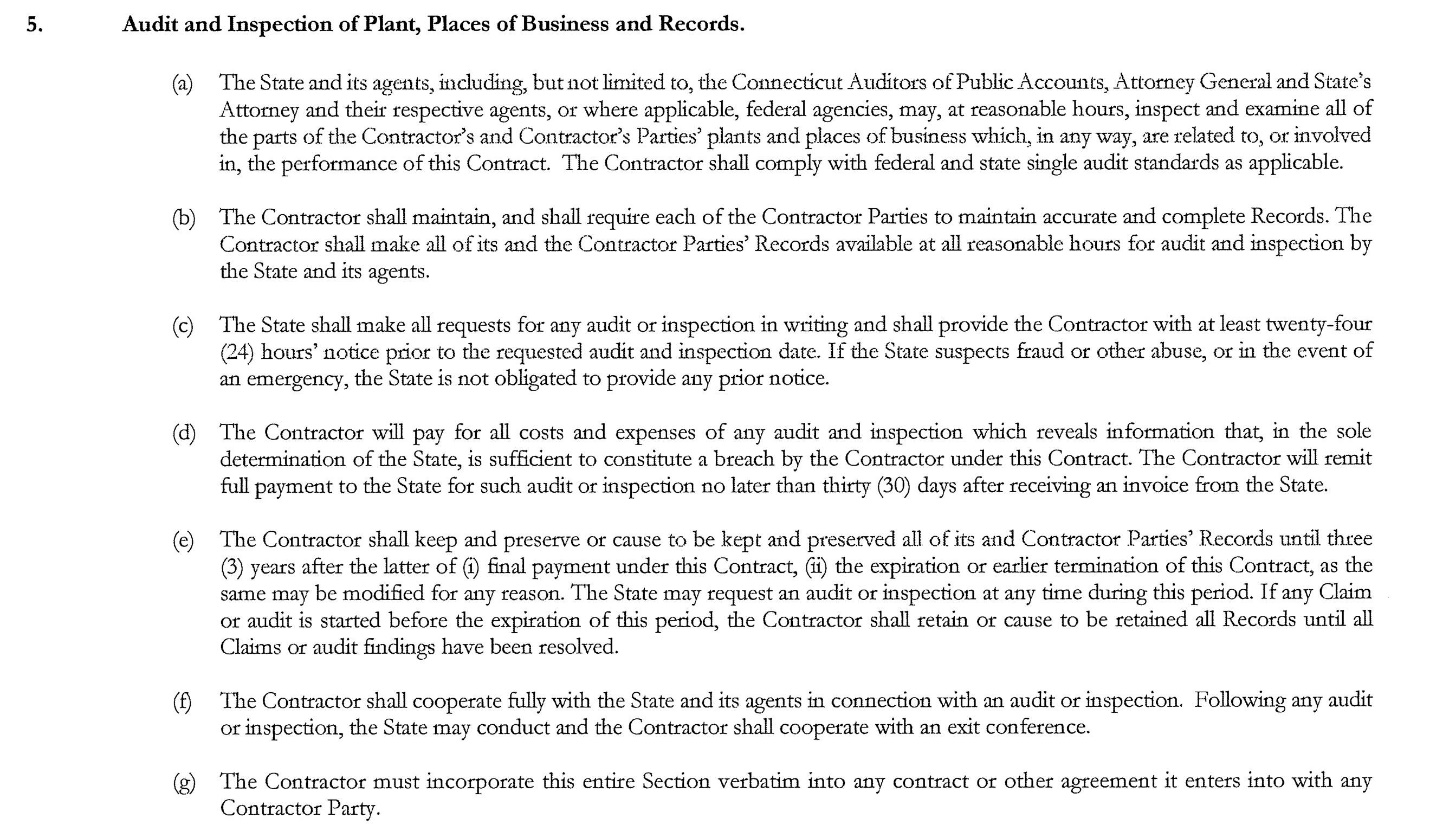
**Question:** Will this program be subject to a federal single audit?

***Answer:*** *As applicable – see next question.*

\_\_

**Question:** Since our agency does not have audited financial statements would a profit/loss from our internal Quickbooks software suffice?

***Answer:*** *Internal profit and loss would not suffice. Per Part II (Standard Boilerplate language for all state contracts): See last sentence in (a). Below this is from OPM’s Compliance Supplement/2019*



\_\_

**Question:** The online application asks an applicant to submit audits for the past two years. Are those organizational audits? Or B23 programmatic audits?

***Answer:*** *Organizational audits*

\_\_

**Question:** EIS-2.32: Does the term “data” in this section apply exclusively to fiscal data? Or does it apply to a child's program data as well?

**Question:** In question EIS-2.32 it mentions collecting and entering accurate and timely data. This is listed under Fiscal and IT. Is the RFP referring to fiscal and IT data? Please provide a more detailed explanation of the specific data being referenced.

**Question:** Is this request for how our program collects and enters accurate and timely data for billing/insurance only or for both billing/insurance and all Birth to Three forms (IFSP, LEA, COSF, FCPF etc)?

***Answer:*** *This is for each proposer to explain.*

\_\_

**Question:** In EIS 2.32, please clarify " timelydata .

***Answer:*** *This is a data driven system. All data must be entered in the Birth to Three data system in a timely manner so that the OEC can use timely and accurate data to make decisions, forecast, and inform others about Part C in Connecticut.*

***\_\_***

**Question:** What training, if any, is provided for the use of the SPIDER data system, and other required systems for billing? (e.g., COB process)

***Answer:*** *Online tutorials, group face to face, and 1:1 voice/video technical assistance.*

\_\_

**Question**: If a provider has a proven track record of billing, can we opt out of using PCG?

***Answer:*** *No*

\_\_

**Question:** If a child has a primary commercial insurance plan that the applicant does not currently accept, is the applicant required to go in-network with that plan?

***Answer:*** *Not currently but the OEC and PCG will be working with mandated carriers to consider all Birth to Three claims as “in–network”. Regardless, if being in “in–network” helps to maximize third party revenue at some point in the future this may be required.*

\_\_

**Question:** Is the applicant required to be in-network with state-funded insurance?

***Answer:*** *The only way to**bill Husky in Connecticut for EPSDT EIS is through PCG.*

\_\_

**Question:** During the bidders’ conference call Alice, mentioned providers being able to upload an 835 file directly to PCG. Does this mean that programs can bill EI services directly to commercial insurance, and then simply inform PCG of the claims outcomes (via 835 file upload) so they can manage escrow payments?

***Answer:*** *This is a very new feature in the EI Billing software and has not yet been incorporated into Birth to Three procedures or contracts. Regardless of that eventual process, service delivery data is still required in the Birth to Three data system.*

\_\_

**Question:** you mentioned that you felt there was adequacy in towns today - are you looking for addiotnal providers nonetheless?

***Answer:*** *The OEC is looking for the highest quality programs to support as many families in the state as need Part C supports.**Currently families in the northeast and northwest corners of the states may not have a choice of programs. The procurement process is not only about the number of programs available in each town. It is completed periodically to allow other entities to compete for state contracts and to allow existing contractors the opportunity to expand or change catchment areas based on an updated ranking.*

\_\_

**Question:** Will applications receive more points for covering specific town as described in the RFP? For example, Salisbury, Canaan etc.

***Answer:*** *Yes*

\_\_

**Question:** Please confirm that in the town listing for RFP Question EIS-2.34, Cromwell should be Cornwall?

**Question:** Please clarify if there is a typo on the question about supporting the town of Cromwell. Should it be the town of Cornwall?

***Answer:***  *Yes – thank you the submission tools and templates have been corrected to include Cornwall (not ~~Cromwell)~~*

\_\_

**Question:** On the Town List file, should the number of families to be served be the number the program is able to serve at one time or the total number to be served annually?

***Answer:*** *The**submission tool and template have been updated as follows, “… enter the number of families (assuming 1 child per family) you would like to support on any given day in each town.”*

\_\_

**Question: 5.** When submitting the town list, are we entering the number of families we plan to serve in terms of total referrals, total evaluations, or total IFSPs?

***Answer:*** *That is up to the proposer. Enter the number of families (assuming 1 child per family) you would like to support on any given day in each town.*

\_\_

**Question:** Please clarify the type of support for families for this question [2.33] – currently we provide support to those we complete evaluations on, those we complete PPT’s on and those we provide services to on a regular basis.

***Answer:*** *That is up to the proposer. Enter the number of families (assuming 1 child per family) you would like to support on any given day in each town.*

\_\_

**Question:** RFP 2.33- For autism specialty can we look at hours/month of support to families in specific towns versus number of families since intensity of services is variable?

***Answer:*** *No, enter the number of families (assuming 1 child per family) you would like to support on any given day in each town*

==

**Designations**

**Question:** Are you looking for programs to be both General and Autism Specific program?

***Answer:*** *All EIS programs must provide comprehensive and coordinated supports to the families enrolled in Birth to Three. This is why all programs will be Comprehensive EIS Programs regardless of whether they have a specialty designation.*

\_\_

**Question:** Can programs designate more than one category of Specialty Designation- Autism? An example would be first preference is CEIS with SDA serving all children and second choice is SDA serving only children with autism?

***Answer:*** *Not for assigning towns for this RFP. As the new data system is built, all programs will have input as to how it can help them manage referrals based on area of concern.*

\_\_

**Question:** RFP section 2.36 - if we apply as an autism specialty provider only, could we add comprehensive services later?

**Question:** If a program submits an IFSP indicating they are applying for EIS Comprehensive Program, *only* Autism Spectrum and is granted the contract is that program able to switch and become a EIS Comprehensive Program *also* Autism Specialty ?

***Answer:*** *If a program selects a designation of “only autism” and later wants to change their designation to “also autism” that would only be allowed if there is insufficient capacity available from the other Comprehensive EIS Programs in the towns the “only autism” program serves.*

\_\_

**Question:** Not until Section 2.36 of the Offline Template do we indicate which of the Specialty Designations we are including; with 7 options illustrated in the Webinar, is this the only place online we will include the specialty designation?

***Answer:*** *Yes*

\_\_

**Question:** Given the coaching-based model focused on parents and caregivers, in what ways does the B23 program allow for intensive one-to-one treatment when warranted, especially for children diagnosed with Autism Spectrum Disorder?

***Answer:*** *Please refer to Service Guideline One: Autism Spectrum Disorder*

\_\_

**Question:** Given the empirical support for Comprehensive Behavioral Treatment for Young Children (specifically ABA) for 25-40 hours per week, how does CT’s B23 program include funding for these services? Additionally, how does this intensive one-to-one model fit within the current B23 framework?

***Answer:*** *Please refer to the Payment Procedure and Service Guideline One: Autism Spectrum Disorder*

\_\_

**Question:** What was the average number of behavior analytic service hours per week/month for a child diagnosed with ASD through the B23 program in the last fiscal year?

***Answer:*** *This varies greatly by IFSP. Annual data is available on Birth23.org.*

\_\_

**Question:** Given the emphasis on family-based, natural environment coaching, are there circumstances under which center-based family services would be deemed appropriate? (e.g., structured playgroups for similar aged children, etc)

***Answer:*** *Please refer to Service Guideline 2: Natural Environments – which may need updating to better align with Natural Learning Environment practices*

DHH Support Provider Questions

**Question:** What is acceptable documentation to show that we are fulfilling DHH-1.2 - 550 post-graduate contact hours with children under 4

**Question:** What is acceptable documentation to show that we are fulfilling DHH 2.1 - documentation of contact hours of children under age 5 over the past 5 years?

***Answer:*** *Item**DHH-2.1 should have had the same wording as DHH-1.2 and did not. Both the MS Word Temple and the Online Submission Tool have been updated to reflect “…550 direct post-graduate contact hours within a two-year period during the past five years with children under age four. [NOT contact hours with children under age 5 over the past 5 years.]”. A Curriculum Vitae or Resume is requested in DHH-2.1 as documentation.*

\_\_

**Question:** What is acceptable documentation to show DHH 2.3 - evidence of collaboration of past or current collaboration between LEAs?

***Answer:*** *There is no requirement for DHH-2.3. The LEA collaboration PDF is DHH-2.30 and the question and answers above relating to EIS-2.28 are the same for DHH-2.30.*

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**End of Questions 10/29/19**