

**RESPONSES TO QUESTIONS REGARDING – Part I
RESIDENTIAL CHILD CARE
REQUEST FOR PROPOSALS
SSA/RCC 11-001-S**

December 4, 2009

1. **Question:** [3.4 A. 1.] States “All Offerors responding to this RFP must possess a current, valid RCC license for the requisite program. . .” If an Offeror is submitting a proposal for a High Intensity Group Home, which license(s) is/are considered valid (since there is no such licensed category)?

Response: An Offeror must have a current, valid RCC license or have evidence of an application currently in process with DHR or DHMH, and have a license to operate by time of contract award for the requisite program. The Offeror will hold a license for a Group Home/RCC with DHR or Therapeutic Group Home with **MHA in order** to submit a proposal for High Intensity Group Home.

2. **Question:** [3.4.1 C] Which program category’s Level Of Intensity standards do the minimum LOIs listed in the RFP for High Intensity Group Homes refer to (since there is no High Intensity Group Home category in the LOI Manual)? Are we to assume these are from the Therapeutic Group Home LOI standards, since these are the standards that were developed to serve youth with the highest intensity mental health needs?

Response: The minimum LOIs listed were selected by the Department and are applicable to all Offerors submitting proposals for the High Intensity Group Home category. The LOIs stated are minimums, however, an Offeror may propose higher LOIs depending upon which is relevant to their license and proposal submission.

3. **Question:** Who will evaluate that an Offeror’s submitted LOIs accurately reflects their services? Since these have historically been evaluated by a program’s licensing agency, and presumably more than one licensed type of program may submit a proposal for H.I. group homes, will one licensing agency be in the position of evaluating the LOIs of a category licensed by another agency?

Response: All Offerors’ Proposals received by the closing deadline will be evaluated by evaluation committees established by the Department. The committees may request additional technical assistance from the licensing agency as necessary to review the LOI as submitted.

4. **Question:** Is a High Intensity Group Home only permitted to admit youth who have similar needs as those listed under this category, or may youth who do not need such intensive services be mixed with these youth?

Response: No. Providers will accept children as they have identified in their response to this RFP and in accordance with the requirements of the RFP.

5. **Question:** [4.3 D] When the RFP says that personnel who leave the employment of a Contractor must be replaced with personnel of equal ability, qualifications, and experience, can we assume this means persons who meet the qualifications of the same job description included in the proposal, not individuals with all of the same abilities and experience as the particular employee (since no two individuals have equal abilities and experience, and hiring can only practically be based on job description qualifications)?

Response: Yes.

6. **Question:** [3.4 B 14] What is meant by the “diagnostic plan”? Is this the same as the “case plan”?

Response: The RFP will be amended to reflect the appropriate plan to be developed by the provider. The amendment will change the language to “Individual Service Plan (ISP) / Individual Treatment Plan (ISP)”.

7. **Question:** [3.4 B 18] This section states that reviews of the service plan take place every six months. However, COMAR 14031.06.17 C (3) (sic) requires the individual service plan be reviewed at least every 90 days.

Response: The RFP will be amended to state that the requirement is 90 days.

8. **Question:** [3.4 B 22] States that CPS background clearances be performed in the jurisdiction where the employee resides. Historically, these clearances have been performed in the jurisdiction where the RCC facility is located. Is it the Department’s intent to change this practice? This section also states that criminal background checks be updated every two years from the date of employment. Is the intent that this requirement apply only to new employees, or also that current employees who have not been checked in two years be updated at the beginning of the contract? Is DHR aware that CJIS sends employers updates automatically on any new charges; does this practice meet DHR’s concern in this area, and alter the need for two year renewals of criminal background checks?

Response: The RFP will be amended to reflect that Providers must be in compliance with COMAR as relates to background clearances.

9. **Question:** [1.1] If we submit one primary proposal for our TGH program which is currently located in two jurisdictions, may we submit only one financial proposal for both sites, as has been our practice in past years, since our costs are more or less the same in each location, and we plan to apply for the same daily rate in each location? Otherwise, several problems could ensue; there would be greater complexities and costs in internal accounting and external audit, and difficulties completing the last year's actual costs section of the IRC budget forms, etc.

Response: Yes, as stated, the information will be the same for both sites.

10. **Question:** There are several new specifications in this RFP not currently required in COMAR or the DHR RCC contracts, which would raise providers' costs, e.g. renewing criminal background checks every two years, adding drug and alcohol screening initially and on a subsequent random basis, and the accounting and audit costs referenced in question 8 above. Has DHR considered the financial burden these new costs will place on providers in a year when the State will likely not permit rate increases, due to the current fiscal climate? Would the Department consider delaying implementation of these new requirements until the State's fiscal situation allows for rate increases to cover these costs?

Response: Offerors are required to comply with COMAR 14.31.06.05 with respect to criminal background checks and drug and alcohol screening.

11. **Question:** On page 46, under "**B. Contractor Requirements for All Programs: Residential Child Care Program Policies, Procedures, and Guidelines,**" there are several pages of regulatory requirements related to residential child care programs. It is not clear what we are expected to include in the proposal related to this section. Since we already operate a licensed residential child care program and meet these regulatory requirements, is it sufficient to indicate that we currently comply with the requirements and will continue to do so? Or are we to describe how we will comply with each one?

Response: Please refer to Section 4.3.A of the RFP. All Offerors must describe in detail how they will comply with each requirement.

12. **Question:** On page 49, paragraph #25, it is stated that "The Contractor shall screen new employees for drug and alcohol abuse, and then conduct

subsequent, continuous testing on a random basis.” Subsequent, random drug screening for employees is not currently required in regulation – can you please indicate under what authority this action is being mandated, given its inconsistency with current residential child care program regulations?

Response: Providers shall demonstrate compliance with the COMAR 14.31.06.05 to assure a Drug and Alcohol free workplace.

13. **Question:** On page 49, paragraph #27, it is stated that “The Contractor shall terminate any staff for which an allegation of any of the following has been substantiated by an investigation of OLM or LDSS Child Protective Services unit in any jurisdiction:

- “Neglect of children
- “Physical abuse of children, families or staff members
- “Sexual abuse or harassment of children, families or staff members
- “Verbal or emotional abuse of children, families or staff members
- “Drug or alcohol use on the premises or with children and families, or such that the staff is intoxicated while on duty”

Our question is similar – at least some of these reasons for termination are not found in regulation – what is the authority for these requirements, given the inconsistency with current regulations?

Response: The Department of Human Resources requires all Offerors who respond to this RFP to meet these requirements. Please refer to Section 3.4.B of the RFP entitled “Residential Child Care Program Policies, Procedures, and Guidelines.”

14. **Question:** How many proposals do we submit if we have two group home locations, each one is licensed by DHR, one male and one female, but they have the same budget and presently one contract?

Response: Please refer to Section 1.1 of the RFP. Offerors who submit Proposals for the same type of Residential Child Care Program, but has different locations, shall submit one primary Proposal that identifies each specific jurisdiction and the services offered, including the number of beds for each location.

15. **Question:** We have two programs, one a CPA, independent living and a group home. Do the RFP effect CPA (independent living) program?

Response: No, the RFP does not apply to CPA programs.

16. **Question:** Our organization's status is pending our certification from MBE in addition, we have less than 25 beds, what is the MBE Participation goal or will the organization be exempt?

Response: As stated in Section 2.30 of the RFP, an MBE subcontract participation goal of 5 percent of the total Contract dollar amount has been established for this procurement for Offerors with 25 or more beds. The MBE subcontract participation goal does not apply to Offerors with less than 25 beds. The goal also applies even if the Provider is a certified MBE.

17. **Question:** Should organizations submit any budgets to IRC this year?

Response: All Offerors who submit a proposal in response to this RFP shall submit its Financial Proposals to the Procurement Officer no later than 12 noon on February 15, 2010 as stated in Section 4.4 of the RFP.

18. **Question:** Are there any page number restrictions for the RFP?

Response: There is no restriction on the number of pages you may include in your Proposals.

19. **Question:** List of contracts include current contract with DHR?

Response: Please refer to Section 4.3.E. of the RFP. Each Offeror is to provide a list of all Contracts with any entity of the State of Maryland that it is currently performing or which have been completed within the last 5 years.

20. **Question:** Our off sites have separated licenses but are included in our residential rate. Now would we have to submit separate RFP for each one under the appropriate classification?

Response: Please refer to Section 1.1 of the RFP. Offerors who submit Proposals for the same type of Residential Child Care Program, but has different locations, shall submit one primary Proposal that identifies each specific jurisdiction and the services offered, including the number of beds for each location. Offerors intending to submit proposals for more than one RCC type, shall submit separate proposals for each Program and separate budgets for each Program.

21. **Question:** Are all licenses going just through this RFP or is there still availability getting licensed for a TGH and serve DHMH youth?

Response: In order to respond to this RFP, an Offeror must have a current, valid RCC license or have evidence of an application currently in process with DHR or DHMH, and have a license to operate by time of contract award for the requisite program.

22. **Question:** Can we apply for high intensity group homes for our on campus sites and regular group homes for our off campus sites?

Response: Yes

23. **Question:** Is a separate proposal required for each RCC operated by the same parent agency?

Response: Please refer to Section 1.1 of the RFP. Offerors that submit Proposals for more than one program type under their group home license must submit separate Proposals for each Program.

24. **Question:** Are high intensity group homes equivalent to the currently licensed Therapeutic Group Homes? Is other detail available describing high intensity group homes? (i.e., COMAR regs, who will be the licensing body?)

Response: No. Please refer to the description of High Intensity Group Homes in Section 3.4.1.C of the RFP. Providers submitting proposals for Therapeutic Group Homes under Section 3.4.1.C must describe the Program in the proposal and apply the required LOIs as applicable, but not less than the minimum levels stated in Section 3.4.1.C.

25. **Question:** If our proposal is NOT selected, will we be notified PRIOR to February 15th so we can submit our budget to the IRC, instead of DHR, and pursue other state contracts?

Response: All Budgets submitted to DHR as a part of the RFP will be directly forwarded to the IRC. The RFP will be amended to reflect this change.

26. **Question:** Do Living Wage Requirements (Section 2.36) apply to non profits?

Response: State service contracts with non-profit organizations are exempt from the Living Wage Law.

27. **Question:** Why does the Department require FBI and local background checks every two years when agencies are provided updates on any criminal behavior as a result of initial request?

Response: The RFP will be amended to reflect that Providers must be in compliance with COMAR as related to background clearances.

28. **Question:** How are “extenuating circumstances” defined as referenced under Section 3.3 (Admission, Intake and Discharge)?

Response: Providers must be able to clearly explain and document reasons why they are refusing an admission. Each case will be considered based upon the individual facts and circumstances.

29. **Question:** Will DHR provide interpretive services for the hearing impaired (reference section 3.3 C)?

Response: Each case or request will be handled on a case by case basis through collaboration with the local department of social services. Payment arrangements for needed services will be arranged prior to admission to the program.

30. **Question:** What is the gender breakout for the beds estimated for each set of jurisdictions in the chart under 3.3 H?

Response: The attached chart (Projected Program Needs and Referral Process) has been revised to show the gender breakout for each jurisdiction. The RFP will be amended to include the revised chart.

31. **Question:** Will programs in each jurisdiction in that chart (3.3.H) serve the cluster of jurisdictions (e.g. Carroll, Howard, Anne Arundel and Montgomery)

Response: Yes, it is expected that youth from that region will be served. There may be times when youth from other regions will be served as well.

32. **Question:** Will the roster of successful bidders equal exactly the number of beds for each cluster of jurisdictions?

Response: The numbers of beds projected by the Department are estimates only and reflect the goal the Department desires to meet.

33. **Question:** Under 3.4 A, what is being requested as regards annual activities and routines (as distinct from daily or weekly schedules)

Response: Each Offerror must propose their own annual schedule of activities and routines, in addition to the daily and weekly activities.

34. **Question:** How does the Diagnostic Plan under 3.4 B 14 differ from the IEP, ITP? Are the IEP, ITP and IHP all parts of the Diagnostic Plan?

Response: The Contractor shall jointly develop with the LDSS the service/treatment plan that identifies the needs of the youth, and the services needed. The Contractor shall also collaborate with the LDSS in development of the case plan and its components: Individual Education Plan (IEP), Individual Health Plan (IHP), and any applicable court orders. The Contractor shall review progress on the service/treatment plan with the LDSS, and convey all relevant information upon discharge of the child/youth. The RFP will be amended to reflect these changes.

35. **Question:** How do we determine whether \$25,000 in federal funds is be used, requiring the Certification Regarding Lobbying (Attachment O)?

Response: The Department has determined that all Offerors shall complete this form.