

State of Hawaii
Department of Health
Family Health Services Division
Maternal and Child Health Branch
Home Visiting Unit

Request for Proposals

RFP No. HTH 560-CT-006
Home Visiting

Issued: December 1, 2014

Note: *It is the applicant's responsibility to check the public procurement notice website, the request for proposals website, or to contact the Request for Proposals ("RFP") point-of-contact identified in the RFP for any addenda issued to this RFP. The State shall not be responsible for any incomplete proposal submitted as a result of missing addenda, attachments or other information regarding the RFP.*

December 1, 2014

REQUEST FOR PROPOSALS

Home Visiting RFP No. HTH 560-CT-006

The Department of Health (“DOH”), Family Health Services Division (“FHSD”), Maternal and Child Health Branch (“MCHB”), referred to as “the State,” is requesting proposals from qualified applicants to provide comprehensive home visiting services to targeted families who meet the eligibility criteria for families at risk for poor child health outcomes, child development, and child maltreatment. Services include, but are not limited to: maternal and child health, child maltreatment prevention, school readiness, domestic violence, family economic self-sufficiency, and coordination and referrals for other community resources and supports. The contract term will be from July 1, 2015 through June 30, 2017.

Proposals shall be mailed, postmarked by the United States Postal Service on or before January 2, 2015, and received no later than 10 days from the submittal deadline. Hand delivered proposals shall be received no later than 4:00 P.M., Hawaii Standard Time (HST), on January 2, 2015, at the drop-off site designated on the Proposal Mail-in and Delivery Information Sheet. Proposals postmarked or hand delivered after the submittal deadline shall be considered late and rejected. There are no exceptions to this requirement.

The State will conduct an orientation session on December 5, 2014 from 1:30 P.M. to 3:30 P.M. HST, at 741-A Sunset Avenue, Room 204, Honolulu, Hawaii. All prospective applicants are encouraged to attend the orientation.

Attendance via video conferencing is available at:

Island	Address
Oahu	Kakuhihewa State Office Building 601 Kamokila Boulevard, Room 167B Kapolei, HI 96707
Oahu	MCHB Wilcox Building 741-A Sunset Avenue, Room 204 Honolulu, HI 96816

Hawaii	Hilo State Office Building 75 Aupuni Street, Basement Hilo, HI 96720
Maui	Wailuku State Office Building 54 South High Street, Third Floor Wailuku, HI 96793
Kauai	Lihue State Office Building 3060 Eiwa Street, Basement Lihue, HI 96766

Telephone conference capability is also available. Interested parties may call:
1-866-612-6838, conference code: 669108

The deadline for submission of written questions is 4:00 P.M., HST, December 12, 2014. All written questions will receive a written response from the State on or about December 19, 2014.

Any inquiries and requests regarding this Request for Proposals (“RFP”) should be directed to Mr. Jeremy Heyer at 741-A Sunset Avenue, Honolulu, Hawaii 96816, telephone: (808) 733-4031, fax: (808) 733-9078, e-mail: jeremy.hey@do.hawaii.gov.

PROPOSAL MAIL-IN AND DELIVERY INFORMATION SHEET

NUMBER OF COPIES TO BE SUBMITTED: 6

ALL MAIL-INS SHALL BE POSTMARKED BY THE UNITED STATES POSTAL SERVICE (USPS) NO LATER THAN January 2, 2015 and received by the state purchasing agency no later than 10 days from the submittal deadline.

All Mail-ins

Department of Health
Maternal and Child Health Branch
Home Visiting Programs
741A Sunset Ave Rm. 100
Honolulu, HI 96816

RFP COORDINATOR

Jeremy Heyer
808-733-4031
jeremy.heyer@doh.hawaii.gov

ALL HAND DELIVERIES SHALL BE ACCEPTED AT THE FOLLOWING SITES UNTIL **4:00 P.M., Hawaii Standard Time (HST), January 2, 2015**. Deliveries by private courier services such as FedEx or United Parcel Service shall be considered hand deliveries. Hand deliveries shall not be accepted if received after 4:00 P.M., **January 2, 2015**.

Drop-off Site

Department of Health
Maternal and Child Health Branch
Home Visiting Programs
741A Sunset Ave Rm. 100
Honolulu, HI 96816

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Section 1

Administrative Overview

Section 1 Administrative Overview

Applicants are encouraged to read each section of the RFP thoroughly. While sections such as the administrative overview may appear similar among RFPs, state purchasing agencies may add additional information as applicable. It is the responsibility of the applicant to understand the requirements of *each* RFP.

1.1 Procurement Timetable

Note that the procurement timetable represents the State's best estimated schedule. If an activity on this schedule is delayed, the rest of the schedule will likely be shifted by the same number of days. Contract start dates may be subject to the issuance of a notice to proceed.

<u>Activity</u>	<u>Scheduled Date</u>
Public notice announcing Request for Proposals (RFP)	December 1, 2014
Distribution of RFP	December 1, 2014
RFP orientation session	December 5, 2014
Closing date for submission of written questions for written responses	December 12, 2014
State purchasing agency's response to applicants' written questions	December 19, 2014
Discussions with applicant prior to proposal submittal deadline (optional)	December 1, 2014 through January 2, 2015
Proposal submittal deadline	January 2, 2015
Discussions with applicant after proposal submittal deadline (optional)	January 15, 2015
Final revised proposals (optional)	January 23, 2015
Proposal evaluation period	January 5, 2015 – January, 30, 2015
Provider selection	February 2, 2015
Notice of statement of findings and decision	February 13, 2015
Contract start date	July 1, 2015

1.2 Website Reference

1	Procurement of Health and Human Services	http://hawaii.gov/spo2/health/rfp103f/ http://hawaii.gov/spo/health-human-svcs/doing-business-with-the-state-to-provide-health-and-human-services
2	RFP website	http://spo3.hawaii.gov/notices/notices http://hawaii.gov/spo/general/procurement-notices-for-solicitations
3	Hawaii Revised Statutes (HRS) and Hawaii Administrative Rules (HAR) for Purchases of Health and Human Services	http://spo.hawaii.gov/references/ http://hawaii.gov/spo/general/statutes-and-rules/procurement-statutes-and-administrative-rules
4	Forms	http://spo.hawaii.gov/all-forms/ http://hawaii.gov/spo/statutes-and-rules/general/spo-forms
5	Cost Principles	http://spo.hawaii.gov/for-vendors/vendor-guide/methods-of-procurement/health-human-services/competitive-purchase-of-services-procurement-method/cost-principles-table-hrs-chapter-103f-2/ http://hawaii.gov/spo/health-human-svcs/cost-principles-for-procurement-of-health-and-human-services
6	Standard Contract -General Conditions, AG103F13	http://hawaii.gov/forms/internal/department-of-the-attorney-general/ag-103f13-1/view http://hawaii.gov/spo/general/gen-cond/general-conditions-for-contracts
7	Protest Procedures: Protest Forms:	http://spo.hawaii.gov/for-vendors/vendor-guide/protests-for-health-and-human-services/ http://spo.hawaii.gov/all-forms/#1-9 http://hawaii.gov/spo/health-human-svcs/protestsreqforreconsideration/protests-requests-for-reconsideration-for-private-providers

Non-SPO websites

(Please note: website addresses may change from time to time. If a link is not active, try the State of Hawaii website at <http://hawaii.gov>)

	For	Go to
8	Hawaii Compliance Express (HCE)	https://vendors.ehawaii.gov/hce/splash/welcome.html
9	Department of Taxation	http://hawaii.gov/tax/
10	Wages and Labor Law Compliance, HRS §103-055	http://capitol.hawaii.gov/hrscurrent

11	Department of Commerce and Consumer Affairs, Business Registration	http://hawaii.gov/dcca Click “Business Registration”
12	Campaign Spending Commission	http://hawaii.gov/campaign

1.3 Authority

This RFP is issued under the provisions of the Hawaii Revised Statutes (HRS) Chapter 103F and its administrative rules. All prospective applicants are charged with presumptive knowledge of all requirements of the cited authorities. Submission of a valid executed proposal by any prospective applicant shall constitute admission of such knowledge on the part of such prospective applicant.

1.4 RFP Organization

This RFP is organized into five sections:

Section 1, Administrative Overview: Provides applicants with an overview of the procurement process.

Section 2, Service Specifications: Provides applicants with a general description of the tasks to be performed, delineates Provider responsibilities, and defines deliverables (as applicable).

Section 3, Proposal Application Instructions: Describes the required format and content for the proposal application.

Section 4, Proposal Evaluation: Describes how proposals will be evaluated by the state purchasing agency.

Section 5, Attachments: Provides applicants with information and forms necessary to complete the application.

1.5 Contracting Office

The Contracting Office is responsible for overseeing the contract(s) resulting from this RFP, including system operations, fiscal agent operations, and monitoring and assessing provider performance. The Contracting Office is:

Department of Health
Maternal and Child Health Branch
741A Sunset Ave. Rm. 100
Honolulu, HI 96816
Phone: 808-733-9041
Fax: 808-733-9078

1.6 RFP Contact Person

From the release date of this RFP until the selection of the successful provider(s), any inquiries and requests shall be directed to the sole point-of-contact identified below.

Jeremy Heyer
808-733-4031
jeremy.heyer@doh.hawaii.gov

1.7 Orientation

An orientation for applicants in reference to the request for proposals will be held as follows:

Date: December 5, 2014 **Time:** 1:30 P.M. to 3:30 P.M.

Location: MCHB
741 A Sunset Ave, Room 204
Honolulu, HI 96816

Attendance via video conferencing is available at:

Island	Address
Oahu	Kakuhihewa State Office Building 601 Kamokila Boulevard, Room 167B Kapolei, HI 96707
Oahu	MCHB Wilcox Building 741-A Sunset Avenue, Room 204 Honolulu, HI 96816
Hawaii	Hilo State Office Building 75 Aupuni Street, Basement Hilo, HI 96720
Maui	Wailuku State Office Building 54 South High Street, Third Floor Wailuku, HI 96793
Kauai	Lihue State Office Building 3060 Eiwa Street, Basement Lihue, HI 96766

Telephone conference capability is also available. Interested parties may call: 1-866-612-6838, conference code: 669108.

Applicants are encouraged to submit written questions prior to the orientation. Impromptu questions will be permitted at the orientation and spontaneous answers provided at the state purchasing agency's discretion. However, answers provided at the orientation are only intended as general direction and may not represent the state purchasing agency's position. Formal official responses will be provided in writing. To ensure a written response, any oral questions should be submitted in writing following the close of the orientation, but no later than the

submittal deadline for written questions indicated in the subsection 1.8, Submission of Questions.

1.8 Submission of Questions

Applicants may submit questions to the RFP Contact Person identified in Section 1.6. Written questions should be received by the date and time specified in Section 1.1 Procurement Timetable. The purchasing agency will respond to written questions by way of an addendum to the RFP.

Deadline for submission of written questions:

Date: December 12, 2014 **Time:** 4:00 P.M. H.S.T.

State agency responses to applicant written questions will be provided by:

Date: December 19, 2014

1.9 Submission of Proposals

A. **Forms/Formats** - Forms, with the exception of program specific requirements, may be found on the State Procurement Office website referred to in subsection 1.2, Website Reference. Refer to the Section 5, Proposal Application Checklist for the location of program specific forms.

B. **Proposal Application Identification (Form SPOH-200)**. Provides applicant proposal identification.

C. **Proposal Application Checklist**. The checklist provides applicants specific program requirements, reference and location of required RFP proposal forms, and the order in which all proposal components should be collated and submitted to the state purchasing agency.

D. **Table of Contents**. A sample table of contents for proposals is located in Section 5, Attachments. This is a sample and meant as a guide. The table of contents may vary depending on the RFP.

E. **Proposal Application (Form SPOH-200A)**. Applicant shall submit comprehensive narratives that address all proposal requirements specified in Section 3, Proposal Application Instructions, including a cost proposal/budget, if required.

F. **Program Specific Requirements**. Program specific requirements are included in Sections 2 and 3, as applicable. Required Federal and/or State certifications are listed on the Proposal Application Checklist in Section 5.

G. **Multiple or Alternate Proposals**. Multiple or alternate proposals shall not be accepted unless specifically provided for in Section 2. In the event alternate proposals are not accepted and an applicant submits alternate proposals, but clearly indicates a primary proposal, it shall be considered for award as though it were the only proposal submitted by the applicant.

H. **Hawaii Compliance Express (HCE)**. All applicants shall comply with all laws governing entities doing business in the State. Applicants shall register with HCE for online

compliance verification from the Hawaii State Department of Taxation (DOTAX), Internal Revenue Service (IRS), Department of Labor and Industrial Relations (DLIR), and Department of Commerce and Consumer Affairs (DCCA). There is a nominal annual registration fee (currently \$12) for the service. The HCE's online "Certificate of Vendor Compliance" provides the registered provider's current compliance status as of the issuance date, and is accepted for both contracting and final payment purposes. Refer to subsection 1.2, Website Reference, for HCE's website address.

- **Tax Clearance.** Pursuant to HRS §103-53, as a prerequisite to entering into contracts of \$25,000 or more, applicants are required to have a tax clearance from DOTAX and the IRS. (See subsection 1.2, Website Reference for DOTAX and IRS website address.)
- **Labor Law Compliance.** Pursuant to HRS §103-55, applicants shall be in compliance with all applicable laws of the federal and state governments relating to workers' compensation, unemployment compensation, payment of wages, and safety. (See subsection 1.2, Website Reference for DLIR website address.)
- **DCCA Business Registration.** Prior to contracting, owners of all forms of business doing business in the state except sole proprietorships, charitable organizations, unincorporated associations and foreign insurance companies shall be registered and in good standing with the DCCA, Business Registration Division. Foreign insurance companies must register with DCCA, Insurance Division. More information is on the DCCA website. (See subsection 1.2, Website Reference for DCCA website address.)

I. **Wages Law Compliance.** If applicable, by submitting a proposal, the applicant certifies that the applicant is in compliance with HRS §103-55, Wages, hours, and working conditions of employees of contractors performing services. Refer to HRS §103-55, at the Hawaii State Legislature website. (See subsection 1.2, Website Reference for DLIR website address.)

J. **Campaign Contributions by State and County Contractors.** HRS §11-355 prohibits campaign contributions from certain State or county government contractors during the term of the contract if the contractors are paid with funds appropriated by a legislative body. Refer to HRS §11-355. (See subsection 1.2, Website Reference for Campaign Spending Commission website address.)

K. **Confidential Information.** If an applicant believes any portion of a proposal contains information that should be withheld as confidential, the applicant shall request in writing nondisclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the proposal, be clearly marked, and shall be readily separable from the proposal to facilitate eventual public inspection of the non-confidential sections of the proposal.

Note that price is not considered confidential and will not be withheld.

L. **Proposal Submittal.** All mail-ins shall be postmarked by the United States Postal System (USPS) and received by the State purchasing agency no later than the submittal deadline indicated on the attached Proposal Mail-in and Delivery Information Sheet, or as amended. All hand deliveries shall be received by the State purchasing agency by the date and time designated on the Proposal Mail-In and Delivery Information Sheet, or as amended. Proposals shall be rejected when:

1. Postmarked after the designated date; or

2. Postmarked by the designated date but not received within 10 days from the submittal deadline; or
3. If hand delivered, received after the designated date and time.

The number of copies required is located on the Proposal Mail-In and Delivery Information Sheet. Deliveries by private courier services such as FedEx or United Parcel Service shall be considered hand deliveries and shall be rejected if received after the submittal deadline. Dated USPS shipping labels are not considered postmarks.

Faxed proposals, and/or submission of proposals on diskette/CD or transmission by e-mail, website or other electronic means will not be accepted.

1.10 Discussions with Applicants

A. **Prior to Submittal Deadline.** Discussions may be conducted with potential applicants to promote understanding of the purchasing agency's requirements.

B. **After Proposal Submittal Deadline -** Discussions may be conducted with applicants whose proposals are determined to be reasonably susceptible of being selected for award, but proposals may be accepted without discussions, in accordance with HAR §3-143-403.

1.11 Opening of Proposals

Upon the State's receipt of a proposal at a designated location, proposals, modifications to proposals, and withdrawals of proposals shall be date-stamped, and when possible, time-stamped. All documents so received shall be held in a secure place by the state purchasing agency and not examined for evaluation purposes until the submittal deadline.

Procurement files shall be open to public inspection after a contract has been awarded and executed by all parties.

1.12 Additional Materials and Documentation

Upon request from the State, each applicant shall submit additional materials and documentation reasonably required by the state purchasing agency in its evaluation of the proposals.

1.13 RFP Amendments

The State reserves the right to amend this RFP at any time prior to the closing date for final revised proposals.

1.14 Final Revised Proposals

If requested, final revised proposals shall be submitted in the manner and by the date and time specified by the state purchasing agency. If a final revised proposal is not submitted, the previous submittal shall be construed as the applicant's final revised proposal. *The applicant shall submit **only** the section(s) of the proposal that are amended, along with the Proposal Application Identification Form (SPOH-200).* After final revised proposals are received, final evaluations will be conducted for an award.

1.15 Cancellation of Request for Proposal

The RFP may be canceled and any or all proposals may be rejected in whole or in part, when it is determined to be in the best interest of the State.

1.16 Costs for Proposal Preparation

Any costs incurred by applicants in preparing or submitting a proposal are the applicants' sole responsibility.

1.17 Provider Participation in Planning

Provider(s), awarded a contract resulting from this RFP,

are required

are not required

to participate in the State's future development of a service delivery plan pursuant to HRS §103F-203.

Applicant participation in the State's efforts to plan for or to purchase health and human services prior to the release of a RFP, including the sharing of information on community needs, best practices, and providers' resources, shall not disqualify applicants from submitting proposals, if conducted in accordance with HAR §§3-142-202 and 3-142-203.

1.18 Rejection of Proposals

The State reserves the right to consider as acceptable only those proposals submitted in accordance with all requirements set forth in this RFP and which demonstrate an understanding of the problems involved and comply with the service specifications. Any proposal offering any other set of terms and conditions contradictory to those included in this RFP may be rejected without further notice.

A proposal may be automatically rejected for any one or more of the following reasons:

- (1) Rejection for failure to cooperate or deal in good faith. (HAR §3-141-201)
- (2) Rejection for inadequate accounting system. (HAR §3-141-202)
- (3) Late proposals (HAR §3-143-603)
- (4) Inadequate response to request for proposals (HAR §3-143-609)
- (5) Proposal not responsive (HAR §3-143-610(a)(1))
- (6) Applicant not responsible (HAR §3-143-610(a)(2))

1.19 Notice of Award

A statement of findings and decision shall be provided to each responsive and responsible applicant by mail upon completion of the evaluation of competitive purchase of service proposals.

Any agreement arising out of this solicitation is subject to the approval of the Department of the Attorney General as to form, and to all further approvals, including the approval of the Governor, required by statute, regulation, rule, order or other directive.

No work is to be undertaken by the applicant(s) awarded a contract prior to the contract commencement date. The State of Hawaii is not liable for any costs incurred prior to the official starting date.

1.20 Protests

Pursuant to HRS §103F-501 and HAR Chapter 148, an applicant aggrieved by an award of a contract may file a protest. The Notice of Protest form, SPOH-801, and related forms are available on the SPO website. (See subsection 1.2, Website Reference for website address.) Only the following matters may be protested:

- (1) A state purchasing agency's failure to follow procedures established by Chapter 103F of the Hawaii Revised Statutes;
- (2) A state purchasing agency's failure to follow any rule established by Chapter 103F of the Hawaii Revised Statutes; and
- (3) A state purchasing agency's failure to follow any procedure, requirement, or evaluation criterion in a request for proposals issued by the state purchasing agency.

The Notice of Protest shall be postmarked by USPS or hand delivered to 1) the head of the state purchasing agency conducting the protested procurement and 2) the procurement officer who is conducting the procurement (as indicated below) within five working days of the postmark of the Notice of Findings and Decision sent to the protestor. Delivery services other than USPS shall be considered hand deliveries and considered submitted on the date of actual receipt by the state purchasing agency.

Head of State Purchasing Agency	Procurement Officer
Name: Linda M. Rosen, M.D., M.P.H.	Name: Leighton Tamura
Title: Director of Health	Title: Public Health Administrative Officer
Mailing Address: PO Box 3378 Honolulu, HI 96801	Mailing Address: 741 A Sunset Ave. Room 101 Honolulu, HI 96816
Business Address: 1250 Punchbowl Street, Honolulu, HI 96813	Business Address: 741 A Sunset Ave. Honolulu, HI 96816

1.21 Availability of Funds

The award of a contract and any allowed renewal or extension thereof, is subject to allotments made by the Director of Finance, State of Hawaii, pursuant to HRS Chapter 37, and subject to the availability of State and/or Federal funds.

1.22 General and Special Conditions of Contract

The general conditions that will be imposed contractually are on the SPO website. (See subsection 1.2, Website Reference for website address.) Special conditions may also be imposed contractually by the state purchasing agency, as deemed necessary.

1.23 Cost Principles

To promote uniform purchasing practices among state purchasing agencies procuring health and human services under HRS Chapter 103F, state purchasing agencies will utilize standard cost

principles outlined in Form SPOH-201, which is available on the SPO website. (See subsection 1.2 Website Reference for website address.) Nothing in this section shall be construed to create an exemption from any cost principle arising under federal law.

Section 2
Service Specifications

Section 2 Service Specifications

2.1 Introduction

A. Overview, purpose or need

The Department of Health (“DOH”) administers the Hawaii Home Visiting Network (“HHVN”) program which is a public-private partnership with home visiting programs which strengthen families and promotes positive parent-child relationships. The DOH contracts Early Identification (“EID”) services prenatally and in birthing hospitals which screen families for child maltreatment risk factors. Families who are identified to be at risk are voluntarily referred to HHVN partners who provide the parenting support and education to ensure a nurturing, healthy and safe home environment.

HHVN partners are evidence-based home visiting programs which include: Healthy Families America, Parents as Teachers, and Home Instruction for Parents of Preschool Youngsters. The Network and EID programs are supported through the DOH and Maternal Infant Early Childhood Home Visiting (“MIECHV”) grant funds. The DOH is committed to fulfilling its public health surveillance role in screening all new parents and providing the infrastructure and system of services to meet the needs of at-risk families.

The DOH is soliciting applications for the purpose of providing comprehensive home visitation services to at-risk families, both prenatal and postnatal, in the state of Hawaii determined eligible through a screening and referral process. This EID service will be continued under a separate procurement process. This solicitation is for weekly home visiting services which must address family strengthening and child development services and respond to the MIECHV benchmark requirements.

B. Planning activities conducted in preparation for this RFP

A Request for Information (“RFI”) meeting was held on November 7, 2014. Questions and comments were solicited during the RFI meeting. Written comments and questions were due on November 10, 2014 by 4:30 P.M. HST, with a comment reply date of November 21, 2014.

During the RFI meeting comments and questions were solicited from the community regarding specific model implementation issues, caseload requirements, data validation, continuous quality improvement, accreditation, model fidelity, annual site visits, expanding community relationships, and training requirements and supports.

All comments and questions received before, during, and after the RFI process were consolidated and were disseminated to all participants who attended or submitted their

contact information. These “Questions and Answers” are available for public inspection and may be requested through the RFP Contact Person.

Planning for the RFP also included data reviews for risk indicators to identify at risk communities. Risk indicators were: Low Birth Weight, Infant Mortality, Poverty, High School Drop Out rate, Unemployment rate, Receiving Financial Aid, Receiving Food Stamps, Child Abuse and Neglect rate, and existing home visiting resources within the specific community.

C. Description of the service goals

Home Visiting Goals:

- Improved Maternal and Newborn Health
- Prevention of Child Injuries, Child Abuse, Neglect, or Maltreatment and Reduction of Emergency Department Visits
- Improvements in School Readiness and Achievement
- Domestic Violence and Referral
- Improvement in Family Economic Self Sufficiency
- Coordination and Referrals for Other Community Resources and Supports

D. Description of the target population to be served

Pregnant women and families of newborns (within the first 3 months of life) may enter the program. Families may remain in the program until the target child is 3 years old.

For participants entering the HIPPY program, referrals will be prioritized with preference first being given to families who are discharging from HHVN (0-3 years) home visiting programs.

E. Geographic coverage of service

Community	Census Tract
Hilo – Puna	201-211

F. Probable funding amounts, source, and period of availability

Community/Census Tract	Funding Amount
Hilo – Puna	\$350,000.00

The approximate amount of federal funding available in each fiscal year 2015 and 2016 is \$1,000,000.00. Additional state funding of up to \$3,000,000.00 may become available in each fiscal year. Additional federal funding up to \$4,000,000.00 may become available in each fiscal year. Expansion to other geographic regions within the state is subject to another Request for Proposals.

2.2 Contract Monitoring and Evaluation

The criteria by which the performance of the contract will be monitored and evaluated are:

- (1) Output Measures – see Attachment “C” HV Output Measures (for Fiscal Year 2016 and 2017) and sample Home Visiting Monthly Report
- (2) Quality of Care/Quality of Services
- (3) Financial Management
- (4) Administrative Requirements
- (5) Annual Site Visits.

2.3 General Requirements

A. **Specific qualifications or requirements, including but not limited to licensure or accreditation**

Where accreditation or quality endorsement is required by the home visiting model developer, the applicant must demonstrate accreditation or quality standards according to the model developer requirements. If the applicant is proposing a home visiting model that is not yet operational or accredited, the applicant must provide a plan and timeline to meet accreditation or quality endorsement requirements during the contract period.

Requests for exceptions to the minimum staffing requirements shall be considered on a case by case basis taking into account various factors, including but not limited to geographic location, caseload and predicted growth, quality and quantity of staff recruitment efforts. The DOH may determine that subcontracting may fulfill these staffing requirements, however all subcontracts are subject to approval by the DOH.

All Providers shall inform each family at enrollment that their de-identified demographic data is collected in the Provider’s computerized databases and is shared with DOH and HRSA.

B. **Secondary purchaser participation**

(Refer to HAR §3-143-608)

After-the-fact secondary purchases will be not allowed.

Planned secondary purchases: none

C. **Multiple or alternate proposals**

(Refer to HAR §3-143-605)

Allowed Unallowed

Proposals by multiple applicants shall be allowed, provided there is one (1) primary applicant. The primary applicant shall be clearly identified. The DOH seeks assurances

that the primary applicant shall be providing a minimum of twenty-five (25) percent of the contracted services. Subcontractors shall be identified and approved by MCHB after notice of statement of findings and decision. The total proposal amount for the multiple home visiting applicants shall not exceed the total funding amount allocated for the specific geographic region.

D. Single or multiple contracts to be awarded

(Refer to HAR §3-143-206)

Single Multiple Single & Multiple

E. Single or multi-term contracts to be awarded

(Refer to HAR §3-149-302)

Single term (2 years or less) Multi-term (more than 2 years)

- Initial term of contract: July 1, 2015 to June 30, 2017;
- Length of each extension: one (1) year;
- Number of possible extensions: two (2);
- Maximum length of contract: four (4) years;
- The initial period shall commence on the contract start date or Notice to Proceed, whichever is later; and
- Conditions for extension: Must be executed prior to the expiration of the initial term of contracts for continuation of services. Any additional funding, changes in contract language, or changes in service specifications will be agreed upon in writing.

2.4 Scope of Work

Current Hawaii Home Visiting Network Policies and Procedures are in Attachment “D” as a reference for requirements for service delivery. Policy and procedures are subject to change with the approval of the HHVN and DOH.

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities

(Minimum and/or mandatory tasks and responsibilities)

Home Visiting Services

The provider shall select from the following evidence-based home visiting models:

Healthy Families America (“HFA”)

Home Instruction for Parents of Preschool Youngsters (“HIPPI”)

Parents as Teachers (“PAT”)

Home visiting services shall adhere to the model specified and fidelity to the model will be required.

Healthy Families America:

Applicants submitting proposals for the HFA model must be accredited or demonstrate accreditation potential by providing an accreditation plan and timeline. Applicants shall comply with all of the requirements and criteria specified in Healthy Families America accreditation Self Study, Critical Elements.

Applicant must submit a copy of their current Accreditation Letter, Accreditation Certificate, Affiliation Memo, or Accreditation plan with detailed timelines for meeting performance standards.

Home Instruction for Parents of Preschool Youngsters:

Applicants submitting proposals for the HIPPY model must be accredited or demonstrate accreditation potential by providing an accreditation plan and timeline. Applicants shall comply with all of the requirements and criteria specified for each standard for the Essential Features and Administration of the HIPPY program.

Applicant must submit a copy of their current Affiliate Performance Report, or Accreditation plan with detailed timelines for meeting performance standards.

Parents As Teachers:

Applicants submitting proposals for the PAT model must demonstrate affiliation, certification of its Parent Educators, or submit a plan for certification for all Parent Educators by providing an affiliation plan and timeline. Applicant must submit a copy of their Quality Endorsement or a plan with detailed timelines for meeting PAT Essential Requirements.

Applicants must submit a copy of their plan to achieve PAT Quality Endorsement with detailed timelines for meeting performance standards.

The applicant shall provide:

- A Capacity Goal. The Capacity Goal is defined as the number of families that shall be receiving services at any moment in time if the Program were operating with a full complement of home visitors hired and trained.
- A date the Capacity Goal will be achieved.

For all models and for all applications, weekly home visiting services shall minimally include:

- (1) Developing a service plan which addresses the risk factors identified during the screening and referral process.
- (2) Conducting home visits in accordance with the service plan with the collaboration and participation of the family.
- (3) Providing home visiting services according to the home visiting model's standards and practices.
- (4) Each home visitor shall maintain a full capacity caseload.
- (5) Administering all of the tools and measurements to collect required data according to the Tool Kit (see Attachment "F") and DOH Benchmarks. (see Attachment "E")
- (6) Home visits will be conducted on a weekly basis for all evidence-based home visiting models proposed. Provide the rationale and policy and system for determining less intensive services.
- (7) Providing home visiting services which address health and safety including but not limited to immunizations, medical home, developmental screenings.

B. Management Requirements (minimum and/or mandatory requirements)

1. Personnel

- a. Applicants shall describe minimum and mandatory staffing requirements specific to the home visiting model being utilized. Staff proposals shall include minimum qualifications for each personnel type.
- b. For HFA models, the DOH requires staffing enhancements in addition to the standard HFA requirements. Model enhancements sanctioned by HFA are:
 - i. **Clinical Specialists:**
Preferred Master's degree and one (1) year experience in Social Work, Clinical Psychology, Nursing or Counseling, or a bachelor's degree and two (2) years' experience in Social Work, Clinical Psychology, Nursing, or Counseling Prefer experience working with Domestic Violence, Substance Abuse, and Mental Illness.
 - ii. **Child Development Specialists:**
A bachelor's degree preferably in early childhood education, or a bachelor's degree in another field with experience in child development may be substituted.

2. Administrative

- a. The Provider shall utilize appropriate reports and records pertaining to the provision of services in accordance with standards developed by the DOH. Reports and records shall be maintained by the Provider and made available for monitoring and review by the DOH staff upon request.
- b. The Provider shall have a data validation policy and procedures.

- c. The Provider shall hold monthly Continuous Quality Improvement (“CQI”) Meetings, participate in DOH model and network CQI process.
 - d. The Provider shall send at least one representative to bi-monthly scheduled HHVN meetings. Travel costs should be included in the budget.
 - e. The Provider shall acknowledge the DOH as the PROVIDER’s program sponsor. An acknowledgement to that effect shall appear on all printed materials for which the DOH is a program sponsor. The PROVIDER shall include the following statement in all printed or developed materials, including, but not limited to electronic and social media such as websites, web logs or “blogs,” and Facebook: “This Project has been jointly funded by the Department of Health, Maternal and Child Health Branch with funds from the Maternal, Infant and Early Childhood Home Visiting grant sponsored by the Health Resources and Services Administration.”
 - f. The Provider shall comply with DOH’s Directive Number 04-01 dated May 3, 2004 concerning Interpersonal Relationships Between Staff and Clients/Patients, a copy of which is attached as Attachment “G”.
 - g. The Provider shall collaborate with DOH in on-going evaluative research activities for program/system improvement.
 - h. The Provider shall comply with Title VI of the Civil Rights Act of 1964, as amended and requirements pursuant to 45 Code of Federal Regulations (“CFR”) Part 80.
 - i. The Provider shall comply with Section 504 of the Rehabilitation Act of 1973, as amended, and requirements pursuant to 45 CFR Part 36.
 - j. The Provider shall comply with Title III of the Americans with Disabilities Act of 1990, as amended, and requirements pursuant to 28 CFR part 36.
 - k. The Provider shall comply with the Age Discrimination Act of 1975, as amended, and requirements pursuant to 45 CFR Part 90.
 - l. The Provider shall comply, as a “covered entity,” with the provisions of Hawaii Revised Statutes (“HRS”) Chapter 371 Part II, Language Access.
 - m. The Provider shall comply, if it is a “place of public accommodation,” with the provisions of HRS Chapter 489, Discrimination in Public Accommodations.
- 3. Continuous Quality Improvement and Evaluation specifications**

The Provider shall describe its system for continuous quality improvement and how it will utilize program data as well as DOH outcome data to inform program policy and outcomes.

4. Output measurements

The Provider shall use Attachment “C” to propose output measurements for each of the DOH Benchmarks (See Attachment “D”).

5. Experience

The Provider shall have experience in working with families in Hawaii who have environmental risk factors such as the risk indicators identified in the MIECHV eligibility criteria and in the 15 point screen and the risk indicators identified in the DOH Primary Care Needs Assessment Data Book 2012: Low Birth weight, Infant Mortality, Poverty, High School Drop Out, Unemployment, Receiving Financial Aid, Receiving Food Stamps, Child Abuse and Neglect, Domestic violence, Substance Abuse, or Mental Health issues.

6. Coordination of services

The Provider shall coordinate services and collaborate with other home visiting programs and community resources as a member of the Hawaii Home Visiting Network.

The Provider shall coordinate referrals through the development and execution of Memorandums of Understanding (“MOU”) or other formal agreements with other home visiting programs and community resources and supports.

The Provider shall develop and maintain a number of agencies with which the Provider has a clear point of contact in collaborating, including sharing information between agencies. A clear point of contact is defined as having: name, phone number, and email address.

7. Reporting requirements for program and fiscal data

The Provider shall:

- a. Submit all monthly, quarterly, annual, and ad hoc data, narrative and variance reports on services provided, number of children and families served, and other data according to timelines and formulas set by the State in the Tool Kit (See Attachment “F”) and DOH Benchmarks (See Attachment “E”). Reports are due 30 days after the end of each reporting period.
- b. Submit all other reports as required by the State.

- c. Submit monthly invoices to DOH utilizing DOH report formats. Invoices are due 30 days after the end of each reporting period. Invoices will be paid upon receipt, based on funding availability and on the condition that all required monthly/quarterly/annual reports have been received by DOH in accordance with established due dates.

C. Facilities

Facilities shall be accessible and adequate relative to the proposed services.

2.5 Compensation and Method Of Payment

Cost Reimbursement

One price for the entire program is set for the geographic area:

Community/Census Tract	Funding Amount
Hilo – Puna	\$350,000.00

The Provider shall use Attachment “J” to propose:

- a cost per participant per year based on the total funding amount allocated for the geographic area/region.
- an estimated total number of participants it will serve per fiscal year and average per month.

Payment shall be based on the Provider’s monthly invoice statement which shall demonstrate the Provider’s monthly expenditures and proposed monthly enrollment data with proposed average monthly service hours. The activities eligible for service hours are described in Attachment “H.”

Failure to meet proposed monthly minimum enrollment (Capacity Goal), proposed average service hours, or output measures for three (3) consecutive months will result in fiscal sanctions determined by a decrease of 25%. However, prior to imposing sanctions, the Provider shall work with the DOH to develop and execute a 90 day plan of correction to ensure fidelity to the model is adhered to and that quality services are provided with the goal of affecting positive outcomes.

Payment will be made on a monthly basis upon submission of an invoice, enrollment report, service hours report, Home Visiting Monthly Reports, and output measures reports with accompanying data evidence. DOH will review these monthly reports for payment approval.

Final settlement of this Contract shall include submission and acceptance of all reports and other materials to be submitted by the PROVIDER to the STATE, resolution of all discrepancies in expenditures or performance of services, and completion of all other outstanding matters under this Contract.

Section 3

Proposal Application Instructions

Section 3 Proposal Application Instructions

General instructions for completing applications:

- *Proposal Applications shall be submitted to the state purchasing agency using the prescribed format outlined in this section.*
- *The numerical outline for the application, the titles/subtitles, and the applicant organization and RFP identification information on the top right hand corner of each page should be retained. The instructions for each section however may be omitted.*
- *Total Page Count shall not exceed 70 pages. Page limit does not include attachments. Do not exceed page limits. (Required)*
- *Page limitations are specified in sections. Do not exceed page limits.*
- *Margins -Margins must be at least one (1) inch at the top, bottom, left and right of the paper. Please left-align text. (Required)*
- *Font and font size -Please use an easily readable font, such as Times Roman, Arial, Courier, or CG Times. The text and table portions of the application must be submitted in not less than a 12-point font and 1.0 line spacing. Applications not adhering to 12-point font requirements may be deemed non-responsive and returned. For charts, graphs, footnotes, and budget tables, applicants may use a different pitch or size font but not less than 10 pitch or size font. It is vital that the charts are legible when scanned or reproduced. (Required)*
- *Page numbering of the Proposal Application should be consecutive, beginning with page one and continuing through for each section. See sample table of contents in Section 5. (Required)*
- *Proposals may be submitted in a three ring binder. (Optional)*
- *3-hole punch all pages. (Required)*
- *Tabbing of sections. (Recommended).*
- *Applicants must also include a Table of Contents with the Proposal Application. A sample format is reflected in Section 5, Attachment “B” of this RFP. (Required)*
- *A written response is required for **each** item unless indicated otherwise. Failure to answer any of the items will impact upon an applicant’s score. (Required)*
- *Applicants are **strongly** encouraged to review evaluation criteria in Section 4, Proposal Evaluation when completing the proposal. (strongly encouraged)*
- *This form (SPOH-200A) is available on the SPO website (see 1.2 Website Reference). However, the form will not include items specific to each RFP. If using the website form, the applicant must include all items listed in this section. (Required)*

The Proposal Application is comprised of the following sections:

- *Proposal Application Identification Form*
- *Table of Contents*
- *Program Overview*
- *Experience and Capability*
- *Project Organization and Staffing*

- *Service Delivery*
- *Financial*
- *Other: attachments and worksheets*

3.1 Program Overview

(Not to exceed one page)

The applicant shall:

- Clearly identify which evidence-based home visiting model it is proposing;
- State the status of affiliation/accreditation/certification for its program as appropriate to the specific model being proposed;
- State the connections to community or plan for connecting to the community; and
- Describe how their program best fits the community served.

3.2 Experience and Capability

A. Necessary Skills Relevant to Home Visiting Services

(Not to exceed eight (8) pages)

The applicant shall demonstrate that it has the necessary skills, abilities, and knowledge relating to the delivery of the proposed services.

The applicant shall provide a description of experience in working with families in Hawaii with risk indicators such as Low Birth Weight, Infant Mortality, Poverty, High School Drop Out rate, Unemployment rate, Receiving Financial Aid, Receiving Food Stamps, Child Abuse and Neglect, Domestic Violence, Substance Abuse, and Mental Health issues.

The applicant shall provide the effective and end date of their affiliation, accreditation, or certification status.

HFA / HIPPY model programs applicants:

If Program is not accredited, the applicant shall submit their plan to become accredited.

PAT model programs applicants:

If Program has not received Parents as Teachers quality endorsement, the applicant shall submit their plan to achieve PAT quality endorsement.

B. Experience Relevant to Home Visiting Services

(Not to exceed nine (9) pages)

The applicant shall provide the dates of operation and description of recent (within five (5) years) projects/contracts pertinent to home visiting services. The applicant shall include current points of contact for the project/contract (when applicable) which includes their addresses, e-mail, and phone numbers. The DOH reserves the right to contact references to verify experience.

The applicant shall describe how the model addresses each of the following risk indicators: Low Birth Weight, Infant Mortality, Poverty, High School Drop Out rate, Unemployment rate, Receiving Financial Aid, Receiving Food Stamps, Child Abuse and Neglect, Domestic Violence, Substance Abuse, and Mental Health issues.

C. Continuous Quality Improvement and Evaluation
(Not to exceed eight (8) pages)

The applicant shall describe their plan for CQI, including team composition, meeting duration and frequency, and evaluation and methodology of CQI outcomes.

The applicant shall submit its Data Collection plan and description of how data is collected and reported for each DOH Benchmark construct including a description of the measurement tool the program will use and person(s) responsible for data collection, entry, and validation. See Attachment "E."

The applicant shall submit its Validation Plan that describes how data is validated and include the percentage of data that is validated. DOH requires that Programs validate at a minimum 20% of all data and recommends 50% or greater validation rate. The applicant's Validation Plan shall include the person(s) responsible for validation and the person(s) responsible for Validation Plan oversight.

The applicant shall also describe their Data Submission Plan for the method in which data shall be submitted to the State and the person responsible(s) for Data Submission Plan oversight.

The applicant shall agree to participate in the DOH CQI model and network process.

D. Coordination of Services
(Not to exceed five (5) pages)

The applicant shall demonstrate the capability to coordinate services with other agencies and resources in the community. The applicant shall describe its formal and informal agreements and relationships with other community resources and supports for the targeted geographic area. The applicant shall include points of contact, addresses, e-mail/phone numbers for these formal and informal agreements and relationships.

The applicant shall submit their plan for expanding community relationships and include the method for identifying and coordinating with newly established community resources.

The applicant shall provide a table showing current MOUs or other formal agreements with other home visiting providers and community resources. The applicant shall provide the number of increased MOUs or other formal agreements for each fiscal year of the contract period.

Current MOUs or formal agreements shall be made available to the State upon request.

E. Facilities

(Not to exceed one (1) page)

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the proposed services. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet American Disability Act requirements, as applicable, and the special equipment that may be required for the services.

3.3 Staffing and Project Organization

A. Staffing

(Not to exceed five (5) pages)

1. Proposed Staffing

The applicant shall describe the proposed staffing pattern, client/staff ratio, supervisor/staff ratio, and proposed caseload capacity appropriate for the evidence-based model being proposed and for the specific geographic area it will serve. (Refer to the personnel requirements in the Service Specifications, as applicable.)

The applicant shall denote whether the proposed staffing pattern is a minimal requirement for the evidence-based model, or if it is an enhancement (above the minimum) for the model. Staffing should reflect weekly home visits.

2. Staff Qualifications

The applicant shall provide the minimum qualifications (including experience) for staff assigned to the program. (Refer to the qualifications in the Service Specifications, as applicable)

B. Project Organization

(Not to exceed 8 pages)

1. Supervision and Training

The applicant shall describe its ability to supervise, train and provide administrative direction relative to the delivery of the proposed services.

The applicant shall provide a detailed Supervisory Plan which includes how administrative, clinical, and reflective supervision will be provided for each home visitor/parent educator. The plan shall also specify regularly scheduled and protected supervision and include the frequency and length of supervisory sessions and a plan for documenting administrative, clinical, and reflective supervision.

The Provider shall provide all full-time staff, volunteers, and interns (performing the same function) a minimum of one-and-a-half (1.5) hours per week of regularly scheduled individual supervision and part-time staff receive a minimum of one (1) hour per week of regularly scheduled individual supervision.

The applicant shall provide a detailed description of its training requirements for staff.

The applicant shall submit a Training Plan that shall include the following:

- 1) Requirements for accreditation/certification for its model;
- 2) Titles and description of training topics;
- 3) Duration and frequency; and
- 4) Stop-gap training measures when regularly scheduled training is not available.

Comprehensive training shall include, at minimum, basic training in areas of:

- 1) Orientation;
- 2) Child abuse and neglect reporting;
- 3) Intensive role specific training;
- 4) Ongoing training topics;
- 5) Screening and/or assessment tool;
- 6) Cultural sensitivity; and
- 7) Developmental screens

2. Organization Chart

The applicant shall reflect the position of each staff and full-time equivalency and line of responsibility/supervision. Include position title, name and full time equivalency.

The applicant shall include “Organization-wide” and “Program” organization charts and shall be attached to the Proposal Application.

3.4 Service Delivery

(Not to exceed 15 pages)

The applicant shall include a detailed discussion of their approach to applicable service activities and management requirements from Section 2, Item 2.4, Scope of Work, including (if indicated) a work plan of all service activities and tasks to be completed, related work assignments/responsibilities and timelines/schedules. (See Attachment “I,” the applicant may respond to this in their own format).

The applicant shall receive referrals for home visiting services from the Early Identification (EID) program. Potential home visiting participants must meet one (1) or more of the following eligibility criteria to qualify for HHVN home visiting services:

Criteria	Guidance
1) Have low incomes	Below Federal Poverty Guidelines for Hawaii.
2) Are pregnant women who have not attained age 21	Positive screen if mother is not age 21 within 60 days following birth.
3) Have a history of child abuse or neglect	Based on self-report, an enrollee who has a history of abuse or neglect or has had involvement with child welfare services either as a child or as an adult.

4) Have a history of substance abuse or need substance abuse treatment	Parent self-report of substance abuse within the last two (2) years. Parent self-report of substance abuse treatment within the last two (2) years.
5) Are users of tobacco products in the home	Parent self-report of users of tobacco products in the home.
6) Have, or have children with, low student achievement	Based on self-report, enrollees who have perceived themselves or their child(ren) as having low student achievement. Parent(s) that didn't receive a high school diploma or obtain a GED. Parent(s) that received a high school certificate of completion. Parent reports other child or children with low student achievement.
7) Have children with developmental delays or disabilities	Target child is born with disability. Genetic disabilities (e.g., Down's Syndrome). Target born prematurely (before 36 weeks). Older sibling(s) with developmental delays or disabilities.
8) Are in families that include individuals who are serving or formerly served in the Armed Forces, including such families that have members of the Armed Forces who have had multiple deployments outside of the United States	For this criterion, definition includes a military member's dependent acquired through marriage, adoption, or other action during the course of a member's current tour of assigned duty.

Additionally, the EID program shall screen all pregnant women within two (2) weeks of prenatal referral and families with newborns within the first two (2) weeks of the infant's birth utilizing a 15-Point Screening Tool.

Scoring: True/False/Unknown:

Participants must screen positive on the 15-Point Screen to be eligible for HHVN home visiting services. In this "true"/ "false" screening tool, a prospective participant shall automatically screen positive if items nine (9) or twelve (12) are true. Otherwise, two (2) or more "true" scores or seven (7) or more "unknowns" is a positive screen.

The EID program shall conduct a 15-Point screen on the following risk indicators:

Item	Guidance
1) Marital status	Score true for any situations other than married (e.g., divorce, separation, single, widowed, etc.)

2) Unemployed	Score true if partner is unemployed or mother is single-parent and unemployed
3) Inadequate income	Below Federal Poverty Guidelines for Hawaii
4) Unstable housing	Score true if family has relocated within the past six (6) months or have temporary living arrangements
5) No phone	No phone or no phone service or phone service has been terminated anytime within the past 6 months
6) Education under 12 years	Score true if parent(s) didn't receive a high school diploma or obtain a GED
7) Inadequate emergency contact	To score <u>false</u> , contact must be maternal or paternal parents, maternal or paternal siblings, or partner and the contact has to be within the state of Hawaii
8) History of Substance Abuse	On chart or self-reported within the last two (2) years
9) Late or no prenatal care (automatic positive screen)	13 weeks or after for first prenatal visit or have five (5) or less total visits
10) History of abortions	Two (2) or more sought in lifetime, or one (1) within the last 12 months
11) History of psychiatric care	On chart or self-reported
12) Abortion unsuccessfully sought or attempted (automatic positive screen)	On chart or self-reported
13) Relinquishment for adoption sought or attempted	On chart or self-reported
14) Marital or family problems	On chart or self-reported
15) History of or current depression	On chart or self-reported

Within the parameters of the specified evidence-based home visiting model, the applicant shall describe how weekly home visits will address the risk factors identified for the target population served and services to address health and safety.

The applicant shall provide a detailed description of who will conduct home visits, how these services are delivered, and what services are delivered in accordance with the specified evidence-based home visiting model.

3.5 Financial

A. Pricing Structure

Applicant shall submit a cost proposal utilizing the pricing structure designated by the state purchasing agency. The cost proposal shall be attached to the Proposal Application.

All budget forms: SPOH-205, SPOH-205A, SPOH-205B, SPOH-206A, SPOH-206B, SPOH-206C, SPOH-206D, SPOH-206E, SPOH-206F, SPOH-206G, SPOH-206H, SPOH-206I, SPOH-20J. Instructions and samples are located on the SPO website. (See subsection 1.2, Websites References for website address.) The following budget form(s) shall be submitted with the Proposal Application:

Attachment "J": MCHB Budget form for applicant to propose the number of participants per year, average per month, cost per participant, and direct service hours per month).

B. Other Financial Related Materials

Accounting System

To determine the adequacy of the applicant's accounting system as described under the administrative rules, the following documents are requested as part of the Proposal Application (may be included as an attachment):

Please attach most recent financial audit report.

3.6 Other.

A. Litigation

The applicant shall disclose and explain any pending litigation to which they are a party, including the disclosure of any outstanding judgment.

Section 4

Proposal Evaluation

Section 4 Proposal Evaluation

4.1 Introduction

The evaluation of proposals received in response to the RFP will be conducted comprehensively, fairly and impartially. Structural, quantitative scoring techniques will be utilized to maximize the objectivity of the evaluation.

4.2 Evaluation Process

The procurement officer or an evaluation committee of designated reviewers selected by the head of the state purchasing agency or procurement officer shall review and evaluate proposals. When an evaluation committee is utilized, the committee will be comprised of individuals with experience in, knowledge of, and program responsibility for program service and financing.

The evaluation will be conducted in three phases as follows:

- Phase 1 - Evaluation of Proposal Requirements
- Phase 2 - Evaluation of Proposal Application
- Phase 3 - Recommendation for Award

Evaluation Categories and Thresholds

<u>Evaluation Categories</u>	Possible Points
<i>3.1 Program Overview</i>	0
<i>3.2 Experience and Capability</i>	-
Necessary Skills	4
Experience Relevant to Home Visiting Services	5
Continuous Quality Improvement and Evaluation	-
Applicant's Continuous Quality Improvement Plan	5
Sufficiency of CQI and evaluation plans for the proposed services, including methodology.	5
Data Collection Plan describes measurement tool and persons responsible for each DOH Benchmark (Attachment "D").	5
Validation Plan. Percentage above 20% and persons responsible for 1) Data Validation, 2) Validation Plan oversight.	5
Data Submission Plan describes method and person responsible for oversight.	2
Coordination of Services	5
Facilities	1
<i>3.3 Staffing and Project Organization</i>	-

Staffing	-
Proposed Staffing	8
Staff Qualifications	2
Project Organization	-
Supervision and Training: Demonstrated ability to supervise, train and provide administrative direction to staff relative to the delivery of the proposed services.	7
Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the overall service activity and tasks. Includes "Organization-wide" and "Program" organizational charts.	3
<i>3.4 Service Delivery</i>	-
Approach for developing a service plan.	10
Plan for conducting home visits.	10
Capacity Goal & Date of Achievement.	3
Plan for conducting home visits according to model standards and practices.	10
Plan for providing services to address health and safety.	5
<i>3.5 Financial</i>	5
Total Points	100

A 5-point rating scale will be used to rate the proposal content. Only whole numbers will be assigned (1, 2, 3, 4, 5), half numbers are not utilized in this rating scale.

Consensus scoring will be used by an evaluation committee to review the proposals using the following scale:

5 – Outstanding (100% of points)

The applicant exceeded required elements by clearly proposing additional services or strategies, providing details and specific examples, or implementation to achieve the RFP requirements.

4 – Very Good (80% of points)

The applicant provided details or specific examples of the services or strategies to be used for implementation to achieve the RFP requirements.

3 – Good (60% of points)

The applicant provided general descriptions for all required elements or the proposed services.

2 – Fair (40% of points)

Not all components were evident or the applicant's response only reiterated or paraphrased the wording of the RFP or other attached materials.

1 – Poor (20% of points)
Deficiencies were identified.

0 – Unresponsive or no response given.
The applicant provided no response.
The applicant’s response did not answer the question.

Points will be determined by multiplying evaluator scores for each criterion by the percentage of points possible indicated above to yield a weighted score.

Example:

A question worth two (2) points that received a score of four (4) will be awarded 1.2 points (80% x 2 points = 1.2 points).

4.3 Evaluation Criteria

A. Phase 1 - Evaluation of Proposal Requirements

1. Administrative Requirements
2. Proposal Application Requirements
 - Proposal Application Identification Form (Form SPOH-200)
 - Table of Contents
 - Program Overview
 - Experience and Capability
 - Project Organization and Staffing
 - Service Delivery
 - Financial (All required forms and documents)
 - Program Specific Requirements (as applicable)

B. Phase 2 - Evaluation of Proposal Application

Program Overview: No points are assigned to Program Overview. The intent is to give the applicant an opportunity to orient evaluators to the service(s) being offered.

Page Limit	Evaluation	Max Points
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3.2 Experience and Capability

8	A. Necessary Skills	4
	Specific skills, abilities, and knowledge relating to the delivery of the proposed services.	
	Affiliation / accreditation or plan to become accredited.	

9	B. Experience Relevant to Home Visiting Services	5
	Dates of operation and description of recent HV-related projects.	
	Current Points of Contacts for projects (addresses, e-mail, & telephone).	
	Applicants describe how <u>model</u> addresses each of the risk indicators: <div style="text-align: center;"> <p>Low Birth Weight, Infant Mortality, Poverty, High School Drop Out rate, Unemployment rate, Receiving Financial Aid, Receiving Food Stamps, Child Abuse and Neglect, domestic violence, substance abuse, and mental health issues.</p> </div>	
8	C. Continuous Quality Improvement and Evaluation	
	Applicant's Continuous Quality Improvement Plan	5
	Sufficiency of CQI and evaluation plans for the proposed services, including methodology.	5
	Data Collection Plan describes measurement tool and persons responsible for each DOH Benchmark (Attachment "E").	5
	Validation Plan. Percentage above 20% and persons responsible for 1) Data Validation, 2) Validation Plan oversight.	5
	Data Submission Plan describes method and person responsible for oversight.	2
4	D. Coordination of Services	5
	Demonstrated capability to coordinate services with other agencies and resources in the community.	
	Provided formal and informal agreements and relationships with specified community and includes points of contact, addresses, e-mail, and phone numbers.	
	Plan for identifying new community resources and for expanding community relationships.	
	Table showing current MOUs or other formal agreements.	
	Provides number of increased MOUs or other formal agreements per each fiscal year.	

E. Facilities

1	Adequacy of facilities relative to the proposed services.	1
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3.3 Staffing and Project Organization

5	Staffing	
	<u>Proposed Staffing:</u> That the proposed staffing pattern, client/staff ratio, and proposed caseload capacity is reasonable to insure viability of the services.	8
	<u>Staff Qualifications:</u> Minimum qualifications (including experience) for staff assigned to the program.	2
8	Project Organization	
	Supervision and Training: Demonstrated ability to supervise, train and provide administrative direction to staff relative to the delivery of the proposed services.	7
	Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the overall service activity and tasks. Includes "Organization-wide" and "Program" organizational charts.	3

15 3.4 Service Delivery

	Approach for developing a service plan.	10
	Plan for conducting home visits.	10
	Capacity Goal & Date of Achievement.	3
	Plan for conducting home visits according to model standards and practices.	10
	Plan for providing services to address health and safety.	5

3.5 Financial

5

Adequacy of accounting system.

Applicant's proposal budget is reasonable, given program resources and operational capacity.

C. Phase 3 - Recommendation for Award

Each notice of award shall contain a statement of findings and decision for the award or non-award of the contract to each applicant.

Section 5

Attachments

- A. **Proposal Application Checklist**
- B. **Sample Proposal Table of Contents**
- C. **HV Output Measures and Sample HV Monthly Report**
- D. **Hawaii Home Visiting Network Policy and Procedures**
- E. **DOH Benchmarks**
- F. **Tool Kit**
- G. **Interpersonal Relationships memo**
- H. **Billing Definitions**
- I. **Work Plan**
- J. **MCHB Cost Proposal form and sample invoice**
- K. **Certifications**

Proposal Application Checklist

Applicant: _____ RFP No.: _____

The applicant's proposal must contain the following components in the order shown below. Return this checklist to the purchasing agency as part of the Application.

Item	Reference in RFP	Format/Instructions Provided	Required by Purchasing Agency	Place "X" for items included in Proposal
General:				
Proposal Application Identification Form (SPOH-200)	Section 1, RFP	SPO Website*	X	
Proposal Application Checklist	Section 1, RFP	Attachment "A"	X	
Table of Contents	Section 5, RFP	Attachment "B"	X	
Proposal Application (SPOH-200A)	Section 3, RFP	SPO Website*	X	
Hawaii Compliance Express Verification Certificate	Section 1, RFP	Hawaii Compliance Express SPO Website*	X	
Cost Proposal (Budget)	Attachment "J"		X	
SPO-H-205	Section 3, RFP	SPO Website*	X	
SPO-H-205A	Section 3, RFP	SPO Website*	X	
SPO-H-205B	Section 3, RFP,	SPO Website*	X	
SPO-H-206A	Section 3, RFP	SPO Website*	X	
SPO-H-206B	Section 3, RFP	SPO Website*	X	
SPO-H-206C	Section 3, RFP	SPO Website*	X	
SPO-H-206D	Section 3, RFP	SPO Website*	X	
SPO-H-206E	Section 3, RFP	SPO Website*	X	
SPO-H-206F	Section 3, RFP	SPO Website*	X	
SPO-H-206G	Section 3, RFP	SPO Website*	X	
SPO-H-206H	Section 3, RFP	SPO Website*	X	
SPO-H-206I	Section 3, RFP	SPO Website*	X	
SPO-H-206J	Section 3, RFP	SPO Website*	X	
Certifications:				
<i>Federal Certifications</i>				
Debarment & Suspension	Section 5, RFP	Attachment "K"	X	
Drug Free Workplace	Section 5, RFP	Attachment "K"	X	
Lobbying	Section 5, RFP	Attachment "K"	X	
Program Fraud Civil Remedies Act	Section 5, RFP	Attachment "K"	X	
Environmental Tobacco Smoke	Section 5, RFP	Attachment "K"	X	
Program Specific Requirements:				

*Refer to subsection 1.2, Website Reference for website address.

**Proposal Application
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7.0 Attachments

 A. Hawaii Compliance Express Verification Certificate

 B. Cost Proposal

 SPOH-205 Proposal Budget

 SPOH-205A-Budget - Organization-Wide Budget By Source of Funds

 SPOH-205B-Budget - Organization-Wide Budget by Programs

 SPOH-206A-Budget Justification - Personnel: Salaries & Wages

 SPOH-206B-Budget Justification - Personnel: Payroll Taxes and Assessments,
 and Fringe Benefits

 SPOH-206C-Budget Justification - Travel: Interisland

 SPOH-206D- Budget Justification - Travel-Out-of-State

 SPOH-206E-Budget Justification - Contractual Services – Administrative

 SPOH-206F-Budget Justification - Contractual Services-Subcontracts

 SPOH-206G- Budget Justification - Depreciation

 SPOH-206H-Budget Justification - Program Activities

 SPOH-206I-Budget Justification - Equipment Purchases

 SPOH-206J- Budget Justification - Motor Vehicle

 B. Other Financial Related Materials

 Financial Audit for fiscal year ended June 30, 2014

Organization: _____
RFP No: _____

- C. Organization Chart
 - Program
 - Organization-wide
- D. Performance and Output Measurement Tables
 - Table A
 - Table B
 - Table C
- E. Certifications
- F. Program Specific Requirements