

State of Hawaii  
Department of Health  
Child and Adolescent Mental Health Division

## **Request for Proposals**

**RFP No. 460-08-07**

### **Mental Health Supports for Homeless Children and Families**

September 12, 2008

Note: If this RFP was downloaded from the State Procurement Office RFP Website each applicant must provide contact information to the RFP contact person for this RFP to be notified of any changes. For your convenience, you may download the [RFP Interest form](#), complete and e-mail or mail to the RFP contact person. The State shall not be responsible for any missing addenda, attachments or other information regarding the RFP if a proposal is submitted from an incomplete RFP.

September 12, 2008

## REQUEST FOR PROPOSALS

### MENTAL HEALTH SUPPORTS FOR HOMELESS CHILDREN AND FAMILIES

#### RFP NO. HTH 460-08-07

The Department of Health, Child and Adolescent Mental Health Division, is requesting proposals from qualified applicants to provide mental health support services to homeless children and families. For purposes of this RFP, **Homeless children and youth** are defined as any person up to 21 years of age, who lack a fixed, regular and adequate nighttime residence. These include those who live in motels, hotels, beaches or camping grounds due to the lack of alternative adequate accommodations, are in other temporary living situations, or are sharing the housing of others; and **Rural** is defined as outside urban Honolulu.

CAMHD is seeking to fund one or two innovative projects designed to enhance and complement existing services. Applicants are encouraged to propose projects that address the mental health needs of existing service populations. Proposals which leverage resources and propose cost-efficient strategies will be favorably reviewed. Services may include the provision of (or contracting for) mental health services, addressing immediate needs, coordination of services, linkages to medical/dental/health services, and support services. The proposed contract term will be from December 1, 2008 through July 31, 2009 and renewable for additional terms. Multiple contracts may be awarded under this request for proposals.

Proposals shall be mailed and postmarked by the United State Postal Service on or before October 14, 2008, or hand delivered no later than 4:00 p.m., Hawaii Standard Time (HST), on October 14, 2008, at the drop-off sites 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 Child and Adolescent Mental Health Division will conduct an orientation on September 19, 2008 from 1:00 p.m. to 3:00 p.m. HST, at 3627 Kilauea Avenue, Room 108, Honolulu, Hawaii. All prospective applicants are encouraged to attend the orientation.

The deadline for submission of written questions is 4:00 p.m., HST, on September 26, 2008. All written questions will receive a written response from the State on or about October 1, 2008.

Inquiries regarding this RFP should be directed to the RFP contact person, Mr. John MacDonald, Contract Management Specialist, at 3627 Kilauea Avenue, Honolulu, Hawaii 96816, telephone: (808) 733-9338, fax: (808) 733-9207, e-mail: [jamacdon@camhmis.health.state.hi.us](mailto:jamacdon@camhmis.health.state.hi.us).

## PROPOSAL MAIL-IN AND DELIVERY INFORMATION SHEET

**NUMBER OF COPIES TO BE SUBMITTED: 1 Original and 3 Copies**

**ALL MAIL-INS SHALL BE POSTMARKED BY THE UNITED STATES POSTAL SERVICE (USPS) NO LATER THAN October 14., 2008 and received by the state purchasing agency no later than 10 days from the submittal deadline.**

**All Mail-ins**

Department of Health  
Child and Adolescent Mental Health  
Division  
3627 Kilauea Avenue, Room 101  
Honolulu, Hawaii 96816

**DOH RFP COORDINATOR**

**John MacDonald**  
For further info. or inquiries  
  
Telephone: (808) 733-9338  
Fax: (808) 733-9207  
Email:  
jamacdon@camhmis.health.state.hi.us

**ALL HAND DELIVERIES SHALL BE ACCEPTED AT THE FOLLOWING SITES UNTIL 4:00 P.M., Hawaii Standard Time (HST), October 14, 2008.** Deliveries by private mail services such as FEDEX shall be considered hand deliveries. Hand deliveries shall not be accepted if received after 4:00 P.M., October 14, 2008.

**Drop-off Sites**

**Oahu:**

Department of Health  
Child and Adolescent Mental Health Division  
3627 Kilauea Avenue, Room 101  
Honolulu, Hawaii 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.**

### I. Procurement Timetable

**Note that the procurement timetable represents the State's best estimated schedule. Contract start dates may be subject to the issuance of a notice to proceed.**

<b>Activity</b>	<b>Scheduled Date</b>
Public notice announcing RFP	<u>September 12, 2008</u>
Distribution of RFP	<u>September 12, 2008</u>
RFP orientation session	<u>September 19, 2008</u>
Closing date for submission of written questions for written responses	<u>September 26, 2008</u>
State purchasing agency's response to applicants' written questions	<u>October 1-2, 2008</u>
Discussions with applicant prior to proposal submittal deadline (optional)	<u>September 26- October 3, 2008</u>
Proposal submittal deadline	<u>October 14, 2008</u>
Discussions with applicant after proposal submittal deadline (optional)	<u>October 15 – 22, 2008</u>
Final revised proposals (optional)	<u>October 24, 2008</u>
Proposal evaluation period	<u>October 27 - 29, 2008</u>
Provider selection	<u>October 30, 2008</u>
Notice of statement of findings and decision	<u>October 31, 2008</u>
Contract start date	<u>December 1, 2008</u>

## II. Website Reference

The State Procurement Office (SPO) website is [www.spo.hawaii.gov](http://www.spo.hawaii.gov)

	For	Click
1	Procurement of Health and Human Services	“Health and Human Services, Chapter 103F, HRS...”
2	RFP website	“Health and Human Services, Ch. 103F...” and “The RFP Website” (located under Quicklinks )
3	Hawaii Administrative Rules (HAR) for Procurement of Health and Human Services	“Statutes and Rules” and “Procurement of Health and Human Services”
4	Forms	“Health and Human Services, Ch. 103F...” and “For Private Providers” and “Forms”
5	Cost Principles	“Health and Human Services, Ch. 103F...” and “For Private Providers” and “Cost Principles”
6	Standard Contract -General Conditions	“Health and Human Services, Ch. 103F...” “For Private Providers” and “Contract Template – General Conditions”
7	Protest Forms/Procedures	“Health and Human Services, Ch. 103F...” and “For Private Providers” and “Protests”

### 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 [www.hawaii.gov](http://www.hawaii.gov))

	For	Go to
8	Tax Clearance Forms (Department of Taxation Website)	<a href="http://www.hawaii.gov/tax/">http://www.hawaii.gov/tax/</a> click “Forms”
9	Wages and Labor Law Compliance, Section 103-055, HRS, (Hawaii State Legislature website)	<a href="http://www.capitol.hawaii.gov/">http://www.capitol.hawaii.gov/</a> click “Bill Status and Documents” and “Browse the HRS Sections.”
10	Department of Commerce and Consumer Affairs, Business Registration	<a href="http://www.hawaii.gov/dcca">http://www.hawaii.gov/dcca</a> click “Business Registration”
11	Campaign Spending Commission	<a href="http://www.hawaii.gov/campaign">www.hawaii.gov/campaign</a>
12	Hawaii Compliance Expense	<a href="http://www.spo.hawaii.gov/">http://www.spo.hawaii.gov/</a> SPO (located under Quicklinks)

## III. 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.

#### **IV. 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 applicant 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.

#### **V. 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:

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##### **Child and Adolescent Mental Health Division**

**Department of Health**

**3627 Kilauea Avenue, Room 101, Honolulu, Hawaii 96816**

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**John MacDonald**

Phone (808) **733-9338**

Fax: (808) **733-9207**

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#### **VI. Orientation**

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

**Date:** September 19, 2008 **Time:** 1:00 P.M. to 3:00 P.M.

**Location:** 3627 Kilauea Avenue, Room 108, Honolulu, Hawaii 96816

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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 next paragraph (VII. Submission of Questions).

## VII. Submission of Questions

Applicants may submit questions to the RFP Contact Person identified in Section 2 of this RFP. All written questions will receive a written response from the state purchasing agency.

Deadline for submission of written questions:

**Date:** September 26, 2008      **Time:** 4:00 P.M. HST

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

**Date:** On or about October 1, 2008

## VIII. Submission of Proposals

A. **Forms/Formats** - Forms, with the exception of program specific requirements, may be found on the State Procurement Office website (See page 1-2, Websites Referred to in this RFP. Refer to the Proposal Application Checklist for the location of program specific forms.

1. **Proposal Application Identification (Form SPO-H-200)** - Provides identification of the proposal.
2. **Proposal Application Checklist** – Provides applicants with information on where to obtain the required forms; information on program specific requirements; which forms are required and the order in which all components should be assembled and submitted to the state purchasing agency.
3. **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.
4. **Proposal Application (Form SPO-H-200A)** - Applicant shall submit comprehensive narratives that addresses all of the issues contained in the Proposal Application Instructions, including a cost proposal/budget if required. (Refer to Section 3 of this RFP.)

- B. Program Specific Requirements** - Additional program specific requirements are included in Sections 2 and/or 3, Service Specifications and the Proposal Application Instructions, as applicable. If Federal and/or State certifications are required, they are listed on the Proposal Application Checklist located in Section 5.
- C. Multiple or Alternate Proposals** - Multiple or alternate proposals shall not be accepted unless specifically provided for in Section 2 of this RFP. 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.
- D. Tax Clearance** – A certified copy of a current valid tax clearance certificate issued by the State of Hawaii, Department of Taxation (DOTAX) and the Internal Revenue Service (IRS) will be required either at the time of proposal submittal or upon notice of award at the discretion of the purchasing agency.

Refer to Section 4, subparagraph III.A.1, Administrative Requirements, and the Proposal Application Checklist (located in Section 5) to determine whether the tax clearance is required at time of proposal submittal for this RFP. Tax clearance application may be obtained from the Department of Taxation website. (See paragraph II, Website Reference.)

- E. Wages and Labor Law Compliance** - Before a provider enters into a service contract in excess of \$25,000, the provider shall certify that it complies with section 103-55, HRS, Wages, hours, and working conditions of employees of providers performing services. Section 103-55, HRS may be obtained from the Hawaii State Legislature website. (See paragraph II, Website Reference.)
- **Compliance with all Applicable State Business and Employment Laws.** All providers shall comply with all laws governing entities doing business in the State. 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 be register and in good standing with the Department of Commerce and Consumer Affairs (DCCA), Business Registration Division. Foreign insurance companies must register with DCCA, Insurance Division. More information is on the DCCA website. (See paragraph II, Website Reference.)

- F. Hawaii Compliance Express (HCE).** Providers may register with HCE for online proof of DOTAX and IRS tax clearance, Department of Labor and Industrial Relations (DLIR) labor law compliance, and DCCA good standing compliance. There is a nominal annual fee for the service. The “Certificate of Vendor Compliance” issued online through HCE 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 this section’s part II. Website Reference for HCE’s website address.
- G. Campaign Contributions by State and County Contractors.** Contractors are hereby notified of the applicability of Section 11-205.5, HRS, which states that campaign contributions are prohibited from specified State or county government contractors during the term of the contract if the contractors are paid with funds appropriated by a legislative body. For more information, Act 203/2005 FAQs are available at the Campaign Spending Commission webpage. (See paragraph II, Website Reference.)
- H. 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.**

- I. 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. 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. Proposals shall be rejected when:
- Postmarked after the designated date; or
  - Postmarked by the designated date but not received within 10 days from the submittal deadline; or
  - 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 mail services such as FEDEX shall be considered hand deliveries and shall be rejected if

received after the submittal deadline. Dated USPS shipping labels are not considered postmarks.

## **IX. 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 section 3-143-403, HAR.

## **X. Opening of Proposals**

Upon receipt of proposal by a state purchasing agency 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.

## **XI. Additional Materials and Documentation**

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

## **XII. RFP Amendments**

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

## **XIII. 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 best and final offer/proposal. *The applicant shall submit **only** the section(s) of the proposal that are amended, along with the Proposal Application Identification Form (SPO-H-200).* After final revised proposals are received, final evaluations will be conducted for an award.

#### **XIV. Cancellation of Request for Proposal**

The request for proposal 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 interests of the State.

#### **XV. Costs for Proposal Preparation**

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

#### **XVI. Provider Participation in Planning**

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

#### **XVII. 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: (Relevant sections of the Hawaii Administrative Rules for Chapter 103F, HRS, are parenthesized)

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

## **XVIII. Notice of Award**

A statement of findings and decision shall be provided to all applicants 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 awardee prior to the contract commencement date. The State of Hawaii is not liable for any costs incurred prior to the official starting date.

## **XIX. Protests**

Any applicant may file a protest against the awarding of the contract. The Notice of Protest form, SPO-H-801, is available on the SPO website. (See paragraph II, Website Reference.) 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.

<b>Head of State Purchasing Agency</b>	<b>Procurement Officer</b>
Name: Chiyome Leinaala Fukino, M.D.	Name: M. Stanton Michels, M.D.
Title: Director, Department of Health	Title: CAMHD Administrator
Mailing Address: P.O. Box 3378, Honolulu, Hawaii 96801	Mailing Address: 3627 Kilauea Avenue, Room 101 Honolulu, Hawaii 96816
Business Address: Same as Above	Business Address: Same as Above

**XX. Availability of Funds**

The award of a contract and any allowed renewal or extension thereof, is subject to the availability of federal children's mental health block grant funds.

**XXI. General and Special Conditions of Contract**

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

**Other Relief Available to CAMHD**

The contract resulting from this RFP will contain a clause stipulating that if the PROVIDER is in non-compliance with contract requirements the CAMHD may:

1. Temporarily withhold/disallow all or part of the billing costs/payments pending correction of a deficiency or a non-submission of a required report by the Provider.
2. Temporarily suspend operations pending correction of a deficiency or non-compliance with the requirements of this RFP and other term(s) and/or conditions(s) of the contract.
3. Seek reimbursement of any funds paid to the Provider subsequent to a determination that such payment was unauthorized, fraudulently obtained, or inappropriately billed.

**XXII. Cost Principles**

In order to promote uniform purchasing practices among state purchasing agencies procuring health and human services under Chapter 103F, HRS, state purchasing agencies will utilize standard cost principles outlined in Form SPO-H-201 which is available on the SPO website (see paragraph II, Website Reference). 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

### I. Introduction

The Hawaii Revised Statutes (321-171-177) require the Child and Adolescent Mental Health Division (CAMHD) to coordinate the effective and efficient delivery of mental health services to children and youth, including services provided by private nonprofit agencies under contract to the Department of Health, and to be responsible for the development and implementation of centralized and highly specialized programs for children and youth.

The Department of Health receives federal block grant funds from the Substance Abuse and Mental Health Services Administration under the Community Mental Health Services (CMHS) Block Grant program. Title II of Public Law 102-321 establishes a Block Grant for Community Mental Health Services administered by CMHS, which permits the allocation of funds to States for the provision of community mental health services. Each year the CAMHD develops, in collaboration with the State Council on Mental Health, a state plan for the provision of children's mental health services as identified in its application for federal block grant funds.

This children's mental health state plan is developed in accordance with federal law (106-310), which requires the submission of an annual plan in order to qualify for federal funding in the area of community mental health services. The focus of the Community Mental Health Services Block Grant program, as administered by the CMHS is the strengthening of state community-based mental health services. The CAMHD's state plan as submitted in application for this grant is consistent with the focus and vision to strengthen state community-based mental health services. The CAMHD's system of care is based on the Hawaii Child and Adolescent Service System Program (CASSP) principles (See Section 5, Attachment E), requiring that the system be family and child-centered, with the delivery of services, programs and placements in the least restrictive setting for the individual and family.

For FY 2009-2010 CAMHD plans to use the block grant funds to support one or more innovative programs that promote the mental health of homeless children and their families.

#### A. Overview, purpose or need

In the U.S., over one-fourth of the homeless population is children. Forty-two percent of these children are under the age of five. Over the course of a year, as many as 1.4 million children experience homelessness. The literature on the health of homeless children documents learning disabilities, behavior disorders and emotional problems. Research suggests that persistent homelessness amplifies mental health risks.

The experience of homelessness results in a loss of community, routines, possessions, privacy, and security. For youth, homelessness can create a loss of stability, disruption in education, increased food insecurity, and increased exposure to disease, violence and substance abuse. Anxiety, loss of sleep, frequent illness and hunger can contribute to learning disabilities. These conditions can trigger or exacerbate emotional problems in children.

#### Childhood Worries:

- 74% of homeless children worry they will have no place to live
- 58% worry they will have no place to sleep
- 87% worry that something bad will happen to their family

#### Homelessness affects cognitive and emotional development:

- Homeless babies show significantly slower development than other children.
- More than 20% of homeless children between the ages of 3 and 6 have emotional problems serious enough to require professional care
- By the time homeless children are 8 years old, one in three has a major mental disorder
- About half of homeless school-age children have significant mental health problems including anxiety, depression, posttraumatic stress disorder (PTSD), suicide ideation and substance abuse disorders
- Less than one-third of homeless children receive mental health treatment

#### Additionally,

- Homeless children go hungry at twice the rate of other children
- 25% have witnessed acts of violence in their families
- Homeless children experience physical and sexual abuse at two to three times the rate of other children
- Homeless children are separated from their family to be put in foster care at higher rates than other children (12% vs. 1%)

#### Trauma in the Lives of Homeless Youth

Rates of abuse among homeless youth vary widely across studies, ranging from 17%-35% for sexual abuse and 40%-60% for physical abuse and neglect. Two studies conducted for the U.S. Department of Human Services found 46% of runaway and homeless youth reported being physically abused, 17% reported being sexually exploited, and 38% reported being emotionally abused. The National Center on Family Homelessness estimates that 35% of homeless children have been the subject of a child protection investigation and 24% have witnessed acts of violence within their family.

Youth who take to the streets are vulnerable to further victimization by predatory adults, criminals, pimps and other street youth. They may be exploited or become victims of street violence or members of gangs which

provide protection and a sense of family. They may be drawn into criminal activity or illicit sex in order to earn money for food, shelter, clothing and other basic needs. They often drop out of school, forfeiting their opportunities to learn and to become independent, self-sufficient, contributing members of society. In one study, 43% of homeless adolescent males and 39% of adolescent females reported being assaulted with a weapon while living on the streets. Youth identifying as gay, lesbian, bisexual, transgender or questioning (GLBTQ) will experience 7.4 more acts of sexual violence than other homeless youth.

The situations for homeless youth can appear hopeless. One survey found that 25% of youth in shelters and 32% of those on the street had attempted suicide. GLBTQ youth are more than twice as likely to attempt suicide as their heterosexual peers. The stresses associated with homelessness can exacerbate other trauma-related difficulties and interfere with trauma recovery.

Homeless children frequently survive with little or no contact with medical professionals, and as a result, their health problems may go untreated and worsen. Their emotional and behavioral health issues are typically not addressed. Without the intervention and support of community institutions, these youth may not acquire the personal and work skills that will enable them to become self-sufficient and independent. The end result for homeless children and youth is that without adequate intervention, supports and services, there may be long term health and emotional/behavioral problems.

Therefore, the CAMHD seeks to support one or more innovative programs to promote the mental health of homeless children and their families in rural areas. Services and supports may also be provided to the families of the children.

### **Innovative Program to Improve the Mental Health of Homeless Children**

Applicants are invited to propose innovative services to complement existing programs. The strategies must be designed to improve the mental health of homeless children and may include supports to their families. Proposals which leverage

#### Discussion of “complementary” services

According to the online Merriam-Webster dictionary, “complementary” can be defined as: mutually supplying each other's lack.

In the RFP, CAMHD is soliciting proposals from agencies that have an established commitment to serve the target population, and expects the proposed services to complement the agency’s existing programs/services. In the fictional Example 1 below, Need #4 states: “Homeless children are often hungry.” The fictional agency’s proposed service of assisting families apply for the Free or Reduced Lunch program supplements the agency’s existing food pantry. The free/reduced lunches at school complement the food pantry’s canned goods that supply the family’s dinner needs.

resources and propose cost-efficient strategies will be favorably reviewed. For example, a proposal might include hiring a mental health counselor under a joint agreement that allocates the professional's time and costs among multiple agencies.

Applicants must provide a statement of need identifying the needs of the target population and the program rationale for linking the needs with existing and proposed services to improve mental well-being among the family members. Applicants shall provide measurable targets, such as number of children and families served.

Two examples of the program rationale logic model are provided below. **These examples are for illustrative purposes only and are not, in any way, reflective of CAMHD's final selection decisions.**

Example 1. Homeless children struggle in school.

Need	Existing Program	Proposed Service
1. Unruly behavior or emotional withdrawal is often the earliest response of young children to the crisis of homelessness		<ul style="list-style-type: none"> <li>▪ Establish a behavioral screening and assessment program at the XYZ homeless shelter</li> <li>▪ Facilitate access to the DOE School Based Behavioral Health program for # children with identified needs</li> </ul>
2. Homeless children have more academic problems than other children; homeless children are under-served by special education		<ul style="list-style-type: none"> <li>▪ Facilitate access to the DOE CSSS for # children with identified needs</li> <li>▪ Serve as a child and family advocate on # IEP and # CSP Teams</li> </ul>
3. Lack of academic and medical records creates obstacles to registration	Assist # families with MedQUEST applications	<ul style="list-style-type: none"> <li>▪ Assist # families with finding a Primary Care Physician</li> <li>▪ Provide # families with transportation to medical appointment to secure the required immunizations and Form 14 for school entry</li> <li>▪ Assist families with establishing DOE "proof of current address" or "best interest" school placements</li> </ul>
4. Homeless children are often hungry	Agency Food Pantry	<ul style="list-style-type: none"> <li>▪ Assist # families with Free or Reduced Lunch Program applications</li> </ul>
5. Daily demands of finding food and shelter	Agency Food Pantry	<ul style="list-style-type: none"> <li>▪ Agency will develop 1 mobile lending library of books and</li> </ul>

<p>can push children’s educational needs aside</p>		<p>educational toys</p> <ul style="list-style-type: none"> <li>▪ Agency will develop a once-a-week story time/study hour with volunteer staff to serve as story tellers and tutors</li> <li>▪ Provide at least 6 educational workshops for parents on topics such as child development; positive discipline, “Interacting with your Toddler”, “8 Study Habits for Highly Successful Students”, etc.</li> </ul>
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Example 2:

Need	Existing Program	Proposed Service
<p>1. Exposure and initiation into the “street” life places youth at risk for victimization and subsequent mental health problems</p>	<p>Agency outreach to runaway youth</p>	<p>Agency will provide training to outreach workers to increase their skills in motivational interviewing to increase their effectiveness in encouraging youth to make healthy choices</p>
<p>2. Runaway youth who are not attending school are not accessing or being identified for DOE School-Based Behavioral Health services</p>		<p>Establish a work group with DOE-SBBH, DOH-CAMHD, mental health providers ABC and XYZ, and the police department to problem-solve these issues.</p>

**B. Planning activities conducted in preparation for this RFP**

CAMHD conducted a Request for Information on June 10, 2008.

**C. Description of the goals of the service**

**Innovative Programs to Promote the Mental Health of Homeless Children and Youth**

The goal of the Innovative Program is to promote the mental health of homeless children and youth. The specific outcomes for each innovative program will be dependent on the individual proposal. Applicants will be required to identify program-specific goals, objectives and outcomes in their proposals. Final goals, objectives and outcomes will be negotiated and agreed upon by CAMHD after final selection.

**Trauma-Informed Care**

Many of the homeless population, adults and children, struggle to recover from both previous and new traumatic experiences. Providers are encouraged to

provide trauma-informed care. Strategies to promote trauma-informed care include:

- Identify and address agency policies and procedures that could retraumatize by inadvertently causing people to relive their traumatic experiences before they have the knowledge and skills to cope.
- Offer assistance with no strings attached.
- Consider the person's behavior in the context of their life experiences, including traumatic life experiences.
- Prioritize children's and families immediate needs. Persons with unmet primary needs may have difficulty focusing on forming trusting relationships with service providers.
- During assessment, determine the youth's strengths and talents, rather than focusing only on problems and deficits.
- Allow homeless persons to make their own choices whenever possible.
- Assess the individual's cognitive abilities so that appropriate language can be used for better understanding.
- Tailor interactions and services to the individual needs of each person.
- Recognize that people may have co-occurring disorders and other mental health problems that need to be addressed.

(see: The National Child Traumatic Stress Network. (2007). Trauma Among Homeless Youth (Culture and Trauma Brief, Volume 2, No. 1). Available at [www.NCTSN.org](http://www.NCTSN.org))

#### **D. Definitions**

Homeless children and youth are defined as any person up to 21 years of age, who lacks a fixed, regular and adequate nighttime residence. These include those who live in motels, hotels, beaches or camping grounds due to the lack of alternative adequate accommodations, are in other temporary living situations, or are sharing the housing of others.

Runaways are youth under 18 who are away from home at least one night without permission of parent or guardian.

Throwaways have been told or forced to leave home or deserted by parents or guardians.

Basic Needs – food, clothing, school/work supplies, educational toys and other basic needs provided to youth without conditions

Emergency Shelter (less than 160 days) – immediate housing provided on a first-come, first-served basis

Drop-In Center – a place with regular operating hours for youth to meet with professional staff, get their basic needs met, and/or engage in other agency services

Recreation and Support Groups – regularly held groups for the purpose of relationship building and/or mental health support

Medical/Dental/Health Services – Professional medical or health services by a doctor, dentist, dental hygienist, nutritionist or nurse

Transitional Housing (group setting, scattered sites, shared home) – housing for youth or families with supportive services on site.

Skills Training – providing training and counseling in life skills such as budgeting, leasing an apartment, etc.

Alcohol and Other Drug Counseling – professional staff (CSAC) providing AOD services

Mental Health – Mental health services provided by a psychiatrist, psychologist, licensed clinical social worker or other mental health professional.

Crisis Management – Immediate problem solving approaches to handle urgent or dangerous events; provision of intervention or guidance to diffuse a crisis, or summoning emergency medical services. Support, consultation and referral are provided until it is ascertained that there is sufficient natural supports for youth to remain safe in the community.

**E. Geographic coverage of service**

For the purposes of this RFP, innovative proposals that serve homeless children and families in rural areas are being solicited. For purposes of this RFP, rural is defined as outside urban Honolulu.

**F. Probable funding amounts, source, period of availability and estimated number of awards**

Funding Source:	Federal Funds
Period of Availability:	December 1, 2008 – July 31, 2009
Anticipated Total Available Funding:	\$70,000.00
Estimated Award Amount:	\$35,000.00 - \$70,000.00
Estimated Number of Awards:	One or two
Consecutive Period:	August 1, 2009 – July 31, 2010
Anticipated Total Available Funding:	\$90,000.00

Annual continuation awards will depend on the availability of federal funds, progress in meeting project goals and objectives, timely submission of data and reports and compliance with all terms and conditions of the contract.

## II. General Requirements

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

#### 1. Cost Principles Compliance

The provider will comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/1/98), which can be found in the POS Manual.

#### 2. Other Applicable Requirements

The provider shall complete, execute and submit to the state purchasing agency a certification regarding the following:

- Certification Regarding Drug-Free Workplace Requirements
- Certification Regarding Environmental Tobacco Smoke

### B. Secondary purchaser participation

(Refer to HAR Section 3-143-608)

After-the-fact secondary purchases will be allowed.

Planned secondary purchases

NONE.

### C. Multiple or alternate proposals

(Refer to HAR Section 3-143-605)

Allowed  Unallowed

### D. Single or multiple contracts to be awarded

(Refer to HAR Section 3-143-206)

Single  Multiple  Single & Multiple

### E. Single or multi-term contracts to be awarded

(Refer to HAR Section 3-149-302)

Single term ( $\leq$  2 yrs)  Multi-term ( $>$  2 yrs.)

Contract terms:

Initial term of contract	December 1, 2008 – July 31, 2009
Length of each extension	Twelve (12) months
Number of possible extensions	Five (5) twelve (12) months periods
Maximum length of contract	Six (6) years
The initial period shall commence on the contract start date or Notice to proceed, whichever is later	*****

The contract may be extended provided that the contract price shall remain the same or is adjusted (increased or decreased) based on a negotiated price mutually agreed upon, and subject to the availability of federal funds. Contract renewals will be based on contracted agency's annual performance review, and on CAMHD's determination of need for specific and/or all program components for contract renewal. Any contract extension must be in writing and executed prior to expiration.

**F. RFP contact person**

The individual listed below is the sole point of contact from the date of release of this RFP until the selection of the successful provider or providers. Written questions should be submitted to the RFP contact person and received on or before the day and time specified in Section 1, paragraph I (Procurement Timetable) of this RFP.

The CAMHD RFP Coordinator, John MacDonald, is the point of contact from the date of release of this RFP until the selection of the successful provider. Mr. MacDonald may be contacted by telephone (808) 733-9338, fax (808) 733-9207, or email [jamacdon@camhmis.health.state.hi.us](mailto:jamacdon@camhmis.health.state.hi.us)

**III. Scope of Work**

The scope of work encompasses the following tasks and responsibilities:

**A. Service Activities**

The actual service components of the Innovative Programs will be negotiated post-award and will be based on the proposal submitted. However, the program is expected to provide the following:

Cultural Competence. The program shall provide sensitive, culturally appropriate and nonjudgmental responses to the target population.

Trauma-Informed Care. The program shall provide trauma-informed care and will establish policies & procedures to provide trauma-informed services.

Information and Referral Services. The provider shall provide information and referral to services relevant to the needs of the target population. The provider shall provide materials to promote healthy behaviors and prevent or reduce unsafe and risky behaviors. The program shall work to empower the families and shall offer choices rather than advice.

Crisis Management. As appropriate, the program shall identify and provide immediate problem solving approaches to handle urgent or dangerous events, such as the provision of intervention or guidance to diffuse a crisis or summoning emergency medical services.

Community Linkages. The provider shall establish collaborative relationships with other agencies in the community to share resources and jointly serve the target population.

## **B. Management Requirements (Minimum and/or mandatory requirements)**

### **1. Personnel**

The provider shall demonstrate efforts to recruit individuals with experience working with the target population or individuals who have previously been homeless. The provider must detail if using an employment or personnel subcontract model. The provider shall describe efforts to recruit volunteers and community members in providing services to this population.

The provider shall ensure that program staff and volunteers receive adequate support, training and supervision. The training shall include safety and emergency procedures, confidentiality, child and youth development, child abuse reporting, suicide prevention, domestic violence, substance abuse and cultural competence.

### **2. Administrative**

The provider is required to provide all necessary administrative and managerial infrastructures to support the provision of services.

The provider must detail the agency organizational and management structure. The provider must detail the supervisory structure and its supervisory practices.

The provider shall demonstrate its ability to assess, plan and provide staff development opportunities for its volunteers and staff.

### **3. Quality assurance and evaluation specifications**

All contracts will be required to establish written policies and standard operating procedures to ensure policies and procedures are implemented uniformly and consistently across the organization. The policies and

procedures shall allow for flexibility to account for individualized approaches and needs.

All providers are required to have written policies and procedures regarding safety and emergency procedures, confidentiality, child abuse reporting, crisis intervention and suicide prevention. The provider shall assure that policies and procedures will be trauma-informed and culturally competent.

All providers are required to participate in State Council on Mental Health reviews and CAMHD contract monitoring, which includes the administrative, fiscal, and programmatic reviews. Monitoring will be conducted annually and/or on an as needed basis.

#### **4. Output and performance/outcome measurements**

The final output and performance/outcome measures will be based on the provider's proposal and will be negotiated post-award. Outcome results and encounter data will serve as measures of the program's performance and shall be reported to CAMHD on a quarterly basis, due thirty (30) days after the end of the quarter. An annual cumulative report shall be due thirty (30) days after the end of each year.

#### **5. Experience**

The provider shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the delivery of the proposed services to homeless populations. The provider shall also provide a listing of verifiable experience with projects or contracts that is pertinent to the proposed services. **CAMHD reserves the right to contact references to verify experience.**

#### **6. Coordination of services**

The provider shall demonstrate its experience collaborating with community partners, including those agencies with services that are relevant to the homeless population.

#### **7. Reporting requirements for program and fiscal data**

The Provider shall submit narrative program reports and expenditure reports within 30 days after the end of the quarter in a format prescribed by the CAMHD. The narrative reports shall include a reporting of the numbers served, a description of the quarter's activities, and a reporting of outcome measures achieved.

The Provider shall submit an annual cumulative narrative report and final expenditure report within 30 days after the end of the budget period. The annual narrative report shall be a cumulative report summarizing the entire budget period and shall include a reporting of the total number served, a description of the highlights and successes of the program, a description of any challenges encountered and the measures to address the problems, and a cumulative summary of outcome measures achieved.

Audit Requirements

- a. Nonprofit organizations that expend \$500,000 or more in a year of federal funds from any source shall have a single audit conducted for that year in accordance with the Single Audit Act Amendments of 1996, Public Law 104-156. The audit shall adhere to the Guidelines for Organization-Wide Audits.
- b. If the preceding condition applies, PROVIDER shall conduct a financial and compliance audit in accordance with the Single Audit Act Amendments of 1996 guidelines. Failure to comply may result in the withholding of payments to the provider.
- c. Nonprofit organizations that expend less than \$500,000 a year in federal funds are exempt from federal audit requirements for that year, however, records shall be available for review or audit by appropriate officials of the federal awarding agency, the State or General Accounting Office.
- d. If PROVIDER is exempt from federal audit requirements in accordance with subparagraph (c) above, the cost of any audit conducted on behalf of the provider shall not be charged to the federal portion of this contract

**C. Facilities**

Not applicable to award

**IV. Compensation and method of Payment**

**A. Fixed Price**

In this pricing structure, one price for the entire program is set in the RFP by the purchasing agency. The provider furnishes a reasonable estimate of services it can provide for which there is sufficient operating capacity (adequate, planned and budgeted space, equipment and staff).

**B. Units of service and unit rate**

Not Applicable.

**C. Method of compensation and payment**

An initial advance payment of one quarter installment will be made upon submission of an invoice. Thereafter, payment shall be made in quarterly installments upon submission of invoices. Invoices shall be submitted in triplicate with supporting documents. At the end of the budget period, the state may withhold the final quarter payment for the provider's failure to perform and insufficient fiscal documentation.

## **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 provider 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.*
- *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.*
- *Proposals may be submitted in a three ring binder (Optional).*
- *Tabbing of sections (Recommended).*
- *Providers must also include a Table of Contents with the Proposal Application. A sample format is reflected in Section 5, Attachment B of this RFP.*
- *A written response is required for **each** item unless indicated otherwise. Failure to answer any of the items will impact upon a provider's score.*
- *Providers are **strongly** encouraged to review evaluation criteria in Section 4, Proposal Evaluation when completing the proposal.*
- *This form (SPO-H-200A) is available on the SPO website (see Section 1, paragraph II, Website Reference). However, the form will not include items specific to each RFP. If using the website form, the provider must include all items listed in this section.*

### The Proposal Application comprises the following sections:

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

#### **I. Program Overview**

Provider shall give a brief overview to orient evaluators as to the program/services being offered.

## **II. Experience and Capability**

### **A. Necessary Skills**

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

### **B. Experience**

The provider shall provide a description of projects/contracts pertinent to the proposed services.

### **C. Quality Assurance and Evaluation**

The provider shall describe its own plans for quality assurance and evaluation for the proposed services, including methodology.

### **D. Coordination of Services**

The provider shall demonstrate its capability to coordinate services with other agencies and resources in the community.

### **E. Facilities**

The provider 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 ADA requirements, as applicable, and special equipment that may be required for the services.

## **III. Project Organization and Staffing**

### **A. Staffing**

#### **1. Proposed Staffing**

The provider shall describe the proposed staffing pattern, client/staff ratio and proposed caseload capacity appropriate for the viability of the services. (Refer to the personnel requirements in the Service Specifications, as applicable.)

#### **2. Staff Qualifications**

The provider 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**

### **1. Supervision and Training**

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

### **2. Organization Chart**

The provider shall reflect the position of each staff and line of responsibility/supervision. (Include position title, name and full time equivalency) Both the “Organization-wide” and “Program” organization charts shall be attached to the Proposal Application.

## **IV. Service Delivery**

Provider shall provide a statement of need documenting the size, location and characteristics of the target population, and the mental health needs of the target population. If available, providers should cite references, such as published literature, newspaper articles, published surveys, agency reports, community meetings, etc.

The provider shall describe in detail how the organization will provide the proposed services and how the organization will maintain sufficient capacity to ensure the level of services proposed. The applicant shall describe how the organization will ensure the provision of services in the most accessible and convenient location(s) for homeless children and youth and their families.

The provider shall describe the organization’s efforts to support homeless youth and/or families during times of crisis, and efforts to ensure linkages to crisis support services.

The provider shall provide in narrative form and in table format (see Attachment E – Program Rationale Logic Model Table) the program rationale logic model that explains how the proposed services meet the stated needs of the target population. The provider should describe existing services and how the proposed services, together with existing services, will positively impact the lives of the target population. The provider shall identify the outcomes and/or quantitative targets for each of the proposed services in the first full year.

## **V. Financial**

### **A. Pricing Structure**

The provider shall provide a budget narrative. The budget narrative shall include a description of the project personnel and the responsibilities of the positions, any contracted services, equipment, and supplies.

All budget forms, instructions and samples are located on the SPO website (see Section 1, paragraph II Websites referred to in this RFP). The following budget form(s) shall be submitted (as applicable) with the Proposal Application:

**SPO-H-205 Budget**

- SPO-H-205A Organization-wide Budget by Source of Funds
- SPO-H-205B Organization-wide Budget by Programs
- SPO-H-206A Personnel Salaries and Wages
- SPO-H-206B Personnel Payroll Taxes, Assessments & Fringe
- SPO-H-206C Travel Inter-Island
- SPO-H-206E Contractual Services - Admin
- SPO-H-206F Contractual Services - Subcontractors
- SPO-H-206G Depreciation
- SPO-H-206H Program Activities
- SPO-H-206I Budget Justification – Equipment Purchase

**B. Other Financial Related Materials**

**Accounting System**

In order to determine the adequacy of the provider's accounting system as described under the administrative rules, the agency's most recent financial audit is requested as part of the Proposal Application (may be attached):

**VI. Other**

**A. Litigation**

The provider shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgment. If applicable, please explain.

# **Section 4**

## **Proposal Evaluation**

## Section 4 Proposal Evaluation

### I. 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.

### II. 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>	<u>Possible Points</u>
<i>Administrative Requirements</i>	
<i>Proposal Application</i>	
Program Overview	0 points
Experience and Capability	25 points
Project Organization and Staffing	20 points
Service Delivery	45 points
Financial	10 Points
<b>TOTAL POSSIBLE POINTS</b>	<b>100 Points</b>

### **III. Evaluation Criteria**

#### **A. Phase 1 - Evaluation of Proposal Requirements**

##### **1. Administrative Requirements**

Certification Regarding Drug-Free Workplace  
Certification Regarding Environmental Tobacco Smoke

##### **2. Proposal Application Requirements**

- Proposal Application Identification Form (Form SPO-H-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 (100 Points)**

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

**1. *Experience and Capability (25 Points)***

The State will evaluate the experience and capability relevant to the proposal contract, which shall include:

**A. Necessary Skills;**

- Demonstrates the applicant's ability to provide and manage the proposed services in accordance with contractual obligations. [5 points]
- Thoroughly describes the applicant's commitment to serving and supporting the target population in a community-based, culturally competent manner. [5 points]

**B. Experience**

- Demonstrates the skills, abilities, and knowledge relating to the delivery of the proposed services for the specific population. [5 points]

**C. Quality Assurance and Evaluation**

- Sufficiency of quality assurance and evaluation plans for the proposed services, including methodology. [5 points]

**D. Coordination of Services**

- Demonstrated capability to coordinate services with other agencies and resources in the community. [5 points]

**2. *Project Organization and Staffing (20 Points)***

The State will evaluate the applicant's overall staffing approach to the service that shall include:

**A. Staffing**

- Proposed Staffing: That the proposed staffing pattern, client/staff ratio, and proposed caseload capacity is reasonable to insure viability of the services. [5 points]
- Demonstrates commitment to recruit individuals with experience working with the target population or individuals who are or have been homeless. [5 points]
- Demonstrates commitment to ensure staff and volunteers receive adequate support, training and supervision. [5 points]

**B. Project Organization**

- Supervision and Training: Demonstrated ability to support, supervise, train and provide direction to staff relative to the delivery of the proposed services. [3 points]
- Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the overall service activity and tasks. [2 points]

**3. Service Delivery (45 Points)**

- Statement of Need – Adequately describes and justifies the needs of the target population. [5 points]
- The proposed services logically meet the needs identified in the Statement of Need. [5 points]
- The program rationale in the logic model table and/or narrative is rational and logical. [5 points]
- The goals and outcomes of the program appear reasonable and achievable based on the budget, program resources, and timeline. [5 points]
- The proposed services complement the organization's services in such a way as to increase the impact of the combined program. [5 points]
- Demonstrates understanding of the cultural needs of the population and community to be served, including unique factors and supports within the proposed geographic region(s). [5 points]

Proposal Evaluation (Rev 4/08)

- The proposed services consider the developmental stage of the children in the proposed population, and propose strategies to support their growth and development. [5 points]
- The quantity and frequency of the proposed services are adequate to meet the needs of the target population.[5 points]
- Demonstrates commitment to assuring that policies and procedures of the program will be trauma-informed and culturally competent. [5 points]

#### ***4. Financial (10 Points)***

- Proposal budget is reasonable, given program resources and operational capacity. [5 points]
- Proposal leverages resources and proposes cost - efficient and cost-sharing strategies. [5 points]

### **C. Phase 3 - Recommendation for Award**

#### Methodology for Calculating Scores

As a group, the evaluation team will rate proposals solely against the criterion using the 0-5 point Likert scale (see Figure 1.) and in whole number (i.e. 1 or 2 and etc.). Each criterion has a weighted point (bracketed and in italic), and the sum of points for criteria in each evaluation category equals the total possible points or threshold for that category. The evaluation categories and thresholds are experience and capability (25 points), project organization and staffing (20 points), service delivery (45 points), and financial (10 points). There are no points assigned for program overview.

Figure 1. Likert Rating Scale

Not responsive	Unsatisfactory	Less than satisfactory	Satisfactory	More than satisfactory	Very satisfactory
0	1	2	3	4	5

Score will be mathematically calculated for each criterion by dividing the evaluation team rating for the criterion on the 0-5 point scale by 5 (i.e. the highest possible score) and then multiplying by the weighted value of that criterion. For example, if the evaluation team scored the first criterion at 5 points and the criterion had a weighted value of 3 points, the resulting score is 3  $((5/5)*3=3)$ . If the evaluation team had instead scored the first criterion at 2, the resulting score is 1.2  $((2/5)*3=1.2)$ . The scores for each criterion will then be added to obtain a total score for each proposal. If all criteria received a perfect score of 5, then the total score for the proposal will be 100.

The total final score for each proposal will then be ranked across applicants in order of responsiveness to the RFP from the most advantageous to least advantageous, based on the evaluation of each proposal.

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**

## **Section 5**

# **Attachments**

- A. Proposal Application Checklist
- B. Sample Table of Contents
- C. Federal Certifications
- D. Hawaii Child & Adolescent Service System Program Principles
- E. Program Rationale Logic Model Table

## Proposal Application Checklist

Applicant: \_\_\_\_\_

RFP No.: HTH 460-08-07

The applicant's proposal must contain the following components in the order shown below. This checklist must be signed, dated and returned to the purchasing agency as part of the Proposal Application. SPOH forms are on the SPO website. See Section 1, paragraph II Website Reference.\*

Item	Reference in RFP	Format/Instructions Provided	Required by Purchasing Agency	Completed by Applicant
<b>General:</b>				
Proposal Application Identification Form (SPO-H-200)	Section 1, RFP	SPO Website*	<b>X</b>	
Proposal Application Checklist	Section 1, RFP	Attachment A	<b>X</b>	
Table of Contents	Section 5, RFP	Section 5, RFP	<b>X</b>	
Proposal Application (SPO-H-200A)	Section 3, RFP	SPO Website*	<b>X</b>	
Tax Clearance Certificate (Form A-6)	Section 1, RFP	Dept. of Taxation Website (Link on SPO website)*	<b>X</b>	
Cost Proposal (Budget)			<b>X</b>	
SPO-H-205	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-205A	Section 3, RFP	SPO Website* Special Instructions are in Section 5	<b>X</b>	
SPO-H-205B	Section 3, RFP,	SPO Website* Special Instructions are in Section 5	<b>X</b>	
SPO-H-206A	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206B	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206C	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206D	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206E	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206F	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206G	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206H	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206I	Section 3, RFP	SPO Website*	<b>X</b>	
SPO-H-206J	Section 3, RFP	SPO Website*	<b>X</b>	
<b>Certifications:</b>				
<b>Federal Certifications</b>		Section 5, RFP	<b>X</b>	
Debarment & Suspension		Section 5, RFP	<b>X</b>	
Drug Free Workplace		Section 5, RFP	<b>X</b>	
Lobbying		Section 5, RFP	<b>X</b>	
Program Fraud Civil Remedies Act		Section 5, RFP	<b>X</b>	
Environmental Tobacco Smoke		Section 5, RFP	<b>X</b>	
<b>Program Specific Requirements:</b>				

\_\_\_\_\_

Authorized Signature

\_\_\_\_\_

Date

Sample

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# Attachment C

## Federal Certifications

## **1.CERTIFICATION REGARDING DEBARMENT AND SUSPENSION**

The undersigned (authorized official signing for the applicant organization) certifies to the best of his or her knowledge and belief, that the applicant, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:

(a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;

(b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and

(d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the applicant not be able to provide this certification, an explanation as to why should be placed after the assurances page in the application package.

The applicant agrees by submitting this proposal that it will include, without modification, the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion—Lower Tier Covered Transactions" in all lower tier covered transactions (i.e., transactions with sub-grantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

## **2.CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS**

The undersigned (authorized official signing for the applicant organization) certifies that the applicant will, or will continue to, provide a drug-free work-place in accordance with 45 CFR Part 76 by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about--
  - (1) The dangers of drug abuse in the workplace;
  - (2) The grantee's policy of maintaining a drug-free workplace;
  - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- (d) Notifying the employee in the statement required by paragraph (a), above, that, as a condition of employment under the grant, the employee will--
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central

point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is so convicted--

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

For purposes of paragraph (e) regarding agency notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

Office of Grants and Acquisition Management  
Office of Grants Management  
Office of the Assistant Secretary for Management and Budget  
Department of Health and Human Services  
200 Independence Avenue, S.W., Room 517-D  
Washington, D.C. 20201

### **3. CERTIFICATION REGARDING LOBBYING**

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the under-

signed, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### **4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)**

The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.

**5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE**

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act.

The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Services strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	DATE SUBMITTED

## Attachment D

# **Hawaii Child & Adolescent Service System Program (CASSP) Principles**

## **Hawaii Child and Adolescent Service System Program**

1. The system of care will be child and family centered and culturally sensitive, with the needs of the child and family determining the types and mix of services provided.
2. Access will be to a comprehensive array of services that addresses the child's physical, emotional, educational, recreational and developmental needs.
3. Family preservation and strengthening along with the promotion of physical and emotional well-being shall be the primary focus of the system of care.
4. Services will be provided within the least restrictive, most natural environment that is appropriate to individual needs.
5. Services which require the removal of a child from his/her home will be considered only when all other options have been exhausted, and services aimed at returning the child to his/her family or other permanent placement are an integral consideration at the time of removal.
6. The system of care will include effective mechanisms to ensure that services are delivered in a coordinated and therapeutic manner, and that each child can move throughout the system in accordance with his/her changing needs, regardless of points of entry.
7. Families or surrogate families will be full participants in all aspects of the planning and delivery of services.
8. As children reach maturity, they will be full participants in all aspects of the planning and delivery of services.
9. Early identification of social, emotional, physical and educational needs will be promoted in order to enhance the likelihood of successful early interventions and lessen the need for more intensive and restrictive services.
10. The rights of children will be protected and effective advocacy efforts for children will be promoted.

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Developed by the Hawaii Task Force, 1993.

(Adapted from Stroul, Beth A. and Robert M. Friedman, R.M. (1986) *A System of Care for Children & Youth with Severe Emotional Disturbances*. (Revised Edition) Washington, DC: Georgetown University Child Development Center, CASSP Technical Assistance Center.)

## Attachment E

# **Program Rationale Logic Model Table**

Program Rationale Logic Model Table

Name of Organization: \_\_\_\_\_

No.	Need/Problem to be Addressed	Existing Program	Proposed Service	Outcome Measure
1				
2				
3				
4				
5				
6				
7				

Filename: RFP HTH 460-08-07 Innovative Homeless Final  
Directory: C:\Documents and Settings\jamacdon\My Documents\CAMHD  
FILE\CAMHD RFP\RFP 460-08-07 Innovative  
Template: C:\Documents and Settings\jamacdon\Application  
Data\Microsoft\Templates\Normal.dotm  
Title: RFP Template for Health and Human Services Pursuant to Ch. 103F,  
HRS  
Subject: RFP template  
Author: State Procurement Office designs the template. Each purchasing agency  
develops RFP  
Keywords: RFP, Health and Human services, Competitive, 103F  
Comments:  
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As of Last Complete Printing  
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Number of Characters: 70,288 (approx.)