

State of Hawaii
Department of Human Services
Social Services Division

Addendum No. 1

February 22, 2016

to

Request for Proposals (RFP)

SSD-16-POS-3005

**PROMOTING SAFE AND STABLE
FAMILIES**

KA'U HAWAII

RFP Posting Date: January 22, 2016

**RFP Proposal Submission Deadline:
March 7, 2016, 4:30 p.m.
Hawaii Standard Time**

ADDENDUM NO. 1

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to

REQUEST FOR PROPOSALS (RFP)

SSD-16-POS-3005

PROMOTING SAFE AND STABLE FAMILIES- KA'U HAWAII

The Department of Human Services, Social Services Division, Child Welfare Services Branch is issuing this Addendum to add additional information and correct/revise the RFP as detailed below.

If you have any questions please contact:

Christine Gamboa, POS Specialist
(808) 586-5687
cgamboa@dhs.hawaii.gov

RFP Written Questions and Responses

1. Section 2.D, Description of the target population to be served (Page 2-3)

Question: What is the anticipated number to be served? (census)

Question: What is the caseload expectation?

Response: The estimated number served of:
Families- 20
Children- 25
Adults- 15

2. Section 2.E, Geographic coverage of service (Page 2-3)

Question: What are the geographical boundaries of Kau for the purposes of this proposal? (i.e., South Point to Mountain View? Ocean View?)

Question: Can you define the boundaries of Ka'u Hawaii? Does it only include Ocean View, Waiohinu and Pahala or does it venture further into East Hawaii?

Response: Ka'u consists of the following areas which is further broken down by the perspective Child Welfare Services units:

East Hawaii Child Welfare Services (Hilo)

- Pahala
- Naalehu
- Waiohinu
- Left side of South Point Road

West Hawaii Child Welfare Services (Kona)

- Ocean View Estates
- Ocean Ranchos
- Ninole

Proposals must include a referral form that both East Hawaii Child Welfare Services and West Hawaii Child Welfare Services can utilize.

3. Section 2.D, Description of the target population to be served (Page 2-3)

Question: Is the provider expected to provide substance abuse treatment or will CWS continue to refer to their contracted substance abuse provider?

Response: The Provider will not provide substance abuse treatment. CWS will continue to refer to their contracted substance abuse provider. The Provider will be expected to provide substance abuse support services as stated in the scope of services.

RFP Corrections, Revisions, and Comments

- 1. The "Proposal Submission Information Sheet" (Pages 2 – 3) was revised and is attached at the end of this Addendum #1. Please read this closely as it details the proposal submission information requirements for the Proposal Application. Also, the RFP Submission Deadline has changed to March 7, 2016, 4:30 P.M. Hawaii Standard Time to accommodate the date of this addendum.**

- 2. Section 2, Performance Measurement Forms A, B, and C (Pages 2-14 – 2-17)**

The Performance Measurement Forms A, B, and C referred to in this paragraph and included at the end of Section 2 of this RFP have been added as a separate attachment to this Addendum #1 so that the Applicant may complete them easily.

3. Section 3, Proposal Application Instructions (Page 3-1)

The first paragraph, second sentence was revised and a third sentence was added as follows:

The DHS prefers that the Applicant limits the number of pages for the narrative portion of each section to the recommended numbers below, encourages the Applicant to include any information deemed necessary even if the limits are exceeded, and cautions the Applicant to be discriminating regarding the number of pages included so that the limits are not overly exceeded. No points will be deleted for exceeding the page limits.

4. 3.3, B., 2., b., c., and d. Organization charts (Pages 3-4 – 3-5)

This section was revised and c. and d. were added as follows:

- b. A Program Specific Chart that details for each position budgeted to the contract per each position description:
 - 1) The position's title.
 - 2) The position's minimum education level (e.g. high school diploma, Bachelor's degree, Master's degree).
 - 3) The position's full-time equivalency (FTE) to the Applicant's agency and to the program.
 - 4) The position's lines of authority/supervision.
- c. The Organization-Wide and Program Specific Charts shall both be attached to the Application. The position titles in the Charts shall match the titles in the position descriptions. The position descriptions shall also be attached to the proposal. Position vacancy information shall be included in the proposal.
- d. If an Applicant is awarded a contract, education/experience and/or criminal/CWS Central Registry waivers for incumbent staff who do not have waivers approved by the DHS shall be submitted. Also, resumes and other incumbent staff information may be requested, as necessary.

5. 3.4 Service Delivery

A second sentence was added to the first paragraph as follows:

A fully completed Work Plan shall be attached to the Application (see the sample Work Plan and its Instructions included as an Attachment in the RFP posting on the SPO website).

6. 3.4, C. Performance Measurement Forms A, B, and C (Page 3-6)

Both paragraphs were revised as follows:

The Applicant shall propose realistic numbers/percentages and consider that their staffing structure should be able to support the proposed numbers in manageable caseloads. Clear and sufficient justification shall be provided to support the proposed numbers/percentages. More points shall be awarded if the proposed numbers/percentages are realistic and appropriately justified not if larger numbers/percentages are proposed.

The DHS shall have the final determination regarding the numbers/percentages for a contract.

7. 3.4, E. Dispute/Conflict Resolution Procedures (Page 3-6)

The heading was revised and the paragraph was revised as follows:

The Applicant shall have written dispute/conflict resolution procedures to address disagreements with staff, volunteers, and contracted personnel, with clients, and with community resources, including consulting with the CWS/VCM worker, as needed.

8. 4.3, A., 2., f. Service Delivery (Page 4-2)

This section has been revised as follows:

f. Service Delivery (including Performance Measurement Forms A, B, and C and Work Plan)

9. 4.3, B., 3., b., 2), b), ii) and iii) Organization Charts (Pages 4-4 – 4-5)

This section was revised and iii) was added as follows:

- ii) A Program Specific Chart that details for each position budgeted to the contract per each position description:
 - The position's title.
 - The position's minimum education level (e.g. high school diploma, Bachelor's degree, Master's degree).
 - The position's full-time equivalency (FTE) to the Applicant's agency and to the program.
 - The position's lines of authority/supervision.
- iii) The Organization-Wide and Program Specific Charts are both attached to the Application. The position titles in the Charts match the titles in the position

descriptions. The position descriptions are attached to the proposal. Position vacancy information is included in the proposal.

10. 4.3, B., 4. Service Delivery (Page 4-5)

A second sentence was added to the paragraph as follows:

A fully completed Work Plan has been attached to the Application.

11. 4.3, B., 4., c. Performance Measurement Forms A, B, and C (Page 4-6)

Both paragraphs were revised as follows:

The Applicant has proposed realistic numbers/percentages and considered that their staffing structure is able to support the proposed numbers in manageable caseloads. Clear and sufficient justification has been provided to support the proposed numbers/percentages.

Note: The DHS shall have the final determination regarding the numbers/percentages for a contract.

12. Dispute/Conflict Resolution Procedures (Page 4-6)

The heading was revised and the paragraph was revised as follows:

The Applicant has provided written dispute/conflict resolution procedures to address disagreements with staff, volunteers, and contracted personnel, with clients, and with community resources, including consulting with the CWS/VCM worker, as needed.

13. Section 5, Attachment D: Criminal History Record Check Standards

This was revised on 4/18/13 and is attached at the end of this Addendum #1.

14. Section 5, Attachment F: Special Conditions #9

The first sentence was revised as follows:

The PROVIDER spending a total of Five Hundred Thousand (\$500,000.00) or more per year ending June 30, 2015, and Seven Hundred Fifty Thousand (\$750,000.00) or more per year beginning January 1, 2015, in federal financial assistance from all sources shall be subject to federal audit requirements under the federal Office of Management and Budget (OMB) (see OMB Circular A-133, "Audits of State, Local Governments, and Nonprofit Organizations").

PROPOSAL SUBMISSION INFORMATION SHEET

PROPOSAL SUBMISSION DEADLINE:
MARCH 7, 2016, 4:30 P.M., HAWAII STANDARD TIME.

PLEASE READ CAREFULLY AS THIS PROPOSAL SUBMISSION INFORMATION MAY HAVE BEEN REVISED FROM PREVIOUS RFP's.

THE APPLICANT IS REQUIRED TO SUBMIT:

1. One (1) electronic copy of the proposal in **both** Portable Document Format (PDF) **AND** either Word or Excel format via email to the POS mailbox listed below.
2. Two (2) printed copies of the proposal (one (1) original **AND** one (1) copy) via either the Applicant in person, private mail carrier (e.g., FedEx or United Parcel Service (UPS)), or the United States Postal Service (USPS) to the DHS office listed below.
3. One (1) electronic copy of the proposal in **both** Portable Document Format (PDF) **AND** either Word or Excel format on either a Universal Serial Bus (USB) Flashdrive **or** a Compact Disc (CD) (which must be readable by a personal computer system (PCS)) via either the Applicant in person, private mail carrier, or the USPS to the DHS office listed below.

**A COMPLETE PROPOSAL SUBMISSION IS ALL THREE COMPONENTS RECEIVED BY THE SPECIFIED DATE AND TIME.
NO EXCEPTIONS SHALL BE MADE.**

If the electronic **and** printed copies of the proposal are not received as described **or** not received by the specified date and time, the proposal submission shall be considered incomplete or late and **SHALL NOT BE ACCEPTED** for consideration. All submissions become the DHS' property.

1. All electronic copies submitted via email shall include in the email the RFP number, the Applicant's name, and the proposal submission attachments. All attachments shall be identified with the RFP number as abbreviated in the following example, the Applicant's initials (e.g. Humanity Community Services - HCS), and the attachment's content: e.g. 16-3020.HCS.narrative or 16-3020.HCS.budget.
2. The Applicant shall submit:
 - a. The complete proposal in PDF format; this may be separated into two or three sections for ease of sending if one PDF is too large provided that each section is labeled (e.g., 16-3020.HCS.#1, 16-3020.HCS. #2).
 - b. Either the complete proposal in Word/Excel format, as applicable (and separated as described in a. above, as needed), **or all** of the following documents from the proposal in Word/Excel format, as applicable: Narrative,

Performance Measurement Forms, Organization and Program Charts, Job Descriptions (no resumes), Budget forms (including Administrative Budget), and Work Plan (if required).

The Applicant bears the complete responsibility for the submission of the electronic copies, including assuring their complete, correctly formatted, and timely submission and the risk that the electronic copies may not be readable by the DHS.

3. All printed and electronic copies submitted via the Applicant in person shall be enclosed in a sealed envelope identified with the RFP number and the Applicant's name on the outside.

All printed and electronic copies submitted via the Applicant in person, private mail carrier, and the USPS shall contain a cover sheet inside the sealed envelope with the RFP number, the Applicant's name, and a description of the envelope's contents on it (e.g., one printed original copy of the proposal, one printed copy of the proposal, one flashdrive or one CD).

DHS OFFICE ADDRESS:

**Department of Human Services
Social Services Division
Purchase of Services Unit
810 Richards Street, Suite 400
Honolulu, Hawaii 96813**

EMAIL ADDRESS:

ssdposmailbox@dhs.hawaii.gov

RFP CONTACT PERSON:

Ms. Christine Gamboa, POS Specialist
Phone: (808) 586-5687
Email: cgamboa@dhs.hawaii.gov

PLEASE BE ADVISED:

1. Proposal submissions attempted after **March 7, 2016, 4:30 p.m. Hawaii Standard Time (HST)** shall **not** be accepted.
2. Any private mail carrier or USPS proposal submissions with a date stamp of **March 7, 2016, 4:30 p.m. Hawaii Standard Time (HST)** but received **after March 7, 2016, 4:30 p.m. Hawaii Standard Time (HST)** shall **not** be accepted.
3. All Applicants are **strongly encouraged** to submit **all** electronic copies of the proposal submission in advance of the proposal submission deadline. This will allow the Applicant the opportunity to: a) assure that they have been received by the DHS in a timely manner, and b) assure that the DHS can open and read them.
4. Proposals sent by facsimile (fax) shall **not** be accepted.
5. It is the Applicant's responsibility to access the Public Procurement Notices for Solicitations for Health and Human Services on the State Procurement Office website or to contact the RFP Contact Person identified above regarding any subsequently issued addendum for this RFP, which may include a revision to the proposal submission deadline.

DEPARTMENT OF HUMAN SERVICES
Social Services Division

CRIMINAL HISTORY RECORD CHECK STANDARDS

(Revised 4/18/13)

I. PURPOSE

To protect the health, safety and welfare of Adult Protective and Community Services Branch (APCSB) and Child Welfare Services Branch (CWSB) clients, criminal history information on an individual who wishes to serve as a direct service provider shall be considered in determining whether the individual is suitable to serve as a direct service provider to APCS/CWSB clients.

II. STATE CRIMINAL INFORMATION SYSTEM CHECK

- A. Upon implementation of these standards, a check of the Criminal Justice Information System (CJIS) and the Federal Bureau of Investigation (FBI) data system for a criminal history record check shall be conducted when an individual is:
1. Conditionally offered a position as a direct service provider by an agency, purchase of service contractor, or individual employer. Pending the completion of the criminal history record check, the individual may be placed in a non-direct service provider position on a probationary status not to exceed thirty (30) days; or
 2. In a direct service provider position the criminal history record check shall be completed and the results received by the agency, purchase of services contractor or individual employer *prior* to the individual starting direct service work.
- B. The criminal history record check shall include the submission of fingerprints to the FBI and the CJIS for a State criminal history record check.
- C. Individuals shall have a criminal history record check upon initial hire or implementation of these standards and a second criminal history record check twelve months later. Thereafter, State name checks shall be conducted every other year.
- D. The responsibility for conducting a criminal history record check shall rest with the individual seeking to become a direct service provider or the individual/agency/organization hiring the individual as a direct service provider.
- E. The criminal history record checks shall be conducted through:

1. For APCSB providers: The Department of Human Services (DHS) designee contracted to fingerprint individuals and to submit information to and receive information from the FBI and CJIS. The individual shall complete, sign and date the DHS 1645, "Authorization for Criminal History Record Clearance", and submit the completed form to the DHS designee;
2. For APCSB and CWSB providers: State name checks are to be obtained from the Hawaii Criminal Justice Data Center (HCJDC) website: (<http://ecrim.hawaii.gov/ahewa/>). Individuals who do not have access to computer may request information from the following:

Oahu: Hawaii Criminal Justice Data Center
465 South King Street, Room 101
Honolulu, Hawaii 96813

The Oahu office, for an additional fee, will process mailed-in requests for criminal history records checks.

Neighbor Islands: County police stations where HCJDC computer terminals are available. Molokai and Lanai are covered through the main police station on Maui.

- F. When name checks into the State name inquiry system are required for employment, a printed report of each name record check accompanied by a signed Statement of Authenticity that the criminal history record report is a true and unaltered copy shall be retained in the hired individual's personnel file and made available for review by DHS staff or its designee for compliance monitoring purposes.
- G. Fingerprint results and/or a printed name check in the State criminal history records, dated no more than six (6) months before the date an initial criminal history record check is required, may be accepted instead of a new criminal history record check being performed.
- H. DHS shall not be directly responsible for any cost related to the criminal history record check. Funds received through a Purchase of Service contract with DHS for administrative costs may be used to meet the cost for criminal history record checks.

III. CONVICTION RECORDS IN HIRING AND TERMINATING DIRECT SERVICE PROVIDERS

Information contained in criminal history record check reports shall be taken into consideration when hiring and terminating individuals as direct service providers. An offer of employment shall be withdrawn or the position of a direct service provider

shall be terminated when a prospective or current direct service provider has a criminal history as indicated below:

- A. The criminal conviction shall have occurred within ten (10) years of the date of the criminal history record check. A criminal conviction occurring more than ten (10) years prior to the date of the criminal history record check may be considered when the criminal history of the individual may pose a risk to the health, welfare and safety of service recipients ; and
- B. The crime for which there is a conviction shall have a rational relationship to the direct service provider's position. Rational relationship means the crime for which there is a history is substantially related to the qualifications, duties and responsibilities of the direct service provider position. Crimes having rational relationships to direct service provider positions include any felony, including but not limited to theft, abuse, neglect, assault, or crimes involving violence or sexual offenses.
- C. Exemptions from the requirements of sections III. A. and B. may be approved for APCSB providers by the DHS designee and for CWSB providers by the CWSB.
 - 1. Requests for exemptions shall be made in writing by using form DHS 1673, "Request for Exemption (From Criminal History Records Check Standards or Protective Services Central Registry Check Standards)", or a similar form. The individual seeking the exemption must complete the DHS 1673 or similar form. A copy of the individual's current results of a name inquiry into the State criminal history records check must accompany the request. Fingerprint results for APCSB providers should already be on file with the DHS designee.
 - 2. The "Checklist for Exemption Request" may be used as a reminder of the documents to be submitted for EACH exemption request. All documents shall be submitted to the DHS designee or CWSB.
 - 3. Unless an individual is self-employed, the employer agency must be involved in the exemption process to assure the timely submittal of all required documents and appropriateness of the exemption request. Requests for exemptions shall be routed through the prospective employer agency prior to submittal to the Department or its designee.
 - 4. **For APCSB Providers:** All documents shall be submitted to the DHS designee. Upon receipt of the written exemption request and other required documents listed on the "Checklist for Exemption Request", the DHS designee shall convene a panel consisting of three (3) professional level multi-disciplinary team members to review the request. The panel shall include individuals in at least two different professions with backgrounds in criminal justice, legal and/or the therapeutic mental health field.
 - 5. **For CWSB Providers:** All documents shall be submitted to the CWSB Administrator. Upon receipt of the written exemption request

and other required documents listed on the “Checklist for Exemption Request”, the CWSB Administrator shall convene a panel to review the request. The panel may include the CWSB Administrator or designee, the CWSB Program Development Administrator, relevant CWSB Assistant Program and Section Administrators, and anyone else deemed appropriate by the CWSB Administrator or designee.

6. The exemption panel shall consider the following:
 - a. The relevancy of the individual’s conviction record to the qualifications, functions and duties of the direct service provider position the individual wishes to fill;
 - b. Passage of time since the crime was committed; and
 - c. Any evidence of rehabilitation, such as letters from counselors or therapists attesting to a sustained improvement in the individual’s behavior, character references, and activities since conviction, such as employment.
7. A single factor may not be evidence of rehabilitation. If necessary, the panel shall request additional information from the individual seeking the exemption.
8. Individuals requesting exemptions shall be informed in writing of the panel’s decision within 45 calendar days from the date the panel receives all documents needed for a decision to be made. The panel may extend the 45-day period with cause and a written explanation to the individual seeking the exemption.
9. Individuals who are dissatisfied with the panel decisions on their exemption requests may:
 - a. Request an informal discussion with the APCSB/CWSB Administrator; and/or
 - b. Appeal the panel’s decision to the Child Welfare Services Branch Administrator.

- D. APCSB clients may choose not to conduct criminal history record checks on individuals they hire on their own. Clients who choose not to have criminal history record checks shall complete form DHS 1672, “Consumer-Employer Choice Regarding Criminal History Record Check and Adult Protective Services (APS) Central Registry Check”, to acknowledge their understanding of these standards and the purpose for the checks, and their decision not to conduct criminal history record checks or APS Central Registry checks on individuals they plan to hire as direct service providers.

Attachments

DHS 1645 with instructions

DHS 1672 with instructions

DHS 1673 with instructions

Statement of Authenticity

Checklist for Exemption Request

DEPARTMENT OF HUMAN SERVICES
PROTECTIVE SERVICES
CENTRAL REGISTRY CHECK STANDARDS

I. PURPOSE

To protect the health, safety and welfare of Adult Protective and Community Services Branch (APCSB) and Child Welfare Services Branch (CWSB) clients, Protective Services Central Registry information on an individual who wishes to serve as a direct service provider shall be considered in determining whether the individual is suitable to serve as a direct service provider to APCS/CWSD clients.

The Protective Services Central Registry may include information from the Adult Protective Services (APS) Central Registry and the Child Welfare Services (CWS) Central Registry. The APS Central Registry shall be checked for individuals serving as direct service providers for APCS clients. The CWS Central Registry shall be checked for individuals serving as direct service providers for CWSB clients. Both Registries shall be checked for individuals serving as direct service providers for both APCS and CWSB clients, and for APCS clients who are minor children.

These Protective Services Central Registry Check Standards do not apply to direct service providers who must meet the licensing standards as specified in the Child-Caring Institution and/or Child-Placing Organization administrative rules.

II. PROTECTIVE SERVICES CENTRAL REGISTRY CHECK

- A. Upon implementation of these standards, a check of the Protective Services Central Registry shall be conducted when an individual is:
1. Conditionally offered a position as a direct service provider by an agency, purchase of service contractor, or individual employer. Pending the completion of the Protective Services Central Registry check, the individual may be placed in a non-direct service provider position on a probationary status not to exceed thirty (30) days; or
 2. In a direct service provider position the Protective Services Central Registry check shall be completed and the results received by the agency, purchase of services contractor or individual employer *prior* to the individual starting direct service work.
- B. Individuals shall have a Protective Services Central Registry check upon initial hire or implementation of these standards and a second Protective Services Central Registry check twelve (12) months later. Thereafter,

Protective Services Central Registry checks shall be conducted every other year.

- C. The Department of Human Services or its designee is responsible for conducting the Protective Services Central Registry checks upon request of the individual seeking to become a direct service provider.

For CWSB Direct Service Providers: Please go to the DHS website to obtain the “Child Protective Services System Central Registry Clearance Form – Experimental (2/06)” and follow the provided instructions.

<http://humanservices.hawaii.gov/ssd/backgroundcheck>

The individual shall fill out the Form, “Child Protective Services System Central Registry Clearance Form – Experimental (2/06)” and submit as instructed on the form.

The release of information by the Department of Human Services or its designee shall be limited to the following:

APS CENTRAL REGISTRY CHECK

- Notification of whether the individual requesting the information is known to the Department of Human Services to have caused the abuse of a dependent adult; and
- Notification of whether the allegation of abuse is confirmed or not confirmed.

CWS CENTRAL REGISTRY CHECK

- Date of CONFIRMED incident(s) of child abuse or neglect; and
- Type of abuse for each incident.

- D. Upon completion of the Protective Services Central Registry check, the Department of Human Services or its designee shall mail a letter to the individual requesting the information or to the agency/organization identified by the individual to receive the information. A copy of each Protective Services Central Registry check shall be retained in the hired individual’s personnel file and made available for review by Department staff for compliance monitoring purposes.

- E. A copy of a Protective Services Central Registry check, dated no more than six (6) months before the date an initial Protective Services Central Registry check is required, may be accepted instead of a new Protective Services Central Registry check being performed.

III. PROTECTIVE SERVICES CENTRAL REGISTRY CHECKS IN HIRING AND TERMINATING DIRECT SERVICE PROVIDERS

When the Protective Services Central Registry check indicates that abuse has been confirmed, the individual/agency/organization hiring the individual as a direct service provider must inquire of that individual as to the nature and circumstance of the confirmed abuse. Information obtained by the individual/agency/organization from the Protective Services Central Registry check shall be taken into consideration when hiring and terminating individuals as direct service providers. An offer of employment shall be withdrawn or the position of a direct service provider shall be terminated when:

- A. A prospective or current direct service provider has a Protective Services Central Registry check indicating that abuse was confirmed and that the abuse occurred within ten (10) years of the date of the Protective Services Central Registry check. A confirmation of abuse occurring more than ten (10) years of the date of the Protective Service Central Registry check may be considered when the abuse confirmation history of the individual may pose a risk to the health, welfare and safety of service recipients; and
- B. The confirmed abuse has a rational relationship to a direct service provider's position. Rational relationship means the confirmed abuse is substantially related to the qualifications, duties and responsibilities of a direct service provider position.
- C. Exemptions from the requirements of sections III. A. and B. may be approved for APCSB providers by the DHS designee and for CWSB providers by the CWSB.
 1. Requests for exemptions shall be made in writing by using form DHS 1673, "Request for Exemption (From Criminal Conviction Records Check Standards or Protective Services Central Registry Check Standards)", or a similar form. The individual seeking the exemption must complete the DHS 1673 or similar form. A copy of the individual's current Protective Services Central Registry check must accompany the request.
 2. The "Checklist for Exemption Request" may be used as a reminder of the documents to be submitted for EACH exemption request.
 3. The employer agency must be involved in the exemption process to assure the timely submittal of all required documents and appropriateness of the exemption request. Requests for exemptions shall be routed through the prospective employer agency prior to submittal to the Department or its designee.
 4. **For APCSB Providers:** All documents shall be submitted to the DHS designee. Upon receipt of the written exemption request and other required documents listed on the "Checklist for Exemption Request", the DHS designee shall convene a panel consisting of

- three (3) professional level multi-disciplinary team members to review the request. The panel shall include individuals in at least two different professions with backgrounds in criminal justice, legal and/or the therapeutic mental health field.
5. **For CWSB Providers:** All documents shall be submitted to the CWSB Administrator. Upon receipt of the written exemption request and other required documents listed on the “Checklist for Exemption Request”, the CWSB Administrator shall convene a panel to review the request. The panel may include the CWSB Administrator or designee, the CWSB Program Development Administrator, relevant CWSB Assistant Program and Section Administrators, and anyone else deemed appropriate by the CWSB Administrator or designee.
 6. The panel shall consider the following:
 - a. The relevancy of the individual’s protective services history to the qualifications, functions and duties of the direct service provider position the individual wishes to fill;
 - b. Passage of time since the abuse was committed; and
 - c. Any evidence of rehabilitation, such as letters from counselors or therapists attesting to a sustained improvement in the individual’s behavior, character references, and activities since the commission of abuse.
 7. A single factor may not be evidence of rehabilitation. If necessary, the panel shall request additional information from the individual seeking the exemption.
 8. Individuals requesting exemptions shall be informed in writing of the panel’s decision within 45 calendar days from the date the panel receives all documents needed for a decision to be made. The panel may extend the 45-day period with cause and a written explanation to the individual seeking the exemption.
 9. Individuals who are dissatisfied with the panel decisions on their exemption requests may:
 - a. Request an informal discussion with the APCS/CWSB Administrator; and/or
 - b. Appeal the panel’s decision to the Social Services Division Administrator.
- D. APCS clients may choose not to do APS Central Registry checks on individuals they hire on their own. Clients who choose not to have APS Central Registry checks shall complete form DHS 1672, “Consumer-Employer Choice Regarding Criminal Conviction Record Check and Adult Protective Services (APS) Central Registry Check”, to acknowledge their understanding of these standards and the purpose for the checks, and their decision not to conduct criminal conviction record or APS Central Registry checks on the individuals they plan to hire as direct service providers.