



Licking County Children and Families First Council Help Me Grow Central Coordination Services State Fiscal Year 2017 Request for Proposals

Date Issued:

March 9, 2016

Due:

April 5, 2016 at 11:00AM

Bidders must submit three(3) proposal copies in a sealed envelope entitled:

CFFC HMG CC RFP

Licking County Commissioners Office
c/o Clerk Bev Adzic, 20 S 2nd Street, 4th Floor, Newark, Ohio 43055

Faxed or emailed proposals will not be accepted

Bidders' Conference

Friday, March 18, 2:00 PM
OhioMeansJobs|Licking County
998 East Main Street
Newark, Ohio 43055

Attendance is recommended, but not required, in order to answer questions related to the RFP.

Introduction

Help Me Grow (HMG) is designed to ensure Ohio's children receive a healthy birth and the resources to warrant a healthy and productive start in life. HMG believes all young children deserve the same opportunities to realize their full potential in life, regardless of economic, geographic, and demographic considerations. HMG's Central Coordination (CC) services help families by determining the supports that are best suited for the family's particular needs and referring families to these programs.

Licking County Children and Families First Council (CFFC) is charged with ensuring that HMG services are provided in Licking County. Through this RFP, CFFC will subcontract with an organization to provide CC services. CC services are a fixed price contract, with compensation based upon the successful completion of each deliverable. Available funding is contingent upon the award from the State Help Me Grow Office. Licking County is expected (but not guaranteed) to receive \$48,127.75.

General Information

Centralized coordination services ensure the implementation of a coordinated, community-based infrastructure that promotes family-centered services for expectant parents, newborns, infants, toddlers and their families in collaboration and cooperation with other state and local agencies. Activities conducted through Licking County's HMG program shall provide centralized coordination for HMG Early Intervention and HMG Home Visiting. Activities include:

- (1) Dissemination of information to the public, including primary referral sources, parents of infants and toddlers, and pregnant women, about how to make an appropriate referral into HMG; populations served in HMG; early identification of infants and toddlers with a disability; and services and supports available to pregnant women, infants and toddlers and their families in HMG.
- (2) Implementation of coordinated child find and outreach activities with both early intervention and home visiting programs in Licking County.
- (3) Communication with other community programs to minimize the duplication of services and supports to the population being served.
- (4) Maintaining an electronic directory of services for pregnant women, infants and toddlers with disabilities, first time parents, families in the military, and families with low incomes; and research or demonstration projects being conducted in Licking County relating to infants and toddlers with disabilities.
- (5) Establishing and maintaining centralized referral procedures about obtaining system and program referral information, directing calls to community supports and programs, and making program referrals for those referred to HMG.
- (6) Communicating with the parent to complete HMG referral processes, and entering required information into the statewide HMG data system.

SFY 2017 Grant Timeline -- Dates subject to change

- March 9, 2016: SFY 2017 RFP released. Issuance of this RFP and subsequent selection of a provider does not imply nor guarantee availability of funds.
- April 5, 2016, 11:00 AM: Proposals are due at the Office of the Licking County Commissioners, 20 South Second Street, Newark, Ohio 43055.
- CFFC reviews proposals based on applicant ability to provide services within budget.

- April/May 2016: HMG Central Coordination service provider is selected.
- June, 2016: SFY 2017 contract sent to counties. Available funding is contingent upon the award from the State, and Licking County is expected (but not guaranteed) to receive \$48,127.75.
- July 1, 2016: SFY 2017 Central Coordination service provision begins.
- August 1, 2016: Proposed budget and plan detailing how CC services will be provided is submitted to ODH.
- October, 2016, and January, April and July of 2017: Quarterly program and expenditure reports due to ODH.
- August, 2017- Final expenditure report is due.
- The subcontractor may submit monthly invoices to the Contractor for reimbursement.

Requirements for Funded Projects

- The selected organization must utilize these HMG Dollars to provide Centralized Coordination services for families in Licking County.
- The selected organization will be required to submit to ODH for approval, a program plan and a proposed budget; as well as complete reports as required by ODH. This application mirrors ODH requirements and is designed to provide an understanding of the organization and how the program will be delivered in order to ensure a high quality program is implemented in Licking County.
- The selected organization's program communication must comply with ODH policy on logo use, infant feeding and safe sleep.
- The selected organization is required to enter data into the statewide HMG data system.
- The selected organization is required to maintain an electronic directory of services as outlined by ODH.
- The selected organization is required to consult with the ODH Program Consultant as necessary.
- Proposals must be submitted in strict accordance with the proposal submission instructions provided in this document. Any proposal failing to follow the entire proposal acceptance criteria listed below shall be disqualified from consideration. CFFC will accept only a complete application defined as the following:
 1. Completed and signed Contact Information
 2. Completed Program Details
 3. Completed Budget
- **Proposals must be received by 11:00 AM on April 5, 2016. Bidders must submit three (3) proposal copies in a sealed envelope entitled:** CFFC HMG CC RFP, Licking County Commissioners Office, c/o Clerk Bev Adzic, 20 S 2nd Street, 4th Floor, Newark, Ohio 43055. Proposals must be received by the Commissioner's Office by the date/time listed above.
- FAXED, EMAILED AND LATE PROPOSALS WILL NOT BE ACCEPTED.
- During the review process, CFFC reserves the right to interview the prospective provider, inspect/tour proposed facilities and request additional information, including an electronic version of the proposal. Unsolicited materials received after the deadline date will not be added to previous submissions and will not be considered.
- The selected provider may contract with the CFFC pending allocation of funds to the organization. If a contract is awarded, this RFP guideline shall become part of the contractual agreement.
- A bidders conference will be held at 2:00pm on Friday, March 18 at OhioMeansJobs | Licking County, 998 East Main Street, Newark, Ohio 43055. Attendance is recommended, but not required.
- Contact Sylvia Friel, CFFC Coordinator, at 740-670-8844, or Sylvia.friel@jfs.ohio.gov with questions or request for assistance.

Licking County HMG Central Coordination Services SFY 2017 RFP Application Organization and Instructions

The application contains the following four sections. No page limit is given.

1. Organization Contact Information
2. Program Details -
3. Program Budget- *Instructions/examples are contained in italics.*
4. Ohio Revised Code related to Central Coordination- **3701-8-04**



I. Contact Information

Agency Name	
Agency Address	
Program Name	
Contact person	
Contact person's phone number & email	
Agency Director/President	
Director/President's phone number & email	
Director/President approval (<i>signature</i>)	

II. Program Details

Provide responses in the box below each question.

1. Describe how the organization will implement consistent and appropriate messaging to **potential Licking County program participants (parents of infants and toddlers and pregnant women)** to increase referrals, engagement and retention in the program. Messaging should be inclusive of both Help Me Grow (HMG) Early Intervention and Home Visiting Programs. The description should provide:
 - i. Description of participant outreach plans
 - ii. A description of areas (census track, zip code, neighborhood, or community) within Licking County **targeted** with receiving messages, outreach and engagement and a detailed justification why the area(s) were identified and selected. **(It is not required that an area be targeted)**.
 - iii. Messaging materials (ODH and other materials) to be utilized in Licking County and each area identified, and distribution plans. If using non-HMG materials, provide the source and description of the materials' intended audience and purpose. Include method of promoting LCHMG contact information and the HMG hot line number.
 - iv. Scope and method of engagement (commercials, written materials, etc.).
 - v. A timeline for how the organization will implement the plan (who, what, when, where and how).
 - vi. How the organization will partner with Early Intervention Service Coordination Contractors and Home Visiting Contractors to ensure collaborative and coordinated outreach efforts.
 - vii. How the organization will contact and educate Physicians- OB, Pediatrician, Family Practice; Prenatal Clinics; delivering hospitals, etc. that serve potential participants within Licking County or the surrounding area.
 - viii. Include points of contact where known.

2. Describe how the organization will implement consistent and appropriate messaging to **referral sources** that serve potential participants within Licking County to increase referrals, engagement and retention in the program. Referral sources should include (at minimum): WIC, physicians, OB/GYN clinics, prenatal clinics, hospitals, and other medical facilities, teen pregnancy programs, GRADS. The plan must include:
- i. Plan for developing referral sources and responsible agency staff,
 - ii. Scope and method of engagement (commercials, written materials, visits, etc.);
 - iii. Messaging materials (ODH and other materials), distribution plans, and method of promoting LCHMG contact information and the HMG hot line number. If using non-HMG materials, provide the source and description of the materials' intended audience and purpose.
 - iv. A timeline for how the organization will implement the plan (who, what, when, where and how).
 - v. How efforts will be tracked.
 - vi. Include points of contact where known.

Referring to the ORC Section (B)

3. Describe how the organization will partner with Early Intervention Service Coordination Contractors and Home Visiting Contractors to ensure collaborative and coordinated child find and outreach efforts for Licking County..
- i. List the names of referral sources, including points of contact where known, that the organization plans to work with and relationship with these partners.
 - ii. Describe outreach plan and list events the organization proposes to participate in for the purpose of child find.
 - iii. Describe how the organization will educate primary referral sources on timely identification of potentially eligible pregnant women, infants and toddlers, including the early identification of infants and toddlers with a disability.
 - iv. Describe how the organization will disseminate information, provided or approved by HMG, to primary referral sources, of their federally mandated role in early intervention and referral of a child, who has a suspected disability or developmental delay, to HMG

4. Describe how the organization will communicate with other local programs serving pregnant women and children to minimize the duplication of services to potentially eligible pregnant women, infants, toddlers and their families.

Referring to ORC Section (C)

5. Describe the plan for creating/updating and maintaining an electronic directory of early intervention service providers and describe the agency's experience with managing a centralized referral system.

Referring to ORC Section (D)

6. Describe the plan to address how the organization will complete the HMG referral processes and perform the day-to-day staffing of the intake including, including:

- i. How phones and email/faxes are covered;
- ii. Maintaining and disseminating one local telephone number with voice mail capabilities, fax, and email for the public to use to make a referral;
- iii. How information is collected to be considered a system referral;
- iv. How calls are directed to community supports and programs;
- v. When and how data will be entered into the HMG database;
- vi. How individuals used for centralized coordination activities have sufficient knowledge and are trained about the HMG program services, referral processes, and the HMG reporting system.

7. Describe the process to be used when the families are offered choice of providers when there are multiple Home Visiting providers within the county.

Referring to ORC Sections (D) through (G)

8. The organization attests that it will meet the requirements described in ORC Section D through G ___ Yes

9. Provide the name of the program contract manager or describe the process to hire and train this person.

III. Annual Program Budget The budget provided is the total amount of **request from CCFFC**. For each budget category, and expenditure classification, provide explanations as needed as well as the total amount requested.

Budget Category	Expenditure Classification	Annual Budget Amount
1. PERSONNEL – List salaries and benefits for each person whose time is spent working directly with the program; include fulltime and part-time staff. The annual budget amount should be the total of salary and benefits charged to the program		
Name of staff person, % of time with program	Central Coordination	\$ Total charged to program
Name of staff person, % of time with program	Contract Manager	\$ Total charged to program
Add lines as necessary		
Total Personnel Expenditures		\$ Total of lines above
2. CONTRACTS		
Name of company/organization	Outreach	\$ Amount charged to contract
Add lines as necessary		
Total Contractual Costs		\$ Total of lines above
3. MAINTENANCE (List each separately)		
Rent	Central Coordination	\$ Amount charged to contract
Promotion		
Audit		
Insurance		
Mileage reimbursement <i>Travel Expenses incurred while delivering the program.</i>		
Other travel		
Seminars/Workshops		
Office Supplies		
Educational Supplies		
Postage		
Telephone		
Photocopying		
Printing		
Total Maintenance Costs		\$ Total of lines above
4. EQUIPMENT		
Identify equipment cost	Central Coordination	\$ Amount charged to contract
Add lines as necessary		
Total Equipment Costs		\$ -
GRAND TOTAL		\$ Total of categories 1-4

*** Any expenditures under "Other" will need a narrative description which elaborates on the proposed expenditure.**

Other - expenditure	Narrative description fully elaborating on the proposed expenditure
Add lines as necessary	

Additional funders- HMG may only be a portion of the amount needed to fund the program. List program funders and amount of funding from each.

Program Funder	Amount of funding
Insert lines as necessary	

Ohio Revised Code 3701-8-04 Central coordination.

(A) Centralized coordination contractors shall ensure the implementation of coordinated public awareness activities with inclusive of both help me grow (HMG) early intervention and home visiting programs for the counties of contracted service. Public awareness activities shall include all of the following:

(1) Engaging the public, including primary referral sources, parents of infants and toddlers, and pregnant women to maximize:

- (a) Awareness of HMG, including early identification of infants and toddlers with a disability;
- (b) Dissemination of information provided by the department on how to make an appropriate referral into HMG;
- (c) Dissemination of information provided or approved by the department on the populations being served in HMG; and
- (d) Awareness of the services and supports available to pregnant women, infants and toddlers and their families in HMG.

(2) Dissemination of information provided or approved by the department about the HMG program to the public, including primary referral sources, parents of infants and toddlers, and pregnant women.

(3) Communication to the public about the HMG telephone helpline and the HMG website.

(B) Centralized coordination contractors shall ensure the implementation of coordinated child find and outreach activities with both early intervention and home visiting programs for the counties of contracted service.

Contractors shall:

(1) Educate primary referral sources on timely identification of potentially eligible pregnant women, infants and toddlers, including the early identification of infants and toddlers with a disability;

(2) Disseminate information provided or approved by the department to primary referral sources of their federally mandated role in early intervention child find and time line of no more than seven calendar days to refer a child who has a suspected disability or developmental delay to HMG;

(3) Participate in local community events for the purpose of child find, as opportunities allow; and

(4) Communicate with other local or community programs serving pregnant women and children to minimize the duplication of services and supports to potentially eligible pregnant women, infants, toddlers and their families.

(C) Centralized coordination contractors shall create and maintain, or update an existing electronic directory of early intervention service providers, inclusive of early intervention service coordination contractors, home visiting contractors, resources and experts available in the counties of contracted service; professional and other groups that provide assistance to pregnant women, infants and toddlers with disabilities, first time parents, families in the military, and families with low incomes; and research or demonstration projects being conducted in the counties of contracted service relating to infants and toddlers with disabilities. Contractors shall:

(1) Update the directory at least once every calendar year and;

(2) Provide the electronic directory to the department upon request.

(D) Centralized coordination contractors shall establish and maintain centralized referral procedures about obtaining system and program referral information, directing calls to other community supports and programs, and making program referrals for all pregnant women and children and their families referred to HMG, in accordance with the following:

(1) Maintain and disseminate one local telephone number with voice mail capabilities, fax, and email for the public to use to make a referral;

(2) Ensure that the individuals used for centralized coordination activities have sufficient knowledge and are trained in accordance with rule [3701-8-03](#) of the Administrative Code, about the HMG program services and referral processes in order to accurately describe available options to those who call; and

(3) Complete HMG referral processes, including:

(a) Collect the minimum information to be considered a system referral. The contractor may collect other information from referral sources or individuals who self-refer, but the minimum information required for a system referral is:

(i) Child's due date or date of birth, when applicable;

(ii) Child's county of residence;

(iii) The first and last name of the child's parent; and

- (iv) Parent's telephone number, email address, or mailing address.
- (b) Every system referral from public children's services agencies (PCSA) must be received on a completed form HEA 8021.
- (c) Every referral from an early intervention service coordinator contractor or a home visiting contractor must be received on a completed form HEA 8045 which meets the following central coordination contractor requirements:
 - (i) One successful contact with the parent in accordance with paragraph (D)(3)(e) of this rule and
 - (ii) Provider choice in accordance with paragraph (D)(3)(f) of this rule.
- (d) Referral information set forth above shall be entered by the centralized coordination contractor into the statewide data system for HMG within one business day after the information is received by the centralized coordination contractor.
- (e) Once a system referral is obtained in accordance with either paragraph (D)(3)(a) or (D)(3)(b) of this rule, the centralized coordination contractor shall make one successful contact with the parent. The minimum requirements to contact the parent are:
 - (i) When a parent's phone number or email address has been provided, the centralized coordination contractor shall make a minimum of three different attempts to call or e-mail the parent, until successful contact is made, within fourteen calendar days.
 - (ii) When a parent's phone number or email address has not been provided and the system referral contact information provides only a mailing address, the centralized coordination contractor shall send a postcard or letter within fourteen calendar days with information on how to contact the centralized coordination contractor if interested in HMG.
 - (iii) If a successful contact has not been achieved after fourteen calendar days with the parent since receiving the system referral, or a successful contact results in a parent communicating he or she is not interested in HMG, the centralized coordination contractor shall exit the system referral in the statewide data system for HMG.
 - (iv) All contact attempts, successful and unsuccessful, shall be documented into the statewide data system within one business day after the attempt is made.
- (f) During the contact with the parent, the centralized coordination contractor shall provide information about HMG and obtain the following minimum information:
 - (i) Whether or not the parent is interested in participating in HMG;
 - (a) If the parent communicates an interest in participating in HMG, the centralized coordination contractor shall then move on with the remaining requirements in this paragraph.
 - (b) If the parent communicates that he or she is not interested in participating in HMG, the centralized coordination contractor shall exit the system referral in the statewide data system within one business day, effective the date of communication with the parent.
 - (ii) If the parent communicates that there is a concern about the child's development, the centralized coordination contractor shall offer the parent a choice of developmental screening or referral to an early intervention service coordination contractor for a developmental evaluation. The central coordination contractor will, when selected, make an early intervention program referral within one business day into the statewide data system, which begins the forty-five calendar day time line for children referred to early intervention, as described in rule [3701-8-07.1](#) of the Administrative Code. Any person who has been trained and has documentation of that training is qualified to complete developmental screening with children and families at central coordination; and
 - (iii) If the parent communicates that they may meet home visiting program eligibility, the centralized coordination contractor shall offer the parent a choice of contractor, where one exists, and make a program referral to the chosen home visiting contractor within one business day into the statewide data system for HMG. The program referral to a home visiting contractor begins the thirty calendar day time line for the expectant first-time mother or child referred to home visiting, as described in rule [3701-8-06.1](#) of the Administrative Code.
 - (a) If the family's choice of contractor does not have capacity to serve them, inform the parent that they may join the contractor's wait list for services; or inform the parent that they may choose another contractor for services, if one is available.

(b) When age at system referral is used for eligibility, a wait listed status does not impact the eligibility.

(iv) Program referrals may be made simultaneously to both HMG early intervention and home visiting.

(g) If a referral is obtained in accordance with paragraph (D)(3)(c) of this rule, the centralized coordination contractor shall make a system referral in accordance with paragraph (D)(3)(d) of this rule, central coordination contractors shall:

(i) Make a program referral as indicated on form HEA 8043 for either developmental screening, to an early intervention service coordination contractor, and/or to a home visiting contractor.

(ii) If the family's choice or first available contractor does not have capacity to serve them, the centralized coordination contractor shall make contact with the family in accordance with paragraph (D)(3)(f)(iii)(a) of this rule.

(h) Ensure that the system referral is exited and documented as such in the statewide data system for any of the following reasons:

(i) The minimum contact attempts were made without successful contact, in accordance with paragraph (D)(3)(e) of this rule;

(ii) A child is forty-five or fewer calendar days from the child's third birthday. Prior to exiting the system referral, the centralized coordination contractor shall provide information to the parent about other community resources available in the county of residence. For a child who is being referred to early intervention, the contractor shall provide information to the parent about special education pre-school at the local education agency;

(iii) When the referred child or expectant first-time mother is not residing in the state of Ohio; or

(iv) An individual declines to participate in HMG.

(i) When the family cannot be reached or the family declines participation on the phone, the central coordination contractor shall send a completed HEA 8037 to the referral source when that referral source is a professional,.

(j) When a central coordination contractor exits a system referral due to loss of contact, the contractor shall send a written email or post mail notification to the last known address or email with the following information:

(i) Details of the attempts which have been made to contact the family;

(ii) This notification is the last contact attempt which central coordination will make;

(iii) Contact information for the HMG; and

(iv) Information explaining HMG.

(E) When a child is being referred to early intervention as identified on form HEA 8021 the centralized coordination contractor shall make a program referral to an appropriate early intervention service coordination contractor the same day the referral is entered into the statewide data system.

(F) Centralized coordination contractors shall document any contacts received in the statewide data system for HMG within one business day after the information is received. For individuals already in the data system, the following requirements apply:

(1) When the centralized coordination contractor is notified that an individual has moved or another circumstance requires that the individual change either home visiting or early intervention service coordination contractors, the centralized coordination contractor is responsible for completing the process described in paragraphs (D)(3)(e) and (D)(3)(f) of this rule and documenting the transfer in the statewide data system for HMG.

(2) When a referral is received regarding a program an individual is not participating in, the centralized coordination contractor is responsible for completing the process described in paragraphs (D)(3)(e) and (D)(3)(f) or (D)(3)(g) of this rule.

(G) Centralized coordination contractors shall designate one individual as the contract manager who is responsible for oversight and monitoring of the required activities of the grant, contract or agreement.

Effective: 01/15/2015