



Solicitation Information

30 December 2004

RFP #B04679

TITLE: *Day Program for Adults with Cognitive Disabilities*

Submission Deadline: 2 Feb 05 @ 2:00 PM (Eastern Time)

Questions concerning this solicitation may be e-mailed to the Division of Purchases at questions@purchasing.state.ri.us no later than **January 18 at 12:00 Noon (EST)**. Questions should be submitted in a *Microsoft Word attachment*. Please reference the RFP / LOI # on all correspondence. Questions received, if any, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

SURETY REQUIRED: No

BOND REQUIRED: No

Jerome D. Moynihan, C.P.M., CPPO
Administrator of Purchasing Systems

Vendors must register on-line at the State Purchasing Website at www.purchasing.state.ri.us.

NOTE TO VENDORS:

Offers received without the entire completed three-page RIVP Generated Bidder Certification Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION FORM

SECTION 1 - INTRODUCTION

The Rhode Island Department of Administration/Office of Purchases, on behalf of the Rhode Island Department of Human Services, is soliciting proposals from qualified firms to conduct all activities of *the Health Resources and Services Administration, Maternal and Child Health Bureau (HRSA, MCHB) State Traumatic Brain Injury Demonstration Grant 1 H21 MC00057 01*. The RI Department of Human Services was awarded a Nursing Facilities Transition Grant from the Centers for Medicare and Medicaid Services in 2002. This award includes funds for a day habilitative program in Rhode Island which would serve adults with acquired brain injuries and other significant cognitive challenges whose needs are not met by the existing state programs. All aspects of the proposed project will be performed according to the detailed specifications described elsewhere herein, and in accordance with the terms of this Request and the State's **General Conditions of Purchase**, available at www.purchasing.ri.gov.

This is a Request for Proposals, not an Invitation for Bid: responses will be evaluated on the basis of the relative merits of the proposal, in addition to price; there will be no public opening and reading of responses received by the Office of Purchases pursuant to this Request, other than to name those offerors who have submitted proposals.

INSTRUCTIONS AND NOTIFICATIONS TO OFFERORS:

- Potential offerors are advised to review all sections of this Request carefully, and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.
- Alternative approaches and/or methodologies to accomplish the desired or intended results of this procurement are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this Request will be rejected as being non-responsive.
- All costs associated with developing or submitting a proposal in response to this Request, or to provide oral or written clarification of its content, shall be borne by the offeror. The State assumes no responsibility for these costs.
- Proposals are considered to be irrevocable for a period of not less than sixty (60) days following the opening date, and may not be withdrawn, except with the express written permission of the State Purchasing Agent.
- All pricing submitted will be considered to be firm and fixed unless otherwise indicated herein.
- Proposals misdirected to other State locations or which are otherwise not present in the Office of Purchases at the time of opening for any cause will be determined to be late and will not be considered. **For the purposes of this requirement, the official time and date shall be that of the time clock in the reception area of the Office of Purchases.**
- It is intended that an award pursuant to this Request will be made to a prime contractor, who will assume responsibility for all aspects of the work. Joint venture and cooperative proposals will not be

considered, but subcontracts are permitted, provided that their use is clearly indicated in the offeror's proposal, and the subcontractor(s) proposed to be used are identified in the proposal.

- All proposals must include the offeror's FEIN or Social Security number as evidenced by a W9, downloadable from the Division of Purchases website at www.purchasing.state.ri.us.
- The purchase of services under an award made pursuant to this Request will be contingent on the availability of funds.
- **Offerors are advised that all materials submitted to the State for consideration in response to this Request for Proposals will be considered to be Public Records as defined in Title 38 Chapter 2 of the Rhode Island General Laws, without exception, and will be released for inspection immediately upon request once an award has been made.**
- Licensure/Certification Standards referenced in this offering can be obtained by contacting Beth Pinkham at 401-462-0706 between the hours of 8:30 AM and 4:00 PM Monday through Friday, through February 2, 2005.
- Interested parties are instructed to peruse the Division of Purchases web site on a regular basis, as additional information relating to this solicitation may be released in the form of an addendum to this RFP / LOI
- The Offeror should be aware of the State's MBE requirements, which addresses the State's goal of ten per cent (10%) participation by MBE's in all State procurements. For further information, contact the MBE Administrator, at (401) 222-6253 or visit the website <http://www.rimbe.org>

SECTION 2 – PURPOSE AND BACKGROUND

PURPOSE:

The RI Department of Human Services was awarded a Nursing Facilities Transition Grant from the Centers for Medicare and Medicaid Services in 2002. This award includes funds for a day program in Rhode Island which would serve adults with acquired brain injuries and other significant cognitive challenges whose needs are not met by the existing state programs.

People with adult onset cognitive and/or behavioral challenges have a common, but currently unmet, need to receive supports needed to move toward increased community participation and productivity. Day services will add immeasurable value to the quality of life of these people. Programs are expected to revolve around the consumer's goals and preferences, reflecting their individual perception of what constitutes wellness.

The successful offeror will use this one-year procurement to cover site acquisition and/or renovation costs for a day program for individuals with adult onset of cognitive dysfunction. In addition, the offeror will use the procurement to cover staffing costs (in the latter six to nine months of the initial procurement).

The Department envisions ideal proposals for day programs to be those that are operational within six months of notification of award. Possible means for this would be development of a day program within an existing facility (Adult Day Care, Developmental Disability Day Program) that adds staffing and programs appropriate to the needs of this population.

If the contractor currently operates existing facilities, the procurement will be used to hire and train additional staff and develop the new program to appropriately meet the needs of those transitioning into the day program. Likewise, if the contractor currently operates programs for seniors such as those based out of Adult Day Care Centers, the procurement will be used to hire additional pertinent qualified staff and develop training resources to address areas outside of the current expertise of the facility.

At a minimum, the program for younger adults will include independent living skills training and reinforcement (such as use of transportation, financial management, and development of an individualized cognitive cueing system).

In order to keep programs cost-neutral, organizations might draw upon community resources such as the University of Rhode Island, and peer support organizations such as Independent Living Centers and the Brain Injury Association.

This RFP is new announcement. No previous RFP has been offered for a day program to serve adults with acquired brain injuries and other significant cognitive challenges.

BACKGROUND:

Rhode Island's programs for those with developmental disabilities, and severe and persistent mental illness generally meet the need of a diverse array of populations. Yet for those individuals with severe cognitive or behavioral disabilities incurred after the age of 21, the existing systems are only beginning to meet their complex needs. These are the people who may fall through the cracks, and often end up in a nursing facility when community placement may be desired and more appropriate.

In Rhode Island, as in the rest of the nation, cognitive dysfunction from traumatic brain injuries (TBI) and other injuries or disorders presents a relatively widespread and largely unmet need. The CDC, for example, has estimated that a little more than 2 percent of the U.S. population currently live with disabilities resulting from traumatic brain injury (Thurman 1999). In 2002, the Traumatic Brain Injury Technical Assistance Center (supported and administered by the Maternal and Child Health Bureau in HRSA) estimated that over 2,500 individuals were brought to an emergency room with traumatic brain injuries and 605 were hospitalized in that year in Rhode Island (<http://www.tbitac.org/download/StateFactSheets/RI.txt>). The Rhode Island Department of Human Services, in partnership with PARI Independent Living Center and the Brain Injury Association of Rhode Island, established a program of intensive service coordination and community supports for institutionalized individuals who had TBI. As part of this coordinated system, this RFP is seeking an entity/entities to operate a day program to serve persons who by virtue of acquired cognitive dysfunction (including but not limited to TBI) through adult-onset injury or disease have at least one limitation in a major life activity area.

The critical need for a day program for persons with adult-onset of acquired cognitive dysfunction, including TBI, was identified through Rhode Island's "Date Certain" grant and the TBI planning

initiative. Both of these activities found that day programs are the top unmet need for enabling those institutionalized to live in the community. People with adult onset cognitive and/or behavioral challenges have a common, but currently unmet need to receive supports needed to move toward increased community participation and productivity. Day habilitation services will add immeasurable value to the quality of life of these individuals as they are reintegrated into their neighborhoods and communities. Many of those transitioning, may have been institutionalized only because there were insufficient informal and formal supports in place. It is certainly feasible that some of these people will become employed eventually, if encouraged and mentored. The community also benefits from diversity of its population. Seniors and people with disabilities of all types have talents and abilities that can benefit others. Institutionalization tends to shelter not only the individual, but the community from potentially valuable community participants.

The Rhode Island Medical Assistance Program currently has six established Home and Community Based Waivers, yet most of them are unable to meet many of the needs of individuals with adult-onset of cognitive disabilities in order to enable them to live within the community. The programs are as follows:

Developmentally Disabled Waiver: Serving approximately 2000 individuals, this waiver includes all services of the Aged and Disabled Waiver in addition to habilitation, supported employment, and a very strong community support system for individuals. This waiver serves those who were disabled before the age of 22, and who have dysfunction in at least three major life activity areas. This waiver offers strong support to those with physical and cognitive disabilities, but is not available to those disabled after the age of 21.

Aged and Disabled Waiver: Serving approximately 1600 individuals, this waiver includes personal care, minor home modifications, durable medical equipment, and case management. This waiver is the most broad-based of Rhode Island's waivers, serving adults of all ages and types of disability. People who have cognitive and/or behavioral health disabilities generally require strong family support in addition to these waiver services in order to live safely in the community.

The Department of Elderly Affairs Waiver: This waiver serves approximately 500 individuals aged 65 and over. It includes the same services as the Aged and Disabled Waiver as well as more intensive case management provided by the Department of Elderly Affairs. Many individuals served by this waiver also use Adult Day Care (Adult Day Care is covered as a state plan service in Rhode Island). Many individuals covered by this waiver have cognitive and physical disabilities, but those with cognitive disability generally need family support in addition to waiver services in order to remain in the community. There are also 30 assisted living slots within the DEA waiver for people transitioning from nursing facilities.

The Severely Physically Disabled Waiver: This waiver serves approximately 75 individuals with hemiplegia and quadriplegia. Administered in conjunction with PARI Independent Living Center, it is a consumer-directed model of personal care services, consumer preparation, more intensive case management, and all of the services provided under the Aged and Disabled waiver. Most of the individuals who transitioned from nursing facilities under the "Date Certain" grant continue to be served under this waiver, although a couple are served under the Aged and Disabled waiver.

Assisted Living Waiver: This waiver serves 200 individuals in certain licensed Assisted Living Residences. Under this waiver, individuals use an enhanced Supplemental Security Income (SSI) payment for room, board and basic Assisted Living-required services, and a Medical Assistance service payment for additional services needed to live in that environment. All individuals under this waiver must require assistance in at least two activities of daily living (ADLs).

The Habilitative Waiver was approved in December 2001, and implemented on May 1, 2002. Serving up to twenty-five people, this waiver offers case management, residential and day habilitation services, supported employment, private duty nursing and rehabilitation services to persons who have a sub-acute hospital level of care and who do not qualify for developmental disability services. This waiver primarily targets people with severe cognitive disabilities that began after age 21 who formerly had no option except institutionalization.

This RFP is a mechanism to provide funds for the significant tasks of site acquisition and/or start-up of a day habilitation program. Ongoing funding for the day habilitation program for people with adult onset cognitive and/or behavioral challenges can be sustained through Medicaid service payments as Adult Day Care, or in the recently implemented Habilitation Waiver.

Finally, The Division of Behavioral Health of the Department of Mental Health, Retardation and Hospitals also has existing resources for a portion of those individuals with adult onset of cognitive disorders. An extensive network of group homes, psychiatric rehabilitation and support services is funded under Medical Assistance. Although the network provides excellent mental health services, it is generally not funded or equipped to deal with the rapidly aging population with co-morbid physical disabilities, or those with secondary mental health disabilities.

TBI planning initiative

Rhode Island offers an extensive range of options in its community-based support system. However, a wide range of consumers, families, advocates and providers have consistently reported that there is insufficient information on available options, that access to services is confusing and difficult, and that services tend to be provided in discrete packages geared to one primary need, even though many people have multiple cross-system challenges that need to be addressed for optimal wellness. Several statewide consortia of consumers, families, advocates, providers and state agencies have been examining these issues and have identified action steps needed to create systematic changes. The consortia processes have resulted in one of Rhode Island's most significant strengths in the creation of forums for disparate interest groups to communicate and build linkages on an ongoing basis. Although geared to different populations, these consortia (including The Children's Roundtable, Living Rite, and the TBI Planning Process) have all developed similar recommendations. Remarkable in all community forums, has been the universal demand for information sufficient to make informed choices, coordination and integration of existing services, and capacity to provide community-based services suitable to individual needs.

The TBI Planning Process was funded by a grant from the Health Resources and Services Administration. A combination of mailed surveys, public meetings and workgroups identified a priority list of needs that included improved public information and awareness, improved integration of services, and improved service capacity, especially habilitative services for adult-injured persons. In

fact, the most notable gap was the lack of TBI-specific day or residential habilitative services. A primary objective identified was to develop a day habilitative/rehabilitative program that included long-term employment supports. In addition, one of the notable findings from the TBI Planning Process was that many of the providers responding to the Needs/Resource Surveys cited the lack of training providers have in TBI. Findings included:

- None of the providers reported serving only TBI survivors, and most reported that people with TBI were a small fraction of their total client/patient population;
- More than half of TBI providers have had no training in TBI; and yet
- Most providers reported they had the capacity to serve more people with TBI.

While there is always room to strengthen any service delivery system, Rhode Island's programs for those with developmental disabilities, and severe and persistent mental illness generally meet the needs of those populations. Consumers have options to choose and self-direct their services, choices for living arrangements, and can usually access the support services needed for successful community living.

Yet the existing systems are only beginning to meet the complex needs of those with severe cognitive or behavioral disabilities incurred after the age of 21. The challenge is to develop a system that can be maintained under cost neutrality provisions, that has flexibility to allow individuals options, choice, and sometimes non-traditional services, and that has a well-trained workforce capable of insuring health and safety even for those with significant cognitive challenges and minimal family support. These requirements can be met by merging the best of existing service delivery models into a comprehensive system based on individual choice and needs. Among the primary programs which might benefit many of these individuals is a therapeutic day program, using a clubhouse model (or other model) that will bridge habilitative and vocational needs with structured intervention. The hub of any of these individualized service delivery packages will be the individual aided by educated service coordinators/case managers in locating and transitioning to appropriate services from the nursing facility based on individual goals and preferences

1. *Relevant documents* (Available by contacting Beth Pinkham at 401-462-0706)

Department of Elderly Affairs (DEA) "Rules, Regulations and Standards for Licensing of Adult Day Services Programs", approved May 1999.

"Final Regulations: Rules, Regulations and Standards for Licensing Agencies Providing Services or Support to Adults with Developmental Disabilities in RI", approved December 21, 1995

Thurman D, Alverson C, Dunn K, Guerrero J, Sniezek J. Traumatic brain injury in the United States: a public health perspective. *Journal of Head Trauma and Rehabilitation* 1999;14 (6):602-15.

The Traumatic Brain Injury Technical Assistance Center. <http://www.tbitac.org/>

SECTION 3 - SCOPE OF WORK

GENERAL DESCRIPTION:

The Goal of this procurement is to establish one or more day programs to meet the needs of people with adult onset cognitive disability who do not otherwise qualify for vocational rehabilitation or existing mental health supports, but for whom daily structured intervention and peer support is likely to result in an enhanced capacity to function independently and productively.

The contractor(s) will identify and renovate (if necessary) the physical location for a day program for adults with acquired brain injuries and other cognitive challenges; hire and train day program staff; and enroll the first client within the first nine months of the program.

Partners in the Oversight Committee for the day program will include: The Governor's Permanent Advisory Commission on TBI, The Brain Injury Association of Rhode Island, Adult Day Care Association, Independent Living Centers, one consumer representative from the TBI implementation group and one representative from the Consumer Advisory Committee. The Oversight Committee will monitor monthly reporting activities of the day program.

The Governor's Permanent Advisory Committee on Traumatic Brain Injury and other community partners will lend technical assistance to the day program and will ensure that best practices are followed for program implementation and development.

TASKS:

The contractor shall undertake the following activities:

- Retain the consultant services of a licensed Rhode Island Clinical Neuropsychologist for at least ten hours per week as the Program Clinical Consultant;
- Identify, renovate (if necessary), and furnish a facility appropriate for the day program;
- Develop a program which revolves around the consumer's goals and preferences, reflecting their individual perception of what constitutes wellness;
- Meet the Licensing and Certification Standards established by the Department of Mental Health, Retardation and Hospitals, Division of Developmental Disabilities or Rules, Regulations and Standards for Licensing of Adult Services Programs established by the Rhode Island Department of Elderly Affairs.
- Hire and train, as necessary, appropriate and sufficient staff for the program;
- Enroll the first clients within 9 months of the program's funding;
- Establish the sustainability of the program by obtaining ongoing support through Medicaid payment (Adult Day Care and/or day habilitation), arrangements with the Rhode Island Office of Rehabilitation Services, and/or application for Legislative grants;
- Assist clients toward assuming leadership roles in day program operations.

Required activities are to be conducted in the order listed above.

DELIVERABLES:

1. Reports

- a. Once the day program begins admitting clients, direct service providers will be responsible for transmitting detailed client data by the 15th of each month including: 1. Referral Source, 2. Reason

for Referral, 3. Summary of Goals, 4. Summary of Treatment, and 5. Summary of Progress toward Goals.

- b. In addition, the contractor will provide the CAH with a draft report based on the contractor's completion of the tasks. The draft report will be reviewed by Division staff and requested modifications shall be included in the final version of the report. The contractor will provide electronic and/or paper copies of the report to the CAH, as requested. Electronic reports shall be submitted in a software format that can be easily read and/or used by the CAH.

2. Training sessions, instruction manuals, etc.

The contractor will train staff in providing appropriate services to adults experiencing adult-onset of TBI and other cognitive dysfunctions which will include but is not limited to: offering a wide variety of meaningful activities responsive to individual needs; coordinating vocational services; identifying opportunities to involve clients as valued members of the community; developing activity schedules which reflect individualization and opportunities for choice, community participation, and the development of valued skills. All training materials shall be submitted to the CAH as part of the contractor's reporting requirements.

REQUIREMENTS:

Contractual and program requirements include:

1. General

The contractor will identify, renovate (if necessary) and furnish the physical location for a day program for adults with acquired brain injuries and other cognitive challenges; hire and train day program staff; and enroll the first client within the first nine months of the program.

Partners in the Oversight Committee for the day program will include: The Governor's Permanent Advisory Commission on TBI, The Brain Injury Association of Rhode Island, Adult Day Care Association, Independent Living Centers, one consumer representative from the TBI implementation group and one representative from the Consumer Advisory Committee. The Oversight Committee will monitor monthly reporting activities of the day habilitation program.

The Governor's Permanent Advisory Committee on Traumatic Brain Injury and other community partners will lend technical assistance to the day program and will ensure that best practices are followed for program implementation and development.

2. Required contractor/staff expertise and/or credentials, experience, ability and capability

The offeror must show evidence of having completed similar projects. The contractor must have demonstrated experience developing and/or incorporating new programs into its existing operations. In addition, the offeror must demonstrate prior experience identifying and renovating (if required for this project) new facilities.

The contractor must demonstrate the ability to meet all state and local requirements for a day program, including fire and building code requirements.

The contractor must have demonstrated expertise and experience in providing responsive services to adults with brain injuries and other cognitive dysfunctions.

The contractor must demonstrate its abilities and capabilities to operate the program and to engage the community (including community agencies and consumers) as an active and integral part of its programs.

The successful offeror will show that the contracting entity is able to employ, train and supervise sufficient individuals with appropriate qualifications to operate the program. This includes a documented commitment by a Clinical Neuropsychologist licensed to practice in Rhode Island who will devote at least 10 hours per week as a clinical consultant.

While no minimum number of full time or part time staff is required for the successful offeror, when responding to this RFP, please indicate how the planned number of staff will meet all contract requirements within the time frame required in the RFP.

In seeking to provide support services to adults with brain injuries in Rhode Island, offerors will be required to meet the Licensing and Certification Standards established by the Department of Mental Health, Retardation and Hospitals, Division of Developmental Disabilities (MHRH, DDD) or Department of Elderly Affairs (DEA) Rules, Regulations and Standards for Licensing of Adult Day Services Programs. The facility and its operating procedures (ie. rules, regulations, and standards) must be consistent with those outlined in the licensing standards. The provider must become licensed by DEA or MHRH prior to opening for operations, if not already licensed.

In addition, the successful contractor must have competent administrative structures (operationally and fiscally) to support the day program described within this RFP.

3. Term of contract

The contract term will be 12 months with an optional no additional cost extension of up to 6 months from the date the contract is signed by a CAH representative and the contractor.

4. Number of awards

At minimum, one contract will be awarded for the day program. The intent is to fund the most qualified contractor. However, if the most qualified contractor does not require site renovation costs, there will be sufficient funds to award more than one contract.

5. Conditions governing subcontracting

If the contractor intends to use any subcontractors, the contractor must clearly identify the subcontractor in the response to the RFP. The contractor retains responsibility for the completion and quality of any work assigned to subcontractors.

6. Completion of tasks

The tasks described in the “Tasks” portion of this RFP must be completed in the order in which they are described. As the required activities can only reasonably be completed in this order, this should not present a problem to the potential contractor.

The entire project must be completed within twelve months (with an optional 6 month extension) of the contract being signed by the contractor and Division representative.

7. Setting for work, meeting and other relevant activities

The Division will not provide office or other space for the contractor. All work other than meetings with Division staff will occur at a location of the contractor’s choosing. The location(s) chosen must be equipped to conduct the required activities as specified in the RFP. The offer must describe the ways in which the facility will be sufficient to ensure the contractor can successfully complete all required project tasks.

8. Compliance with statutory, regulatory, or other standards

The contractor must comply with all applicable State and Federal regulations and statutes.

9. Compliance with program standards

The contractor is required to comply with all applicable State laws and DHS program standards. The contractor will follow all requirements regarding confidentiality of client information as required by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

10. Ability to integrate/communicate with state data systems

Data generated by the day program, including its monthly reports, must be compatible with the state reporting system. As noted in Items 6 and 10, the contractor must follow HIPAA requirements regarding confidentiality of client data.

11. Cooperation/coordination with other agencies, contractors, or entities

In signing a contract with the Division, the contractor agrees to submit the final report to Division staff as requested to do so. The Contractor agrees to make changes requested by the Division staff and partners.

12. Agreement that rights to data and work products revert to the State on payment

In signing a contract with the Division, the contractor agrees that all data and other work products developed as part of this project are the property of the Division on the completion of the project and payment of the contractor.

13. Confidentiality

As required by HIPAA and other State and Federal rules, the contractor must maintain the confidentiality of all information on clients. Any information provided by the Division to the contractor for the completion of the project may not be sold, given or otherwise shared with outside parties. The final report will include general and aggregate information (and not contain any identifiable personal information about clients).

14. Computer/data/data collection support

Should they be required, the Contractor will provide all computers and associated equipment (including but not limited to printers, modems and other equipment) required for the completion of the project.

15. Office space, office equipment, office support

The Contractor will provide office space, office equipment and office support sufficient to allow the Contractor to fulfill contractual requirements in a timely and high-quality manner.

16. Travel

No travel is expected other than locally to the Division's offices. Any and all expenses related to that travel is the Contractor's responsibility.

17. Supervision of subcontractors

The Contractor is responsible for all subcontractors and employees involved in the completion of this project. The quality of work by subcontractors and employees is the responsibility of the Contractor. The Contractor is expected to supervise the activities of subcontractors and employees in order to ensure quality.

18. Contractor Payment

The contractor will receive payment on a task-completion basis. Completion of the following stages will be required for the contractor to receive payment:

- The first installment will be payable after the contractor is legally committed to a facility appropriate for the day program and acceptable to CAH (lease or approved purchase agreement).
- The second installment will be payable after appropriate renovations to that facility have been completed. The contractor will be required to show completion of this stage by providing information considered acceptable by CAH, including appropriate licensure.
- The third payment will be payable after the contractor has hired and trained, as necessary, appropriate and sufficient staff for the program. The contractor will be required to provide evidence

that staff have been hired and trained, and that the training adheres to specifications outlined in the rules, regulations, and standards governing the facility's license and DHS requirements.

- The fourth payment will be payable after the program has enrolled the first clients within 9 months of the program's funding. The contractor will be required to document enrollment, to CAH's satisfaction, on a monthly basis once the program has become operational.
- The final payment will be payable after the contractor has submitted a final report acceptable to CAH, in which it has documented enrollment of at least 20 persons, steps taken to ensure sustainability of the program and to assist clients toward assuming leadership roles within one year of opening.

SECTION 4 – PROPOSAL QUESTIONS & SUBMISSION

Interested parties may submit e-mailed questions, in accordance with the terms and conditions described on page one of this solicitation. Questions received, if any, will be answered and posted as an addendum to this solicitation. It is the responsibility of all interested parties to download that information. If computer technical assistance is needed, call the Help Desk at 401 222-2142, ext 134.

The opportunity to ask questions via email is the sole opportunity for communication with State parties regarding detailed information about this solicitation.

Proposals must include the following:

1. A signed and completed **RIVIP Bidder Certification Cover Form** (all three pages) with **a letter of transmittal** signed by an owner, officer, or authorized agent of the firm or organization, acknowledging and accepting the terms and conditions of this Request, and tendering an offer to the Department of Human Services. The signature of the official with legal authority to bind the organization into a contractual agreement should also be included. This form is downloadable from www.purchasing.state.ri.us
2. A signed and sealed **Cost Proposal** for the scope of services reflecting the hourly rate or other fee structure, as well as the other direct costs estimated for leasing and renovating the site. The **Cost Proposal Summary** form must be completed and enclosed with the Cost Proposal.
3. A *separate* **Technical Proposal** describing the qualifications of the applicant and experience with similar programs, as well as the workplan proposed for this requirement.
4. In addition to the multiple hard copies of proposals required, Respondents are requested to provide their proposal in electronic format. Microsoft Word / Excel OR PDF format is preferable. Only 1 electronic copy is requested

The **Technical Proposal** must contain the following sections:

A. Executive Summary

The Executive Summary is intended to highlight the contents of the Technical Proposal and to provide State evaluators with a broad understanding of the offeror's technical approach and ability.

B. Offeror's Organization and Staffing (No more than 18 pages)

This section shall include identification of all staff and/or subcontractors proposed as members of the project team, and the duties, responsibilities, and level of effort which apply to each (as well as resumes, curricula vitae, or statements of prior experience and qualification).

In order to be considered responsive, the offeror must at a minimum include the following in the Organization and Staffing Section of the Technical Proposal:

- Organizational Chart
- Board Composition (including names and constituency represented by each board member)
- Job Titles and Job Descriptions of key staff and roles in the management and provision of direct supports to people, including roles and responsibilities of particular positions
- A sample Support Staffing Pattern for the day program
- A sample Activity Schedule for an individual receiving supports
- A sample Day Service Plan for an individual
- Human Rights Committee Composition (by name, indicating the constituency represented by each member)
- Resumes of key staff
- Signed Statement of Compliance with MHRH Licensure Standards (See Appendix A)
- Letters of Reference (including 3 people receiving supports from the offeror; 3 families of individuals receiving supports, to total 6 references who may be contacted. The Offeror shall include names, telephone numbers, and mailing addresses)

C. Workplan/Approach Proposed (No more than 20 pages)

This section shall describe the offeror's understanding of the State's requirement, including the result(s) intended and desired, the approach and/or methodology to be employed, and a workplan for accomplishing the results proposed. The description of approach shall discuss and justify the approach proposed to be taken for each task, and the technical issues that will or may be confronted at each stage on the project. The workplan description shall include a detailed proposed project schedule (by task and subtask), a list of tasks, activities, and/or milestones that will be employed to administer the project, the assignment of staff members and level of effort for each, and the attributable deliverables for each.

In addition to the above, the Workplan/Approach shall include

1. a statement of the offeror's philosophy of providing support to people, including the offeror's mission statement;
2. an overview of the offeror's experience providing support services;
3. a brief description of the offeror's unique focus and expertise in working with the individuals who have experienced adult-onset of acquired cognitive dysfunction (through injury or disease);

4. a brief description of how support and service needs are determined and how supports and services are provided to people;
5. a description of the means the offeror uses for the recruitment, selection, training and supervision of support staff, and criteria for qualification to meet the needs of the individuals requiring support;
6. a description of the ways individuals receiving supports from the offeror, participate in and influence everyday operations of the organization;
7. a description of the offeror's approach to eliciting people's interests and preferences;
8. a description of the offeror's existing relationships within the greater community as well as strategies for promoting community membership for individuals;
9. a description of the offeror's acquired brain injury experience and competencies;
10. A timeline and action plan for having the Day Program accept its first client within nine months of award.

D. Previous Experience and Background (No more than 8 pages)

This section shall include the following information:

1. A comprehensive listing of similar projects undertaken and/or similar clients served, including a brief description of the projects,
2. A description of the business background of the offeror (and all subcontractors proposed), including a description of their financial position, and
3. The offeror's status as a Minority Business Enterprise (MBE), certified by the Rhode Island Department of Economic Development, and or a subcontracting plan which addresses the State's goal of ten per cent (10%) participation by MBE's in all State procurements.

E. The Cost Proposal must contain the following sections:

- Budget Tables (total; by milestone)
- Fiscal Narrative
- Identification and Assurances (See Appendix B)
- Organizational Background and Prior Experience Basic Data Sheet (See Appendix C)
- Provider Tax Compliance
- A second copy of the Statement of Organization's Compliance with Licensure Standards (See Appendix A)

The Cost Proposal is predicated upon a firm fixed price. Offerors must outline both the total proposed cost for completing this project and pricing by project milestone.

Note: Prior to award being made, the successful applicant must complete a Financial Disclosure, Signatory Authorizations, Authorization for Criminal Background Check, Demonstration of Fiscal Capacity, and Evidence of Application to do Business in Rhode Island.

Interested offerors may submit proposals to provide the services covered by this Request on or before the date and time listed on page one of this solicitation. Proposals received after this time and date will not be considered.

Proposals (an original plus four copies) shall be mailed or hand-delivered in a sealed envelope marked "RFP# B04679: Day Program for Adults with Cognitive Disabilities" to:

By Courier:	By Mail:
RI Dept. of Administration Division of Purchases, 2 nd floor One Capitol Hill Providence, RI 02908-5855	R.I. Department of Administration Division of Purchases P.O. Box 6528 Providence, RI 02940-6528

NOTE: Proposals received after the above-referenced due date and time will not be considered. Proposals misdirected to other State locations or which are otherwise not presented in the Division of Purchases by the scheduled due date and time will be determined to be late and will not be considered. Proposals faxed, or emailed, to the Division of Purchases will not be considered. The official time clock is located in the reception area of the Division of Purchases

SECTION 5 - EVALUATION AND SELECTION

In order to be considered, proposals must first be scored at a minimum 60 points, using the following criteria. Each criterion can receive a score of up to four points for a total possible 100 points

*P F G E 1. The applicant's written application demonstrates a knowledge of people with brain injuries and other cognitive disabilities, and the ability to establish responsive systems of support.

P F G E 2. The application and experience of the organization and its principles instill a sense of confidence about their ability to provide support services.

P F G E 3. The applicant proposes to support community membership as an integral part of its programs.

P F G E 4. The applicant recognizes the consumer as the exclusive reason for organizational existence, and ensures that all staff training and other organizational endeavors accurately reflect this belief.

- P F G E 5. The applicant's design demonstrates innovative linkages with other community agencies.
- P F G E 6. The applicant demonstrates the development of unpaid relationships between the people it supports and members of the community.
- P F G E 7. The applicant's design offers a wide variety of meaningful activities, services, and challenges, and is responsive to individual needs.
- P F G E 8. The applicant understands the universal need for acceptance, and routinely seeks opportunities for people to become valued members of the community.
- P F G E 9. The applicant's proposed administrative structure reflects the ability to provide services in an effective manner.
- P F G E 10. The principals possess a knowledge of people with brain injuries and other cognitive disabilities and have demonstrated ability to develop and implement responsive systems of support.
- P F G E 11. The preservice and inservice training plans proposed by the applicant indicate a knowledge of the type of training needed by the staff. Such training reflects the needs of consumers and staff in terms of both content and frequency.
- P F G E 12. The activity schedule reflects individualization and opportunities for community participation, choice, the development of valued skills and attributes and efforts toward community membership and contribution.
- P F G E 13. The proposed operations budget reflects efficient use of resources.
- P F G E 14. The budget is clear, concise and developed to meet day program goals and objectives.
- P F G E 15. Administrative costs are in proportion to the service being provided in the budget samples.
- P F O E 16. Program development, as described, is dictated by the needs and desires of individuals and their families.
- P F G E 17. The applicant demonstrates experience in cooperating, coordinating, and communicating with other agencies, families, therapists, ancillary services, state agencies, and the community at large.
- P F G E 18. The applicant has demonstrated competence in operations and fiscal management.
- P F G E 19. The staff roles and functions are described in written statements, principal staff are well qualified with significant relevant experience.
- P F G E 20. The applicant has demonstrated ability to maintain the required staff on an on-going basis and provide opportunities for professional growth and development.

P F G E 21. The applicant includes statements regarding non-discrimination and affirmative action relative to the provision of services to people and in employment practices of persons to work with the individuals served.

P F G E 22. The applicant demonstrates sufficient competency to recommend qualification as a provider of day services in Rhode Island.

P F G E 23. The applicant demonstrates commitment by a Clinical Neuropsychologist licensed to practice in Rhode Island to act as clinical consultant at least 10 hours per week

P F G E 24. The applicant demonstrates knowledge of a clubhouse model, and identifies a business plan to coordinate with vocational services and assist clients toward assuming leadership roles within one year of opening.

P F G E 25. The applicant demonstrates capacity to establish a program site that meets all applicable state and local licensure, building and fire codes.

*Non-Responsive is 0 points, P equals poor (1 point), F equals fair (2 points), G equals good (3 points) and E equals excellent (4 points).

All Qualified Offerors, achieving a score of at least 60 (based on the preceding criteria) will then be rated based on the following:

Staff Qualifications 30 points

Includes but is not limited to: Description of contractor and staff experience on similar projects involving clients with similar cognitive dysfunctions; description of business office personnel; evidence of organizational integrity; and evidence of commitment of licensed neuropsychologist as a consultant to the program.

Capability, Capacity, and Qualifications of the Offeror 25 points

Includes but is not limited to: Evidence of the offeror's previous successful completion of similar projects; information on the credentials of the team assembled to conduct all aspects of the project; and description of the offeror's ability to conduct the required tasks (including a description of the offeror's capability to open the program as evidenced by its ability to identify a building facility and to hire/train program staff.

Quality of the Workplan 25 points

Includes but is not limited to: Responsiveness to the requirements described in this RFP; description of the offeror's plan for conducting each phase of the project; evidence of state of the science approach consistent with similar programs in operation across the country; evidence of the sample workplan meeting clinical standards.

Community Support 10 points

Including letters of support from a range of stakeholders in the community (including client/family members, professionals, state agency personnel, and at least one neuropsychologist)

Competitiveness of Cost

10 points

Total cost for providing the services outlined within this request calculated as (the cost of this proposal divided by the cost contained within the lowest responsive cost proposal) times 10 points.

Evaluation of responses to this request for proposals will be judged separately on technical merits and cost. Cost proposals will remain sealed until the technical scoring is completed. This approach is intended to ensure that Technical appraisals of capacity, capability, and expertise are uninfluenced by considerations of cost or cost constraints.

Notwithstanding the foregoing, the State reserves the right to award on the basis of cost alone, to accept or reject all options, bids, or proposals and to act in its best interest..

Proposals found to be technically or substantially non-responsive at any point in the evaluation process will be rejected and not considered further.

The State may, at its sole option, elect to require presentation(s) by offerors clearly in consideration for award.

The Technical Review Sub-Committee will present written findings, including the results of all evaluations, to the State's Architect/Engineer and Consultant Services Selection Committee, which may recommend up to three finalists to the Director of the Department of Administration, who will make the final selection (s) for this requirement.