



*Solicitation Information*  
*15 Sept 05*

**CR # 9**

**TITLE: Evidence-Based and Promising Practices: Child and Family Intervention Program - DCYF**

**Submission Deadline:** Continuous Recruitment

**Pre-Proposal Meeting: Yes      Date: 7 Oct 05      Time: 2:00 PM**

**Mandatory: No**

**Location:** Department of Administration , Division of Purchases ( 2<sup>nd</sup> fl, Bid Room) One Capitol Hill, Providence, RI

Questions, in Microsoft Word format, concerning this solicitation may be e-mailed to the Division of Purchases at [questions@purchasing.state.ri.us](mailto:questions@purchasing.state.ri.us). Please reference the RFP number on all correspondence. Answers to questions received, if any, will be posted on the internet, as an addendum to the solicitation, at <http://www.purchasing.ri.gov>. 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 RI State Purchasing Website at <http://www.purchasing.ri.gov>

**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 Department of Administration on behalf of the Department of Children, Youth and Families (DCYF) is seeking letter of interest (LOI) from service providers to establish and operate family support services grounded in evidence-based, or outcome-based practices for each of the four administrative regional areas of DCYF.

The successful applicant(s) will receive referrals of eligible participants only from the pertinent regional office. The provider will be responsible for designing and implementing individualized intervention plans for the referred youths and their families.

This solicitation, and subsequent award, is governed by the State's general Conditions of Purchase (available at [www.purchasing.ri.gov](http://www.purchasing.ri.gov)).

This is a request for letters of interest and not an Invitation for Bid. Responses will be evaluated on the basis of the relative merits of the proposal. There will be no public opening and reading of responses received by the Office of Purchases pursuant to the 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, although DCYF may negotiate pricing if all cost proposals are rejected as too high.
- 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. The official time clock is located in the reception area of the Division of Purchases, Department of Administration, One Capitol Hill, Providence, RI.
- In accordance with Title 7, Chapter 1.1 of the General Laws of Rhode Island, no foreign corporation, a corporation without a Rhode Island business address, shall have the right to transact business in the state until it shall have procured a Certificate of Authority to do so from the Rhode Island Secretary of State (401-222-3040). *This is a requirement only of the successful vendor(s).*
- 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.

- The purchase of services under an award made pursuant to this Request will be contingent on the availability of funds.

The offeror should be aware of the State's Minimum Business Enterprise (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>

**NOTICE**

**THERE MAY BE ADDITIONAL ADDENDA TO THIS BID/RFP AT ANY TIME BEFORE THE OPENING DATE AND TIME.**

THE DIVISION OF PURCHASES WILL NOT BE NOTIFYING BY MAIL OF ANY SUCH ADDENDA.

IT IS THE **VENDOR'S RESPONSIBILITY TO CHECK AND DOWNLOAD** ANY AND ALL ADDENDA.

AN ADDENDUM TO A BID/RFP IS LISTED AS THE BID NUMBER WITH AN "A" AND THE NUMBER OF THE ADDENDUM FOLLOWING; FOR EXAMPLE **3025A1** INDICATES ADDENDUM #1 HAS BEEN ISSUED FOR BID 3025. **3025A2** INDICATES ADDENDUM #2 HAS BEEN ISSUED.

**YOU MUST CLICK ON ALL OF THESE LISTINGS TO GET THE COMPLETE PACKAGE.**

**SECTION 2 – BACKGROUND AND PURPOSE**

**BACKGROUND:**

The Rhode Island Department of Children, Youth and Families has a history of receiving children and youths due to petitions alleging abuse, neglect, dependency, delinquency or due to voluntary requests from parents. Close to 1,300 children and youth are in relative and non-relative foster care. Another 1,300-1,400 children are placed in treatment programs (group homes, psychiatric hospitals, substance abuse, sex offender treatment settings, and other residential treatment programs). Approximately 100 of these youngsters are placed out of state, the majority are in nearby residential facilities; the rest are placed within Rhode Island borders. More than 1,500 youngsters are released from the RI Training School for Youth (RITS) annually, after stays ranging from overnight to multiple years.

The Department of Children, Youth and Families desires to dramatically reduce the number of children and youth in placement, focusing on each of these populations: children placed in foster care, children in out-of-state placements, and those placed in psychiatric hospitals who no longer need such a level of care.

The Department further desires to reduce the unnecessary utilization of juvenile justice programs, and the long-term use of most residential treatment settings. This change of philosophy by the Department is based upon the lack of positive outcomes for most children who receive long-term placement services and upon the recognition that long-term placement of children is prohibitively expensive. Through this Letter of Interest, the Department is establishing a mechanism for ongoing recruitment opportunities to promote capacity development across the broad spectrum of child and family needs. This initiative will begin with critical family preservation and support programs focusing on parent/child attachment, infant mental health and best practices for access to earliest interventions for children and families across the spectrum that are proven effective in maintaining a family's cohesiveness and providing the necessary structure and support to cultivate healthy family functioning.

### **GENERAL PURPOSE AND RESULTS:**

The intent of this array of program services is to enhance families and their support systems in order to maintain highly challenging children and youth in their own homes, or a foster home, and to return other highly challenging children to their own homes, or to a therapeutic foster home if necessary. The Department believes that brief (2-6 months), intensive multi-focused services geared to the specific needs and strengths of the particular child in question and his or her family, including interventions in other settings as appropriate (school, with peers, recreation, etc.) will make it possible for many children to either remain in their own homes or return to their own homes successfully.

It is clear that some of these families will require certain supports for longer periods than even 6 months. Such follow up plans will also be the responsibility of the successful provider to design and implement.

As the Department sharpens its focus on front-end community-based preventative services, more and more attention will be given to established programs that are able to provide an array of family preservation and support wraparound services. This effort will enhance program capabilities throughout the continuum – including families who need interventions to meet child welfare case plan requirements in order to prevent escalation to more intensive structured services, as well as families with children who need a moderate level of care intervention, and the more intensive, high-end clinical intervention services.

Through this request for **Letters of Interest on a Continuous Recruitment (LOI-CR)** basis, the DCYF expects to attract proposals from qualified vendors who will be certified on a provider list from which the DCYF will be able to access to develop the necessary community-based, family support services for challenging children and youth. The Department of Administration, Division of Purchasing will establish this provider list for DCYF in order to ensure development of service capacity to provide a range of evidence-based or promising practice approaches for these identified populations.

**This is a continuous recruitment process.** The Division of Purchases will create, add to, and maintain this list(s) of qualified providers for Evidence-Based and Promising Practices: Child and Family Intervention Program - DCYF. The initial qualified vendor list, added after the initial contract award will be included for the balance of the original five- year term.

## **EFFECTIVE COMMUNITY-BASED PRACTICE:**

### **A. EVIDENCE-BASED -**

The Department of Children, Youth and Families (DCYF) is issuing this solicitation request to promote development and application of evidence-based practice to meet three primary population needs in community-based, family support approaches for youth who have been **1)** adjudicated for offenses and are being released on probation from the Rhode Island Training School for Youth (RITS), directly from the Family Court, or **2)** are returning to their communities from having been in long-term residential treatment programs or **3)** psychiatric hospitalization. At the same time, it is recognized that evidence-based practice is only in its emergent stages across the country and there are differing definitions and interpretations as to what constitutes evidence-based practice. For purposes of this LOI-CR, evidence-based practice refers to psychosocial interventions with children and adolescents that have been shown to be effective through empirically rigorous research. The term “is most often used to differentiate therapies ... that have been studied with varying degrees of rigor from therapies that are used but have not been studied or have not been studied well.”<sup>1</sup>

Several model programs have been accepted as exemplars of “evidence-based practice,” which include: Multi-Systemic Therapy (MST), Scott W. Henggeler, Ph.D.; Functional Family Therapy (FFT), Thomas L. Sexton, Ph.D.; Multidimensional Treatment Foster Care (MTFC), Patricia Chamberlain, Ph.D.; Multidimensional Family Therapy (MDFT), Howard Liddle, Ed.D; Brief Strategic Family Therapy (BSFT), Daniel Santisteban, Ph.D.; and The Incredible Years Parent, Teacher and Child Training Programs (PT, TT, CT), Carolyn Webster-Stratton, Ph.D. Examples of these types of service models are summarized as follows:

**MST** – a treatment strategy focusing on reducing antisocial behavior in adolescents by helping them in various “systems” that influence them to promote acceptable behavior. The various systems involve immediate and extended family, peers, schools and neighborhoods. The approach of MST is to enhance family functioning by encompassing the context in which the adolescent lives. The behavior of therapists is governed by a set of 9 treatment principles. Additionally, MST therapists must be capable of applying a range of empirically-based therapeutic approaches; e.g., structural family therapy and cognitive behavior therapy, and tailoring interventions to the unique needs of a family.

**FFT** – includes Parent Management Training Programs and Cognitive Problem Solving Skills Training. The parent management training programs focus on ways in which to change parent-child interactions in the home, including child-rearing practices and coercive interchanges through techniques based on social learning principles. The cognitive problem solving skills approach focuses on changing the cognitive processes that underlie social behavior. The treatment addresses issues relating to cognitive distortions and impulse control problems which help aggressive youth to better understand their reaction tendencies and reduce their behavior aggression.

---

<sup>1</sup> “Evidence-Based Practice in Child and Adolescent Mental Health Services,” *Psychiatric Services*, September 2001, 52:9, p. 1179-1180

**MTFC** – this service approach provides community-based family care for youth who are having serious emotional and behavioral challenges. As an alternative to group and residential care and to institutionalization and incarceration, the MTFC program recruits, trains, supports and supervises families in the community to provide placements for youth participating in the program. Intensive services are provided to both the youth *and* to the members of their family (biological, adoptive, relative) so that after the youth completes the MTFC program, they can return home and continue to be successful.

**PT, TT, CT** – The Incredible Years parent, teacher and child training programs have demonstrated effectiveness working with families and children primarily between 3 and 8 years (but adapted for between 2 and 10 years) of age who have exhibited aggressive behavior and other conduct problems. This service approach is aimed, ultimately, at preventing delinquency, drug abuse, and violence by reducing conduct problems in young children and promoting social, emotional and academic competence.

**MDFT** – this is an outpatient family-based treatment system for adolescent substance abuse and related problems. Its research base has demonstrated success in treating a range of teens and families; e.g., different ethnicities, genders, ages, and severity of problems. The application procedures allow flexibility in the therapeutic approach to adapt as necessary to existing program factors and providers’ resources and needs without diminishing effectiveness.

**BSFT** – this service is a family-based intervention with a focus on children and adolescents who are exhibiting or are at risk of behavior problems including substance abuse. The approach is premised on the assumption that family interactions can play a pivotal role in protecting children from negative influences and that maladaptive family interactions can contribute to the evolution of behavior problems. Family interactions, consequently, are a target for intervention. The treatment is short-term with an average length of service about three months.

**Fidelity to the Model and Measurable Outcomes -**

Evidence-based practice is based on a manual of procedures, and effectiveness of the services is reliant on strict adherence to the prescriptive measures required for the model. Applicants to this LOI offering an “evidence-based practice” service must submit a proposal that clearly explains how fidelity to the model being proposed will be guaranteed. Additionally, the proposal must present a clear set of outcomes against which the project will be measured, including a required measurement focusing on services being able to maintain children and youth in their own homes or foster homes, whichever circumstance applies. The Department will accept some process measures as well, but the emphasis is clearly on outcomes that demonstrate the efficacy of the program approach on a clearly defined group of children.

## B. PROMISING PRACTICES -

While the Department of Children, Youth and Families is particularly interested in promoting implementation of evidence-based practices for community-based and family support services, it is understood that there are relatively few well established evidence-based models. In recognition of this, the DCYF seeks applications proposing family-focused, community-based “promising practices” provided that the proposals offer a clear, detailed and convincing representation as to why the applicant considers its service approach to be a promising practice

An example of a promising practice is Wraparound Milwaukee, developed by Bruce Kamradt, MSW. The term “wraparound” refers to an approach for implementing individualized, comprehensive services within a system of care for youth with complicated multi-dimensional problems. According to the 1998 System of Care Series on *Promising Practices in Children’s Mental Health*, wraparound services have proven particularly useful for those children and adolescents with severe emotional and behavioral problems.<sup>2</sup> Wraparound Milwaukee was promoted in the 1999 Surgeon General’s Report on Mental Health as a very effective model for reducing reliance on residential treatment services and returning youth to their communities. The goals in Wraparound Milwaukee include minimizing out-of-home placements, supporting families to function as autonomously as possible, building on family strengths, helping families access an array of services and supports, coordinating care, developing service capacity in the community, and delivering services in a cost effective manner.<sup>3</sup>

The Community Family Therapy model, developed by Ramon Rojano, M.D., is an approach that targets circumstances experienced through poverty and limited opportunities associated with inner-city conditions. The CFT identifies strategies to mobilize family and community resources to more effectively work with schools, churches, and community agencies. The approach represented in this model employs new therapeutic coaching techniques, assisting therapists to provide a broader, more strategic approach to the issues confronting poor families.

Applicants providing a proposal regarding a promising practice must also present a clear set of outcomes against which the service approach will be measured. Again, process measures may be included, but outcome measures will be required. A specific requirement will be a measurement for maintaining children and youth in their own homes or foster homes.

Additionally, as the State is looking to develop greater cultural and linguistic capacity and competency within the array of services available, proposals which are designed to develop such competencies are requested.

---

<sup>2</sup> *Promising Practices in Children’s Mental Health Systems of Care – 1998 Series*, Vol. IV, p. 11

<sup>3</sup> *Ibid.*, Vol. IV, *Promising Practices in Wraparound*, p. 36

### **SECTION 3 – SCOPE OF WORK**

The term of any contract award resulting from this Request for Letter of Interest-Continuous Recruitment will be twelve months from the date of the contract taking effect, and renewable annually based upon demonstrated effectiveness and the availability of funds. Successful respondents will be placed on a certification list. It is expected that multiple contracts may be developed and awarded in the first year after an assessment of all submissions. The services to be provided will be for families identified and referred by DCYF.

#### **POPULATIONS TO BE SERVED**

Through this continuous recruitment LOI, the Department is targeting the populations throughout the continuum of child welfare, children's behavioral health and juvenile corrections – as they relate to the DCYF's core functions and responsibilities. Therefore, there are multiple target populations for which recruitment through this LOI is encouraged.

**Community-Based Family Preservation and Support** – DCYF is working to enhance community-based services to promote critical family preservation and support programs and services to enhance family functioning and strengthen their support systems in order to maintain family integrity, and prevent removal of children from their homes, where appropriate.

**Children in Out-of-Home Care** – these youth will come primarily from psychiatric hospitals, out-of-state and in-state residential placement settings, and the Rhode Island Training School (RITS) for Youth. Referrals may also include youth who are at risk of being placed in these types of intensive treatment settings.

Selection of families for participation in the programs will be based upon referrals from DCYF. The Department will prioritize which children and families will be selected.

#### **PROGRAM COMPONENTS**

The priority populations for the Department of Children, Youth and Families are:

- children and youth who have been abused and/or neglected,
- children and youth who are seriously emotionally disturbed, and
- youth who are involved with the juvenile corrections system.

As part of the DCYF's strategic plan, services are being identified and developed on a Regional basis within geographic settings.

Applications to this LOI-CR must provide a detailed description of proposed intervention plans, along with a description of program staff and a start up schedule and timelines for full implementation including proposed number of children and families to be served with a preference toward a regional configuration of service delivery. There are four geographic regions within DCYF:

- Region I - City of Providence
- Region II - 10 communities along the East Bay from East Providence to Newport
- Region III - 14 communities comprising Kent and Washington Counties
- Region IV - 14 communities including Pawtucket/Central Falls, northern and western Rhode Island including Cranston

Full discussion of intervention plans and philosophy must be provided, as well as a systematic program evaluation plan to ensure fidelity to the proposed treatment philosophy and implementation model. A plan for careful documentation and reporting of outcomes for the participants is also required.

**Population and Intervention Plans -**

While the Department will be making and prioritizing referrals to the certified agencies, the respondents to this LOI must provide a detailed description of the population(s) with which you are most familiar and the interventions for which you have expertise. The Department is interested in developing a list of certified providers to meet a range of population and service needs, and respondents must provide information on the populations you propose to serve as well as how your services and interventions are targeted to meet their needs and program goals. The description of the population must include demographic information, including family profile, eligibility and assessment criteria, and be presented in relation to the design and function of your program, as well as whether the system involved includes child welfare, juvenile justice or children’s behavioral health individually; or, multiple system involvement. Additionally, the respondent must provide detail on its expertise in providing effective services identifying the clinical and functional levels of the identified population(s).

Demonstrated staff diversity and cultural competencies must be shown in the response to the LOI-CR, as well as the educational and professional backgrounds of the staff. In the event that staff will have to be recruited and trained in these new treatment models, the applicant must specify the principles for recruitment and selection, and their commitment to those principles.

**Accreditation Requirement –**

Vendors must be accredited through one or more of the following recognized accreditation authorities: Council on Accreditation; Commission on Accreditation of Rehabilitation Facilities; Joint Commission on Accreditation of Healthcare Organizations.

**Documentation and Reporting –**

The applicant must have an MIS capacity sufficient to track utilization of services, and to document effectiveness in reaching goals, objectives and outcomes for the population(s) being served. This documentation must be related to the individual treatment plans and to the type(s) of service being provided. As referenced previously, the Department wants to see a detailed explanation as to how the agency will maintain fidelity to its model of intervention, whether it is proposing an evidence-based practice or a promising practice program. The offeror will also be expected to comply with DCYF’s Performance Indicator requirements, which will identify data specific to the program, as well as common data elements across the providers relative to evidence-based and promising practice standards.

Such uniform data collection may include, but not be limited to:

- Indicators reported the same way across all programs regarding program type and agency level; e.g., level of service intensity;
- Profiles of children and families served, including number, age, services provided, presenting problems, mental health services, and discharge plans/disposition where applicable;
- Reports on assessments administered; and
- Documentation indices of program performance, such as chart reviews and school enrollment/participation, etc.

Respondents must have the ability to collect and report this necessary data, as well as potentially provide an interface with DCYF's data collection system.

### **Interagency and Community-Based Collaboration –**

Applications must provide a detailed description of the agency's knowledge of, as well as the integration and interaction with, other community-based providers whose services are relevant to the target population. These must include, but are not limited to: CEDARR Family Centers, CASSP/Hope Systems, Children's Intensive Services (CIS), Comprehensive Emergency Services (CES), and Outreach and Tracking programs. Offerors are encouraged to be as inclusive as possible. A detailed Memorandum of Understanding (MOU) between the offeror and each relevant provider must be included in the application.

### **BUDGET**

There are no new funds allocated for initiatives proposed under this solicitation. Funds for the successful implementation of this LOI-CR will come primarily from one source -- the reduction of expenditures for children and youth in placement. In other words, it is expected that as a child is returned from placement to a short term intensive in-home program of interventions, that the cost avoidance of paying for placement will make dollars available for the in-home interventions. Services should be based upon a per family intervention cost, and the successful applicant(s) will respond to the LOI-CR with detailed budgetary information and planned expenditure patterns to enable the Department to adequately estimate overall costs. Some start up or initial funding dollars may be available.

### **CONTRACTOR RESPONSIBILITIES:**

The selected provider(s) will be responsible for the management and administration of a quality, research-based program with appropriate treatment modalities, ancillary supports and services for the children and families referred by DCYF.

The Vendor will be responsible for:

- Supervising program staff to provide appropriate treatment and services
- Program reports and evaluations to DCYF
- Collecting and providing all required evaluation data to DCYF
- Participating in quarterly interface meetings with all treatment team members to monitor contract compliance

- Providing DCYF treatment staff weekly progress updates on each participant receiving services
- Developing and maintaining a Continuous Quality Improvement process to include outcome measures and participant satisfaction
- Providing sufficient staff to ensure an uninterrupted treatment process (no expulsion policy)
- Reports on contact with family and level of family involvement, where appropriate.

#### **SECTION 4 – LETTER OF INTEREST SUBMISSION**

Questions concerning this solicitation may be e-mailed to the Division of Purchases at [questions@purchasing.state.ri.us](mailto:questions@purchasing.state.ri.us). Please reference the LOI# on all correspondence. Answers to 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. For computer technical assistance, call the Help Desk at 401-222-2142, ext. 134.

This is a Continuous Recruitment solicitation. At the end of each month, the Division of Purchases will forward all applications received to the Department of Children, Youth and Families for review and evaluation. DCYF will, after review, inform the Division of Purchases of all qualified applicants and also inform the Division of Purchases of all applicants who failed to attain the minimum qualifications score. These evaluations will be made public to all interested parties. The Division of Purchases will create, add to, and maintain this list(s) of qualified providers for Evidence-Based Practice: Child and Family Intervention Program – DCYF

A Pre-Proposal Conference for the purpose of clarifying the scope and intent of this requirement, as well as the evaluative criteria to be employed in the review of the responses to this request, will be conducted on the date, time, & location provided on page one of this solicitation.

Persons requesting the services of an interpreter for the hearing impaired may obtain those services by calling (401) 421-7005 forty-eight (48) hours in advance of the pre-proposal conference.

#### **Letters of Interest must include the following:**

1. A completed and signed three-page RIVIP Bidder Certification Cover Form, available at [www.purchasing.ri.gov](http://www.purchasing.ri.gov)
2. A cost Proposal reflecting the fee structure, proposed for this scope of services, including completion of the Cost Proposal Summary form contained within this document, and
3. A *separate* Technical Proposal describing the qualifications and background of the applicant and staff to be assigned, experience with similar programs, as well as the work plan or approach proposed for this requirement.

4. A completed and signed W-9 (taxpayer identification number and certification) Form is downloadable at [www.purchasing.ri.gov](http://www.purchasing.ri.gov).
5. **One copy** of the offeror's complete response to this solicitation is requested in an **electronic format:** CDROM or disk, in Microsoft Office or PDF file formats. The electronic files should be identical to the original hard copy submission. In any variance between the hard copy and the electronic file, the original hard copy takes precedence

The Technical Proposal must contain the following:

- 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.

- Offeror's Organization and Staffing

A description of staffing, including an organizational chart highlighting the persons or unit(s) responsible for this project should be demonstrated.

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

- Work Plan/Approach Proposed

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 work plan for accomplishing the results proposed. This section shall include a discussion and justification of the methods proposed for each task identified in the Scope of Work (above), and the technical issues that will or may be confronted at each stage of the project. The work plan description shall include a detailed proposed project schedule by task, a list of tasks, activities and/or milestones that will be employed to administer the project, and the task assignments of staff members and level of effort for each linked to the Cost Proposal.

- Previous Experience and Background

This section shall include the following information:

- A comprehensive listing of similar projects undertaken and/or similar clients served, including a brief description of the projects,
- A description of the business background of the offeror (and all subcontractors proposed), including a description of their financial position, and

- 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 percent (10%) participation by MBE’s in all State procurements. For further information, call the MBE Officer at (401) 222-6670.

**Responses (an original plus five (5) copies)** should be mailed or hand-delivered in a sealed envelope marked “LOI-CR# Evidence-Based Practice; Child and Family Intervention Program - DCYF to:

Department of Administration  
 Division of Purchases, 2<sup>nd</sup> Floor  
 One Capitol Hill  
 Providence, RI 02908-5855

**NOTE: Proposals received after the due date and time listed on the cover sheet of this solicitation will not be considered. Proposals misdirected to other State locations or which are otherwise not present 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 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**

The State will commission a Technical Review Sub-Committee, which will evaluate and score all proposals, using the following criteria.

Scoring (100 total points)

|                                                                                                                            |           |
|----------------------------------------------------------------------------------------------------------------------------|-----------|
| Capability, capacity and qualifications of the offeror,<br>including the quality of past work and qualifications of staff: | 30 points |
| Evaluation of Service Plan and costs:                                                                                      | 40 points |
| Approach to cultural competency:                                                                                           | 15 points |
| Quality Assurance and Program Evaluation:                                                                                  | 15 points |

Notwithstanding the foregoing, the State reserves the right to award in whole or in part; to reject any or all proposals; and, to award in it’s own best interest. The state may select four or more vendors.

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.

*When a vendor or vendors have been selected, all bidders will be notified by mail. Please do not call the Offices of Purchases for an “update.”*

## **COST JUSTIFICATION SUMMARY**

The letter of interest (LOI) must provide a plan to serve approximately 25-50 children and their families per year and must offer a per unit (child and family) rate to cover the period of intensive intervention. After care or follow up services, although necessary to be described in the proposal, will be costed on an individual case need basis, as appropriate.

The State / DCYF reserves the right to negotiate the proposed per unit rate after reviewing responses, if not acceptable in their original responses.

Attachment A  
 Budget Detail  
 Administrative/General/In-Direct

|                                        | DCYF<br>Funds | Other Sources<br>of Funds | Total<br>Funds |
|----------------------------------------|---------------|---------------------------|----------------|
| Office Supplies                        |               |                           |                |
| Telephone                              |               |                           |                |
| Employee Travel (Specify Rates)        |               |                           |                |
| Prof./Staff Development                |               |                           |                |
| Advertising                            |               |                           |                |
| Licensing, Dues and Subscriptions      |               |                           |                |
| Accounting & Auditing Fees             |               |                           |                |
| Legal Services                         |               |                           |                |
| Insurance                              |               |                           |                |
| Medical Supplies                       |               |                           |                |
| Postage                                |               |                           |                |
| Printing                               |               |                           |                |
| Other (Specify Costs)                  |               |                           |                |
| Total Administrative/General/In-Direct |               |                           |                |

**Note:** If there is a request for administrative overhead, you must provide the formula used to arrive at the cost and the actual administrative cost by category.

\_\_\_\_\_ = per unit cost average.