

Reconnecting Families Program RFP Questions and Answers

Pre-Bidders Conference Questions and Answers

Q1. What is the expected caseload size per team?

A. The Reconnecting Families Program requires each team to carry small caseloads in order to effect a safe and successful reunification. The recommended maximum caseload per direct service worker for this program is 6.

Q2. What are the expected numbers served per team?

A. The Staffing Model for this program is 2.25 FTE with 2 FTE providing direct service to families. It is expected each team with this staffing model will serve 28 families annually.

Q3. Who are the current IFP or Family Center providers and what cities/towns do they cover?

A. Here is a general summary of providers, services and area offices served. This summary does not however, capture cross area office service provision (specific towns in their catchment area).

Provider	Service	Area Office
Boys and Girls Village, Inc	IFP	Bridgeport Torrington Waterbury Norwalk/Stamford
Bridges – A Community Support System, Inc.	IFP	Greater New Haven
Catholic Charities of Fairfield County, Inc.	IFP	Danbury
Child and Family Agency of Southeastern CT, Inc.	IFP	Middletown Norwich
	Family Center	Norwich
Child Guidance Clinic of Greater Bridgeport	IFP	Bridgeport
	Family Center	Bridgeport
Community Child Guidance Clinic, Inc	IFP	Manchester
Community Health Center, Inc	IFP	Middletown
Family and Children's Agency, Inc	IFP	Norwalk/Stamford
	Family Center	Norwalk/Stamford
Klingberg Comprehensive Family Services, Inc	IFP	Hartford New Britain
	Family Center	Hartford
New Opportunities, Inc	IFP	Waterbury
Northwest Center for Family Service and Mental Health, Inc	IFP	Torrington
United Community and Family Services, Inc	IFP	Norwich

United Services, Inc	IFP	Willimantic Manchester Hartford
Village for Families and Children, Inc	IFP	Hartford
Waterford Country School, Inc	IFP	Norwich Willimantic
Wheeler Clinic, Inc	IFP Family Center	New Britain New Britain
Yale University	IFP	Greater New Haven Metro New Haven Meriden
EASTCONN	Family Center	Willimantic
Exchange Club Center for the Prevention of Child Abuse of Ct, Inc	Family Center	Manchester
Family and Children's Aid	Family Center	Torrington Danbury
Family Service of Greater Waterbury, Inc	Family Center	Waterbury
R'Kids, Inc	Family Center	Metro New Haven Greater New Haven Middletown

Q4. What curricula or models are currently being used for emergency safety interventions?
A. Your question references information contained within Exhibit A- Contract Provisions. Exhibit A is the department's core contract language and is incorporated in all DCF contracted services. Exhibit A was included in this RFP merely as a preview to potential applicants regarding the department's contractual language, but does not apply to this particular service.

Q5. The RFP describes integration of Emergency Safety Interventions (ESI) within the therapeutic milieu. This appears to be describing a residential setting. Where are you suggesting this be integrated?
A. See response to Q4.

Q6. In Exhibit A, number 21, describes access to the premises by a facility inspector, is this referencing to residential programs also? We understand that DCF would have access to records etc. but this program provides in-home services and we are unclear about how this is related to facility inspectors.
A. See response to Q4.

Q7. Do you have any suggested models for family conferencing?
A. In the RFP, question #3 requires respondents to address this issue.

Q8. Are after hours and weekends, in-home both required?
A. Yes.

Q9. Do staff need to be on call 24/7?
A. In order to support families during the reunification process and reduce the likelihood of repeat maltreatment and re-entry, it is the expectation of the department that program staff would be able to respond to emergencies following the child's return home through the duration of the program.

Q10. Will medication administration be required for staff who are not caretakers? We assume they are not administering medication, is that correct?

A. Program staff will not be responsible for administering medication. The caretakers referenced in the RFP are generally foster care providers and/or residential providers of children referred to the program.

Q11. Is the funding for the Reconnecting Families Program intended to replace the existing Family Centers?

A. Yes.

Q12. The population for this program – For instance what does your data say about the most common age bracket, number of previous removals and other mental health concerns/diagnoses that may require intensive/crisis oriented treatment?

A. The chart below represents the number of children within a specific age range with a permanency goal of Reunification and/or Transfer of Guardianship.

Age Range	Number of Children
0-2	479
3-5	305
6-11	526
12-14	288
15-17	285

Please note: the children that would be referred to this program would not be removed due to their behavioral health issues. The children referred to the program may be victims of neglect, physical and sexual abuse and may have been exposed to substance abuse, domestic violence, mental health issues and/or other disabling conditions of the parent. Some children in our care do not exhibit behavioral health issues.

The chart below represents the number of children within a specific age range with a permanency goal of Reunification and/or Transfer of Guardianship who have experienced a previous removal.

Age Range	Previous removal - No	Previous Removal - Yes
<1	172	1
1-5	588	70
6-10	371	108
11-13	212	87
14-17	399	128
18-21	21	5
Grand Total	1763	399

Q13. For post reunification services stage – how long is the provider expected to respond to crisis situations? Does this extend beyond the case being closed?

A. The awarded contractor will be expected to respond to crisis situations following the child's return home through the remainder of the service (approximately 60 days). This responsibility ends when the program is no longer involved with the family.

Q14. Can EMPS provide some of the crisis response or do you require reunification staff to provide it?

A. Given their involvement with the family and nature of the program, we would require the Reconnecting Families staff to respond to crisis situations. If there was a level of acuity requiring EMPS, we would envision the provider's assistance in initiating a referral for this service.

Q15. For area offices that will have more than one team, do you prefer to contract with one provider or will you consider multiple providers? If more than one provider, then do you expect each provider to cover entire geographical service area?

A. The department does not have a preference. Should there be more than one provider, we anticipate coverage to be determined during contract negotiations.

Q16. The RFP mentions that proposals will be evaluated based on answers to the application questions and the review context/criteria. However, many of the evaluative items in the review context/criteria are not specifically asked for in the application questions. (i.e. data development and QA, among others) How/Where should we demonstrate the capacity to meet those specific items? Also, one of the review context items (D), requires demonstrating a history of monitoring children and adolescents in particular congregate care settings? How is this relevant to this proposal?

A. Area Office Review Teams will focus on the applicant's responses to the questions contained within this RFP. The items referenced above may be a component of contract negotiation discussions.

Q17. It appears that you are requesting for staff who have a Bachelors Degree to provide clinical work. Ethically this is not possible even with Clinical supervision. Is this what the RFP states?

A. No. The clinical work described in this RFP is focused more on restoring relationships, improving communication, promoting strengths and providing goal oriented visitation and interventions through coaching and mentoring. We are not looking for a clinical psychotherapeutic intervention.

Q18. Who will screen the cases to make sure they are appropriate for this process and will the provider be able to reject the case?

A. The Area Office Gatekeeper will be responsible for screening referrals to the program. Any case specific concerns of the Provider can be communicated with the Gatekeeper and case Supervisor and/or Manager.

Q19. Our current contract does not cover all expenses. According to the ASO in home services are not billable. Will the programs services be billable to insurances for in-home treatment?

A. No. Billable services under the partnership begin with the premise that the reason for the referral is due to a mental health issue. The reason for the referral to this program is directly related to safety and therefore these services are non- billable.

Q20. Will success be determined by reunification? Cases can still be successful if the parent comes to realize that the child is better off staying in foster care.

A. Area Offices would not be referring families to the program if they did not feel reunification or a Transfer of Guardianship was a viable plan. The department has established specific long term outcomes for this program that are documented in the RFP.

Q21. I would like to have the distribution of staffing explained as Bridgeport is the largest city in the state and is only allotted 2.25 staff and New Britain 9 staff. Please explain?

A. This question is unrelated to the specifics of responding to this RFP.

Q22. What happens to current visitation programs' cases – will a transition time be built in? What is the anticipated start up date for this grant? Previous grant had required adoption and foster support components – what happens to these ongoing programs?

A. A transition plan will need to be developed in collaboration with the individual Area Office. The anticipated start date of this service is February 2008. The adoption and foster care support work that was incorporated into the Scopes of Service for Family Centers has been removed and will no longer be a component of this new model.

Q23. Will training be offered to programs (and paid for) by DCF in the assessment tools, Family Conference Model and Dyadic therapeutic work?

A. The awarded contractors will be provided an orientation/training on a number of key components of this model, including Structured Decision Making, Family Conferencing, the GAIN Short Screen, the North Carolina Family Assessment and dyad work.

Q24. Staff qualifications – definition of "clinical supervisor"? Particular degree(s) required? BA level workers – are they qualified to do this type of therapeutic work? Most programs (listed through the Supervised Visitation Network) specify the need for licensed, master level workers for therapeutic visitation.

A. We are looking for a Master's level person to provide clinical supervision to the direct service workers. Please refer to the response to Q17 regarding the nature of clinical work as described in this RFP.

Q25. What does DCF see as a FTE caseload? Do you take into consideration transportation time? In many areas, and cases, transportation time is longer than the actual visit.

A. The recommended maximum caseload per direct service worker for this program is 6. Transportation may be an issue to the extent there are disproportionate amount of referrals to the program for children placed outside of their catchment area. That issue will be clarified further with each provider as part of contract negotiations.

Q27. Programs are to do all of the "case management"? What is the motivation for other workers/service providers to respond to these meetings?

A. We envision a collaborative effort involving the family, DCF and all providers involved with the family to work together to develop a reunification plan, rather than do so in isolation. It is not our intent the provider performs all case management activities but rather assist in identifying and coordinating referrals to appropriate community agencies. This facilitates a smooth transition and helps to ensure the family is connected and linked to services in the community upon case closure.

Q28. Final phase of involvement states program staff will respond to "crisis" situations. There is no time line for this intervention – how long are programs responsible for crisis intervention?

A. See response to Q13.

Q29. Is clinical supervisor's role just supervision, or is s/he expected to do initial contacts/assessments/family conferences, etc.? If response time is to be in 48 hours, and workers are doing full caseloads, it would seem this needs a separate person. Is .25 enough for all of these responsibilities?

A. The primary focus of the clinical time will be supervision; however we do envision the clinical supervisor to have some direct contact with families referred to the program. We believe the small caseloads and staffing model is sufficient to respond within 48 hours allowing the successful respondent to meet this requirement.

Q30. Some responsibilities asked of the programs (transportation/geographic issues/non-traditional hours) are ongoing issues in visitation. With programs and DCF workers and case aides working together it can be difficult to arrange. Are programs to do these things alone, or will DCF provide some assistance?

A. The RFP contains a specific question relative to this issue.

Q31. On page 7 under Model Summary the last bullet says "Transportation", can you define what the Department is looking for or means by "Transportation?"

A. The Department anticipates circumstances in which the provider will be required to transport children to locations for visitation with their parents or anticipated guardians.

Q32. The staffing pattern for the Norwich Area office is 5.25. It would seem that this means two 2.25 teams and then perhaps a .75 part-time person. Can you break this down in regards to the number of teams and amount for supervision?

A. The Department has not specified the number of direct/clinical staff assigned to the Area Offices that are identified to receive additional FTE's. This will be further clarified during contract negotiations with the awarded applicant and the individual Area Office.

Q33. The RFP talks about small case loads. Does the Department have a maximum number desired for caseload size?

A. See response to Q1.

Q34. The RFP speaks about "teams" is it the desire of the Department that both members of the team will work simultaneously with the same family?

A. The "team" referenced in the RFP consists of the family, the Reconnecting Families Provider, DCF, the substitute caretaker of the child and other community providers involved with the family working together to achieve a successful reunification.

Q35. Can you please clarify what is meant by "transportation". It is mentioned in the RFP, but no specific expectations are discussed.

A. See response to Q31.

Q36. Is this RFP expected to replace the existing Family Visitation Center Grants or to supplement them?

A. To replace Family Centers, not supplement them.

Q37. If this RFP is a replacement program, how does DCF expect to serve the visitation needs of the families in the protective service caseload who are either not ready for home based reunification or families that the department have filed TPR petitions on? Capacity issues are a concern here - this would leave supervised visitation up to DCF staff and fee- for service providers?

A. The target population for this service is children with a permanency goal of reunification or Transfer of Guardianship. Outcomes established for this program reflect timely achievement of those permanency goals. This is an intensive service that will be earmarked for those families needing more than supervised visitation.

Q38. Will DCF consider awarding more than one program contract per area office i.e. splitting the funding if there are worthwhile applications and sufficient funds available?(i.e. the larger funded offices, Hartford, Manchester, New Britain, and Norwich?)

A. Yes.

Q39. In the RFP, DCF mentions that the contractor may use subcontractors. Could this include collaborating with another agency for some of the direct service or clinical/manager positions and creating two teams operating in different geographic locations within the same area served by the area office?

A. Terms of this contract must be met by the contracted provider. While subcontracting is an option, collaboration alone does not offer the necessary contractual assurances.

Q40. What is the expected start-up date of this contract?

A. The projected start date of these contracts is February 2008.

Q41. Will the Reconnecting Families Program be required to provide services to families on their active caseload 24 hours per day, seven days a week including weekends and holidays?

A. We do expect the contractors to provide in-home services to families involved with the program after-hours and on weekends at times which are convenient to the family. Following reunification, we would expect the provider to respond to crisis situations either through phone contact or in person response dependent on case circumstances.

Q42. The RFP mentions "Small caseloads to allow for flexibility in responding to the unique needs of families." What will this number be, and how many families will be served per year?

A. See responses to Q1 and Q2.

Q43. The RFP mentions "Mandatory after hours and weekend in-home service delivery." Will the department put some limits on this or will that be up to the contractor (i.e. therapeutic visitation is not likely to be successful when occurring in close proximity to bedtime)?

A. Service delivery will be arranged at times that are mutually agreed upon that serve the best interest of children and families involved with the program.

Q44. Will other members of the treatment team (i.e. families, DCF, and substitute caregivers) need to be equally as available on evenings and weekends for family conferencing meetings?

A. The family conferencing meetings referenced in the RFP occur at critical junctures and are likely to correspond to the stages of this program- specifically, in the beginning to educate the family about the program, following completion of a family assessment and prior to reunification. These meetings should occur at mutually convenient times for all parties. Should crises occur with families after-hours and/or on weekends that require DCF intervention, the Hotline is available.

Q45. Will the contractor need to physically provide the transportation? Is assisting families and alternate caregivers to access public transportation or medical taxi a permissible alternative?

A. Yes as per response to Q31. Public transportation is not an option that will be considered for children.

Q46. Since registration with CTBHP is required, will clients be able to access their health insurance for use of medical taxi?

A. Registration with CTBHP is not a requirement of this RFP.

Q47. Will the contractor be mandated to provide a visitation center in their DCF Area Office Region?

A. Provision of a center is not a requirement of this contract. The Contractor will be required to provide a location in the community for on-site visitation. It is anticipated, the majority of contact/visits will occur in the family's home and/or at the substitute caretaker's home.

Q48. Will training be offered in the North Carolina Family Assessment NCFAS-R and any other tools designated by DCF?

A. See response for Q23.

Q49. Will there be a required number of direct contact hours per week?

A. Although the model does not designate specific hours of direct contact with the family per week, it does specify the recommended frequency of contact with the family throughout each stage of the model. The duration of visits between a parent/child would last at a minimum, of 1 ½ hours per week. The duration, frequency and nature of the visitation would need to be modified as the family moves closer to reunification.

Q50. Is the Reconnecting Families Program based on an Evidenced Based Model? If so will contractor be educated in that model?

A. No. The Department established a team of area office personnel who work closely with the target population described in the RFP, to redesign Family Centers utilizing a Logic Model framework. Many of the program components are based on research evaluating the factors that promote successful reunification.

Q51. Will the Department train contracted staff in the GAIN Short Screen, Structured Decision Making & Family Strength and Needs Assessment/Reassessment?

A. See response to Q23.

Q52. Will the contracted agency be at liberty to introduce other assessment tools as they see fit?
A. Yes, with consent of the Department. Prior to implementation, the awarded contractor will be able to provide feedback and make recommendations to the department regarding the program, including any evidence-based assessments/tools they recommend be utilized.

Q53. Will the Department train contracted staff in Dyad-based Treatment?
A. See response to Q23.

Q54. What is the difference between the Intensive Safety Planning (ISP) Program and the Reconnecting Families Program?
A. ISP is a short term (20-24 day intervention), intensive (14 hours of direct service weekly), home-based program that is implemented immediately following a child's removal from home. Its' primary focus is to mitigate safety factors that led to a child's removal. It requires rapid engagement of the family and sees the removal as a window of opportunity to effect change within families. The Reconnecting Families Program is primarily a home-based service that offers a staged intervention to help prepare and support families during the reunification process. It requires active family engagement and team approach, a comprehensive family assessment, use of evidence-based tools, and provides dyad based interventions and therapeutic visitation to promote and effect a successful reunification. The duration of this program is up to six months.

Bidder's Conference Questions

Q55. If there are components of Exhibit A that are not applicable to a particular program, would the department consider adding an addendum or appendix to the contract documenting certain items that are not required?
A. No. The Exhibit A currently included in all Purchase of Service Contracts has been approved by the AAG. The Department has an agreement with the AAG to utilize all approved documents. Any modifications to Exhibit A would require AAG review and approval which may result in a further delay in executing these contracts.

Q56. The budgets allocated per Area Office, does that include costs other than staffing? Is transportation cost included?
A. Yes.

Q57. Will additional funding be available to the Contractor for transportation?
A. No.

Q58. Under Review Context in the RFP, what sections are not applicable to this procurement?
A. Sections D and G are not applicable to this procurement.

Q59. Can you provide more information on a dyad-based treatment approach?
A. No. The RFP contains a specific question relative to this issue.

Q60. What is the source of funding for this program?
A. The Reconnecting Families Program will be supported by a combination of federal and state dollars.

Q61. Does this program/funding replace existing Family Center Program/funding?

A. See response to Q11.

Q62. There is concern among providers that the transition to this new program will interrupt service delivery for those families involved with the Family Center Program? How will this transition occur?

A. A transition/termination plan will need to be developed and communicated with all providers. We want to ensure that services to families are not ended abruptly and that all transitions that do occur are planned. It is anticipated, the provider and Area Office will develop these transition plans.

Q63. Referrals to the Family Center Programs continue. It is unlikely services will be completed prior to the start date of this new service. Should providers stop taking new referrals and when will the providers be notified?

A. It is estimated the Review Teams will have conducted their review of proposals and made their selection to the Commissioner by the end of October. The Commissioner would need to approve all Review Team recommendations. Any issues requiring clarification could further delay this process. It is believed by mid-November the applicants will have been notified of the outcome of this procurement. Providers will need to work with their Area Office to develop a transition plan. Further clarification will be provided. Currently, we would expect current Family Center providers to continue accepting referrals to the program.

Q64. Not all families with a goal of reunification should be referred to the program as many are not ready to be reunified but they do require supervised visitation. How will families access supervised visitation services?

A. Families will be referred to the Reconnecting Families Program only if we feel there is a viable plan for Reunification or Transfer of Guardianship. Some families require support and intervention to effect reunification. Families who do not require this level of intervention, would not be referred to the program. Area Offices will be able to access supervised visitation services through Provider Agreements.

Q65. In Bridgeport, we are currently providing a similar service with 5 FTE's. How can we deliver the service with less staff?

A. Your application should provide a detailed plan as to how your agency intends to provide the service as described in this RFP.

Q66. What was the impetus that prompted the department to change the service so drastically?

A. There are considerable variations in service provision with the current Family Center Programs. Many of the current contractors provided supervised visitation services only. Not all the providers offered support services to foster/adoptive parents as defined in the Scope of Service. Additionally, there are significant differences in reunification services being delivered statewide - specifically in the following areas: length of service, the nature and types of contact with families, caseload size and frequency of contact. There also exists a wide range of funding statewide - from \$46,000 to over \$300,000. The Department made the decision to redesign the service to increase consistency across the state and meet the needs of our families and area office staff, utilizing a Logic Model framework. A team was established consisting of area office staff (representative of all levels of

the agency) with experience working with the target population as described in this RFP. The Reconnecting Families Program was the result of this process.

Q67. Why did the Department decide to rebid this service and not pursue a waiver as supported by the AG?

A. The AG has no connection to the waiver process, which is between the State agencies and the Office of Policy and Management. OPM requires the Department to issue RFP's for all services. At this time, waivers are requested for individual agency's contract, not for a whole service type. Given the redesign of the service and significant changes to the Scope of Service, the decision was made to pursue an RFP. All departments are to submit a plan for re-bidding existing services to OPM, to assist the Secretary in developing his plan for the Legislature as required.

Q68. Is there a provider currently offering this service?

A. No. There is no provider currently offering this service as described in this RFP.

Q69. Please clarify whether there is a no-reject policy?

A. Area Office Gatekeepers will be responsible for screening all referrals to the program. If the provider has concerns regarding the appropriateness of the referral, these concerns can be communicated directly to the case Supervisor and/or Manager for further discussion.

Q70. Given that the dyad based relationship work requires a Master's level, would there be a change in the RFP to reflect the non-clinical based work?

A. There will be no changes to the RFP at this time.

Q71. Is the adoption/foster care support group still a component? Is FAST being phased out?

A. The adoption and foster care support groups that were incorporated into the Family Center Contracts have been removed. There is no change in FAST Contracts as a result of this procurement.

Q72. Has there been any thought to create a separate contract for transitional care that is offered through a number of Family Center contracts?

A. Not at this time.

Q73. Is there a deadline or cutoff date for all existing contracts?

A. No specific statewide cutoff date has been established. We envision each Area Office transitioning from one provider to the Reconnecting Families provider in a carefully planned manner.

Q74. How does this program relate to the IFR pilot program? Is that program ending and/or being replaced by this new program?

A. There are a number of similarities between the Reconnecting Families Program and the two IFR pilot programs out of Manchester and Waterbury. Both programs offer a staged model to support families during the reunification process and offer time- limited, intensive, in-home services to children removed from their home as a result of abuse and neglect. The target population and length of service are the primary differences between the two programs. Additionally, the IFR programs provide individual/family counseling and psychotherapy, this program does not. These two pilot programs are ending and being replaced by this new service.

Q75. The RFP mentions that current IFP Providers are eligible to respond to this procurement. Are IFP funds being eliminated or are there any changes regarding that contract?

A. IFP providers are eligible to respond to this procurement based on their experience providing reunification services as defined in their previous Scope of Service. There are no changes being made to the IFP contracts as a result of this procurement.

Q76. Do applicants need to include their Affirmative Action Plan in their grant proposal?

A. No. All application requirements regarding Affirmative Action and non-discrimination are contained in the CHRO information referenced in the RFP.

Q77. The court impacts the timeliness of reunification. How does 60 days fit into the judge's decision to reunify?

A. The Court makes a determination as to the child's legal status but in general does not dictate to the Department the point at which a child may be reunified. The Department will make every effort to coordinate the legal status of the child with the reunification process and does not believe that the legal process will prove a barrier to the most appropriate and timely reunification of children with their families.

Q78. Many of the children in the Manchester area have significant behavioral health issues and could benefit from other intensive in-home services, particularly given this is not a clinical based model. Is this possible?

A. Yes. Coordinated service delivery is an important component of this model. Referrals for services should be based on the individual needs of the family. Given the intensity of this model, an additional in-home service might be overwhelming to a family. If the child was involved in individual counseling with a community provider, it is hoped the clinician would be actively involved in preparing the child and family for reunification.

Q79. Some Area Offices have increased funding. The budget does not appear equal per FTE. 1 FTE costs \$64,000. New Britain appears \$10,000 less. Please clarify.

A. The RFP identifies an approximate funding level and approximate number of FTE's for each Area Office. The final funding level and number of FTE's will be determined during the contract negotiation process.

Q80. Is taxi service considered public transportation? Are providers required to purchase or rent a vehicle or could the provider transport children in a taxi supervised by someone from the program?

A. We're not sure whether the option presented here is the best approach. As transportation is an application question, the department will refrain from further comment.

Q81. The recent legislation requires OPM to develop a plan, is that explicit to this service or the entire department? Is this public information?

A. Each State agency that contracts for human services has been requested to submit a planning process and a plan specific to its services. That process is taking place this fall. Yes it is public information.

Post Bidder's Conference Questions:

Q82. Given the extensive psychiatric, substance abuse and trauma histories that are prevalent in the target population for the Reconnecting Families Program, we can anticipate that for many families there will be complex clinical issues impacting the parent child relationship which will, at times, present challenges to the healing process. As such, it appears that to do effective Dyad Based treatment, it will be essential in many situations for the provider to have formal clinical training and experience in providing psychotherapy and mental health assessment. Is the Department willing to consider a blending of BA and Masters level clinicians on the team so as to have program staff with specific counseling skills/psychotherapy training to more effectively identify and intervene to address the complex emotional impact of the dyadic work? And will the Department also be able to address the budgetary implications of staffing the program with more appropriately trained staff?

A. The Department is interested in a service that is therapeutic however; we do not envision the provision of traditional psychotherapy or formal mental health assessments as key components of this service.

Q83. Several years ago, DCF requested that we expand the scope of the Family Center (through additional funding), to provide respite services to children in transition, i.e. supervision and support of DCF involved children who are awaiting placement or who are unable to remain in the foster home during the day. Will there be alternative funding to support the continuation of this service? Please note, that the new Reconnecting Families Program description will not require the same type of program space as the existing Family Centers (i.e. office space for home-based clinicians, as opposed to child and family friendly visiting rooms), which may also have implications for where these respite programs can be located.

A. Yes. Area Offices may continue to purchase this service through flex funding.

Q84. The Area Office served is not listed on the cover page. Would you like us to list it on the cover page?

A. Yes.

Q85. Would you like us to include job descriptions for those positions that will need to be filled?

A. Submitting job descriptions for positions that will need to be filled is not a requirement of this RFP.

Q86. The funds allocated for each area office vary greatly on a per FTE basis. That is, one team (2.25 FTE) is provided \$64,387 per FTE (\$144,871 total) across the board. Area Offices with additional FTEs receive less per FTE than would be predicted using economies of scale. New Britain has been designated 9.0 FTEs (the equivalent of four teams) but only receives \$54,159 per FTE (\$487,439 total); Manchester, with 8.0 FTEs receives \$45,967 per FTE (\$367,739 total). The total budget, of course, includes operational and travel expenses. The geographic area covered by the New Britain Area Office is very large and travel will be a considerable cost. Please explain the difference in per FTE rates.

A. See response to Q79.

Q87. The Norwich Area office is shown in the RFP as being slated for 5.25 FTE's, .75 FTE more than an even two teams. Is a Norwich area provider permitted to submit an application requesting more than 2.25 FTEs?

A. Yes. The Norwich Area Office has been allocated approximately 5.25 FTE's. An applicant can submit an application based on the level of funding allocated for each Area Office. Please note the RFP does not require applicants to submit staffing or budgetary information.

Q88. BA staff are inadequately prepared to provide the described services. May an applicant submit a proposal that includes requesting an increased level of DCF funding that would support MA-level staff?

A. The RFP does not require applicants to submit staffing or budgetary information.

Q89. The proposed level of funding will not support the pay differential necessary to attract and retain staff, given the obligations for evening and weekend work (as compared with less demanding BA-level job opportunities). Would the Department consider an application that requests a higher level of funding in order to meet this need?

A. See response to Q88.

Q90. Will you publish a list of providers who submitted letters of intent?

A. Yes. Letters of Intent were received from the following providers:

- Community Residences, Inc
- Waterford Country School, Inc
- Family Services of Greater Waterbury, Inc
- The Annie E Casey Foundation – Casey Family Services
- Kaleidoscope – Family Solutions, Inc
- EASTCONN Family Visitation Center
- Community Mental Health Affiliates
- Child Guidance Center of Greater Bridgeport
- The McCall Foundation, Inc
- Yale University - Child Study Center
- New Opportunities, Inc
- C.A.R.D. Foundation
- Klingberg Family Centers, Inc
- Connecticut Council of Family Service Agencies
- KIDSAFE CT – Exchange Club Center for the Prevention of Child Abuse of CT, Inc
- The Village for Families and Children, Inc
- Family and Children's Aid, Inc
- Family Strides, Inc
- Youth Villages, Inc
- United Community and Family Services
- 4 Kids, Inc
- The Exchange Club Parenting Skills Center
- Madonna Place, Inc
- Child and Family Agency of Southeastern CT, Inc
- Family and Children's Agency
- Wheeler Clinic
- Community Health Resources

Clifford Beers Clinic
United Services, Inc
Catholic Charities, Inc. – Archdiocese of Hartford

Q91. If we are applying to cover two separate area offices, do we need to submit two separate proposals?

A. No. One proposal is sufficient.

Q92. Can you clarify what the funding in Manchester covers? How many staff/teams? The money listed doesn't seem to support the number of staff/teams.

A. The approximate annual funding that has been allocated for the Manchester office to deliver this service is \$367,739. The approximate FTE's for that office is 8. There has been no further breakdown of direct service or clinical/supervision at this time. Final staffing models will be determined during the contract negotiation phase.

Q93. With the funding for our existing program set to end prior to the start of the award of this new contract, what provisions are in place for the interim time? Will there be bridge funding on existing contracts to take them up to the start of the new contracts so there is no interruption in client service?

A. We plan a careful transition to assure there is no interruption in client services. Transition Plans will need to be established between the Providers and DCF Area Offices to clarify expectations during this transition.

Q94. If there are larger teams, does the FTE for supervision increase proportionally? (i.e. 3 teams would be 6 direct service FTE's and .75 supervisor FTE ?)

A. Yes. There would need to be an appropriate balance of clinical supports for additional direct service workers. Staffing Models will be determined during the contract negotiation phase.

Q95. How many children are expected to receive services in the Manchester Area in a year?

A. It is expected each team with the staffing model of 2.25 FTE will serve 28 families annually. The recommended maximum caseload per direct service worker for this program is 6.

Q96. The funding for each area office doesn't consistently provide the same funding for the number of FTE's stated in the RFP. For example, Bridgeport/Willimantic have 2.25 FTE's funded at \$144,871 for \$64,387 per FTE, while Manchester is supported by \$45,967 per FTE and New Britain at \$54,159 per FTE. Are you proposing different staffing models- i.e. more experienced staff in certain area offices?

A. We are not proposing that one Area Office have staff that is more or less experienced than another. See response to Q79.

Q97. Is it permissible for an administrative agency or association-type agency to apply on behalf of several of its member agencies?

A. The Department is prepared to accept all proposals that meet the eligibility requirements identified in the RFP.

Q98. Is there any preference for one umbrella-type application that covers several DCF area offices, or is the expectation that there will be one application per area office?

A. The Department is prepared to accept proposals from applicants willing to provide this service to multiple Area offices.

Q99. The RFP lists "small caseloads" as part of the model that will be implemented in this program. To clarify, what exactly is the number of caseloads anticipated or expected of each direct service bachelor level worker?

A. See response to Q1.

Q100. The RFP states that the referrals will be generated by the DCF Area Office gatekeeper. To get a better understanding of the referral base, what is the anticipated number of children that will be referred to this program?

A. See responses to Q1 and Q2.

Q101. The RFP states that meetings will be held with the family, DCF, and substitute caregiver. Could the term "substitute caregiver" please be defined for clarification of this party's role in the treatment process? Or is it a type of identified respite individual for the family?

A. The substitute caretaker is the licensed foster parent and/or the individual working with the child/youth in a congregate care setting.

Q102. In the section, SERVICE PLANNING, it listed that the initial assessment of the family will occur on site. What exactly is meant by "on site"?

A. We envision the initial assessment to occur at a neutral location in the community. The site referenced in the RFP may be in a room at the awarded contractor's agency or at a mutually convenient location in the community.

Q103. Also in this section, it is stated that the provider will maintain weekly visits with the family to help prepare for reunification. To clarify, is one weekly visit the minimum or maximum amount the family can be visited during that phase of treatment? Can a provider with an evidence-based model that calls for at least 2-3 visits a week propose that model of service?

A. One weekly visit is the minimum expectation for that particular phase of this service. Some families may require additional contacts throughout the various stages of the program. You are welcome to elaborate on a proposed model of service; however proposals will be scored based on responses to the Applicant Questions contained within this RFP.

Q104. During the POST REUNIFICATION SERVICES phase, twice weekly visits are required for 30 days and weekly visits are required after that period. As mentioned in the question previously, can a provider with an evidence-based model that calls for at least 2-3 visits a week throughout the entire time working with the child and family propose this type of model of service?

A. See response to Q103.

Q105. The RFP states that a team consists of 2.0 FTE direct service workers and .25 Clinical/Manager. Can a provider propose a different staffing structure that has been proven to be successful working with these types of reunification cases? Also, can the provider propose to serve more than one city with this different staffing structure?

A. The RFP does not require applicants to submit staffing or budgetary information. Please see response to Q103. Awarded contractors will provide services to all towns within an Area Office catchment area.

Q106. It is listed in the chart that Hartford will need a FTE staff of 4.0. How would this be staffed when the Clinical/Manager is a .25 position? In this situation, does the Clinical/Manager become a .5 position so the staffing requirement is fulfilled?

A. The amount of clinical/Manager time will increase in proportion to the total FTE's. Final staffing models will be determined at the contract negotiation phase.

Q107. Given the staffing levels detailed in the RFP, please provide your estimated cost breakdown. For instance, what are you estimating as salary cost per position, fringe, travel, training, etc?

A. The estimated cost breakdown of the staffing model of 2.25 FTE's is as follows: The Department's Rate Setting Division identified the salary of the Master's Level Clinician to be approximately \$45,000 based on our current contracts. This division identified the salary for the BA position to be \$38,000. To these figures, the Department added 26% in fringe, 18% in G&A and \$13,168 in operating costs.

Q108. If we are applying for funding in different areas (locations), must we submit one application for each area, or should we submit one application noting the multiple areas we wish for it to cover.

A. Please submit one application noting the Area Offices you wish to cover on the Cover Page.

Q109. From "Model Summary," what is the difference in "intensive work following reunification" and "post reunification work to monitor and provide support to the family?" Does the latter suggest follow up after the case is closed? Also, is there a specific model to be used in the "dyad based interventions?"

A. Following reunification, the contact with the family by the provider increases to twice a week visits for the first 30 days to provide support, address issues within the family, assess safety, monitor/coordinate service provision and assess changes in family functioning. At any time following reunification, the provider may be required to respond to crisis situations within the family to minimize the likelihood of re-entry and/or repeat maltreatment. The final 30 days of the program is to ensure the family is linked to the appropriate services in the community to help maintain the child in the home and to help prepare the family for case closing. The provider is not expected to provide any follow with the family after they have completed the program. We are unable to respond to the last question as the RFP contains a specific question relative to dyad based interventions.

Q110. From "Target Population" when suggesting that "referrals can be initiated immediately following a child's removal," how will this differ from cases referred to ISP?

A. See response to Q54.

Q111. From "Assessment and Service Planning:" is there a specific model to be used in "therapeutic visitation?"

A. The RFP contains a specific question relative to this issue.

Q112. In "Outcomes" what is the time frame of "short, medium, and long term? How will "long term" goals be measured, considering the services will end prior to collection of data by provider? How will this information be shared with the provider (for our assessment of outcomes)?

A. We expect to see significant progress on the short and medium term outcomes during the course of this intervention (up to six months). Long term outcomes will be followed internally through our SACWIS system (LINK). Following implementation of the program, we envision an annual provider and DCF Area Office meeting to review data and outcomes for this model.

Q113. When does the department expect to notify applicants re: their status, i.e. - what date do you expect to make decisions on who will be awarded the contracts?

A. See response to Q63.

Q114. For contracts that have 5.25 FTE- does this equate to 5 full time bachelor level direct service positions and still only a .25 clinical supervisor?

A. See response to Q106.

Q115. Since the Foster Care and Adoption Support Group components are not being included in this new service, what services are in place currently or being developed to address this need?

A. The Division of Foster Care Services along with the Bureau of Adoption and Interstate Compact have assumed responsibility for the delivery of those services through a combination of direct and contracted services.

RECONNECTING FAMILIES PROGRAM

REQUEST FOR PROPOSAL



August 31, 2007

State of Connecticut
Department of Children and Families

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STATE OF CONNECTICUT
DEPARTMENT OF CHILDREN AND FAMILIES
505 Hudson Street
Hartford, CT 06106

REQUEST FOR PROPOSALS (RFP)

PROGRAM TITLE

Reconnecting Families Program

PROCUREMENT SCHEDULE

RFP Development	May 2007
RFP Published	August 31, 2007
Pre-TA Questions	September 6, 2007 by 3:00 p.m.
Non-mandatory TA/Bidder's Conference	September 11, 2007
Deadline for Receipt of Mandatory Letter of Intent	September 14, 2007 by 3:00 p.m.
Deadline for Submission of Post TA Questions	September 14, 2007 by 3:00 p.m.
Questions and Answers Posted to Website	On or about September 20, 2007
Deadline for Receipt of Proposals	October 19, 2007 by 3:00 p.m.

OVERVIEW

The Department of Children and Families (DCF/Department) is seeking applications from qualified entities to engage, support and intervene with family members through a short-term, intensive service model in order to promote and effect successful reunification and reduce the risk for further abuse and neglect.

SOURCE OF FUNDS

The services contained within this RFP will be funded by state and federal funding to be awarded based upon a competitive application process. Continued funding is dependent upon appropriations available to the Department.

PERIOD OF AWARD

The funding period will be determined in conjunction with the awarded applicant(s) based upon the anticipated start of service. It is expected that up to a three (3) year contract will be executed. Continued funding will be contingent upon performance of the awarded RFP applicant and the continued appropriation and availability of funds to the Department.

AMOUNT AND TERMS OF AWARD

The amount and terms of award will be negotiated with the successful applicant based on the actual contract start date. The approximate maximum annualized funding available statewide for this initiative is \$2,869,619.

DISPOSITION OF PROPOSALS

The Department reserves the right to reject any and all proposals, or portions thereof, received as a result of this request, or to negotiate separately any service in any manner necessary to serve the best interests of the Department. The Department reserves the right to contract for all or any portion of the scope of work contained within this RFP if it is determined that contracting for a portion or all of the work will best meet the needs of the Department.

ELIGIBILITY

Applications will be accepted from any current DCF grant funded Family Center or Intensive Family Preservation provider or an entity with a demonstrated record of providing reunification services to families.

The Applicant and any proposed subcontractors may not have a current licensing restriction or have been subject to DCF or other state agency licensing restriction within the last 6 months, nor may the Applicant have had a program terminated within the last three (3) years due to quality of care or other agency performance issues. A current investigation of Medicaid fraud or a judgment involving Medicaid fraud within the past five (5) years also excludes a provider from participation. Proposals from applicants who appear on the United States General Services Administration Excluded Parties List will not be considered.

INSURANCE

The contractor will carry insurance (liability, fidelity bonding or surety bonding and/or other) during the term of this contract according to the nature of the work to be performed to "save harmless" the State of Connecticut from any claims, suits or demands that may be asserted against it by reason of any act or omission of the contractor, subcontractor or employees in providing services hereunder, including but not limited to any claims or demands for malpractice. Certificates of such insurance shall be filed with the department prior to the performance of services.

AFFIRMATIVE ACTION

All Respondents **must** complete the Bidder's Commission on Human Rights and Opportunities (CHRO) Compliance Package and include with their RFP submission required documentation to give evidence of their compliance with certain nondiscrimination and affirmative action obligations pursuant to applicable Connecticut General Statutes. The Bidder's CHRO Compliance Package is to be obtained from the DCF website:

www.ct.gov/dcf

1. Click on "Forms"
2. The Bidder's CHRO Compliance Package and Evidence of Nondiscrimination Form Guidance are found under the "Contracts Management" heading

Guidance for completing the Evidence of Nondiscrimination Form can also be found on the DCF website:

<http://www.ct.gov/dcf/cwp/view.asp?a=2555&q=314408>.

Successful respondents will be expected to comply with nondiscrimination requirements and any other required state and federal regulations. All awarded agencies will be required to submit an affirmative action plan prior to the execution of a contract.

GRANT APPLICATION DEADLINE

The contact person (see below) must receive one (1) original and seven (7) copies by October 19, 2007, no later than **3 p.m.** local time at the following DCF location (See also "Application Instructions" section):

Judith Jordan
Director of Grants Development and Contract Management

DCF - 505 Hudson Street
Hartford, CT 06106

Each copy must be complete, collated, and ready for reviewers. **Please note** that faxed and electronic versions of the responses will not be accepted. Also, no responses will be accepted for review after the due date and the time stated above.

TECHNICAL ASSISTANCE/BIDDER'S CONFERENCE

A non-mandatory Technical Assistance//Bidder's Conference is scheduled for:

September 11, 2007
9:00-11:00
Office of the Chief State's Attorney
300 Corporate Place
Rocky Hill, CT 06067
(860) 258-5800

Directions: Take Interstate 91, Exit 23

If coming from SOUTH, take a left off of the ramp and first right just over highway into Corporate Place

If coming from NORTH, take right off of ramp and first right into Corporate Place.

The Chief State's Attorney's Office is the last building on the right.

NOTE: Copies of the RFP will not be available at the Technical Assistance meeting. Applicants are asked to bring a copy of the RFP with them to the Technical Assistance for reference.

LETTER OF INTENT & CONTACT PERSON

A non-binding Letter of Intent **is required**; no application for funding will be accepted from any bidder who has failed to submit a Letter of Intent within the specified time frame. Letters of Intent should be directed to and received by the contact person noted below by **3 p.m.**, local time, on September 14, 2007. Faxed copies or emailed copies of the Letter of Intent will be accepted.

Kimberly Nilson
Department of Children and Families
505 Hudson Street
Hartford, CT 06106
Phone: 860-550-6463 Fax: 860-723-7236 email: Kimberly.Nilson@ct.gov

Please notify the DCF contact person identified on the Letter of Intent form if, within 24 hours of your having e-mailed or faxed your Letter of Intent to DCF, you do not receive a confirmation of its receipt.

QUESTIONS

Questions concerning this RFP that proposed Applicants would like to have answered at the above-mentioned Technical Assistance meeting/Bidders' Conference must be directed **by email** to Kimberly Nilson at Kimberly.Nilson@ct.gov no later than **3:00 pm**, on September 6, 2007. Answers to questions about this RFP will be responded to only at the Technical Assistance Meeting and through the prescribed electronic "Question and Answer" method and period. Subsequent questions regarding the RFP and its content must be received by **3:00 pm**, September 14, 2007 via email directed to Kimberly Nilson. The Department will post responses to these questions on the Department of Administrative Services (DAS) website (Contracting Portal: www.das.state.ct.us) on or about September 20, 2007.

Any form of ex parte contact regarding this RFP or any proposal being prepared or being considered under this RFP, whether directly or indirectly is hereby strictly prohibited. This includes, but is not limited to, any contact with any DCF employees asking them for advice, information, or support. Violations may result in the rejection of any and all proposals submitted under this RFP by such respondent(s). Any inquiries or requests regarding the RFP must be submitted to the Contact Person via the Question and Answer process noted herein.

BACKGROUND

Family reunification and permanency planning for children were first emphasized legislatively in the Adoption Assistance and Child Welfare Act of 1980. In 1993, Congress passed the Family Preservation and Family Support Services Program, providing states with additional resources for services to support and strengthen families and enhance reunification efforts. In 1997, the Adoption and Safe Families Act was enacted which reauthorized funding for family preservation and family support services but added time-limited reunification and adoption services as viable permanency options for children. This Act stipulated reunification efforts be targeted, time-limited and subject to change if parents fail to demonstrate significant progress during the first twelve months of placement. It emphasized that safety and well being of children needs to be of paramount importance when making decisions about reunifying children with their families. Under this legislation, states are required to reunify children safely with their parents within twelve months without increasing rates of children re-entering care or experiencing repeat maltreatment.

In CT, there are approximately 1900 children in out-of-home care with a permanency goal of reunification. Only 59% of children entering care achieve permanency within twenty-four months and approximately one half of the children placed in DCF care, never return to the caretaker from whom they were removed. Approximately 10% of children exiting care re-enter within a twelve month period primarily due to abuse or neglect concerns. Reunification is our preferred permanency option for children in out-of-home placement. Our practice clearly demonstrates the need to enhance reunification services to help and support children in their transition back home to their families and/or develop an alternative permanency plan.

To that end, the Department is interested in establishing capacity to engage and support the family system throughout the reunification process through a competitive statewide procurement.

Model Summary

The following are key design elements of this model:

- ◆ Staged Model – includes preparation work prior to reunification, intensive work following reunification and post reunification work to monitor and provide support to the family.
- ◆ Active family engagement and participation in treatment planning. Family conferencing meetings to be held at critical junctures throughout the duration of the program.
- ◆ Therapeutic Visitation
- ◆ Some site and primarily home-based service delivery (including biological parent/kin, substitute caretaker's home)
- ◆ Post Reunification Crisis Intervention
- ◆ Dyad-based interventions/treatment approaches that focus on strengthening communication, repairing/restoring relationships, re-clarifying roles through modeling, coaching and instruction.
- ◆ Length of service – four to six months
- ◆ Standardized case observation and case summary reporting
- ◆ Team approach – core members include the family, the Reconnecting Families Contractor, DCF, substitute caretaker for child and other providers involved with the family
- ◆ Small Caseloads to allow for flexibility in responding to the unique needs of families
- ◆ Mandatory after-hours and weekend in-home service delivery
- ◆ Transportation

Target Population

This service is designed for families with children who were removed from their home due to protective service concerns. These children may be victims of neglect, physical and sexual abuse and may have been exposed to substance abuse, domestic violence, mental health issues and/or other disabling conditions of the parent. Referrals to the program will be generated by the DCF Area Office gatekeeper. Biological, relative caretakers and kin are eligible to receive services. Referrals will be generated for children with a permanency plan of reunification and/or Transfer of Guardianship. Referrals can be initiated immediately following a child's removal from home or at any time during their placement as long as the permanency goal is reunification or Transfer of Guardianship. Referrals to the program should occur prior to the implementation of unsupervised visitation. A specific emphasis of the model will be referring children that are likely to remain in care longer than six months without this level of intense intervention as well as referring families that need additional supports and services to effect a safe reunification.

The Contractor will be available to see family members within 48 hours of receipt of the referral. The Contractor will contact the assigned DCF worker directly within 24 hours to coordinate a joint visit with the family.

Services are time-limited up to six months. DCF approval is required for service to end prior to four months and to extend beyond six months should the family require additional time.

Core services

The Contractor will maintain the capacity to provide the list of core services to families as described below. Many of the services described below may be provided to the family throughout the duration of the program.

Preparation for Reunification (approximately 60 days)

During this stage, the contracted provider will facilitate a family conferencing meeting to introduce the family to the service and to engage all family members. A subsequent meeting will be held with the family, DCF, substitute caretaker and service providers involved with the family prior to moving to the next stage of the program.

Assessment and Service Planning

A wide range of services will be provided to the family based on the completion of a comprehensive family assessment. Although the initial assessment of the family will occur on site, services will predominately occur in the home and/or other locations convenient to the family. Included in the assessment and service provision are the following:

- ◆ Parent/child relationship – including but not limited to: communication, bonding, attachment, insight/ability to respond to child's needs
- ◆ Parenting education and skill building – including but not limited to: structure and limit setting, supervision, discipline, child development, effective communication, conflict resolution, crisis management, problem-solving, anger and stress management, safety planning, life-skills training, budgeting, time management and housekeeping
- ◆ Use of evidence-based tools. The North Carolina Family Assessment (NCFAS-R) will be used to assess parental readiness for reunification and parent/child ambivalence. Additional tools are being considered and will be identified prior to implementation
- ◆ Treatment needs will be identified through a variety of evidence-based tools completed by DCF, including but not limited to: the GAIN Short Screen, the Structured Decision Making (SDM) Family Strength and Needs Assessment/Reassessment
- ◆ Assist family in mitigating safety factors that led to child's removal as identified in the Structured Decision Making (SDM) Safety Assessment
- ◆ Communication and Service Planning at critical junctures with existing community providers.
- ◆ Therapeutic Visitation – provide goal oriented visits/interventions to assure safety, promote strengths, address concerns and demonstrate effective parenting. Formal feedback will be provided to the family following each session. A dyad treatment approach to be utilized as described below*
- ◆ Provider will maintain weekly home visits with the family to engage, assess and help prepare parents/children for reunification
- ◆ When possible, the substitute caretaker for the child will be actively engaged and involved with the program to help prepare the family for reunification. The Contractor will communicate regularly and provide continuous feedback on the results of the visits and/or services provided.
- ◆ Provider will establish and maintain frequent contact and communication with the department through phone calls, e-mails and regularly scheduled monthly case conferences
- ◆ Service Plans will be developed within two weeks of the start of service following an initial assessment of the family. These will be completed in collaboration with the family and in consultation with DCF.

Services During the Reunification Period (approximately 30 days)

- ◆ Continuation of weekly home visits – flexibility to increase hours and frequency based on family circumstances. Includes communication with the team to assist the family in developing safety plans designed to address issues/problems that may surface following the child's return home

- ◆ Continuation of Therapeutic Visitation - Visit progression – parents participating in more normal activities with their children – bed time, meals, homework etc. Visits are extended. Move to unsupervised visits when appropriate
- ◆ Provider will facilitate a family conferencing meeting to review safety factors, progress in dyadic work, progress in addressing behavioral health and/or other treatment needs, family/community supports and finalize plans for child's transition home. Every effort will be made to ensure barriers to receiving services are minimized and that the family is linked to services prior to reunification

Post Reunification Services (approximately 60 days)

- ◆ Twice weekly home visits for 30 days, focusing on the continuation of dyadic work, assessing safety, identifying changes in family functioning, resolving issues and performing case management activities relative to service provision.
- ◆ Home visits reduced to weekly for remaining 30 days of service for monitoring and support. Provider to ensure family is linked to appropriate services in the community prior to termination of the service.
- ◆ Following reunification, provider will be expected to respond to crisis situations involving the family either through phone calls or in person response dependent on case circumstances.

*Dyad-Based treatment approach focuses on interpersonal processes (attachment, dynamics, roles individuals play, communication, emotions) within relationships (i.e. parent/child). Rather than traditional parenting curricula that focus on skill building related to setting boundaries, appropriate discipline and behavior management, dyad work will focus on restoring, repairing and healing relationships and communication. The impact of the child's experiences (abuse/neglect), the impact of his/her placement, the impact on relationships, roles and coping patterns are the substance of the discussion.

Staffing Model – Reconnecting Families

Each team will have 2 bachelor's level positions supervised by .25 master's level clinician. Agencies may apply to provide service to more than one Area Office

Position	Credential	FTE
Clinical/Manager	Masters level	.25
Direct Service	Bachelors level	2.0
	Total	2.25

Area Office Breakout – Reconnecting Families

Area Office	Approx FTE	Approx Annual Funding
Bridgeport	2.25	\$144,871
Danbury	2.25	\$144,871
Greater New Haven	2.25	\$144,871
Hartford	4.0	\$233,675
Manchester	8.0	\$367,739
Meriden	2.25	\$144,871
Middletown	2.25	\$144,871
New Britain	9.0	\$487,439
Metro New Haven	3.25	\$190,583

Norwalk/Stamford	2.25	\$144,871
Norwich	5.25	\$286,343
Torrington	2.25	\$144,871
Waterbury	2.25	\$144,871
Willimantic	2.25	\$144,871

OUTCOMES

We are conceptualizing the impact of this service in terms of short term, medium term and long term outcomes including the following:

Short Term

- ◆ Children will begin to talk about their experiences.
- ◆ Parents begin to develop an understanding and have greater accountability of the issues that led up to the child's removal and begin to understand the impact of placement on the child.
- ◆ Parents/children begin to have positive, successful visits.
- ◆ Coaching, teaching and modeling interventions begin.
- ◆ Traditional and non-traditional supports are identified for parents.
- ◆ An initial assessment of the family is completed. Assessment is driven by the strengths and needs identified by the family, evidence-based tools and other evaluative information/materials.
- ◆ Placement resource begins to support and reinforce positive parent/child interactions.

Medium Term

- ◆ Children talk about their experiences; parents are participating in restorative experiences.
- ◆ Parents implement and effectively demonstrate new strategies and approaches learned.
- ◆ Parents actively seek supports to address crisis situations. Families are better able to respond and manage crisis.
- ◆ Parents actively engaged in services (demonstrating progress in behavioral objectives) and addressing issues/safety factors which precipitated child's removal.
- ◆ Improved parent/child interactions observed.
- ◆ Parents/children have longer, more normalized visits – participate in normal activities- successful visits
- ◆ No new SDM safety factors are identified; no increase in SDM Family Risk Assessment.
- ◆ Implementation of the treatment plan.
- ◆ Service providers are coordinating clinical and supportive interventions for the family.
- ◆ Placement resource actively supportive and involved in reunification plan.

Long Term

- ◆ 93% of those reunified will have no incidents of repeat maltreatment within a 6 month period.
- ◆ 93% of those reunified will not re-enter care within 12 months following reunification.
- ◆ Decrease length of stay for children in OOH care with goal of reunification.
- ◆ Decrease amount of time to achieve permanency for children in OOH care.
- ◆ Decrease number of children experiencing multiple foster care placements.
- ◆ Increase number of children reunified with birth family/kin.
- ◆ Reduce the number of children less than age 12 with permanency goal of APPLA.

BUDGET & BUDGET NARRATIVE

The submission of a budget and budget narrative is not required at this stage of the procurement process.

PREPARING A RESPONSIVE APPLICATION

Respondents must review the RFP in total to ensure that all required questions and response elements are adequately and sufficiently addressed. Applicants should carefully read and familiarize themselves with the section titled "APPLICANT INSTRUCTIONS and REVIEW INFORMATION." This section details the format and the appendices requirements. The Department has the right to reject submitted applications that do not conform to these requirements.

APPLICATION QUESTIONS

The section immediately below lists all the questions to which Applicants must respond in their submission. It is strongly encouraged that these questions be considered and answered within the context of the totality of information contained in this RFP.

1. Provide an overview of your agency's experience providing reunification services to families where children have been removed due to protective service concerns. Include an organizational chart that identifies key managers by name and include resumes of these managers and/or other individuals who will likely provide reunification services.
2. Some of the strongest predictors of parental ambivalence regarding reunification include missing court appearances or scheduled visitation and refusing to engage in services. How would you work with a parent when these behaviors surface?
3. How would you implement a family conference model, facilitated by the awarded contractor, as a method for communicating and coordinating services at critical junctures in the case?
4. A point of emphasis of this initiative is, where possible a more inclusive role for substitute caretakers. From your perspective, what broader role or responsibilities can the substitute caretaker take on in the provision of this service?
5. Describe how your intervention will take into consideration cultural differences and implications within the family system when a child has been removed because of abuse or neglect concerns.
6. At times following receipt of this service, immediate reunification is not recommended by the Department. How would this be communicated to the child and family? What role should the provider play in bringing closure to this intervention with the family?
7. What is your agency's understanding of therapeutic visitation and what are the key issues that you would address in dyadic therapeutic work between a parent and child following a child's removal from home?
8. Describe your plan to respond to the logistics of transportation, non-traditional hours (including evenings and weekends) and dealing with geographic complications related to location of placements in the delivery of this service.

9. What are the key issues and/or factors that you believe are important to be considered as part of the reunification decision?

10. We can anticipate that the process of reunification will be a challenging and stressful period for parents and that setbacks such as relapses will occur. Describe your approach to working with family members to identify and proactively plan for these circumstances.

APPLICATION INSTRUCTIONS and REVIEW INFORMATION

INSTRUCTIONS FOR COMPLETION

Submitted applications must conform to the following format requirements:

Page Limit	20 (excludes Cover Page, Table of Contents, and Appendices)
Font Size	12 pt
Font Type	Times New Roman
Paper	8.5 x 11 inches (portrait orientation)
Margins	1 inch all sides
Line Spacing	1.5
Copies	1 original plus 7 copies

APPLICATION FORMAT

Note: Applications should be packaged with the information in the order as follows: (not in binders, please)

1. Cover Sheet
2. Table of Contents
3. Application Questions and Responses
4. Appendices (see below)

Please ensure that all pages are numbered.

APPENDICES

The following appendices must be included with the proposal:

Appendix 1	Organizational Structure/Chart
Appendix 2	Resumes of Key Staff
Appendix 3	Board of Directors (annotated with race/ethnicity, gender and town of residence)
Appendix 4	Subcontractor Profile Form(s)
Appendix 5	Notification to Bidders Form* (Bidder's CHRO Compliance Package)
Appendix 6	Evidence of Nondiscrimination Form and Applicable Evidence material* (Bidder's CHRO Compliance Package)
Appendix 7	Employment Information Form* (Bidder's CHRO Compliance Package)
Appendix 8	SEEC 10 form*
Appendix 9	Consulting Agreement Affidavit*

Please note: Attachments other than those appendices defined above are not permitted. In addition, these appendices are not to be used to extend or replace any required section of the application.

*Submissions are to include the above identified properly executed forms, materials and affidavits. Applications lacking these documents may be rejected from review and award consideration.

REVIEW CONTEXT

The review of the applications will be standardized, but not limited to the following elements

- A. All application deadlines, as described in RFP, have been met. Application format and utilization of DCF application materials, as described in RFP and/or at the Technical Assistance/ Bidders Conference, has been adhered.
- B. The applicant demonstrates a history of developing and maintaining evaluation and data collection systems of clinical social service programs for children and adolescents.
- C. The applicant demonstrates a history of evaluating the efficacy of treatment models designed for children and adolescents.
- D. The applicant demonstrates a history of monitoring services for children and adolescents, in particular congregate care services.
- E. The proposal clearly and satisfactorily addresses how the applicant will provide the services described in the RFP.
- F. The applicant has clearly and satisfactorily described how all the service management requirements listed in the RFP will be addressed.
- G. The applicant has submitted a realistic and cost effective budget that includes accurate listing of all program-funding sources, as stipulated in the RFP. Although the sample budgets can be exceeded, as outlined above, preference will be given to applicants who can demonstrate a quality and cost effective budget within the dollar constraints.
- H. Applicant's agency structure is sufficient to support the proposed program by providing adequate administrative support and supervision.
- I. Applicant can demonstrate the organization's ability to develop and maintain staff who are culturally and linguistically reflective of the population(s) to be served.
- J. Applicant can demonstrate ability to work effectively with DCF, other state agencies, and other traditional and non-traditional community providers.

REVIEW PROCEDURE

The Department is under no obligation to award the contract to the application with the highest scores or, for example, the proposals offering to provide the service at a lower amount than other applicants. The review panel may use numerical point measures as a guide, but these measures are not binding on the review panel. The recommendations of the review panel are based on a wide range of considerations and are not limited to point weight score or the relative costs of the proposals. The goal of the Department is to procure the highest quality services in the most fiscally responsible way.

Following the final selection, a contract will be negotiated and developed with the applicant(s) that details the services, budget, rate, performance based criteria and reporting requirements. No financial obligation by the State can be incurred until a contract is fully executed.

REVIEW CRITERIA

Bidder Qualifications

- Applicant has provided an overview that demonstrates their capacity to successfully provide the proposed service(s).
- This overview supports the applicant's ability to successfully administer the proposal set forth in the RFP.
- Applicant has demonstrated prior experience in delivering services similar to those described in the RFP.
- Applicant has complied with all technical aspects of the RFP, including providing clear and complete responses to all questions.

Cultural Competency

- The Board of Directors reflects cultural diversity.
- The Applicant's program design articulates a cogent plan that effectively incorporates the cultural, ethnic, gender and linguistic needs of the youth for whom this evaluation impacts.
- The Applicant has described an effective and appropriate internal quality improvement process that they will utilize to evaluate the cultural competence of all elements their program design and their staff.

Program Specific

- The Applicant has identified specific details for how they will provide each element of the requirements iterated in the RFP and that these plans support the successful provision of the identified service(s).
- The Applicant has identified the credentials that they will require for the staff who will be key to implementing the program. Those credentials demonstrate that the staff have the requisite education, experience and skills needed to successfully fulfill their identified duties related to the services outlined in the RFP.
- The Applicant has outlined a reasonable time-line for the implementation of each step of the RFP objectives.

- Applicant has provided detail regarding potential effective vehicles to measure model efficacy, as well as potential sound model alternatives.

Staffing and Staff Development

- The Applicant has provided appropriate and effective plans to recruit for the required staff positions.
- The Applicant has set forth mechanisms to successfully hire and retain culturally, racially and linguistically diverse staff.
- The Applicant has provided the administrative and supervisory structure that will provide oversight to the staff members. The proposed structure will ensure that the staff and the project are effectively and well managed.

Data Development and Quality Assurance

- The Applicant has demonstrated that they have the experience and expertise to address the data management requirements outlined in the RFP.
- Applicant has provided detail on prospective data elements, how data will be collected and maintained, and how aggregate data will be analyzed. What the Applicant has set forth is congruent with the needs of the evaluation. Data will be collected and maintained in a manner that comports with HIPAA and other privacy and confidentiality requirements. Also, the Applicant's plan will support the timely receipt of quality, pertinent data, and meaningful and broadly accessible reports
- The Applicant has outlined an effective quality assurance procedure to ensure that the data is collected, analyzed, monitored, and reported upon etc. in a timely fashion.

SUBCONTRACT OR PROFILE

(COMPLETE FOR EACH SUBCONTRACTOR)

Legal Name of Agency:	
Agency Contact Person:	
Title:	
Address:	
Phone:	Fax:
Email:	
Amount of Subcontract:	
BRIEF DESCRIPTION OF SERVICES PROVIDED BY THE AGENCY	
DESCRIPTION OF SERVICES TO BE PROVIDED RELATED TO THE SERVICE/PROGRAM	

COVER SHEET

Reconnecting Families Program

Request for Proposals

Name of Agency:

Address

Application Contact
Person:

Contact Person Phone &
Fax:

Contact Person Email
Address:

**LETTER OF INTENT
(NON-BINDING)**

Date: _____

This is to advise you that our agency is planning to apply for funding in response to the RFP entitled Reconnecting Families Program:

AGENCY NAME:
AGENCY ADDRESS:
AGENCY CONTACT:
POSITION/TITLE:
TELEPHONE NUMBER:
FAX NUMBER:
EMAIL ADDRESS:

Letter of Intent must be received by September 14, 2007 at 3:00 p.m., by the following person:

Kimberly Nilson
Department of Children and Families
505 Hudson Street
Hartford, CT 06106
Fax: 860.723.7236
E-mail: Kimberly.Nilson@ct.gov

GENERAL PROPOSAL NOTICES AND REQUIREMENTS

A. Evaluation and Selection

It is the intent of the Department to conduct a comprehensive, fair and impartial evaluation of proposals received in response to this procurement. Only proposals found to be responsive to the RFP will be evaluated and scored. A responsive proposal must comply with all instructions listed in this RFP. Responsive proposals shall remain valid for possible award by the Department for a period of up to 12 months after the RFP's closing date.

B. Contract Execution

The pursuant contract developed as a result of this RFP is subject to Department contracting procedures, which includes approval by the Office of the Attorney General. Please note that contracts are executory and that no financial commitments can be made until, and unless, the contracts are approved by the Attorney General.

C. Applicant Debriefing

The Department will notify all applicants of any award issued by it as a result of this RFP. Unsuccessful applicants may, within thirty (30) days of the signing of the resultant contract, request a meeting for debriefing and discussion of their proposal by contacting the DCF Contact Person. Debriefing will not include any comparisons of unsuccessful proposals with other proposals.

D. Conditions

Any prospective applicants must be willing to adhere to the following conditions and must positively state them in the proposals:

- 1) **Conformance with Statutes:** Any contract awarded as a result of this RFP must be in full conformance with statutory requirements of State of Connecticut and the Federal Government.
- 2) **Ownership of Subsequent Products:** Any product, whether acceptable or unacceptable, developed under a contract awarded, as a result of this RFP is to be sole property of the Department unless stated otherwise in the RFP or contract.
- 3) **Timing Sequence:** Timing and sequence of events resulting from this RFP will ultimately be determined by the Department.
- 4) **Oral Agreement:** Any alleged oral agreement or arrangement made by an applicant with any agency or employee will be superseded by a written agreement.
- 5) **Amending or Canceling Requests:** The Department reserves the right to amend or cancel this RFP, prior to the due date and time, if it is in the best interest of the Department and the State.
- 6) **Rejection for Default or Misrepresentation:** The Department reserves the right to reject the proposal of any applicant in default of any prior contract or for misrepresentation.
- 7) **Department's Clerical Errors in Award:** The Department reserves the right to correct inaccurate awards resulting from its clerical errors.
- 8) **Rejection of Qualified Proposals:** Proposals are subject to rejection in whole or in part if they limit or modify any of the terms and conditions and/or specifications of the RFP.
- 9) **Applicant Presentation of Supporting Evidence:** An applicant, if requested, must be prepared to present evidence of experience, ability, service facilities, and financial standing necessary to satisfactorily meet the requirements set forth or implied in the proposal.

10) **Changes to Proposal:** No additions or changes to the original proposal will be allowed after submittal. While changes are not permitted, clarification at the request of the agency may be required at the applicant's expense.

11) **Collusion:** By responding, the applicant implicitly states that they are submitting a separate response to the RFP, and is in all respects fair and without collusion or fraud. It is further implied that the applicant did not participate in the RFP development process, had no knowledge of the specific contents of the RFP prior to its issuance, and that no employee of the Department participated directly or indirectly in the applicant's proposal preparation.

E. Proposal Preparation Expense

The State of Connecticut and the Department assume no liability for payment of expenses incurred by applicants in preparing and submitting proposals in response to this solicitation.

F. Incurring Costs

The Department is not liable for any costs incurred by the applicant prior to the effective date of a contract.

G. Freedom of Information

Due regard will be given to the protection of proprietary information contained in all proposals received. However, applicants should be aware that all materials associated with this RFP are subject to the terms of the Freedom of Information Act, the Privacy Act, and all rules, regulations and interpretations resulting there from. It will not be sufficient for applicants to merely state generally that the proposal is proprietary in nature and not therefore subject to release to third parties. Those particular pages or sections, which an applicant believes to be proprietary, must be specifically identified as such. Convincing explanation and rationale sufficient to justify each exception from release consistent with Section 1-210 of the Connecticut General Statutes must accompany the proposal. The rationale and explanation must be stated in terms of the prospective harm to the competitive position of the Applicant that would result if the identified material were to be released and the reasons why the materials are legally exempt from release pursuant to the above-cited statute. In any case, the narrative portion of the proposal may not be exempt from release. Between the applicant and the Department, the final administrative authority to release or exempt any or all material so identified rests with the Department.

H. Gratuities and Gifts

The applicant warrants that no state appropriated funds have been paid or will be paid by or on behalf of the applicant to contract with or retain any company or person, other than bona fide employees working solely for the applicant, to influence or attempt to influence an officer or employee of any state agency in connection with the awarding, extension, continuation, renewal, amendment, or modification of this agreement, or to pay or agree to pay any company or person, other than bona fide employees working solely for the applicant, any fee, commission, percentage, brokerage fee, gift or any other consideration contingent upon or resulting from the award or making of this Agreement.

By submitting a response for selection and/or award consideration to this procurement, the applicant certifies that no elected or appointed official or employee of the State of Connecticut has or will benefit financially or materially from this contract. The Department may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the applicant/contractor or its agents or employees.

In general, no one doing business with or seeking business from a state or quasi-public agency may give a gift to an official or employee of that agency. Connecticut's gift ban is strict, but has some exceptions. For example, under the Ethics Code, you may give: (1) food and drink up to \$50 per person per year, if the person paying, or his or her representative, is in attendance; and (2) tangible gifts up to \$10 per item up to \$50 per person per year. Also exempt are certain items such as informational materials, or plaques costing less than \$100. For a complete list of the Code's gift exceptions, consult Conn. Gen. Stat. § 1-79(e) or contact the Office of State Ethics.

Gifts for "major life events," including a wedding or the birth of a child, which were previously exempt from the gift ban, are now subject to the strict gift limits outlined above if the gifts are provided by any individual or entity doing business with or seeking business from the state.

I. Disclosure of Consulting Agreements

A consulting agreement affidavit must accompany submissions for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Section 51 of Public Act 05-287. All such **submissions** must be accompanied by an affidavit in which the applicant discloses any agreement retaining the services of a consultant to assist in the applicant's participation in the procurement process. For additional information regarding the types of consulting agreements that must be disclosed in the affidavit and the required content and form of the affidavit, please see the attached "Consulting Agreement Affidavit."

J. Campaign Contribution(s)

With regard to a State contract as defined in P.A. 07-1 having a value in a calendar year of \$50,000 or more or a combination or series of such agreements or contracts having a value of \$100,000 or more, the authorized signatory to this submission in response to the State's solicitation expressly acknowledges receipt of the State Elections Enforcement Commission's notice advising prospective state contractors of state campaign contribution and solicitation prohibitions, and will inform its principals of the contents of the notice. [SEEC Form 11]"

K. Bidder's Commission on Human Rights and Opportunities (CHRO) Compliance Package

The Bidder's CHRO Compliance Package sets forth certain obligations on State agencies, as well as contractors doing business with the State of Connecticut to ensure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons. As required by Connecticut General Statute § 4a-60, the following forms, and applicable evidencing material, must accompany bids or proposals:

1. Notification to Bidders Form;
2. Evidence of Nondiscrimination Form and applicable evidencing material; and
3. Employment Information Form.

Administrative Expectations

Please see Exhibit A to view the terms and conditions for DCF funded contractors. Standard State of Connecticut contract requirements are available at the following Office of Policy and Management website:

http://www.opm.state.ct.us/finance/pos_project/contract.htm

SEEC FORM 10 NOTICE TO EXECUTIVE BRANCH STATE CONTRACTORS AND PROSPECTIVE STATE CONTRACTORS OF CAMPAIGN CONTRIBUTION AND SOLICITATION BAN

This notice is provided under the authority of Connecticut General Statutes 9-612(g)(2), as amended by P.A. 07-1, and is for the purpose of informing state contractors and prospective state contractors of the following law (italicized words are defined on page 2):

Campaign Contribution and Solicitation Ban

No state contractor, prospective state contractor, principal of a state contractor or principal of a prospective state contractor, with regard to a state contract or state contract solicitation with or from a state agency in the executive branch or a quasi-public agency or a holder, or principal of a holder of a valid prequalification certificate, shall make a contribution to, or solicit contributions on behalf of (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee. In addition, no holder or principal of a holder of a valid prequalification certificate, shall make a contribution to, or solicit contributions on behalf of (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of State senator or State representative, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee.

Duty to Inform

State contractors and prospective state contractors are required to inform their principals of the above prohibitions, as applicable, and the possible penalties and other consequences of any violation thereof.

Penalties for Violations

Contributions or solicitations of contributions made in violation of the above prohibitions may result in the following civil and criminal penalties:

Civil penalties--\$2000 or twice the amount of the prohibited contribution, whichever is greater, against a principal or a contractor. Any state contractor or prospective state contractor which fails to make reasonable efforts to comply with the provisions requiring notice to its principals of these prohibitions and the possible consequences of their violations may also be subject to civil penalties of \$2000 or twice the amount of the prohibited contributions made by their principals. Criminal penalties— Any knowing and willful violation of the prohibition is a Class D felony, which may subject the violator to imprisonment of not more than 5 years, or \$5000 in fines, or both.

Contract Consequences

Contributions made or solicited in violation of the above prohibitions may result, in the case of a state contractor, in the contract being voided.

Contributions made or solicited in violation of the above prohibitions, in the case of a prospective state contractor, shall result in the contract described in the state contract solicitation not being awarded to the prospective state contractor, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

The state will not award any other state contract to anyone found in violation of the above prohibitions for a period of one year after the election for which such contribution is made or solicited, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

Receipt acknowledged: _____
(signature) (date)

Print name: _____ Title: _____

Company Name: _____

Additional information and the entire text of P.A 07-1 may be found on the website of the State Elections Enforcement Commission, www.ct.gov/seec.
Click on the link to "State Contractor Contribution Ban"

Definitions:

"State contractor" means a person, business entity or nonprofit organization that enters into a state contract. Such person, business entity or nonprofit organization shall be deemed to be a state contractor until December thirty-first of the year in which such contract terminates. "State contractor" does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person's capacity as a state or quasi-public agency employee.

"Prospective state contractor" means a person, business entity or nonprofit organization that (i) submits a response to a state contract solicitation by the state, a state agency or a quasi-public agency, or a proposal in response to a request for proposals by the state, a state agency or a quasi-public agency, until the contract has been entered into, or (ii) holds a valid prequalification certificate issued by the Commissioner of Administrative Services under section 4a-100. "Prospective state contractor" does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person's capacity as a state or quasi-public agency employee.

"Principal of a state contractor or prospective state contractor" means (i) any individual who is a member of the board of directors of, or has an ownership interest of five per cent or more in, a state contractor or prospective state contractor, which is a business entity, except for an individual who is a member of the board of directors of a nonprofit organization, (ii) an individual who is employed by a state contractor or prospective state contractor, which is a business entity, as president, treasurer or executive vice president, (iii) an individual who is the chief executive officer of a state contractor or prospective state contractor, which is not a business entity, or if a state contractor or prospective state contractor has no such officer, then the officer who duly possesses comparable powers and duties, (iv) an officer or an employee of any state contractor or prospective state contractor who has managerial or discretionary responsibilities with respect to a state contract, (v) the spouse or a dependent child who is eighteen years of age or older of an individual described in this subparagraph, or (vi) a political committee established or controlled by an individual described in this subparagraph or the business entity or nonprofit organization that is the state contractor or prospective state contractor.

"State contract" means an agreement or contract with the state or any state agency or any quasi-public agency, let through a procurement process or otherwise, having a value of fifty thousand dollars or more, or a combination or series of such agreements or contracts having a value of one hundred thousand dollars or more in a calendar year, for (i) the rendition of services, (ii) the furnishing of any goods, material, supplies, equipment or any items of any kind, (iii) the construction, alteration or repair of any public building or public work, (iv) the acquisition, sale or lease of any land or building, (v) a licensing arrangement, or (vi) a grant, loan or loan guarantee. "State contract" does not include any agreement or contract with the state, any state agency or any quasi-public agency that is exclusively federally funded, an education loan or a loan to an individual for other than commercial purposes.

"State contract solicitation" means a request by a state agency or quasi-public agency, in whatever form issued, including, but not limited to, an invitation to bid, request for proposals, request for information or request for quotes, inviting bids, quotes or other types of submittals, through a competitive procurement process or another process authorized by law waiving competitive procurement.

"Managerial or discretionary responsibilities with respect to a state contract" means having direct, extensive and substantive responsibilities with respect to the negotiation of the state contract and not peripheral, clerical or ministerial responsibilities.

"Dependent child" means a child residing in an individual's household who may legally be claimed as a dependent on the federal income tax of such individual.

"Solicit" means (A) requesting that a contribution be made, (B) participating in any fund-raising activities for a candidate committee, exploratory committee, political committee or party committee, including, but not limited to, forwarding tickets to potential contributors, receiving contributions for transmission to any such committee or bundling contributions, (C) serving as chairperson, treasurer or deputy treasurer of any such committee, or (D) establishing a political committee for the sole purpose of soliciting or receiving contributions for any committee. Solicit does not include: (i) making a contribution that is otherwise permitted by Chapter 155 of the Connecticut General Statutes; (ii) informing any person of a position taken by a candidate for public office or a public official, (iii) notifying the person of any activities of, or contact information for, any candidate for public office; or (IV) serving as a member in any party committee or as an officer of such committee that is not otherwise prohibited in this section.

SEEC FORM 11

NOTICE TO EXECUTIVE BRANCH STATE CONTRACTORS AND PROSPECTIVE STATE CONTRACTORS OF CAMPAIGN CONTRIBUTION AND SOLICITATION BAN

This notice is provided under the authority of Connecticut General Statutes 9-612(g)(2), as amended by P.A. 07-1, and is for the purpose of informing state contractors and prospective state contractors of the following law (italicized words are defined below):

Campaign Contribution and Solicitation Ban

No state contractor, prospective state contractor, principal of a state contractor or principal of a prospective state contractor, with regard to a *state contract* or *state contract solicitation* with or from a state agency in the executive branch or a quasi-public agency or a holder, or principal of a holder of a valid prequalification certificate, shall make a contribution to, or *solicit* contributions on behalf of (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee;

In addition, no holder or principal of a holder of a valid prequalification certificate, shall make a contribution to, or solicit contributions on behalf of (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of State senator or State representative, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee.

Duty to Inform

State contractors and prospective state contractors are required to inform their principals of the above prohibitions, as applicable, and the possible penalties and other consequences of any violation thereof.

Penalties for Violations

Contributions or solicitations of contributions made in violation of the above prohibitions may result in the following civil and criminal penalties:

Civil penalties--\$2000 or twice the amount of the prohibited contribution, whichever is greater, against a principal or a contractor. Any state contractor or prospective state contractor which fails to make reasonable efforts to comply with the provisions requiring notice to its principals of these prohibitions and the possible consequences of their violations may also be subject to civil penalties of \$2000 or twice the amount of the prohibited contributions made by their principals.

Criminal penalties—Any knowing and willful violation of the prohibition is a Class D felony, which may subject the violator to imprisonment of not more than 5 years, or \$5000 in fines, or both.

Contract Consequences

Contributions made or solicited in violation of the above prohibitions may result, in the case of a state contractor, in the contract being voided.

Contributions made or solicited in violation of the above prohibitions, in the case of a prospective state contractor, shall result in the contract described in the state contract solicitation not being awarded to the prospective state contractor, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

The State will not award any other state contract to anyone found in violation of the above prohibitions for a period of one year after the election for which such contribution is made or solicited, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

Additional information and the entire text of P.A. 07-1 may be found on the website of the State Elections Enforcement Commission, www.ct.gov/seec. Click on the link to “State Contractor Contribution Ban.”



**STATE OF CONNECTICUT
CONSULTING AGREEMENT AFFIDAVIT**

Affidavit to accompany a State contract for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b)

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or vendor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. **If the bidder or vendor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1):** Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if the contractor enters into any new consulting agreement(s) during the term of the State contract.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: 1]

I, the undersigned, hereby swear that I am the chief official of the bidder or vendor awarded a contract, as described in Connecticut General Statutes § 4a-81(a), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, **except for the agreement listed below:**

_____		_____
Consultant's Name and Title		Name of Firm (if applicable)
_____	_____	_____
Start Date	End Date	Cost
Description of Services Provided: _____		

Is the consultant a former State employee or former public official? YES NO

If YES: _____

Name of Former State Agency

Termination Date of Employment

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

_____	_____	_____
Printed Name of Bidder or Vendor	Signature of Chief Official or Individual	Date
_____	_____	_____
Federal Employer ID No. (FEIN) or Social Security Number (SSN)	Printed Name (of above)	Awarding State Agency

Sworn and subscribed before me on this _____ day of _____, 200__.

**Commissioner of the Superior Court
or Notary Public**

EXHIBIT A: Contract Provisions

DEPARTMENT OF CHILDREN AND FAMILIES

D. Department Specific Provisions

The provisions listed below apply to all programs set forth in this contract.

- 1. Quality Assurance:** The Contractor shall comply with all pertinent provisions of local, state, and federal laws and regulations applicable to the Contractor's program. The Contractor shall develop, implement and maintain a written quality improvement plan that at minimum includes steps to prevent, identify and/or correct problems that affect the services provided under this contract. The performance of each Contractor shall be reviewed and evaluated periodically by persons designated by the Department of Children and Families. Such reviews and evaluations may be performed by examination of quality improvement plans, documents and reports, by site visits to funded facilities administered by the Contractor, or by a combination of both.
- 2. Notification of Changes in Key Personnel:** Contractor shall immediately notify the Director, Division of Contract Management of the Department in writing whenever the Contractor intends to make or undergo changes in key personnel, i.e., Chief Executive Officer, Chief Fiscal Officer, Medical Director, and program directors of Department funded programs.
- 3. Treatment Planning Conference and Administrative Case Review:** The Contractor will actively participate in the Department Treatment Planning Conference (TPC) and Administrative Case Review (ACR) process.
- 4. Financial Penalties for Failure to Participate in Treatment Planning Conference (TPC) or Administrative Case Review (ACR):** The Department may impose a financial penalty on the Contractor if the Contractor, following receipt of DCF notification, fails to participate in the Department's Treatment Planning Conference or Administrative Case Review Process. Participation may include the following activities: submission, prior to the ACR, of a written treatment plan summary; telephonic consultation/participation during the ACR; direct participation at the ACR. Such penalties shall not exceed \$1,000. per occurrence and may, at the discretion of the Department, be withheld from payments to the Contractor. The Contractor will be notified in writing of the Department's intent to impose this fine and may appeal the imposition of the fine. The Contractor must document that notice of the conference date was inadequate to allow participation.
- 5. Federal Fund Requirements:** Any Contractor who receives any federal funds through the Department must comply with the following:

A. This certification and agreement is a material representation of fact, upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction, imposed by 31 U.S.C. Section 1352.

Contractor certifies and agrees that:

- 1.** None of the funds appropriated by any Act may be expended by the recipient of a federal contract, grant, loan, or cooperative agreement to pay any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with any federal action described in paragraph (2) of this subsection.
- 2.** The prohibition in paragraph (1) of this subsection applies with respect to the following federal actions:
 - 1.** The awarding of any federal contract;
 - 2.** The making of any federal grant;
 - 3.** The making of any federal loan;

4. The entering into of any cooperative agreement;

The extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.

Any person who makes an expenditure prohibited by subsection (a) of this section shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such expenditure.

3. Pursuant to P.L. 101-166, Title V, Section 511, 103 Stat 1189 (1989), issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with federal money, all grantees receiving federal funds (including, but not limited to, State and local governments) shall clearly state:

(1) the percentage of the total costs of the program or project which will be financed with federal money, (2) the dollar amount of federal funds for the project or program, and (3) the percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

If federal block grant funding is appropriated to this contract, the Department assumes no liability for payment unless the terms of this contract are in accordance with a legislatively approved block grant plan, as provided by Conn. Gen. Stat. § 4-28b.

6. **Community Mental Health Services Block Grant** The Contractor who receives Community Mental Health Services (CMHS) Block Grant funds shall not expend such funds on the following: (1) inpatient hospital services, (2) cash payments to intended recipients, (3) purchase or improvement of land, purchase, construction or improvement of any building or other facility, purchase of major medical equipment, or (4) satisfaction of any non-Federal funds expenditure requirement, (5) provision of financial assistance to any entity other than a public or non-profit private entity.
7. **Specified Reports:** The Contractor shall report information to the Department using the specific service type, applicable level of care and standard data set as specified by the Department. The Contractor shall report service data in the service taxonomy format(s) as required by the Department.
 - A. The Contractor further agrees to provide any other reports concerning contracted services that the Department may reasonably require. When such other reports are deemed regular (more frequently than on a quarterly basis) and are not explicitly stated above, the Department will notify the Contractor in writing at least thirty (30) days prior to the initial submission date. This notification will minimally include the required data for the report, as well as the required date of submission.
 - B. Required reports will be used for purposes including, but not limited to, determination of the Contractor's compliance with program performance standards, provision of cumulative reports and statistical information pursuant to Conn. Gen. Stat. 17a-55, and such other routine information as may be required by the Department.
8. **Annual Audit:** No later than six months after the close of the Contractor's fiscal year, the Contractor shall provide to the Department a complete annual financial audit acceptable to the Department for all program funds, whether state awarded or not. Such audit shall include audit recommendations. The annual audited financial statements must provide information about income and expenses for each program regardless of funding source, and identify Department funds for each program. The Department reserves the right to receive a copy of any audit for related parties under common control. Where the Contractor's fiscal year end does not coincide with the state fiscal year end (June 30), the annual audited financial statements must include a statement that shows the breakdown of expenditures for each Department-funded program or service type, for the Contractor's fiscal year. This schedule of expenditures by contract year must be filed at the same time as the audit report. Additional audits may be performed by the Department (in accordance with Conn. Gen. Stat. Sec. 4-234) as it deems necessary.

The Contractor shall provide all financial records upon request or within a timeframe acceptable to the Department. Failure to comply may, at the Department's discretion, result in penalties to the Contractor including, but not limited to, reduced funding, delay in payments, and license enforcement action.

9. **Third Party Beneficiary:** This Agreement is not intended to create, nor shall it be deemed to create, any third party beneficiary rights in recipients.
10. **Grievance Procedures:** The Contractor shall develop and maintain a formal grievance procedure, acceptable to the Department, in order to address the complaints of persons requesting or receiving services under this contract.
11. **Cultural Competence**
 - A. The Contractor shall administer, manage and deliver a culturally responsive and competent program. This shall, at a minimum, be evidenced by equity and parity in access to services, consumer satisfaction, and outcomes for clients served, regardless of race, ethnicity, language, religion, gender, sexual orientation, economic status and/or disability. Policies, practices and quality improvement activities shall be informed by the needs and demographics of the community served or to be served by the program. The Contractor shall include access, consumer satisfaction and outcomes as elements of its program review and monitoring.
 - B. The Contractor shall recruit, hire and retain a professional and paraprofessional staff that is culturally and linguistically diverse. The Contractor may be required to participate in individual and/or group technical assistance from DCF's Office of Multicultural Affairs and/or Office of Affirmative Action to promote and support diversity of its staff. Staff development to support cross-cultural competency shall occur both pre- and in-service. Furthermore, as a means to facilitate culturally competent service delivery, issues of diversity and multiculturalism shall be included in treatment/service planning, discharge planning, case reviews, grand rounds, analysis and review of program data, and staff supervision.
12. **Board Composition:** The Contractor agrees to ensure that the Board of Directors shall include community, family, and professional participation and, whenever possible, the participation of people who use the services of the organization. The Contractor further commits to maintaining or creating through its appointments a Board of Director whose composition will reflect the racial and ethnic background of the children and families to be served by this contract. The Contractor shall provide the Department with a list of current Board Members, indicating gender, race, ethnicity, town of residence, role and title on the board and the term expiration date of each member.
13. **Licensing Compliance:** As applicable, the Contractor will ensure that the Contractor and their subcontractors(s) are licensed by the Department of Children and Families and are not subject to licensing restrictions.
14. **Program Closure and Transition:** In the event the Contractor closes, reduces services or relocates any program funded under this contract, or if for any reason, the fiduciary responsibility of the Contractor changes, or if the Department does not offer funding for the subsequent fiscal year, the Department and the Contractor shall negotiate and resolve the following issues: the time lines for closure of the program, closure of admissions and the transfer or discharge of clients remaining in the program at the time of closure; the amount of any final payments due the Contractor or refunds due the Department; the transfer or storage of all program records pursuant to the requirements of the Federal Confidentiality Regulations, 42 CFR Part 2; the disposition of property and equipment in which the Department has a financial interest pursuant to the requirements of Regulations of Connecticut State Agencies, including Bond Fund Award liens and obligations; notification to clients of the closure, their options for transfer to other programs and the Contractor's obligations to facilitate such transfer; and such other issues as are

pertinent to the specific situation.

15. Pre-Employment Screening: All candidates for employment, including volunteers and interns, shall be screened for criminal record history, protective services history and shall have a recent physical examination including tuberculosis screening. The results of these screenings shall be filed confidentially in the individual's personnel record. The procedures pertaining to a criminal history and child protection history are as follows:

A. The Contractor shall:

1. Screen all potential hires, volunteers and or interns by obtaining verified criminal records and children's protective history background checks for any convictions of child abuse or neglect substantiations, which shall be filed confidentially in the individual's personnel record.
2. Conduct such protective services checks of employees every two (2) years.
3. Have written criteria approved by DCF for the hiring and or maintaining the employment of individuals with prior criminal record and/or protective service histories.

B. The Contractor shall not knowingly hire, utilize, or continue to employ or utilize an employee, intern or volunteer who, within five (5) years of the date of the employment application:

1. Has been convicted of the possession, use, or sale of controlled substances unless both the Contractor and the Department determine that he/she has been successfully rehabilitated;
2. Has had a minor removed from their care because of child abuse or neglect.

C. The Contractor shall not hire, utilize, or continue to employ or utilize an employee, intern or volunteer who:

1. Has been convicted of an assault or crime against a person or similar offense;
2. Has been convicted of risk of injury to a minor or similar offense;
3. Has been convicted of impairing the morals of a child or similar offense;
4. Has had a substantiation of physical or sexual abuse;

D. If any employee, intern or volunteer has been arrested for any of the crimes articulated in Section B or C, or has had a substantiation of physical or sexual abuse that is the subject of a pending substantiation hearing, or is the subject of pending investigation alleging physical or sexual abuse, the Contractor shall remove that person from direct service responsibility pending the outcome of the investigation.

16. Pre-Service Training: The Contractor agrees to provide the following training to all direct service employees prior to providing autonomous direct service to children and youth served through this contract:

- Blood born pathogens (universal precautions)
- CPR
- Effective communication and limit setting
- Crisis management/Behavioral interventions
- Mandated reporting
- Medication Administration

- 17. Approval for Programmatic Changes:** The Contractor must request and receive written approval from the Bureau of the Department that oversees the contracted service prior to implementing changes in the program model, target population or program capacity. Such changes may also require a contract amendment be executed prior to implementation.
- 18. Notifications:** The Contractor agrees to develop and institute written protocols to assure the timely notification of police, emergency medical services, family members, DCF, Hotline staff, and other community providers as appropriate in the event of an emergency, injury, significant event or critical incident.
- 19. Emergency Safety Interventions (ESI):** The Contractor agrees to develop and institute policy, consistent with state and federal requirements, regarding the utilization of emergency safety interventions. The following core elements will be addressed:
- Vision statement
 - Therapeutic philosophy
 - Integration of ESI within the therapeutic milieu
 - Training curriculum to be utilized
 - Training including competency review
 - Authorization to institute an emergency safety intervention
 - Impact of medical condition; safety assessment
 - Post-intervention process/debriefing
 - Notification
 - Internal quality improvement process

Consistent with Public Act No. 99-210, the Contractor will record each instance of the use of physical restraint or seclusion and the nature of the emergency that necessitated its use. This information will be provided to the Department on a monthly basis.

- 20. Investigations:** The Contractor agrees to cooperate fully with any protective services investigation involving children, youth or staff members. The Contractor will develop and implement policy addressing administrative leave procedures for staff identified in a protective services or criminal investigation.
- 21. Access to Premises:** The Commissioner or designee shall have access to the premises and all documents and records related to the services identified in the contract, at any reasonable time as deemed necessary. In addition, the Commissioner or designee shall be permitted to review the records of and speak to any child or youth receiving the services identified in this contract. In cases of suspected abuse or neglect or emergency conditions affecting the health, safety or well being of any child or youth, the Department shall have unrestricted access at any time. Facility inspectors operating within the scope of their licensing functions shall have unrestricted access at any time.
- 22. Court Appearances:** The Contractor agrees to make available appropriate personnel to appear in court for the purpose of testifying to facts surrounding a client or provider's involvement in services covered by this contract. When necessary, the Contractor will provide a written summary in preparation for a juvenile court hearing.
- 23. Community Collaboratives and Managed Service System:** The Contractor agrees to full and active participation in the Local System of Care/Community Collaborative(s) and Managed Service System(s) operating within the geographic area for this service. If this Contractor provides services in a geographic area with multiple Community Collaboratives and Managed Service Systems, the Contractor will at minimum assure that all Collaboratives and Managed Service Systems within their catchment area are

fully aware of this Contractor's status as a part of the network of available services. When requested by the family and Care Coordinator, the Contractor will participate on the Child Specific Teams for children involved in their programs.

24. **Connecticut Behavioral Health Partnership:** The Contractor agrees to comply with procedures instituted by the Connecticut Behavioral Health Partnership for authorization and registration of client services.
25. **Sovereign Immunity.** The Parties acknowledge and agree that nothing in this Agreement shall be construed as a modification, compromise or waiver by the State of any rights or defenses of sovereign immunity, which it may have had, now has or will have with respect to all matters arising out of this Agreement. To the extent that this provision conflicts with any other provision, this provision shall govern.

SECTION E: The following section pertains only to service components funded under this contract through state financial assistance which are not designated as Fee for Service components as defined in Section F:

1. Contracted funds may not be expended prior to the starting date of the contract or beyond the ending date of the contract. The Contractor agrees to follow the State of Connecticut Office of Policy and Management Cost Standards in the preparation of all budgets and reports to the Department. Department grant funding may only be spent on items that are allowable under the standards; however, an item that is allowable based on the standards may be disallowed in the initial or revised budgets or reports if it is deemed not appropriate for the program to which it is assigned.

2. Fiscal Reports:

A. Interim Fiscal Report: The Contractor shall annually submit an interim fiscal report no later than March 31 for contracts written on a state fiscal year and on June 30 for contracts written on a federal fiscal year. The interim fiscal report shall be in the form prescribed by the Department, shall be prepared on an accrual basis and shall report the actual income and expenditures for each funded program for the period July 1 through February 28 (or February 29 during leap year) for contracts written on a state fiscal year. For contracts written on a federal fiscal year, the reporting period is October 1 through May 31. Such reports shall identify staff by name and position.

If so required by Paragraph 5 C below, the Contractor shall submit to the Department budget revision requests for variances identified through the interim fiscal report no later than March 31 for contracts written on a state fiscal year and no later than June 30 for contracts written on a federal fiscal year. The Contractor shall comply with Department requirements as to the form and content of these submissions.

B. Annual Financial Report: The Contractor shall submit an annual financial report no later than September 30 for contracts written on a state fiscal year and no later than December 31 for contracts written on a federal fiscal year. The annual financial report shall be in the form prescribed by the Department and shall report the actual income and expenditures for each Department-funded program for the period July 1 through June 30 for contracts written on a state fiscal year and for the period October 1 through September 30 for contracts written on a federal fiscal year. The annual financial report shall agree with the Contractor's internal financial records and the Schedule of Expenditures included in the Single Audit submission or to the annual audited financial statements, as applicable.

If so required by Section E., Paragraph 5 C. below, the Contractor shall submit to the Department final year end budget revision requests for the period March 1 through June 30 no later than September 30. The Contractor shall comply with Department requirements as to the form and content of these submissions.

3. **Sub-contracts.** The Contractor shall submit for approval any and all subcontract agreements with each

budget submission for all DCF programs.

4. Payments

- A. The amount of this contract, \$_____, represents the maximum amount payable by the Department to the Contractor for providing the services described in Scope of Service documents of this contract. The Contractor agrees to abide by the attached consolidated budget, unless otherwise granted written permission for variance as allowed by the terms of this contract.
- B. Initial Payment. An initial contract payment of state funds representing three months in the amount of one-fourth (1/4) of the total annual state funded contract amount will be authorized by the Department after the start of the state fiscal year contingent upon the availability of funding to the Department and contingent upon the full execution of this agreement.

An initial contract payment of federal funds representing three months in the amount of one-fourth (1/4) of the total annual federal funded contract amount will be authorized by the Department after the start of the state fiscal year contingent upon the full execution of this contract and receipt of federal monies by the Department in compliance with the federal Cash Management Improvement Act (CMIA), 31 U.S.C. § 6501 et. Seq. of (1990).

- C. Subsequent payments: In the second and third quarters of the state fiscal year, payments, each representing three months in the amount of one-fourth (1/4) of the total contract amount, will be authorized by the Department contingent upon the availability of funding. Either of these payments may, at the Department's discretion, be withheld in whole or in part pending receipt of the Annual Financial Report.
- D. Final Payment. The final payment representing three months in the amount of one-fourth (1/4) of the total contract amount will be made following receipt and review of the Interim Fiscal Report and contingent upon funds availability. This payment may, at the Department's discretion, be withheld in whole or in part pending receipt of the Interim Financial Report.
- E. When the Department's review of the Contractor's financial reports or on-site examination of the Contractor's financial records indicates that under expenditure or under utilization of contract funds are likely to occur by the end of the state fiscal year, the Department may alter the payment schedule for the balance of the fiscal year upon thirty (30) days' written notification to the Contractor. Payment adjustments may be made for the following:
 - 1. utilization;
 - 2. receipt and approval of required reports within the time frames established by the Department;
 - 3. actual expenditures reflecting a reduction in projected total annual expenditures; or
 - 4. offset of any unallowable expenditures or unexpended funds owed from a prior award or a previously terminated contract.

5. Annual Budget Variance:

- A. The Contractor shall adhere to the approved budget allocated to each service component, included as part of this agreement. In the event that the Contractor and/or subcontractors receive(s) additional funding equal to or greater than 10% of the value of this contract from any source other than those indicated in this contract, the Contractor shall notify the Department of such funding and its use within ten (10) business days after receiving notice of such funding.
- B. The following annual variances from the approved budget are allowable without prior Department approval:
 - 1. Line item expenses within Department-funded program cost centers up to 5% of each line item or \$5,000, whichever is greater;

2. Individual salary variances within Department-funded program cost centers up to 10% or \$3,500, whichever is greater.

These variances may be added or subtracted from the approved budgeted amounts and included in the budgeted amount columns of the Interim and Year-End reports.

- C. The Contractor may request approval from the Department to exceed the above-stated limits for variances, provided that request is submitted on the appropriate Budget Revision forms, with the eight month financial report for requests concerning the first eight months of the budget period and with the year end report for requests concerning the last four months of the budget period.
- D. Variances that exceed the allowable limits specified herein and that do not have a Department-approved budget revision will be treated as disallowed expenses and may, at the Department's discretion, be required to be returned to the Department.
- E. The Contractor may assign unused funds received in the fiscal year for one program to another program when both programs are funded from the same State Special Identification Number (SID) in the same fiscal year. The Contractor must submit a budget revision for each program to effect this change.

6. Unexpended Funds:

- A. Whenever the Department determines from its review of the Contractor's audited annual financial statements and program operations that the total paid under this contract, together with applicable program income from other sources, exceeds the total allowable expenses of the program, such excess income shall be deemed by the Department to be unexpended funds. If the Contractor is not required to submit audited annual financial statements, the Department may utilize the final annual financial report to determine the existence and amount of unexpended funds.
- B. Unexpended funds shall be identified by and returned to the Department in the following manner: Funds paid to the Contractor shall be identified by the Department's "Special Identification Number" (SID). The payments made by the Department shall be compared to the expenses reported by the Contractor, by SID as noted on the "Schedule of Expenditures of Financial Assistance" and/or "Schedule of Expenditures of Federal Financial Assistance" or other similar schedule(s) as required by the Federal and State Single Audit acts. If the Contractor is not required to file Single Audit Reports, the Department may utilize the Contractor's final Annual Financial Report to determine any unexpended funds. If payments made by the Department exceed the expenses reported, the Department may recoup such payments by (a) offsetting a future contract payment by the amount of the unexpended funds calculated by the Department or (b) requesting payment from the Contractor by check or other means as determined by the Department. If requested to return unexpended funds by check, the Contractor shall return to the Department the amount of unexpended funds subject to recoupment not later than thirty (30) days after receipt of written notice from the Department that such amount is due. The Department may recoup from future contract payments an amount equal to any such unexpended funds subject to recoupment that remain unpaid more than sixty (60) days after receipt of said written notice. The Department may, at its discretion, implement a repayment or recoupment plan that spreads out the repayment or recoupment over a timeframe mutually agreeable to the Contractor and the Department.
- C. The Contractor may request permission from the Department to carry forward unexpended federal funds from one fiscal year to a subsequent fiscal year provided that such request: (1) is made to the Department in writing; (2) specifies the amount of unexpended federal funds requested and identifies the fiscal year from which and to which the Contractor is seeking permission to carry forward; (3) includes an opinion letter from an independent Certified Public Accountant acknowledging the reasonableness of the requested amount; (4) clearly explains why the Contractor

has not fully expended payments made by the Department under this contract; (5) details the purposes for which the Contractor proposes to use the requested unexpended federal funds; and (6) is accompanied by written documentation that the request to carry forward such funds is authorized by the Contractor's governing authority. Carry forward requests for Federal funds must be received by the Department no later than September 1. Upon determination by the Department that the Contractor has performed in accordance with the terms and conditions of the contract, and that the amount and proposed use of the unexpended funds for which a carry forward is being requested are appropriate, the Department may approve a request to carry forward unexpended federal funds and will notify the Contractor in writing of such approval. Unexpended federal funds thus approved for carry forward shall not be subject to section A of this provision provided that the Contractor expends such funds by the end of the fiscal year immediately following the fiscal year in which the unexpended federal funds were originally accrued.

Contractor shall not use unexpended federal funds approved for carry forward for any purpose other than the one for which the Department has granted specific prior written approval.

- D. If the Department is the only source of public grant funding for a program and that program generates additional revenue above the amount of approved allowable expenses, the Contractor may exhaust the Department's funding first before spending the other program revenue. At the end of the fiscal year, the Contractor may retain any surplus funds remaining after all the Department's funding has been expended in the program. If total program expenses are less than the Department's funding received for that program, the Contractor must return the difference between the expenses and the Department's funding to the Department unless approval has been received under 6C...
- E. The Contractor may request that a portion of unrestricted operating income which is in excess of funds paid under this contract be designated for a special or future use within the next fiscal year provided that such request: (1) is made to the Department in writing in advance of such use; (2) specifies the amount being requested and substantiates that said portion is not required to meet current operating expenses; (3) is accompanied by written documentation that the request for such designation is authorized by the Contractor's governing authority; and (4) details the purposes for which the Contractor proposes to use the requested amount. At the sole discretion of, and only upon specific prior written approval from, the Department, funds so designated shall not be deemed unexpended funds and shall not be subject to section A of this provision. In such case, the Contractor must submit a reconciliation of unexpended funds to show the approved exception. This reconciliation must be submitted with the Contractor's Single Audit or annual audited financial statements, as applicable.
- F. Absent specific prior written approval from the Department under paragraph(s) 6C, 6D. or 6E. of this provision, the Contractor shall not expend, transfer or otherwise use funds deemed by the Department to be unexpended funds and all such funds shall be subject to paragraph 6B of this provision.

7. Capital Expenditures: Contractor shall not use funds allotted by the Department under this contract for capital expenditures. This restriction shall not be interpreted to prevent routine maintenance, but no such funds shall be used for construction or renovation of buildings.

8. Equipment: Equipment is defined as machinery, tools, furniture, vehicles, and other personal property with a normal useful life of more than one year and a value of \$5,000 or more. Equipment to be purchased for the program with Department funds must be identified. The following provisions apply to equipment purchases made in full or in part with Department funds:

- A. Contractor shall obtain the prior approval of the Department either through the contract application budget or a budget revision. Each piece of equipment to be purchased and its costs must be clearly itemized.
- B. Contractor shall obtain three (3) competitive bids with the purchase to be made from the lowest qualified bidder.
- C. Contractor shall maintain an inventory of all equipment purchased with Department funds, using a form and format acceptable to the Department.
- D. As part of its annual audit statement, Contractor shall submit verification by the auditor of the continued possession of all equipment purchased with Department funds.
- E. Any item of equipment purchased with Department funds shall not be discarded or sold or removed from the inventory without the prior written approval of the Department.
- F. If Department funding to the Contractor is terminated or not renewed, the Department will determine the manner of the disposition of all equipment purchased in full or in part with Department funds by: (1) permitting the Contractor to retain and use the property; (2) allowing the Contractor to sell the equipment and return the proceeds to the Department, minus an agreed upon amount to compensate for the costs of selling the property; or (3) returning the equipment to the Department.

SECTION F: The following section pertains only to service components funded under this contract on a fee for service or per diem basis

- 1. Reporting Requirements:** The Contractor shall supply all applicable reports required by the Department.
- 2. Fiscal Reports:** Residential providers shall submit Single Cost reports in accordance with the regulations of Connecticut state agencies Section 17a-17-1 through 17a-17-16.
- 3. Payments:** The Department agrees to pay the Contractor according to the terms of compensation and payment stated in the Scope of Service documents of this contract. The Department may, at its discretion, withhold payments pending receipt and approval of required reports within the time frames established by the Department or to offset of any unallowable expenditures or unexpended funds owed from a prior award or a previously terminated contract.