

State of Hawaii  
Department of Human Services  
Social Services Division

**Request for Proposals (RFP)**

**SSD-16-POS-3015**

**VOLUNTARY CASE MANAGEMENT  
SERVICES**

**HAWAII, KAUAI, MAUI, and OAHU**

**RFP Posting Date: October 5, 2016**

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

**NOTE:** *It is the Applicant's responsibility to access the Public Procurement Notices for Solicitations for Health and Human Services on the State Procurement Office website or to contact the RFP Contact Person identified in this RFP regarding any subsequently issued addenda for this RFP. The State shall not be responsible for an incomplete proposal submitted as a result of the Applicant's not knowing about issued addenda, including additionally requested information or attachments, regarding this RFP.*

DAVID Y. IGE  
GOVERNOR



RACHAEL WONG, DrPH  
DIRECTOR

PANKAJ BHANOT  
DEPUTY DIRECTOR

STATE OF HAWAII  
**DEPARTMENT OF HUMAN SERVICES**  
810 Richards Street, Suite 400  
Honolulu, Hawaii 96813

MEMORANDUM

TO: RFP Proposal Applicants

FROM: Mona Maehara, Division Administrator  
Social Services Division

SUBJECT: DEPARTMENT OF HUMAN SERVICES (DHS)  
SOCIAL SERVICES DIVISION (SSD)  
REQUEST FOR PROPOSALS (RFP)

The State of Hawaii, Department of Human Services, Social Services Division, is currently soliciting proposals from qualified Applicants to provide Voluntary Case Management Services. The attached Request for Proposals (RFP) SSD-16-POS-3015 to provide this service is being issued under Hawaii Administrative Rules (HAR) and Hawaii Revised Statutes (HRS) Chapter 103F. Please see the following "Proposal Submission Information Sheet" for important proposal submission information.

An RFP Orientation will be held on October 13, 2016, 10:00 a.m. to 12:30 p.m. Hawaii Standard Time (HST). See 1.7 Orientation, Section 1 of this RFP for further information. All prospective Applicants are encouraged to attend the Orientation. For further information about the Orientation, to participate by phone via teleconference, or for special accommodations, please contact Ms. Christine Gamboa, POS Specialist/RFP Contact Person, at (808) 586-5687 or at [cgamboa@dhs.hawaii.gov](mailto:cgamboa@dhs.hawaii.gov).

For questions regarding this RFP see 1.8 Submission of Questions, Section 1 of this RFP for information on the question and answer process.

Thank you for your interest. The DHS looks forward to receiving and reviewing your proposals.

**PROPOSAL SUBMISSION INFORMATION SHEET**  
**PROPOSAL SUBMISSION DEADLINE:**  
**November 7, 2016, 4:30 P.M., HAWAII STANDARD TIME.**

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

**THE APPLICANT IS REQUIRED TO SUBMIT:**

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

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

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

1. All electronic copies submitted via email shall include in the email the RFP number, the Applicant's name, and the proposal submission attachments. All attachments shall be identified with the RFP number as abbreviated in the following example, the Applicant's initials (e.g., Humanity Community Services - HCS), and the attachment's content: 16-3020.HCS.narrative or 16-3020.HCS.budget.
2. The Applicant shall submit:
  - a. The complete proposal in PDF format; this may be separated into two or three sections for ease of sending if one PDF is too large provided that each section is labeled (e.g., 16-3020.HCS.#1, 16-3020.HCS.#2).
  - b. Either the complete proposal in Word/Excel format, as applicable (and separated as described in a. above, as needed), **or all** of the following documents from the proposal in Word/Excel format, as applicable: Narrative, Performance Measurement Forms, Organization and Program Charts, Job Descriptions (no resumes), Budget forms (including Administrative Budget), and Work Plan (if required).

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

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

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

**DHS OFFICE ADDRESS:**

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

**EMAIL ADDRESS:**

**ssdposmailbox@dhs.hawaii.gov**

**RFP CONTACT PERSON:**

Ms. Christine Gamboa, POS Specialist  
Phone: (808) 586-5706  
Email: cgamboa@dhs.hawaii.gov

**PLEASE BE ADVISED:**

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

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# **Section 1**

## **Administrative Overview**

## Section 1 Administrative Overview

The Applicant is highly encouraged to **read each section of the RFP thoroughly**. While sections such as the Administrative Overview may appear similar among RFPs, State purchasing agencies may add or delete information, as applicable. It is the responsibility of the Applicant to understand the requirements of this specific RFP.

### 1.1 Procurement Timetable

Note: The Procurement Timetable represents the State's best estimated schedule. If an activity is delayed, subsequent activities may be delayed by the same number of days.

<u>Activity</u>	<u>Scheduled Date</u>
<b>Public notice announcing Request for Proposals (RFP)</b>	<b>10/5/2016</b>
Distribution of RFP	10/5/2016
<b>RFP Orientation</b>	<b>10/13/2016 10:00 a.m. - 12:30 p.m. HST</b>
Applicants' submission of written questions for written responses deadline	10/17/2016 4:30 p.m.
State purchasing agency's response to Applicants' written questions deadline	10/19/2016
Discussions with Applicants prior to proposal submission (optional)	As needed
<b>Proposal submission deadline</b>	<b>11/7/2016 4:30 p.m. HST</b>
Discussions with Applicants after proposal submission (optional)	As needed
Final revised proposals deadline (optional)	As needed
Proposal evaluation period	11/16/2016 - 11/22/2016
Provider selection	11/22/2016
<b>Statement of Findings and Decision (Notice of Award)</b>	<b>11/27/2016</b>
<b>Contract start date</b>	<b>1/1/2017</b>

**1.2 Website Reference**

The State Procurement Office (SPO) website is <http://spo.hawaii.gov/>

	For:	Website:
1	Procurement Notices for Solicitations (RFP) website	<a href="http://spo3.hawaii.gov/notices/notices">http://spo3.hawaii.gov/notices/notices</a>
2	Procurement of Health and Human Services	<a href="http://hawaii.gov/spo2/health/rfp103f/">http://hawaii.gov/spo2/health/rfp103f/</a>
3	Hawaii Revised Statutes (HRS) and Hawaii Administrative Rules (HAR) for Purchases of Health and Human Services	<a href="http://spo.hawaii.gov/references/">http://spo.hawaii.gov/references/</a>
4	Standard Contract – General Conditions (AG103F13)	<a href="http://hawaii.gov/forms/internal/department-of-the-attorney-general/ag-103f13-1/view">http://hawaii.gov/forms/internal/department-of-the-attorney-general/ag-103f13-1/view</a>
5	Cost Principles	<a href="http://spo.hawaii.gov/for-vendors/vendor-guide/methods-of-procurement/health-human-services/competitive-purchase-of-services-procurement-method/cost-principles-table-hrs-chapter-103f-2/">http://spo.hawaii.gov/for-vendors/vendor-guide/methods-of-procurement/health-human-services/competitive-purchase-of-services-procurement-method/cost-principles-table-hrs-chapter-103f-2/</a>
6	Forms	<a href="http://spo.hawaii.gov/all-forms/">http://spo.hawaii.gov/all-forms/</a>
7	Protest Procedures/Forms	<a href="http://spo.hawaii.gov/for-vendors/vendor-guide/protests-for-health-and-human-services/">http://spo.hawaii.gov/for-vendors/vendor-guide/protests-for-health-and-human-services/</a>

**Non-SPO websites**

Note: Website addresses may change from time to time. If a link is not active, try the State of Hawaii website at <https://portal.ehawaii.gov/>

	For:	Website:
8	Hawaii Compliance Express (HCE)	<a href="https://vendors.ehawaii.gov/hce/splash/welcome.html">https://vendors.ehawaii.gov/hce/splash/welcome.html</a>
9	Department of Taxation	<a href="http://tax.hawaii.gov/">http://tax.hawaii.gov/</a>
10	Department of Commerce and Consumer Affairs, Business Registration	<a href="http://dcca.hawaii.gov/">http://dcca.hawaii.gov/</a> Click on “Business Registration”
11	Wages and Labor Law Compliance, HRS §103-055	<a href="http://www.capitol.hawaii.gov/hrscurrent/Vol02_Ch0046-0115/HRS0103/HRS_0103-0055.htm">http://www.capitol.hawaii.gov/hrscurrent/Vol02_Ch0046-0115/HRS0103/HRS_0103-0055.htm</a>
12	Campaign Spending Commission	<a href="http://ags.hawaii.gov/campaign/">http://ags.hawaii.gov/campaign/</a>
13	Internal Revenue Service	<a href="http://www.irs.gov/">http://www.irs.gov/</a>

**1.3 Authority**

This RFP is issued under the provisions of Hawaii Administrative Rules (HAR) and Hawaii Revised Statutes (HRS) Chapter 103F. The Applicant is charged with presumptive knowledge of all requirements of the cited authorities. Submission of a valid executed proposal by the Applicant shall constitute admission of such knowledge on the part of the Applicant.

## 1.4 RFP Organization

This RFP is organized into five sections:

*Section 1, Administrative Overview:* Provides the Applicant with an overview of the procurement process.

*Section 2, Service Specifications:* Provides the Applicant with a description/details of the tasks to be performed, delineates the Provider's responsibilities, and defines deliverables, as applicable.

*Section 3, Proposal Application Instructions:* Describes the required format and content for the proposal Application.

*Section 4, Proposal Evaluation:* Describes how proposals shall be evaluated by the State purchasing agency.

*Section 5, Attachments:* Provides the Applicant with information and forms necessary to complete the proposal Application.

## 1.5 Contracting Office

The Contracting Office is responsible for overseeing the contracts resulting from this RFP including systems operations, fiscal agent operations, and monitoring and assessing the Provider's performance. The Contracting Office is:

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

## 1.6 RFP Contact Person

From the release of this RFP until the full execution of the contracts for the awarded Providers, any communication regarding this RFP shall be directed to the sole point-of-contact identified below unless otherwise directed:

Ms. Christine Gamboa  
Purchase of Services Unit  
Phone: (808) 586-5706  
Email: [cgamboa@dhs.hawaii.gov](mailto:cgamboa@dhs.hawaii.gov)

## 1.7 Orientation

An RFP Orientation for Applicants regarding this RFP shall be held as follows:

<b>Date:</b>	<b>October 13, 2016</b>	<b>Time:</b>	<b>10:00 a.m. – 12:30 p.m.</b>
Department of Human Services, Benefits, Employment, and Support Services Division (BESSD) Video Conferencing Center (VCC) locations as follows:			
Locations:	Honolulu, Oahu, HI:	Mililani Building,	820 Mililani St., Suite 606
	Hilo, Hawaii, HI:	Kinoole Shopping Center,	1990 Kinoole St.
	Kona, Hawaii, HI:	Kona Center,	75-5722 Hanama Pl., Suite 1105
	Wailuku, Maui, HI:	Waiehu Beach Center,	270 Waiehu Beach Rd., Suite 107
	Lihue, Kauai, HI:	Dynasty Court,	4473 Pahee St., Suite G

The Orientation shall be held live at the Honolulu location listed above and via videoconference at the other locations. To attend the Orientation the Applicant shall contact Ms. Gamboa at (808) 586-5687 or [cgamboa@dhs.hawaii.gov](mailto:cgamboa@dhs.hawaii.gov) as soon as possible and provide their name, agency, telephone number, and email address as well as the number of people planning to attend the meeting.

If the Applicant would like to attend but is unable to participate at one of the video conferencing centers listed above, the Applicant shall contact Ms. Gamboa at (808) 586-5687 or [cgamboa@dhs.hawaii.gov](mailto:cgamboa@dhs.hawaii.gov) at least two days before the Orientation and provide the same information detailed above to participate via teleconference.

## 1.8 Submission of Questions

The Applicant is encouraged to submit written questions to Ms. Gamboa at [cgamboa@dhs.hawaii.gov](mailto:cgamboa@dhs.hawaii.gov) prior to the Orientation. The Applicant shall have the opportunity to ask questions at the Orientation and answers will be provided at the State purchasing agency's discretion. However, answers provided at the Orientation are intended only as general responses and may not fully represent the State purchasing agency's position. To ensure an answer to either a question from the Orientation or a question that develops after the Orientation, the Applicant shall submit the question in writing after the Orientation but no later than the Applicants' submission of written questions deadline. Formal official responses to the Applicants' written questions shall be provided in writing by the State purchasing agency via an addendum to the RFP.

The Applicants' submission of written questions deadline is **October 17, 2016, 4:30 p.m. Hawaii Standard Time.**

The State purchasing agency's response to the Applicants' written questions deadline is **October 19, 2016.**

## **1.9 Submission of Proposals**

### **A. Forms/Formats**

Forms, with the exception of program specific forms, may be found on the SPO website (see 1.2 Website Reference, Section 1 of this RFP). For program specific forms see the Proposal Application Checklist, Section 5 of this RFP.

1. Proposal Application Identification Form (SPOH-200)

This form provides the Applicant's proposal identification.

2. Proposal Application Checklist

This checklist provides the program specific requirements, the reference and location of required forms, and how the proposal components shall be ordered and submitted to the State purchasing agency.

3. Table of Contents

This sample format is meant to be a guide (see Section 5 of this RFP).

4. Proposal Application (SPOH-200A)

This form provides a framework within which the Applicant may submit comprehensive narratives to address the requirements specified in the Proposal Application Instructions, Section 3 of this RFP, including a complete budget. The Applicant may also choose to develop its own framework within which to address the requirements. Whatever framework is used, the Applicant must address all of the requirements in this RFP as specified.

### **B. Program specific requirements**

See Service Specifications, Section 2 and Proposal Application Instructions, Section 3 of this RFP. For required State and/or federal certifications see Proposal Application Checklist, Section 5 of this RFP.

### **C. Multiple and alternate proposals**

Multiple proposals shall be accepted and alternate proposals shall not be accepted (see Service Specifications, Section 2 of this RFP).

**D. Hawaii Compliance Express (HCE)**

All Providers shall comply with all laws governing entities doing business in the State. Providers shall register with HCE for on-line compliance verification from the Hawaii State Department of Taxation (DOTAX), Internal Revenue Service (IRS), Department of Labor and Industrial Relations (DLIR), and Department of Commerce and Consumer Affairs (DCCA). There is an annual registration fee for the service (currently \$12.00). The HCE's on-line "Certificate of Vendor Compliance" provides the registered Provider's current compliance status as of the Certificate's issuance date and is accepted for both contracting and final payment purposes. See 1.2 Website References, Section 1 of this RFP for the HCE website address.

**1. Tax clearance**

Pursuant to HRS §103-53, as a prerequisite to entering into a contract of \$25,000.00 or more the Provider shall be required to have a tax clearance from DOTAX and the IRS. See 1.2 Website References, Section 1 of this RFP for the DOTAX and the IRS website addresses.

**2. Labor law compliance**

Pursuant to HRS §103-55, the Provider shall be in compliance with all applicable laws of the State and federal governments relating to Payment of Wages, Safety, Workers' Compensation, and Unemployment Compensation. See Section 1, 1.2 Website Reference of this RFP for the DLIR website address.

**3. DCCA business registration**

Prior to entering into a contract, the owner of any entity doing business in the State, except the owner of a sole proprietorship, charitable organization, unincorporated association, or foreign insurance company, shall be registered and in good standing with the DCCA, Business Registration Division. Also, a foreign insurance company must register with the DCCA, Insurance Division. See 1.2 Website References, Section 1 of this RFP for the DCCA website address.

**E. Wages law compliance**

By submitting a proposal the Applicant certifies that it is in compliance with HRS §103-55 Wages, Hours, and Working Conditions of Employees

of Contractors Performing Services. See 1.2 Website References, Section 1 of this RFP for the DLIR website address.

**F. Campaign contributions by State and county providers/contractors**

HRS §11-355 prohibits campaign contributions from certain State and county government providers/contractors during the contract term if the providers/contractors are paid with funds appropriated by a legislative body. See 1.2 Website Reference, Section 1 of this RFP for the Campaign Spending Commission website address.

**G. Confidential information**

If the Applicant believes any portion of a proposal contains information that should be withheld as confidential, the Applicant shall request in writing for non-disclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the proposal, be clearly marked, and be readily separable from the proposal to facilitate eventual public inspection of the non-confidential sections of the proposal.

Note: Expenditure/Item costs are not considered confidential and will not be withheld.

**H. Proposal Submission**

**FOR PROPOSAL SUBMISSION INFORMATION REGARDING THIS RFP PLEASE REFER TO THE PROPOSAL SUBMISSION INFORMATION SHEET AT THE BEGINNING OF THIS RFP.**

**1.10 Discussion with the Applicant**

- A. Prior to the proposal submittal deadline:** Discussion may be conducted with an Applicant to promote understanding of the State purchasing agency's requirements.
- B. After the proposal submittal deadline:** Discussion may be conducted with an Applicant whose proposal is determined to be reasonably susceptible of being selected for award, however, a proposal may be accepted without discussion per HAR §3-143-403.

**1.11 Opening of Proposals**

Upon the State purchasing agency's receipt of a printed, USB, and/or CD proposal copy at the designated location (including any modifications to and withdrawals

of a proposal), a verification of receipt shall be date-stamped and, if possible, time-stamped for the Applicant's and the State purchasing agency's records.

Upon the State purchasing agency's receipt of an emailed proposal copy at the designated location, a verification of receipt shall be emailed to the Applicant as soon as possible after receipt on November 7, 2016 for the Applicant's and the State purchasing agency's records.

All received printed, USB, CD and/or emailed proposal copies shall be secured by the State purchasing agency and not examined for evaluation purposes until after the proposal submittal deadline.

Procurement files shall be open to public inspection after a contract has been awarded and fully executed.

### **1.12 Additional Materials and Documentation**

Upon request from the State purchasing agency, the Applicant shall submit any additional documentation/materials reasonably required by the State purchasing agency for its evaluation of the proposal.

### **1.13 RFP Amendments**

The State reserves the right to amend this RFP at any time prior to the final revised proposals deadline.

### **1.14 Final Revised Proposals**

If requested of the Applicant, a final revised proposal shall be submitted in the manner and by the date and time specified by the State purchasing agency. If the final revised proposal is not submitted, the previously submitted proposal shall be the Applicant's final revised proposal. The Applicant shall submit only the section/s of the proposal requiring revision as well as the Proposal Application Identification Form (SPOH-200) (see 1.2 Website Reference, Section 1 of this RFP). After the final revised proposals are received, final evaluations shall be conducted for the contract awards.

### **1.15 Cancellation of Request for Proposal**

This RFP may be canceled and any or all proposals may be rejected, in whole or in part, when it is determined to be in the best interest of the State.

### **1.16 Costs for Proposal Preparation**

Any cost incurred by the Applicant in preparing or submitting a proposal is the Applicant's sole responsibility.

### **1.17 Provider Participation in Planning**

Applicants awarded a contract resulting from this RFP shall be required to participate in the State purchasing agency's future development of a service delivery plan pursuant to HRS §103F-203.

The Providers' participation in the State purchasing agency's efforts to plan for or to purchase Health and Human Services prior to the release of an RFP, including the sharing of information about community needs, best practices, and the Providers' resources, shall not disqualify the Providers from submitting proposals if conducted in accordance with HAR §3-142-202 and §3-142-203.

### **1.18 Rejection of Proposals**

The State reserves the right to consider only those proposals submitted in accordance with all requirements set forth in this RFP, which comply with the service specifications, and which demonstrate an understanding of the problems involved as acceptable. A proposal offering any other set of terms and/or conditions may be rejected without further notice.

A proposal may be automatically rejected for any one or more of the following reasons:

- |           |  |                        |
|-----------|--|------------------------|
| <b>A.</b> | Inadequate response to RFP                 | (HAR §3-143-609)       |
| <b>B.</b> | Late proposal                              | (HAR §3-143-603)       |
| <b>C.</b> | Applicant not responsible                  | (HAR §3-143-610(a)(2)) |
| <b>D.</b> | Proposal not responsive                    | (HAR §3-143-610(a)(1)) |
| <b>E.</b> | Inadequate accounting system               | (HAR §3-141-202)       |
| <b>F.</b> | Failure to cooperate or deal in good faith | (HAR §3-141-201)       |

### **1.19 Notice of Award**

A Statement of Findings and Decision (Notice of Award) shall be provided by mail (USPS) to all responsive and responsible Applicants for the award or non-award of a contract upon completion of the evaluation of all proposals. The Statement shall provide information regarding only the individual Applicant, not all of the Applicants, as well as the name of the Applicant that the contract was awarded to.

Any contract resulting from this RFP is subject to the approval of the State Department of the Attorney General (DAG) as to form and to all further approvals, including the approval of the Director, as required by statute, rule, regulation, order, or other directive.

No work is to be undertaken by a Provider awarded a contract prior to the contract

start date. The State is not liable for any costs incurred prior to the official contract start date.

**1.20 Protests**

Pursuant to HAR Chapter 148 and HRS §103F-501, an Applicant aggrieved by an award of a contract may file a protest. For the Notice of Protest form (SPOH-801) and related forms see 1.2 Website Reference, Section 1 of this RFP. Only the following matters may be protested:

- A. A State purchasing agency’s failure to follow any procedure established by HRS Chapter 103F.
- B. A State purchasing agency’s failure to follow any rule established by HRS Chapter 103F.
- C. A State purchasing agency’s failure to follow any requirement, procedure, or evaluation criterion in the RFP issued by the State purchasing agency.

The Notice of Protest shall be postmarked by the USPS or hand delivered to: 1) the Head of the State purchasing agency (HOPA) conducting the procurement, and 2) the procurement officer conducting the procurement within five (5) working days of the postmark of the Statement of Findings and Decision (Notice of Award) sent to the Applicant protestor. If delivery services other than the USPS are used they shall be considered hand delivery and the Notice of Protest shall be considered submitted on the date received by the State purchasing agency.

<b>Head of State Purchasing Agency and Procurement Officer</b>
Director of the Department of Human Services
Mailing Address: Department of Human Services P.O. Box 339 Honolulu, Hawaii 96809-0339
Business Address: Department of Human Services 1390 Miller Street, Room 209 Honolulu, Hawaii 96813

**1.21 Availability of Funds**

The contract award and any allowed extension thereof is subject to allotments made by the State Director of Finance pursuant to HRS Chapter 37 and subject to the availability of State and/or Federal funds.

**1.22 General and Special Conditions of Contract**

Both General and Special Conditions shall be contractually required (see 1.2 Website Reference, Section 1 and Section 5 of this RFP).

### **1.23 Cost Principles**

To promote uniform purchasing practices among State purchasing agencies procuring Health and Human Services under HRS Chapter 103F, State purchasing agencies shall utilize standard Cost Principles (SPOH-201) (see 1.2 Website Reference, Section 1 of this RFP). The State Cost Principles shall not exempt the Provider from complying with any cost principles under federal law.

**Section 2**  
**Service Specifications**

## Section 2

### Service Specifications

#### 2.1 Introduction

##### A. Overview and purpose

The Department of Human Services (DHS), Child Welfare Services (CWS) is seeking proposals for Provider(s) to provide Voluntary Case Management (VCM) Services to children and their families/caregivers involved in or referred by CWS.

The purpose of Voluntary Case Management Services is to promote the safety, permanency, and well-being of children and families by addressing the range of family system issues that place children at risk of child abuse and neglect or result in child maltreatment. Voluntary Case Management Services include, but are not limited to:

1. Assessment;
2. Service planning;
3. Coordination;
4. Individual/Group skill building; and
5. Monitoring.

VCM Services are part of the DHS' Differential Response System (DRS).

##### B. Planning activities conducted in preparation for this RFP

- \_\_\_\_\_ Information from funders (legislature, federal agencies, private foundations, etc.) on funding terms and conditions.
- \_\_\_\_\_ Information from other state agencies on services to the same target group.
- \_\_\_\_\_ Views of service recipients and community advocacy groups on conditions affecting achievement of desired goals.
- X Views of Provider organizations on how to improve service specifications; a request for information (RFI) process may have been used for this purpose.
- X Information from POS monitoring and other reports for current contracts.
- X Other data (socio-economic and health trends, waiting lists for services, client satisfaction surveys, etc.).

A Request for Information (RFI) was posted on the State Procurement Office (SPO)/Procurement Notices System website on January 29, 2016, and an RFI meeting was held on February 9, 2016 to gather information and assist in the development of this RFP.

Planning information may be obtained from Christine Gamboa, POS Specialist and RFP contact person, by email at [cgamboa@dhs.hawaii.gov](mailto:cgamboa@dhs.hawaii.gov).

### C. Service goals

There are three broad outcome domains in the continuum of child welfare services: safety, permanency, and child and family well-being. Additionally, the principles of family-centered and strengths/needs-based practice are important elements in service provision. Based on these, the guiding principles of CWS Branch are:

1. The safety of children is the paramount concern that must guide all child welfare services. Child safety must be the paramount concern when making service provision, placement, and permanency planning decisions.
2. Reasonable efforts to maintain and reunify families are important except when it is determined that the child's safety in the family cannot be assured. Thus, risk and safety assessment skills are important in maintaining the quality of child welfare services and decision making.
3. Children should be helped to stay with or return to their families, when safety can be assured, through the provision of timely, appropriate, quality, and individualized service activities and supports that build on the strengths of children and families and are responsive to their needs.
4. If children cannot remain safely in their homes, foster care and other temporary placements shall be considered as an extension of family life rather than as an alternative to it. The child's need for attachment and connections shall be addressed through strengthening the family as a resource for the child.
5. Family crises provide opportunities to families to address problems. When timely, appropriate, and high quality services are provided to families in crisis, family members, CWS Branch staff, and Family Court are able to make informed decisions about the biological, foster, or adoptive parents' ability to protect and care for their children.
6. Service activities shall be comprehensive, coordinated, and collaborative and provided in all designated geographic areas under the contract.
7. Service activities shall be competent, culturally appropriate, responsive to the strengths, needs, values, and preferences of the child and the family, and delivered in a manner that is respectful of and builds on the strengths of the family, the community, and cultural ties. Service activities shall address the physical, emotional, educational, and social needs of the child and the family's ability to protect the child. Service activities shall provide clear and attainable goals and objectives for each participant.

8. Service activities shall be individualized, addressing the unique capacities and needs of each child and family.
9. Service activities shall empower families to help themselves and to gain and maintain mastery and control over their ability to protect their children.

Reflecting the CWS Branch guiding principles, the goals of VCM Services are:

1. To prevent child maltreatment among families at risk through the provision of supportive family services.
2. To assure children’s safety within the home and preserve families in which children have been maltreated when the family’s problems can be addressed effectively.

**D. Target population to be served**

1. Families with children who are reported to CWS as being harmed or threatened with harm by a family member and are assessed to have risk issues.
2. Families with children who are reported to CWS for assessment and are determined to be appropriate for VCM Services.

Specifics regarding the target population may be adjusted to meet the needs of the community and to comply with State or federal laws. In that event, the DHS shall notify the Provider in writing about the necessity of the change/s and what the proposed change/s will be. The Provider shall have the opportunity to discuss the change/s prior to implementation.

The estimated number of referrals (intakes/cases) to be served annually per geographic area are as follows. Each intake/case may include one (1) or more families:

1.	East Hawaii	250
2.	West Hawaii	125
3.	Kauai	150
4.	Maui*	375
5.	Oahu	1250

\*This service does not cover Lanai and Molokai. VCM Services is provided to those islands via the Lanai Integrated Services System (LISS) and Molokai Integrated Services System (MISS) contracts.

**E. Geographic coverage of service**

The Provider shall be responsible for the provision of the full range of contracted services throughout the contracted area/s, including service capacity and staffing.

Services shall be provided to the geographic areas listed below:

1. East Hawaii
2. West Hawaii
3. Kauai
4. Maui\*
5. Oahu

**F. Period of availability, probable funding amounts, and sources**

Each contract shall be awarded for an initial term of one (1) year and six (6) months with the possibility of two (2) extensions for two (2) years each thereafter, subject to the availability of State and federal funds, continued identified community need, and the satisfactory performance of services by the Provider as determined by the DHS. The maximum contract term shall not exceed five (5) years and six (6) months, from January 1, 2017 through June 30, 2022.

Total contract funding is anticipated to be \$3,920,000.00 per fiscal year. Total contract funding shall be pro-rated for periods of less than one (1) year.

Total contract funding per geographic area is as follows:

1.	East Hawaii	\$475,000
2.	West Hawaii	\$270,000
3.	Kauai	\$275,000
4.	Maui	\$700,000
5.	Oahu	\$2,200,000

The allocation of funding per contract is based on the total funding amount available for the service and the estimated costs of providing services to the goal numbers of clients to be served in each geographic area (see Performance Measurement Form A, Section 2 of this RFP). The allocation includes compensation for operating costs, including personnel; administrative expenses shall not exceed 15% of the total allocation.

Funding increases and decreases shall also be subject to the availability of State and federal funds, changes in the service specifications (e.g. the target population to be served, the geographic location's needs, utilization increases/decreases, service activities, and service delivery), and satisfactory performance by the Provider as determined by the DHS.

Funding for any given year or for the contract as a whole may increase up to 300% of the original amount without being considered a fundamental change per Hawaii Administrative Rules (HAR) §3-149-303(d).

## 2.2 Contract Monitoring and Evaluation

The criteria by which the performance of the contract shall be monitored and evaluated are:

- A. Quality of Care/Quality of Services
- B. Output Measures
- C. Performance/Outcome Measures

- D. Financial Management**
- E. Administrative/Management Requirements**

## **2.3 General Requirements**

- A. Specific qualifications or requirements including, but not limited to, licensure or accreditation**

The Provider shall comply with the following requirements as well as the General and Special Conditions, which include further requirements of this contract (see Section 5 of this RFP).

1. The Provider shall provide services in concurrence with all Hawaii Revised Statutes (HRS), with particular attention to Chapters 346, 350, and 587; Hawaii Administrative Rules (HAR); Code of Federal Regulations, Title 45 – Public Welfare, Part 1340 – Child Abuse and Neglect Prevention and Treatment (45 CFR 1340); and the DHS’ policies and procedures.
2. The Provider shall be qualified, as well as certified, licensed, and/or accredited, as applicable, to perform the services solicited in this RFP.
3. The Provider shall share any and all information with the DHS, as necessary, and other parties, as applicable, to ensure the safety, permanency, and well-being of the child and the family.
4. The Provider may be required to become involved in Family Court activities if a member of the Provider’s staff receives a subpoena or a court order from the Court to attend a Court hearing and/or provide information to the Court. Subpoenaed and court-ordered staff are required to attend the Court hearing and/or provide the requested information to the Court. Subpoenaed and court-ordered staff shall cooperate with the DHS and the Department of the Attorney General (DAG) regarding the Court hearing and/or the provision of the requested information to the Court, including assisting the DAG in preparation for their appearance at the Court hearing.
  - a. Court involvement may include, but is not limited to, providing testimony in Court, attending Court hearings, and submission of reports to the Court. Court hearings may pertain, but are not limited, to those involving Temporary Restraining Orders (TROs), Juvenile Court, and paternity, child custody, and divorce matters.
  - b. Subpoenaed and court-ordered staff may be required to testify as a qualified child abuse and neglect expert regarding their respective area of service provision.
  - c. Testimony shall be based on the observations and assessments made during the staff’s service provision.
  - d. The DHS may require the use of a specified format on which to provide requested information to the Court and/or identify specific information that shall be included in reports to the Court. Provision of requested information to the Court may include providing staff resumes, if requested.
  - e. Non-subpoenaed or court-ordered staff may accompany a family to Court to provide support if requested by the family. Non-subpoenaed or court-ordered staff may be allowed to be present in the courtroom if deemed appropriate by the Court.

5. The Provider shall not impose any income eligibility standard on clients or families as a basis for receiving services provided through this contract.
6. Disagreements may occur between the Provider and the DHS regarding various issues (e.g. the performance of service activities within contracted specifications). The DHS shall make every effort to resolve these disagreements in a manner acceptable to both parties. However, if a disagreement is unable to be resolved acceptably to both parties after significant communication between them has occurred, the DHS shall prevail. If the Provider fails to comply with the DHS' directive, it may be deemed cause for corrective action and/or potential contractual remedies, including contract termination.
7. The contract shall be modified, as necessary, to include changes in the service specifications (e.g. the target population to be served, the geographic location's needs, utilization increases/decreases, service activities, and service delivery), State or federal statutes or rules, and/or the requirements of applicable funding sources. In that event, the DHS shall notify the Provider in writing about the necessity of the change/s and what the proposed change/s will be. The Provider shall have the opportunity to discuss the change/s prior to its/their implementation.
8. The Provider shall participate in quality assurance/improvement projects for research and evaluation purposes as requested by the DHS. Such activities shall include one Child and Family Service Review (CFSR) per year/per qualified staff as arranged by the DHS. Qualifications of the Provider's staff to participate in the CFSR shall be determined by the DHS.

Other quality assurance/improvement activities that the Provider may participate in shall include data collection and requests related to current DHS initiatives, programs, and activities. The DHS may request that the Provider provide records for review for these purposes.

**B. Secondary purchaser participation**  
(Refer to HAR §3-143-608)

After-the-fact secondary purchases may be allowed, upon approval by the DHS.

**C. Multiple or alternate proposals**  
(Refer to HAR §3-143-605)

Multiple proposals shall be allowed.

Alternate proposals shall not be allowed.

**D. Single or multiple contracts to be awarded**  
(Refer to HAR §3-143-206)

Single                       Multiple                       Single & Multiple

Single contracts shall be awarded for each geographic area. However, multiple contracts may be awarded to one Applicant for different geographic areas.

**E. Single or multi-term contracts to be awarded**

(Refer to HAR §3-149-302)

Single term (2 years or less)

Multi-term (more than 2 years)

Initial contract term:

One (1) year and six (6) months, from January 1, 2017 through June 30, 2018.

The initial term shall commence on the contract start date.

Number of possible extensions: Two (2) extensions.

Length of extensions: Two (2) years.

Maximum contract term:

Five (5) years and six (6) months, from January 1, 2017 through June 30, 2022, subject to the Option to Extend provision of the contract (see #14, Special Conditions, Section 5 of this RFP).

Conditions for extension:

1. Ongoing need for the service, as determined by the State.
2. Availability of funding.
3. Acceptable utilization, as determined by the State.
4. Satisfactory performance, as determined by the State.
5. Satisfactory compliance with the terms and conditions of the contract, as determined by the State.
6. Must be in writing, shall allow 30 calendar days for consideration and approval, and shall be executed prior to the contract expiration date.

**F. Subcontracting**

(Refer to 3.2 General Conditions, Section 5 of this RFP)

Subcontracting shall be allowed with the prior written approval of the DHS. Subcontracting is encouraged to provide an array of services to families in all areas of the state, including culturally specific programming.

Prior to the start of the contract, the Provider shall submit any subcontracts to the DHS for review. The Provider shall ensure that its subcontractors comply with **all** of the contract requirements of this RFP. The Provider shall submit documentation of its subcontractor's compliance with the contract requirements as requested by the DHS.

## 2.4 Scope of Work

The Provider shall provide VCM Services in compliance with and including all of the following tasks and responsibilities detailed below:

## A. Service delivery

Services to clients and their families shall be evidence based or evidence-informed and follow best or promising practice principles. Services shall be provided using a trauma-informed approach, meaning attending to a client's emotional as well as physical safety, including understanding how trauma affects the client's life.

Services shall be culturally and linguistically appropriate, fully serving clients with Limited English Proficiency (LEP). Services shall also be fully accessible and accommodate clients with any disability.

Services shall be provided to all clients regardless of gender identity or sexual orientation. The Provider shall use gender neutral language in its program and prohibit harassment and discrimination based on gender, gender identity, gender expression, and sexual orientation.

The Provider shall make every reasonable effort to assure that services are provided in a flexible manner to clients and their families so as to best meet their specific needs. Service activities may need to be scheduled outside of normal office hours, such as in the evenings or on the weekends, to accommodate the clients' schedules.

Services shall be provided for the period of time specified in 2.4, B. Service activities, Section 2 of this RFP. Extensions may be requested on a case by case basis, based on the individual needs of the client and their family, and shall be approved/disapproved in writing by the VCM worker.

The Provider shall assure and be responsible for the continuity of services in the event of staff illness, medical emergencies, vacancies, or other situations that might otherwise result in reduced program services.

1. Services shall:
  - a. Be age and developmentally appropriate.
  - b. Be client-centered, designed to meet the unique needs of each client and build on their strengths to promote and enhance safety, health, and well-being. Service and discharge planning shall be designed in conjunction with the client to the extent possible. The client's desires, needs, and perspective shall guide the development of all plans.
  - c. Facilitate the client's increased access to physical safety and resources and support them in facing any barriers to receiving services.
  - d. Assist the client in strengthening their resilience by reducing risk factors and increasing protective factors, such as building competence/self-esteem, strengthening the relationship between them and their family, as appropriate, and promoting pro-social activities in the school and in the community.
  - e. Enhance the family's ability to provide safety, nurturance, and support for the child, as appropriate.
  - f. Be provided in an environment that is welcoming, inclusive, de-stigmatizing, and not re-traumatizing.

## B. Service activities

The Provider shall establish and implement written procedures for intake, assessment, provision of service activities, and completion/termination of services (discharge), including the applicable criteria, timeframe for completion, and notifications to the VCM worker.

### 1. Competency areas

The Provider shall ensure that short and long term goals for the individuals and the families served, depending on their strengths and needs, address the following four competency areas:

- a. The parents'/caregivers' ability to meet the needs of the child/ren.
- b. The parents'/caregivers' ability to protect the child/ren.
- c. The parents'/caregivers' ability to maintain the safety of the child/ren.
- d. The parents'/caregivers' ability to problem-solve.

### 2. Protective factors

Services shall also be designed to promote the following protective factors:

- a. Emotional and social competence of children;
- b. Nurturing and attachment;
- c. Knowledge of child and youth development;
- d. Knowledge of parenting techniques;
- e. Concrete supports for parents;
- f. Parental resilience; and
- g. Social connections.

Services may be provided at program facilities, the client's home, or community locations as approved by the VCM worker in consultation with the Provider. The selected location shall provide for safe and appropriate interactions between the client, their family, and the Provider's staff.

### 3. VCM Services

These services include a wide range of case management activities to be provided to children and families referred by CWS and identified as moderate/moderately high risk at initial intake or during on-going assessment. Children and families receiving VCM Services shall not be under the jurisdiction of Family Court. Children may reside in and out of the family home. Services may be provided for up to 12 months.

VCM cases shall be managed by qualified VCM workers (case managers) assisted by the DHS' VCM staff (Voluntary Case Liason (VCL) or a DHS staff functioning in that capacity). The primary duties of the DHS' VCM staff include, but are not limited to, providing assistance with family location and engagement, providing case consultation, and monitoring the quality of work done by the VCM workers. The Provider shall follow the procedures specified by the DHS, including those in the DRS Procedures Manual.

Services include, but are not limited to:

- a. Contact with the family:
  - 1) The Provider shall share the concerns in the CWS report with the family at the time of initial contact. The initial contact may be a face-to-face visit, phone call, letter, or other method, as applicable.
  - 2) The Provider shall make initial face-to-face contact with the family, including the children, within five (5) working days of the referral, or as specified by the DHS, to share the concerns identified in the report, clarify VCM Services/the Provider's involvement, assess the safety concerns/risks to the children and the family's needs, and assist the family with the development of a plan to meet their needs.
  - 3) The Provider shall partner with the DHS' VCM staff to locate and contact children and parents/caregivers as necessary.
- b. Family assessment where the Provider shall:
  - 1) Share the concerns noted in the CWS report with the family as well as assess those concerns.
  - 2) Complete the initial Child Safety Assessment within two (2) working days of the initial face-to-face contact. The Provider shall make efforts to interview each family member, including the children, alone (with the consent of their parents/guardians, as needed) and document who was assessed as well as the information gathered.
  - 3) Complete the Comprehensive Strengths and Risk Assessment tool, or another tool if specified by the DHS, within 60 days of the initial face-to-face contact. The family's strengths, needs, and ability to protect the children shall be assessed to determine any and all appropriate service activities.
  - 4) Incorporate the DHS' assessment of the family including, but not limited to, the Safe Family Home Report, as applicable.
  - 5) Use the Family Partnership Planning and Family Partnership Plan Activities document, or another document if specified by the DHS, as part of its assessment.
  - 6) Complete ongoing monthly assessments to assess child safety, strengths, risk issues, and progress in services as assessment is an ongoing process and shall be continually evaluated to identify those components.
- c. Individualized Program Planning (IPP):
  - 1) The Provider shall develop an IPP with the family within 60 days of the initial face-to-face contact with the goal of completion within 12 months.
  - 2) The IPP shall be completed as part of the Family Partnership Planning and Family Partnership Plan Activities document, or another document if specified by the DHS.
  - 3) Planning for an IPP shall include the Provider communicating with the child, parents, legal/physical custodians, and all other relevant persons identified as necessary to the development and implementation of the case plan goals.
  - 4) The IPP shall specify services that will be provided to address the reported concerns and the risk issues in the home.
  - 5) The IPP shall also fully document for the family the positive and negative consequences of successful or unsuccessful completion of the IPP.
  - 6) If the family is not able or willing to complete an IPP, the Provider shall document the family's response to the report, the completed safety assessment, any strengths and risk issues identified, and information/resources/supports provided to the family to meet their needs. A closing summary shall also be

- completed to document and summarize the information gathered about the family and the information/resources/supports provided.
- d. Coordination of service referrals and service delivery  
The Provider shall identify and coordinate referrals with the family which may include helping/coaching families to find and contact resources.
  - e. Monitoring service delivery to ensure appropriateness and effectiveness, including making monthly face-to-face contact with the family members (including the children):
    - 1) Monthly face-to-face contacts shall include ongoing safety and risk assessments and discussions and observation of progress in services/interventions.
    - 2) If families have missed appointments or there are scheduling challenges, the Provider shall make efforts to reschedule within the month and request the support of the DHS' VCM staff to maintain monthly face-to face-contact with the family.
  - f. Completing, maintaining, and providing documentation as specified by the DHS.

VCM Services shall be terminated when:

- a. Services are successfully completed and the risk issues have been adequately/appropriately addressed.
- b. At any time, including during the initial or subsequent assessments, the Provider identifies that a child has suffered substantial harm instead of risk and/or identifies the presence of a safety factor, as defined by the DHS; the Provider shall inform CWS immediately, provide crisis intervention to the family, as necessary, and return the case to the appropriate CWS Unit for re-assignment. The Provider shall also assist CWS in ensuring a smooth transition of the case to CWS.
- c. During the initial or subsequent assessments by the Provider or during service provision the family chooses not to participate in VCM Services and the family is assessed as needing services; the Provider shall inform CWS, provide crisis intervention to the family, as necessary, and immediately return the case to the appropriate CWS Unit for re-assignment. The Provider shall also assist CWS in ensuring a smooth transition of the case to CWS.
- d. At any time a child is reported to be substantially harmed during the provision of VCM Services and an investigation by CWS confirms the report and VCM Services are no longer appropriate; the Provider shall immediately return the case to the appropriate CWS Unit for re-assignment. The Provider shall also assist CWS in ensuring a smooth transition of the case to CWS.
- e. For cases returned to CWS for which CWS subsequently files a court petition, the Provider shall provide CWS with updated assessments and the IPP, if requested by the DHS, for submission with the Family Court petition. The Provider may also be required to provide testimony in Family Court.

Individual and group skill building related to the IPP:

Services may be provided to families who are in need of hands-on skill building. They may be provided to individuals and groups in the home or in other community settings, based on the needs of the family, and include activities that are culturally based. Services include, but are not limited to:

- a. Regular visits in the home;
- b. Hands on parenting instruction;
- c. Practical life skills instruction;
- d. Role modeling;
- e. Nutrition; and
- f. Planning.

Activities may focus on, but are not limited to:

- a. Enhancing child-parent bonding and attachment, empathy, and child management skills by using simple, concrete techniques employing both educational materials and skill building exercises.
- b. Providing information about normal child development stages.
- c. Increasing the understanding of parents with substance abuse problems about the effect their substance use has had on their children and encouraging and supporting their participation in substance abuse treatment services.
- d. Socialization in order to develop concrete, everyday problem solving abilities as well as to learn how to interact with other people more productively.
- e. Issues relevant to the family such as the aspects of power and control underlying partner and child abuse, the dynamics of abuse, including domestic violence, increasing the individual's protective ability, assertiveness training, etc., if not available through other resources.
- f. Parent centered pre- and post-permanency support and education to address the needs of families. This education may be in the form of programs and activities led by invited experts or parent-facilitated workshops.

Services shall be provided to meet the needs of the family when no other services are available or appropriate.

Services shall be short term, intensive, and specifically targeted to meet the family's identified needs.

### **C. Administrative/Management requirements**

#### **1. Experience**

The Provider shall have verifiable relevant experience for the last three (3) years in providing VCM Services or very similar services to clients.

#### **2. Ability**

The Provider shall have the necessary abilities, skills, and knowledge relating to the delivery of the contracted services.

#### **3. Personnel**

The Provider shall ensure that all staff, volunteers, and contracted personnel have the educational qualifications, work experience, necessary training, and appropriate

certification/license, as applicable, to fulfill their job position requirements and provide the contracted service activities.

The Provider shall assure that:

- a. All staff, volunteers, and contracted personnel are at least 18 years old.
- b. All staff, volunteers, and contracted personnel providing direct services (e.g., contact with the family, assessments, IPP, service coordination, monitoring, and documentation) shall have, at minimum, a Bachelor's degree in social work, psychology, or a related field from an accredited institution. Staff shall also have a minimum of one (1) year of experience. Staff who do not meet the experience requirement may provide direct services only under the close supervision of personnel with, at minimum, a Bachelor's degree in social work, psychology, or a related field from an accredited institution and a minimum of two (2) years of experience. Close supervision includes recommended actions and the review and approval of reports.
- c. All staff, volunteers, and contracted personnel providing individual/group skill building services shall have, at minimum, a Bachelor's degree in social work, psychology, or a related field from an accredited institution. Staff shall also have a minimum of one (1) year of experience. However, services may be provided by staff with a high school diploma or G.E.D. and two (2) years of experience under the close supervision of personnel with, at minimum, a Bachelor's degree in social work, psychology, or a related field from an accredited institution and a minimum of two (2) years of experience. Close supervision includes recommended actions and the review and approval of reports.
- d. All staff, volunteers, and contracted personnel shall have experience in working with parents/caretakers who harmed their children or threatened their children with harm and children who experienced harm or were threatened with harm and who experienced trauma and loss. Additionally, they shall have experience in working with domestic violence, substance abuse, and permanency issues.
- e. All staff, volunteers, and contracted personnel shall demonstrate a willingness to work with others, including clients coping with multiple issues, families that present safety issues, and co-workers, as part of a team.
- f. Program supervision, including supervision of staff, volunteers, and contracted personnel, shall be provided by staff with, at a minimum, a Master's degree in social work, psychology, or a related field from an accredited institution and at least two (2) years of experience. A Bachelor's degree and four (4) years of relevant experience may replace the requirement for a Master's degree. Supervision shall include, but not be limited to, individual staff, volunteer, and contract personnel supervision, case reviews, periodic observation of service delivery, and ongoing evaluation of program effectiveness and outcome measures.
- g. Volunteers shall be under the control and direction of the Provider even though they are not paid staff or contracted personnel.
- h. If a job applicant does not meet the education, work experience, and/or training qualifications for a specific job position but the Provider still recommends hiring the applicant, a request for a waiver of the qualifications shall be submitted to the DHS in writing via email. The request shall include:
  - 1) The name of the applicant and his/her qualifications.

- 2) The reason for the Provider's request and the justification for hiring the applicant (e.g. the applicant may not have the required education but may have adequate years of experience and/or training that demonstrates their ability to adequately perform the job position's duties).
- 3) The Provider's plan for the supervision and training to be provided to the applicant if hired.

The DHS shall respond in writing via email asking for more information or approving/disapproving the waiver, including noting any conditions, such as a probationary plan, that need to be implemented in order to hire the applicant.

- i. No job applicant who does not meet the minimum qualifications for a job position shall be hired for work under the contract without written approval from the DHS.
- j. Verifications of education, work experience, certification/license, and waiver as well as job performance information are the responsibility of the Provider and shall be maintained and updated in the staff, volunteers, and contracted personnel files.
- k. The Provider shall comply with the following criminal history requirements:
  - 1) The Provider shall conduct an initial criminal history record check and sex offender check as well as submit a consent form to the DHS Licensing Unit for a CWS Central Registry Check for all staff, volunteers, and contracted personnel job applicants who apply to work under the contract, especially those who will be providing direct services as this necessitates close proximity to children.

The Provider shall search [www.ecrim.hawaii.gov/ahewa/](http://www.ecrim.hawaii.gov/ahewa/) (Adult Criminal Conviction Information System, Hawaii Criminal Justice Data Center) and search [www.nsopr.gov](http://www.nsopr.gov) (National Sex Offender Registry) prior to hiring staff, volunteers, or contracted personnel.

- 2) Conditional employment in a non-direct service position may be offered to an applicant for a period not to exceed 30 days pending the receipt of the results of the checks.
- 3) The Provider shall have an established procedure to address any criminal conviction results with an applicant. If after such results have been received and the Provider has discussed the results with the applicant and still recommends hiring the applicant, a request for a waiver shall be submitted to the DHS in writing. The request shall include:
  - a) The name of the applicant and their qualifications.
  - b) The reason for the Provider's request and their justification for hiring the applicant (e.g. the conviction was a misdemeanor which occurred several years before and the applicant's record has been clean since then), including the basis for the determination that such a criminal conviction does not pose a risk to the health, safety, or well-being of children.
  - c) The Provider's plan for the supervision to be provided to the applicant if he/she were hired.

The DHS shall respond in writing via email asking for more information or approving/disapproving the waiver, including noting any conditions, such as a probationary plan, that need to be implemented in order to hire the applicant.

- 4) The DHS Licensing Unit receives the complete results of the CWS Central Registry Check and sends the Provider a copy of the results which includes only limited information.

If an applicant has a CWS Central Registry history which may/may not pose a risk to the health, safety, or well-being of children, the Licensing Unit shall contact the applicant and may work with the applicant and the Provider in gathering more details and reviewing the information. The Licensing Unit shall contact the applicant and the Provider with the results of the review.

- 5) No job applicant with a criminal and/or CWS Central Registry history which shall be hired for work under the contract without written approval from the DHS.
- 6) All three checks shall be completed again one (1) year after hire and again every two (2) years thereafter.
- 7) The results of all checks and copies of all consent forms shall be maintained and updated in the staff, volunteers, and contracted personnel files.

See “CRIMINAL HISTORY RECORD CHECK STANDARDS and PROTECTIVE SERVICES CENTRAL REGISTRY CHECK STANDARDS (Revised 4/18/13)”, Section 5 of this RFP.

#### 4. Training

- a. The Provider shall have in place both an initial and an annual, on-going training plan for staff, volunteers, and contracted personnel which shall identify the specific trainings to be provided and the time frames in which they will be provided. The initial trainings shall be completed before staff, volunteers, and contracted personnel may provide direct services without direct supervision.
- b. All staff, volunteers and contracted personnel providing direct services to clients shall have, at minimum, training in the following areas before they provide direct services without direct supervision:
  - 1) An agency orientation including, but not limited to, policies and procedures addressing:
    - a) Intakes, assessments, service planning, and discharge planning.
    - b) Documentation requirements.
    - c) Non-discrimination, including working with clients with LEP and/or disabilities.
    - d) Confidentiality and ethics.
    - e) Security and safety provision.
    - f) Emergency response and disaster preparedness procedures.
    - g) Culturally-embracing service provision.
    - h) Working sensitively with the LGBTQ population.
  - 2) Child abuse and neglect, domestic violence, substance abuse, and permanency issues.
  - 3) Trauma informed care.
- c. A training record shall include each training topic completed, the number of training hours/days for each training, each training’s completion date, and each training’s facilitator and be maintained and updated in the staff, volunteers, and contracted personnel files.
- d. All training shall be provided by appropriately qualified and experienced trainers.

5. Dispute/Conflict resolution procedures

The Provider shall have written dispute/conflict resolution procedures to address disagreements with staff, volunteers, and contracted personnel, with clients, and with community resources, including consulting with the DHS' VCM staff (Voluntary Case Liason (VCL) or a DHS staff functioning in that capacity), as needed.

6. Client files

- a. Client files shall contain basic client information such as name, gender, birthdate, race/ethnicity, address, phone number, marital status (if applicable), language spoken and any LEP concerns, and any health/physical/mental conditions or special needs. Files shall also contain copies of all assessments, service plans, discharge plans, reports, and any other documentation, such as case notes and service referrals.
- b. Files shall be maintained and updated during the service period.
- c. Files shall be kept strictly confidential.
- d. The Provider shall retain client files for six (6) years after the last service date.
- e. The Provider shall allow the DHS access to any file upon request.

7. Reporting requirements for program and fiscal data

- a. The Provider shall be responsible for the following required program reports:
  - 1) The Provider shall complete the monthly Client Eligibility List (CEL) and Quarterly Activity Report (QAR) in the formats provided by the DHS. The Provider shall report individual information about the clients served as well as the numbers of clients served, service units completed, program activities completed, accomplishments of the program objectives and outcomes, problems encountered, any program recommendations, and proposed future activities. The QAR shall also document any staffing changes. The CEL and QAR forms and the information required to be provided on those forms may be revised during the contract period.
  - 2) The Provider shall complete the quarterly Limited English Proficiency (LEP) Report in the format provided by the DHS. The Provider shall report the number of clients who were offered and who received language access services, the type of language access service provided, the type of service provider used, and the expenditures spent on language access services during the reporting period.
  - 3) The CEL shall be submitted to the DHS via email by the 15<sup>th</sup> of the month following the reporting period.  
The QAR shall be submitted to the DHS by the last day of the month following the reporting period.  
The LEP Report shall be submitted to the DHS via email by the last day of the month following the reporting period.
- b. The Provider shall be responsible for the following required fiscal reports:
  - 1) The Provider shall complete the annual Budget and monthly Expenditure Report in the formats provided by the DHS. The Provider shall summarize its annual projected program and personnel expenditures in the Budget, and report the actual expenditures of contract funds, during the reporting period for which an invoice will be submitted, in the Expenditure Report. The Report shall also list other sources of funding used for the contract and their amounts as well as document all staff and contracted personnel that work under the contract. Expenditures

- reported in the Report shall be subject to review by the DHS, such as a review of all applicable receipts, to verify the amounts and the appropriateness of the reported expenditures.
- 2) The annual Budget shall be due by April 30 of the current fiscal year for the following fiscal year.  
The Expenditure Report shall be submitted by the 15<sup>th</sup> of the month following the reporting period.
  - c. See Attachments, Section 5 of this RFP for samples of the program and fiscal reports.
8. Output and performance and outcome measurements
    - a. The Provider shall maintain the capacity to deliver services throughout the contract term as specified in the Performance Measurement Forms A, B, and C, Section 2 of this RFP.
    - b. The effectiveness of the contract shall be evaluated according to the utilization of the services, the numbers of the various service activities provided, and the outcomes achieved.
    - c. Unless otherwise agreed to in writing, the number of clients to be served and the numbers of the various service activities to be provided shall change in proportion to any funding changes.
    - d. See the Performance Measurement Forms A, B, and C at the end of this Section 2 of this RFP.
  9. Quality assurance and evaluation specifications
    - a. The Provider shall maintain throughout the contract term a system of self-appraisal for on-going evaluation of the performance effectiveness and quality of its program services.
    - b. The evaluation process shall use credible and tested measurement tools or instruments.
    - c. The Provider shall collect data on the impact of services, including identifying indicators of change, which are relevant to outcomes.
    - d. The Provider shall include a process for implementing improvements and taking corrective action based upon the evaluation's findings.
    - e. The Provider shall provide a copy of its evaluation documentation to the DHS upon request.
  10. Insurance requirements (see 1.4, General Conditions, Section 1 and #2. Special Conditions, Section 5 of this RFP)
    - a. The Provider shall maintain throughout the contract term the following insurance coverage:
      - 1) General Liability Insurance of no less than \$1 million per occurrence and \$2 million annual aggregate for bodily injury and property damage.
      - 2) Automobile Liability Insurance of no less than \$1 million per accident for any auto, non-owned autos, and hired autos.
      - 3) Professional Liability Insurance (Errors and Omissions) of no less than \$1 million per claim and \$2 million annual aggregate.
    - b. On the Certificate it shall be stated that the State of Hawaii is named as an additional insured with respect to operations performed for the State, and any insurance

maintained by the State will apply in excess of, and not contribute to, the insurance provided by the policy.

- c. The Provider shall include any subcontractor as additional insured under its policies or provide to the DHS separate Certificates of Insurance and endorsements for each subcontractor. Any subcontractor shall comply with the same insurance requirements as the Provider.
- d. The DHS reserves the right to amend insurance requirements in order to maintain all contracts in compliance with the most current State requirements.

11. Hawaii Compliance Express (HCE)

The Provider shall be compliant with all statutes and administrative rules. Per HRS §103D-310(c), HRS Chapter 103F, and HAR §3-120-112, the Certificate of Vendor Compliance provided by the HCE is acceptable verification of the Provider's good standing as a vendor doing business in the State of Hawaii. The Provider shall be an HCE member with compliant status.

12. All contracts shall be monitored by the DHS in accordance with requirements set forth by HRS Chapter 103F. Ongoing contract monitoring shall include review of program and fiscal reports and periodic assessment of service delivery and program effectiveness. In addition, annual contract monitoring may include site visits with a comprehensive evaluation of several areas, including review of the Provider's compliance with contractual requirements, agency personnel files, client files, and accounting practices.

**D. Facilities**

The Provider shall obtain and maintain adequate facilities for the satisfactory delivery of contracted services. The Provider's facilities shall meet American Disabilities Act (ADA) requirements, as applicable, and provide any special equipment necessary for service provision. The facilities may be shared with another agency/other agencies but must be available for the contracted geographic area/s. The facilities shall be operational by the contract start date.

## 2.5 Compensation and Method of Payment

The Provider shall comply with HRS Chapter 103F, Purchases of Health and Human Services Cost Principles (see the SPO website) in the development of its budget and its expending of contract funding.

Unless otherwise proposed and agreed between the Provider and the DHS, the pricing structure for these services is as checked below. The pricing structure may be revised by mutual agreement throughout the contract term.

- Cost reimbursement where the State pays the Provider up to a maximum annual contract amount for budgeted costs actually expended in the delivery of contracted services.
- Fixed rate cost where the State pays the Provider up to a maximum annual contract amount a service unit rate for the delivery of a set number of service units.
- Base cost/Fixed rate cost combination where the State pays the Provider a base cost for operations plus a fixed rate cost for delivered units.

\_\_\_\_\_ Negotiated rate where the State determines a set number of service units needed and negotiates with the Provider a delivery cost for the service units. The cost divided by the number of units needed determines a service unit rate.

**A. Units of service**

The units specified in Performance Measurement Forms A, B, and C are relevant to service delivery and capacity.

**B. Method of compensation and payment**

1. A monthly invoice shall be submitted in a format specified by the DHS. The invoice shall be submitted by the 15<sup>th</sup> of the month following the reporting period. See Attachments, Section 5 of this RFP for a sample of the invoice.

Payment shall be made after receipt and preliminary approval of an invoice, reports, and any other documents required by the DHS.

All client costs shall be supported by documentation indicating who services were provided to, when services were provided, and what services were provided.

2. The Provider may use contract funding for expenditures associated with client interpreter or translation services as well as expenditures incurred to fully accommodate clients with disabilities. These expenditures may be included in the invoiced amount for reimbursement to the Provider.
3. The Provider shall not require any additional fees from clients for services provided through this contract without the prior approval of the State.
4. The Provider shall not use funds received through this contract for services and costs for which it received compensation from other State, federal, or other sources.

## FORM A - PEOPLE TO BE SERVED

**ORGANIZATION:** \_\_\_\_\_

**PROGRAM/SERVICE:** Voluntary Case Management Services

**GEOGRAPHIC AREA:** \_\_\_\_\_

	PEOPLE TO BE SERVED	ANNUAL GOAL	FY 17
1.	Total # of VCM Services referrals:		
	a. From CWS Intake Units.		
	b. From CWS Assessment and Case Management Units.		
	c. From other VCM Services Providers as transfers.		
	d. Total # of VCM Services referrals: 1) Families 2) Children 3) Adults		
2.	Of the total # of referrals in item 1.d., # of referrals from Family Court (this number should reflect cases in which Family Court initiated intake or referral for services).		
3.	Of the total # of referrals in item 1.d., # of families who have agreed to and are receiving VCM Services.		

## FORM B – SERVICE ACTIVITIES

**ORGANIZATION:** \_\_\_\_\_

**PROGRAM/SERVICE:** Voluntary Case Management Services

**GEOGRAPHIC AREA:** \_\_\_\_\_

	<b>SERVICE ACTIVITIES</b>	<b>Estimated ANNUAL GOAL (%)</b>	<b>FY 17</b>
1.	# of referrals for VCM Services.		
2.	# of referrals where face-to-face contact was initiated within five (5) working days of the referral.		
3.	# of referrals that received an initial face-to-face contact <i>within</i> five (5) working days of the referral.		
4.	# of referrals that received an initial face-to-face contact <i>after</i> five (5) working days of the referral.		
5.	# of referrals that were unable to be contacted.		
6.	# of referrals that have a Child Safety Assessment completed within two (2) working days of the initial face-to-face contact.		
7.	# of referrals that have a Comprehensive Strengths and Risk Assessment completed within 60 days of the referral.		
8.	# of referrals that have a Family Partnership Plan and Family Partnership Plan Activities (as the IPP) within 60 days of the referral.		
9.	# of families offered an `Ohana Conference.		
10.	# of families that participated in an `Ohana Conference.		
11.	# of referrals that received monthly face-to-face contact.		

12.	# of families that received individual skill building provided by VCM Services.		
13.	# of families that receive group skill building provided by the VCM contract.		

**FORM C - OUTCOMES****ORGANIZATION:** \_\_\_\_\_**PROGRAM/SERVICE:** Voluntary Case Management Services**GEOGRAPHIC AREA:** \_\_\_\_\_

	<b>OUTCOMES</b>	<b>ANNUAL GOAL (%)</b>	<b>FY 17</b>
1.	# and percentage of families who developed IPPs that met or partially met goals in their IPPs upon discharge.	80%	
2.	# and percentage of families who have increased supports/resources as a result of the intervention.	50%	
3.	# and percentage of referrals that were returned to CWS for safety issue(s) during service provision: a. Total # returned that were referred to VCM from CWS Intake Units. b. Total # returned that were referred to VCM from CWS Assessment Units.	Less than 5%	
4.	# and percentage of referrals that were returned to CWS due to lack of participation by the family: a. Total # returned that were referred to VCM from CWS Intake Units. b. Total # returned that were referred to VCM from CWS Assessment Units.	Less than 10%	
5.	# and percentage of clients that were contacted who expressed satisfaction with the program as determined by the completed consumer satisfaction surveys.	95%	