

QUESTIONS AND ANSWERS

INTENSIVE SERVICES FOR YOUTH WITH INTELLECTUAL/DEVELOPMENTAL DISABILITIES

One (1) AWARD, TOTAL OF 15 BEDS IN NORTHERN OR CENTRAL REGION

Questions? Email us anytime at dcfaskrfp@dcf.state.nj.us

Phone number and contact

Main Number: 609-888-7730

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Deliver proposal to: 50 East State Street, 3rd Floor
Trenton, NJ

1. In addition to the referral sources listed in the RFP, where else could a youth be referred to this program from?

All referrals to intensive services for youth with I/DD must be authorized by the Contracted System Administrator (CSA), PerformCare. Youth referred to this program would have Care Management Organization (CMO) and Child/Family Team (CFT) involvement. The CFT initiates the request for out of home treatment. The CMO care manager will complete the referral packet.

2. Is there anything programmatically different in this reissuance for the IDD RFP?

No.

3. Pertaining to agencies who submitted previously for this RFP, when resubmitting, should the agency submit a new set of the standard forms reflecting the current date? Can the agency use the same letters of support, or is the agency expected to submit new ones?

The agency may re-submit the already signed and dated standard forms that they previously submitted for this RFP. The agency may also submit the same letters of support that they previously submitted for this RFP.

4. Can you provide some guidance for the agencies who previously submitted for this RFP?

We expect that those agencies utilize the checklist provided for guidance. Additionally,

-Pay special attention to the *exhibits* required for this RFP. It is imperative that they are *filled out correctly and in their entirety*

-Ensure that your agency submits the documents that the agencies below provide to you as proof of your filing. This may take some time so please start early. If you are a new agency provide a written statement. Do not provide a corporate annual report.

42	<input type="checkbox"/>	Annual Report to Secretary of State Website: https://www1.state.nj.us/TYTR_COARS/JSP/page1.jsp
43	<input type="checkbox"/>	Non Profit: Annual Report - Charitable Organizations Website: http://www.njpublicsafety.org/ca/charity/charfrm.htm If not applicable, include a written statement

-Ensure that each of the required *standard documents* are *filled out correctly, in their entirety, signed and dated*.

-Ensure that your proposal is *programmatically* strong

-Include *professional* letters of support. That is, for example, not letters from families or individuals who previously received services from your program. Additionally, references from New Jersey state employees are prohibited.

5. Does this RFP include start-up funds or is the agency expected to utilize accruals?

Startup costs may be permitted in addition to the annualized funding. Please refer to pages 47-48 of the RFP.

6. Is the agency expected to be fully operational or ready to accept the first referral within 120 days?

The agency is expected to be ready to accept the first referral within 120 days.

7. Is the form 990 same as (the report from #7's question)

No, this is a totally separate tax form. The agency must submit the entire report, not just the first page or 5 points shall be deducted.

8. Can you clarify the 'no eject, no reject' policy? What would happen, for example, if a youth does not meet the agency's criteria due to safety concerns?

CSOC contracts with Intensive I/DD IOS programs to provide services to high acuity youth. The CSA manages referrals to Intensive I/DD IOS to ensure a proper clinical fit between the youth and the various programs, including milieu, services, location, etc. Each program is expected to follow the no eject, no reject policy. Under no circumstances may a provider of Intensive I/DD IOS transition/eject a youth who is enrolled from their service without first contacting and receiving written approval from the Specialized Residential Treatment Unit (SRTU) at CSOC.

Acceptable requests must include clinical rationale submitted by a licensed clinician or other licensed professional.

The program must submit this request in writing with clinical justification to the SRTU. CSOC will make the final determination about disposition for the youth.

- 9. According to the RFP, this program seeks to provide a very broad array of services. What would happen if 2 youth are placed with the agency who require total separation for their own and other's safety?**

This is a situation the agency should address within their proposal. The agency should clearly describe how it would handle/manage such a scenario.

- 10. Will you accept one proposal from 2 agencies?**

Yes. Collaboration is encouraged. The agencies would submit 1 proposal in which 1 of the agencies is identified as the lead agency. In addition, a letter of intent between the 2 agencies must also be submitted which delineates the roles and responsibilities of each agency.

- 11. Is it required that the homes be within 30 minutes from each other? Can they be located across county lines if they are still within 30 minutes of each other?**

Yes. The programs must be located within 30 minutes' drive time of each other. Provided that the programs are located within 30 minutes of each other, in the target region, they may be located in different counties.

- 12. In discussing our proposal, our agency has concerns about 'over-therapying' these youths. Our concern is the amount of therapy kids will be receiving in the therapeutic settings in which they are already involved, in addition to the therapy required in this RFP. Are the suggested therapies outlined in this RFP all mandatory for every youth in this program?**

The level of therapy that is rendered to a child/youth is based on a thoughtfully developed Care Plan/Clinical Plan that is the product of the Child Family Team. An Out of Home Referral request is then submitted to the CSA for intensity determination. CSOC's interest is in providing the right intervention at the right time.

- 13. Should the agency submit an Annex B budget form for this proposal?**

Yes.

14. In filling out the Employee Information Report form, is the agency to list their current employees or employees to be hired for this program?

This form is a required document to be filed for every entity doing business in New Jersey. The agency must submit a copy of the Employee Information Report that you previously filed with Treasury. Please check the website for the requirements.

31	<input type="checkbox"/>	Affirmative Action Certificate -or- Renewal Application [AA302] sent to Treasury Website: http://www.state.nj.us/treasury/purchase/forms.shtml Form: http://www.state.nj.us/treasury/purchase/forms/AA_%20Supplement.pdf
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15. Are Milieu & Pool Milieu staff the same group of people?

Yes

16. Does the allied (recreational) therapy have to be given by the therapist or can we utilize community resources such as the YMCA special needs programs for this therapy but have the allied therapist perform the evaluations and write the allied therapy plans to include community partners for the recreational therapy?

Allied therapies are just that. They need to be a part of the Care Plan and should be delivered by an appropriately equipped professional. Allied therapies are not recreation therapies per se.

17. Does the Vignette apply to how our agency will handle the youth in the treatment home?

Yes. The vignette describes a youth's behaviors and needs typically seen in youth appropriate for this intensity of service. The applicant must provide a clear description of developmentally appropriate interventions that address each of the behaviors listed in the vignette. Your response to the Vignette must fully describe the mechanisms for managing and treating the behavior.