

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

REQUEST FOR PROPOSALS
INTENSIVE FAMILY SUPPORT SERVICES
(Somerset and Sussex Counties)

July 24, 2017

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Division of Mental Health and Addiction Services

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I. Purpose and Intent

This Request for Proposals (RFP) is issued by the New Jersey Department of Human Services (DHS), Division of Mental Health and Addiction Services (DMHAS) to implement a program of Intensive Family Support Services (IFSS) in Somerset and Sussex Counties. IFSS are a range of family driven supportive activities designed to improve the overall functioning and quality of life of families with a mentally ill relative. The DMHAS is committed to providing IFSS in New Jersey as part of its strategy to strengthen community mental health services and supports to individuals with mental illness and their families. The DMHAS intends to implement a new program of IFSS in Somerset County where State funds for such services have become available. DMHAS will provide annualized funding of \$216,291 for Somerset County and annualized funding of \$154,564 for Sussex County, both subject to State appropriations

The purpose of IFSS is for family members and professionals to work collaboratively to provide each family with the knowledge, skills and supports which they identify as useful to the family's overall functioning and sense of control. Supportive activities must include psycho-education groups and single family consultations. In addition, supportive activities may include respite services, family support groups, advocacy and referral/service linkage.

No funding match is required; however, bidders will need to identify any other sources of funding, both in-kind and monetary, that will be used. Bidders may not fund any costs incurred for planning or preparing a proposal in response to this RFP from current DHS/DMHAS contracts.

The following summarizes the RFP schedule:

7/24/17	Notice of Funding Availability
8/2/17	Mandatory Bidders Conference
8/30/17	Deadline for receipt of proposals - no later than 4:00 p.m.
10/12/17	Preliminary award announcement
10/19/17	Appeal deadline
10/26/17	Final award announcement
12/15/17	Anticipated contract start date

II. Background and Population to be Served:

The DMHAS understands that the impact of mental illness on a family is devastating and that families, in spite of this, can have an enormous impact on the process of a consumer's recovery, given appropriate information and support. The DMHAS recognizes families as a vital resource in the rehabilitation of their relatives with mental illness. For this reason, the DMHAS considers IFSS to be an integral part of the community mental health system.

The DMHAS contracts with providers in each of New Jersey's twenty-one counties to provide IFSS. Programs in eight counties were originally funded in the late 1980's. Funding for programs in the remaining thirteen was made available through the Division of Mental Health Services Redirection Plan and resulted in a RFP being issued in the fall of 1996. By State Fiscal Year 1998, each county had an IFSS program. In State Fiscal Year 2017, IFSS programs are contracted to serve a total of 2315 families.

IFSS should be targeted to parents, spouses, siblings and children of individuals with a major mental illness (primary psychiatric diagnosis). Others who may use such services include relatives who are closely involved in and concerned about the ill member's daily functioning or non-relatives who are the ill member's primary caregivers. Services should be available to families regardless of ability to pay for services or whether or not their ill family member is enrolled in agency services.

Among other positive outcomes, IFSS have demonstrated their ability to a) significantly reduce a family's burden in caring for a mentally ill member; b) improve a family's satisfaction with mental health services; and c) significantly reduce the need for inpatient and crisis services. When interviewed families have described IFSS as a "savior", "I don't know what I would do without them", "they are always there for me", "I don't feel so alone in caring for my loved one."

Although IFSS should be available to all families in need, particular attention should be focused on reaching families in crisis. IFSS staff should sensitize psychiatric inpatient, acute care family support (if applicable) and screening center staff on the needs of families at such times and establish referral protocols.

It is the intent of this RFP to expand IFSS to Somerset and Sussex Counties to provide families with a range of supportive activities designed to improve their overall functioning and quality of life. These support activities must include psychoeducation groups and single family consultations, and may include respite services, family support groups, systems advocacy and referral/service linkage. Services may be delivered in the family's home, at an agency or at a community location convenient to the family. Families choose services that are most relevant to their circumstances, which may change over time.

III. Who Can Apply?

To be eligible for consideration for this RFP, the bidder must satisfy the following requirements:

- The bidder must be a non-profit, for-profit or governmental entity;
- The bidder must be licensed by the Department of Human Services' (DHS') Office of Licensing prior to the start of services;
- For a bidder that has a contract with DMHAS in place when this RFP is issued, that bidder must have all outstanding Plans of Correction (PoC) for deficiencies submitted to DMHAS for approval prior to submission;

- The bidder must be fiscally viable based upon an assessment of the bidder's audited financial statements. If a bidder is determined, in DMHAS' sole discretion, to be insolvent or to present insolvency within the twelve (12) months after bid submission, DMHAS will deem the proposal ineligible for contract award;
- The bidder must not appear on the State of New Jersey Consolidated Debarment Report at <http://www.state.nj.us/treasury/revenue/debarment/debarsearch.shtml> or be suspended or debarred by any other State or Federal entity from receiving funds;
- The bidder shall not employ a member of the Board of Directors in a consultant capacity;
- Pursuant to N.J.S.A. 52:32-44, a for-profit bidder and each proposed subcontractor must have a valid Business Registration Certificate on file with the Division of Revenue.(This statutory requirement does not apply to non-profit organizations, private colleges and universities, or state and municipal agencies); and
- The bidder must attend the Mandatory Bidders conference as described in the RFP.

IV. Contract Scope of Work

The DMHAS seeks to develop and implement a program of Intensive Family Support Services (IFSS) in Somerset and Sussex Counties. As a number of program models have produced positive outcomes, no one approach to IFSS will be given preference by the DMHAS for funding. Rather, it is recommended that the following features, which appear to characterize effective established IFSS programs, be incorporated into the content of the Somerset program:

- Support for the family, including exploration of feelings and attitudes about mental illness, and its impact on the loved one;
- Clear presentations of information about the bio-neurological causes of specific mental disorders, as well as facts about how the illness is likely to affect the consumer's thinking, feelings and behavior;
- Review of symptoms of mental illness, including positive signs (such as hallucinations or delusions) and negative signs (such as apathy and listless affect) not affected by medications as well as discussion of methods of symptom management;
- Explanations of the role of medication in the management of mental illness, including discussion of the major drug classes and their therapeutic and side effects;
- Reduction of relapse or hospitalization by enlisting families in early identification of prodromal symptoms;
- Training in coping and environmental stress reduction strategies, minimally including limit setting, problem solving and communication techniques;
- Adjustment of family expectations concerning the consumer's social functioning and introduction of the idea of incremental progress, wellness

- and recovery, rather than cure;
- Education about the role of the mental health system and strategies to promote continuity of care;
- Increase family social support networks in order to reduce Isolation;
- Attract and serve minority families which shall be reflected in an annual Ethnicity Survey submitted to the DMHAS;
- Provide information about other available resources, most notably the Somerset & Sussex County National Alliance on Mental Illness (NAMI) affiliates but also residential or substance abuse programs, vocational options, self-help groups, wellness centers etc.;
- Strategies for future planning, such as estate management and guardianship.

The IFSS program **must** include psycho-education groups and single family consultation services in the service package that they offer to families:

Psycho-education groups: Staff activities related to the collaboration with and education of families with a mentally ill loved one for the purpose of enhancing their overall functioning. Functioning is enhanced through greater knowledge of mental illness, treatment options and skills useful in managing the illness within the family. Interaction encourages collaboration between professionals and family members and provides for a mutual exchange of information. Multi-family groups meet on a regularly scheduled, time-limited basis and should be geographically and culturally accessible to families. Referral to the Family to Family, a psycho-education program developed by the National Alliance on Mental Illness (NAMI) shall be made an option for IFSS.

Single Family Consultation: Staff activities related to providing information to and consultation with an individual family on a regularly scheduled or as needed basis in order to enhance the overall functioning of the family with a mentally ill member. It is important to note that family consultation is not family therapy. Individual family consultations are scheduled in the family home, at the agency location or other sites convenient to the family.

Additional Services:

IFSS should identify existing resources or develop new ones in response to family requests for assistance. Most of the following services have been demonstrated to be important to families at the appropriate time and level. Additional services which may be funded by the DMHAS through this competitive process include but are not limited to the following:

- *Respite:* Staff activities related to providing non-emergency services designed to allow an individual family planned time away from their ill member living at home. Respite care helps families rebuild their strengths, maintain connections with friends and extended family and restore emotional equilibrium. Activities can be provided in the home or out of the home and can be provided as day, evening and/or overnight service. Experience has shown that families may be reluctant to take advantage of

respite services; but once they do, respite evolves into a very important intervention in reducing their family burden.

- *Family Support Group:* Staff assistance in developing and/or encouraging a family's participation in an ongoing support group in which families meet together to provide mutual support, information and an opportunity to interact with other families having similar concerns. Family support groups help ease the isolation and stigmatization that many families experience when confronted with an ill family member.
- *Advocacy:* Staff activities that, in cooperation with families, help the community and other professionals understand and respond to the needs of families with a mentally ill loved one (e.g. *technical assistance* to other service providers or community organizations; supporting family members to participate and influence mental health policy formation; assertiveness training for family members on how to present themselves to professionals); OR staff activities on behalf of a specific family (e.g. meeting with employers to encourage flexible work schedules or emergency leaves.)
- *Referral/Service Linkage:* Staff activities which provide individualized assistance or guidance to families in procuring needed mental health and non-mental health services or assistance (e.g. applications for entitlements, referral to family therapy, linkage with home health aide or visiting nurse services). When appropriate and desired by the family, IFSS seeks to create close working relationships with other services involved with a particular family.

Staffing:

IFSS require skilled and accessible personnel. The provider agency shall hire at least one full time employee who shall function as a Family Support Specialist and not be shared with other provider agency program elements. Each Family Support Specialist shall have an earned Master's degree in a mental health clinical discipline and possess a minimum of three years' experience providing mental health services to individuals with severe and persistent mental illness and their families.

If the provider agency employs additional voluntary or paid family support staff as part of its IFSS program, then the Family Support Specialist shall have a supervisory role over this additional staff.

Additional family support staff and consultants employed by the provider agency in its IFSS program shall, at a minimum, have a Bachelor's degree in the behavioral health sciences and two years' experience working in the mental health field or a Registered Nursing degree/diploma and two years' experience working in the mental health field. Bachelor's degree level staff shall be supervised by the Master's degree level Family Support Specialist.

The provider agency shall consider employing knowledgeable individuals with first hand experience in living with a loved one with severe mental illness on a paid or volunteer basis. A Bachelor's level degree may be waived for knowledgeable and experienced

family members. IFSS shall also consider employing people with knowledge and experience regarding minority or underserved families in the staff selection process. IFSS shall involve families in the staff selection process. Respite workers employed by the provider agency must at a minimum have a high school diploma and be specifically trained to provide respite services.

The role of the Family Support Specialist is to educate families and collaborate with them in the rehabilitation process, support them in coping with their family member's illness and enhance their effectiveness as caregivers. By assisting family members in using information, skills and resources related to the management of mental illness, the Family Support Specialist helps them maintain an environment that is conducive to the recovery process and enjoy a better quality of life during the course of the illness.

A variety of knowledgeable areas, attitudinal qualities and skills are critical in order for a professional to function effectively as a Family Support Specialist. Critical areas include but are not limited to the following:

- Provide family members with up to date information about bio-neurological aspects of major mental illnesses and the medications used to treat these illnesses;
- Provide family members with information on the impact of substance use and abuse on the course of mental illnesses; problems/risks associated with mixing various psychotropic medications with other mood altering substances and knowledge of Al-Anon resources geographically accessible to the family when needed;
- Knowledge of diathesis-stress research on communication patterns and environmental stimulation as it relates to relapse rates and symptomology
- A working knowledge of mental health and social resources in Somerset and Sussex Counties, and the ability to draw upon local expertise as needed;
- Knowledge of the principles of adult education and group process;
- A genuine regard for families of individuals with mental illnesses, who have not caused their loved one's illness, who have valuable insights and who can have a strong positive influence on their ill member's recovery;
- Design and deliver workshops and presentations;
- Be skillful in facilitating groups;
- Be responsive to the feelings and concerns of family members;
- Reach out to minority families and serve them effectively;
- Teach families new skills and coach them in using their skills in needed environments;
- Provide family members assertiveness training on how to present themselves to professionals within the mental health system;
- Being experienced and comfortable with "in vivo" and other off site service provision;
- Being flexible with regard to time and place in order to accommodate the individual needs/preferences of family members;

- Establish a referral network to provide technical assistance to professionals within the mental health system and other community groups regarding the value of viewing the ill family member as part of a family unit deserving of attention and support (e.g. religious groups, health care providers);
- An understanding of how to provide respite services for a family and to train respite workers as necessary.

Service Expectations and Reporting Requirements:

Service expectations will be clearly articulated in the contract with the DMHAS. Failure to provide committed levels of service may result in termination or funding reductions. It is expected that IFSS will fulfill all data collection requirements established by the DMHAS as part of this initiative.

The provider agency will be required to use current Annex A and Quarterly Contract Monitoring Report (QCMR) forms for Intensive Family Support Services. The QCMRs must be submitted electronically. The provider agency will be expected to submit Annex A, QCMR and other reports as requested by the DMHAS within the designated time frames. (e.g. Ethnicity Survey)

Reporting requirements for fiscal information shall follow the principles in the Department of Human Services *Contract Reimbursement Manual (CPM)* and *Contract Policy and Information Manual (CPIM)* and the DMHAS Annex C document. All fiscal reports, with the exception of the financial information required in response to this RFP, should be submitted to the DMHAS on the Division's budget matrix.

Quality Assurance:

IFSS must comply with quality assurance standards as published in the New Jersey Register under N.J.A.C. 10:37I, of which the most recent revision became effective October 25, 2016.

IFSS shall be required to collect information on family satisfaction with services and family level of concern for each family enrolled in services. The DMHAS approved instruments used to measure family satisfaction and family level of concern are attached (See RFP Attachment F, IFSS Questionnaire (Family Satisfaction with Services) and Family Concern Survey).

A valid reliable process for by whom and how these instruments will be completed shall be developed and incorporated into the program's policies and procedures. Information on family level of concern shall be made part of each family's record and used in the program's quality assurance procedure. The records shall contain all family level of concern surveys administered by staff at admission into the program, at six months, one year from the six month date and annually thereafter. Level of concern information shall also be collected regarding families with closed case files. If the level of concern survey

is not completed despite reasonable and diligent staff attempts to do so, the record shall note these attempts. Family satisfaction information must be kept confidential and not be included in individual family records.

A family activity log shall be made a part of each family's record. Minimally the log shall indicate the type of service provided, who provided the service, the date the service was provided, the location, the duration, and who used the service.

The DMHAS reserves the right to request aggregated reports on the above information from time to time which shall include the most recent level of concern and level of satisfaction with services.

V. General Contracting Information

Bidders must currently meet or be able to meet the terms and conditions of the Department of Human Services (DHS) contracting rules and regulations as set forth in the Standard Language Document (SLD), the Contract Reimbursement Manual (CRM), and the Contract Policy and Information Manual (CPIM). These documents are available on the DHS website at: <http://www.state.nj.us/humanservices/olra/ocpm/resources/manuals/>

Bidders are required to comply with the Affirmative Action Requirements of Public Law 1975, c. 124 (N.J.A.C. 17:27) and the requirements of the Americans with Disabilities Act of 1991 (P.L. 101-336).

Budgets should be reasonable and reflect the scope of responsibilities in order to accomplish the goals of this project.

All bidders will be notified in writing of the State's intent to award a contract. All proposals are considered public information and will be made available for a defined period after announcement of the contract award and prior to final award, as well as through the State Open Public Records Act process at the conclusion of the RFP process.

The contract awarded as a result of this RFP may be renewable for one (1) year at DMHAS' sole discretion and with the agreement of the awardee. Funds may only be used to support services that are specific to this award; hence, this funding may not be used to supplant or duplicate existing funding streams. DMHAS will provide annualized funding of \$216,291 subject to State appropriations for Somerset County and annualized funding of \$154,564 for Sussex County. One-time costs for Somerset will be \$54,072 and one-time costs for Sussex will be \$38,641. Actual funding levels will depend on the availability of funds and satisfactory performance.

Should service provision be delayed through no fault of the provider, funding continuation will be considered on a case-by-case basis based upon the circumstances creating the delay. In no case shall the DMHAS continue funding when service

commencement commitments are not met, and in no case shall funding be provided for a period of non-service provision in excess of three (3) months. In the event that the timeframe will be longer than three (3) months, DMHAS must be notified so the circumstances resulting in the anticipated delay may be reviewed and addressed. Should services not be rendered, funds provided pursuant to this agreement shall be returned to DMHAS.

The bidder must comply with all rules and regulations for any DMHAS program element of service proposed by the bidder. Additionally, please take note of Community Mental Health Services Regulations, N.J.A.C. 10:37, which apply to all contracted mental health services. These regulations can be accessed at <http://www.state.nj.us/humanservices/providers/rulefees/regs/>

VI. Mandatory Bidders Conference

A bidder intending to submit a proposal in response to this RFP must attend a Mandatory Bidders Conference. It is the responsibility of the bidder to arrive promptly at the beginning of the Mandatory Bidders Conference and sign in to confirm attendance. A proposal submitted by a bidder not in attendance will not be considered. The Mandatory Bidders Conference will be held as follows:

Date: August 2, 2017
Time: 10am
Location: 222 South Warren Street, Trenton
1st floor conference room

The Mandatory Bidders Conference will provide the bidder with an opportunity to ask questions about the RFP requirements, the award process, and to clarify technical aspects of the RFP. This ensures that all potential bidders have equal access to information. Questions regarding intent or allowable responses to the RFP, outside the Mandatory Bidders Conference, are not permitted. Specific individual guidance will not be provided to individual bidders at any time.

Potential respondents to this RFP are requested to register for the Mandatory Bidders Conference via the registration link: <https://njsams.rutgers.edu/training/ifss/Register.aspx> Additionally, if you require assistance with this registration link, please contact RFP.Submissions@dhs.state.nj.us no later than two (2) days prior to the Mandatory Bidders Conference.

The meeting room and facility is accessible to individuals with physical disabilities. Anyone who requires special accommodations should notify RFP.Submissions@dhs.state.nj.us. For sign language interpretation, please notify RFP.Submissions@dhs.state.nj.us at least five (5) business days in advance of the

Mandatory Bidders Conference. Once reserved, a minimum of 48 hours is necessary to cancel this service, or else the cost will be billed to the requestor.

VII. Required Proposal Content

All bidders must submit a written narrative proposal that addresses the following topics, adheres to all instructions and includes required supporting documentation noted below:

Funding Proposal Cover Sheet (RFP Attachment A)

Bidder's Organization, History and Experience (5 points)

Provide a brief and concise summary of the bidder's background and experience in implementing this or related types of services and explain how the bidder is qualified to fulfill the obligations of the RFP. The written narrative should:

1. Describe the agency's history, mission, purpose, current licenses and modalities, and record of accomplishments. Explain the work with the target population and the number of years' experience working with the target population;
2. Describe the bidder's background and experience in implementing this or related types of services. Describe why the bidder is the most appropriate and best qualified to implement this program in the target service area;
3. Summarize the bidder's administrative and organizational capacity to establish and implement sound administrative practices and successfully carry out the proposed program;
4. Describe the bidder's current status and history relative to debarment by any State, Federal or local government agency. If there is debarment activity, it must be explained with supporting documentation as an appendix to the bidder's proposal;
5. Provide a description of all active litigation in which the bidder is involved, including pending litigation of which the bidder has received notice;
6. Include a description of the bidder's ability to provide culturally competent services;
7. Document that the bidder's submissions are up-to-date in New Jersey Substance Abuse Management System (NJSAMS), Unified Service Transaction Form (USTF), Quarterly Contract Monitoring Report (QCMR) and Bed Enrollment Data System (BEDS);
8. Describe the bidder's current status and compliance with contract commitments in regard to programmatic performance and level of service, if applicable.

Project Description (30 points)

In this section, the bidder is to provide an overview of how the services detailed in the scope of work will be implemented and the timeframes involved, specifically addressing the following:

1. The bidder's approach satisfies the requirements as stated in the RFP.
2. The bidder's understanding of the project goals and measurable objectives.
3. The process that the bidder utilized to determine the proposed model of services.

4. Provide a monthly timeline, including a brief narrative, of the proposed implementation activities and schedule of deliverables from award through full phase-in.
5. Provide how the bidder will identify eligibility requirements and referral processes, including description of the priorities for accepting families into the program and the procedures to be followed to ensure that families meet the eligibility requirements for admission ;
6. Provide description of referral mechanisms and processes (formal and informal) and community outreach procedures including to state hospitals and local inpatient units
7. Describe agency's marketing strategy to assure that the target population is made aware of the accessibility and scope of the services proposed.
8. Describe termination procedures, including a description of family and program initiated procedures, appeals process and follow-up services, as appropriate. Include a list of the various reasons for termination.
9. Description of all anticipated barriers and potential problems the bidder foresees itself and/or the State encountering in the successful realization of the services described here in. Services must begin within four (4) months of award.
10. Description of any other resources needed by the bidder to satisfy the requirements of the contract resulting from this RFP.
11. Description of frequency and location of services, and its intended impact on the target population. Describe how transportation will be provided or arranged for IFSS activities. Provide a schedule during which services will be delivered (include times for both on site and off site activities).
12. Description of service activities or methods that staff will employ to achieve the service objectives;
13. Description of agency's capability to provide each component of IFSS and achieve the desired outcomes. If any service will require a subcontract, please list the provider agency, if known;
14. Description of existing family support resources in Somerset and Sussex Counties and how the proposed program model will coordinate services with them
15. Description of how the applicant intends to individualize services based on assessed family need.
16. Description of how the bidder will involve families in the staff selection process;
17. Description of how the program design will address the cultural and linguistic needs of the target population in Somerset and Sussex Counties;
18. A description of the bidder's last Continuous Quality Improvement effort, identified issue(s), actions taken, and outcome(s).
19. Description of the intake procedures and provide description for referral mechanisms and processes (formal and informal) and community outreach procedures including to state hospitals and local inpatient units;
20. Description of termination procedures, including a description of family and program initiated procedures, appeals process and follow-up services, as appropriate. Include a list of the various reasons for termination.
21. Description of agency's marketing strategy to assure that the target population is made aware of the accessibility and scope of the services proposed.

Outcome(s) and Evaluation (10 points)

Provide the following information related to the projected outcomes associated with the proposal as well as any evaluation method that will be utilized to measure successes and/or setbacks associated with this project:

1. The bidder's approach to measurement of consumer satisfaction.
2. The bidder's measurement of the achievement of identified goals and objectives.
3. The evaluation of contract outcomes.
4. Description of the management and supervision methods that will be used in monitoring performance of service activities.
5. Description of all tools to be used in the evaluation.
6. Description of how family members will be incorporated into the outcome and evaluation process.
7. Details about any an outside entity planned for use to conduct the evaluation, including but not limited to the entity's name, contact information, brief description of credentials and experience conducting program evaluation.
8. Tools and activities the bidder will implement to ensure fidelity to the evidence-based practice.

Staffing (20 points)

Bidders must determine staff structure to satisfy the contract requirements. Bidders should describe the proposed staffing structure and identify how many staff will be hired to meet the needs of the program.

1. Describe the composition and skill set of the proposed program team, including staff qualifications.
2. Provide details of the Full Time Equivalent (FTE) staffing required to satisfy the contract scope of work. Describe proposed staff qualifications, including professional licensing and related experience. Details should include currently on-board or to be hired staff, with details of the recruitment effort. Identify bilingual staff.
3. A description of the management and supervision methods that will be used in monitoring performance of service activities.
4. Provide a description of the space that will be devoted to staff offices and activities.
5. Provide copies of job descriptions or resumes as an appendix – limited to two (2) pages each – for all proposed staff.
6. Identify the number of work hours per week that constitute each FTE in the bidder's proposal. If applicable, define the Part Time Equivalent (PTE) work hours.
7. Description of the proposed organizational structure, including the submission of an organizational chart as an appendix to the bidder's proposal.
8. The bidder's hiring policies, including background and credential checks, as well as handling of prior criminal convictions.
9. The approach for supervision of clinical staff, if applicable.
10. A list of the bidder's board members and current term, including each member's professional licensure and organizational affiliation(s). The bidder's proposal must identify each board member who is also an employee of the bidder or an affiliate of

the bidder. The proposal shall indicate if the Board of Directors vote on contract-related matters.

11. A list of names of consultants the bidder intends to utilize for the contract resulting from this RFP, including each consultant's professional licensure and organizational affiliation(s). Each consultant must be further described as to whether they are also a board member and, if so, whether they are a voting member. The bidder must identify all reimbursement the consultant received as a board member over the last twelve (12) months.

Facilities, Logistics, Equipment (5 points)

The bidder should detail its facilities where its normal business operations will be performed and identify equipment and other logistical issues, including at a minimum:

1. A description of the manner in which tangible assets, i.e., computers, phones, other special service equipment, etc., will be acquired and allocated.
2. A description of the bidder's Americans with Disabilities Act (ADA) accessibility to its facilities and/or offices for individuals with disabilities.
3. A description of the space that will be devoted to staff offices and activities.

Budget (30 points)

DMHAS will consider the cost efficiency of the proposed budget as it relates to the scope of work. Therefore, bidders must clearly indicate how this funding will be used to meet the program goals and/or requirements. In addition to the required Budget forms, bidders are asked to provide budget notes.

The budget should be reasonable and reflect the scope of responsibilities required to accomplish the goals of this project. All costs associated with the completion of the project must be delineated and the budget notes must clearly articulate the details of all proposed budget items including a description of miscellaneous expenses and other costs.

1. A detailed budget using the Annex B Excel template is required. The standard budget categories for expenses include: A. Personnel, B. Consultants and Professionals, C. Materials & Supplies, D. Facility Costs, E. Specific Assistance to Clients, and F. Other. Supporting schedules for Revenue and General and Administrative Costs Allocation are also required. The Excel budget template will be emailed to all attendees from the Mandatory Bidders Conference. The budget must include two (2) separate, clearly labeled sections:
 - a. Section 1 – Full annualized operating costs to satisfy the scope of work detailed in the RFP and revenues excluding one-time costs; and
 - b. Section 2 - Proposed one-time costs.
2. Budget Notes that detail and explain the proposed budget methodology and estimates and assumptions made for expenses and the calculations/computations to support the proposed budget. The State's proposal reviewers need to fully

understand the bidder's budget projections from the information presented in its proposal. Failure to provide adequate information could result in lower ranking of the proposal. Budget Notes, to the extent possible, should be displayed on the Excel template itself.

3. The name and address of each organization – other than third-party payers – providing support and/or money to help fund the program for which the proposal is being submitted.
4. For all proposed personnel, the template should identify the staff position titles and total hours per workweek.
5. Identify the number of hours per clinical consultant.
6. Staff fringe benefit expenses, which may be presented as a percentage factor of total salary costs, should be consistent with the bidder's current fringe benefit package.
7. If applicable, General & Administrative (G&A) expenses, otherwise known as indirect or overhead costs, should be included if attributable and allocable to the proposed program. Since administrative costs for existing DMHAS programs reallocated to a new program do not require new DMHAS resources, a bidder that currently contracts with DMHAS should limit its G&A expense projection to “new” G&A only by showing the full amount of G&A as an expense and the off-set savings from other programs’ G&A in the revenue section.
8. Written assurance that if the bidder receives an award pursuant to this RFP, it will pursue all available sources of revenue and support upon award and in future contracts, including agreement to obtain approval as a Medicaid-eligible provider.

Appendices

The following items must be included as appendices with the bidder's proposal, limiting appendices to a total of forty (40) pages:

1. Bidder mission statement;
2. Organizational chart;
3. Job descriptions of key personnel;
4. Resumes of proposed personnel if on staff, limited to two (2) pages each;
5. A description of all pending and in-process audits identifying the requestor, the firm's name and telephone number, and the type and scope of the audit;
6. List of the board of directors, officers and terms;
7. Copy of documentation of the bidder's charitable registration status;
8. Original and/or copies of letters of commitment/support;
9. Department of Human Services Statement of Assurances (RFP Attachment C);
10. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions (RFP Attachment D);
11. Disclosure of Investment in Iran (www.nj.gov/treasury/purchase/forms.shtml); and
12. Statement of Bidder/Vendor Ownership Disclosure (www.nj.gov/treasury/purchase/forms.shtml).

The documents listed below are also required with the proposal, **unless the bidder has a current contract with DMHAS and these documents are current and on file with DMHAS.**

1. Most recent single audit report (A133) or certified statements (submit only two [2] copies); and
2. Any other audits performed in the last two (2) years (submit only two [2] copies).

VIII. Submission of Proposal Requirements

DMHAS assumes no responsibility and bears no liability for costs incurred by the bidder in the preparation and submittal of a proposal in response to this RFP. The narrative portion of the proposal should not exceed 20 pages, be single-spaced with one (1") inch margins, and no smaller than twelve (12) point Arial, Courier or Times New Roman font. For example, if the bidder's narrative starts on page 3 and ends on page 23 it is 21 pages long, not 20 pages. DMHAS will not consider any information submitted beyond the page limit for RFP evaluation purposes.

The budget notes and appendix items do not count towards the narrative page limit. Proposals must be submitted no later than 4:00 p.m. on Aug 30, 2017. All bidders are required to submit one (1) original and five (5) copies of the proposal narrative, budget and appendices (six [6] total proposal packages) to the following address:

For U.S. Postal Service delivery:

Alicia Meyer
Division of Mental Health and Addiction Services
PO Box 700
Trenton, NJ 08625-0700

OR

For private delivery vendor such as UPS or FedEx:

Alicia Meyer
Division of Mental Health and Addiction Services
222 South Warren Street, 3rd Floor
Trenton, NJ 08608

The bidder may mail or hand deliver its proposal, however, DMHAS is not responsible for items mailed but not received by the due date. Note that U.S. Postal Service two-day priority mail delivery to the post office box listed above may result in the bidder's proposal not arriving timely and, therefore, being deemed ineligible for RFP evaluation. The bidder will not be notified that its proposal has been received. The State will not accept facsimile transmission of proposals.

In addition to the required hard copies, the bidder must also submit its proposal (including budget in EXCEL format, budget notes, and appendices) electronically by the deadline using a file transfer protocol site. Username and password are case sensitive and must be typed exactly as shown below. Once logged in, the upload button is on the

upper left side. Upload the proposal and budget files separately, including the bidder's name in both file names. Click on the green check mark in order to submit the files. Once the upload is complete, click the red logout button at the top right of the screen.

Go to: <https://ftpw.dhs.state.nj.us>.

Username - xbpupload

Password - Network1!

Directory - /ftp-dmhas/xbpupload

Proposal(s) must also be submitted to the County Mental Health Administrators for Somerset and Sussex Counties. Please submit four (4) copies to:

Pam Mastro - Email: mastro@co.somerset.nj.us for Somerset County

Cindy Armstrong – Email: carmstrong@sussex.nj.us for Sussex County

IX. Review of Proposals

There will be a review process for all timely submitted proposals. DMHAS will convene a review committee of public employees to conduct a review of each proposal accepted for review.

The bidder must obtain a minimum score of 70 points out of 100 points for the proposal narrative and budget sections in order to be considered eligible for funding.

DMHAS will award up to 20 points for fiscal viability, using a standardized scoring rubric based on the audit, which will be added to the average score given to the proposal from the review committee. Thus, the maximum points any proposal can receive is 120 points, which includes the combined score from the proposal narrative and budget as well as fiscal viability.

In addition, if a bidder is determined, in DMHAS' sole discretion, to be insolvent or to present insolvency within the twelve (12) months after bid submission, DMHAS will deem the proposal ineligible for contract award.

Contract award recommendations will be based on such factors as the proposal scope, quality and appropriateness, bidder history and experience, as well as budget reasonableness. The review committee will look for evidence of cultural competence in each section of the narrative. The review committee may choose to visit a bidder's existing program(s), invite a bidder for interview, and/or review any programmatic or fiscal documents in the possession of DMHAS. The bidder is advised that the contract award may be conditional upon final contract and budget negotiation.

DMHAS reserves the right to reject any and all proposals when circumstances indicate that it is in its best interest to do so. DMHAS' best interests in this context include, but are not limited to, loss of funding, inability of the bidder(s) to provide adequate services, an indication of misrepresentation of information and/or non-compliance with State and

federal laws and regulations, existing DHS contracts, and procedures set forth in DHS Policy Circular P1.04 (<http://www.state.nj.us/humanservices/ocpm/home/resources/manuals/index.html>).

DMHAS recognizes the invaluable perspective and knowledge that consumers, family members and County Mental Health Boards possess. Input from these groups is an integral component of a system that holds wellness and recovery principles at its core. Consequently, DMHAS will convene an advisory group consisting of consumers and family members to provide input to the review committee regarding the proposals submitted.

The Somerset and Sussex County Mental Health Boards recommendations and comments will be received by DMHAS no later than October 3, 2017. This input will be incorporated in the final deliberations of the review committee.

DMHAS will notify all bidders of contract awards, contingent upon the satisfactory final negotiation of a contract, by October 12, 2017. It is expected that services will commence within four (4) months of the award.

X. Appeal of Award Decisions

An appeal of any award decision may be made only by a respondent to this RFP. All appeals must be made in writing and be received by DMHAS at the address below no later than 4:00 p.m. on October 19, 2017. The written appeal must clearly set forth the basis for the appeal.

Appeal correspondence should be addressed to:

Valerie Mielke, Assistant Commissioner
Division of Mental Health & Addiction Services
Capital Place One, 3rd Floor
222 South Warren Street
PO Box 700
Trenton, NJ 08625-0700

Please note that all costs incurred in connection with appeals of DMHAS decisions are considered unallowable cost for the purpose of DMHAS contract funding.

DMHAS will review all appeals and render a final decision by October 26, 2017. Contract award(s) will not be considered final until all timely filed appeals have been reviewed and final decisions rendered.

XI. Post Award Required Documentation

Upon final contract award announcement, the successful bidder(s) must be prepared to submit (if not already on file), one (1) original signed document for those requiring a

signature or copy of the following documentation (unless noted otherwise) in order to process the contract in a timely manner, as well as any other contract documents required by DHS/DMHAS.

1. Most recent IRS Form 990/IRS Form 1120, and Pension Form 5500 (if applicable) (submit two [2] copies);
2. Copy of the Annual Report-Charitable Organization (for information visit: http://www.state.nj.us/treasury/revenue/dcr/programs/ann_rpt.shtml);
3. A list of all current contracts and grants as well as those for which the bidder has applied from any Federal, state, local government or private agency during the contract term proposed herein, including awarding agency name, amount, period of performance, and purpose of the contract/grant, as well as a contact name for each award and the phone number;
4. Proof of insurance naming the State of New Jersey, Department of Human Services, Division of Mental Health and Addiction Services, PO Box 700, Trenton, NJ 08625-0700 as an additional insured;
5. Board Resolution identifying the authorized staff and signatories for contract actions on behalf of the bidder;
6. Current Agency By-laws;
7. Current Personnel Manual or Employee Handbook;
8. Copy of Lease or Mortgage;
9. Certificate of Incorporation;
10. Co-occurring policies and procedures;
11. Policies regarding the use of medications, if applicable;
12. Policies regarding Recovery Support, specifically peer support services;
13. Conflict of Interest Policy;
14. Affirmative Action Policy;
15. Affirmative Action Certificate of Employee Information Report, newly completed AA 302 form, or a copy of Federal Letter of Approval verifying operation under a federally approved or sanctioned Affirmative Action program. (AA Certificate must be submitted within 60 days of submitting completed AA302 form to Office of Contract Compliance);
16. A copy of all applicable licenses;
17. Local Certificates of Occupancy;
18. Current State of New Jersey Business Registration;
19. Procurement Policy;
20. Current equipment inventory of items purchased with DHS funds (Note: the inventory shall include: a description of the item [make, model], a State identifying number or code, original date of purchase, purchase price, date of receipt, location at the Provider Agency, person(s) assigned to the equipment, etc.);
21. All subcontracts or consultant agreements, related to the DHS contract, signed and dated by both parties;
22. Business Associate Agreement (BAA) for Health Insurance Portability Accountability Act of 1996 compliance, if applicable, signed and dated;
23. Updated single audit report (A133) or certified statements, if differs from one submitted with proposal;

24. Business Registration (online inquiry to obtain copy at https://www1.state.nj.us/TYTR_BRC/jsp/BRCLoginJsp.jsp; for an entity doing business with the State for the first time, it may register at <http://www.nj.gov/treasury/revenue>);
25. Source Disclosure (EO129) (www.nj.gov/treasury/purchase/forms.shtml); and
26. Chapter 51 Pay-to-Play Certification (www.nj.gov/treasury/purchase/forms.shtml).

XII. Attachments

Attachment A – Proposal Cover Sheet

_____ Date Received

**STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES**
Division of Mental Health and Addiction Services
Proposal Cover Sheet

Name of RFP _____

Incorporated Name of Bidder: _____

Type: Public _____ Profit _____ Non-Profit _____ Hospital-Based _____

Federal ID Number: _____ Charities Reg. Number (if applicable) _____

Address of Bidder: _____

Contact Person Name and Title: _____

Phone No.: _____ Email Address: _____

Total dollar amount requested: _____ Fiscal Year End: _____

Funding Period: From _____ to _____

Total number of unduplicated consumers to be served: _____

County in which services are to be provided: _____

Brief description of services by program name and level of service to be provided:

Authorization: Chief Executive Officer (printed name): _____

Signature: _____ Date: _____

Attachment B – Addendum to RFP for Social Service and Training Contracts

STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES

ADDENDUM TO REQUEST FOR PROPOSAL FOR SOCIAL SERVICE AND TRAINING CONTRACTS

Executive Order No. 189 establishes the expected standard of responsibility for all parties that enter into a contract with the State of New Jersey. All such parties must meet a standard of responsibility that assures the State and its citizens that such parties will compete and perform honestly in their dealings with the State and avoid conflicts of interest.

As used in this document, "provider agency" or "provider" means any person, firm, corporation, or other entity or representative or employee thereof that offers or proposes to provide goods or services to or performs any contract for the Department of Human Services.

In compliance with Paragraph 3 of Executive Order No. 189, no provider agency shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any State officer or employee or special State officer or employee, as defined by N.J.S.A. 52:13D-13b and e, in the Department of the Treasury or any other agency with which such provider agency transacts or offers or proposes to transact business, or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13i, of any such officer or employee, or any partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13g.

The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any State officer or employee or special State officer or employee from any provider agency shall be reported in writing forthwith by the provider agency to the Attorney General and the Executive Commission on Ethical Standards.

No provider agency may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such provider agency to, any State officer or employee or special State officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to any State agency or any instrumentality thereof, or with any person, firm or entity with which he is employed or associated or in which he has an interest within the meaning of N.J.S.A. 52:13D-13g. Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, which may grant a waiver of this restriction upon application of the State officer or employee or special State officer or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest.

No provider agency shall influence, or attempt to influence or cause to be influenced, any State officer or employee or special State officer or employee in his official capacity in any manner which might tend to impair the objectivity or independence of judgment of said officer or employee.

No provider agency shall cause or influence, or attempt to cause or influence, any State officer or employee or special State officer or employee to use, or attempt to use, his official position to secure unwarranted privileges or advantages for the provider agency or any other person.

The provisions cited above shall not be construed to prohibit a State officer or employee or special State officer or employee from receiving gifts from or contracting with provider agencies under the same terms and conditions as are offered or made available to members of the general public subject to any guidelines the Executive Commission on Ethical Standards may promulgate.

Attachment C – Statement of Assurances

Department of Human Services Statement of Assurances

As the duly authorized Chief Executive Officer/Administrator, I am aware that submission to the Department of Human Services of the accompanying application constitutes the creation of a public document that may be made available upon request at the completion of the RFP process. This may include the application, budget, and list of applicants (bidder's list). In addition, I certify that the applicant:

- Has legal authority to apply for the funds made available under the requirements of the RFP, and has the institutional, managerial and financial capacity (including funds sufficient to pay the non-Federal/State share of project costs, as appropriate) to ensure proper planning, management and completion of the project described in this application.
- Will give the New Jersey Department of Human Services, or its authorized representatives, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with Generally Accepted Accounting Principles (GAAP). Will give proper notice to the independent auditor that DHS will rely upon the fiscal year end audit report to demonstrate compliance with the terms of the contract.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. This means that the applicant did not have any involvement in the preparation of the RFI, including development of specifications, requirements, statement of works, or the evaluation of the RFI applications/bids.
- Will comply with all federal and State statutes and regulations relating to non-discrimination. These include but are not limited to: 1) Title VI of the Civil Rights Act of 1964 (P.L. 88-352; 34 CFR Part 100) which prohibits discrimination based on race, color or national origin; 2) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794; 34 CFR Part 104), which prohibits discrimination based on handicaps and the Americans with Disabilities Act (ADA), 42 U.S.C. 12101 et seq.; 3) Age Discrimination Act of 1975, as amended (42 U.S.C. 6101 et. seq.; 45 CFR part 90), which prohibits discrimination on the basis of age; 4) P.L. 2975, Chapter 127, of the State of New Jersey (N.J.S.A. 10:5-31 et. seq.) and associated executive orders pertaining to affirmative action and non-discrimination on public contracts; 5) federal Equal Employment Opportunities Act; and 6) Affirmative Action Requirements of PL 1975 c. 127 (NJAC 17:27).
- Will comply with all applicable federal and State laws and regulations.
- Will comply with the Davis-Bacon Act, 40 U.S.C. 276a-276a-5 (29 CFR 5.5) and the New Jersey Prevailing Wage Act, N.J.S.A. 34:11-56.27 et seq. and all regulations pertaining thereto.
- Is in compliance, for all contracts in excess of \$100,000, with the Byrd Anti-Lobbying amendment, incorporated at Title 31 U.S.C. 1352. This certification extends to all lower tier subcontracts as well.

- Has included a statement of explanation regarding any and all involvement in any litigation, criminal or civil.
- Has signed the certification in compliance with federal Executive Orders 12549 and 12689 and State Executive Order 34 and is not presently debarred, proposed for debarment, declared ineligible, or voluntarily excluded. The applicant will have signed certifications on file for all subcontracted funds.
- Understands that this provider agency is an independent, private employer with all the rights and obligations of such, and is not a political subdivision of the Department of Human Services.
- Understands that unresolved monies owed the Department and/or the State of New Jersey may preclude the receipt of this award.

Applicant Organization

Signature: CEO or equivalent

Date

Typed Name and Title

6/97

Attachment D - Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

READ THE ATTACHED INSTRUCTIONS BEFORE SIGNING THIS CERTIFICATION. THE INSTRUCTIONS ARE AN INTEGRAL PART OF THE CERTIFICATION.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department or agency.
2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Name and Title of Authorized Representative

Signature

Date

This certification is required by the regulations implementing Executive order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510.

**Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions**

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of facts upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-- Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-Procurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

ATTACHMENT E

General Information

NAME OF AGENCY: _____

Relationship to family member receiving services: (Please circle one)

- | | |
|-----------------------|--------------------|
| <i>Spouse</i> | <i>Sibling</i> |
| <i>Child</i> | <i>Grandparent</i> |
| <i>Parent</i> | <i>Friend</i> |
| <i>Legal Guardian</i> | <i>Other</i> |

AGE:

SEX:

When was the last time you received Intensive Family Support Services at this agency?

IFSS QUESTIONNAIRE

Please answer all of the questions, and circle your response. Space is provided at the end of each section, for you to write any additional comments, concerns or ideas you may have specific to that issue. You may use the back of the page if you need more space.

1. Was it easy to find out about this program?
Yes No

2. How did you find out about this program? _____

3. Were you referred to this program?
Yes No
(If Yes, by whom?) _____

4. When you call the agency, are you treated courteously?
Yes No Sometimes

5. Are you seen quickly enough when you make contact with or ask to speak to staff at this agency?
Yes No Sometimes

6. Is this agency clean and comfortable?
Yes No Not Applicable

7. Is staff courteous and helpful?
Yes No Sometimes

8. Is staff competent and knowledgeable?
Yes No Sometimes

9. Are your concerns and preferences acknowledged, addressed and utilized?
Yes No Sometimes

10. Is staff sensitive to the problems of having a mentally ill relative?
Yes No Sometimes

11. Is staff helpful with mental health providers and the mental health system?
Yes No Sometimes Not Applicable

12. Were you informed of other family support services available in your county?
Yes No
13. Were you referred to the NAMI (National Alliance on Mental Illness) chapter in your county?
Yes No
14. Were you able to learn things (i.e., techniques, strategies) to help you with your ill family member?
Yes No Sometimes
15. Is information and services offered relevant to your situation?
Yes No Sometimes
16. Does the agency have a staff person who can speak with you in your language and understand your culture?
Yes No
17. Does the staff teach you how to deal with an emergency (i.e., who to call)
Yes No Sometimes
18. Do you benefit from the services you receive?
Yes No Sometimes
19. Would you recommend this program to others?
Yes No Maybe

What do you hope/wish that you will get from this agency?

What do you like Most about the agency?

What do you like Least about the agency?

What advice, suggestions or comments would you like to give to the agency?

Thank you very much for your assistance and cooperation in this matter.

**Intensive Family Support Services (IFSS)
Family Concerns Survey**

Date:

Initials:

**In the past six months, because of your relative's mental illness, to what extent have you:
(Circle ONE answer for each statement)**

	A LOT	SOME	A LITTLE	NOT AT ALL
1. Had financial problems	4	3	2	1
2. Found your financial security at risk	4	3	2	1
3. Had to miss regularly scheduled activities (work, school, volunteer, etc.)	4	3	2	1
4. Found it difficult to concentrate on your own activities	4	3	2	1
5. Had to change your personal plans, such as taking a new job or going on vacation	4	3	2	1
6. Cut down on leisure time	4	3	2	1
7. Found the household routine was upset	4	3	2	1
8. Had less time to spend with friends	4	3	2	1
9. Neglected other family member's needs	4	3	2	1
10. Experienced family frictions and arguments	4	3	2	1
11. Experienced frictions with neighbors, friends or relatives outside the home	4	3	2	1
12. Became embarrassed because of your ill relative's behavior	4	3	2	1
13. Felt guilty because you were not doing enough to help	4	3	2	1
14. Felt guilty because you felt responsible for causing your ill relative's problems	4	3	2	1

	A LOT	SOME	A LITTLE	NOT AT ALL
15. Resented your relative because she/he made to many demands on you	4	3	2	1
16. Felt trapped by your care giving role	4	3	2	1
17. Were upset about how much your ill relative had changed from his/her former self	4	3	2	1
18. Worried about how your behavior with your relative might make the illness worse	4	3	2	1
19. Worried about what the future holds for your relative	4	3	2	1
20. Found the stigma of the illness upsetting	4	3	2	1
21. Experienced physical strain ,fatigue or other physical problems	4	3	2	1
22. Felt alone	4	3	2	1
23. Felt mental health professionals were not willing to talk to you	4	3	2	1
24. Felt that your ill relative was not getting the mental health services you felt she/he needed.	4	3	2	1