



**Care Coordination Team for Child Welfare Families  
(CCT-CW)**

**For Broward County**

**Request for Letters of Interest (RLI)**

**Solicitation # 19-001**

**Available: July 30, 2019 – August 30, 2019**



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## **I. BACKGROUND**

The Broward Behavioral Health Coalition, Inc. (BBHC) was created in 2011 and was selected by the Florida Department of Children and Families (DCF) as Broward County’s managing entity (ME) as defined in §394.9082, Florida Statutes, to manage the daily operational delivery of mental health and substance abuse services through a coordinated system of care.

BBHC’s mission is to advocate and ensure an effective and efficient behavioral health system of care is available in Broward County. Pursuant to this goal and its authority, BBHC has determined the array of services needed to meet the behavioral health care needs of the behavioral health community and seeks qualified providers to join the provider network to deliver services identified to more fully serve the behavioral health community’s needs in Broward County.

## **II. STATEMENT OF PURPOSE**

To procure Care Coordination Teams-Child Welfare (CW) for child welfare families in Broward County.

### **A. OVERVIEW**

Section 394.4573(1)(a), F.S., defines Care Coordination as “the implementation of deliberate and planned organizational relationships and service procedures that improve the effectiveness and efficiency of the behavioral health system by engaging in purposeful interactions with individuals who are not yet effectively connected with services to ensure service linkage.”

#### **1. PROGRAM DESCRIPTION**

Care Coordination is the organization of care activities between two or more participants including the family served (with consent) and involved in the family’s care to facilitate the effective delivery of behavioral health, primary health care, developmental, and mental health services. The population to be served through Care Coordination will be child welfare families that have experienced a judicial removal episode due to caregiver Substance Use Disorder (SUD), with priority given to caregivers with Opiate Use Disorder (OUD). It offers the opportunity to share information in a timely manner and ensures the families being served are followed and supported as they progress through their recovery process. The standard practice in child welfare has been that once the family is no longer under protective supervision by the Department, they may no longer receive the services and support needed to maintain the gains achieved during the life of the case. Due to a lack of support, many of these families cycle through the child welfare system experiencing multiple episodes of removal. In turn, the caregiver’s cycle through the mental health/substance abuse system, and the children experience the repeated trauma of removal and the negative impact of their caregivers(s) SUD. This leads to the de-compensation of the family unit and creates immense costs for multiple publicly funded systems.

## **2. Program Goals**

The goals for the CCT-CW program include, but are not limited to:

### **Care Coordination-CW Short-Term Goals:**

- Prioritize the family’s wellness and enhance their natural supports within the community.
- Improve transitions from acute and restrictive services mandated by child welfare to: community-based services, family supports, and the maintenance of long-term family and individual recovery.
- Increase overall family stability and wellbeing, while decreasing the likelihood of another removal episode.

### **Care Coordination-CW Long-Term Goals:**

- Help service providers shift from an acute care model to a Recovery-Oriented System of Care (ROSC) Model.
- Help communities provide a wide array of services and supports tailored to meet the diverse needs specific to each family and each member within the family unit.

## **3. Individuals to Be Served**

a. The CCT-CW will provide services to:

- Families who have experienced a child welfare removal episode due to caregiver SUD, with priority given to caregivers with OUD.
- Families identified by child welfare with a case plan goal of reunification.
- Child welfare families who are not effectively connected with services and supports.
- Child welfare families who are transitioning successfully from mandated child welfare services, to effective community-based care.
- Child welfare families who are high utilizers of services in behavioral health and primary care.
- Child welfare family’s needs can include at-risk to manageable substance abuse problems with a high recidivism rate into SUD treatment and further episodes of removal due to caregiver SUD/OUD.

## **B. NETWORK SERVICE PROVIDER RESPONSIBILITIES**

**1. Staffing Requirements - To be determined based on provider proposal regarding facility size.**

### **a. Minimum Staffing Standards**

The CCT-CW staffing configuration should be comprised of practitioners with a diverse range of skills and expertise. This enhances the team’s ability to provide comprehensive care based on the family’s needs. The CCT-CW response shall identify how its policies, procedures, and practices shall ensure adequate minimum staffing requirements are met.

**(1)** The CCT-CW shall employ a minimum of:

- (a)** 0.5 Part-Time (FTE) Licensed Clinical Supervisor
- (b)** 1.0 Full-Time Case Manager
- (c)** 1.0 Full-Time Certified Peer Specialist

**(2)** The CCT-CW shall be required to maintain a Case Manager-to-Individual ratio based on staffing requirements with a case load of 10-15 families (refer to CCT-CW manual)

**(3)** The CCT-CW shall designate a Case Manager as the team specialist with experience in the following supportive domains:

- (a)** Expertise in assisting families within the child welfare system.
- (b)** Expertise in assisting families to access community resources needed to support SUD recovery.

**b. Staff Roles and Qualifications**

**(1) CCT-CW Licensed Clinical Supervisor (0.5 FTE)**

Must be a part- time employee and possess a Florida license in one of the following professions:

- (c)** Mental Health Counseling
- (d)** Clinical Social Work
- (e)** Marriage & Family Therapy

The Supervisor is responsible for administrative and clinical supervision of the CCT-CW and functions as a practicing clinician. The Administrator/Program Director must have at least five (5) years of full-time work experience with children and families in the child welfare system, as well as prior supervisory experience. This position will ensure that the program complies with Chapter 394, F.S. and Chapters 65E-5, 65E-12, and 65E-14, F.A.C. Staff is to be culturally and linguistically competent.

**(2) Case Manager (1.0 FTE)**

The Case Manager must have a minimum of a bachelor's degree in human services. Case Managers must have a minimum of one (1) year of work experience with children and families within the child welfare system. Case Managers are to be supervised by the CCT-CW Supervisor. Case Managers are primarily responsible for providing or coordinating the required services on behalf of the families as more fully set forth below. Staff is to be culturally and linguistically competent.

**(3) Certified Peer Specialists (1.0 FTE)**

This individual will use their own unique lived experience to guide and support others who are in recovery. Additionally, they must be trained in, and use the Family Wellness Recovery Action Planning (F-WRAP) recovery model as part of their treatment protocol,

as well as individual WRAP for the caregiver(s). The Peer Specialist must obtain a Certified Recovery Peer Specialist (CRPS-A) certification with the Florida Certification Board within one year of hire. Staff is to be culturally and linguistically competent.

### **C. SERVICES:**

The primary Treatment Model utilized by the Care Coordination Teams is the evidence-based practice (EBP), Critical Time Intervention (CTI). Critical Time Intervention is used to provide recovery-oriented services to individuals and families receiving Care Coordination. This model is on the SAMHSA National Registry of Evidence-Based Programs and Practices (NREPP) and was “designed as a short-term intervention for people adjusting to a “critical time” of transition in their lives”. Within the CTI model, Motivational Interviewing and Family Wellness Recovery Action Planning (F-WRAP) are also utilized to ensure that families receive treatment/ancillary services to meet their needs. The Teams receive training and coaching to ensure program fidelity. More information about CTI can be found on [www.criticaltime.org](http://www.criticaltime.org).

#### **Services Covered Under Care Coordination-CW:**

- Outreach
- Assessment
- Crisis Support/Emergency
- Individual and Family Recovery Support (F-WRAP)
- Intensive Case Management & Case Management
- In-Home and On-Site
- Supportive Housing
- Intervention

### **2. Comprehensive Service and Implementation Plan:**

- (a) Using CTI, The Care Coordination Team provides assessments of the family’s needs, develops and implements an individualized treatment plan for the caregiver(s) and family to meet these needs;
- (b) Locate and coordinate any needed additional services;
- (c) Coordinate service providers;
- (d) Link families to needed services;
- (e) Monitor service delivery;
- (f) Evaluate individual and family outcomes to ensure the participant is receiving the appropriate services;
- (g) Coordinate primary health care;
- (h) Support basic needs such as housing and transportation or other related activities outlined in the individual’s/family’s treatment plan;

- (i) Address family educational and employment service needs;
- (j) Provide Trauma Treatment services as needed.

### III. APPLICATION PROCESS

**A.** Eligible applicants are BBHC pre-qualified entities that have had a physical, business operational presence in Broward County, Florida, for more than one (1) year and a demonstrated history of providing services in the community to the special target populations for at least three (3) years.

**B.** Written Responses to the RLI:

Written responses to this RLI are limited to ten (10) pages, excluding the line item budget and one (1) copy of the most recent audited financial statements, and must clearly identify the specific target population to be served (child welfare families having experienced at least one judicial removal episode) and demonstrate the following:

1. Your organization's experience in working with the specific target population to be served. Be specific. (20 points)
2. Your organization's care coordination staffing capacity and demonstrated cultural and linguistic competence working with the identified target population. (10 points)
3. Your knowledge of, and current involvement with, community systems-building efforts to improve the behavioral health system of care and the benefits of natural supports in Broward County for the specific target population. (20 points)
4. Include an explanation of a detailed description of how you will ensure ongoing fidelity to the CTI model, WRAP and F-WRAP. (20 points)
5. How the proposed services will reduce the reoccurrence of child welfare removal and support family recovery. (30 points)
6. Describe how the CCT-CW will ensure engagement and retention of all referred families, and how CCT-CW will ensure that 80% of service plan goals are achieved. Describe how the Recovery Capital Scale Inventory will be used to assist families in their recovery process. (30 points)

**C. Other Application Requirements:**

1. Agencies may only submit one (1) Response to the RLI.



2. The minimum award per Response is \$150,000 per team; for a total available amount of \$600,000 to purchase four (4) CCT—CW Teams. BBHC reserves the right to award the services requested under this RLI to one or more providers, at BBHC’s sole option.
3. Provide a line-item budget, including proposed personnel and staff credentials, for costs associated with provision of the work described within this RLI. (10 points)
4. Include a breakdown of your proposed units of service including:
  - a. Definition of units to be Provided;
  - b. Number of clients to be served;
  - c. Estimated number of units per client; and
  - d. Estimated cost per unit type.
5. One (1) original and six (6) copies of the response, limited to ten (10) pages as referenced above, along with a flash drive with all the submitted information and one (1) copy of the audited financial statements are required.

**IV. AUDIT REQUIREMENTS AND FISCAL SOUNDNESS**

Applicants must submit one (1) copy of their most recent annual financial statements (within 180 days after the close of the applicant’s most recent fiscal year-end) that have been audited by a Certified Public Accounting (CPA) firm licensed to do business in the State of Florida and prepared in accordance with Generally Accepted Accounting Principles (GAAP), standards contained in Government Auditing Standards, and the Federal Single Audit Standards Uniform Guidance. Applicant agencies with annual total revenues of less than \$500,000 may submit their most recent annual financial statements that have been reviewed or compiled by a CPA firm licensed to do business in the State of Florida and prepared in accordance with GAAP. The Independent Auditor’s Report must contain an unqualified audit opinion without “going concern” disclosures, the Statement of Financial Position must show positive Net Assets and include a statement that the applicant is in compliance with federal single audit standards as set forth in the Uniform Guidance, as applicable.

**V. DUE DATE**

**All responses to this RLI are due on or before August 30, 2019 at 12:00 Noon.**

**There will be no remediation period**

**Late submissions will not be considered.**

**VI. PRE-BID CONFERENCE**





Participation in the **Pre-Bid Conference on August 7, 2019**, at Broward Behavioral Health Coalition, Inc., 3521 West Broward Blvd., Suite 206, Lauderhill, FL 33312 is recommended but not required. It is the only opportunity for verbal discussion, questions and answers about the RLI solicitation. All questions received and answers will be amended to this RLI upon issuance. Prior to your submittal, you will need to check to ensure that you have reviewed all amendments posted.

After the close of the Pre-Bid Conference, there will an opportunity for submission of additional written questions via email as set forth in the Timetable below in Section IX by, **August 12, 2019 @ 12:00 noon**. The subject line of your email should state “CCT-CW Team Program for Broward County, RLI #19-001” to ensure that your question is readily identifiable.

A summary of all verbal and written questions and answers will be posted on the BBHC website at [www.bbhcflorida.org](http://www.bbhcflorida.org) on **August 14, 2019**.

**VII. OUTCOME PERFORMANCE MEASURES**

The following outcome performance measures are required. Submission of a response to this RLI constitutes acceptance of the following program and reporting expectations. All data will be entered into the Provider Portal or any other data collection systems specified by BBHC.

Outcome Statement	Measure Description
Decrease % of Child Welfare families experiencing re-removal episodes (TBD)	Florida Safe Families Network (FSFN) 6 & 12 months after case closure
CCT-CW families will complete 80% of service plan goals	Service plan monitoring
Increase the score of at least 3 items on the Recovery Capital Scale Inventory	Initial scale and every 3 months thereafter
90% of families referred will be engaged and retained in CCT-CW services	Internal data tracking monthly

**VIII. SELECTION PROCESS**



All RLI responses will be evaluated by a Rating Committee comprised of community subject matter experts. Higher ranking numerical scores do not assure a funding recommendation as other factors are considered including, but not limited to, past agency performance; relevant experience. BBHC retains the right to accept, modify, negotiate or reject terms of any responses to this solicitation.

At any time during the selection process, BBHC reserves the right, at its sole and complete discretion, to: (1) conduct face-to-face interviews with any or all, or selected applicants; (2) require submission of additional or revised responses; (3) terminate negotiations or re-open negotiations with any applicant and (4) take other administrative actions necessary to finalize funding awards.

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**IX. TIMETABLE**

ACTIVITY	TIMEFRAME
Date Advertised:	<b>July 30, 2019</b>
Dates Available:	<b>July 30, 2019 through August 30, 2018</b>
Solicitation Conference (Pre-Bid Conference)	<b>August 7, 2019 @ 10:00 a.m.</b> Broward Behavioral Health Coalition 3521 West Broward Blvd., Suite 206, Lauderhill, FL 33312
Submission of Written Questions	<b>August 12, 2019 @ 12 noon via email to:</b> <a href="mailto:Providers.bbhc@CONCORDIABH.COM">Providers.bbhc@CONCORDIABH.COM</a>
Posting of Responses to Written Questions	<b>August 14, 2019 on BBHC's website:</b> <a href="http://www.bbhcflorida.org">www.bbhcflorida.org</a>
<b>Deadline for Receipt of RLI Responses</b>	<b>12:00 p.m. noon, August 30, 2019</b> Carisk Behavioral Health 3521 West Broward Blvd., Suite 205, Lauderhill, FL 33312
Review of RLI	<b>August 30, 2019 through September 9, 2019</b>
Meeting with Reviewers	<b>September 10, 2019 at 1:30pm</b> <b>at Broward Behavioral Health Coalition</b>
Posting of Scores	<b>September 10, 2019 - Broward Behavioral Health Coalition Website</b>
Negotiations Begin in Accordance with Scores	<b>September 11, 2019 through September 13, 2019</b>
Notice of Award	<b>September 20, 2019</b>
Contract Negotiations Begin	<b>September 23, 2019</b>
Contract Begins	<b>October 1, 2019</b>

**X. TERMS OF AGREEMENT**

The initial term of service for contracts awarded under this procurement is October 1, 2019 through June 30, 2020 (9 months). Additional terms may be considered at the sole discretion



of BBHC, are contingent upon availability of funding, agency viability, positive performance and successful re-negotiation of all terms.

## **XI. BACKGROUND SCREENING**

All staff who work in direct contact with children and adults, including employees and volunteers, must comply with Level 2 background screening and fingerprinting requirements in accordance with Chapter 435, and Sections 943.0542, 984.01, 402, 39.001, and 1012.465, Florida Statutes as well as Broward County background screening requirements, as applicable. The program must maintain staff personnel files which reflect that a screening result was received, reviewed, and satisfactorily complied prior to determination of employment eligibility and prior to employment.

## **XII. CONE OF SILENCE**

Interested applicants responding to this solicitation, or person acting on their behalf, may not contact any employee or board member of BBHC, Carisk Behavioral Health, or DCF concerning any aspect of this RLI, except through the submission of questions as described in Section III.A. of this RLI and attendance at the pre-bid conference. This Cone of Silence begins upon the release of the RLI until the posting of the Notice of Award. Violation of this provision may be grounds for disqualification of the response to the RLI.

## **XIII. APPEAL PROCESS**

Protests, appeals, and disputes are limited to procedural grounds.

Whenever a competitive process is utilized, an applicant that is adversely affected by a procedural determination may file a notice of appeal/protest/dispute within seventy-two (72) hours following the receipt of written notification from BBHC of the applicant's failure to advance to the next step of review due to a critical flaw, or within seventy-two (72) hours following the posting of the solicitation decision on the BBHC website or notice of funding awards.

Protests, appeals, or disputes may only challenge a procedural matter related to the solicitation. A protest, appeal, or dispute may not challenge the relative weight of the evaluation criteria Invitation to Negotiate. A protest, appeal, or dispute is limited to challenging errors in procedural due process, errors in mathematical calculations, or omissions by the review team.

Protests, appeals, or disputes must comply with BBHC's Procurement Policy and Procedures, posted on the BBHC website, [www.bbhcflorida.org](http://www.bbhcflorida.org).



When protesting, appealing, or disputing a decision, the protestor must post a bond equal to one percent (1%) of BBHC's estimated contract amount. The bond is not to be filed with the notice of appeal, protest, or dispute but must be filed with the formal written protest, appeal, or dispute within the ten (10) day period for the filing of the formal written protest. The estimated contract amount shall be based upon the contract price submitted by the protestor. If no contract price was submitted, the BBHC shall provide the estimated contract amount to the protestor within 72 hours (excluding Saturday, Sundays, and BBHC holidays) after the notice of protest, appeal, or dispute has been filed. The estimated contract amount is not subject to protest pursuant to subsection 120.57(3), Florida Statutes. The bond shall be conditioned upon the payment of all cost and charges that are adjudged against the protestor in the administrative hearing in which action is brought and in any subsequent appellate court proceeding. Failure to file the proper bond at the time of filing the formal protest, appeal, or dispute will result in a rejection of the protest. In lieu of a bond BBHC may accept a cashier's check, official bank check, or money order in the amount of the bond.

**XIV. Procurement Manager: Shirley Murdock, contact via email at Shirley.Murdock@cariskpartners.com.**