

Request for Letter of Interest Solicitation #19-001

Care Coordination Team for Child Welfare Families

Solicitation Conference and Post Conference Opportunity to Submit Questions

Questions and Answers

1. Question: How will the referrals be determined?

Response: There will be a co-located CCT-CW Care Coordinator at ChildNet who will be the responsible for attending permanency staffing's to receive referrals. Based on the family dynamics and history, the family will be referred to a specific CCT-CW team at a provider.

2. Question: At what juncture in the process will the families be referred? Pre or Post reunification?

Response: The goal will be 2-3 months PRIOR to reunification. However, there may be cases in which the referral may happen at a different stage of the judicial process.

Question: Will the substance abusing individual (s) be administered the pre and post test for the outcome measure? Response: YES.

4. Question: Can you please clarify what license is required and the statute that it pertains to?

Response: The license required will be SA Intervention. This is a requirement in 65D-30 to provide Case Management Services.

5. Question: Would BBHC consider funding an agency who is in the process of obtaining this license, who is usually not actual substance abuse treatment (bill outreach for Peer services and Navigator services) is going to be provided under this funding?

Response: YES. the provider must have at lease a probationary License before executing the contract.

6. Has any research been conducted in applying this evidence-based practice to a child welfare population?

Response: There has been extensive research in regard to care coordination in child welfare; however, not with the CTI model.

7. Will ChildNet provide the agency with all records, referrals, and current services the family is receiving?

Response: Yes, it will be a part of the referral packet.

8. Can you provide more clarification regarding the bundle rate of payment? Specifically, if the team is fully staffed, what is the expectation regarding the number of service hours that a family requires (i.e. both face to face as well as other service that is provided on the family's behalf) in order to ensure the agency receives the total rate (1/12) of payment for that month? How many families would need to be enrolled at one time in order to be considered sufficient to receive the full bundle rate for that month?

Response: During the first 2 phases of CTI (first 6 months on the team) the minimum requirement is 3 face to face encounters a week. During the last phase of CTI (last 3 months on the team) the minimum requirement is 2 face to face encounters a week. In order to be paid the 1/12 payment rate, the team must be serving10-15 families and fulfilling the above face to face requirements. At the negotiation meeting start-up will be addressed.

- 9. Is there a minimum or maximum amount of time that needs to be done per contact (both face to face and other related contacts)?
 Response: NO. The goal will be that the client receives the service they require.
- 10. Would BBHC and/or ChildNet consider it a conflict of interest of the identified family (and/ or any member of) has had previous contact with the agency who is going to implement the CTI model?

 Response: NO

11. Given telehealth is emerging, will BBHC consider assisting the agency in setting up their telehealth system to provide this (and future) services in this manner? Response: NO.

12. Will each team be funded for \$150,000?

Response: YES.

13. Do voucher funds need to be included in the budget?

Response: No. Voucher funding is separate.

- 14. What is the required unit breakdown per team/staff for budgeting purposes? Response: Please referred to 65E-14 for this information.
- 15. If the Clinical Supervisors are only funded as part-time for 1 team, what is the expectation for staffing if two or more teams are funded?

Response: Each team must have 0.5 FTE of a Supervisor. Each team must comply with these criteria.

16. Would BBHC provide CTI training for providers?

Response: Yes, BBHC will provide the training.

17. Is there a maximum amount for incidentals?

Response: There is voucher funding that for \$100,000 held at BBHC, that needs pre approval from BBHC. This amount is for all teams.

18. Can South Florida Wellness Network be considered for the Request for Letter of Interest (RLI) without a substance abuse license?

Response: NO, a licensed is a requirement.

19. What would be the target percentage for decrease and removals?

Response: As part of the proposal, each agency will be responsible to determine the percentage of improvement. This could be further negotiated. However, ChildNet's scorecard is targeted at 95%.

20. Would the service be voluntary or a requirement for families?

Response: It will be a condition of the reunification process.

21. Is BBHC looking for more than one provider?

Response: YES

22. Is there a start-up period for things such as: time to hire staff and training in the model?

Response: YES. The funding will begin October 1, 2019, start-up will be discussed during negotiation

23. Who is co-located at the lead child welfare agency?

Response: ChildNet will hire a CCT-CW Care Coordinator to be co-located at ChildNet.

24. Would BBHC consider having a Navigator replace the Case Manager on the team?

Response: YES. As long as the Navigator has a bachelor's degree in human services and fulfills the role of a Case Manager.

25. Does the Peer Specialist need to be trained upon hire or do they have 6-12 months to receive certification upon hire and will BBHC be providing the Peer Specialist training at no cost like the other curriculum required?

Report: YES. The peer must be trained on WRAP and Peer Specialist training immediately upon hire. The Peer will have 12 months from hire to acquire State peer certification, and South Florida Wellness Network will provide the training.

26. Will the selected provider be required to accept all referrals when the CCT team is not at capacity?

Response: YES

27. Will the selected provider be required to deliver direct substance abuse treatment services to families on a care coordination team?

Response: NO, they will be required to coordinate services for the family as needed.

28. Will BBHC accept a level 2 substance abuse prevention licensed provider as a qualified vendor?

Response: No according to 65D-30 an intervention licensed is required for case management services.

29. Will you accept a bachelor's level Recovery Navigator instead of a Case Manager? The Recovery Navigator will do the role of the case management as it related to community linkage?

Response: YES

30. Will the rate be paid as a bundled weekly rate with a minimum number of face-to face contacts?

Response: YES

31. If only covered services (recovery support and outreach) is billed for both the Peer Specialist and the Recovery Navigator will a DCF SA license be required? Response: YES, in accordance to 65D-30 if case management services are provided an intervention license is required.