

**CENTRAL FLORIDA BEHAVIORAL HEALTH  
NETWORK, INC.**



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*Collaborating for Excellence*

**REQUEST FOR PROPOSAL (RFP)**

**Community Action Treatment (CAT) Services in  
Hendry and Glades Counties**

**RFP #181901CAT  
Release Date: June 19, 2018**

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# Solicitation of Responses

## 1. Introduction

### 1.1. Statement of Need

Central Florida Behavioral Health Network, Inc. (CFBHN) is issuing this solicitation for the purpose of obtaining a non-profit vendor in the service areas of **Hendry and Glades Counties** to provide Community Action Treatment (CAT) services to the identified population. The vendor will be evaluated and the best respondent will be awarded the contract. The delivery of these services will embrace access of care, integration of services and be cost efficient and effective. A failure to read, understand, or comply with the terms of this solicitation may result in CFBHN's inability to accept or fully consider the response. Parties interested in responding to the solicitation should read the solicitation in its entirety before contacting the CFBHN Contact Person for further information or submitting written inquiries.

The selected vendor will develop and operationalize services with the collaboration and oversight of CFBHN to ensure continuity and to provide services for the target populations as described in **Guidance Document 32 (APPENDIX IX)**.

Applications should embrace the CFBHN core values:

- Accountability
- Advocacy
- Collaboration
- Innovation
- Transparency

CFBHN expects services to be consumer driven. This will be accomplished by coordinating services and being culturally and linguistically competent. The vendor is expected to be an integral part of the community and to be responsive to the needs of the community. In addition, services must be focused on recovery, not just maintenance, for those served and their families. CFBHN encourages vendors to submit proposals (also called responses) that incorporate Certified Recovery Peer Specialists (CRPS), peer services and innovative approaches that incorporate Recovery Oriented System of Care (ROSC) values and the 10 guiding principles of recovery, treatment and community integration, increase access to services that includes family involvement (Wraparound process) and reduces reliance on higher levels of care (acute and residential). CFBHN expects proposals to address the ability to increase efficiency, while maximizing resources toward reductions in administrative costs.

Vendors agree to follow all applicable Federal and State of Florida rules, regulations and statutes related to contracting and service provision for mental health and substance abuse services. Vendors will have in place any licenses required to provide these services or an application for a probationary license prior to the start date. As a provision of this RFP, the vendor will comply with CFBHN's Standard Contract, Subcontract, Attachments, Exhibits, Guidance Documents and Reporting Templates or the latest revisions thereof (identified in **Section 6.10**).

CFBHN finds that unmet behavioral health needs constitute significant health problems for

residents, are a major economic burden through increased demand on parallel State and local governmental community programs, and limit an individual's ability to live, work, learn and participate fully in their community.

The selected vendor must demonstrate that it has an established record of performance and financial stability and that it can; (1) meet at a minimum the outcomes and performance measures; (2) increase access for those in need of care; (3) improve the coordination and continuity of care for vulnerable and high risk populations; and (4) meet the licensure requirements connected with providing these services. The approach must demonstrate a vision to blend and leverage the full extent of the available resources by structuring a System of Care that can identify the opportunities and align itself with the momentum of the industry.

The selected vendor will be responsible for the service provision, administration, management and contractual obligations for the indicated target populations and will provide services as identified in this RFP for individuals with behavioral health disorders, as authorized in the Florida Statutes.

### 1.2. Statement of Purpose

CFBHN is seeking a qualified organization interested in the delivery of CAT team services for the identified populations in Hendry and Glades Counties, resulting from this RFP. There is just one team to award which is expected to serve both counties with this funding.

### 1.3. Authority

Subsections 20.19, 39.001(2), 39.001(4), 287.57, 394.457(3), 394.74, 394.9082, 397.305(3), 397.321(4), and 916, F.S., and the master contract with the Department gives the authority to contract for these services. The selected vendor must comply with all applicable Federal and State laws, regulations and program guidelines. The selected vendor must also comply with any other applicable Federal or State laws, court orders, and/or administrative rules that may be enacted during the service period of the anticipated contract.

### 1.4. Term of Contract and Renewal

The anticipated initial term of the contract entered into with the successful vendor is ten (10) months beginning **September 2018** and ending **June 30, 2019**, with renewal for a term not to exceed one (1) year. Such renewals will be for twelve months in each fiscal year by mutual agreement and shall be contingent on satisfactory performance evaluations and availability of funds. Services included in the RFP may be amended, added to and/or deleted during the contract negotiations.

### 1.5. Definitions

The definitions found in the Department of Children and Families' (DCF) Standard Contract Definitions are incorporated into and made a part of this RFP (located at:

<http://www.dcf.state.fl.us/admin/contracts/docs/GlossaryofContractTerms.pdf>).

## 2. RFP Process

### 2.1. Contact Person

This RFP is issued by CFBHN. The single point of contact for e-mail communication regarding this RFP is:

Carrie Hartes, Procurement Manager  
Central Florida Behavioral Health Network, Inc.  
719 South US Highway 301  
Tampa, FL 33619  
[CHartes@CFBHN.org](mailto:CHartes@CFBHN.org)

The subject line of the email should be: “RFP 181901CAT – Inquiries”.

## 2.2. Posting

All Official Notices, decisions and intended decisions and other matters relating to the procurement will be electronically posted on Central Florida Behavioral Health Network’s website at <https://www.cfbhn.org/contracting-procurement/>

CFBHN may also post the evaluation and the Notice of Intended Award or other information or notices relating to the procurement at the following location: 719 South US Highway 301, Tampa, FL 33619, where it will remain for 72 hours thereafter. This is considered as a secondary posting. Notice is specifically given, however, that the secondary posting is not an official posting and that any protest must be filed within 72 hours of the official notice posting on the Internet as described above. Additionally, the physical posting will not extend the time permitted within which to file a protest. It is the responsibility of those submitting a response to the solicitation to obtain the results from the Internet posting in sufficient time to protect their own interests, should they care to do so. Likewise, any faxed information with regard to the results of this procurement will not extend the time limits to file a protest.

## 2.3. Vendor Disqualification

Failure to have performed any contractual obligations with CFBHN or the Department, in a manner satisfactory to CFBHN or the Department, will be sufficient cause for disqualification. To be disqualified as a vendor under this provision, the vendor must have:

- Previously failed to satisfactorily perform in a contract with the Department or CFBHN, been notified by the department of the unsatisfactory performance, and failed to correct the unsatisfactory performance to the satisfaction of the department; or
- Had a contract terminated by the Department for cause; or
- Not met all of the mandatory requirements specified in **Section 5.3**.

## 2.4. Limitations on Contacting CFBHN Personnel

All communications with CFBHN employees as they relate to this RFP are prohibited during the time period in which the RFP is released and throughout the end of the 72-hour period following CFBHN’s posting of the notice of intended award. The aforementioned 72-hour period excludes Saturdays, Sundays, and state holidays. Vendors may only communicate via electronic communications to the Procurement Manager or as provided in the solicitation documents. Violation of this provision may

result in vendor being disqualified from this procurement. Additional instructions for the electronic communications are listed in **Section 2.1**.

## 2.5. Schedule of Events and Deadlines

Any proposal submitted after **July 25, 2018, 3:00 PM** (CFBHN's clock) will not be accepted and will be returned to the applicant unopened.

Activity	Date	Time	Address
Request for Proposal (RFP) Released	6/19/18	N/A	CFBHN's website: <a href="https://www.cfbhn.org/contracting-procurement/">https://www.cfbhn.org/contracting-procurement/</a>
Vendor Solicitation Conference*	6/25/18	11:30 AM	Conference Call Info: Dial-In: 1-877-273-4202 Conference Room ID: 2897464
<u>Mandatory</u> Written Notice of Intent to Participate Due	6/27/18	5:00 PM	Carrie Hartes, Procurement Manager <a href="mailto:CHartes@cfbhn.org">CHartes@cfbhn.org</a>
Submission of Written Inquiries Due	6/29/18	5:00 PM	Carrie Hartes, Procurement Manager <a href="mailto:CHartes@cfbhn.org">CHartes@cfbhn.org</a>
Anticipated Date for Posting CFBHN's Response to Inquires	7/10/18	5:00 PM	CFBHN's website: <a href="https://www.cfbhn.org/contracting-procurement/">https://www.cfbhn.org/contracting-procurement/</a>
Sealed Proposals Must be Received by CFBHN	7/25/18	3:00 PM	Carrie Hartes, Procurement Manager 719 South US Highway 301 Tampa, FL 33619
Opening of RFP(s)	7/26/18	N/A	CFBHN 719 South US Highway 301 Tampa, FL 33619
Evaluator Team Meeting & Distribution of Proposals	7/27/18	1:00 PM	CFBHN 719 South US Highway 301 Tampa, FL 33619
Debriefing Meeting of the Evaluators and Ranking of the Responses	8/17/18	TBD	CFBHN 719 South US Highway 301 Tampa, FL 33619
Invitations to Present Sent	8/20/18	5:00 PM	N/A
Presentations	8/27/18	All Day	CFBHN 719 South US Highway 301 Tampa, FL 33619
Posting of Proposal Scores and Notice of Intent to Award the Contract	8/28/18	5:00 PM	CFBHN's website: <a href="https://www.cfbhn.org/contracting-procurement/">https://www.cfbhn.org/contracting-procurement/</a>
72-Hour Protest Period	8/28/18 To 8/30/18	5:00 PM	N/A
Anticipated Negotiation Period	9/5/18	N/A	CFBHN 719 South US Highway 301 Tampa, FL 33619

Activity	Date	Time	Address
Anticipated Effective Date of Contract	TBD	N/A	N/A
*All vendors are hereby notified that the meetings noted with an asterisk above (*) are public meetings open to the public as provided in Chapter 119, Florida Statutes, and may be electronically recorded by any member of the audience. Although the public is invited, no comments or questions will be taken from vendors or other members of the public (except for the Vendor Solicitation Conference, in which comments and questions will be taken from vendors).			
All times in the Schedule of Activities are local times for the Eastern Time Zone.			

## 2.6. Vendor Solicitation Conference

The purpose of the Vendor Solicitation Conference is to review the RFP with interested vendors. CFBHN encourages all prospective vendors to participate in the solicitation conference, during which vendors may pose questions. CFBHN shall be only bound by written information that is contained within the solicitation documents or formally posted as an addendum or a response to questions.

The Vendor Solicitation Conference for this RFP will be held at the time and date specified in **Section 2.5**. Participation in the Vendor Solicitation Conference is not a pre-requisite for acceptance of responses from prospective vendors.

Small Business, Certified Minority and Women’s Business Enterprises are encouraged to participate in any conferences, pre-solicitation, or pre-bid meetings which are scheduled.

All vendors shall be accorded fair and equal treatment.

## 2.7. Written Inquiries

Other than during the Vendor Solicitation Conference, prospective vendor questions will only be accepted if submitted as written inquiries to the CFBHN designee specified in **Section 2.1**, via electronic mail, and received on or before the date and time specified in **Section 2.5**.

The emails must have in the subject “**RFP 181901CAT – Inquiries**”. Faxes and US Mail inquiries are not acceptable. Copies of responses to all inquiries that require clarifications and/or addenda, to this RFP, will be available by the date and time specified in **Section 2.5**, through electronic posting at: <https://www.cfbhn.org/contracting-procurement/>

## 2.8. Notice of Intent to Participate

Respondents who wish to be considered for this RFP must inform CFBHN via email by the date and time listed in the “Schedule of Activities” of their intention to participate in the RFP process. **Should CFBHN only receive notification from one vendor, CFBHN may, at our option, exercise the right to terminate the RFP process and move directly into negotiations with said vendor.**

## 2.9. Withdrawal of Response

A written request for withdrawal, signed by the vendor, may be considered if received by CFBHN within 72 hours after the opening time and date indicated in the Schedule of Events and Deadlines (**Section 2.5**). A request received in accordance with this provision may be granted by CFBHN upon



proof of the impossibility to perform, based upon an obvious error on the part of the vendor.

## **2.10. Receipt and Rejection of Responses or Waiver of Minor Irregularities**

### **2.10.1. Response Deadline**

Responses must be received by CFBHN no later than the time, date and place as indicated in the proceeding deadline schedule. Any response submitted shall remain a valid offer for at least 90 days after the response submission date. No changes, modifications or additions to the response submitted (after the deadline for response opening has passed) will be accepted by or be binding on CFBHN.

### **2.10.2. Receipt Statement**

Responses not received at either the specified place, or by the specified date and time, will be rejected and returned unopened to the vendor by CFBHN. CFBHN will retain one unopened original for use in the event of a dispute.

### **2.10.3. Right to Waive Minor Irregularities Statement**

CFBHN reserves the right to reject any and all responses or to waive minor irregularities when to do so would be in the best interest of the Suncoast Region. Minor irregularity is defined as a variation from the RFP terms and conditions which do not affect the price of the response, or give the vendor an advantage or benefit not enjoyed by other vendors, or do not adversely impact the interest of CFBHN. At its option, CFBHN may correct minor irregularities but is under no obligation to do so whatsoever. This provision also applies to any administrative errors a respondent may make in the RFP submission process.

## **2.11. Notice of Contract Award**

CFBHN intends to award the contract to the responsive vendor that the evaluation team determines, based on the selection criteria set forth in **APPENDIX VIII**.

CFBHN may consider any information or evidence which comes to its attention and which reflects upon a vendor's capability to fully perform the contract requirements and/or the vendor's demonstration of the level of integrity and reliability which CFBHN determines to be required to assure performance of the contract.

## **2.12. Protests and Disputes**

### **2.12.1. Filing the Protest**

Any vendor who has been adversely affected by a decision or intended decision concerning a solicitation or a notice of contract award may file a *written Notice of Intent to Protest* with the contact person listed in **Section 2.1** within 72 hours after the posting of the solicitation or of the notice of CFBHN's decision or intended decision.

In the computation of the 72 hour time frame for filing of a protest, Saturdays, Sundays and state holidays are excluded. The Director of Contracting must ensure that the date and time of posting are documented in the contract file. (Posting on a Monday or Tuesday eliminates the

need for weekend exclusion.) Failure to timely file a notice of intent to protest shall constitute a waiver of proceedings.

Following the submission of the written Notice of Intent to Protest, a Formal Protest must be filed with the contact person listed in **Section 2.1**. The Formal Protest must be:

- In writing; and,
- Filed within ten (10) days after filing of the notice of protest. Failure to file a protest within the time prescribed shall constitute a waiver of proceedings.
- No time will be added to the above time limits for mail service.
- The 10 day period includes Saturdays, Sundays, and state holidays.
- If the last day of the 10 day period is a Saturday, Sunday, or state holiday, the period shall run until the end of the next day which is neither a Saturday, Sunday, nor state holiday.
- Accompanied by a bond payable to CFBHN at the time of filing the formal written protest.
- In lieu of a bond, a cashier's check, official bank check, or money order in the amount of the bond may be submitted to the contact person.
- Failure to file the proper bond at the time of filing the formal protest will result in a denial of the protest.

#### **2.12.2. Posting Bond for Protest Filed**

Any vendor who files an action protesting a decision or intended decision pertaining to contracts administered by CFBHN must comply with the following requirements.

When protesting a decision or intended decision the protestor must post a bond equal to one percent (1%) of CFBHN's estimated contract amount. The estimated contract amount shall be based upon the contract price submitted by the protestor. If no contract price was submitted, CFBHN shall estimate the contract amount based on factors including, but not limited to, the following:

- The price of previous or existing contracts for similar or contractual services.
- The amount appropriated by the Legislature for the contract.
- The fair market value of similar contractual services.

CFBHN shall provide the estimated contract amount to the protestor within 72 hours (excluding Saturdays, Sundays and state holidays) after the notice of protest has been filed. The estimated contract amount is not subject to protest. The bond shall be conditioned upon the payment of all costs and charges that are adjudged against the protestor in the administrative hearing in which action is brought and in any subsequent appellate court

proceeding.

In lieu of a bond, CFBHN may accept a cashier's check, official bank check, or money order in the amount of the bond.

The official hours of office operation for receipt of intent to protest and/or a petition and bond are office hour's 8:00 AM to 5:00 PM local time. Upon receipt of the formal written notice of protest, the contact person must secure the bond, cashier's check, official bank check, or money order until resolution of the protest.

### **2.12.3. Content of Formal Written Notice of Protest**

The formal written notice of protest should be printed, typewritten, or otherwise duplicated in legible form. The content of the formal written notice of protest should contain:

- The name and address of the vendor filing the protest and an explanation of how its substantial interests have been affected by the solicitation or by CFBHN's notice of intended or actual contract award;
- A statement of how and when the vendor filing the protest received notice of the solicitation or notice of CFBHN's intended or actual contract award;
- With particularity, the facts and law upon which the protest is based;
- A statement of all issues of disputed material facts (if there are none, the protest must indicate such);
- A concise statement of the ultimate facts alleged, as well as the CFBHN rules and statutes which entitle the vendor filing the protest to relief;
- A demand for relief to which the vendor deems itself entitled; and,
- Any other information which the vendor contends is material

### **2.12.4. CFBHN's Response to Protest**

Upon receipt of a formal written notice of protest, the solicitation process or contract award process may be stopped until the protest is resolved. Upon receipt of a protest, the Procurement Manager and Director of Contracting shall immediately consult the appropriate legal counsel. With legal counsel, the contract signer must determine whether or not to accept or reject the protest.

### **2.12.5. Resolution of the Protest**

Upon receipt of the intent to protest or formal written notice of protest, the Director of Contracting may work with the protestor to resolve the protest by mutual agreement on an informal basis. The Director of Contracting will have seven (7) days after receipt of the formal written notice of protest to resolve the protest through mutual agreement. The seven (7) days will exclude Saturdays, Sundays, and state holidays.

If the protest is not resolved by mutual agreement within seven (7) days, excluding Saturdays, Sundays, and state holidays, of receipt of the formal written protest the CEO of CFBHN shall designate a management staff who shall conduct an informal proceeding and issue a final decision within ten (10) days excluding Saturdays, Sundays, and state holidays. The formal written protest may be, as determined by the CEO of CFBHN, referred to the Department of Children and Families.

### 2.13. Scoring Methodology

Written proposals: Invitations to present will be sent to the providers who receive the highest average scores (averages based on the weight for each criteria based on the evaluators' scoring). The guidance for evaluator scoring can be found in **Appendix VIII**. The top scorers, as determined by the evaluation team's scores in the Evaluation Tool, will receive an invitation to present.

Oral presentations: Presentations will be scored by the same evaluators as those who scored the written portion of this process. Each presenter will have a total of 45 minutes to present. It is recommended that presenters leave approximately 15 minutes of this time for questions. However, the 45 minutes is available for providers to use as they wish. Evaluators will score presentations using the Evaluation Tool.

Final cumulative scoring (only applicable to providers who are invited to present): 60% of the final score will be based on the written portion of the RFP response. 40% of the final score will be based on the presentations portion of the procurement process.

## 3. Response Expectations

CAT teams are bound to comply with DCF's **Guidance Document 32 (Appendix XIV)** also available at <http://www.myflfamilies.com/service-programs/substance-abuse/managing-entities/2018-contract-docs>). The Guidance Document governs the minimum programmatic expectations of the selected provider.

### 3.1. Identifying Participants

Describe the processes and community linkages that your organization will use to identify and engage potential participants.

### 3.2. Scope of Work

**3.2.1.** Describe what provisions will be made to ensure prompt response to any "on call" crisis (there is a duty to be available at any time of any day) or crisis calls during normal working hours. Please include time frames for response times, and how staff availability will be ensured (examples may include: a community stakeholder contacts you and feels the individual is in crisis, the individual contacts you and appears to be in crisis, an individual is admitted to a local Baker Act facility or juvenile assessment center (JAC), or an individual is at the ER and you are notified).

**3.2.2.** As a result of the assessment and treatment planning process, providers are required to have an individualized plan of care specifically tailored to each person on the CAT

team. Describe how the individuals served on the CAT team will have their needs and desires addressed specifically to them.

- 3.2.3.** Describe the CAT team’s role in the system of care and how that role involves participation in community systems meetings/committees.

### **3.3. Practice Models and Approaches**

Please describe which if any of the Practice Models discussed on Page 3 of **Guidance Document 32 (APPENDIX IX)** you intend to use to guide the facilitation of your program. Include in your response how you believe the Practice Model(s) will better serve the needs of the local population.

### **3.4. Treatment Plan Engagement Process**

Please describe the engagement process for both the youth and their family. If applicable, describe methodologies to engage youths and their families in their treatment plans that have been successful in the past.

### **3.5. Discharges**

Please describe your anticipated processes towards discharges as they relate to the framework outlined in **Guidance Document 32**.

### **3.6. Staffing**

Describe what your organization will do to ensure your CAT team is properly staffed at the time services begin. Please note any exceptions or challenges to meeting the staffing qualification requirements you anticipate (see "Staffing Requirements" on pages 2 to 3 of **Guidance Document 32**). You are required to meet the staffing requirements of the Guidance Document.

### **3.7. Vendor Unique Qualifications and Community Involvement**

Please describe any special capabilities or qualifications your organization believes will enable you to successfully operate a CAT team. Include in your response community relationships/partnerships which may help better facilitate the operation of the CAT Team (local schools, law enforcement, other health care providers, churches, etc.). Letters of support from community stakeholders may be included as attachments to the response. Letters of support must be included in the submission to be considered.

### **3.8. Experience Working/Integrating with School Systems**

Please describe your experience working with and integrating programs within a school system. This section’s response can describe a relationship in any school system; it does not necessarily require current integration with the Hendry and Glades Counties school systems at this time. If you are not currently integrated with the Hendry and Glades Counties school systems, describe how you intend to work with the school systems.

## **4. Financial Specifications**

### **4.1. Funding Source**

The funding for these teams comes from the MHCAT “other cost accumulator” for Community Action Treatment teams as contracted by DCF. There is no match requirement under this funding.

#### 4.2. Allowable Costs

- 4.2.1. All costs associated with performance of the services contemplated by the awarded contract must be both reasonable and necessary and in compliance with the cost principles for non-profit organizations, pursuant to 2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (also known as the “OMB Super Circular.”) and Ch. 65E-14, F.A.C.
- 4.2.2. Any compensation paid for an expenditure subsequently disallowed as a result of the vendor’s non-compliance with state or federal funding regulations shall be repaid to CFBHN upon discovery.
- 4.2.3. Invoices must be submitted by an authorized representative of the vendor in accordance with the submission schedule in the awarded contract, with appropriate service utilization and Individuals Served data accepted into the Central Florida Health Data System (CFHDS), in accordance with PAM 155-2.

#### 4.3. Performance Measures

CFBHN will maintain a performance contract with the successful vendor resulting from this RFP. All behavioral health services must be delivered uniformly in accordance with legislative authorization, CFBHN contract and related procurement documents.

In order to submit data, prospective vendors who obtain a contract with CFBHN as a result of this RFP must enroll or re-enroll persons in the CFBHN data system consistent with the Department’s PAM 155-2.

By execution of the contract resulting from this RFP, the successful vendor acknowledges and agrees that its’ performance under any resulting contract must meet the standards set forth therein and will be bound by the terms and conditions in the solicitation document. If the successful vendor fails to meet these standards, CFBHN, at its exclusive option, may allow up to six (6) months for the successful vendor to achieve compliance with the standards. If CFBHN affords the successful vendor an opportunity to achieve compliance, and the successful vendor fails to achieve compliance within the specified time frame, CFBHN will terminate the contract in the absence of any extenuating or mitigating circumstances. The determination of the extenuating or mitigating circumstances is the exclusive determination of CFBHN.

The required number served and outcome measures connected with this funding are as follows:

M-Code	Measure	Agency Goal
CAT01	Number of Persons Served on Community Action Team (CAT) Per Month.	35.00
CAT02	Individuals receiving services shall attend an average of 80% of school days each month.	80.00
CAT03	Percent of individuals receiving services shall improve their level of functioning between admission to discharge, assessed on a year-to-date basis, as determined by CFARS or FARS.	80.00

M-Code	Measure	Agency Goal
CAT04	Individuals served will spend a minimum of 90% of days living in a community setting each month.	90.00
CAT05	<i>This measure is no longer used.</i>	N/A
CAT06	Percent of individuals and families receiving services shall demonstrate improved family functioning as demonstrated by an improvement in the Child Well-Being domain between admission and discharge, as determined by the North Carolina Family Assessment Rating Scale for General Services and Reunification (NCFAS-G+R), if the individual is under eighteen (18).	65.00

Additional information on these measures can be found in **Guidance Document 32**.

#### 4.4. Invoicing and Payment of Invoices

The vendor shall request an electronic payment for services delivered on a monthly basis through the Contracting and Finance Exchange (CAFÉ) software by the 10<sup>th</sup> of each month. Payment will be released once all data has been validated at 100%.

Managing Entity shall not be required to pay the vendor if Managing Entity does not receive payment for the corresponding services and materials from its payment source. No funds shall be owed to the vendor unless Managing Entity is paid by the Department for the services for which vendor is requesting payment. Receipt of payment from the Department is an absolute precondition to any obligation by Managing Entity to pay vendor. Managing Entity's contractual or other obligation to pay vendor is expressly conditioned upon and limited to the payments by the Department to the Managing Entity for the services for which the vendor is requesting payment. Managing Entity may make partial payments to the extent it receives partial funding. In the event the acts or omissions of a vendor are a cause, in whole or in part, of a payment source's failure to pay Managing Entity, then Managing Entity may elect to apportion any payment received among vendors whose acts are not a cause for non-payment. Vendors shall not be subject to non-payment for reasons other than Managing Entity's failure to receive its funding, unless the vendor has failed to comply with a corrective action plan or they have been subjected to the CFBHN Sanctions and Financial Penalties policy.

The vendor shall be paid up to pro-rata share (1/12) of the total allocation listed on the Covered Services Funding Tool. This pro-rata amount is contingent on the Subcontractor meeting the below requirements.

The Subcontractor shall demonstrate satisfactory delivery of minimum levels of service through submission of a properly completed DCF Exhibit C1 Report (Persons Served and Performance Measure Report), documenting compliance with the performance measures. The subcontractor shall attain a minimum of 100 percent of the service targets specified on Exhibit C – Performance Measures.

If the Subcontractor does not meet the minimum required number served (performance measure CAT01 – **Section 4.3**) during the invoice period, the Managing Entity shall reduce the payment due for that period by \$2,000.00 for each individual less than target. Payments reduced for performance measure CAT01 cannot be recouped by the Subcontractor.

If the Subcontractor does not meet the minimum required outcome measures (performance measures CAT02, CAT03, CAT04 and CAT06 – **Section 4.3**) during the invoice period, the Managing Entity shall reduce the payment due for that period by 1% of the invoice amount for each point less than target. In the event of an invoice reduction for these referenced outcome measures, if the Subcontractor subsequently exceeds the same performance measure during the subsequent invoice period by the same or greater percentage than in the reduced invoice period, the Subcontractor may receive payment of the reduced portion of the original invoice in the subsequent month.

#### 4.5. Contract Amount

The amount of the contract resulting from this RFP is **\$750,000** per year (subject to the availability of funds). Any renewal shall be in writing and shall be subject to the same terms and conditions as set forth in the initial contract.

#### 4.6. Financial Risk Assessment

The vendor must submit copies of their last two financial and compliance audits conducted through an independent auditing firm. The audit must include financial statements, auditor’s report and management letters. Additionally, the vendor must submit a completed financial risk assessment (**APPENDIX VII**).

If the vendor is not required to have an audit (as required by OMB Circular A-133), and does not have reports for the two previous years, then corresponding financial statements that include Income Statement, Balance Sheet, and Statement of Cash Flows shall be certified by the agency’s Chief Executive Officer, Chief Operating Officer, or Chief Financial Officer and shall be submitted, along with the completed financial risk assessment (**APPENDIX VII**).

### 5. Instructions to Vendors

#### 5.1. General Instructions to Respondents

Vendors shall submit the items identified as mandatory requirements in **Section 5.3** as well as a response to the items identified in **Section 3** and **Section 4**. The Procurement Manager will examine each response to determine whether the vendor meets the Mandatory Requirements specified in **Section 5.3**. A response that fails to meet all of the Mandatory Requirements will be deemed non-responsive and will not be evaluated. An initial determination that a response meets the Mandatory Requirements does not preclude a subsequent determination of non-responsiveness. Responsive submissions will then be scored by an evaluation team, based on the criteria outlined in **APPENDIX VIII**.

The financial risk assessment will be evaluated by staff in the Finance Department at CFBHN. The resulting points will be added to the scores awarded by the evaluators.

CFBHN may reject any or all responses, and may modify its statement of services sought, tasks to be performed or the project description and re-bid these services or re-negotiate, if it is in the best of interest of CFBHN.

#### 5.2. Notice of Short List

Those vendors meeting the **Mandatory Criteria** will be placed on the ‘short list’ that is to be posted



at <https://www.cfbhn.org/contracting-procurement/> on or before the date and time specified in **Section 2.5.**

### 5.3. Response to RFP Mandatory Requirements

The mandatory requirements are described as **MANDATORY CRITERIA** on the RFP Mandatory Criteria Checklist (**APPENDIX I**). Failure to comply with all mandatory requirements will render a proposal non-responsive and ineligible for a qualitative evaluation.

The **MANDATORY CRITERIA** are:

Mandatory Requirements*
A statement indicating an intention to participate in the RFP process by the date specified in <b>Section 2.5.</b>
The proposal is received by the time, date, and at the location specified in <b>Section 2.5.</b>
Signed <b>Certificate of Signature Authority</b> form or corporate resolution/other duly executed certification ( <b>APPENDIX II</b> ).
Signed <b>Certification of Non-Conviction of Public Entity Crimes</b> form ( <b>APPENDIX III</b> ).
Signed <b>Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Contracts/Subcontracts</b> form ( <b>APPENDIX IV</b> ).
Signed <b>Statement of Assurances</b> form ( <b>APPENDIX V</b> ).
Signed <b>Vendor Certification Regarding Scrutinized Companies Lists</b> ( <b>APPENDIX VI</b> ).
Proof of non-profit status.
Copies of their last two financial and compliance audits conducted through an independent auditing firm. The audit must include financial statements, auditor’s report and management letters. Additionally, the vendor must submit a completed financial risk assessment ( <b>APPENDIX VII</b> ).  If the vendor is not required to have an audit (as required by OMB Circular A-133), and does not have reports for the two previous years, then corresponding financial statements that include Income Statement, Balance Sheet, and Statement of Cash Flows shall be certified by the agency’s Chief Executive Officer, Chief Operating Officer, or Chief Financial Officer and shall be submitted, along with the completed financial risk assessment ( <b>APPENDIX VII</b> ).

\*CFBHN has the right to require any additional information it requires to validate any attestations made in a procurement response or presentation.

For those mandatory criteria that are listed above which require the completion of a form, the forms can be found in **APPENDIX II – APPENDIX XII** and on CFBHN’s website at:

<https://www.cfbhn.org/contracting-procurement/>

### 5.4. Trade Secrets

CFBHN will attempt to afford protection from disclosure of any trade secret as defined in section 812.081, Florida Statutes (F.S.), where separately and individually marked and identified as such in the response to this RFP, to the extent permitted under section 815.04, F.S., Chapter 119, and Chapter 286, F.S. Any vendor acknowledges, however, that the protection afforded by section 815.04, F.S. is incomplete, and it is hereby agreed by the vendor and CFBHN that no right or remedy for damages arises from any disclosure.

CFBHN is not obligated to agree with the vendor's claim of exemption and, by submitting a proposal, the vendor agrees to be responsible for defending its claim that each portion of the claimed trade secret is exempt from inspection and copying under Florida's Public Records Law.

Vendor agrees that it shall protect, defend, and indemnify, including attorney's fees and costs, including any appellate costs and attorney's fees, CFBHN, its officers, employees, agents, and legal counsel from any and all claims and litigation arising from or relating to vendor's claim that any claimed trade secret portions of its proposal are confidential, proprietary, trade secret, or otherwise not subject to disclosure.

### **5.5. Cost of Preparation of Proposal**

CFBHN is not liable for any costs incurred by a vendor responding to this RFP.

### **5.6. How to Submit a Proposal**

Vendors may choose, and be responsible for, the method of delivery to CFBHN (mail or hand-delivery), except that facsimile or electronic transmissions will not be accepted at any time.

Any response must be received by CFBHN by the deadlines set forth in the Schedule of Events and Deadlines (**Section 2.5**). Responses not received at either the specified place or by the specified date and time, will be rejected and returned unopened to the vendor by CFBHN.

#### **5.6.1. Number of Copies Required and Format for Submittal**

Vendors shall submit one (1) original and seven (7) hard copies of the Response (and attachments). If the original has any color other than black and white, the copies must also contain the same colors. The original responses submitted to CFBHN must contain original signatures of an official who is authorized to bind the vendor to its response. Two (2) electronic copies (on non-rewritable CD-R, DVD-R or USB storage device) of the response, identical to the hard copies, must also be submitted with the hard copies.

#### **5.6.2. Responses to be in Sealed Envelopes**

All original, hard copies, and electronic copies must be submitted in sealed envelopes and must be clearly marked with the title of the response, the RFP number, the vendor's name, identification of enclosed documents and whether it is an original or a copy. Place only one original or one copy of the response in each envelope.

Each envelope must be sealed and addressed as indicated above. The original must be marked as such and the copies identified and numbered (i.e., Original, Copy 1 of 5, etc.).

#### **5.6.3. Hard Copy Response Format**

Responses must be typed, double-spaced, on 8½" x 11" paper, and submitted in binders. The required font is Arial, size 12, with a 1 inch margin. Pages must be numbered in a logical, consistent fashion. Figures, charts and tables should be numbered and referenced by number in the text. No staples, permanent binders or rubber bands are permitted.

#### **5.6.4. Electronic Copy Response Format**

The required electronic format of the responses must be on non-rewritable CD-R, DVD-R or USB storage device. The software used to produce the electronic files for the Response must

be searchable Adobe Portable Document Format (“pdf”), version 6.0 or higher. Responses must be able to be opened and viewed by CFBHN utilizing Adobe Acrobat, version 9.0.

The electronic copies must be identical to the original response submitted, including the format, sequence and section headings identified in this RFP. The electronic media must be clearly labeled in the same manner as the hard copies and submitted with the corresponding hard copies. The hard copy marked “original” shall take precedence over the electronic version(s) of the response and all non-“original” hard copy versions of the response in the event of any discrepancy. If a discrepancy is found between the hard copy response marked “original” and any of the electronic versions submitted on CD-R, DVD-R, or USB storage device, CFBHN reserves the right, at its sole discretion, to reject the entire response.

## 5.7. Required Content of the Response

### 5.7.1. TITLE PAGE

The first page of the response shall be a Title Page that contains the following information:

- RFP Number
- Title of the Response
- Vendor’s Legal Name (person, organization, firm)
- Federal Tax Identification Number (FEID)
- Current Primary Business Address
- Country and state of incorporation
- Organization to which Response is Submitted
- Name, Title, Phone Number, Fax Number, Mailing Address, and E-Mail Address of the person who can respond to inquiries regarding the response
- Name of the vendor’s Project Director (if known)
- Identification of Enclosed Documents

### 5.7.2. CROSS REFERENCE TABLE

All responses must include a cross-reference between the RFP requirements and the response. The cross-reference table must be directly behind the title page in the response. All cross-reference tables must be formatted as follows.

VENDOR’S CROSS REFERENCE TABLE				
RFP		RESPONSE		
Section	Subject	Page	Section	Mandatory Criteria?
5.7.1	Title Page			
5.7.2	Cross Reference Table			
TAB 1 – RESPONSE TO INTRODUCTION				
5.7.3	Response to Introduction			
TAB 2 – RFP MANDATORY CRITERIA				
5.3	Acceptance of Contract Terms and Conditions form			YES
5.3	Proof of active corporate non-profit status			YES
5.3	Copies of their last two financial and compliance audits conducted through an independent auditing firm. The audit must include financial statements, auditor’s report and management letters. Additionally, the vendor must submit a			YES

	completed financial risk assessment. If the vendor is not required to have an audit (as required by OMB Circular A-133), and does not have reports for the two previous years, then corresponding financial statements that include Income Statement, Balance Sheet, and Statement of Cash Flows shall be certified by the agency’s Chief Executive Officer, Chief Operating Officer, or Chief Financial Officer and shall be submitted, along with the completed financial risk assessment.			
TAB 3 – RESPONSE				
3.1	Identifying Participants			
3.2	Scope of Work			
3.3	Practice Models and Approaches			
3.4	Treatment Plan Engagement Process			
3.5	Discharges			
3.6	Staffing			
3.7	Vendor Unique Qualifications and Community Involvement			
3.8	Experience Working/Integrating with School Systems			

**5.7.3. TAB 1 – RESPONSE TO INTRODUCTION**

The vendor shall provide a brief executive overview demonstrating an understanding of the RFP purpose, the needs specified in this RFP, and the Behavioral Health Services to be provided. It should also include a brief description of the vendor’s organization, leadership credentials, approach for Scope of Work services, management of Performance Specifications, and completing Deliverables as defined in this RFP.

**5.7.4. TAB 2 – RFP MANDATORY CRITERIA**

The vendor shall provide all documents listed as **MANDATORY CRITERIA** as specified in **Section 5.3**.

**5.7.5. TAB 3 – RESPONSE**

The vendor shall respond to the requirements listed in the vendor’s cross reference table above.

**6. Contract Provisions**

**6.1. Equipment**

The selected vendor will be responsible for supplying, at its own expense, all equipment necessary to perform under, conduct, and complete the contract including but not limited to computers, telephones, copier, and fax machine including supplies and maintenance, as well as needed office supplies.

**6.2. Fiscal Reports**

If the selected vendor is not already under contract with CFBHN, the vendor will be required to submit a full and complete copy of their agency’s Fiscal Reports (which includes the below listed items), using the template on the procurement website. This submission must be inclusive of the agency’s entire budget, including the full contract amount outlined in **Section 4.5**, for the services outlined in **Section 3.2**.



- SAMH Projected Operating and Capital Budget Personnel Detail
- SAMH Projected Operating and Capital Budget (includes Projected Funding Sources & Revenues and Projected Expenses)
- Agency Capacity Report

### 6.3. Monitoring Requirements

The successful vendor shall permit all persons who are duly authorized by the Managing Entity or the Department to inspect and copy any records, papers, documents, facilities, goods, and services of the vendor which are relevant to the awarded contract, and to interview any clients, employees, and vendor employees of the vendor to assure the Managing Entity or the Department of the satisfactory performance of the terms and conditions of the awarded contract.

The vendor will submit progress reports and other information in such formats and at such times as may be prescribed in writing by the Managing Entity, cooperate in site visits and other on-site monitoring (including, but not limited to: access to sites, clients, staff, fiscal and client records and logs, and the provision of related information), submit reports on any monitoring of the program funded in whole or in part by the Managing Entity conducted by federal, state, or local governmental agencies or other funders, and if the vendor receives accreditation reviews, each accreditation review must be submitted to the Managing Entity within ten (10) days after receipt by the vendor. All reports will be as detailed as may be reasonably requested by the Managing Entity and will be deemed incomplete if not satisfactory to the Managing Entity as determined in its sole reasonable discretion. All reports will contain the information, additional information, or be in the format as may be requested by the Managing Entity. If approved in writing by the Managing Entity, the Managing Entity may accept any report from another monitoring agency in lieu of reports customarily required by the Managing Entity.

### 6.4. Records and Documentation

To the extent that information is utilized in the performance of the resulting contract or generated as a result of it, and to the extent that information meets the definition of “public record” as defined in subsection 119.011(12), F.S., said information is hereby declared to be and is hereby recognized by the parties to be a public record and absent a provision of law or administrative rule or regulation requiring otherwise, shall be made available for inspection and copying by any interested person upon request as provided in Chapter 119, F.S., or otherwise. It is expressly understood that the selected vendor’s refusal to comply with Chapter 119, F.S., shall constitute an immediate breach of the contract which results from this RFP which entitles CFBHN to unilaterally cancel the contract agreement. The selected vendor will be required to promptly notify CFBHN of any requests made for public records if the request could lead to a media event.

Unless a greater retention period is required by State or Federal law, all documents pertaining to the program contemplated by this RFP shall be retained by the selected vendor for a period of six (6) years after the termination of the resulting contract or longer as may be required by any renewal or extension of the contract. If an audit is required, records shall be retained for a minimum of six (6) years after the audit report is issued and until resolution of any audit findings or any litigation based upon the contract. During the records retention period, the selected vendor agrees to furnish, when requested to do so, all documents required to be retained. Data files will be provided in a format

readable by CFBHN.

The selected vendor agrees to maintain the confidentiality of all records required by law or administrative rule to be protected from disclosure. The selected vendor further agrees to:

- Hold CFBHN and the Department harmless from any claim or damage including reasonable attorney's fees and costs or from any fine or penalty imposed as a result of an improper disclosure by the selected vendor of confidential records whether public record or not and promises to defend CFBHN and the Department against the same at its expense;
- Maintain all required records pursuant to the resulting contract in such manner as to be accessible by CFBHN upon demand. Where permitted under applicable law, access by the public shall be permitted without delay. The selected vendor assumes all financial responsibility for record storage and retrieval costs; and
- Comply with activities related to information systems in compliance with the Department's PAM 155-2. Subcontractors with CAT funding are required to submit client-specific service events and other associated data to the Managing Entity by the 10th of the month for services beginning in Fiscal Year 2018-2019.

#### 6.5. Subcontractors

The successful vendor may not subcontract out the services required in this RFP.

#### 6.6. Service Delivery Location

Services shall be provided within the designated service area. The selected vendor shall notify the contract manager, in writing, of any changes in locations, days, and/or times where services are being provided pursuant to 65E-14.021(5)(e)(c) F.A.C, 30 days prior to any changes.

#### 6.7. Service Times

Crisis intervention and on-call coverage shall be available 24 hours a day, seven days per week. The successful vendor shall identify normal business hours outside of crisis services (**Guidance Document 32**).

#### 6.8. Performance Measures

#### 6.9. Reports

Please see **Guidance Document 32 (Appendix IX)** for the current DCF reporting requirements.

#### 6.10. Contract Documents

The Standard Contract, Subcontract, Attachments, Exhibits, and Incorporated Documents, or the latest revisions thereof, are incorporated and made part of the contract between Central Florida Behavioral Health Network, Inc. and the vendor, and can be found here:

<http://www.myflfamilies.com/service-programs/substance-abuse/managing-entities/2018-contract-docs>

### 6.11. Minimum Insurance Requirements

Providers must demonstrate having all necessary insurances required for CAT teams (see the CFBHN standard subcontract for more details). The types of required insurances include:

- General liability insurance
- Automobile insurance
- Professional liability insurance

### 7. Evaluation Methodology, Criteria and Rating Sheet

The components of this section can be found throughout the RFP and in **APPENDIX VIII**.

## Appendices Reference

<b>APPENDIX I MANDATORY REQUIREMENTS CHECKLIST .....</b>	<b>25</b>
<b>APPENDIX II CERTIFICATE OF SIGNATURE AUTHORITY .....</b>	<b>28</b>
<b>APPENDIX III CERTIFICATION OF NON-CONVICTION OF PUBLIC ENTITY CRIMES.....</b>	<b>30</b>
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# APPENDIX I

## MANDATORY REQUIREMENTS CHECKLIST



<b>MANDATORY CRITERIA CHECKLIST</b>			
ITN/RFI/RFP #:	<b>181901CAT</b>		
Print Vendor's Name:			
Print Name of CFBHN Reviewer:			
Signature of CFBHN Reviewer:		Date:	
Print Name of CFBHN Witness:			
Signature of CFBHN Witness:		Date:	
<p><b>1.</b> Did the vendor submit a statement indicating an intention to participate in the RFP process by the date and time specified in the RFP and to the specified e-mail address?</p> <p style="text-align: center;"><input type="checkbox"/> YES = Pass                      <input type="checkbox"/> NO = Fail</p> <p>Comments:</p>			
<p><b>2.</b> Was the proposal received by the date and time specified in the RFP and at the specified address?</p> <p style="text-align: center;"><input type="checkbox"/> YES = Pass                      <input type="checkbox"/> NO = Fail</p> <p>Comments:</p>			
<b>3.</b> Did the proposal include the following? (for internal use only)			
a. Vendor's signed <b>Acceptance of Contract Terms and Conditions</b> form ( <b>APPENDIX II</b> )	<input type="checkbox"/> YES = Pass	<input type="checkbox"/> NO = Fail	
b. Vendor's signed <b>Certificate of Signature Authority</b> form or corporate resolution/other duly executed certification ( <b>APPENDIX II</b> )	<input type="checkbox"/> YES = Pass	<input type="checkbox"/> NO = Fail	
c. Vendor's signed <b>Certification of Non-Conviction of Public Entity Crimes</b> form ( <b>APPENDIX III</b> )	<input type="checkbox"/> YES = Pass	<input type="checkbox"/> NO = Fail	
d. Vendor's signed <b>Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Contracts/Subcontracts</b> form ( <b>APPENDIX IV</b> )	<input type="checkbox"/> YES = Pass	<input type="checkbox"/> NO = Fail	
e. Vendor's signed <b>Statement of Assurances</b> form ( <b>APPENDIX V</b> )	<input type="checkbox"/> YES = Pass	<input type="checkbox"/> NO = Fail	
f. Vendor's signed <b>Vendor Certification Regarding Scrutinized Companies Lists</b> form ( <b>APPENDIX VI</b> )	<input type="checkbox"/> YES = Pass	<input type="checkbox"/> NO = Fail	
g. Proof of active corporate non-profit status	<input type="checkbox"/> YES = Pass	<input type="checkbox"/> NO = Fail	



## APPENDIX II

# CERTIFICATE OF SIGNATURE AUTHORITY



**CERTIFICATE OF SIGNATURE AUTHORITY**

**Check below and complete Section A or Section B**

Vendor is not a sole proprietorship (Complete Section A)

Vendor is a sole proprietorship (Complete Section B)

**Section A**

I, \_\_\_\_\_ (name), hold the office or position of \_\_\_\_\_ (title) with \_\_\_\_\_ (legal name of Vendor) and have authority to make official representations by said Vendor regarding its official records and hereby state that my examination of the Vendor's records show that \_\_\_\_\_ (name) currently holds the office or position of \_\_\_\_\_ (title) with the Vendor and currently has authority to make binding representations to CFBHN and sign all documents submitted on behalf of the above-named Vendor in response to ITN/RFI/RFP # \_\_\_\_\_, and, in so doing, to bind the named Vendor to the statements made therein.

Dated:

Signature:

Printed Name:

Title:

**NOTE: In lieu of the above, the Vendor may submit a corporate resolution or other duly executed certification issued in the Vendor's normal course of business to prove signature authority of the named Authorized Representative.**

**Section B**

I, \_\_\_\_\_ (name) am a sole proprietor, personally doing business in the name of \_\_\_\_\_ (name of Vendor), and will be personally bound by the Proposal submitted in response to ITN/RFI/RFP # \_\_\_\_\_.

Dated:

Signature:

Printed Name:

# APPENDIX III

## CERTIFICATION OF NON-CONVICTION OF PUBLIC ENTITY CRIMES



## PUBLIC ENTITY CRIME

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted to State of Florida Department of Children and Family Services

by \_\_\_\_\_  
[print individual's name and title]  
for [print institution's name and business address]

and (if applicable) its Federal Employer Identification Number (FEIN)

(If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: \_\_\_\_\_.)

2. I understand that a "**public entity crime**" as defined in Paragraph 287.133(1)(g), F.S., means a violation of any state or Federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.

3. I understand that "**convicted**" or "**conviction**" as defined in Paragraph 287.133(1)(b), F.S., means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any Federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a Jury Verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.

4. I understand that an "**affiliate**" as defined in Paragraph 287.133(1)(a), F.S., means:

a. A predecessor or successor of a person convicted of a public entity crime; or

b. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "**affiliate**" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

5. I understand that a "**person**" as defined in Paragraph 287.133(1)(e), F.S., means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "**person**" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

**PUBLIC ENTITY CRIME**

6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. [Indicate which statement applies.]

\_\_\_\_\_ Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

\_\_\_\_\_ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

\_\_\_\_\_ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. [Attach a copy of the final order.]

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH I (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, F.S., FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

\_\_\_\_\_  
[signature]

State of \_\_\_\_\_  
County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Personally known \_\_\_\_\_

OR Produced identification \_\_\_\_\_ Notary Public - State of \_\_\_\_\_  
(type of identification) \_\_\_\_\_ My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
(Printed, typed or stamped commissioned name of notary public)



# APPENDIX IV

## CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION CONTRACTS/SUBCONTRACTS



Attachment IV

Contract No. \_\_\_\_\_

**CERTIFICATION REGARDING  
DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION  
CONTRACTS/SUBCONTRACTS**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, signed February 18, 1986. The guidelines were published in the May 29, 1987 Federal Register (52 Fed. Reg., pages 20360 - 20369).

**INSTRUCTIONS**

1. Each provider whose contract/subcontract equals or exceeds \$25,000 in federal moneys must sign this certification prior to execution of each contract/subcontract. Additionally, providers who audit federal programs must also sign, regardless of the contract amount. The Department of Children and Families cannot contract with these types of providers if they are debarred or suspended by the federal government.
2. This certification is a material representation of fact upon which reliance is placed when this contract/subcontract is entered into. If it is later determined that the signer knowingly rendered an erroneous certification, the Federal Government may pursue available remedies, including suspension and/or debarment.
3. The provider shall provide immediate written notice to the contract manager at any time the provider learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "debarred", "suspended", "ineligible", "person", "principal", and "voluntarily excluded", as used in this certification, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the department's contract manager for assistance in obtaining a copy of those regulations.
5. The provider agrees by submitting this certification that, it shall not knowingly enter into any subcontract with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this contract/subcontract unless authorized by the Federal Government.
6. The provider further agrees by submitting this certification that it will require each subcontractor of this contract/subcontract, whose payment will equal or exceed \$25,000 in federal moneys, to submit a signed copy of this certification.
7. The Department of Children and Families may rely upon a certification of a provider that it is not debarred, suspended, ineligible, or voluntarily excluded from contracting/subcontracting unless it knows that the certification is erroneous.
8. This signed certification must be kept in the contract manager's contract file. Subcontractor's certification must be kept at the provider's business location.

**CERTIFICATION**

- (1) The prospective provider certifies, by signing this certification, that neither he nor his principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this contract/subcontract by any federal department or agency.
- (2) Where the prospective provider is unable to certify to any of the statements in this certification, such prospective provider shall attach an explanation to this certification.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Name (type or print) Title

CF 1125

Effective July 2015

(CF-1125-1516)



## APPENDIX V STATEMENT OF ASSURANCES



<b>STATEMENT OF ASSURANCES</b>	
<b>ITN/RFI/RFP #:</b>	<b>181901CAT</b>
<b>Print Vendor's Name:</b>	
<b>Print Name of Authorized Representative:</b>	
<b>Statement</b>	<b>Initials</b>
<b>1. Infrastructure</b> – The vendor shall possess, purchase, or otherwise provide computer and telecommunications equipment and Internet access necessary to participate fully in the initiative.	_____
<b>2. Evaluation</b> – The vendor will cooperate fully with any CFBHN-designated evaluation agency in designing a program evaluation and providing any and all data necessary to conduct process and outcome evaluation.	_____
<b>3. Technical Assistance</b> – The vendor will participate in any CFBHN-conducted, sponsored, or required technical assistance meetings and/or workshops or conferences.	_____
<b>4. Site Visits</b> – The vendor will cooperate fully with the CFBHN and any CFBHN-designated evaluation agency in coordinating site visits.	_____
<b>5. Background Checks</b> – The vendor shall be responsible for providing background checks as a prerequisite of employment in accordance with Chapter 294.4572, Florida Statutes and Chapter 397.451, Florida Statutes.	_____
<b>6. Administrative Requirements</b> – The vendor agrees to comply with the following Office of Management and Budget (OMB) Circulars, as applicable: A-21 Cost Principles for State, Local and Indian Tribal Governments; A-102 Uniform Administrative Requirements for Grants and Agreements with State and Local Governments; A-110 Uniform Administrative Requirements for Grants and Agreements with Institutions; and, A-122 Cost Principles for Non-profit Organizations.	_____
<b>7. Non-discrimination</b> – The vendor agrees that no person will, on the basis of race, color, national origin, creed or religion be excluded from participation in, be refused the benefits of, or be otherwise subjected to discrimination pursuant to the Act governing these funds or any project, program, activity or sub-grant supported by the requirements of, (a) Title VI of the Civil Rights Act of 1964 which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended which prohibits discrimination the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended which prohibits discrimination in employment or any program or activity that receives or benefits from federal financial assistance on the basis of handicaps; (d) Age Discrimination Act 1975, as amended which prohibits discrimination on the basis of age, (e) Equal Employment Opportunity Program (EEO) must meets the requirements of 28 CFR 42.301.	_____

<b>ITN/RFI/RFP #:</b>	<b>181901CAT</b>	
<b>Print Vendor's Name:</b>		
<b>Statement</b>	<b>Initials</b>	
<b>8. Lobbying</b> – The vendor is prohibited by Title 31, USC, Section 1352, entitled “Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions,” from using Federal funds for lobbying the Executive or Legislative Branches of the federal government in connection with a specific grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal funds if grants and/or cooperative agreements exceed \$100,000 in total costs (45 CFR Part 93).	_____	
<b>9. Drug-Free Workplace Requirements</b> – The vendor agrees that he/she will provide, or will continue to provide, a drug-free workplace in accordance with 45 CFR Part 82.	_____	
<b>10. Confidentiality Requirements</b> – The confidentiality of the recipients of the services provided through this project shall be fully protected in accordance with Federal Confidentiality Regulations pertaining to Alcohol and Drug Abuse Patient Records as outlined in 42 CFR Part 2.	_____	
<b>11. Smoke-Free Workplace Requirements</b> – Public Law 103-227, Part C-Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children’s services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 per day and/or the imposition of an administrative compliance order on the responsible entity.	_____	
<b>12. Acceptance of Contract Terms and Conditions</b> – The vendor agrees to the contract Terms and Conditions specified in Appendix II.	_____	
<b>13. No Involvement</b> – The vendor certifies that they, nor any person having an interest in the vendor has been involved in the development of this procurement in any manner.	_____	
<b>14. No Contract Termination</b> – The vendor acknowledges that they have never had a contract terminated for not meeting performance measures or for cause.	_____	
<b>15. Disqualification for false or misleading information</b> – The vendor acknowledges that any information submitted within this RFP response may lead to the loss of the contract, if awarded.	_____	

# APPENDIX VI

## VENDOR CERTIFICATION REGARDING SCRUTINIZED COMPANIES LISTS



**VENDOR CERTIFICATION REGARDING  
SCRUTINIZED COMPANIES LISTS AND BUSINESS OPERATIONS IN CUBA OR SYRIA**

Respondent Vendor Name: \_\_\_\_\_  
 Vendor FEIN: \_\_\_\_\_  
 Vendor's Authorized Representative Name and Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

Pursuant to section 287.135, Florida Statutes, a company that is on the Scrutinized Companies that Boycott Israel List, created pursuant to section 215.4725, Florida Statutes is prohibited from submitting a proposal for, or entering into or renewing a contract with an agency or local governmental entity, for goods or services for any amount. A company that is on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or are engaged in business operations in Cuba or Syria is prohibited from submitting a proposal for, or entering into or renewing a contract with an agency or local governmental entity, for goods or services over \$1,000,000, pursuant to section 287.135, Florida Statutes. Both the Sudan List and the Iran List are created pursuant to section 215.473, Florida Statutes.

As the person authorized to sign on behalf of Respondent, I hereby certify that the company identified above in the section entitled "Respondent Vendor Name" is not listed on either the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List. I also certify that the aforementioned company is not engaged in business operations in Cuba or Syria. I understand that pursuant to section 287.135, Florida Statutes, the submission of a false certification may subject such company to civil penalties, attorney's fees, and/or costs and termination of the contract at the option of the awarding governmental entity.

Certified By: \_\_\_\_\_,  
Print Name Print Title

who is authorized to sign on behalf of the above referenced company.

Authorized Signature: \_\_\_\_\_.

Effective May 2017  
(CF-1110-1718b)

## APPENDIX VII FINANCIAL RISK ASSESSMENT





AGENCY:		PERIOD:		DATE:		
Calculated Value %	Benchmark	Points Available	Score Year 1	Score Year 2	SCORE TOTAL	
Total Annual Profit Total Annual Expenses	>0%	2 3.1% and above 1 break even to 3% 0 below 0			0.00	
Unrestricted Net Assets Total Annual Expenses	> .40	2 Above .40 1 Between .30 and .39 0 less than .29			0.00	
Cash & Securities at end of year Total Annual Expenses:(less depreciation) * 365	60 days	3 Above 90 2 between 65 and 89 1 between 49 and 64 0 below 48			0.00	
Total Receivables Total Unrestricted Revenue *365	45 days	2 Between 0 - 45 days 1 Between 46 -75 days 0 Above 76 days			0.00	
Payables Program Service Expenses *365	30 days	2 Between 0 - 25 days 1 Between 26 - 45 days 0 Above 46 days			0.00	
Current Assets Current Liabilities	2:1	3 Greater than 2 2 Between 1.50 - 1.99 1 Between 1.00-1.49 0 Between 0 - .99			0.00	
Review Audit	No Deficiencies	3 No deficiencies or material weaknesses 0 Deficiencies identified -1 Material weakness(es) identified			0.00	
Maximum Points Available Per Year: 17.00 Maximum Points Available TOTAL: 34.00			Score	0.00	Total Score	0.00

**FOR CFBHN USE ONLY**  
 Check all measures against submitted financials  
 Check all formulas  
 Enter CFBHN validated Total Score

CFBHN Staff Initials  
 CFBHN Staff Initials  
 CFBHN Staff Initials

CFBHN Reviewer Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

final as of 11/4/15

## APPENDIX VIII EVALUATION GUIDE



# Evaluator Information

## CFBHN RFP 181901CAT Community Action Treatment (CAT) Services in Hendry and Glades Counties

### EVALUATION TEAM GROUND RULES

Evaluators are chosen to participate because of their knowledge and skills and because of CFBHN's confidence in their ability to score both independently and fairly. The same scoring principles must be applied to every response received, independent of other evaluators.

1. **ALL** questions related to the solicitation document and the evaluations of the responses must be directed to:

**Carrie Hartes**, Procurement Manager  
Central Florida Behavioral Health Network, Inc.  
719 South US Highway 301  
Tampa, FL 33619  
[CHartes@cfbhn.org](mailto:CHartes@cfbhn.org)

2. Conflict of Interest Questionnaires must to be completed, signed and dated by all Evaluation Team members. Any identified conflicts of interest will be referred to Legal immediately.
3. Each evaluator will be provided a copy of the solicitation document, all attachments, amendments, and (if applicable) all vendors' inquiries, together with the written answers provided by CFBHN. Each evaluator will also be provided with a copy of each vendor's response, which should be evaluated and scored according to the instructions provided in the solicitation document and the Scoring Sheets.
4. Each member of the Evaluation Team shall independently score each response. No collaboration will be permitted during the scoring process. Do not ask other evaluators questions or share solicitation related information with anyone.
5. Evaluators must not solicit information or submissions from potential or interested offerors.
6. The written proposal is the basis upon which responses are evaluated and scored.
7. Only the Scoring Sheets provided with the solicitation document will be used to record your scores and comments. No additional notes or marks should appear elsewhere in the evaluation materials.
8. All raw scores must be assigned utilizing the scoring system provided in the evaluation manual.

9. Each evaluator should record the page or section number from the response being scored where the primary response was found relating to the criterion. If the response does not address an evaluation criterion, evaluators should indicate on the score sheet “not addressed”.
10. Each evaluation criterion must be scored. Evaluators may request assistance in understanding evaluation criteria and responses only from the Procurement Manager, who alone, is authorized to seek additional technical help if needed. Technical assistance, if needed, will be provided by non-voting technical advisors and will be uniformly disseminated to all evaluators simultaneously. This may also be accomplished by the Procurement Manager.
11. No attempt by CFBHN personnel or others to influence an evaluator's scoring will be tolerated. If any attempt is made to do so, the evaluator must immediately report the incident to the Procurement Manager. If the Procurement Manager makes such an attempt, the evaluator must immediately report the incident to the Inspector General.
12. To avoid the possibility of protest, all appearances of impropriety must be avoided.
13. Following completion of the independent evaluations of the proposals, the Procurement Manager will hold a Debriefing Meeting for the exclusive purpose of assuring that information has not been overlooked in the scoring of responses. Evaluators should work carefully to be as thorough as possible in order to help the department secure a fair and open competitive procurement. Evaluators may adjust their score at the Debriefing Meeting based on information discussed during the meeting that may have been overlooked/misunderstood which would have otherwise caused the score to increase or decrease.
14. The Debriefing Meeting of the Evaluation Team will be held at the place and time listed in **Section 2.5**.

# Debriefing Meeting of Evaluators

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## CFBHN RFP 181901CAT Community Action Treatment (CAT) Services in Hendry and Glades Counties

The main purpose of the Debriefing Meeting of the evaluators is to receive and record all evaluation scores. It is not essential that uniformity in scoring be achieved. It is at this meeting that the procurement manager logs in and records all scores on a spreadsheet and calculates those scores according to the evaluation methodology outlined in the solicitation document.

The following activities should occur prior to the conclusion of the meeting:

1. The procurement manager will confirm that no one has tried to influence any of the evaluators and that they have exercised their own independent judgment in scoring each response independently of any other.
2. The procurement manager will fill collect all of the scores from the evaluators.
3. The individual score sheets are to be collected and placed into the procurement file.
4. The scores are to be calculated in the presence of at least one witness. The final score for each provider will be listed in rank order.

## EVALUATOR'S CONFLICT OF INTEREST AND CONFIDENTIALITY OF INFORMATION STATEMENT

Your willingness to participate as an evaluator is an integral part of the procurement process. Central Florida Behavioral Health Network, Inc. (CFBHN) appreciates your assistance and expertise. Your designation as an evaluator for CFBHN requires that you fully understand the policies regarding potential conflicts of interest and the confidential nature of the responses and all that is contained therein.

**Confidentiality.** The competitive procurement process and the obligations imposed by the laws of the State of Florida require CFBHN to ensure that the competitive process operates in a fair and equitable manner. As an evaluator, you have access to information not generally available to the public and are charged with special professional and ethical responsibilities. You may have access to information about bidders that is to be used only during the evaluation process, and for discussion only with appropriate CFBHN personnel. You shall not discuss the evaluation, scoring, or status of any response or any action affecting any response with any person, firm, corporation, or other outside business entity at any time prior to, during, or after the procurement process. You shall not use such information obtained as an evaluator for any personal benefit, pecuniary or otherwise, nor copy and/or disseminate any portion of any response at any time prior to, during, or after the procurement process.

**Conflict of Interest and Ethical Considerations.** A conflict of interest or the appearance of a conflict of interest may occur if you or an immediate family member are directly or indirectly involved with an organization that has submitted a response for evaluation. Prior to reviewing any responses, you must inform CFBHN of any potential conflicts of interest or the appearance thereof. If you become aware of any potential conflict of interest as you review a response, you must immediately notify the point of contact for this procurement: Steven Jorgenson (813) 740-4811. You may be disqualified as an evaluator if you conduct yourself in a way that could create the appearance of bias or unfair advantage with or on behalf of any competitive bidder, potential bidder, agent, subcontractor, or other business entity, whether through direct association with contractor representatives, indirect associations, through recreational activities or otherwise.

Examples of potentially biasing affiliations or relationships are listed below:

1. Your solicitation, acceptance, or agreement to accept from anyone any benefit, pecuniary or otherwise, as consideration for your decision or recommendation as it pertains to your evaluation of any response.
2. Your affiliation with a bidding company or institution. For example, a conflict may exist when you:

- a. Are employed by or are being considered for employment with the company or institution submitting any bid or hold a consulting, advisory, or other similar position with said company or institution;
  - b. Hold any current membership on a committee, board, or similar position with the company or institution;
  - c. Hold ownership of the company or institution, securities, or other evidences of debt;
  - d. Are currently a student or employee in the department or school submitting a response.
3. Your relationship with someone who has a personal interest in the response. This includes any affiliation or relationship by marriage or through family membership, any business or professional partnership, close personal friendship, or any other relationship that you think might tend to affect your objectivity or judgment or may give an appearance of impropriety to someone viewing it from the outside the relationship.

I have read this document and understand my obligations as explained herein. I further understand that I must advise CFBHN if a conflict currently exists or arises during my term of service as an evaluator. I further understand that I must sign and deliver this statement to CFBHN prior to participating in the evaluation process.

Evaluator Signature: \_\_\_\_\_

Evaluator Name (Printed): \_\_\_\_\_

Date: \_\_\_\_\_ RFP: 181901CAT

# Evaluation Questions

## CFBHN RFP 181901CAT Community Action Treatment (CAT) Services in Hendry and Glades Counties

At a minimum, the below items from this RFP should be addressed in each agency's response. Please be as descriptive as possible as to how your agency plans to meet the requirements and goals of each item. Responses exhibiting innovation and creativity will be scored higher than those lacking ingenuity.

- Identifying Participants
- Scope of Work
- Practice Models and Approaches
- Treatment Plan Engagement Process
- Discharges
- Staffing
- Vendor Unique Qualifications and Community Involvement
- Experience Working/Integrating with School Systems
- Financial Risk Assessment



# Evaluation Tools

## CFBHN RFP 181901CAT Community Action Treatment (CAT) Services in Hendry and Glades Counties

### Instructions:

Each of the criterion for this RFP has a score value from 0-10, with 0 being no value and 10 being excellent. A score can be issued in tenths (i.e. 7.3).

### Description of Points:

Point Value	Category	Description
10 Points	Excellent	Presentation is <b>very clear and comprehensive</b> ; Demonstrates <b>superior</b> organizational and programmatic capacity; Presentation demonstrates <b>innovation</b> ; Level of detail leaves the rater with <b>no</b> unanswered questions.
8 Points	Good	Presentation is <b>clear and comprehensive</b> ; Demonstrates <b>good</b> organizational and programmatic capacity; Presentation demonstrates <b>some innovation</b> ; Level of detail leaves the rater with <b>no</b> unanswered questions.
5 Points	Fair	Presentation is <b>somewhat clear but may not be comprehensive</b> ; Demonstrates <b>fair</b> organizational and programmatic capacity; Level of detail may leave the rater with <b>several</b> unanswered questions.
2 Points	Poor	Presentation is <b>not clearly presented or comprehensive</b> ; Demonstrates <b>poor</b> organizational and programmatic capacity; Level of detail may leave the rater with <b>many</b> unanswered questions.
0 Points	Omitted	<b>Not addressed</b> in the presentation.

### How to Compute Final Written Scores:

1. The scores for each criterion are added together to generate the Total Score for that particular topic.
2. A Weighted Value is assigned to each topic.
3. The Maximum Points given to each topic will be based on the following formula:

$$\text{Total Score} \times \text{Weighted Value} = \text{Maximum Points}$$

4. All of the Maximum Points will be added together to derive the Total Response Score.
5. The Total Response Score for all evaluators will be averaged to generate the Average Score for each vendor. Vendors will be ranked based on the Average Scores.

### Point Value for Criteria

#	Criteria	Possible Score	Weighted Value	Maximum Points
1	Identifying Participants	10	5	50
2	Scope of Work	10	5	50
3	Practice Models and Approaches	10	4	40
4	Treatment Plan Engagement Process	10	4	40
5	Discharges	10	3	30
6	Staffing	10	1	10
7	Vendor Unique Qualifications and Community Involvement	10	5	50
8	Experience Working/Integrating with School Systems	10	5	50
9	Financial Risk Assessment	10	2	20
<b>Maximum Possible Score</b>				<b>340</b>

Vendor Name:			
Description:	<b>Identifying Participants (3.1)</b>		
Describe the processes and community linkages that your organization will use to identify and engage potential participants.			
Notes:			
Evaluator's Score:			Evaluator's Initials:



Vendor Name:			
Description:	<b>Scope of Work (3.2)</b>		
<p>3.2.1. Describe what provisions will be made to ensure prompt response to any “on call” crisis (there is a duty to be available at any time of any day) or crisis calls during normal working hours. Please include time frames for response times, and how staff availability will be ensured (examples may include: a community stakeholder contacts you and feels the individual is in crisis, the individual contacts you and appears to be in crisis, an individual is admitted to a local Baker Act facility or juvenile assessment center (JAC), or an individual is at the ER and you are notified).</p> <p>3.2.2. As a result of the assessment and treatment planning process, providers are required to have an individualized plan of care specifically tailored to each person on the CAT team. Describe how the individuals served on the CAT team will have their needs and desires addressed specifically to them.</p> <p>3.2.3. Describe the CAT team’s role in the system of care and how that role involves participation in community systems meetings/committees.</p>			
Notes:			
Evaluator’s Score:			Evaluator’s Initials:



Vendor Name:			
Description:	<b>Practice Models (3.3)</b>		
<p>Please describe which if any of the Practice Models discussed on Page 3 of Guidance Document 32 (APPENDIX IX) you intend to use to guide the facilitation of your program. Include in your response how you believe the Practice Model(s) will better serve the needs of the local population.</p> <ol style="list-style-type: none"> <li>1. The Transition to Independence Process (TIP) model is an evidence-supported practice based on published studies that demonstrate improvements in real-life outcomes for youth and young adults with emotional/behavioral difficulties (EBD).</li> <li>2. The Research and Training Center for Pathways to Positive Futures (Pathways) aims to improve the lives of youth and young adults with serious mental health conditions through rigorous research and effective training and dissemination. Their work is guided by the perspectives of young people and their families, and based in a positive development framework.</li> <li>3. National Wraparound Initiative - Wraparound is an intensive, holistic and individualized care planning and management process that engages and supports individuals with complex needs (most typically children, youth, and their families) to live in the community and realize their hopes and dreams.</li> <li>4. Strengthening Family Support for Young People: Tip sheet for strengthening family support.</li> <li>5. Positive Youth Development (PYD), Resilience and Recovery: Actively focuses on building strengthens and enhancing healthy development.</li> <li>6. Section 394.491, F.S. – Guiding principles for the child and adolescent mental health treatment and support system.</li> <li>7. Youth M.O.V.E. National. Youth M.O.V.E is a youth led national organization devoted to improving services and systems that support positive growth and development by uniting the voices of individuals who have lived experience in various systems including mental health, juvenile justice, education, and child welfare. There are chapters in Florida and opportunities for young people to learn leadership and advocacy skills and to get involved with peers.</li> </ol>			
Notes:			
Evaluator's Score:			Evaluator's Initials:



Vendor Name:			
Description:	<b>Treatment Plan Engagement Process (3.4)</b>		
Please describe the engagement process for both the youth and their family. If applicable, describe methodologies to engage youths and their families in their treatment plans that have been successful in the past.			
Notes:			
Evaluator's Score:			Evaluator's Initials:

Vendor Name:			
Description:	<b>Discharges (3.5)</b>		
<p>Please describe your anticipated processes towards discharges as they relate to the framework outlined in Guidance Document 32. As part of the discharge planning process, CAT teams assist in identification of additional resources that help individuals and families maintain progress made in treatment. Throughout treatment, the Network Service Provider should focus on successful transition from services. As the individual moves into the discharge phase of treatment, the CAT Team may determine the need to modify the service array or frequency of services to ease transition to less intensive services and supports. Network Service Providers are encouraged to implement a discharge planning process that:</p> <ol style="list-style-type: none"> <li>1. Begins at admission;</li> <li>2. Includes ongoing discussion as part of the Plan of Care review;</li> <li>3. Includes active involvement of the individual and family;</li> <li>4. Includes transition to the adult mental health and other systems, as appropriate; and</li> <li>5. Includes an aftercare plan submitted to and developed in collaboration with the individual and family that leverages available community services and supports.</li> </ol> <p>Within seven calendar days of an individual's discharge from services, the Provider shall complete a Discharge Summary containing the following items, at a minimum:</p> <ol style="list-style-type: none"> <li>1. The reason for the discharge;</li> <li>2. A summary of CAT services and supports provided to the individual;</li> <li>3. A summary of resource linkages or referrals made to other services or supports on behalf of the individual; and</li> <li>4. A summary of the individual's progress toward each treatment goal in the Master Plan of Care.</li> </ol>			
Notes:			
Evaluator's Score:			Evaluator's Initials:



<b>Vendor Name:</b>			
<b>Description:</b>	<b>Staffing (3.6)</b>		
<p>Describe what your organization will do to ensure your CAT team is properly staffed at the time services begin. Please note any exceptions or challenges to meeting the staffing qualification requirements you anticipate (see "Staffing Requirements" on pages 2 to 3 of Guidance Document 32). You are required to meet the staffing requirements of the Guidance Document.</p> <p>The CAT model is an integrated service delivery approach that utilizes a team of individuals to comprehensively address the needs of the young person, and their family, to include the following staff:</p> <ol style="list-style-type: none"> <li>1. A full-time Team Leader,</li> <li>2. Mental Health Clinicians,</li> <li>3. A Psychiatrist or Advanced Registered Nurse Practitioner (part-time),</li> <li>4. A Registered or Licensed Practical Nurse (part-time),</li> <li>5. A Case Manager,</li> <li>6. Therapeutic Mentors, and</li> <li>7. Support Staff</li> </ol> <p>The Network Service Provider must have these staff as part of the team; however, the number of staff and the functions they perform may vary by team in response to local needs and as approved by the Managing Entity. CAT members work collaboratively to deliver the majority of behavioral health services, coordinate with other service providers when necessary, and assist the family in developing or strengthening their natural support system.</p>			
<b>Notes:</b>			
<b>Evaluator's Score:</b>			<b>Evaluator's Initials:</b>





Vendor Name:			
Description:	<b>Vendor Unique Qualifications and Community Involvement (3.7)</b>		
<p>Please describe any special capabilities or qualifications your organization believes will enable you to successfully operate a CAT team. Include in your response community relationships/partnerships which may help better facilitate the operation of the CAT Team (local schools, police, other health care providers, churches, etc.). Letters of support from community stakeholders may be included as attachments to the response. Letters of support must be included in the submission to be considered.</p>			
Notes:			
Evaluator's Score:			Evaluator's Initials:

Vendor Name:			
Description:	<b>Experience Working/Integrating with School Systems (3.8)</b>		
<p>Please describe your experience working with and integrating programs within a school system. This section's response can describe a relationship in any school system; it does not necessarily require current integration with the Hendry and Glades Counties school systems at this time. If you are not currently integrated with the Hendry and Glades Counties school systems, describe how you intend to work with the school systems.</p>			
Notes:			
Evaluator's Score:			Evaluator's Initials:

# Evaluation of Financial Information

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## CFBHN RFP 181901CAT Community Action Treatment (CAT) Services in Hendry and Glades Counties

The Financial Stability shall be evaluated by staff in the Finance Department at Central Florida Behavioral Health Network utilizing the scoring sheet and Financial Risk Assessment on the following pages.

Vendor Name:			
Description:	<b>Financial Risk Assessment</b>		
<p>Copies of their last two financial and compliance audits conducted through an independent auditing firm. The audit must include financial statements, auditor's report, and management letters. Additionally, the vendor must submit a completed financial risk assessment.</p> <p>If the vendor is not required to have an audit (as required by OMB Circular A-133), and does not have reports for the two previous years, then corresponding financial statements that include Income Statement, Balance Sheet, and Statement of Cash Flows shall be certified by the agency's Chief Executive Officer, Chief Operating Officer or Chief Financial Officer and shall be submitted, along with the completed financial risk assessment.</p>			
Notes:			
Evaluator's Score:			Evaluator's Initials:



**Central Florida Behavioral Health Network  
Financial Risk Assessment  
Agency Monitoring Tool**

AGENCY: \_\_\_\_\_ PERIOD: \_\_\_\_\_ DATE: \_\_\_\_\_

Calculated Value %	Benchmark	Points Available	Score Year 1	Score Year 2	SCORE TOTAL
#DIV/0!	>0%	2 3.1% and above 1 Break even to 3% 0 below 0			0.00
#DIV/0!	> .40	2 Above .40 1 Between .30 and .39 0 less than .29			0.00
#DIV/0!	60 days	3 Above 90 2 between 65 and 89 1 between 49 and 64 0 below 48			0.00
#DIV/0!	45 days	2 Between 0 - 45 days 1 Between 46 - 75 days 0 Above 76 days			0.00
#DIV/0!	30 days	2 Between 0 - 25 days 1 Between 26 - 45 days 0 Above 46 days			0.00
#DIV/0!	2:1	3 Greater than 2 2 Between 1.50 - 1.99 1 Between 1.00-1.49 0 Between 0 - .99			0.00
	No Deficiencies	3 No deficiencies or material weaknesses 0 Deficiencies identified -1 Material weakness(es) identified			0.00

Maximum Points Available Per Year: 17.00  
Maximum Points Available TOTAL 34.00

**FOR CFBHN USE ONLY**  
Check all measures against submitted financials  
Check all formulas  
Enter CFBHN validated Total Score

CFBHN Reviewer Name: \_\_\_\_\_  
Date: \_\_\_\_\_

CFBHN Staff Initials  
CFBHN Staff Initials

final as of 11/4/15



# Presentation Assessments

## CFBHN RFP 181901CAT Community Action Treatment (CAT) Services in Hendry and Glades Counties

### Instructions:

Evaluators should assess a score value from 0-10 for each applicable point (with 0 being no value and 10 being excellent). A score can be issued in tenths (i.e. 7.3). The scores will later be weighted to establish the final score. 75% of the base score will come from the general presentation and 25% of the score will come from the community-specific score for each team.

Vendor Name:			
Description:	<b>Live Presentation</b>		
Points should be awarded in this section based on the overall presentation of the provider's ability to succeed in operating a CAT team.			
Point Value	Category	Description	
10 Points	Excellent	Presentation is <b>very clear and comprehensive</b> ; Demonstrates <b>superior</b> organizational and programmatic capacity; Presentation demonstrates <b>innovation</b> ; Level of detail leaves the rater with <b>no</b> unanswered questions.	
8 Points	Good	Presentation is <b>clear and comprehensive</b> ; Demonstrates <b>good</b> organizational and programmatic capacity; Presentation demonstrates <b>some innovation</b> ; Level of detail leaves the rater with <b>no</b> unanswered questions.	
5 Points	Fair	Presentation is <b>somewhat clear but may not be comprehensive</b> ; Demonstrates <b>fair</b> organizational and programmatic capacity; Level of detail may leave the rater with <b>several</b> unanswered questions.	
2 Points	Poor	Presentation is <b>not clearly presented or comprehensive</b> ; Demonstrates <b>poor</b> organizational and programmatic capacity; Level of detail may leave the rater with <b>many</b> unanswered questions.	
0 Points	Omitted	<b>Not addressed</b> in the presentation.	
<b>Notes:</b>			
Evaluator's Score:			Evaluator's Initials:

## APPENDIX XIV GUIDANCE DOCUMENT 32

## Guidance 32 Community Action Treatment (CAT) Team

**Contract Reference:** *Section A-1.1, Exhibit C2*

**Requirement:** *Specific Appropriations of the General Appropriations Act*

**Description:** The purpose of this document is to provide best practice considerations to support the programmatic implementation of the Community Action Treatment teams, also known as Community Action Teams (CAT).

### I. Authority

Specific Appropriation 363 of the 2017–2018 General Appropriations Act (GAA) directed the Department of Children and Families (Department) to “... contract with the following providers for the operation of Community Action Treatment (CAT) teams that provide community-based services to children ages 11 to 21 with a mental health or co-occurring substance abuse diagnosis with any accompanying characteristics such as being at-risk for out-of-home placement as demonstrated by repeated failures at less intensive levels of care; having two or more hospitalizations or repeated failures; involvement with the Department of Juvenile Justice or multiple episodes involving law enforcement; or poor academic performance or suspensions. Children younger than 11 may be candidates if they display two or more of the aforementioned characteristics.”

### II. Managing Entity Responsibilities

To ensure consistent statewide implementation and administration of this proviso project, the Managing Entity shall include the following elements in subcontracts with Network Service Providers:

1. Network Service Providers providing CAT services must adhere to the service delivery and reporting requirements described in this Guidance document;
2. Participation in all CAT program conference calls, meetings or other oversight events scheduled by the Department;
3. Requirements for quarterly reporting of actual expenditures, fiscal year-end financial reconciliation of actual allowable expenditures to total payments, and prompt return of any unearned funds or overpayments; and
4. A monthly fixed fee method of payment requiring the Network Service Providers to serve a minimum of number of persons per team per month. Unless otherwise approved in advance by the Department, the Managing Entity shall adopt a minimum service target of 35 children per month.
  - The Managing Entity may request Department approval for an alternative target for a specific Network Service Provider, taking into consideration a Network Service Provider’s program-specific staffing capacity, historical funding utilization, estimated community needs, or unique geographic and demographic factors of the service location.
  - In the first year of services by a newly procured Network Service Provider, the Managing Entity may implement a phase-in period to achieve the minimum service target as follows:
    - 10 children per month during the first month of services,
    - 20 children per month during the second month,
    - 25 children per month during the third month, and
    - 35 children per month thereafter.



### **III. Program Goals**

CAT is intended to be a safe and effective alternative to out-of-home placement for children with serious behavioral health conditions. Upon successful completion, the family should have the skills and natural support system needed to maintain improvements made during services. The goals of the CAT program are to:

1. Strengthen the family and support systems for youth and young adults to assist them to live successfully in the community;
2. Improve school related outcomes such as attendance, grades, and graduation rates;
3. Decrease out-of-home placements;
4. Improve family and youth functioning;
5. Decrease substance use and abuse;
6. Decrease psychiatric hospitalizations;
7. Transition into age appropriate services; and
8. Increase health and wellness.

### **IV. Eligibility**

The following participation criteria are established in proviso. The Managing Entity must include these standards in subcontracts for CAT services:

1. Otherwise eligible for publicly funded substance abuse and mental health services pursuant to s. 394.674, F.S., and
2. Individuals aged 11 to 21 with a mental health diagnosis or co-occurring substance abuse diagnosis with one or more of the following accompanying characteristics:
  - The individual is at-risk for out-of-home placement as demonstrated by repeated failures at less intensive levels of care;
  - The individual has had two or more periods of hospitalization or repeated failures;
  - The individual has had involvement with the Department of Juvenile Justice or multiple episodes involving law enforcement; or
  - The individual has poor academic performance or suspensions.
3. Children younger than 11 with a mental health diagnosis or co-occurring substance abuse diagnosis may be candidates if they meet two or more of the aforementioned characteristics.

Individuals residing in therapeutic placements such as hospitals, residential treatment centers, therapeutic group homes and therapeutic foster homes; and those receiving day treatment services are not eligible to receive CAT services.

### **V. CAT Model**

The CAT model is an integrated service delivery approach that utilizes a team of individuals to comprehensively address the needs of the young person, and their family, to include the following staff:

1. A full-time Team Leader,
2. Mental Health Clinicians,

3. A Psychiatrist or Advanced Registered Nurse Practitioner (part-time),
4. A Registered or Licensed Practical Nurse (part-time),
5. A Case Manager,
6. Therapeutic Mentors, and
7. Support Staff

The Network Service Provider must have these staff as part of the team; however, the number of staff and the functions they perform may vary by team in response to local needs and as approved by the Managing Entity. CAT members work collaboratively to deliver the majority of behavioral health services, coordinate with other service providers when necessary, and assist the family in developing or strengthening their natural support system.

CAT funds are used to address the therapeutic needs of the eligible youth or young adult receiving services. However, the CAT model is based on a family-centered approach in which the CAT team assists parents or caregivers to obtain services and supports, which may include providing information and education about how to obtain services and supports, and assistance with referrals.

The number of sessions and the frequency with which they are provided is set through collaboration rather than service limits. The team is available on nights, weekends, and holidays. In the event that interventions out of the scope of the team's expertise, qualifications, or licensure (i.e., eating disorder treatment, behavior analysis, psychological testing, substance abuse treatment, etc.) are required, referrals are made to specialists, with coordination from the team. This flexibility in service delivery is intended to promote a "whatever it takes" approach to assisting young people and their families to achieve their goals.

### **Practice Considerations: Models and Approaches for Working with Young People and Their Families**

1. The Transition to Independence Process (TIP) model is an evidence-supported practice based on published studies that demonstrate improvements in real-life outcomes for youth and young adults with emotional/behavioral difficulties (EBD).  
<http://tipstars.org/Home.aspx>
2. The Research and Training Center for Pathways to Positive Futures (Pathways) aims to improve the lives of youth and young adults with serious mental health conditions through rigorous research and effective training and dissemination. Their work is guided by the perspectives of young people and their families, and based in a positive development framework.  
<http://www.pathwaysrtc.pdx.edu/about>
3. National Wraparound Initiative - Wraparound is an intensive, holistic and individualized care planning and management process that engages and supports individuals with complex needs (most typically children, youth, and their families) to live in the community and realize their hopes and dreams.  
<https://nwi.pdx.edu/wraparound-basics/>
4. Strengthening Family Support for Young People: Tip sheet for strengthening family support.  
<http://www.pathwaysrtc.pdx.edu/pdf/projPTTC-FamilySupportTipSheet.pdf>
5. Positive Youth Development (PYD), Resilience and Recovery: Actively focuses on building strengths and enhancing healthy development.  
<http://www.pathwaysrtc.pdx.edu/pdf/pbCmtyBasedApproaches09-2011.pdf>
6. Section 394.491, F.S. – Guiding principles for the child and adolescent mental health treatment and support system.

[http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=0300-0399/0394/Sections/0394.491.html](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.491.html)

7. Youth M.O.V.E. National. Youth M.O.V.E is a youth led national organization devoted to improving services and systems that support positive growth and development by uniting the voices of individuals who have lived experience in various systems including mental health, juvenile justice, education, and child welfare. There are chapters in Florida and opportunities for young people to learn leadership and advocacy skills and to get involved with peers.

<http://www.youthmovenational.org/Pages/mission-vision-purpose.html>

## **VI. Serving Young Adults**

The CAT program serves young adults up to the age of twenty-one (21), which includes young adults ages eighteen (18) up to twenty (20) who are legally considered adults. Network Service Providers serving these young adults must consider their legal rights to make decisions about their treatment, who will be involved, and with whom information will be shared. In keeping with the focus of the CAT model, Network Service Providers should support the young person to enhance and develop relationships and supports within their family and community, guided by their preferences.

## **VII. Coordination With Other Key Entities**

It is important for Network Service Providers to address the provision of services and supports from a comprehensive approach, which includes coordination with other key entities providing services and supports to the individual receiving services. In collaboration with and based on the preferences of the individual receiving services and their parent/legal guardian (if applicable). Network Service Providers should identify and coordinate efforts with other key entities as part of their case management function, which include but are not limited to: primary health care, child welfare, juvenile justice, corrections, and special education.

If the individual receiving services is a minor served by child welfare, members of their treatment team shall include their child welfare Case Manager and guardian ad litem (if assigned). If and how the parent will be included in treatment should be determined in coordination with the dependency case manager, based on individual circumstances. Network Service Providers shall document efforts to identify and coordinate with the other key entities in the case notes.

## **VIII. Screening and Assessment**

Within 45 days of an individual's admission to services, the Network Service Provider shall complete the North Carolina Family Assessment Scale for General Services and Reunification® (NCFAS-G+R) as the required initial assessment to assist in identifying areas of focus in treatment. The NCFAS-G+R and Plans of Care (Initial and Master) must be completed for all individuals served, to include those transferred from another program within the same agency.

Network Service Providers are encouraged to use a variety of reliable and valid screening and assessment tools in addition to the NCFAS-G+R as part of the assessment process, with focus on screening for co-occurring mental health and substance use disorders. Additionally, Network Service Providers are encouraged to gather collateral information in coordination with the individual served and their family, to include such things as: school records; mental health and substance abuse evaluations and treatment history; and level of cognitive functioning to develop a comprehensive understanding of the young person's and their family's circumstances.

As with best practice approaches such as Systems of Care and Transition to Independence, the screening and assessment process should focus on identifying competencies and resources to be leveraged as well as needs

across multiple life domains, such as education, vocation, mental health, substance use, primary health, and social connections.

### **Practice Considerations: Screening and Assessment Resources**

1. The California Evidenced-based Clearinghouse for Child Welfare – Assessment ratings and how to determine if an assessment is reliable and valid.

<http://www.cebc4cw.org/assessment-tools/assessment-ratings/>

2. The REACH Institute offers a listing of mental health screening tools, assessments and tool kits.

[GLAD-PC Toolkit](#) and [T-MAY](#)

3. Screening and assessment resources for co-occurring mental health and substance use disorders.

- The SAMHSA-HRSA Center for Integrated Health Solutions (CIHS) promotes the development of integrated primary and behavioral health services to better address the needs of individuals with mental health and substance use conditions and offers a compendium of validated screening and assessment instruments and tools for mental and substance use disorders.

<http://www.integration.samhsa.gov/clinical-practice/screening-tools>

- SAMHSA Co-occurring Center for Excellence – Integrated Screening and Assessment

<http://media.samhsa.gov/co-occurring/topics/screening-and-assessment/index.aspx>

- Alcohol & Drug Abuse Institute - University of Washington: Info Brief: Co-Occurring Disorders in Adolescents. Provides an extensive list of resources related to screening, assessment and integrated treatment.

<http://adai.uw.edu/pubs/infobriefs/ADAI-IB-2011-01.pdf>

4. Casey Life Skills assessment is a free practice tool and framework developed for working with youth in foster care; however, it is beneficial for any young person. It is a self-assessment of independent living skills in eight areas that takes about 30 minutes to complete online and provides instant results.

<http://lifeskills.casey.org/>

5. Youth Efficacy/Empowerment Scale and Youth Participation in Planning Scale - Portland Research and Training Center (Pathways RTC):

<http://www.pathwaysrtc.pdx.edu/pdf/pbCmtyBasedApproaches09-2011.pdf>

### **IX. Treatment Planning Process**

The treatment planning process serves to identify short-term objectives to build long-term stability, resilience, family unity and to promote wellness and illness management. A comprehensive, team-based approach is increasingly seen as the preferred mechanism for creating and monitoring treatment plans and is consistent with the CAT program.

There is evidence that outcomes improve when youth and families participate actively in treatment and their involvement is essential at every phase of the treatment process, including assessment, treatment planning, implementation, and monitoring and outcome evaluation.<sup>1</sup> Working as a team, the young person, family, natural

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<sup>1</sup> See, [http://www.aacap.org/aacap/Policy\\_Statements/2009/Family\\_and\\_Youth\\_Participation\\_in\\_Clinical\\_Decision\\_Making.aspx](http://www.aacap.org/aacap/Policy_Statements/2009/Family_and_Youth_Participation_in_Clinical_Decision_Making.aspx)

supports, and professionals can effectively support individualized, strength-based, and culturally competent treatment.

Network Service Providers are encouraged to focus on engagement of the young person and their family as a critical first step in the treatment process, as well as the promotion of active participation as equal partners in the treatment planning process.

### **Practice Considerations: Treatment Planning for Young People with Behavioral Health Needs**

1. Achieve My Plan (AMP) - The AMP study is testing a promising intervention that was developed by researchers at Portland State University, in collaboration with young people who have mental health conditions, service providers and caregivers. Tip sheets for meeting facilitators and young people, the Youth Self-efficacy/Empowerment Scale and Youth Participation in Planning Scale and a video entitled Youth Participation in Planning can be found at:  
<http://www.pathwaysrtc.pdx.edu/proj-3-amp>
2. Family and Youth Participation in Clinical Decision Making. American Academy of Child and Adolescent Psychiatry.  
[http://www.aacap.org/aacap/Policy\\_Statements/2009/Family\\_and\\_Youth\\_Participation\\_in\\_Clinical\\_Decision\\_Making.aspx](http://www.aacap.org/aacap/Policy_Statements/2009/Family_and_Youth_Participation_in_Clinical_Decision_Making.aspx)

## **X. Plan of Care**

### **1. Initial Plan of Care**

Within 30 days of an individual's admission to services, the Network Service Provider shall complete an Initial Plan of Care to guide the provision of services by the CAT team. Services and supports by the CAT team are established in the Initial Plan of Care, which provides sufficient time to complete the NCFAS-G+R within the first 45 days. Review of the Initial Plan of Care is required to ensure that information gathered during the first 60 days is considered and that a Master Plan of Care is developed to articulate the provision of services and supports longer-term. The Network Service Provider must document that the Initial Plan of Care was reviewed with the individual being served and his or her parent or guardian and request that they sign the plan at the time of review. At a minimum, the Initial Plan of Care shall:

- Be developed with the participation of the individual receiving services and his or her family, including caregivers and guardians;
- Specify the CAT services and supports to be provided by CAT Team members, to include a focus on engagement, stabilization, and a safety planning if needed; and
- Include a brief initial discharge planning discussion, to include the general goals to be accomplished prior to discharge.

### **2. Master Plan of Care**

Within 60 days after admission, the Network Service Provider shall review the Initial Plan of Care and update it as needed to include the NCFAS-G+R initial assessment and other information gathered since admission. The Network Service Provider will implement the updated Initial Plan of Care as the Master Plan of Care. The Network Service Provider may adopt an unrevised Initial Plan of Care if it meets the requirements of the Master Plan of Care and includes the initial NCFAS-G+R assessment. At minimum the Master Plan of Care shall:

- Be strength-based and built on the individual's assets and resources;

- Be individualized and developmentally appropriate to age and functioning level;
- Address needs in various life domains, as appropriate;
- Integrate substance abuse and mental health treatment when indicated;
- Specify measurable treatment goals and target dates for services and supports;
- Specify staff members responsible for completion of each treatment goal; and
- Include a discharge plan and identify mechanisms for providing resources and tools for successful transition from services.

At minimum, the Network Service Provider shall review and revise the Master Plan of Care every three months thereafter until discharge, or more frequently as needed to address changes in circumstances impacting treatment and discharge planning. In each review, the Network Service Provider shall include active participation by the individual receiving services, and his or her family, caregivers, guardians, and other key entities serving the individual as appropriate.

### **Practice Considerations: Developing a Plan of Care**

1. The Wraparound Approach in Systems of Care.  
<http://www.oregon.gov/oha/amh/wraparound/docs/wraparound-approach-soc.pdf>
2. Achieve My Plan (AMP): Youth participation in planning – provides tools, tip sheets for professionals and youth  
<https://www.pathwaysrtc.pdx.edu/p3c-achieve-my-plan>
3. Journal of Child and Family Studies (May, 2017): Increasing Youth Participation in Team-Based Treatment Planning: The Achieve My Plan Enhancement for Wraparound:  
<https://www.pathwaysrtc.pdx.edu/pdf/pbJCFS-Walker-AMP-Enhancement-for-Wraparound-05-2017.pdf>
4. Community-based Approaches for Supporting Positive Development in Youth and Young Adults: RTC Pathways.  
<http://www.pathwaysrtc.pdx.edu/pdf/pbCmtyBasedApproaches09-2011.pdf>

## **XI. Services and Supports**

The mix of services and supports provided should be dictated by individual needs and strengths, serve to strengthen their family, and provide older adolescents with supports and skills necessary in preparation for coping with life as an adult.<sup>2</sup> Services and supports and the manner of service provision should be developmentally appropriate for the individual. For older youth, services and supports may include supported employment and vocation certification, independent living skills training, and peer support services to assist in building social connections and learning new skills. It is important to discuss the roles and responsibilities of the CAT team members with the individual and family to ensure they understand the roles and responsibilities of each. This is especially important to clarify the role of the peer or mentor, as this person may promote social connectedness and assist in the development of a support network of friends outside of the CAT program.

Network Service Providers are encouraged to offer an array of formal treatment interventions and informal supports provided in the home or other community locations convenient and beneficial to the individual and family. Network

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<sup>2</sup>Chapter 394. 491, F.S. - *Guiding principles for the child and adolescent mental health treatment and support system.*  
[http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=0300-0399/0394/Sections/0394.491.html](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0300-0399/0394/Sections/0394.491.html)

Service Providers are encouraged to assist the individual and family to develop connections to natural supports within their own network of associates, such as friends and neighbors, through connections with community, service and religious organizations, and participation in clubs and other civic activities. Natural supports ease the transition from formal services and provide ongoing support after discharge.<sup>3</sup>

Formal treatment services may include evidenced-based practices appropriate to the circumstances of the young person and their family. Network Service Providers are encouraged to leverage resources and opportunities to implement evidenced-based practices with fidelity, which may include partnering with other CAT teams or organizations in the local system of care.

Support services and natural supports are interventions developed on an individualized basis and tailored to address the individual's and family's unique needs, strengths, and preferences. Support services may include, but are not limited to: Family Support Specialists; participation in recreational activities; youth development and leadership programs; temporary assistance in meeting and problem solving basic needs that interfere with attaining treatment goals; and independent living skills training.

### **Practice Considerations:**

1. Pathways Transition Training Collaborative (PTTC): Community of Practice Training: Provides training and TA materials for serving youth and young adults – Set of competencies; Transition Service Provider Competency Scale; On-line training modules focused on promoting positive pathways to adulthood.

<https://www.pathwaysrtc.pdx.edu/pathways-transition-training-collaborative>

2. Access to Supports and Services. National Wraparound Initiative:

<http://www.nwi.pdx.edu/supportsservices.shtml#1>

3. HHS: Office of Adolescent Health: Research, resources and training for providers, fact sheets, grant opportunities:

<https://www.hhs.gov/ash/oah/adolescent-development/mental-health/mental-health-disorders/index.html>

1. RTC Pathways -Youth Peer Support

<https://www.pathwaysrtc.pdx.edu/pdf/proj-5-AMP-what-is-peer-support.pdf>

## **XII. Discharge**

As part of the discharge planning process, CAT teams assist in identification of additional resources that help individuals and families maintain progress made in treatment. Throughout treatment, the Network Service Provider should focus on successful transition from services. As the individual moves into the discharge phase of treatment, the CAT Team may determine the need to modify the service array or frequency of services to ease transition to less intensive services and supports.

Network Service Providers are encouraged to implement a discharge planning process that:

1. Begins at admission;
2. Includes ongoing discussion as part of the Plan of Care review;
3. Includes active involvement of the individual and family;
4. Includes transition to the adult mental health and other systems, as appropriate; and

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<sup>3</sup>Transition Youth with Serious Mental Illness: <http://www.apa.org/about/gr/issues/cyf/transition-youth.pdf>

5. Includes an aftercare plan submitted to and developed in collaboration with the individual and family that leverages available community services and supports.

Within seven calendar days of an individual's discharge from services, the Provider shall complete a Discharge Summary containing the following items, at a minimum:

1. The reason for the discharge;
2. A summary of CAT services and supports provided to the individual;
3. A summary of resource linkages or referrals made to other services or supports on behalf of the individual; and
4. A summary of the individual's progress toward each treatment goal in the Master Plan of Care.

### **XIII. Incidental Expenses**

Pursuant to chapter 65E-14.021, F.A.C., temporary expenses may be incurred to facilitate continuing treatment and community stabilization when no other resources are available. Allowable uses of incidental funds include: transportation, childcare, housing assistance, clothing, educational services, vocational services, medical care, housing subsidies, pharmaceuticals, and other incidentals as approved by the department.

Network Service Providers shall follow state purchasing guidelines and any established process for review and approval; however, Network Service Providers are encouraged to be creative in using these funds within the limits of what is allowable and to consult the Managing Entity regarding allowable purchases.

### **XIV. Third-Party Services**

Services provided by the core CAT Team staff and funded by CAT contract dollars cannot be billed to any third-party payers. Services provided outside of the core CAT Team staff may be billed to Medicaid or private insurance, to the extent allowable under these programs. If there is an imperative need to provide these services or supports sooner than later, the CAT team should use CAT funds to meet this need, while pursuing third-party billing.

If an individual requires interventions outside the scope of a team's expertise, qualifications or licensure (i.e., eating disorder treatment, behavior analysis, psychological testing, substance abuse treatment, etc.), the team may refer to a qualified service provider. The CAT team shall work in concert with any referral providers, the individual and the family to integrate referral services into overall treatment and to monitor progress toward treatment goals.

In accordance with chapter 65D-30.003, F.A.C., all substance abuse services, as defined in subsection 65D-30.002(16), F.A.C., must be provided by persons or entities that are licensed by the department pursuant to Section 397.401, F.S., unless otherwise exempt from licensing under Section 397.405, F.S., prior to initiating the provision of services.

### **XV. Performance Measures**

The Managing Entity shall include the following performance measures in each subcontract for CAT services:

#### **1. School Attendance**

Individuals receiving services shall attend an average of 80% percent of school days, according to the following methodology:

- a. Calculate the percentage of available school days attended by all individuals served during the reporting period.
  - Include all individuals served age 15 and younger.



- Include only those individuals age 16 and older who are actually enrolled in a school or vocational program.
  - For individuals in alternative school settings, such as virtual and home school, school attendance may be estimated based on specific requirements applicable to the setting. Examples include the percentage of work completed within a specified time-period; adherence to a schedule as reported by the parent, caregiver or legal guardian or documentation of a reporting mechanism.
  - Do not include individuals for whom school attendance in an alternative education setting cannot be determined.
- b. The numerator is the sum of the total number of school days attended for all individuals.
  - c. The denominator is the sum of the total number of school days available for all individuals.

**2. Children’s Functional Assessment Rating Scales (CFARS) and Functional Assessment Rating Scale (FARS)**

Effective once the Network Service Provider discharges a minimum of 10 individuals each fiscal year, 80% of individuals receiving services shall improve their level of functioning between admission to discharge, as determined by:

- a. The Children’s Functional Assessment Rating Scales (CFARS) if the individual is under 18 years of age; or
- b. The Functional Assessment Rating Scale (FARS), if the individual is 18 years of age or older.
  - Measure improvement is based on the change between the admission and discharge assessment scores completed using the CFARS or FARS, as determined by the age of the individual.
- c. The numerator is the total number of individuals whose discharge score is less than their admission assessment score. Scores are calculated by summing the score for all questions for each person discharged during the current fiscal year-to-date. A decrease in score from the admission score to the discharge score indicates that the level of functioning has improved.
- d. The denominator is the total number of individuals discharged with an admission and discharge assessment during the current fiscal year-to-date.

**3. Living in a Community Setting**

Individuals served will spend a minimum of 90% of days living in a community setting:

- a. The numerator is the sum of all days in which all individuals receiving services qualify as living in a community setting.
  - “Living in a community setting” excludes any days spent in jail, detention, a crisis stabilization unit, homeless, a short-term residential treatment program, a psychiatric inpatient facility or any other state mental health treatment facility.
  - Individuals living in foster homes and group homes are considered living in a community setting.
  - For children under 18 years of age, days spent on runaway status, in a residential level one treatment facility, or in a wilderness camp are not considered living in a community setting.
- b. The denominator is the sum of all days in the reporting period during which all individuals were enrolled for services.

**4. Parenting Stress Index™, Fourth Edition (PSI™-4) and Stress Index for Parents of Adolescents™ (SIPA™)**

Effective once the Network Service Provider discharges a minimum of 10 individuals each fiscal year, 65% of the individuals and primary caregivers receiving services shall demonstrate a decrease in level of stress between admission and discharge, as determined by:

- a. The Parenting Stress Index™, Fourth Edition (PSI™-4) if the individual is 10 years of age or younger; or
- b. The Stress Index for Parents of Adolescents™ (SIPA™), if the individual is 11 years of age or older.
  - The PSI/SIPA will be completed at discharge for those individuals admitted prior to the implementation of the NCFAS-G+R and for whom an SIPA/PSI assessment was completed as the required initial assessment. Continued reporting for the associated performance measure in Exhibit C1 is required until all individuals admitted using the SIPA/PSI are discharged.
  - Improvement in the level of functioning is indicated by a decrease in the level of stress as reported by the individuals served and their families in the admission and discharge assessments.
  - The PSI™-4 or SIPA™ must be completed within 30 calendar days of admission.
  - Both caregivers can be scored for treatment planning purposes, but only the primary caregiver score is used for performance measure reporting purposes.
  - The SIPA™ is not required for individuals who are not living with a parent or caregiver.
- c. The numerator is the number of individuals and caregivers whose total stress score at discharge is less than their total stress score at admission during the current fiscal year-to-date.
- d. The denominator is the total number of individuals receiving services who were discharged during the current fiscal year-to-date.

#### **5. North Carolina Family Assessment Scale for General Services and Reunification (NCFAS-G+R)**

Effective once the Provider discharges a minimum of 10 individuals each fiscal year, 65% of individuals and families receiving services shall demonstrate improved family functioning as demonstrated by an improvement in the Child Well-Being domain between admission and discharge, as determined by the North Carolina Family Assessment Rating Scale for General Services and Reunification (NCFAS- G+R), if the individual is under eighteen (18).

- a. Calculate the percentage of individuals who increased their family functioning in the Child Well-Being Domain by at least one point from admission to discharge, as measured by the NCFAS-G+R.
  - The NCFAS-G+R is not required for individuals ages 18 or older.
- b. The numerator is the number of individuals whose score on the Child Well-Being domain at discharge is at least one point higher than their score on the Child Well-Being domain at admission during the current fiscal year-to-date.
- c. The denominator is the total number of individuals receiving services who were discharged during the current fiscal year-to-date and for whom the NCFAS-G+R was used at admission.

#### **XVI. Required Monthly Reporting**

The Managing Entity shall require CAT Network Service Providers to submit the Monthly Data Reporting Template providing demographic data, admission and discharge data, performance measure data and the following additional programmatic data elements:

## **1. NCFAS-G+R – Child Well-Being, Parental Capabilities and Social/Community Life Domains**

Monthly reporting of the NCFAS-G+R performance measure for the Child Well-Being domain is effective once the Provider discharges a minimum of 10 individuals each fiscal year. 65% of individuals and families receiving services shall demonstrate improved family functioning as demonstrated by an improvement in the Child Well-Being domain between admission and discharge. The NCFAS-G+R is not required for individuals who are 18 years of age or older.

Note: If the child has not been returned home to the parent/caregiver, the Provider will complete the closure rating on the parent. If services end, no further action is needed. If services will be continued in a new placement, the Provider should do a new intake rating on the parent/caregiver and child and do a closure rating when the case is closed.

The Parental Capabilities and Social/Community Life domains of the NCFAS-G+R align well with the goals of the CAT program and therefore will be included in the monthly reporting period to allow for the tracking improvement and targeting technical assistance. Neither domain is currently attached to a performance measure.

## **2. Discharge placements for individuals identified at admission as at risk of out of home placement**

A primary CAT program goal is diverting these individuals from placement within the juvenile justice, corrections, residential mental health treatment or child welfare systems, and enabling them to live effectively in the community. The considerations below are non-exhaustive guidelines by which Network Service Providers can determine if an individual is at high risk of out of home placement at the time of admission.

### **a. Residential Mental Health Treatment, including therapeutic group homes**

- Has a recommendation from a psychologist/psychiatrist for placement in residential mental health treatment center?
- Has a recommendation from a Qualified Evaluator for placement in residential treatment (child welfare)?
- Has previously been placed in residential treatment?
- Is the parent/legal guardian requesting placement in a residential mental health treatment center?

### **b. Department of Juvenile Justice (DJJ) Placement**

- Are there current DJJ charges or is there a long history of charges?
- Was there previous DJJ commitment placement?
- Does a child aged 12 and under have current or previous DJJ charges

### **c. Child Welfare Out of Home Placement**

- Is there an open Child Welfare case or investigation?
- Were there previous child welfare cases, investigations or services?
- Were there any previous out-of-home Child Welfare placements?

## **3. Gainful Activity for Individuals Not Enrolled in School or Vocational Program**

Participation in gainful activities by individuals aged sixteen and older who are not enrolled in school or vocational programs is an indicator of program success in fostering self-sufficiency. These activities should focus on employment, continued education, vocation training and certification, work readiness, career planning, and skill development related to obtaining and keeping a job. These activities are opportunities for a therapeutic mentor to assist individuals in identifying personal goals and developing plans.

Examples of enrichment activities include, but are not limited to, employment and supported employment; internships and apprenticeships; linkage to and services from entities such as Vocational Rehabilitation; and activities that support career planning, occupational research and assessment.