



REQUEST FOR PROPOSAL (RFP)

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR) ACFS24-001

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RFP Purpose.

The purpose of this Request for Proposal (RFP) is to solicit competitive Proposals from qualified Bidders who are capable of providing Crisis Intervention, Stabilization, and Reunification Services (CISR) as described in this RFP. Specifically, the Agency is seeking qualified Bidders to provide one, two, or three of the following CISR services: Child Welfare Emergency Services (CWES), Foster Group Care Services (FGCS) (also referred to as Qualified Residential Treatment Programs (QRTP's)), and/or Supervised Apartment Living Services (SAL) within one, multiple, or all five of the Agency's defined geographic Service Areas (Attachment F). By combining CWES, FGCS/QRTP, and SAL into one RFP, the Agency is seeking innovative solutions to integrate services and create a system of care for Children requiring Emergency and/or Out-of-Home Placements.

RFP responses must be submitted separately by service type (CWES, FGCS/QRTP, and SAL), and Contracts for each service (CWES, FGCS/QRTP, and SAL) will be awarded separately. Bidders are encouraged to provide more than one service. Bidders are expected to address Children's safety, Permanency, and well-being in all aspects of care they are proposing to provide. Qualified Bidders will articulate how they will collaborate with other child welfare stakeholders and contractors to ensure continuity of care. Qualified Bidders will address maintaining family connections and preparing youth to discharge to a family-like setting.

The combined service array represents the Agency's intent to provide and support child welfare services and juvenile justice services that:

- are Family focused
- are designed to build on Family strengths
- enhance parents' or other caregivers' capacity to protect and safely care for Children
- connect families to community resources and informal support systems
- ensure Children who age out of Foster Care have the skills and connections to successfully Transition to adulthood
- follow the Family First Blueprint for Iowa's Future Child Welfare System (Attachment G), Cultural Equity Alliance Guiding Principles (Attachment I), as well as the JCS's Model of Practice (Attachment Q).
- are consistent with the principles of the Child and Family Service Review (CFSR) of Child safety, Permanency and well-being while encouraging flexibility, innovation, and use of Evidence-Based Practice strategies to build a comprehensive continuity of care system.
- address the Risk Need Responsivity Principles
- utilize research driven practices that are informed by the review of Iowa specific data

The Agency held public conversations during the summer of 2021 regarding child welfare procurements. As previously indicated, awards resulting from this RFP will be made for each of the five geographic Service Areas (See the Service Area map in Attachment F). This is intended to facilitate the movement of Children back to their home communities to preserve connections to their families, home communities, schools, and community-based supports. The ideal place for Children is with their families; when it is not possible to keep a Child in the Child's own home, keeping the Child as close to that home is a preferred alternative. The Agency and its JCS partners will focus on this principle, intending to make referrals to contractors within each Child's Service Area whenever possible in order to preserve and reinforce each Child's relationships and connections in the Child's community. The Iowa child welfare and juvenile justice systems are interconnected; youth served by both utilize the same out of home services array, including CISR programs. It is important for a combined system to consider that the comingling youth who present with low criminogenic risk and needs with youth with higher criminogenic risk and needs is shown to raise the recidivism risk of both groups and challenges programs to provide the level and amount of service needed. For this reason, youth will be assessed prior to the referral and referred to a residential treatment center with a milieu designed to treat the presenting issues which necessitated their placement.

Through this RFP, the Agency seeks qualified Bidder(s) to provide services that include but are not necessarily limited to the following. These programs are more specifically defined in each services' respective Scopes of Work).

Child Welfare Emergency Services (CWES)

- Provide 24/7 response to Emergency referrals by the Agency, JCS, or Law Enforcement.
- Ensure CWES are individually responsive to each Child and their Family's needs and in the Child's community.
- Accept referrals and provide contracted services on a No Reject, No Eject basis. See attached protocol (Attachment H) for dispute resolution.
- Provide minimally restrictive, short term (less than 30 days whenever possible), temporary shelter care beds while maintaining as much normalcy for the Child as possible, including attendance at the Child's school of origin whenever appropriate. On occasion, shelter stays may extend past 30 days, and expectations for services for these youth remain the same.
- Maintain all required licensures, certifications, or approvals.

Foster Group Care Services (FGCS)/Qualified Residential Treatment Programs (QRTP):

- Offer a safe, structured, and stable living environment for Children who are considered unable to live in a family situation due to social, emotional, behavioral, physical disabilities or community safety issues but are able to interact in a community environment with varying degrees of supervision.
- Maintain all required licensures, certifications, or approvals.
- Accept DHS and JCS referrals and provide contracted services on a No Reject, No Eject basis. Each provider, based on number of guaranteed beds, will have a designated number of rejections that can be used in a calendar year when the contractor chooses to enact them. Other admission/discharge disputes shall be handled following an Agency Protocol that selected bidders will have the opportunity to contribute to the development of prior to contract start. Separate protocols may be developed for DHS and JCS youth.
- Facilitate Child development and the acquisition of age-appropriate life skills.
- Facilitate the reduction of multiple placements by increasing youth engagement in treatment and targeting high-risk criminogenic areas
- Help each Child develop and maintain relationships with the Child's Family and community and ensure each Child stays connected to the Child's Kin, culture, and community.
- Support a Child's education and ensure the Child continues to attend the Child's school of origin whenever possible.
- Provide some combination of general QRTP and/or Specialized Programs.
 - Currently under the FGCS/QRTP umbrella, three (3) specialized programs may be provided- Problematic Sexualized Behavior (PSB), Neurodevelopmental and Co-Morbid Conditions (NACC), and Specialized Delinquency Program (SDP).
 - DHS and JCS continue to identify the specific needs of Iowa youth. Human Trafficking programming for females and Reactive Attachment programming for males and females are identified populations that the Agency is currently working to create specialized programming for. Successful bidders shall be willing to engage with the Agency in discussions about how to meet the needs of other specialized populations.

Supervised Apartment Living (SAL):

- Provide SAL services to eligible Children who have the competence and desire to live with increasing independence in the community with supports.
- Provide assessment, guidance and support for a Child to develop life skills to address chores and household duties, budgeting, job searching, job interviewing, and attainment of important personal documents (e.g., driver's license or Social Security Card).
- Promote school attendance and ensure the Child is working towards the attainment of a high school diploma or high-school equivalency diploma. Contractors are expected to support the Child's enrollment in the Child's school of origin and to assist the Child with post-secondary planning including vocational and collegiate aspirations.

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR)

- Develop an individualized Transition plan for each Child and assist the Child, from the time of SAL admission, to prepare for Transition out of the program and into adulthood.
- Accept all referrals and provide contracted services on a No Reject, No Eject basis.
- Maintain all required licensures, certifications, or approvals.
- Ensure youth live in a safe environment.
- Assist youth in developing and maintaining informal supports, family connections, and community connections

In response to this RFP Bidders may choose to bid on one or more services (CWES, FGCS/QRTP, and/or SAL) in one or more Service Areas and must be able to articulate how they will collaborate with service providers across the CISR array of services. Bids may be submitted for the following:

- One service (CWES, FGCS/QRTP, or SAL) in one Service Area
- One service (CWES, FGCS/QRTP, or SAL) in multiple (or all) Service Areas
- Multiple (or all) services (CWES, FGCS/QRTP, and/or SAL) in one Service Area, or
- Multiple (or all) services (CWES, FGCS/QRTP, and/or SAL) in multiple (or all) Service Areas

Bidders are required to submit a separate Proposal for each service for which they intend to bid: CWES, FGCS/QRTP, and SAL. A Bidder submitting a Proposal for one service will submit only one Proposal regardless of the number of Service Areas proposed. A Bidder submitting Proposals for two services will submit two separate Proposals, one for each proposed service, regardless of the number of Service Areas being proposed. A Bidder submitting Proposals for all three services will submit three separate Proposals, one for each CWES, FGCS/QRTP, and SAL, regardless of the number of Service Areas being proposed. If bidding on multiple Service Areas for a service (CWES, FGCS/QRTP, or SAL), one Proposal (per service) will encompass all the Service Areas for which the Bidder intends to bid, however, Service Area specific topics are required to be addressed in the response.

The Agency intends to award multiple contracts, as a result of this procurement. Multiple contracts may be awarded for each service in each Service Area. Each service (CWES, FGCS/QRTP, and SAL) will be awarded separately for each Service Area. The same or different Bidders may receive contracts for multiple services in multiple Service Areas. The Agency may award contracts to as many Bidders as necessary to meet the purpose of this RFP.

Duration of Contract.

The Agency anticipates executing a contract that will have an initial 2-year contract term with the ability to extend the contract for 4 additional 1-year terms. The Agency will have the sole discretion to extend the contract.

Procurement Timetable

There are no exceptions to any deadlines for the Bidder; however, the Agency reserves the right to change the dates. Times provided are in Central Time.

Event	Date
Agency Issues RFP Notice to Targeted Small Business Website (48 hours):	June 27, 2022
Agency Issues RFP to Bid Opportunities Website	June 29, 2022
Bidder Letter of Intent (Attachment L) to Bid Due By	July 15, 2022 3 p.m.
Bidders' Conference Will Be Held on the Following Date and Time	August 3, 2022 1 p.m.

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Bidder Written Questions, Request for Clarifications, and Suggested Changes (Attachment M) Due By	Date and Time for First Round of Questions: July 15, 2022 3 p.m. Date and Time for Second Round of Questions: August 24, 2022 3 p.m.
Agency Responses to Questions Issued By	Date for First Round of Responses: July 27, 2022 Date for Second Round of Responses: September 7, 2022
Bidder Proposals and any Amendments to Proposals Due By	September 28, 2022 3 p.m.
Agency Announces Apparent Successful Bidder/Notice of Intent to Award	February 14, 2022
Contract Negotiations and Execution of the Contract Completed	May 19, 2023
Anticipated Start Date for the Provision of Services	July 1, 2023

Section 1 Background and Scope of Work

1.1 Background.

This RFP is designed to provide Bidders with the information necessary for the preparation of competitive Bid Proposals for providing the CISR services as described in this RFP and for meeting other requirements and Deliverables described herein. A main goal of the executed contracts is to adhere to the Family First Blueprint for Iowa's Future Child Welfare System (Attachment G), Cultural Equity Alliance Guiding Principles (Attachment I), as well as the JCS's Model of Practice (Attachment Q).

As part of the Bipartisan Budget Act (HR. 1892), which was signed in to law in February 2018, the Family First Prevention Services Act (FFPSA) was enacted to turn the focus of the current child welfare system toward keeping children safely with their families to avoid the trauma that results when children are placed in out-of-home care. To increase the number of children who can remain safely at home with their families, the law provided families with greater access to mental health services, substance use treatment, and/or improved parenting skills. This law significantly shifted how the country provides services for families and youth. In particular, it changed the role of community service providers, how courts advocate and make decisions for families, and the types of placements that youth placed in out-of-home care experience. A qualified residential treatment program was introduced in this act, which requires a clinical assessment for youth to be placed and a focus on a trauma informed treatment model.

Iowa's child welfare and juvenile justice system is intended to serve Children and families needing various amounts of intervention, protection, and support services that ensure safety, Permanency, and well-being. Children and families are served in a number of ways using Iowa's evolving service array including, but not limited to, Family-Centered Services/Solution Based Casework, Family Preservation Services, Kinship Navigator Services, Recruitment and Retention, Training, and Support of Resource Families (RRTS) activities and Crisis Intervention, Stabilization, and Reunification (CISR) services. Iowa's juvenile justice system utilizes several services, including Functional Family Therapy, to address the specific needs of their population. These services, as well as the ongoing development of a new children's mental health system, and other cross-system/service domain collaborations (e.g., mental health, health, education) form Iowa's emerging system of care for Children and families.

The Agency's goal is to keep a Child in the Child's home whenever possible. When Out-of-Home Placement is necessary, the Placement is not intended to be a permanent solution, and the Child's safety, Permanency, and well-being are essential. Contractors are responsible for promoting each Child's relationships with Family members and other persons in the Child's Positive Support System when not limited by JCS or the Agency. Children shall be protected in the least restrictive setting necessary, and the Agency and its partners are obligated to provide a nurturing environment where Children can thrive.

Interested Bidders shall be aware the contracts executed as a result of this RFP will contain performance measures. The Contractor will have the opportunity to earn additional payments based on the Contractor's performance. Subsequent contract renewal decisions may be contingent on Contractor performance. The Agency has identified desired results through performance measures and targets and will monitor the results achieved under the contract. The Agency may re-evaluate performance measures at the end of the initial two-year contracts.

The RFP process is for the Agency's benefit and is intended to provide the Agency with information to assist in the competitive selection process. It is not intended to be comprehensive. Each Bidder is responsible for determining all factors necessary for submission of a comprehensive Bid Proposal. The Agency adheres to all applicable State and federal laws, rules, and regulations when entering into a contract for services.

1.1.1 Concept Moving Forward

The Agency has made a number of determinations in advance of issuing this RFP. These include the following:

- a) The Agency has decided that for this RFP serving each Child near the Child's home and/or

community is a key component to success. When possible, every effort will be made to ensure service delivery to Children will occur at a local level, based upon the Agency's defined Service Areas. However, when facilities within a Child's identified Service Area are unable to effectively address a child's treatment needs, a Child may be placed outside of their Service Area to ensure they are receiving treatment services that match their individual needs. Children adjudicated delinquent may be referred outside of their home service area based on public safety or other needs as identified by JCS. Multiple contracts may be awarded for each service in each Service Area, and each service (CWES, FGCS/QRTP and SAL) will be awarded separately. This decision was made to encourage the movement of Children back to their communities of origin to preserve connections of Children to their families, home communities, schools, and Positive Support Systems. Bidders may bid for multiple Service Areas, and awards will be made separately for each service (CWES, FGCS/QRTP, and SAL) in each Service Area. Bidders will submit one Proposal for each service for which the Bidder intends to offer services, and each Proposal will include a section for the Bidder to address Service Area specific questions. The Agency intends to award multiple contracts per service in each of the five Service Areas. A single Bidder bidding on multiple Service Areas may be awarded contracts in more than one Service Area. Contractors in each Service Area will coordinate with one another, when necessary, to assist a Child and/or Family.

- b) The Crisis Intervention, Stabilization, and Reintegration services (CISR) procurement includes CWES, FGCS/QRTP, and SAL. By combining these services into a single procurement, the Agency is seeking to develop a comprehensive, connected approach to serving Children in need of Out-of-Home Placement. Multiple contracts may be awarded for each service in each Service Area. Each Service (CWES, FGCS/QRTP, and SAL) will be awarded separately for each Service Area. The Agency is seeking Proposals that provide more than one service (CWES, FGCS/QRTP, SAL) in a Service Area.
- c) The Agency has decided to emphasize and mandate the use of the One Caseworker Model for each service. A Child in CWES, FGCS/QRTP, or SAL will have one Caseworker assigned by the Contractor in each service to coordinate the delivery of the Child's Service Plan and to be the point of contact for the Child, the Child's Family or other persons in the Child's Positive Support System, and the Referring Worker. The One Caseworker Model is designed to ensure a Child and Child's Family have consistent access to Contractor staff and to better coordinate services for each Child.
- d) The Agency has decided to utilize specialized programming within the FGCS/QRTP service to address the specific needs of some of Iowa's youth. To date, three specialized programs may be provided-Problematic Sexualized Behavior (PSB), Neurodevelopmental and Co-Morbid Conditions (NACC), and Specialized Delinquency Program (SDP).
- e) Contractors will participate with the Agency to enhance and modify programs to meet the ever-changing child welfare and juvenile justice needs in Iowa.
- f) The Agency wishes to implement programs with open and affirming standards, so every child is recognized, welcomed, and motivated to participate at their highest level. Each Child engaged in care shall be provided services that address any special language needs, reinforce positive cultural practices, and acknowledge and build upon ethnic, socio-cultural, and linguistic strengths. Open and inclusive practices shall be applied with regard to all of the following:
 - race and ethnicity
 - immigration status
 - gender, gender identity, and sexual orientation
 - ability (including physical, mental, etc.)

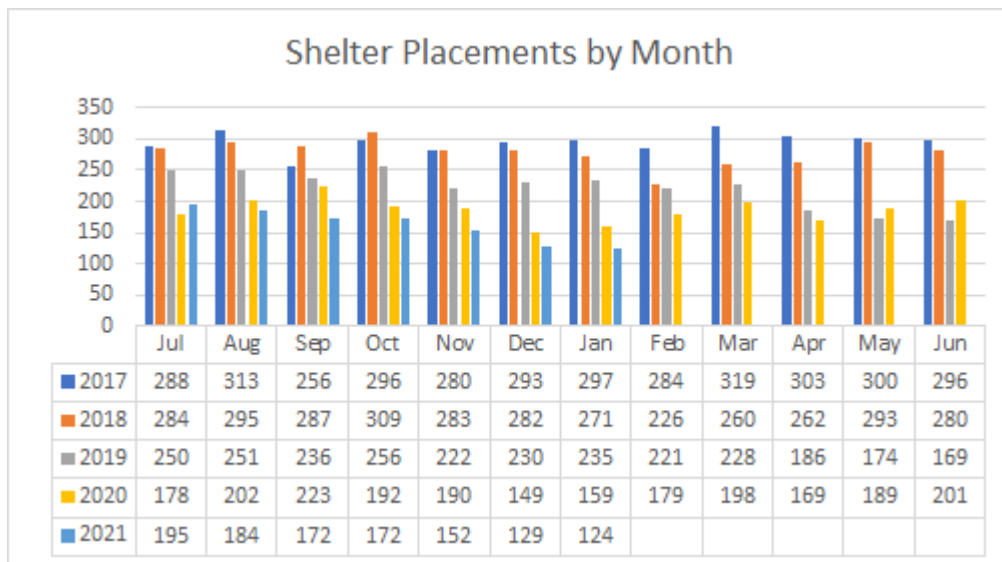
Guiding Principles for Iowa’s Child Welfare and Juvenile Justice Systems Child welfare services are primarily focused on promoting safety, Permanency, and well-being for Children, a philosophy consistent with the expectations of the federal government under the Child and Family Services Review process and the Agency’s Child Welfare Model of Practice and JCS’s Model of Practice. The Agency and Juvenile Justice system are continually striving to improve outcomes for Children and families who are involved in the child welfare system.

1.1.3 CWES Overview

CWES are short term and temporary child welfare settings provided through the child welfare system that focus on Children’s safety, Permanency, and well-being. They are intended to immediately respond to the needs of the eligible CWES Target Population defined for this RFP. CWES eligible Children are referred by the Agency, JCS, and Law Enforcement. CWES includes both temporary informal shelter care (up to 47 hours in duration and with no formal court involvement) and emergency juvenile shelter care beds, which require a court order and JCS or DHS involvement.

For those Children in temporary informal shelter care and emergency juvenile shelter placement, connecting the Family to services during Placement will reduce the likelihood of the Child’s return to CWES. Therefore, performance measures have been included to reinforce the Agency’s CWES goals of keeping youth from encountering more formal DHS or JCS system involvement.

The following table contains data regarding CWES Emergency Juvenile Shelter average daily utilization in the Agency’s Service Areas for SFY17-SFY21.



1.1.4 FGCS/QRTP Overview

Qualified Residential Treatment Program (QRTP) means a program within a Foster Group Care Services State-licensed and Accredited Out-of-Home care facility that provides continuous, 24-hour care and supportive services to Children in a residential, nonfamily home setting that:

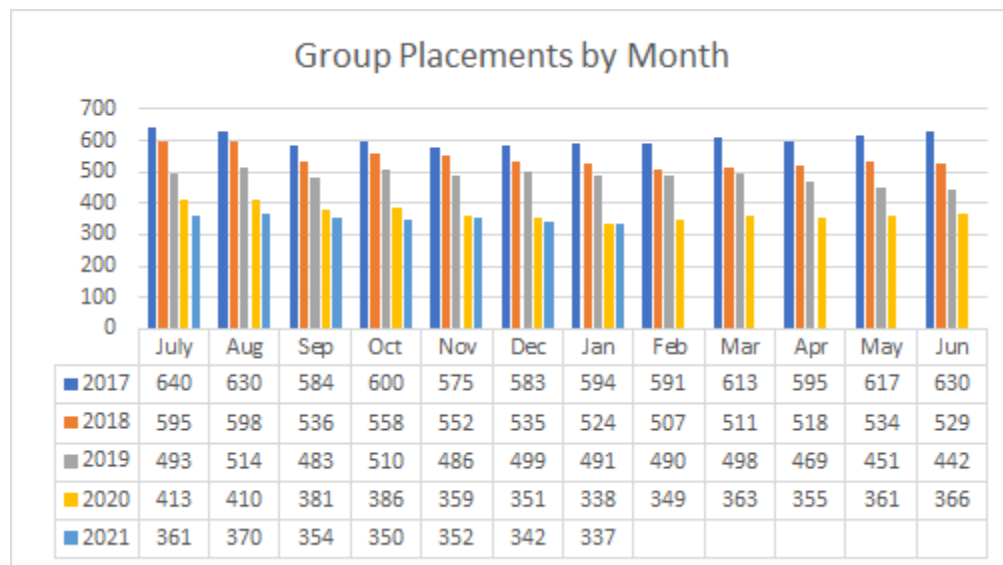
- (1) has a trauma-informed treatment model that is designed to address the clinical and other needs of Children with serious emotional or behavioral disorders or disturbances
- (2) is able to implement the specific treatment recommended in an assessment completed by a qualified individual

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR)

- (3) has registered or licensed nursing staff and other licensed clinical staff who are: (a) on site according to the treatment model and during prime programming hours; and (b) available 24 hours a day, 7 days a week
- (4) appropriately facilitates outreach to family members, integrates the family members into the treatment of the Children and documents how this is accomplished, and documents and maintains contact information for any known biological family and kin caregiver, including documenting how sibling connections are maintained, and
- (5) is able to provide discharge planning that provides family-based aftercare support for at least 6 months following discharge

Children in FGCS/Q RTP are adjudicated either for having committed a Delinquent act (Delinquent) or as a Child In Need of Assistance (CINA) and court-ordered to out of home placement in this level of care. The Agency has decided to continue to utilize specialized programming within the FGCS/Q RTP service to address the specific needs of some of Iowa’s youth. To date, three specialized programs are being provided according to statewide need-Problematic Sexualized Behavior (PSB), Neurodevelopmental and Co-Morbid Conditions (NACC), and Specialized Delinquency Program (SDP). DHS and JCS continue to identify the specific needs of Iowa youth. Successful bidders shall be willing to engage with the Agency in discussions about how to meet the needs of these and other specialized populations. FGCS/Q RTP services are intensive and aimed at Child development, stabilizing behaviors, and acquisition of life skills. As the FGCS/Q RTP becomes a temporary “home” for the Child, Contractors are responsible for making the FGCS/Q RTP environment welcoming and nurturing, promoting personal safety and safety in the community, and mitigating the trauma of Out-of-Home Placement. Other areas of focus for the Contractors include: coping skills and de-escalation (may include restraint and seclusion if a youth is exhibiting unsafe behaviors), transition/planning, use of promising, evidenced-informed and evidence-based practices, including youth and family peer support, youth and family engagement/involvement/voice and choice, and youth and family rights. Contractors shall be aware of these goals as staff are hired and trained to work with the Child in FGCS/Q RTP. The Agency’s goals of reducing returns to FGCS/Q RTP, reducing Recidivism in JCS youth, and increasing discharges to a Family-Like Setting are reflected in the performance measures. JCS goals of targeting high-risk criminogenic areas are also reflected in the performance measures. FGCS/Q RTP Contractors are expected to engage in active planning for Reintegration from the time of the Child’s entrance into FGCS/Q RTP.

In SFY17-SFY21, there were the following number of unduplicated Children in Foster Group Care.



1.1.5 SAL Overview

Supervised Apartment Living is the least restrictive Foster Care Placement in the child welfare service array for Children who do not have a Placement in a home and are gaining independence as they approach young adulthood. SAL was designed for the Child who has the ability and desire to live relatively independently with supports in a community with less supervision than is provided in a Family Foster Care or FGCS/Q RTP setting. SAL Contractors promote a Child's ongoing education and provide guidance to Children to help them develop skills needed for daily living such as developing monthly budgets and paying their bills, shopping for their food, preparing their own meals, doing their own laundry and cleaning, and engaging with the community. SAL services are offered in either a cluster or scattered settings, depending on the Child's level of independence. To be eligible for Placement in SAL cluster setting, the Child must be at least age 16 ½ years of age. To be eligible for Placement in SAL scattered-site setting, the Child must be at least 17 years of age and have successfully lived in a SAL Cluster site. Exceptions to policy are considered by DHS in order to ensure the least-restrictive, most appropriate setting for the child.

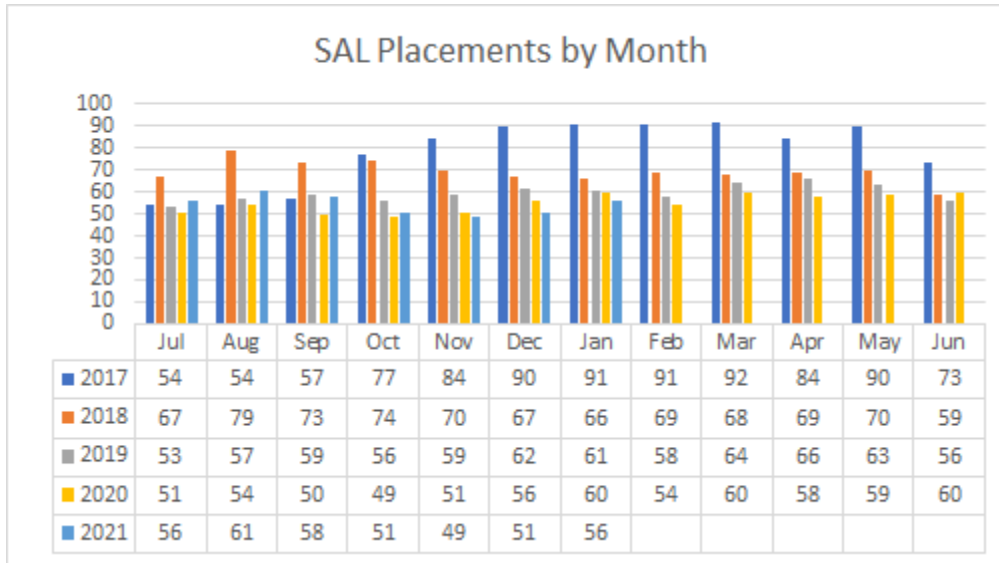
SAL is intended to help the Child gain the education and life skills needed to move into adulthood. The Agency's focus will be to ensure Children referred to SAL are appropriate for the independence of this Placement and will be successful in this Placement. The Contractor shall utilize the Positive Youth Development framework and Motivational Interviewing with SAL youth in an effort to engage the youth in planning for their future. The Contractor is expected to guide the Child to develop abilities to manage life and to gain Self-sufficiency. Progress shall be observable and documented as each month of the Placement passes. This begins with the Contractor accurately assessing the Child's abilities and weaknesses when SAL services begin and developing an appropriate Service Plan with the Child and their Positive Support System. The Contractor is neither expected to do everything for the Child nor to leave the Child to do everything by himself or herself but to gradually delegate responsibilities to the Child as the Child demonstrates responsibility and capability. Therefore, as the Child in SAL gains additional life skills and demonstrates responsibility, the Contractor will permit the Child to have greater independence.

The Contractor will also focus on assisting the Child to maintain and/or develop Family and Positive Support System relationships and community connections as these relationships and connections will be crucial as the Child moves into adulthood.

The Contractor will also be responsible for promoting the Child's engagement in Aftercare services after Transition. This means including Aftercare in Transition activities so that Aftercare supports can best aid Transition from SAL to the setting most fitting as the Youth enters adulthood.

The Agency seeks greater Placement stability for Children placed in SAL, the Contractor shall promote a Child's retention in SAL Placement until the age of 18, unless the Child can appropriately return to a Family Placement before that time. The Agency has developed performance measures for Placement stability, Aftercare engagement, Life Skills attainment, and increasing positive informal supports.

The following Table shows the Children in Supervised Apartment Living Foster Care in SFY17-SFY21.



1.2 RFP General Definitions.

When appearing as capitalized terms in this RFP, including attachments, the following quoted terms (and the plural thereof, when appropriate) have the meanings set forth in this section.

“Agency” means the Iowa Department of Human Services.

“Bid Proposal” or **“Proposal”** means the Bidder’s proposal submitted in response to the RFP.

“Bidder” means the entity that submits a Bid Proposal in response to this RFP.

“Contractor” means the Bidder who enters into a Contract as a result of this Solicitation.

“Deliverables” means all of the services, goods, products, work, work product, data (including data collected on behalf of the Agency), items, materials and property to be created, developed, produced, delivered, performed, or provided by or on behalf of, or made available through, the Contractor (or any agent, contractor or subcontractor of the Contractor) in connection with any Contract resulting from this RFP.

“Invoice” means a Contractor’s claim for payment. At the Agency’s discretion, claims may be submitted on an original invoice from the Contractor or may be submitted on a claim form accepted by the Agency, such as a General Accounting Expenditure (GAX) form.

Definitions specific to this RFP.

“Accreditation” or **“Accredited”** means a program that is accredited by an independent not-for-profit organization (e.g.: Council on Accreditation, Joint Commission for Behavioral Health Care Services, and Council on Accreditation for Rehabilitation Services).

“Administrative Costs” means costs that may include, but are not limited to, such categories as salary and fringe benefits for administrators and support staff, utilities, data collection and data processing costs, printing, communications equipment and services, and other costs necessary to support the delivery of services to Children and families.

“Admission Clinical Review Form” means the clinical assessment completed by an LPHA to determine QRTP level of care for a Child.

“Admission and Discharge Protocol” means the protocol used by the Agency, Juvenile Court Services, and Contractors that defines allowable reasons a Contractor can deny a Child’s admission to shelter or carry out an unplanned discharge from shelter and a review process to resolve issues related to admission or unplanned discharge.

“Aftercare” or **“Iowa Aftercare”** means a program designed to provide service and supports to the Aftercare eligible population to assist program participants in achieving Self-Sufficiency for the Transition from adolescence to adulthood. Participation in the program is voluntary for the eligible Child. A component of the Aftercare Program, Preparation for Adult Living (PAL), provides financial support to eligible Youth who are receiving Aftercare services.

“Behavioral Health Intervention Services” (BHIS) means services provided to Children who are Medicaid eligible and under twenty-one (21) years of age and their families to remediate mental health symptoms and behaviors. This includes the provision of services to address criminogenic factors that are necessary for effective functioning with family, peers, and community in an age-appropriate manner.

“Business Day” means any day other than a Saturday, Sunday, or State holiday as specified by Iowa Code §1C.2.

“Casey Life Skills Assessment” (CLSA) means a suite of comprehensive online assessments, learning plans, and learning resources that can be utilized at no charge to help engage young people in Foster Care whereby they can gain the life skills they need to exit care. The tools are strengths-based and were built and refined with user input and research. The assessments consist of statements about life skills domains deemed critical by Youth and caregivers for successful adult living (Career Planning, Communication, Daily Living, Home Life, Housing and Money Management, Self-Care, Social Relationships, Work Life, and Work and Study Skills). The CLSA is intended for Youth age 8-18. There are also additional assessment supplements designed to help young people who have specific needs and challenges. The specific topics are: pregnancy and parenting infants and young Children; homeless; Youth values; education; gay, lesbian, bisexual, transgender, and questioning Youth (GLBTQ); and American Indian.

“Case Management” means Agency social casework working with Children to assess and identify individual and Family strengths and needs, develop Case Permanency Plans to provide appropriate supports and services, implement the Case Permanency Plans, coordinate and monitor the provision of services, and evaluate client progress and the case. It also includes similar services provided by Juvenile Court Services' workers.

“Case Permanency Plan” means the Agency plan identifying goals, needs, strengths, problems, services, time frames for meeting goals and for delivery of the services to the child and parents, objectives, desired outcomes, and responsibilities of all parties involved and reviewing progress.

“Caseworker” means the Caseworker for a Child in care. This is defined in Foster Group Care Services licensure rules in 441 Iowa Admin. Code Ch. 114 and in Child Placing Agencies’ licensure rules for Supervised Apartment Living in 441 Iowa Admin. Code Ch. 108. For Child Welfare Emergency Services a Caseworker shall be the person primarily responsible for Service Planning for the Child and being the point of contact for the Child’s Family and Referring Worker. All Caseworkers shall be responsible for coordination with referral sources and coordination of services to a Child.

“Casework Supervisor” means the staff member defined in FGCS licensure rules, the staff member that provides supervision in CWES, and the staff member that provides supervision in SAL. This individual provides

supervision of the Caseworker(s) by regularly scheduled face-to-face case specific discussions with the Caseworker.

“Child,” “Children,” “Youth,” or “Juvenile” means a person(s) who meets the definition of a Child in Iowa Code § 234.1(2)

“Child and Family Services Review” (CFSR) means the process and procedures used by the federal Department of Health and Human Services to monitor and evaluate each states’ Child welfare Agency in order to promote the achievement of safety, Permanency, and well-being for Children that come to the attention of the Child welfare system and improve the quality of Agency child welfare services.

“Child Welfare Emergency Intervention” means, for the purpose of CWES, a service provided in a child’s home or elsewhere to address immediate problems or to de-escalate situations with the intent to keep families together and avoid a Child’s Removal from his or her home.

“Child Welfare Emergency Services” (CWES) means an array of short term and temporary placements that are provided to the Target Population by the Child welfare system and focus on Children’s safety, permanence, and well-being. Eligible Children are referred by the Agency, Juvenile Court Services, and Law Enforcement.

“Child in Need of Assistance” (CINA) means adjudicated by Juvenile court to be a Child in Need of Assistance pursuant to Iowa Code Ch. 232.

“Clinical” (practice) means the professional application of theories and methods that lead to differential diagnosis, prevention, amelioration and treatment of bio-psycho-social dysfunction and impairment, including mental, emotional, behavioral and developmental disorders.

“Clinically-trained Staff” means persons with a master’s (or other advanced) degree in social work, psychology or a related behavioral science and who are licensed to practice in their respective field. This may include, but is not limited to, a medical doctor or doctor of osteopathy, licensed independent social workers, advanced registered nurse practitioners, Ph.D. psychologists, marriage and Family therapists, and mental health counselors.

“Community Residential Facility” means a licensed FGCS facility that provides care for Children who are considered unable to live in a Family situation due to social, emotional, behavioral, or physical disabilities or community safety issues but are capable of interacting in a community environment with a minimum amount of supervision. The facility provides 24-hour care including board and room. Community resources are used for education, recreation, medical, social, and rehabilitation services. The facility is responsible for planning and providing for the Child’s daily activities, discipline, guidance, peer relationships, and recreational programs.

“Comprehensive Residential Facility” means a licensed FGCS facility that provides care for Children who are unable to live in a Family situation due to social or emotional needs and who require varying degrees of supervision as indicated in the individual Service Plan. Care includes room and board. Community resources may be used for medical, recreational, and educational needs. Comprehensive residential facilities have higher staff to client ratios than Community Residential Facilities and may use control rooms, locked cottages, mechanical restraints, and chemical restraints when these controls meet licensing requirements.

“Contract Manager” means the staff person or persons accountable to the Contract Owner, acting under the direction and guidance of the Contract Owner for a specific RFP and contract.

“Contract Owner” means the administrator within the Agency who has overall responsibility, accountability, and authority for the direction and management of the procurement for a specific RFP and contract.

“Criminogenic Risk Factors” means the characteristics, traits, problems, or issues of an individual that directly relate to the individual's likelihood to re-offend and commit another crime. There are two categories of criminogenic needs: static and dynamic. Static factors cannot be changed or addressed by any sort of program or therapy in the prevention of future crimes. In contrast, dynamic factors can be addressed by therapy, training, education, and/or targeted programming and subsequently altered to result in more law-abiding behavior. The eight (8) criminogenic risk factors are anti-social behavior, anti-social personality, anti-social cognition, anti-social peers, family/relationships, school/work, leisure/recreation, and substance abuse.

“Crisis Intervention and Stabilization Plan” means the methods a Contractor will use at both the Contractor and individual Child levels to respond to Child behaviors that may lead to situations like Critical Incidents, trauma, or reports to authorities (e.g., Law Enforcement). Contractor Crisis Intervention and Stabilization plans shall define Contractor policies and procedures that are appropriate to meet the needs of the Children in care, identify expectations of staff and staff training requirements, define appropriate staffing patterns and desired competencies, discuss the Contractor's approaches to Trauma-Informed Care, define the behavior de-escalation techniques that will be used, and describe the plan for when to engage local law enforcement. Child-specific Crisis Intervention and Stabilization Planning shall be individualized and based on needs of the individual Children in care and incorporated into the Child's Service Plan. This planning shall address, but not be limited to: a Child's trauma; mental health or behavioral needs; and, approaches to de-escalation that shall be used to manage a Child's behavior when needed.

“Critical Incident” for online reporting purposes means a behavior-related or other situation involving a Child during the provision of service that results in one of the following:

- Death
- Police calls or other law enforcement involvement or contact
- Mandatory report of abuse,
- Emergency treatment by medical personnel in or at a hospital, other medical clinic, urgent care provider, or a physician's office

“Cultural Competence” means the ability of individuals and systems to respond respectfully and effectively to people of all cultures, classes, races, ethnic backgrounds, sexual orientations, and faiths or religions in a manner that recognizes, affirms, and values the worth of individuals, families, tribes, and communities, and protects and preserves the dignity of each.

“Delinquent” means a Child adjudicated by Juvenile court for having committed a Delinquent act as defined in Iowa Code Ch. 232.

“Deliverables” means all of the services, goods, products, work, work product, data (including data collected on behalf of the Agency), items, materials and property to be created, developed, produced, delivered, performed, or provided by or on behalf of, or made available through, the Contractor (or any agent, contractor or subcontractor of the Contractor) in connection with this Contract.

“Education Specialist” means Contractor staff directly responsible for a Child's education and related services and needs. This may include the Child's Contractor-appointed Caseworker.

“Emergency” means, for the purpose of CWES, a service offering extended involvement with the Agency or Juvenile Court Services (more than a shorter involvement with Child welfare Crisis Intervention and Stabilization), such as temporary Out-of-Home Placement until Family and Child issues are resolved and there is a final disposition of a Child's case. Placements outside the home include Emergency Family Foster Care, Placements with Family members, or Emergency Juvenile Shelter Care.

“Emergency Juvenile Shelter Care” means the provision of Emergency, short-term care until a more permanent living arrangement is possible. Iowa Code § 232.2 defines “shelter care” as temporary care of a Child in a

physically unrestricting facility at any time between a Child's initial contact with Juvenile authorities and the final judicial disposition of the Child's case and identifies the facilities in which a Child may be placed. Shelter care facilities that are county or multi-county operated receive a Certificate of Approval if they meet standards defined in 441 Iowa Administrative Code Chapter 105. Privately operated shelter care facilities receive a Certificate of Licensure if they meet the standards defined in 441 Iowa Administrative Code Chapter 105. Emergency Juvenile Shelter Care is not considered suitable for Children under age 12 unless appropriate alternatives are first sought and determined to be unavailable.

“Evidence-Based Practice” means practices or service approaches whose effectiveness at achieving desired outcomes for specific Target Populations of Children and families has been substantiated or validated by independent empirical research. Information on Evidence-Based services can be obtained in a variety of ways, including through contacts with various public and private organizations that collect and disseminate service information. Examples of such organizations include the Child Welfare League of America, the American Public Human Services Association (APHSA), the Center for the Study of Social Policy, the Casey Foundation, Casey Family Programs, the federal Office of Juvenile Justice and Delinquency Prevention, the federal Agency of Health and Human Services, and university schools of social work.

“FACS” means the Family and Children’s Services data system and/or its’ equivalent replacement. Bidders should be advised the Administration for Children and Families (ACF) has announced the Comprehensive Child Welfare Information System (CCWIS) final rule, which when implemented in Iowa, will require Contractors to adapt as needed to comply with federal requirements. More information about CCWIS can be found at: <https://www.acf.hhs.gov/media/9674>.

“Family or Kin” means the social unit consisting of the Child and relations of the Child including, but not limited to, biological or adoptive parent, stepparent, brother, sister, stepbrother, stepsister, and grandparent.

“Family Case Plan” (Form No.470-3453) means the official record of the Agency’s involvement with the Family. It serves to help document the Child and Family conditions and concerns that caused the Family to become involved with the Child welfare system, help determine and document the most appropriate services and supports needed to assure and promote Child safety, Permanency, and well-being. The Family Case Plan includes a description of a plan to keep the Child safe; individual Family strengths, supports, and needs; how the strengths and Family supports can be used to assist the Family in self-directed change; how the Agency and others will assist the Family in overcoming the needs; and document compliance with applicable state and federal laws and regulations.

“Family-Centered Model of Practice” means a way of working with families, both formally and informally, across service systems to enhance their capacity to care for and protect their Children. It focuses on Children's safety and needs within the context of their families and communities and builds on families' strengths to achieve optimal outcomes. Families are defined broadly to include birth, blended, kinship, and Foster and Adoptive Families.

“Family Centered Services” or “FCS” means the primary Agency purchased interventions, services, and supports to strengthen and preserve connections between Children and their Family as defined by Request For Proposal ACFS 20-006 and resulting contracts, as these documents may be amended.

“Family-Like Setting” means a Foster Family Home, a relative Placement, a pre-adoptive home, a Fictive Kin Placement, or trial home visit.

“Family Finding Efforts” means a variety of approaches and methods Contractors and the Agency use to help Children in Foster Care find and connect with biological or chosen Family members. Strained Family relationships can be strengthened or reconnected through these efforts and discoveries can be made to connect lost relationships or build entirely new ones for and with the Child or Youth. Internet-based search tools may be used to locate Family members unknown to the Child Welfare system. Connections can be made regardless of

geography, initial level of commitment from the Family member, or blood relation to the Child. The input of the Child and close Family members is a critical piece of this method.

“Family Interaction” means a process used to maintain relationships with siblings, parents, Family, and other individuals and to reduce the sense of abandonment and loss that Children experience at Placement. Family Interaction should take place in the least restrictive, most home-like setting appropriate to meet the Child’s needs for safety. Family Interaction should minimize the harmful effects of Family separation as well as nurture and enhance reunification. Family Interaction should maintain meaningful contact consistent with the development and/or special needs of the Child and Family to further progress toward achieving Permanency for the Child. Interactions provide the opportunity for families to maintain relationships, enhance well-being, and may sometimes be an appropriate venue to provide families with the opportunity to learn, practice and demonstrate new behaviors and patterns of interaction. Family Interaction will also provide an opportunity to assess caregiver needs around parent training, community resources/referral, and concrete supports. Family Interaction proceeds in three phases as progress occurs: initial phase, central phase, and reunification phase.

“Family Interaction Plan” means the plan to guide Family Interactions that encourages progressive increase in parents’ responsibility. The Plan is premised on case goals and on an assessment of a Family functioning and safety concerns for the Child. A written Family Interaction Plan should be tailored to meet the safety concerns of the Family and will be provided to assure Family Interaction begins as soon as possible after Removal from parental custody. Family Interaction Plans must never be used as a threat or form of discipline to the Child or to control or punish the parent.

“Fictive Kin” means an individual who is unrelated by either birth or marriage but who has an emotionally significant relationship with another individual who would take on the characteristics of a Family relationship.

“Formal Life Skills Assessment” means a tool designed to measure a Child’s knowledge and skill comprehension a Child needs to direct his or her life at home and in the community. Measurement of skills include “hard skills” including but not limited to money management, food preparation, hygiene, home management, accessing health care, education and employment-related skills, accessing community resources and time management. Measurement of skills also includes “soft skills,” including but not limited to decision-making, problem solving, relationship skills, and self-advocacy skills. Results of the Life Skills Assessment (both strengths and needs) are used in designing services and supports that promote a Child-centered Transition plan to assist the Child in successful Transition from the Foster Care system to early adulthood and Self-Sufficiency.

“Foster Care” means substitute care furnished on a 24-hour-a-day basis to an eligible Child in a licensed or approved facility by a person or Agency other than the Child’s parent or guardian. Foster Care does not include care provided in a Family home through an informal arrangement for a period of 20 days or less. It includes the provision of parental nurturing and shall include, but is not limited to, the provision of food, lodging, training, education, supervision, and health care.

“Foster Group Care Service” (FGCS) or “Qualified Residential Treatment Program” or “FGCS/QRTP” means one service of the Child welfare array of services that offers a safe and protective structured living environment for eligible Foster Care Children who are considered unable to live in a Family situation to social, emotional, behavioral, or physical disabilities or community safety issues but are able to interact in a community environment with varying degrees of supervision. Children are adjudicated either for having committed a Delinquent act or they have been placed on a consent decree or as CINA and court-ordered to this State-licensed Out-of-Home care provided in licensed facilities 24 hours a day and seven days per week offering room, board, and age appropriate and transitional child welfare services and Juvenile Justice Services.

“Group Care Maintenance” means food, clothing, shelter, school supplies, personal incidentals, daily care, general parenting, discipline, and supervision of Children to ensure their well-being and safety, and administration of maintenance items provided in a group care facility.

“Guaranteed Payment Bed” or “Guaranteed Bed” means a bed that is part of a FGCS/QRTP, SAL, or CWES contract guaranteed available to the Agency as needed, and for which Agency payment will be made regardless of use in order to assure access as needed and stability of payment to a Contractor or subcontractor.

“Integrated Health Home” (IHH) means a team of professionals working together to provide whole-person, patient-centered, coordinated care for adults with a serious mental illness (SMI) and Children with a serious emotional disturbance (SED). Integrated Health Homes are administered by the Medicaid Managed Care Organizations (MCOs) and provided by community-based Integrated Health Homes.

“Inter-Agency Placement Review Committee” means a committee that uses a multi-faceted approach that includes reviewing all referrals to the Specialized Delinquency Beds program to confirm they meet entry criteria, ensuring appropriate programming is available, exploring treatment alternatives, initiating a seamless transition for youth, staffing problematic cases, identifying youths that cross systems, and generating solutions for cases that do not qualify for placement in the Specialized Delinquency Bed program.

“In The Home” or “In-Home” means that a Child resides in the permanent home of the Child’s parent or guardian.

“In-Home Onsite Mediation Services and Follow-up” means a Child Welfare Emergency Intervention provided in a CWES referral’s home or community to settle Family disputes or other child welfare crises. Follow up is the time period defined by a Contractor during which continued outreach or other direct communication will occur following a mediation to determine the success of the intervention.

“Invoice” means a Contractor’s claim for payment. At the Agency’s discretion, claims may be submitted on an original invoice from the Contractor or may be submitted on a claim form accepted by the Agency, such as a General Accounting Expenditure (GAX) form.

“Issuing Officer” means the staff person assigned by the Contract Owner to manage the RFP process for a specified formal competitive procurement process and is the sole point of contact for communication with all interested vendors and Bidders for the specified RFP.

“Juvenile Court Services” (JCS) means an administrative unit that is part of the judicial branch of Iowa government and established in each judicial district pursuant to Iowa Code Ch. 602. JCS provides intake services for all Iowa Youth who are alleged to have committed a Delinquent act. JCS also supervises and provides services to those Youth who are adjudicated Delinquent or those Youth who have committed a Delinquent act but who have not been adjudicated Delinquent by the Juvenile Court.

“Juvenile Court Services Model of Practice” (JCS’s Model of Practice) means the Juvenile Court Services utilization of Evidence-Based Practices that result in the Juvenile Court Officer (JCO):

- 1) Assessing offender’s criminogenic needs and risk factors using the Iowa Delinquency Assessment
- 2) Targeting traits, skills, conditions, and behaviors that are most likely to lead to Recidivism
- 3) Engaging offenders in the change process
- 4) Matching intervention strategies to offenders’ individual needs and circumstances, and
- 5) Planning strategies, in collaboration with each Child and their Family, to facilitate behavioral change

“Juvenile Court Services Case Plan” The plan developed by JCS, which identifies criminogenic risk factors, goals, needs, strengths, problems, services, time frames for meeting goals and for delivery of the services to the child and parents, objectives, desired outcomes, and responsibilities of all parties involved and reviewing progress, including any directives or needs identified by the court.

“Kinship Caregiver” means kin (e.g. grandparent, sibling, etc.) and Fictive Kin (e.g. godparents, close Family friends, etc.) providing care for a Child.

“Law Enforcement” means a member of a police force or other Agency or department of the State, county or city regularly employed as such and who is responsible for the prevention and detection of crime and the enforcement of the criminal laws of Iowa and all individuals, as determined by the Iowa Law Enforcement academy council, who by the nature of their duties may be required to perform the duties of a peace officer.

“Licensed Practitioner of the Healing Arts” (LPHA) means a practitioner such as a physician (M.D. or D.O.), a physician assistant (PA), an advanced registered nurse practitioner (ARNP), a psychologist, a social worker (LMSW or LISW), a marital and family therapist (LMFT), or a mental health counselor (LMHC) who is licensed by the applicable state authority for that profession. *See* Iowa Administrative Code 441.78.12(1).

“Life Skills Training” means interpersonal and daily living skills training to prepare individuals to maintain a safe, healthy, and stable lifestyle. Skills training may involve “hard” skills including, but not limited to, money management, self-care and hygiene, physical and mental health care, education (e.g., study skills, tutoring), employment (e.g., job seeking/maintenance), housing (e.g., home-management, renter’s rights and responsibilities, roommate decisions), time-management, accessing community resources. Skills training may also involve “soft” skills including, but not limited to, decision-making, problem solving, relationship skills, and self-advocacy skills.

“Maintenance Payment” means a per diem payment for SAL to cover certain day-to-day expenses. In SAL cluster sites, this payment covers staffing, housing, food, and basic clothing costs. In SAL scattered sites, this payment covers staffing.

“Motivational Interviewing” (MI) means an evidence-based approach to behavior change. MI is designed to help people find the motivation to make a positive behavior change. This client-centered approach is a guiding style of communication, which can empower people to change by drawing out their own meaning, importance and capacity for change.

“Multi-disciplinary Team Approach” means drawing appropriately from multiple disciplines to redefine problems outside of normal boundaries and reach solutions based on a new understanding of complex situations.

“No Reject, No Eject” means that the Contractor shall accept all Cases referred by the Agency or JCS, recognizing that the Agency may approve exceptions in unique situations.

“Neurodevelopmental and Comorbid Conditions” (NACC) means a combination of lower cognitive functioning, developmental delays, and serious emotional and behavioral concerns affecting the functioning and treatment needs of a Child. NACC signifies the Child has been assessed by a Licensed Practitioner of the Healing Arts to have significant needs which necessitate residential treatment.

“Non-Guaranteed Payment Bed” or **“Non-Guaranteed Bed”** means a bed that is part of the contract and shall be available to the Agency as needed, and for which payment will be made based on actual use.

“One Caseworker Model” means the integrated approach to provide each Child with one point of contact through the provision of each service. A Child in CWES, FGCS, or SAL will have a single assigned Caseworker to coordinate the delivery of the Child’s Service Plan and to be the point of contact for the Child, the Child’s Family or other persons in the Child’s Positive Support System, and the Referring Worker. The One Caseworker Model is designed to ensure a Child and Child’s Family have consistent access to Contractor staff and coordinate services for each Child.

“Organized Community Activity” means community-based activities, which can include groups, organizations, clubs, extra-curricular school activities, participation in faith-based groups, and employment within the community. Attending school (including classes leading to a high school equivalency diploma) and informal leisure activities such as going to the mall are not considered Organized Community Activities.

“Out-of-Home” means that the Agency has Placement and care responsibility of a Child in a location other than the Child’s natural home.

“Permanency” means a Child has a safe, stable custodial environment in which to grow up, a life-long relationship with a nurturing caregiver, and is able to explore and retain significant connections to Family members to the greatest extent possible.

“Placement” means each physical setting in which a Child in care resides. For purposes of CWES, a Placement occurs when a Child remains in a shelter bed more than 47 hours.

“Positive Support System” means members of the Child's Family and/or other positive adult role models identified by the Child and/or Family to be a support for the Child.

“Positive Youth Development” means an intentional, prosocial approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances young people’s strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths.

“Practice Standards” means a set of written guidelines that define what staff in a program does, that is, the tasks and skills performed in the course of fulfilling the Contract requirements and meet the needs of the population served. Standards describe what is considered “best practice”.

“Problematic Sexualized Behavior” means a Child’s sexual behavior(s) that is/are developmentally inappropriate or potentially harmful to the Child or others.

“Program Director” means the individual dedicated to the administration of this Contract, including problem solving, resolving staff issues, and all other Agency required and requested concerns. The Program Director shall be the point of contact for the Agency as related to items pertaining to contracted duties and daily operations.

“Qualified Residential Treatment Program” (QRTP) means a program within a Foster Group Care Services State-licensed and Accredited Out-of-Home care facility that provides continuous, 24-hour care and supportive services to Children in a residential, nonfamily home setting that: has a trauma-informed treatment model that is designed to address the clinical and other needs of Children with serious emotional or behavioral disorders or disturbances; is able to implement the specific treatment recommended in an assessment completed by a qualified individual; has registered or licensed nursing staff and other licensed clinical staff who are: (a) on site according to the treatment model and during prime programming hours; and (b) available 24 hours a day, 7 days a week; appropriately facilitates outreach to family members, integrates the family members into the treatment of the Children and documents how this is accomplished, and documents and maintains contact information for any known biological family and kin caregiver, including documenting how sibling connections are maintained; is able to provide discharge planning that provides family-based aftercare support for at least 6 months following discharge.

“Quality Assurance” means the procedures established and activities undertaken by Foster Group Care, CWES, and Supervised Apartment Living Contractors to ensure services are delivered in accordance with requirements established by the Agency and to improve the quality of services to achieve safety, Permanency, and well-being.

“Reasonable and Prudent Parent Standard” means the standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a Child while at the same time encourage the emotional and developmental growth of the Child, that a caregiver shall use when determining whether to allow a Child in Foster Care under the responsibility of the state to participate in extracurricular, enrichment, cultural, and social activities. For the purposes of this definition and this RFP, “caregiver” means a designated official at a Foster Group Care or Emergency Juvenile Shelter in which a Child in Foster Care has been placed.

“Recidivism” means any misdemeanor or felony level offense referred to the juvenile justice system, the adult corrections system, or both, within a twelve (12) month period after date of discharge from service.

“Recruitment, Retention, Training, and Support of Resource Families” (RRTS) means the Contractor responsible for activities related to recruiting new resource families, retaining current resource families, the licensing of foster homes and approval of adoptive families, matching Children in need of Placement with the appropriate resource family, providing training and support services to resource families, and providing post-adoption services to adoptive families who are eligible for adoption subsidy.

“Referring Worker” or **“Referral Worker”** means either the Agency social work case manager or the JCS case manager (Juvenile court officer) assigned to provide Case Management services to the Child.

“Reintegration” means the process in which a Child exits or discharges from a Placement to home or another community or home-like setting.

“Reintegration Planning” means a component of the Child’s Service Plan developed by the Contractor together with the Child, the Child’s Referral Worker, and the Child’s Family after admission to initiate thinking about exit and discharge to assure a successful move home or to the next living arrangement and to assure the continuity of Clinical and support services. Reintegration Planning begins no later than the Child’s Service Planning Conference.

“Removal” means the Placement of a Child from the setting in which they were living by order of the court or Voluntary Placement Agreement.

“Risk, Need, Responsivity Principle (RNR)” means the essential guiding principles for effective correctional intervention. The risk principle states that the level of supervision and services provided to a defendant or probationer should match that individual’s risk of re-offending. The Need Principle states that you should focus services and interventions on the identified criminogenic needs of each person on supervision. The Responsivity Principle states that once risk and needs are identified, you should match individuals to services and interventions based on the individual’s unique characteristics (i.e., responsivity factors) such as gender, age, ethnicity, learning style, motivation to change, cognitive abilities, mental health, culture, and strengths.

“RFP” means the Request for Proposals or Request for Bids (and any Addenda or Attachments thereto) that the Agency issues as part of a formal competitive procurement process for the purpose of soliciting qualified services and scope of work as specified, for the purpose of entering into a contract with the chosen Bidder or Bidders.

“Safety Plan” means a specific and concrete strategy and written plan developed by the Agency with the Family for controlling Threats of Maltreatment or supplementing Protective Capacities to keep the Child safe. The Safety Plan identifies who will participate to assure safety of the Child, who will monitor the Safety Plan, and duration of the Safety Plan. The Safety Plan will also address how behaviors, conditions, and circumstances associated with the signs of present or Impending Danger will be controlled.

“SAL Required Services” means:

- 1) Ensuring through visits to the supervised apartment living situation that there is no reasonable cause for believing that the Child’s mode of living or living situation presents unacceptable risks to the Child’s

health or safety and that the living arrangement has been approved by the Referring Worker and meets the following minimum standards: complies with applicable State and local zoning, fire, sanitary, and safety regulations; provides reasonably convenient access to schools, places of employment, community resources, and services and supports required by the Child; and is reasonably priced to fit within the Child's budget;

- 2) Providing for ongoing supervision of the Child (including but not limited to guidance, oversight, and behavior monitoring to ensure that the Child's living arrangement is maintained in a safe condition, the Child has access to a telephone, there is an operating smoke alarm on each level of occupancy, the Child is receiving necessary health care, the Child is receiving appropriate and sufficient services and supports, the Child is complying with Service Plan requirements);
- 3) Having a minimum of twice weekly face-to-face contacts for Children; and
- 4) Providing Life Skills Training according to each Child's individual Service Plan.

"SAL Stipend" means a monthly Agency issued payment made on behalf of the Child to provide for the Child's living costs. The stipend is paid at the beginning of the month for the month of service to cover expenses typically incurred at the beginning of the month (e.g., rent). The stipend will be prorated for Children entering a SAL Placement during a month by prorating the monthly rate at one-thirtieth of the monthly allowance per day.

"SAL Start-up Allowance" means an initial one-time allowance for Children placed in SAL Foster Care to assist with initial costs of the Placement, such as rent/utility deposits, purchase of food, utensils, bedding, and cleaning supplies, as needed.

"Self-harm" means self-inflicted injury to a person's own body.

"Self-Sufficiency" means sustaining a safe and stable living environment and having resources to support that living environment. Indicators of Self-Sufficiency may include, but are not limited to: demonstration of attainability and sustainability of active education and/or employment plans; knowledge and access to personal and community resources, including self-care; adequate and appropriate physical and mental health care; and demonstration of basic life skills (see Life Skills Training definition above).

"Sensory Room" means a specially designed environment created to give an immersive sensory experience for people with various abilities.

"Service Area" means one of the groups selected from Iowa's 99 counties with boundaries defined by the Agency to provide for improved localized administration of programs (See Attachment E).

"Service Area Manager" (SAM) means the Agency official responsible for managing the Agency's programs, operations, and Child welfare budget within one of the Agency Service Areas.

"Service Contract Specialist" means the Agency Worker assigned to provide review and oversight for an Agency contract with a Contractor.

"Service Payment" means a per diem payment in SAL to cover the resources needed to offer child development and life skills services to a Child in SAL.

"Service Plan" means the plan developed by the Contractor in consultation with the Child and the Child's Family (unless a reason for noninvolvement is documented in the case record), the Referral Worker, and significant others, whenever appropriate. This is the "care plan" required in Foster Group Care, Emergency Juvenile Shelter, and Supervised Apartment Living. The Service Plan shall be based on individual Child assessment as required by licensure and include the following: (1) Identification of specific needs; a description of all planned services and goals and objectives with projected dates of accomplishment intended to meet the specific needs of the Child; (2) Action steps to be taken by the Child, the Child's support system, and staff and the frequency of actions or

services; where services will occur; and, the Caseworker who will be responsible for the Service Plan. The Service Plan shall include the Child-specific Crisis Intervention and Stabilization and Reintegration Plans and be coordinated with other service plans (e.g., Family Interaction, Behavioral Health Intervention Services or other mental or behavioral health services) and assure continuity of the Child's day to day life activities while in care, such as, but not limited to, school, Family relationships, health care, mental health, and behavioral needs, etc.

"Service Plan for Shelter Services" means the plan developed by the Contractor in consultation with the Child and the Child's Family (unless a reason for noninvolvement is documented in the case record), the Referral Worker, and significant others, whenever appropriate that describes the results of the CWES Screening Tool and outlines the plan and summarizes all work at case closure.

"Service Planning Conference" means a meeting conducted by the Contractor with the Referral Worker, the Child and the Child's Family, and other key individuals after admission as a means of developing the core components of the Service Plan including, but not limited to, Family and community connections, physical and mental health, education, and Reintegration Planning.

"Solution-Focused Meetings" or **"SFM"** means a gathering of Family members, friends, formal and informal supports, with the assistance of the Solution Focused Meeting (SFM) facilitator, to draw on past successes of the Family in problem solving and work in partnership with the Family to enhance the safety of Children. SFM activities and anticipated outcomes are based on which Solution Based Casework (SBC) milestone the family is in at the time. SBC engagement and relapse prevention strategies will be utilized in the facilitation of the meeting.

"Solution Based Casework" or "SBC" means an evidence-based Family centered model of Child welfare assessment, Case planning, and ongoing Casework. The goal is to work in partnership with the Family to help identify their strengths, focus on everyday life events, and help them build the skills necessary to manage situations that are difficult for them.

"Specialized Delinquency Program" (SDP or SJDP) means a program designed to reduce multiple placements for delinquent youth by increasing youth engagement in treatment, targeting high-risk criminogenic areas, and preparing youth for lower levels of care and reentry into the community. The program serves male and female youth under formal supervision with JCS who exhibit a chronic pattern of behaviors that cannot be managed in the community and, because of the nature and/or frequency of their delinquencies, will potentially test the limits of the traditional congregate care treatment setting. The program, which meets the criteria for a QRTP, utilizes an integrated and comprehensive treatment approach that is strength-based and focuses on positive behavior strategies

"State" means the State of Iowa, the Agency, and all State agencies, boards, and commissions.

"Statewide" means, for the purposes of this RFP, the Contractor can serve eligible Children from anywhere in the State. Bidders are encouraged to design programs that provide the services in close proximity to a Child's home.

"Successful Bidder" means the entity or entities that the Agency has identified with its intent to award a contract.

"Supervised Apartment Living Foster Care" (SAL) means a type of Foster Care Placement in Iowa. The living arrangement must provide a Child with an environment in which the Child can experience living in the community with less supervision than that provided by a foster family or Foster Group Care setting, with services and supports aimed at preparing the Child for Self-Sufficiency. Children in the SAL program are expected to attend school, shop for their food, prepare their own meals, do their own laundry and cleaning, and engage within the community. SAL Foster Care is the least restrictive type of Foster Care Placement in Iowa in which Children are either 1) placed in their own scattered-site setting (e.g., apartment unit) with access to Contractor staff 24 hours a day, seven days a week or 2) are placed in a cluster setting (up to six Children placed in the same building such as apartments located in one building or private housing) in which Contractor staff is on-site (present and

available to the Children) in the living arrangement at any time when more than one Child is present in this type of setting.

“Target Population” means Children eligible for CWES, FGCS/Q RTP, or SAL services procured with this RFP, specifically:

- **“CWES Target Population”** means Children up to the age of 18 years under the supervision of the Agency or Juvenile Court Services who need temporary care and who can be lawfully placed in Emergency Juvenile Shelter Care pursuant to conditions described in Iowa Code section 232.21. The Target Population also includes Law Enforcement referrals. These are Children who these entities would otherwise refer for shelter care Placement if appropriate alternative services were not available and Children who may require shelter Placement.
- **“FGCS/Q RTP Target Population”** means Foster Care eligible Iowa Children who are considered unable to live in a Family situation due to social, emotional, behavioral, or physical disabilities or community safety issues but are able to interact in a community environment with varying degrees of supervision. Children are adjudicated either as having committed a Delinquent act or as a CINA. This State-licensed Out-of-Home care is provided in licensed facilities 24 hours a day and seven days per week offering room, board, and age appropriate and transitional child welfare services and Juvenile Justice Services.
- **“SAL Target Population”** means Foster Care eligible Iowa Children aged 16 ½-18, or in some cases through age 19, who are able to live in a more independent setting with less supervision than that provided by a foster family or Foster Group Care setting, with services and supports aimed at preparing the Child for Self-Sufficiency and living in the community.

“Temporary Informal Shelter Care” means time-limited placements in a shelter care setting that do not require a court order and can last no longer than 47 hours.

“Transition” means the period in care during which Children are guided to develop life skills needed to move to successful young-adulthood and Self-Sufficiency.

“Transition Planning” means the services, supports, activities and referrals to programs that assist Children currently or formerly in Foster Care in acquiring skills and abilities necessary to Transition to adulthood successfully. Key Transition Planning domains are education, employment, health, housing, and relationships.

“Trauma-Informed Care” means the incorporation of an understanding of trauma and traumatic experiences and the effect they can have on Children in Foster Care into the care and services provided to a Child. These experiences may include, but not be limited to: betrayal of a trusted person or institution and a loss of safety; experiences of violence; physical, sexual and institutional abuse, neglect, intergenerational trauma; and, disasters that induce powerlessness, fear, recurrent hopelessness, and a constant state of alert. Trauma-informed is an approach to help engage people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives.

“Treatment Outcome Package” (TOP) means the behavioral assessment tool adopted by the Agency and JCS. TOP is designed to assist in understanding and improving our Youth’s outcomes by measuring their social and emotional well-being over time, ensuring that Youth receive the right interventions, services, and placements to meet their needs. The TOP assessment complements the information that the Agency, JCS, and providers collect, enhancing both understanding and collaborative decision making on cases.

“Uniform Combined Cost Report” means a report that allows the Agency to determine allowable costs for each service across various Agency programs.

“Voluntary Placement” and related **“Voluntary Placement Agreement” (VPA)** means a Foster Care Placement in which the Agency provides Foster Care services to a Child according to a signed Placement agreement between the Agency and the child's parent or guardian. The Agency has authority to select the Foster Care Placement and has responsibility for care and supervision.

“Youth Centered Planning Meeting” means the JCS youth centered process that promotes self-determination by engaging youth in planning for their future. With the assistance of the youth’s support system, the youth identifies his/her goals for the future and the supports and resources needed to be successful in eight (8) domains: education, employment, housing, health, supportive relationships, civic engagement/responsibility, self-sufficiency, and interpersonal skills/behaviors.

“Youth Transition Decision-Making (YTDM) Meeting” means a Youth-centered practice model and teaming approach that follows standards and is offered to Youth 16 years of age and older. This model has two key components: Engagement/Stabilization and the Dream Path process to promote Self-Sufficiency and to empower Youth to take control of their lives and dreams. Supportive adults and peers create a team to help the Youth make connections to resources, education, employment, health care, housing and supportive personal and community relationships.

“Youth Transition Decision-Making (YTDM) Meeting Dream Path” means a Youth-friendly collaborative plan completed for all Youth Transition Decision-Making Meetings covering the fostering connections categories. The main focus is accomplishing steps toward achieving the Youth’s goals as they transition to adulthood.

“Youth Transition Decision-Making (YTDM) Meeting Youth Plan” means a collaborative plan between the Youth and the Child welfare system developed with the Youth during a Youth Transition Decision-Making Meeting. The plan states the strategies and agreements made during the Youth Transition Decision-Making Meeting.

“24/7” means the provision of services to the Target Population 24 hours per day and 7 days per week, 365 days per year.

1.3 Scope of Work.

The Contractor shall provide services for the contracted Scope(s) of Work in the contracted Service Area(s). The Contractor shall provide services in a manner consistent with the Agency’s Child Welfare Model of Practice (Attachment Y) and JCS’s Model of Practice (Attachment Q), with the goal of promoting each Child’s safety, Permanency, and well-being. Out-of-Home Placements can be a source of trauma for Children, and the Contractor shall implement strategies to mitigate the effects of trauma for each Child, promote the Child’s health, and support the Child’s education and development of life skills. The Contractor shall utilize the One Caseworker Model throughout each Child’s Out-of-Home Placement in the contracted service. Whenever possible, the Contractor shall promote and support the Child’s return to or reengagement with Family and assist in planning for local community-based services, as appropriate to the Child’s age. It is critical to a Child’s healing and well-being that they have minimal moves and permanent Placements.

1.3.1 Service Area Coverage

Service Areas represent five groupings of the ninety-nine (99) counties in Iowa into defined geographic areas for improved, localized administration of programs (See the Service Area map in Attachment F). CISR services shall be provided by Contractor(s) in a Service Area-specific manner with the goal of moving Children back to their communities of origin and preserving connections of each Child to their families, home communities, schools, and community-based supports as well as achieving better outcomes for each Child. When possible, every effort will be made to ensure service delivery to Children will occur at a local level, based upon the Agency’s defined

Service Areas. However, when facilities within a Child's identified Service Area are unable to effectively address a child's treatment needs, a Child may be placed outside of their Service Area to ensure they are receiving treatment services that match their individual needs.

1.3.2 Collaboration and Consultation

In order to achieve the desired outcomes of safety, Permanency, and well-being for Children, each Contractor, for each contracted service and Service Area shall collaborate with all other CISR Contractors, the Agency, JCS, other Child Welfare and community services providers, and relevant stakeholders. Strong collaboration will strengthen services, identify gaps or needs, promote best practice, and avoid service duplication. The Contractor shall participate in local, Service Area, and Statewide committees, workgroups, and planning groups. The Contractor shall collaborate with entities such as, but not limited to, the following:

- a) All other CWES, FGCS/QRTP, and SAL Contractors in all Service Areas
- b) Family Centered Services (FCS) Contractors; including the facilitators of Solution Focused Meetings
- c) Recruitment, Retention, Training, and Support (RRTS) of Resource Families Contractors
- d) State and local initiatives such as the breakthrough series collaborative/county equity teams and minority, child, and family initiatives
- e) Parent Partners
- f) Youth Transition Decision Making (YTDM) or Youth Centered Planning Meeting (YCPM) facilitators and Contractors
- g) Providers of mental health and substance abuse services
- h) Churches and faith-based community organizations
- i) The judicial system including judges, county attorneys, and guardians ad litem, and
- j) State child welfare and JCS justice initiatives.
- k) Schools or other education entities (AEA)

While frequent movement of a Child is discouraged, there are cases where it will be necessary for a Child to move from one service to another service or one Service Area to another Service Area. In order to ensure continuity of care and seamless Transitions for each Child, the Contractor shall also:

- a) Develop strong linkages with other child welfare and juvenile justice service providers; and
- b) Focus on communicating with the Referral Worker and the receiving or sending service to ensure all relevant information regarding the Child is shared, if a Child is going to be moved to a different Contractor or Contract (e.g., FGCS/QRTP to SAL or one Service Area to another Service Area)

1.3.3 Child Welfare Emergency Services Scope of Work

The Contractor shall provide Child Welfare Emergency Services (CWES) as follows.

1.3.3.1 CWES Overview

CWES are short term and temporary child welfare placements provided through the child welfare system that focus on a Child's safety, Permanency and well-being. This Contract emphasizes the Agency's goal that Placement is temporary and they are less than fourteen days. Contractors shall stabilize and support the Child and Child's Family such that a return to CWES is unnecessary. CWES are intended to immediately respond to the needs of the eligible Target Population defined for this Contract. CWES approaches include temporary informal placements to formal court-ordered Emergency Juvenile Shelter Care (as permitted by the Iowa Code). CWES must be coordinated with other Child Welfare and Juvenile justice services and with other domains of a Child's life, including but not limited to, education, Family relationships, recreation, health care, and mental or behavioral health care. Contractors shall access available services that youth in their care may need, including accessing Medicaid-covered behavioral support services.

CWES serve the following groups of Children:

- Children requiring Placement in shelter, as follows:

- Children referred to CWES with court orders for immediate Placement into shelter care; or
- Children referred to CWES for whom it has been agreed upon between the Contractor and Agency/JCS/Law Enforcement that temporary informal placement into a shelter bed is the most appropriate service.

On the other hand, CWES are intended to address the child welfare/juvenile justice needs of Children and families as they relate to safety, Permanency, and well-being. Children and families may be involved with CWES for a matter of hours, or perhaps days or weeks if a shelter bed has been ordered, whereas mental health-related treatment may be available as long as needed in order to stabilize psychiatric crises. This Contract does not address mental health crisis services.

While Emergency mental health services are not directly tied to the child welfare and Juvenile justice system and CWES are not based on mental health needs, it is important that Contractors recognize where or when their child welfare/juvenile justice services overlap with the emerging Children's mental health initiatives. Such appreciation by Contractors will ensure the Contractor's activities are closely coordinated in order to meet needs related to safety and Permanency as well as needs related to mental health.

CWES shall be available Statewide in each of the Agency's Service Areas and accessible to Children and families in each Iowa county.

1.3.3.2 Program Administration

The Contractor shall provide the required services for each Child served in the CWES program to meet the specific needs of the Child as follows:

1.3.3.2.1 Regulations and Policies

The Contractor shall meet all the requirements of all applicable State and federal laws and regulations. The Contractor shall:

- a) Meet the applicable licensing, accreditation, certification, or approval standards throughout the life of the Contract. The Contractor must provide proof of these licenses, accreditations, certifications, or approval standards to the Agency prior to contract execution.

If the Contractor does not meet the requirements in this Section 1.3.3.2.1 at any time, the Agency may determine, in its sole discretion, to either not enter into a Contract, not extend the Contract, or to terminate the Contract in accordance with the Contract's termination provisions.

- b) Develop and comply timely with written policies that are reviewed and approved by the Agency for:
 - i. Handling client appeals and grievances
 - ii. Reporting abuse and denial of critical care of Children
 - iii. Confidentiality, and
 - iv. Staff training.
- c) Participate in the annual Agency's child welfare services Contractors' meeting if applicable.
- d) Develop and comply with internal continuous Quality Assurance processes using data analysis, process and practice modification, supervision, and other methods to ensure the quality of services provided.
- e) Utilize encrypted email for any electronic communication regarding a Child and/or a Child's family.
- f) Serve any Child referred to the Contractor for Emergency Juvenile Shelter Care from within the Contractor's Service Area or Serve any Child if SAM/JCS approves out of

Service Area Placement if an open bed is available. Serve any Child referred to the Contractor for temporary informal shelter care from within the Contractor's identified coverage counties.

1.3.3.2.2 Delivery of CWES

Throughout the delivery of CWES, the Contractor shall ensure the safety, Permanency, and well-being of each Child. It is essential the Contractor consider the temporary nature of shelter bed Placements as care is provided to the Child. In all CWES provision, the Contractor shall:

- a) Safeguard Children from abuse while receiving CWES.
- b) Collaborate with entities at the local and State levels to achieve the most desirable case-specific and system outcomes.
- c) Make decisions with families using approaches that include informal supports and the Child's Positive Support System.
- d) Ensure a safe and supportive environment for each Child receiving CWES.
- e) Accept all referrals and provide contracted services on a No Reject, No Eject basis.
- f) Use measurable outcomes to evaluate the quality of CWES.
- g) Use approaches to services for outcomes that best address the needs of the child welfare and juvenile justice systems.
- h) Implement Cultural Equity Alliance Guiding Principles as adopted by the Agency (Attachment I). Each Child engaged in care shall be provided services that address any special language needs, reinforce positive cultural practices, and acknowledge and build upon ethnic, socio-cultural, and linguistic strengths.
- i) Ensure no Child is ever refused services or discharged from service except in Agency approved cases per the Admission and Discharge Protocol.
- j) Develop and implement written plans for the Contractor's response to disasters and other emergency situations that are consistent with State, federal, and local guidelines.
- k) Utilize Agency-approved tool to assist the Child in identifying informal and formal supports and document these efforts.

1.3.3.2.3 Ensuring Access to Services

The Contractor shall develop, implement, and adhere to CWES delivery methods for shelter Placement that are diverse and flexible enough to ensure accessibility in the communities for which the Contractor is responsible. The Contractor shall:

- a) Serve Children up to 18 years of age referred by the Agency, JCS, or Law Enforcement (LE) and Children court ordered to Emergency Juvenile Shelter Care Placement.
- b) Serve the specified age groups or genders for which the Agency has contracted with the Contractor for Emergency Juvenile Shelter Care.
- c) Demonstrate strong working relationships with others in the Contractor's community, such as, but not limited to, community resources, community leaders, and judges.

1.3.3.2.4 Temporary Informal Shelter Care

The Contractor shall provide temporary informal shelter care when a Child can appropriately and safely receive them instead of being placed in an Emergency Juvenile shelter bed. These placements do not require a court order and can last no longer than 47 hours. The Contractor shall:

- a) Respond to referrals from the Agency/JCS/Law Enforcement within one hour and coordinate the temporary informal shelter care placement with the Agency/Juvenile Court Services/Law Enforcement.
- b) Use the Agency's CWES Intake Form (Attachment J) to complete documentation for temporary informal shelter care placements. If a youth doesn't meet criteria for a temporary informal shelter care placement, the Contractor shall provide resources and referral information to assist in meeting the needs of that individual. Contractors shall

- have relationships and contact information for both public and private agencies who can assist families in crisis. Contractors may have formal linkages to these service providers.
- c) Serve Children up to 47-hours outside their home as a temporary informal shelter care placement.
 - d) Develop a crisis plan for the Child receiving temporary informal shelter care, in the format and timeframe required by the Agency. The Contractor shall connect the youth/family to resources and referral information to assist in meeting the needs of the individual. Contractors will make efforts to help the family initiate the services prior to discharge. Contractors will have relationships and contact information for both public and private agencies who can assist families in crisis. Contractors may have formal linkages to these service providers. This information will be provided in writing to youth/family upon discharge on an Agency-approved format.
 - e) Complete a genogram (family mapping) or other Agency-approved tool (Discovering Connections tool, Attachment Z) for identifying the Child's informal and formal support system.
 - f) Maintain supporting documentation for temporary informal shelter care service provision. The Contractor shall have a case file/record completed for each Child and submit documents as required by the Agency.
 - g) Complete a case file closure summary for the Child when temporary informal shelter care placements conclude, in the format and timeframe required by the Agency.
 - h) Provide temporary informal shelter care for all Children in the Contractor's identified coverage counties.

1.3.3.2.5 Emergency Juvenile Shelter Care

There will be instances when a Child cannot be served with temporary informal shelter care and will require Emergency Juvenile Shelter Care. In providing Emergency Juvenile Shelter Care, the Contractor shall:

- a) Accept all referrals for Children into its contracted number of Emergency Juvenile Shelter Care beds.
- b) Discharge Children in Emergency Juvenile Shelter Care to a permanent Placement at the earliest possible time and work closely with the Referral Worker to develop a service approach to accomplish this within 14 days from the date of admission.
- c) Administer the CWES Emergency Juvenile Shelter Care component following the Reasonable and Prudent Parent Standards (Attachment AA).
- d) Structure Emergency Juvenile Shelter Placement to pursue the least restrictive and most Family-Like Setting and to maintain Family connections as appropriate.
- e) Utilize the Agency's assessment tool (Treatment Outcome Package, or TOP) to assess the well-being of each Child and ensure the results are loaded into the TOP tool's online portal. The assessment will be administered by the Contractor at the intervals determined by the Agency, and assessments will begin on a date agreed upon by the Contractor and Agency. Contractor staff shall participate in any required training to learn about the administration of TOP.
- f) The Contractor shall connect the youth/family to resources and referral information to assist in meeting the needs of the individual. Contractors will make efforts to help the family initiate the services prior to discharge. Contractors will have relationships and contact information for both public and private agencies who can assist families in crisis. Contractors may have formal linkages to these service providers. This information will be provided in writing to youth/family upon discharge on an Agency-approved format.
- g) Follow the requirements of the Admission and Discharge Protocol (Attachment H) as it relates to Placement in Emergency Juvenile Shelter Care.

1.3.3.2.5.1 Service Documentation and Individual Service Plan

Contractors shall maintain a system of individual service documentation and files/records for each Child referred and maintain these notes and files/records in an organized and confidential fashion. See link to current Documents for CWES at:

<https://dhs.iowa.gov/child-welfare-systems/implementation-information>.

Files/records shall include the Agency's CWES Intake Form (Attachment J) Specifically, the Contractor shall:

- a) Develop an individualized Service Plan for each Child in an Emergency Juvenile Shelter Care that is based on each Child's unique needs and contains goals and objectives with projected dates of accomplishment. Specifically, the Contractor shall:
 - i. Develop a Service Plan utilizing the Agency's approved Service Plan form for each Child in the timeframe required by Agency (within ten (10) Business Days of the date of admission).
 - ii. Complete a Service Planning Conference for each Child within five (5) Business Days of a Child's admission to a shelter bed and utilize the information gathered at this conference to develop the individualized Service Plan.
 - iii. Make sure the Caseworker is an active participant in the development and directing of the Service Plan.
 - iv. Develop the Service Plan with input from the Child, the Referring Worker, and Child's Family, unless a reason for noninvolvement is documented in the case record.
 - v. Include in the Service Plan information from other plans that affect the Child's care including but not limited to the Child's Case Permanency or Juvenile Court Services Plan, other child welfare services plans, or Behavioral Health and Intervention Services (BHIS).
 - vi. Submit the completed Service Plan via email (for JCS youth) or through DHS JARVIS system (for DHS youth) and/or its' equivalent replacement to the Referring Worker in the timeframe required by Agency (within ten (10) Business Days of the date of admission)
 - vii. Provide a copy of the completed Service Plan to the Child's parents or guardians in the timeframe required by Agency (within ten (10) Business Days of the date of admission).
 - viii. Update the Service Plan whenever a new Case Permanency Plan/Juvenile Court Services Plan is received for the Child, as needed to address the needs of a Child, or at a minimum of every thirty (30) days.
 - ix. Complete a monthly Service Planning Follow-Up Conference for each Child and utilize the information gathered at this conference to develop the individualized Service Plan.
- b) Maintain a daily log for each Child in Placement. The log shall be used to note general progress in regard to the Service Plan (if applicable) and any problem areas or unusual behavior for each Child in addition to any other Agency-approved and required material. See Iowa Code 441-152.2(4)" a" for a detailed definition of what is required for a daily log.
- c) Maintain supporting documentation. The Contractor shall have a case file/record completed for each Child and submit documents as required by the Agency.
- d) Complete a discharge summary for each Child in Emergency Juvenile Shelter Care utilizing the Agency's approved discharge summary report form in the timeframe required by Agency (within five (5) Business Days of the Child's discharge date).
 - i.) Submit the completed discharge summary via email (for JCS youth) or through DHS JARVIS system (for DHS youth) and/or its' equivalent replacement to the

Referring Worker in the timeframe required by the Agency (within five (5) Business days of the Child's discharge date).

- ii.) Provide a copy of the completed discharge summary to the Child's parents or guardians in the timeframe required by Agency (within five (5) Business days of the Child's discharge date).
- iii.) Make sure supporting documentation for service provision and service billing supports the provision of child welfare services and Emergency Juvenile Shelter Care Services as defined in rule 441 Iowa Admin Code § 105.14 and 441 Iowa Admin Code §105.17(4). Service documentation shall be detailed, describe service provided, and clearly connect to the Service Plan goals and objectives.

1.3.3.2.5.2 Admission and Discharge Protocols

The CWES Contractor shall adhere to the shelter bed Admission and Discharge Protocol (Attachment H) and accept referrals and provide contracted services on a No Reject, No Eject basis. This protocol describes a process that applies to Agency and JCS Placements, and it applies equally to all beds included in the CWES Contract. The Protocol acknowledges that Emergency Juvenile Shelter Care facilities will serve some difficult cases. It does not apply to Placements made by Law Enforcement.

1.3.3.3 One Caseworker Model for CWES

The Contractor shall provide one Caseworker for each Child and Child's Family while the Child is in CWES. This person shall be the day-to-day liaison for the Child and the Child's Family to seek answers to questions and express concerns. The person assigned to each Child and Child's Family shall be the chief point of contact regarding the Child for the Agency or JCS. Other individuals delivering services will interact with the Child and Family, however the Contractor shall ensure these services are coordinated through the Child's Caseworker. Any major information, ranging from transfer of service to Clinical results, shall be communicated to the Child and Family through the Caseworker. The Caseworker shall be present at intake. The name and contact information for this individual shall be documented in the Child's Service Plan and provided to the Referring Worker and the Family. The Caseworker shall communicate information gathered about the Child to the Referring Worker and the Family on a weekly basis, at minimum.

1.3.3.4 Individual Child Development and Life Skills in Emergency Juvenile Shelter Care

Emergency Juvenile Shelter Care offers short-term interventions. The Contractor shall:

- a) Provide a nurturing environment in shelter care that addresses immediate needs while providing continuity in a Child's life for the time they are engaged in service.
- b) Provide services that are culturally competent and address special language needs, reinforce positive cultural practices, and acknowledge and build upon ethnic, socio-cultural, and linguistic strengths.
- c) Assist in the Child's transition planning to adulthood if applicable.

1.3.3.5 Family and Community Connections in Emergency Juvenile Shelter Care

The following section applies to the provision of Emergency Juvenile Shelter Care. The Contractor shall assist the Child in developing and maintaining relationships with the Child's Family and other individuals in the Child's Positive Support System, especially given the temporary nature of CWES engagement. Throughout the provision of CWES, the Contractor shall actively ensure that the Child stays connected to the Child's kin, fictive kin, culture, and community. A lack of interaction with a Child's Family or Positive Support System can increase trauma that can result from a Child's Out-of-Home Placement and make a Child's Reintegration more difficult. The Contractor shall facilitate the Child's interactions with Family or other individuals in the Child's Positive Support System as these connections are crucial to the Child's well-being and to the Child returning to the community. For each Child in care longer than one month, Contractors shall report Child and Family connections no less than at the end of each calendar

month the Child is in care using the Agency's online reporting system. For Emergency Juvenile Shelter Care, the Contractor shall:

- a) Ensure the Family and Community Connection section of each Child's Service Plan includes a comprehensive summary of all related activities.
- b) Follow the Standards of Family Interaction (see Attachment K) when a Child has a Family Interaction Plan and coordinate the Child's Family Interaction Plan with the Service Plan.
- c) Facilitate meaningful contact between the Child and parents daily (via phone, internet video, or comparable means).
- d) Facilitate a minimum of weekly face-to-face contact between the Child and the Child's parents or other persons in the Child's Positive Support System unless limited by JCS, court order, or the Agency. If a Child's parents live more than fifty (50) miles from the Child's Placement, video conferencing may be used as a substitute for two (2) of the approximate four (4) monthly face-to-face visits.
- e) Collaborate with community agencies to develop connections to coordinate services.
- f) Develop community supports and service relationships to help meet immediate Family and Child needs.
- g) Participate in the planning conference when invited by the Agency when a Child is known to be leaving home and entering a CWES shelter Placement.
- h) Assist the Child with Family Finding Efforts. Utilize the completed genogram (family mapping) or other Agency-approved tool for identifying the Child's informal and formal support system. Facilitate contact with identified individuals after consultation with Referring Worker.
- i) Participate in Solution Focused Meetings, Youth Transition Decision-Making Meetings, or Youth Centered Planning Meetings when invited.
- j) Maintain a Child's connections with the Child's school-of-origin, Family, friends, and churches as appropriate. Developing and maintaining linkages to strengthen the relationship with the Child's home community and/or the community in which he/she may reside is critical to success upon discharge.
- k) Execute a plan for a Child's services to continue in the Child's community after disengaging CWES to prevent reentry to shelter care or other CWES engagement. This may include follow-up phone calls to the Family or home visits, and the plan should be documented in the discharge report
- l) Initiate follow up contact (at minimum, a phone call or home visit) using the format and instructions provided by the Agency after the Child leaves a shelter Placement and is discharged to their Family or other Family-Like Setting. This information shall be documented in the Child's file and in the discharge report.
- m) Provide opportunities for sports or other organized activities to ensure continuity for the youth and their connections.

1.3.3.6 Crisis Intervention and Stabilization in Emergency Juvenile Shelter Care

The following section applies to the provision of Emergency Juvenile Shelter Care. Contractors shall have a global Crisis Intervention and Stabilization Plan and an individualized plan for Crisis Intervention and Stabilization incorporated into each Child's Service Plan. The Contractor shall accept referrals and provide contracted services on a No Reject, No Eject basis. The Contractor shall serve any Child the Agency or JCS refers to the Contractor from within the Contractor's contracted Service Area. For Emergency Juvenile Shelter Care, the Contractor shall:

- a) Follow the Agency's procedure to submit notification of all Critical Incidents to DHS and/or JCS.
- b) Notify the Child's parent(s) or guardian and Referral Worker immediately of any serious illness, incident involving serious bodily injury, or circumstances causing removal of the Child from the facility. In the event of the death of a Child, a Contractor shall immediately notify the Child's parent(s) or guardian, the Referral Worker, the appropriate state authority, and the physician (if applicable). The Contractor shall document in the Child's case file how this notice was provided

(e.g., via telephone, face to face, etc.) and to confirm that the notice was received by all parties contacted. Develop, implement, and follow a Contractor-specific Crisis Intervention and Stabilization Plan to identify and respond to Critical Incidents, mitigate trauma, and address staff training that will develop staff competencies to implement this plan. The Contractor shall:

- i. Train staff in Trauma-Informed Care, behavior management, and de-escalation techniques as a means to reduce and address situations that may lead to Critical Incidents
 - ii. Cultivate a culture that includes de-escalation training, expectations, procedures, and policies that are appropriate for the needs of Child placed in shelter, and
 - iii. Submit this plan to the Service Contract Specialist and the Agency's program manager by July 31st annually
- c) Include Child-specific Crisis Intervention and Stabilization planning as a component of each Child's Service Plan. The crisis components of the Service Plan shall
- i. Be individualized to the Child's unique needs and reflect the elements of the Agency-approved Contractor Crisis Intervention and Stabilization Plan, and
 - ii. Consider appropriate staffing patterns and competencies, Child trauma, treatment needs, and other elements needed to appropriately de-escalate and manage a Child's behavior

1.3.3.7 Reintegration Planning in Emergency Juvenile Shelter Care

The following section applies to the provision of Emergency Juvenile Shelter Care. CWES is temporary and when a shelter Placement is used the Contractor will be responsible for planning the services needed during Placement and after discharge, in order to promote successful safety, Permanency, and well-being outcomes for each Child after the Child leaves child welfare services. For Emergency Juvenile Shelter Care, the Contractor shall:

- a) For Children in shelter Placement, initiate Reintegration Planning at the Service Planning Conference to initiate thinking about exit and discharge to ensure a successful move home or to the next living arrangement. All efforts shall be coordinated with Case Management entities as necessary, and the Contractor shall assist in connecting family to local service providers
- b) Maintain continuity of the Child's day-to-day life activities, such as, but not limited to, school, Family relationships, health and mental health care, religious, and additional services that are identified for the best interest of the Child.
- c) Collaborate and coordinate with referral Agency to provide for a Child's needed transportation (for example-Family visits and interactions, treatment services, jobs, and school).
- d) This may include assisting with resource needs like vehicle expenses, and gas cards, along with providing or sharing the actual transportation of the youth with referring Agency or other community partners.
- e) Integrate CWES plans in partnership with the Agency and/or JCS, and with the Child and the Child's Positive Support System.

1.3.3.8 Education in Emergency Juvenile Shelter Care

The following section applies to the provision of Emergency Juvenile Shelter Care. The Contractor shall ensure educational continuity is maintained to the extent possible despite the Child's changing circumstances. For Emergency Juvenile Shelter Care, Contractor shall:

- a) Provide an Education Specialist who will coordinate education needs and services with a Child's Referral Worker, the Child's Caseworker and the Service Plan while a Child is in shelter care. This shall include, but need not be limited to:
 - i. Handling and transferring of educational records to which the Contractor has access
 - ii. Following special education recommendations
 - iii. Providing school supplies
 - iv. Collaborating with the Referral Worker to keep a Child in their school of origin unless not in the best interest of the Child, and
 - v. Arranging relevant academic testing needed for services

- b) Collaborate with the Referral Worker and local school district education personnel to coordinate transportation for the Child to attend the education setting, as determined in collaboration with the Referral Worker and school district personnel, to be the most appropriate education setting for the Child. The following considerations shall apply:
 - i. The Child shall attend a community school unless it is determined by the Referral Worker the Child should not do so.
 - ii. The Child shall attend the Child's school of origin or other school identified in the Case Permanency Plan or Juvenile Court Services Plan (if applicable).
 - iii. The Contractor shall make reasonable effort to provide interim or short-term transportation as the transportation arrangements are being made.
 - iv. The Contractor shall document, in the Child's Service Plan, the decision reached with the Referring Worker and local school districts regarding the school the Child will be attending, the reasons for that decision, and a general description of the transportation arrangements for the Child to attend the school.
- c) Monitor and address educational progress and needs.
- d) Provide access to supplemental educational support such as tutoring, and school-based conferences as needed.
- e) Explore alternatives to learning, such as online courses and other options that might be available. The Contractor may use on-line curriculums and reporting to ensure school progress.

1.3.3.9 Physical Health for Children in Emergency Juvenile Shelter Care

Although CWES is temporary and long-term management of physical health needs will be rare, Children may arrive in CWES with immediate physical health needs the Contractor must address. When Children are placed into CWES shelter, the Contractor shall review each Child's health status at intake for the purpose of identifying medication needs and problems that need immediate medical attention. For each Child in Emergency Juvenile Shelter Care, the Contractor shall:

- a) Gather standard health information including the Child's last physical exam, primary care physician information, current medications, allergies, and vision and dental information. For Children served outside their home up to 72-hours without Emergency Juvenile Shelter Placement, the Contractor ensure basic health information (current medications, allergies, and any other vital facts) are known by the Contractor's staff.
- b) Within seven (7) days of intake (when a Child is expected to remain in Emergency Juvenile Shelter Care more than four (4) days):
 - i. Make all reasonable efforts for a more comprehensive health assessment to be performed by an appropriate Clinician, including a vision assessment, on each Child who has not had a comprehensive health assessment within the past year. If the assessment cannot be performed within seven days, it shall be arranged for the earliest possible time, and the reasons for the delay shall be documented. A registered nurse, an advanced registered nurse practitioner, a physician assistant, or a physician shall perform the comprehensive health assessment.
 - ii. Gather records of all illnesses, immunizations, communicable diseases and follow-up treatment, signed medical and surgical authorizations, medical and dental examinations including findings, and the date of the last physical examination prior to Placement.
 - iii. Determine with the Child's Referring Worker what medical interventions may be required while the Child is in care and schedule appointments as needed.
 - iv. If the Contractor is having difficulty attaining required authorizations from a Child's Family for medical, dental, or vision care, the Contractor shall contact the Referring Worker immediately.
- c) Arrange for 24-hour emergency medical and dental health care
- d) Coordinate and transport to appropriate medical care appointments, treatment, and medication management for all Children (if the guardian/custodian is unable to transport).

- e) Communicate emerging medical situations and relevant medical information to the Referring Worker and Child's guardian.
- f) Coordinate and align with other state agencies to develop and provide sexual health education that covers safe sex practices, pregnancy prevention, health-related issues, peer pressure, sexually transmitted diseases (STDs), and healthy relationships.
- g) Document and address physical health requirements per Agency service plan instructions.
- h) Hygiene items must be provided – and must reflect the cultural, racial, and ethnic needs of the youth living in their programs.

1.3.3.10 Mental/Behavioral Health and Clinical Supports for Children in Emergency Juvenile Shelter Care

- a) Children's mental and behavioral health needs are key components of meeting safety and well-being goals. If a Child has been receiving mental and behavioral health services prior to CWES, it is important to ensure continuity of care. Additionally, there is a high likelihood mental and behavioral health services will need to continue during Reintegration. For each Child in Emergency Juvenile Shelter Care, the Contractor shall:
 - b) Communicate concerns that arise at intake pertaining to mental health/behavioral health to the Referring Worker.
 - c) Coordinate CWES service planning with any plans developed by mental health or behavioral health providers.
 - d) Educate Children, parents, guardians ad litem, and Referral Workers about the Service Plan that shall incorporate monitoring efforts, medication management, and other relevant information.
 - e) Be aware of mental health and medication needs and ensure mental health assessments are properly referred to an appropriate practitioner, as needed. This includes ensuring a comprehensive medical intake screening is completed that identifies medications needed and dosage.
 - f) Coordinate care with Integrated Health Homes if the Child in Placement has one.
 - g) Discuss at intake and the Service Planning Conference the need for substance abuse evaluation and coordinate with a substance abuse professional and the Family when needed.
 - h) If behaviors emerge indicating a need for substance abuse evaluation, address this with the Referral Worker and Family or guardian and involve substance abuse professional as needed.
 - i) If behaviors emerge indicating a need for BHIS evaluation, address this with the Referral Worker and Family or guardian and involve mental health professional as needed.
 - j) Actively engage in medication management per Iowa Administrative Code 441-105.9(232) beyond simply ensuring proper administration of medications. Activities shall include, but not be limited to:
 - i. Developing an awareness of effects of medications given to a Child;
 - ii. Identifying and reporting of side effects
 - k) Provide relevant medical history to mental and behavioral health providers and ensure new information is maintained in the Child case file and shared with the Referral Worker.
 - l) Arrange for required mental health/behavioral health appointments and coordinate consent with the Referring Worker to screen for these services.
 - m) Ability to facilitate LPHA services to complete the Admission Clinical Review Form.
 - n) Ability to provide care via Telehealth with providers from prior placements or community if possible

1.3.3.11 Training

The Contractor shall provide all staff with appropriate and comprehensive training to deliver the services for which the individual is responsible and in a manner that teaches staff to promote the safety, Permanency, and well-being for each Child. The Contractor shall:

- a) Develop a training plan that includes both new staff onboarding training information and ongoing staff annual trainings and submit to the Agency for review and approval within thirty (30) days after the contract start date.
- b) Incorporate any changes to the training plan requested by the Agency and submit a final training plan to the Agency within 30 days of the Agency's completed review.
- c) Execute, adhere to, and provide training as required by Iowa Administrative Rule 441.105 and accreditation as set forth in the Agency-approved training plan.
- d) Receive prior approval from the Agency for any changes to the training plan.
- e) Provide the training described in the training plan for all Contractor or subcontractor staff.
- f) Provide information in the training and training plan regarding Children and Family's identified needs, including but not limited to:
 - i. The Guiding Principles (Attachment I), Family First Prevention Services Act, JCS's Model of Practice (Attachment Q), EPICS-I and Child Welfare Model of Practice (Attachment Y)
 - ii. Crisis Interventions and Stabilization, Trauma-Informed Care, de-escalation techniques, and policies and procedures regarding Critical Incidents
 - iii. Mandt, Crisis Process Intervention model, or another DHS approved least restrictive method of de-escalation and restraint training to ensure Child safety
 - iv. Mental and Behavioral Health support, as appropriate to the staff person's role
 - v. Culturally and Linguistically Appropriate Service Standards (CLASS)
 - vi. Domestic Violence prevention and support
 - vii. Human trafficking identification, intervention, and prevention, and
 - viii. Transition Planning, including the Life Skills Assessment tool.
- g) Provide annual training plan update 30 days after the annual renewal.

1.3.3.12 Contractor Reports and Data

The Contractor shall provide the Agency/JCS with data, reports, and information to determine areas of strength and areas to improve in all aspects of CWES. Reports and data shall not only include directly quantifiable data, but will also include active, meaningful reporting regarding the quality of services provided to Children receiving CWES. Reports shall also continually and proactively inform and improve CWES delivery. See "Annual Innovation and Improvement Report: 470-5654 under "Documents for CWES" for an example of this documentation:

<https://dhs.iowa.gov/child-welfare-systems/implementation-information>

At all times, reports and data shall be used to ensure CWES are following the JCS's Model of Practice, and the Agency's Model of Practice as well as consistently improving and innovating the provision of service.

Reports shall be provided electronically to the Service Contract Specialist, Program Manager and the JCS Quality Improvement Manager. The Contractor shall use their established internal Quality Assurance and improvement system for preparing, submitting, and validating their data and reports to the Agency.

The format and timing for all reports shall be contingent upon Agency approval. Contractor shall provide all applicable data and reports in an Agency approved format, either by inputting into an electronic database, via other electronic means, or through written reports. The Agency will provide CWES Contractors standardized report templates prior to the implementation of Contracts.

The Agency reserves the sole authority and right to adapt, change, or modify data systems as required by federal policy or as needed to meet Agency interests.

1.3.3.12.1 Critical Incident Reporting

The Contractor shall utilize the Agency's online reporting system to report all Critical Incidents within twenty-four (24) hours of occurrence. This does not replace the need for immediate

notification to the Referral Worker, the Child's parents or guardian, or others of incidents, circumstances, or events as described elsewhere in this Contract.

The use of restraint shall be reported to the Referring Worker and parents or guardian within twenty-four (24) hours of occurrence.

The Contractor shall follow its operating procedures regarding developments, and they shall be reported to the Referring Worker and parents or guardian immediately after an elopement is confirmed.

The Agency, at its' discretion, will audit Contractor entries of Critical Incidents in the JARVIS system.

1.3.3.12.2 CareMatch or other Agency approved System

The Contractor shall utilize the CareMatch or other Agency approved system and make all entries as required to provide daily census information to the Agency. The Contractor shall:

- a) Follow all CareMatch system instructions including timeframes contained therein for submitting required information.
- b) Use the database as determined by the Agency to capture in real time a roster of Children in care, by name, date of birth, and other data as required in the CareMatch System.
- c) Use the database to keep an accurate roster of Children who received temporary informal shelter care. The information shall include the name, date of birth, dates of admit and discharge and the Child's FACS or State ID as applicable.

1.3.3.12.3 Review Meetings

The Contractor shall participate in review meetings at the Agency's / Juvenile Court Service's request and held at Agency/JCS determined times and methods of meeting. Methods may include face to face or video conferencing. These meetings shall focus on, but not be limited to: the Contractor's qualitative delivery of CWES, a discussion of services, trends, collective outcomes, challenges, and successes; and milestones and Contract Deliverables during that quarter. These meetings may also include issues and examples discussed by Service Area leadership teams and in local quality improvement meetings.

1.3.3.12.4 Annual Innovation and Improvement Report

The Contractor shall report in an Agency/JCS approved format on work done to advance innovative ideas and achieve improvements throughout CWES. These reports shall identify strengths, successes and challenges and highlight work done by the Contractor to move toward the Agency's future goals and improve the child welfare system of care.

1.3.3.12.5 Annual Staffing Report

The Contractor shall provide an annual staffing report in an Agency/JCS approved format at the end of the State fiscal year that includes at the minimum the following information:

- a) Organizational structure
- b) Staffing ratios
- c) Staff turnover
- d) Full-time equivalents
- e) Salaries and benefits, and,
- f) Other items as determined by the Agency after joint conversations with the Contractor.

1.3.3.13 Financial Management

The Contractor shall:

- a) Maintain accurate, current, and complete records of financial activity that sufficiently and properly document and calculate all charges billed to the Agency.
- b) Not charge the Agency more than the Contractor receives for the same services provided to non-Agency entities.
- c) Document financial information in an Agency-approved manner in all Contractor Invoices so that the Agency obtains information necessary to report such costs to federal programs.
- d) Not exceed 15% of the total contract amount for each service on spending on Administrative Costs, for both the Contractor and all their subcontractors.
- e) Complete and submit a Uniform Combined Cost Report to the Bureau of Service Contract Support identified personnel within 90 days after the end of the Contractor's fiscal year. The Contractor shall conduct and submit a quarterly time study as part of the Uniform Combined Cost Report. Congregate care providers must complete the time studies on one school day and one non-school day each quarter of the fiscal year. Non-congregate care providers can opt to complete the time studies on two weekdays each quarter of the fiscal year.

1.3.3.14 Staffing

The Contractor shall meet all staff qualifications as defined in Iowa Administrative Code 441 Chapter 105 and as described below. In addition, the Contractor shall meet the following criteria and requirements related to staffing:

- a) Employ staff who have a strong desire to participate in the program, support, encourage, help Children, and meet Agency goals.
- b) Train staff in, and continually reinforce, the Agency's Model of Practice, JCS's Model of Practice, EPICS-I, Family-Centered Model of Practice, and Guiding Principles (see section 1.3.3.11).
- c) Take all steps necessary to ensure implementation of the One Caseworker Model.
- d) Ensure each staff member serving the Caseworker role shall serve no more than fifteen (15) Children at one time and shall have limited other duties.
- e) Have staff fully dedicated to the contract – full time supervisors, Caseworkers, and other staff
- f) Implement policies to encourage staff retention.
- g) Train staff to develop Cultural Competency skills.

1.3.3.14.1 Program Director

The Contractor shall maintain a Program Director dedicated to the administration of this Contract, including problem solving, resolving staff issues, and all other Agency required and requested concerns. The Program Director shall be the point of contact for the Agency as related to items pertaining to contracted duties and daily operations.

1.3.3.14.2 Caseworker Supervisors

The Contractor shall employ supervisors who oversee the work of Caseworkers. A Caseworker supervisor shall have either a master's degree in social work with one year of supervised experience after the master's degree or a master's degree in psychology, counseling, or related field with two years of experience beyond the master's degree, one of which was under supervision. The experience shall be in the area of child welfare services.

- a) Supervisors currently employed by the Contractor with a bachelor's degree in human services or related field from an accredited four-year college recognized by the Council for Higher Education (CHEA) who do not have a master's degree in psychology, counseling, or related field, shall be grandfathered in under this RFP and may continue to work as a supervisor under the contract(s) resulting from this RFP.
- b) If a Contractor has a candidate they believe is qualified to be a Caseworker Supervisor but lacks the required Caseworker Supervisor experience/education, the Contractor can provide the Program Manager with the written details needed to approve/deny that candidate for the position.

1.3.3.14.3 Caseworkers

The Contractor shall employ Caseworkers to become the one Caseworker for Children and their families, acting as the single point of contact for CWES services for their assigned Children.

- a) Caseworkers shall possess a bachelor's degree in human services or a related field from an accredited four-year college recognized by the Council for Higher Education (CHEA) with a minimum of one (1) year of full time experience in child welfare services or juvenile justice services;; or a master's degree in human services, juvenile justice, or a related field from an accredited college or university with a minimum of one (1) year of full time experience in child welfare services; or an associate of arts degree in human services or related field from an accredited college or university plus four (4) years of full time experience in child welfare services.
- b) Each Caseworker shall have no more than fifteen (15) Children assigned to the Caseworker's caseload at one time.
- c) If a Contractor has a candidate they believe is qualified to be a Caseworker but lacks the required Caseworker experience/education, the Contractor can provide the Program Manager with the written details needed to approve/deny that candidate for the position.

1.3.3.14.4 Education Specialist

When a Child is in CWES Emergency Juvenile Shelter Care, the Contractor shall provide a staff person, who may also be the Caseworker or Supervisor, to act as an Education Specialist responsible for coordinating, facilitating, and reporting on educational needs with a Child's Caseworker, Area Education Agencies, and Local Education Agencies to support education activities including, but not limited to:

- a) School records
- b) Special education and other education or school behavior plans
- c) Transportation to and from school
- d) Acquisition of school supplies for Children
- e) Retention in Children's school of origin unless not in best interest of a Child
- f) Arrangement of relevant academic testing
- g) College and career planning
- h) Completion of high school diploma or High-School Equivalency, and
- i) Completion of transcripts and needed core classes
- j) Internships, apprenticeships, military, etc.

The Education Specialist will report on the above (a) through (j) in the service plan or service plan updates.

1.3.3.15 Payment Methodology

Contractors will be contracted for a specified number of Guaranteed Payment Beds determined by the Agency. For these Guaranteed Payment Beds, the Contractor will receive guaranteed payments per bed as described in this section. The Contractor may also have a number of additional beds for situations in which the Guaranteed Payment Beds are fully occupied. These beds will be paid per diem, only when occupied, at the same rate as Guaranteed Payment Beds. The Agency may contract for additional capacity that may be used.

Bed utilization is anticipated to be funded at \$224.00 per day a bed is used or guaranteed for payment. There are two per diem rates for Shelter. One per diem rate for occupied/used bed and second per diem rate for unoccupied/unused bed. The manner in which shelters may recover unpaid shelter costs, pursuant to Iowa Admin Code § [232.141\(8\)](#), is not affected by this Contract.

Contractors will be paid an additional supplemental payment for youth who remain in emergency juvenile shelter care longer than thirty (30) days. The Contractor shall provide to DHS at the end of each quarter, a list of all youth who were in shelter greater than 30 days, and the number of days they remained in shelter during the payment quarter. DHS will reimburse the provider at a rate of \$20 extra/day/youth

Contractors will be paid to provide temporary informal shelter care, per **1.3.3.2.4 Temporary Informal Shelter Care**. Contractor will invoice Agency quarterly with a GAX including name of Child and episode duration. Payment will be \$350 for each episode.

Contractor shall submit monthly Invoices reflecting actual utilization of shelter beds, and the Agency will pay the Contractor for this use. Payments will not be made for the day a Child is discharged from a bed. Movement of a Child from a Non-Guaranteed Payment Bed or additional bed to a Guaranteed Payment Bed is not considered a discharge.

Payment for the Guaranteed Payment Beds included in the Contract will be reconciled at the end of each quarter. Bed utilization will be calculated using the following formula: the number of days in the payment quarter X the number of Guaranteed Beds. Guaranteed Bed Payment will be calculated using the following formula: the number of Guaranteed Beds for the quarter minus the number of beds invoiced by the Contractor for the quarter X the rate for unused bed.

At the end of each payment quarter, if the total actual bed utilization is less than the guaranteed utilization number for that quarter, the Contractor shall submit an approved completed Invoice to the Service Contract Specialist for calculation of guaranteed payment. If the total actual utilization is equal to or greater than the total guaranteed utilization number than no additional payment will be made. The Service Contract Specialist will verify the totals submitted and approve final payment.

Payment will be contingent on the Agency's timely receipt of service reports detailing expenses, services provided, and the number of Children served.

At the end of each performance measurement quarter, the Agency will review the Contractor's reports and documentation. If the Contractor's report documents show compliance with applicable performance measures as set forth in Section 1.3.3.16, the Agency will pay the Contractor a performance incentive.

All Contractor Invoices shall document financial information in an Agency-approved manner so that the Agency obtains information necessary to report such costs to federal programs.

The Agency is placing a cap on the amount of funds that may be spent for Administrative Costs in any contract(s) resulting from this RFP. Spending on Administrative Costs under each contract, for both the Contractor and all their subcontractors, cannot exceed 15% of the total contract amount.

At Agency discretion an annual rate increase may be implemented to reflect the Consumer Price Index.

1.3.3.16 CWES Performance Measures

Performance measures and targets are included as a part of this Contract and used to assess performance by the Contractor. The performance measures are designed to help further align Contractor incentives with better outcomes for Children. By meeting or exceeding the performance measures, the Contractor will show their commitment to improving CWES services and outcomes.

The performance measures and targets included are the performance expectations and shall be measured, earned, and paid separately by Service Area

Contractors shall submit Invoices for performance incentive payments after review and approval by the Agency Contract Manager or Service Contract Specialist.

Determination of whether a Contractor has met a performance measure will be made at the sole discretion of the Agency. The Agency may re-evaluate performance measures at the end of the initial two-year contract period.

The following performance measures determine eligibility for performance incentive payments. Performance measures shall be measured, earned, and paid separately by Service Area.

1.3.3.16.1 Performance Measure 1 –

For eligible Children placed in (47 hour stay) temporary informal shelter care, that are not subsequently placed in emergency juvenile shelter care, Foster Group Care/QRTP, or family foster care placement within 90 days of discharge, Contractor will receive \$100.00 per Child that does not enter the specified placements.

1.3.3.16.2 Performance Measure 2-

For all Children whose length of stay in emergency juvenile shelter care is longer than 30 days, the Contractor shall provide an appropriate amount of structure and support to manage behaviors so that criminal charges or placement in detention does not result during their shelter stay. Payment of \$100.00 for each Child.

1.3.3.16.3 Performance Measure 3 (no payment incentive)

Contractor shall create a discharge plan with family to include future identified services needed by the family including both system (only if situation meets criteria) and non-system involved services. Discharge planning to also include crisis planning and recommendations. Services focus on mental health, substance abuse and physical health needs. Monitored via Contract Specialist review.

1.3.4 Foster Group Care Services/Qualified Residential Treatment Programs (QRTP) Scope of Work

The Contractor shall provide Foster Group Care Services (FGCS) (also referred to as Qualified Residential Treatment Providers (QRTP)) services as follows.

1.3.4.1 FGCS/QRTP Overview

FGCS/QRTP are a part of the child welfare service array that offers a structured living environment for eligible Foster Care Children who are considered unable to live in a Family situation due to social, emotional, behavioral, or physical disabilities or community safety issues. In 2020, in line with federal expectations contained in FFPSA, all current Foster Group Care settings in Iowa became Qualified Residential Treatment Programs (QRTP's). Expectations regarding Foster Group Care settings meeting the requirements and definition of QRTP remain and will continue to do so in the future.

Eligible Children are adjudicated for having committed a Delinquent act, under a consent decree, or are adjudicated as a Child In Need of Assistance (CINA), and court-ordered to care that is provided in licensed facilities 24/7. FGCS/QRTP shall be provided in accordance with the Child Welfare Model of Practice and JCS's Model of Practice and with the goal of a Child returning to the Child's Family or less restrictive care setting when possible and/or as deemed appropriate by the court. A child shall receive FGCS/QRTP services in a location that best meets their individual treatment needs. FGCS/QRTP facilities that are geographically closest to the Child's Family should be given priority to promote the Child's connection with the Child's Family and community of origin. However, when a child's treatment needs cannot be effectively addressed by the FGCS/QRTP facilities in a Child's service area, due to the lack of a treatment modality that meets the Child's individual needs or the milieu does not allow for the

separation of co-offenders/gang members, a Child may be placed outside of the identified service area. Whenever possible and appropriate to the Child's level of need, a Child shall receive FGCS/QRTTP services in the location geographically closest to the Child's Family so as to promote the Child's connection with the Child's Family and community of origin. The Contractor shall work with the Child and Child's Family to help the Child gain the skills necessary to successfully return home.

FGCS/QRTTP shall provide Children with a safe and protective setting where they can thrive and the risk of delinquency behavior is reduced. For JCS youth, delinquency risk factors and community safety shall be addressed. Qualified and competent staff shall provide 24/7 parenting-type support, and programs shall be designed to suit individual Children in Placement. The safety, Permanency, and well-being of Children shall be addressed by:

- a) Providing a stable living environment.
- b) Engaging families to help eliminate conditions that may have led to a Child's Removal from the home.
- c) Maintaining connections to home and community in collaboration with the referral entities and the Child's Positive Support System.
- d) Providing for Children's educational, recreational, medical, social, emotional, and rehabilitation needs.
- e) Maintaining essential services such as mental health therapy, medication management, and making referrals to needed identified services

Iowa utilizes three specialized programs under the over-arching umbrella of FGCS/QRTTP:

- Problematic Sexualized Behavior Beds (PSB)- means a Child's sexual behavior(s) that is/are developmentally inappropriate or potentially harmful to the Child or others. Children referred to beds for Problematic Sexualized Behavior treatment will be those properly screened by the Agency or Juvenile Court Services to determine the suitability for Problematic Sexualized Behavior bed placement. This level of care utilizes the general QRTTP staff to Child ratio of 1:4 and is paid at the general QRTTP rate (at current, \$267/day for filled bed and \$200/day for unfilled bed).
- Neurodevelopmental and Comorbid Conditions Beds (NACC)- means a combination of lower cognitive functioning, developmental delays, and serious emotional and behavioral concerns affecting the functioning and treatment needs of a Child. NACC signifies the Child has been assessed by a Licensed Practitioner of the Healing Arts to have significant needs which necessitate residential treatment. This level of care requires a 1:2 staff to Child ratio and a higher payment rate (at current, \$287/day).
- Specialized Delinquency Program Beds (SDP or SJDP)-means a program designed to reduce multiple placements for delinquent youth by increasing youth engagement in treatment, targeting high-risk criminogenic areas, and preparing youth for lower levels of care and reentry into the community. The program serves male and female youth under formal supervision with JCS who exhibit a chronic pattern of behaviors that cannot be managed in the community and, because of the nature and/or frequency of their delinquencies, will potentially test the limits of the traditional congregate care treatment setting. The program, which meets the criteria for a QRTTP, utilizes an integrated and comprehensive treatment approach that is strength-based and focuses on positive behavior strategies. This level of care requires a 1:3 staff to Child ratio and a higher payment rate (at current, \$300/day).

FGCS/QRTTP shall be responsible for planning the pro-social daily activities of Children, provide discipline, supervision, and guidance as needed, and facilitate the development of peer relationships. While in care, Children shall be taught age-appropriate skills and/or skills to reduce criminogenic risk factors if applicable, to help prepare them to return to their communities or to Transition to adulthood or future Self-Sufficiency.

Lengths of Placement vary and the Contractor shall work with the referral entities, courts, and families to coordinate efforts toward achieving goals in the Child's Case Permanency Plan or Juvenile Court Services Case Plan. Behavior management and stabilization strategies used shall include collaboration with families in order to facilitate Family reunification and a Child's move back to their home community if that is possible and appropriate.

FGCS/QRTP are divided into three levels (D9, D8, D950) with three levels of reimbursement. FGCS/QRTP shall be licensed according to Iowa standards and shall adhere to the following staff to Child ratio per level of reimbursement:

D9 level requires at least 1:4 staff to Child ratio.

D8 level for NACC requires at least 1:2 staff to Child ratio.

D950 for Specialized Delinquency Program requires at least 1:3 staff to Child ratio.

For youth with qualifying needs, the Contractor shall contact the appropriate Managed Care Organization (MCO) to discuss what services and supports can be provided in the QRTP setting. The Contractor should collaborate with the referring entity to utilize the member centered meeting process to engage the youth's MCO in order to establish the billing and delivering of services as allowed by Medicaid.

1.3.4.2 Program Administration

The Contractor shall provide stable settings through FGCS/QRTP that are appropriate to the needs of Children requiring Out-Of-Home Placement. The Contractor shall meet the basic needs of every Child placed in their care according to the requirements of this Contract, State, and federal laws, the Agency's Child Welfare Model of Practice, JCS's Model of Practice, and all applicable regulations. The Contractor shall collaborate with Agency to protect the Child. The Contractor shall ensure a safe Placement that supports the Child and the Child's Family while achieving Agency goals of safety, Permanency, and well-being.

1.3.4.2.1 Regulations and Policies

- a) In providing services for the Child in Foster Group Care/QRTP, the Contractor shall abide by all applicable State and federal laws, rules, regulations, and maintain Accreditation status. The Contractor shall develop additional policies for the administration of FGCS/QRTP as detailed in this section. The Contractor shall:
 - Maintain applicable FGCS/QRTP licensure, certification, or approval status by demonstrating compliance with all licensure requirements throughout the term of the Contract. Bidders shall indicate where they are in the process and verification must be provided to the Agency prior to contract execution. The Agency will Contract with a provider for FGCS/QRTP services only when there is compliance with licensure requirements per the following:
 - i. A facility providing community-level group care shall be licensed:
 - 1) As a Community Residential Facility pursuant to 441 Iowa Admin. Code Ch. 114;
 - 2) As a Comprehensive Residential Facility pursuant to 441 Iowa Admin. Code Ch. 115; or
 - 3) Under comparable standards by the State in which the facility is located.
 - ii. A facility providing comprehensive-level group care shall be licensed:
 - 1) As a Comprehensive Residential Facility pursuant to 441 Iowa Admin. Code Ch. 115; or
 - 2) Under comparable standards by the State in which the facility is located.

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR)

If the Contractor does not meet these licensure requirements at any time, the Agency may determine, in its sole discretion, to either not enter into a Contract, not extend the Contract, or to terminate the Contract in accordance with the Contract's termination provisions.

- b) Comply with all applicable State and federal laws and regulations on confidentiality including rules in 441 Iowa Admin. Code Ch. 9.
- c) Comply with all applicable State and federal laws, regulations, and requirements regarding the Prison Rape Elimination Act (PREA).
- d) Develop and use internal continuous Quality Assurance processes using data analysis, process and practice modification, supervision, and other methods to ensure the quality of services provided.
- e) Develop and use written policies approved by the Agency for:
 - i. Handling client appeals and grievances;
 - ii. Reporting abuse and denial of critical care of Children;
 - iii. Maintaining confidentiality; and
 - iv. Training staff.
- f) Develop and implement written plans for the Contractor's response to disasters and other emergency situations that are consistent with State, federal, and local guidelines.
- g) Participate in the Agency's annual Statewide child welfare services contractors' meeting if applicable.
- h) Utilize encrypted email for any electronic communication regarding a Child and/or a Child's family.
- i) The Contractor shall serve any Child referred by JCS or DHS from anywhere in the state. The Contractor shall serve the Children referred to these beds on a No Reject, No Eject basis. Each provider, based on number of guaranteed beds, will have a designated number of rejections that can be used in a calendar year when the Contractor chooses to enact them. For a site with 0-20 beds=2 rejections/year; 21-60 beds=4 rejections/year; 61 or more beds=6 rejections/year. These rejections shall be documented in CareMatch or other Agency approved manner. Other admission/discharge disputes shall be handled following an Agency Protocol that selected bidders will have the opportunity to contribute to the development of prior to contract start. Separate protocols may be developed for DHS and JCS youth.
- j) If a Contractor has contracted beds for Problematic Sexualized Behavior treatment approved by the Agency, the Contractor shall serve the Children referred to these beds on a No Reject, No Eject basis. Children referred to beds for Problematic Sexualized Behavior treatment will be those properly screened by the Agency or Juvenile Court Services to determine the suitability for Problematic Sexualized Behavior bed placement.
- k) If a Contractor has contracted beds for NACC treatment approved by the Agency the Contractor shall serve the Children referred to these beds on a No Reject, No Eject basis. Children referred to beds for NACC treatment will be age 12 or older who have been recommended for NACC treatment by a Licensed Practitioner of the Healing Arts. For NACC services, Contractor shall provide:
 - i. AIM (Accept-Identify-Move) or other Agency approved treatment curriculum; and
 - ii. Sensory Room.
 - iii. Consultation with Applied Behavior Analysts as needed
- l) If a Contractor has contracted beds for Specialized Delinquency Program approved by

the Agency in collaboration with JCS, the Contractor shall serve all youth referred by the Interagency Placement Review Committee (IPRC) up to the guaranteed number of beds. Youth referred to beds for Specialized Delinquency treatment will be age 14 or older who have been recommended for Specialized Delinquency Program by a Licensed Practitioner of the Healing Arts. For Specialized Delinquency Program the Contractor will participate in the IPRC as requested by JCS and shall provide the following:

- i. Pre-Admission/orientation outreach and planning.
- ii. Evidence-based treatment and interventions that are directed by an individual service plan and based on the youth's and family's needs;
- iii. Targeted treatment of criminogenic risk factors 24 hours a day, seven (7) days a week; and
- iv. Family engagement and collaborative re-entry/transition planning.

1.3.4.2.2 Delivery of FGCS/QRTP

FGCS/QRTP are intended to help a Child with high needs thrive and develop the skills necessary to return home. Through the delivery of FGCS/QRTP, the Contractor shall meet the needs of the Child in Out-of-Home Placement and promote safety, Permanency, and well-being. The Contractor shall:

- a) Utilize a service delivery approach that conforms to QRTP standards and Guiding Principles, the Agency's Family-Centered Model of Practice, Child Welfare Model of Practice, Juvenile Court Services' Model of Practice (as applicable), the Federal Child and Family Services Review, and the Solution Focused Meeting and Youth Transition Decision Making Meeting, and Youth Centered Planning Meeting models.
- b) Provide the following minimum service elements for each Child in FGCS/QRTP:
 - i. Implement each Child's Service Plan;
 - ii. Monitor and record each Child's behavior daily;
 - iii. Supervise the daily living activities of each Child, including knowing their whereabouts at all times, and provide oversight and maintenance of their general health and well-being;
 - iv. Schedule in-person conferences as needed;
 - v. Ensure a supportive atmosphere and provide leadership and guidance to each Child;
 - vi. Coordinate and participate in internal and external activities of each Child; and
 - vii. Maintain ongoing communication with the Referring Worker.
- c) Within one (1) hour accept all referrals that are made when there is a vacancy in the program and make arrangements with the Referral Worker to have the Child placed within 72 hours. In limited cases, additional time to place a Child (up to no more than 5 days from the referral date) may be allowable for the Contractor to best accommodate a referral (for reasons like, but not necessarily limited to, preparing for placement into the most suitable milieu, unique needs of a Child, or arranging for proper staffing needs). The additional time will require prior approval from the respective referral authority, i.e., the SAM or designee for Agency referrals or the Chief Juvenile Court Officer or designee for JCS referrals. At no time shall the total number of Placements exceed the number specified in a Contractor's license.
 - i. All Specialized Delinquency Program referrals must be reviewed and approved by the Interagency Placement Review Committee (IPRC). The IPRC utilizes a multi-faceted approach to review all referrals to confirm they meet the program's entry criteria and ensure appropriate programming is available (see Attachment G). Following review and approval of a referral by the IPRC, Care Match shall be updated.
- d) Provide an array of services and supports to meet the needs, objectives, services, and outcomes described in the Agency's Case Permanency Plan/Juvenile Court Services Plan.

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- e) Provide supervision, planning for daily activities, discipline, guidance, development of peer relationships, and delivery of recreational programs. Community resources in both the location of the Contractor (i.e., where the Child may be placed) and the location of a Child's Family may be used for education, recreation, medical, social, and/or rehabilitation services. The services must be appropriate to the age, gender, sexual orientation, cultural heritage, and the developmental and functional level of the Child.
- f) Administer the FGCS/QRTP program following the Reasonable and Prudent Parent Standards (Attachment AA).
- g) Implement Cultural Equity Alliance Guiding Principles as adopted by the Agency (Attachment I). Each Child engaged in care shall be provided services that address any special language needs, reinforce positive cultural practices, and acknowledge and build upon ethnic, socio-cultural, and linguistic strengths.
- h) Provide programs that ensure Child Welfare and Juvenile Justice Children are not co-mingled whenever possible. In addition, ensure Children reside and interact with persons within their own age group and with common treatment needs whenever possible. The behavioral, psychological, emotional, and developmental levels of Children shall be considered in the determination of appropriate groupings. Bidder shall provide detailed information to the Agency regarding how child welfare and juvenile justice populations are separated, including description of the physical location of the FGCS/QRTP site. Description will also include different programming used for each population. Contractors may indicate a preferred population (JCS or DHS), however, this may or may not be an option based on service area needs/bed numbers.
- i) Facilitate the participation of the Child in other necessary programs and services to ensure the Child's overall needs are met. Such programs or services include but are not limited to the following:
 - i. Various medical services;
 - ii. Outpatient mental health or substance abuse treatment;
 - iii. Behavioral Health Intervention Services;
 - iv. Educational or vocational services;
 - v. Criminogenic need reduction services and,
 - vi. Other community-based services.
- j) As appropriate to the Children the Contractor services, provide individualized care that is responsive to the needs of specific and outlier populations, such as sex offenders, Children adjudicated for Delinquent acts, Children with Special Needs, etc.
- k) Utilize the Agency's Treatment Outcome Package (TOP). Follow all Agency TOP instructions including adherence to the timeframes contained therein.
- l) Design programs with varying levels of structure that can be applied as a Child's need for supervision decreases (demonstrated, for example, by a Child's increased level of responsibility and self-management). The programming design as well as the setting, to the extent feasible, shall change as a result, focusing on the Child acquiring and building life skills that allow the Child better access to the community.
- m) Implement and provide QRTP as defined (see Definitions).
- n) Collaborate with clinical resources made available by the Agency.

1.3.4.2.3 Service Documentation and Individual Service Plan /Quarterly Progress Report/ Discharge Summary

Contractors shall maintain a system of individual service documentation and files/records on each Child referred and maintain these notes and files/records in an organized and confidential fashion for a minimum of seven (7) years beyond the end of the contract. See link to current Documents for Group Care at:

<https://dhs.iowa.gov/child-welfare-systems/implementation-information>

The Contractor shall:

- a) Develop an individualized Service Plan that is based on each Child's unique needs and contains goals and objectives with projected dates of accomplishment. Specifically, the Contractor shall:
- i. Develop a Service Plan utilizing the Agency's approved Service Plan form for each Child in the timeframe required by Agency (within fifteen (15) Business Days of the date of admission). For JCS youth, create an individualized, targeted, and specific plan to address high risk criminogenic areas for Children adjudicated for having committed a Delinquent act, including the specific services to be provided and the length and intensity of the services needed to effectively address those criminogenic risk areas.
 - ii. Complete a Service Planning Conference for each Child within five (5) Business Days of the Child's admission and utilize the information gathered at this conference to develop the individualized Service Plan.
 - iii. Make certain the Caseworker is an active participant in the development and directing of the Service Plan.
 - iv. Develop the Service Plan with input from the Child, the Referring Worker, and Child's Family, unless a reason for noninvolvement is documented in the case record.
 - v. Include in the Service Plan information from other plans that affect the Child's care including but not limited to other child welfare services, Juvenile justice involvement, or Behavioral Health and Intervention Services (BHIS).
 - vi. Submit the completed Service Plan through email (JCS Youth) or DHS JARVIS system (DHS youth) and/or its' equivalent, to the Referring Worker in the timeframe required by the Agency (within fifteen (15) Business Days of the date of admission).
 - vii. Provide a copy of the completed Service Plan to the Child's parents or guardians in the timeframe required by the Agency (within fifteen (15) Business Days of the date of admission).
 - viii. Update the Service Plan whenever a new Case Permanency Plan/Juvenile Court Services Plan is received for the Child, as needed to address the changing needs of a Child, and/or at a minimum of every 30 days.
 - ix. Complete a monthly Service Planning Follow-Up Conference for each Child and utilize the information gathered at this conference to update the individualized Service Plan.
- b) Complete a quarterly progress report for each Child using the Agency's approved quarterly progress report form and email (JCS youth) or submit through DHS JARVIS system (DHS youth) and/or its' equivalent to the Referring Worker in the timeframe required by Agency (no later than ninety (90) days following the date of admission, and at least every ninety (90) days thereafter throughout the episode of service).
- c) Complete a discharge summary for each Child using the Agency's approved discharge summary report form and email (JCS youth) or submit through DHS JARVIS System (DHS youth) and/or its' equivalent to the Referring Worker in the timeframe required by Agency (within ten (10) Business Days of the Child's discharge date).
- d) Make sure supporting documentation for service provision and service billing supports the provision of child welfare services and Group Care Maintenance as defined in 441 Iowa Admin. Code Ch. §156.1(234) and 441 Iowa Admin. Code Ch. §114.11(237). Service documentation shall be detailed, describe service provided, and clearly connect to the Service Plan goals and objectives.

1.3.4.3 One Caseworker Model

The Contractor shall provide one Caseworker for each Child and the Child's Family while the Child is in FGCS/QRTP. This person shall be the day-to-day liaison for the Child and the Child's Family to seek answers to questions and express concerns. The Caseworker assigned to each Child and Child's Family shall be the chief point of contact for the Referring Worker. Other individuals delivering services will interact with the Child and Family, however the Contractor shall ensure these services are coordinated through the Child's Caseworker. Any major information, ranging from transfer of service to Clinical results, shall be communicated to the Child and Family through the Caseworker. If the Child leaves FGCS/QRTP, transfers to another service or Service Area, or Transitions back to the community, the Caseworker is responsible to help ensure a smooth Transition to the Child's next Caseworker or caregiver. The Caseworker shall be assigned to the Child before and be present at the Child's Service Planning Conference. The name and contact information for this individual shall be documented in the Child's Service Plan and provided to the Referring Worker.

1.3.4.4 Individual Child Development and Life Skills

- a) The Contractor shall provide services to facilitate Child development and life skills learning in a nurturing environment. This process begins with accurate and timely assessment of the Child upon entry to FGCS/QRTP. Child development and life skills are crucial components of a Child's ability to return to the community or the Child's Family, and these shall be a point of emphasis in the Contractor's delivery of services. In providing Child development and life skills services, the Contractor shall:
- b) Obtain the results of the latest Casey Life Skills Assessment (CLSA) if one has been completed within the previous sixty (60) days. If the Contractor is unable to obtain a copy, utilize the Agency approved standard Casey Life Skills Assessment within 30 days of placement with every Child to determine the Child's needs and basis for service approach. The CLSA may be used to measure a Child's strengths and needs regarding development of life skills necessary for successful Reintegration and transition to adulthood. Other assessments (e.g., those titled Caregiver, Parenting, GLBT, Younger Youth, etc.) are available but not required to be completed.
- c) The Contractor shall reassess the Child using the CLSA within thirty (30) days of the Child's 14th, 16th, and 18th birthdays and prior to a planned discharge or hand-off to another Contractor. The results of the Casey Life Skills Assessment shall be logged uniformly, as specified by the Agency, and shall be sent to the Child's Referring Worker within ten (10) days of completion. The results of the Casey Life Skills Assessment shall be provided to the Child. The Contractor shall follow any instructions in the data entry portal related to the completion of the CLSA.
- d) Provide the results of all CLSA to the Child and to the Referring Worker within ten (10) days of completion.
- e) Reassess each Child using the CLSA within thirty (30) days prior to a planned exit from the program and prior to hand-off to another Contractor.
- f) Facilitate a Youth Transition Decision Making (YTDM) meeting or Youth Centered Planning Meeting (YCPM) with youth at intervals as driven by the individual youth's needs, but not limited to once on or after the youth's 16th birthday and a follow up meeting within 90 days prior to the youth's 18th birthday.
- g) Engage each Child, the Child's Family members, and the Child's Positive Support System to assist in developing goals and action steps for acquiring and building upon life skills based on formal and informal assessment results.
- h) Maintain written documentation of all implementation and tracking activities based on the various point in time that Assessments are required during a Child's time in care.
- i) Develop a Child-driven, targeted, and effective life skills component of the Service Plan to help each Child develop skills identified through the assessment.

- j) Provide the Child opportunities to identify other skills, plans, and community connections not captured on Casey Life Skills Assessment.
- k) Engage each Child, Family members of the Child, or the Child's Positive Support System to assist in developing goals and action steps for acquiring and building upon life skills based on formal and informal assessment results.
- l) Make certain the Child's Caseworker is facilitating the completion of assessments and Child development and life skills plans, working with the Referring Worker, and facilitating outside adults who are connected to the Child and their development throughout FGCS.
- m) Utilize a Life Skills Training curriculum, per the guidance provided by the Agency, for each Child served. The Agency shall reserve the right to approve the curriculum provided by the Contractor.

1.3.4.5 Family and Community Connections

The Contractor shall assist the Child in developing and maintaining relationships with the Child's Family and Positive Support System. Throughout the provision of FGCS/QRTP, the Contractor shall actively ensure that the Child stays connected to the Child's kin, culture, and community. A lack of interaction with a Child's Family or Positive Support System can increase the trauma that can result from a Child's Out-of-Home Placement and make a Child's Reintegration or Transition more difficult. The Contractor shall facilitate the Child's interactions with Family and the Child's Positive Support System as these connections are crucial to the Child's well-being and to the Child returning to the community. For each Child in care longer than one month, Contractors shall report Child and Family connections no less than at the end of each calendar month the Child is in care using the Agency's online reporting system. The Contractor shall:

- a) Ensure the Family and Community Connection section of each Child's Service Plan includes a comprehensive summary of all related activities.
- b) Follow the Standards of Family Interaction (see Attachment E) when a Child has a Family Interaction Plan and coordinate the Child's Family Interaction Plan with the Service Plan.
- c) Facilitate meaningful contact between the Child and parents daily (via phone, Internet video, or comparable means).
- d) Facilitate a minimum of weekly face-to-face contact between the Child and the Child's parents or other individuals in the Child's Positive Support System, including those that have been identified in the Agency-approved format (Discovering Connections Tool, Attachment Z) unless limited by JCS, Court order, or the Agency. If a Child's parents live more than fifty (50) miles from the Child's Placement, video conferencing may be used as a substitute for two (2) of the approximate four (4) monthly face-to-face visits.
- e) Facilitate monthly face-to-face contact and interactions with a Child's siblings unless limited by JCS, Court order, or the Agency.
 - i. If siblings live more than fifty (50) miles from the Child's Placement, video conferencing may be substituted for face-to-face visits. However, the Child's Service Plan must articulate how the Contractor will strive to facilitate face-to-face visits.
 - ii. If a Child's sibling(s) is also in a child welfare or juvenile justice Placement, the Contractor shall work with the sibling's Placement Contractor to facilitate monthly visits, or if the sibling's Placement location is more than fifty (50) miles away, the Contractor shall facilitate monthly video conferencing.
- f) Participate in planning conferences when invited and when a Child is known to be moving to a FGCS/QRTP Placement from another location, such as home or other child welfare Placement.
- g) Assist the Child with Family Finding Efforts and assist the Child in identifying and locating Family members and/or other Positive Support Persons with whom the Child may live.
- h) Teach each Child skills for living within a Family structure and work with the Child and the Child's Family to prepare for the Child to return home upon discharge from FGCS/QRTP.
- i) Participate in Solution Focused Meetings when invited.

- j) Assist the Child with identifying other positive informal supports. Document in Agency approved format (Discovering Connections Tool, Attachment Z). For each Child in care longer than one month, Contractors shall report positive informal supports no less than at the end of each calendar month the Child is in care using the Agency's online reporting system.

1.3.4.6 Crisis Intervention and Stabilization

The Contractor shall have a global Crisis Intervention and Stabilization Plan and an individualized plan for Crisis Intervention and Stabilization incorporated into each Child's Service Plan. The Contractor shall:

- a) Follow the Agency's procedure to submit notification of all Critical Incidents to the Agency.
 - i. All Contractors must develop a specific protocol by Contract start that outlines the steps its staff must follow prior to contacting law enforcement when a Child is acting out.
- b) Notify the Child's parent(s) or guardian and Referral Worker immediately of any serious illness, incident involving serious bodily injury, or circumstances causing removal of the Child from the facility. In the event of the death of a Child, a Contractor shall immediately notify the Child's parent(s) or guardian, the Referral Worker, the appropriate state authority, and the physician (if applicable). The Contractor shall document in the Child's case file how this notice was provided (e.g., via telephone, face to face, etc.) and to confirm that the notice was received by all parties contacted.
- c) Develop, implement, and follow a Contractor-specific Crisis Intervention and Stabilization Plan to identify and respond to Critical Incidents, mitigate trauma, and address staff training that shall develop staff competencies to implement this plan. The Contractor shall:
 - i. Train staff in Trauma-Informed Care, behavior management, and de-escalation techniques as a means to reduce and address situations that may lead to Critical Incidents;
 - ii. Cultivate a culture that includes de-escalation training, expectations, procedures, and policies that are appropriate for the needs of a Child placed in foster group care; and,
 - iii. Submit this plan to the Service Contract Specialist and the Agency's program manager by July 31st annually and amend the plan as requested by the Agency.
- d) Include Child-specific Crisis Intervention and Stabilization planning as a component of each Child's Service Plan. The crisis components of the Service Plan shall:
 - i. Be individualized to the Child's unique needs and reflect the elements of the Agency-approved Contractor Crisis Intervention and Stabilization Plan; and, consider appropriate staffing patterns and competencies, Child trauma, treatment needs, and other elements needed to appropriately de-escalate and manage a Child's behavior.

1.3.4.7 Reintegration Planning

From the time a Child enters FGCS/QRTP, the Contractor shall plan for the Child's return to home or another level of care. The plan shall outline the needs of the Child, the services and supports provided while in placement, and anticipated needs and services for when the Child exits to home or other service. The plan shall be developed with the youth and family. The plan shall address effective service strategies for stabilizing behavior, including reducing criminogenic risk factors for juvenile justice involved youth, and the role of community services. Formal and informal supports should be aware of the plan and prepared to help the Child fully utilize learned skills to transition successfully into home and community, or another level of care if applicable.

FGCS/QRTP are not intended to be long-term solutions, and the Contractor shall plan and implement services with the end goal of discharge from services. The Contractor shall:

- a) Include Reintegration Planning as a component of the Child's Service Plan at the time of the Child's Service Planning Conference.
- b) Address, in the Reintegration Planning section of the Service Plan, individual Child needs and methods to ensure successful Transition home or to lower level of care.

- c) Plan for direct Clinical and/or other support staff to be in place prior to the Child's exit from the program so as to provide continuity of Clinical and support services as a Child exits a facility.
- d) Provide the Child and Child's family with transportation while in care, including resources like information on programs to assist in obtaining vehicles, gas cards, and other relevant resources, to facilitate Family visits and treatment services. The Contractor shall ensure that transportation is not a barrier that prevents a Child from Family engagement.
- e) Coordinate and facilitate a Youth Transition Decision-Making Meeting or Youth Centered Planning Meeting (YCPM) in the 30 days prior to the Child leaving the facility. If the exit is not planned, document the reason for not completing the meeting in the case file.
- f) Provide a minimum of six months post-discharge services to ensure the Child is effectively reintegrating with their Family or other Family-Like Setting. Post-discharge services shall include, but is not limited to:
 - i. Collaboration with FCS and/or JCS.
 - ii. A minimum of monthly In-Home, face to face contact with the Child and Family.
 - iii. Connection/referral to community resources as needed and according to the Reintegration Plan of the Child's Service Plan.
 - iv. Service documentation that is detailed, describes support and services provided, and clearly connects to the identified needs of the Child and Family.
 - v. Provide a post-discharge services summary report at the end of the six-month episode of service that includes Child's and Family's response to services and outcomes achieved. The post-discharge services summary report shall be provided to the Referring Worker within 10 Business Days after the end date of services.
 - vi. An exception to the six months post-discharge services is allowed for JCS supervised youth, when the district where the Child resides does not have an Agency approved post discharge service in place. It is the responsibility of the provider to remain aware of the district-by-district status of post-discharge availability by working closely with JCS.

1.3.4.8 Education

Education is a key component leading to a Child's future successes. The Contractor shall arrange and ensure that each school-aged Child attends an educational or vocational program in accordance with all applicable State, federal, and local laws. In accordance with the Agency's goal of maintaining community connections and following federal guidance, a Child's educational needs are best met in the Child's school of origin. If the Child is not remaining in their school of origin, the Contractor shall help the Child continue with the curriculum and progress of their school of origin so the Transition between school systems is as smooth as possible. The Contractor shall:

- a) Provide an Education Specialist who will coordinate education needs and services with a Child's Referral Worker, the Child's Caseworker, the Local Education Agency, and the Service Plan while a Child is in care.
- b) Monitor appropriate educational participation for each child, including:
 - i. Handling and transferring of educational records to which the Contractor has access;
 - ii. Addressing special education recommendations;
 - iii. Providing school supplies;
 - iv. Collaborating with the Referral Worker to keep a Child in their school of origin unless not in the best interest of the Child; and
 - v. Arranging relevant academic testing needed for services.
- c) Collaborate with the Referral Worker and Local Education Agency personnel to coordinate transportation for the Child to attend the education setting, as determined in collaboration with the Referral Worker and school district personnel, to be the most appropriate education setting for the Child. The following considerations shall apply:
 - i. The Child shall attend a community school unless it is determined by the Referral Worker the Child should not do so.

- ii. The Contractor shall make reasonable effort to provide interim or short-term transportation as transportation arrangements are being made.
- iii. The Contractor shall document, in the Child's Service Plan, the decision reached with the Referring Worker and local school districts regarding the school the Child will be attending, the reasons for that decision, and a general description of the transportation arrangement for the Child to attend school.
- d) Monitor and address educational progress and needs.
- e) Provide access to supplemental educational support such as tutoring, and school-based conferences as needed.
- f) Explore alternatives to learning such as online courses, High School Equivalency Diplomas (HSED) pathways, and other options that might be available. The Contractor may use Department of Education- approved on-line curriculums and reporting to ensure school progress.

1.3.4.9 Physical Health

Children may or may not have received needed health and medical services prior to entry into FGCS/QRTP. In order to follow the Agency's goal of providing for a Child's well-being, the Contractor shall ensure the Child's receives necessary medical services. The Contractor shall:

- a) At intake, gather standard health information, including the Child's last physical exam, primary care physician information, current medications, allergies, and vision and dental information.
- b) During the first 30 days the child is in care, schedule the following exams for each Child:
 - i. A medical exam scheduled within one week if a Child's last appointment was more than one year ago or if the date of the last appointment cannot be determined;
 - ii. A dental appointment scheduled within two weeks if a Child's last appointment was more than six months ago or the date of the last appointment cannot be determined;
 - iii. A vision exam scheduled within the first month if a vision exam is not completed with the physical exam; and
 - iv. If the Contractor is having difficulty attaining required authorizations from a Child's Family for medical, dental, or vision care, the Contractor shall contact the Referring Worker immediately.
- c) Arrange for Children to receive necessary medical and dental care, including providing transportation as necessary.
- d) Include appropriate and sufficient services and supports in the Child's Service Plan to meet the individual needs of a Child, improve the Child's well-being, and achieve desired outcomes.
- e) Arrange for 24-hour emergency medical and dental health care. Establish a plan for registered or licensed nursing staff and other licensed clinical staff availability 24 hours a day, 7 days a week.
- f) Coordinate and transport to appropriate medical care appointments, treatment, and medication management for all Children (if the guardian/custodian is unable to transport).
- g) Communicate emerging and relevant medical issues to the Referring Worker.
- h) Coordinate (or develop and provide) sexual health services that cover safe sex practices, pregnancy prevention, health-related issues, peer pressure, sexually transmitted diseases, and healthy relationships.
- i) Hygiene items must be provided – and must reflect the cultural, racial, and ethnic needs of the youth living in their programs.

1.3.4.10 Mental and Behavioral Health and Clinical Supports

Addressing Children's mental and behavioral health needs is a key component of meeting safety and well-being goals. If a Child has been receiving mental and behavioral health services prior to FGCS/QRTP admission, it is important to ensure continuity of care. Additionally, mental, and behavioral health services may need to continue during Reintegration or Transition. The Contractor shall:

- a) Develop a working relationship with or employ a Clinically trained Staff person to direct the mental and behavioral health components of the Child's Service Plan and work directly with each Child, the Child's Family, and the community.

- b) Coordinate or provide mental, behavioral, and Clinical supports and arrange for required mental and behavioral health appointments, coordinating any necessary consent with the Referring Worker.
- c) Assess and communicate concerns pertaining to mental and behavioral health to the Referring Worker.
- d) Provide relevant medical history to mental and behavioral health providers and ensure new information is shared with the Caseworker and maintained in the Contractor's file for the Child. New information shall also be shared with the Referring Worker.
- e) Follow any treatment instructions developed by the Child's mental and/or behavioral health providers.
- f) Educate Children and parents and/or guardians about any mental or behavioral health treatment instructions developed by the Child's providers including how the Child will be monitored and how medication will be managed.
- g) Be aware of mental health needs and ensure mental health assessments are properly referred to an appropriate practitioner, if needed. This includes gathering information at intake as it relates to medication type and dosage.
- h) Coordinate treatment with a Child's Integrated Health Home, if applicable.
- i) Coordinate at intake with the Referring Worker regarding the need for substance abuse evaluation and coordinate with a substance abuse professional and the Family.
- j) Assure mental health and/or substance abuse evaluations are completed as needed.
- k) If behaviors emerge indicating a need for substance abuse evaluation, coordinate with a substance abuse professional.
- l) Actively engage in medication management, beyond simply ensuring proper administration of medications. Activities shall include, but not be limited to:
 - i. Developing an awareness of effects of medications given to a Child;
 - ii. Identifying and reporting of side effects; and
- m) Incorporate mental and behavioral health needs into a Child's Reintegration Planning and prior to discharge collaborate with the Child's Referral Worker to arrange for a Child to continue to receive mental and behavioral health services in the community.

1.3.4.11 Training

The Contractor shall provide all staff with appropriate and comprehensive training to deliver the services for which the individual is responsible and in a manner that teaches staff to promote the safety, Permanency, and well-being for each Child. The Contractor shall:

- a) Develop a training plan that includes both new staff onboarding training information and ongoing staff annual trainings and submit to the Agency and JCS for review and approval within thirty (30) days after the contract start date.
- b) Incorporate any changes to the training plan requested by the Agency and submit a final training plan to the Agency within 30 days of the Agency's completed review.
- c) Execute, adhere to, and provide training as required by Iowa Administrative Rule 441.114 and accreditation as set forth in the Agency-approved training plan.
- d) Resubmit updated training plans to the Agency whenever changes are made.
- e) Provide the training described in the training plan for all Contractor or subcontractor staff.
- f) Provide information in the training and training plan regarding Children and Family's identified needs, including but not limited to:
 - i. The Guiding Principles, Family-Centered Model of Practice, JCS's Model of Practice, and Child Welfare Model of Practice;
 - ii. Crisis Interventions and Stabilizations including Trauma-Informed Care, de-escalation techniques, and policies and procedures regarding Critical Incidents;
 - iii. Mandt or comparable training for appropriate physical restraints to ensure safety;
 - iv. Mental and Behavioral Health support, as appropriate to the staff person's role;
 - v. Culturally and Linguistically Appropriate Service Standards (CLASS);

- vi. Domestic Violence prevention and support;
 - vii. Human trafficking identification, intervention, and prevention; and
 - viii. Transition Planning, including the Life Skills Assessment tool.
- g) In addition, if a Contractor has contracted beds for NACC treatment approved by the Agency and designated in Attachment A, enhanced training shall be detailed in the training plan for staff providing NACC treatment. Contractor shall utilize the AIM (Accept-Identify-Move) curriculum or other Agency approved treatment curriculum for NACC treatment.
 - h) In addition, if a Contractor has contracted beds for Problematic Sexualized Behavior Treatment approved by the Agency and designated in Attachment A, training shall be detailed in the training plan for staff providing PSB treatment. Contractor shall utilize Agency approved treatment curriculum for PSB treatment.
 - i) In addition, if a Contractor has contracted beds for Specialized Delinquency Program approved by the Agency in collaboration with JCS and designated in Attachment A, enhanced training shall be detailed in the training plan for staff providing Specialized Delinquency Program. Contractor will work in collaboration with JCS to identify and prioritize the curriculum and training resources identified in the training (narrative (See attachment H) with items A–E given priority). Required training will be completed by the time frames indicated in the training
 - j) Provide information in the training and training plan regarding JCS identified needs outlined in Attachment H (Specialized Delinquency Beds Training Narrative).

1.3.4.12 Contractor Reports and Data

The Contractor shall provide the Agency and JCS with data, reports, and information to determine areas of strength and areas to improve in all aspects of FGCS/QRTP. Reports and data shall not only include directly quantifiable data, but will also include active, meaningful reporting regarding the quality of services provided to Children receiving FGCS/QRTP. Reports shall also continually and proactively inform and improve FGCS/QRTP delivery. See “Annual Innovation and Improvement Report: 470-5654 under “Documents for Group Care” for an example of this documentation:

<https://dhs.iowa.gov/child-welfare-systems/implementation-information>

At all times, reports and data shall be used to ensure FGCS/QRTP are following the JCS’s Model of Practice and the Agency’s Model of Practice as well as consistently improving and innovating the provision of service.

Reports shall be provided electronically to the Service Contract Specialist and the Contract Manager. The Contractor shall use their established internal Quality Assurance and improvement system for preparing, submitting, and validating their data and reports to the Agency.

The format and timing for all reports shall be contingent upon Agency approval. Contractor shall provide all applicable data and reports in an Agency approved format, either by inputting into an electronic database, via other electronic means, or through written reports. The Agency will provide FGCS/QRTP Contractors standardized report templates prior to the implementation of Contracts.

1.3.4.12.1 Critical Incident Reporting

The Contractor shall utilize the Agency’s online reporting system to report all Critical Incidents within twenty-four (24) hours of occurrence. This does not replace the need for immediate notification to the Referral Worker, the Child’s parents or guardian, or others of incidents, circumstances, or events as described elsewhere in this Contract.

The use of restraint and control room shall be reported to the Referring Worker and parents or guardian within twenty-four (24) hours of occurrence.

The contractor shall follow its operating procedures regarding elopements and they shall be reported to the Referring Worker and parents or guardian immediately after an elopement is confirmed.

1.3.4.12.2 CareMatch or other Agency-approved system

The Contractor shall utilize the CareMatch or other Agency-approved system and make all entries as required to provide daily census information to the Agency and JCS. The Contractor shall:

- a) Follow all CareMatch system instructions including the timeframes contained therein for submitting required information.
- b) Use the CareMatch system as determined by the Agency and Juvenile Court Services to capture in real time a roster of Children in care, by name, date of birth, and other data required in the CareMatch system.

1.3.4.12.3 Review Meetings

The Contractor shall participate in review meetings at the Agency's / Juvenile Court Service's request and held at Agency/JCS determined times and methods of meeting. Methods may include face to face or video conferencing. These meetings shall focus on, but not be limited to the Contractor's qualitative delivery of FGCS/QRTP; a discussion of services, trends, collective outcomes, challenges, and successes; and milestones and Contract Deliverables. These meetings may also include issues and examples discussed by Service Area leadership teams and in local quality improvement meetings.

1.3.4.12.4 Annual Innovation and Improvement Report

The Contractor shall report in an Agency approved format on work done to advance innovative ideas and achieve improvements throughout FGCS/QRTP, including separation/individualized programming for CINA and Delinquent populations, along with specialized programming (NACC, PSB and SDP). These reports shall identify strengths, successes and challenges and highlight work done by the Contractor to move toward the Agency's future goals and improve the child welfare system of care.

1.3.4.12.5 Annual Staffing Report

The Contractor shall provide an annual staffing report in an Agency approved format at the end of the State fiscal year that includes at the minimum the following information:

- a) Organizational structure;
- b) Staffing ratios;
- c) Staff turnover;
- d) Full-time equivalents;
- e) Salaries and benefits; and,
- f) Other items as determined by the Agency after joint conversations with the Contractor.

1.3.4.13 Financial Management

The Contractor shall adhere to the following guidelines regarding their financial responsibilities ~~as a provider:~~

- a) Maintain accurate, current, and complete records of financial activity that sufficiently and properly document and calculate all charges billed to the Agency.
- b) Not charge the Agency more than the Contractor receives for the same services provided to non-Agency entities.
- c) All Contractor Invoices shall document financial information in an Agency-approved manner so that the Agency obtains information necessary to report such costs to federal programs.
- d) Complete and submit a Uniform Combined Cost Report to the Service Contract Specialist within ninety (90) days after the end of the Contractor's fiscal year. The Contractor shall conduct and submit a quarterly time study as part of the Uniform Combined Cost Report. Congregate care

providers must complete the time studies on one school day and one non-school day each quarter of the fiscal year. Non-congregate care providers can opt to complete the time studies on two (2) weekdays each quarter of the fiscal year.

1.3.4.14 Staffing

The Contractor shall meet all staff qualifications as defined in Iowa Administrative Code chapter 114. In addition, the Contractor shall meet the following criteria and requirements related to staffing:

- a) Employ staff that have a strong desire to participate in the program, support, encourage and help Children, and meet Agency goals.
- b) Train staff in, and reinforce at all times, The Guiding Principles, Family-Centered Model of Practice, Family First Prevention Services Act, JCS's Model of Practice, EPICS-I and Child Welfare Model of Practice;
- c) Take all steps necessary to ensure implementation of the One Caseworker Model.
- d) Ensure each staff member serving the Caseworker role shall serve no more than sixteen (16) Children at one time and shall have limited other duties.
- e) Have staff fully dedicated to the contract, including full time supervisors, Caseworkers, and other staff as needed.
- f) Implement policies to encourage staff retention.
- g) Train staff to develop Cultural Competency skills.
- h) Provide Clinical supervisory support.

1.3.4.14.1 Program Director

The Contractor shall maintain a Program Director dedicated to the administration of this Contract, including problem solving, resolving staff issues, and all other Agency required and requested concerns. The Program Director shall be the point of contact for the Agency as related to items pertaining to contracted duties and daily operations.

1.3.4.14.2 Caseworker Supervisors

The Contractor shall employ Caseworker Supervisors who oversee the work of Caseworkers and Trainers. The Casework Supervisor shall have either a master's degree in social work with one year of supervised experience after the master's degree or a master's degree in psychology or counseling with two years of experience beyond the master's degree, one of which was under supervision. Per Iowa Administrative Rules 441.114.8 (237).

1.3.4.14.3 Caseworkers

The Contractor shall employ Caseworkers to become the one Caseworker for Children and their families, acting as the single point of contact for FGCS/QRTP services for their assigned Children.

- a) Per 441 Iowa Admin Code §114.8(1), Caseworkers shall have a Bachelor of Arts or Bachelor of Science in social work, psychology, or a related behavioral science plus two years of supervised experience; or a bachelor's degree in social work with one year of supervised experience; or six years of supervised child welfare experiences in residential care or a combination of advanced education in the behavioral sciences and experience equal to six years.

1.3.4.14.4 Education Specialist

When a Child is in FGCS/QRTP, the Contractor shall provide and thoroughly train a staff person, who may also be employed as a Caseworker or Supervisor, to act as an Education Specialist responsible for coordinating, facilitating, and reporting on educational needs with a Child's Caseworker, Area Education Agencies, and Local Education Agencies to support education activities including but not limited to:

- a) School records;
- b) Special education and other education or school behavior plans, including Individualized Education Programs (IEPs), as applicable;
- c) Transportation to and from school;
- d) Acquisition of school supplies for Children;
- e) Retention in Children's school of origin unless not in best interest of a Child;
- f) Arrangement of relevant academic testing;
- g) College, technical college, military, and career planning;
- h) Completion of high school diploma or High-School Equivalency; and
- i) Completion of transcripts and needed core classes.
- j) Post High School planning including but not limited to: Trade school, apprenticeship, military.

The Education Specialist will report on the above (a) through (j) in the service plan or service plan updates.

1.3.4.15 Pricing and Payment Methodology. In accordance with the payment terms outlined in this section and the Contractor's completion of the Scope of Work as set forth in this Contract, the Contractor will be compensated as follows:

Contractors will be contracted for a specified number of Guaranteed Payment Beds determined by the Agency. For these Guaranteed Payment Beds the Contractor will receive guaranteed payments per bed as described in this section. A Contractor may also offer additional, non-contracted beds up to the number for which the Contractor is licensed. A Non-Guaranteed Payment Bed or additional bed shall only be used when the Guaranteed Payment Beds are fully occupied and with prior approval from a Service Area Manager (SAM) or SAM's designee and only until the next Guaranteed Payment Bed vacancy occurs.

Payments for QRTP/FGCS Guaranteed Beds will be made on per diem fixed rates determined by the Agency. The fixed rates will be paid based on the total number of Guaranteed Beds under Contract.

The per diem fixed rates for Guaranteed Payment Beds are as follows:

D9 (QRTP)-Filled Bed Rate: \$267.00/day, Unfilled Bed Rate: \$200.00/day

D950-(SJDP)-\$300.00/day

D8 -(NACC)-\$287.00/day

Contractors shall submit monthly Invoices reflecting actual utilization of FGCS beds, and the Agency will pay the Contractor for this use. Payments will not be made for the day a Child is discharged from a bed. Movement of a Child from a Non-Guaranteed Payment Bed or additional bed to a Guaranteed Payment Bed is not considered a discharge.

Payment for the Guaranteed Payment Beds included in the Contract will be reconciled by the Agency at the end of each payment quarter. The payment will be calculated using the following formula: The number of days in the payment quarter X the number of Guaranteed Payment Beds (D9, D950, or D8). The products of the calculation for each level of payment (D9, D950, or D8) will equal the number of Guaranteed Payment Beds for the quarter. The payment quarters are July–September, October–December, January–March, and April–June.

At the end of each payment quarter, if the total actual utilization paid or Invoiced is less than the total number of Guaranteed Payment Beds per payment quarter, the Contractor shall submit an approved, completed Invoice to the Service Contract Specialist for payment of the unused Guaranteed Payment Beds. If the total actual utilization paid or Invoiced is equal to or more than the total number of Guaranteed Payment Beds per payment quarter, the guaranteed payment will have been met or exceeded

and no additional payment will be made since there were no unused Guaranteed Payment Beds for that payment quarter. The Service Contract Specialist will verify the totals submitted and approve final payment. Unused Guaranteed Payment Beds will be paid at the per diem rate as set forth by the Agency.

Payment will be contingent on the Agency's timely receipt of service reports detailing expenses, services provided, and the number of Children served.

Performance measure incentive payments will be made quarterly following the payment schedule for each performance measure when the Agency's review of the applicable reports and documentation show compliance with the performance measures that are described in Section 1.3.4.15

All Contractor Invoices shall document financial information in an Agency-approved manner so that the Agency obtains information necessary to report such costs to federal programs.

The Agency is placing a cap on the amount of funds that may be spent for Administrative Costs in any contract(s) resulting from this RFP. Spending on Administrative Costs under each contract, for both the Contractor and all their subcontractors, cannot exceed 15% of the total contract amount.

At Agency discretion, an annual rate increase may be implemented to reflect the Consumer Price Index.

1.3.4.15 FGCS/QRTP Performance Measures

Performance measures and targets are included as a part of this Contract and used to assess performance by the Contractor. The performance measures are designed to help further align Contractor incentives with better outcomes for Children. By meeting or exceeding the performance measures, the Contractor will show their commitment to improving FGCS/QRTP services and outcomes.

The performance measures and targets included are the performance expectations and shall be measured and earned by Contract. Up to an additional 5% of the Contractor's total invoiced amount for a given measurement quarter may be earned as a performance incentive payment for meeting or exceeding performance measures in this Contract.

Contractors shall submit Invoices for performance incentive payments after review and approval by the Agency Service Contract Specialist.

The following performance measures determine eligibility for performance incentive payments. Note that the Gold and Silver Standards are mutually exclusive and both Gold and Silver Standards cannot be earned for the same performance measure during the same measurement period. Performance measures shall be measured and earned by Contract.

Performance Measure 1 – Return to Group Care for CINA Youth

In alignment with the Agency's Permanency goals, the Contractor shall work to help a Child return home or to a lower level of care. The best outcomes for most Children will include a future where they do not return to FGCS/QRTP after discharge. Accordingly, discharge from and return to FGCS/QRTP will be monitored, and the Contractor may earn additional payment based on low levels of return to FGCS/QRTP among CINA Youth. The Agency will be responsible for determining who is re-admitted to FGCS/QRTP.

Gold Standard (payment of an additional 2.5% of the measurement quarter's invoiced amount) – Greater than or equal to 93% of CINA Children discharged from FGCS/QRTP in the measurement quarter will not return to FGCS within 365 days. Silver Standard (payment of an additional 1.5% of the measurement quarter's invoiced amount) –

Greater than or equal to 90% but less than 93% of CINA Children discharged from FGCS/QRTP in the measurement quarter will not return to FGCS within 365 days.

Performance Measure 2 – Recidivism of Children Adjudicated for Delinquent Acts (SJDP)

In alignment with JCS’s Model of Practice, the Contractor shall help a Youth develop the skills necessary to reduce recidivism (any misdemeanor or felony level offense filed in/referred to Juvenile Court, the adult corrections system, or both, within a twelve-month period after date of discharge from service). Accordingly, recidivism in Children who have been referred to and placed in a bed designated for Specialized Delinquency Program (SJDP) will be monitored, and Contractor may earn additional payment based upon low levels of recidivism.

Gold Standard (payment of an additional 2.5% of the measurement quarter's invoiced amount)- Greater than or equal to 60% of youth discharging from SJDP treatment shall not recidivate within a twelve-month period after date of discharge from service.

Silver Standard (payment of an additional 1.5% of the measurement quarter's invoiced amount) -Greater than or equal to 45% but less than 60% of youth discharging from SJDP treatment shall not recidivate within a twelve-month period after date of discharge from service.

Performance Measure 3 – Discharge to a Family-Like Setting

In alignment with the Agency’s Permanency goals and Family-Centered Model of Practice, the Contractor shall help a Child develop the skills necessary to return to Family or a Family-Like Setting. Accordingly, discharge from FGCS will be monitored, and Contractor may earn additional payment based upon discharge metrics.

Gold Standard (payment of an additional 2.5% of the measurement quarter's invoiced amount) – Greater than or equal to 75% of Children discharged from FGCS in the measurement quarter will be discharged to Family or a Family-Like Setting. For Children who have been referred to and placed in a bed designated in Attachment A for NACC, greater than or equal to 65% of Children discharged from FGCS in the measurement quarter will be discharged to Family or a Family-Like Setting.

Silver Standard (payment of an additional 1.5% of the measurement quarter's invoiced amount) – Greater than or equal to 65% but less than 75% of Children discharged from FGCS in the measurement quarter will be discharged to Family or a Family-Like Setting. For Children who have been referred to and placed in a bed designated in Attachment A for NACC, greater than or equal to 55% but less than 65% of Children discharged from FGCS in the measurement quarter will be discharged to Family or a Family-Like Setting.

Performance Measure 4-Recidivism of Children Adjudicated for Delinquent Acts (General JCS youth)

In alignment with JCS’s Model of Practice, the Contractor shall help a Youth develop the skills necessary to reduce recidivism (any misdemeanor or felony level offense filed in/referred to Juvenile Court, the adult corrections system, or both, within a twelve-month period after date of discharge from service). Accordingly, recidivism in JCS Children will be monitored, and Contractor may earn additional payment based upon low levels of recidivism.

Gold Standard (payment of an additional 2.5% of the measurement quarter's invoiced amount)- Greater than or equal to 50% of youth discharging from FGCS/QRTP shall not recidivate within a twelve-month period after date of discharge from service.

Silver Standard (payment of an additional 1.5% of the measurement quarter's invoiced amount) -Greater than or equal to 35% but less than 50% of youth discharging from FGCS/QRTP shall not recidivate within a twelve-month period after date of discharge from service.

1.3.5 Supervised Apartment Living Scope of Work

The Contractor shall provide Supervised Apartment Living (SAL) services as follows.

1.3.5.1 SAL Overview

SAL Foster Care is the least restrictive Placement in the Child welfare service array. SAL is designed for Children who have the capacity and desire to live relatively independently in a community with less supervision than is provided in a family Foster Care or FGCS setting and who are presently unable to live with Family. SAL offers a community-based living environment with the benefit of a degree of direct supervision, 24-hour support, and Life Skills Training.

SAL Foster Care is provided using evidence informed practices, including a framework of Positive Youth Development (Attachment W). The result is client driven, individualized services for youth that ensure that basic needs—physical and psychological health, food and shelter, safety, and other needs—are met, both in the short term, then when the youth leaves the program, they are connected to resources and have the confidence to make decisions, achieve their dreams, and get help when they need it. The SAL provider using the Youth Development Framework will:

- a) Create a safe environment for youth, both physically and emotionally
- b) Treat youth with respect and involve them in decision making around service delivery
- c) Involve youth in programmatic decision making and offer other leadership opportunities
- d) Establish and maintain clear, developmentally appropriate boundaries and guidance
- e) Engage youth in community life and ensure they have opportunities to make real contributions (volunteering, jobs, arts, culture)
- f) Ensure opportunities for youth to develop positive, supportive relationships with adults and peers
- g) Encourage and support youth to build new skills
- h) Develop and test new knowledge and practical skills
- i) Offer awards or honors so youth experience success
- j) Help youth overcome mistakes
- k) Facilitate supportive youth-adult relationships and partnerships

The Contractor shall utilize real life learning opportunities within the structured SAL community in order to help the Child develop life skills needed for successful Transition to adulthood. Children in the SAL program are expected to learn new skills, practice them in the program, and demonstrate competency. Examples include:

- a) Attend school and/or work,
- b) Prepare their own budgets,
- c) pay their own bills,
- d) shop for their own food,
- e) prepare their own meals
- f) do their own laundry and cleaning,
- g) Use public transportation, and
- h) Interact in social and community groups.

The goal of SAL is for a Child to move to Self-Sufficiency while developing interdependence with their community and the systems that supports the Child's completion of education, development of life skills, and preparation to move into adulthood. SAL Contractors shall guide the Child to develop skills and abilities to address responsibilities for day-to-day tasks and monitor whether this guidance has been effective or if additional needs exist. These goals are reflected in the SAL Performance Measures.

A successful SAL program ensures staff are trained to understand the developmental needs of transitioning youth. Additionally, staff training in Positive Youth Development is expected to instill confidence in the staff to assist this population. Finally, staff training in Motivational Interviewing (Attachment X) is expected for any staff working directly with SAL youth. Motivational Interviewing (MI) is an evidence-based counseling method that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that takes into consideration how difficult it is to make life changes.

SAL Contractors shall promote a Child's participation in Aftercare services once the Child has exited SAL services.

SAL Contractors shall monitor whether services and interventions have been effective or if additional needs exist. If additional needs exist, SAL Contractors shall adjust programming for that youth to help the Child achieve positive outcomes and ensure a healthy transition to adulthood, including connecting that youth with services and supports they will need when they exit the program. SAL Contractors shall promote a Child's participation in Aftercare services once the Child has exited SAL services, if applicable.

The Bidder may select to provide one or both categories of SAL settings, with preference given to Bidders who offer both categories. These two categories of settings are:

- SAL cluster sites that allow a maximum of six Children to be placed in the same building (such as apartments located in one building or private housing). Contractor staff must be on-site and available to the Children at any time more than one Child is present. A Contractor may split a cluster site into more than one facility, as long as those facilities collectively provide the total number of cluster beds listed in Attachment A. Gender specific cluster sites are not permissible. The Contractor shall meet the following requirements for SAL cluster settings:
 - a) Ensure staff is on-site, present, and available to Children at any time when more than one Child is present in this type of setting. A SAL cluster setting is defined as having a maximum of up to six (6) Children supervised by the Contractor who are placed in the same building. The Contractor must provide the number of cluster beds listed in Attachment A in each cluster site(s) within the contracted Service Area. The Contractor may split a cluster site into more than one (1) facility as long as those facilities collectively contain the number of beds listed in Attachment A.
 - b) Serve both male and female Youth in all cluster sites in accordance with the needs of the Service Area.
 - c) Utilize real life learning opportunities within the structured community in order to help the youth develop life skills needed for successful Transition to adulthood.
 - d) Within one (1) hour, accept all referrals that are made when there is a vacancy in the program and arrange with the Referral Worker to have the Child placed within 48 hours. Contractors shall accept referrals and provide contracted services on a No Reject, No Eject basis.
- SAL scattered sites (e.g., an individual Youth's apartment unit) must provide access to SAL Contractor staff 24 hours a day, seven days a week. The Contractor shall have the capability to serve the number of Children in scattered sites as listed in Attachment A on an as needed basis. The Contractor shall meet the following requirements for SAL scattered-site settings:
 - a) Scattered sites shall be in the same Service Area, or within two contiguous Iowa counties as the contracted cluster site.
 - b) Assist the Child to locate a living arrangement that meets the requirements of the SAL program.

- c) Participate with the Referring Worker, the Child, and the Child's Positive Support System in making a team decision when it is appropriate or necessary to move a Child from a SAL cluster setting to an SAL scattered-site setting and vice versa.
- d) Partner in their services and offers a host of activities to help the Child build confidence, skills, and be prepared.

1.3.5.2 Program Administration

The Contractor shall provide services for each Child served in the SAL Foster Care program to meet the specific needs of the Child as follows:

1.3.5.2.1 Regulations and Policies

In providing SAL services, the Contractor shall meet the requirements of all applicable State and federal laws and regulations. Additional development of policies by the Contractor may be required. The Contractors shall:

- a) Meet the licensure and regulation requirements in 441 Iowa Admin. Code Ch. 108 and all applicable State and federal laws and regulations as well as all applicable certification, or approval statuses. Bidders shall indicate where they are in the process and verification must be provided to the Agency prior to contract execution.
- b) Develop and use written policies approved by the Agency for:
 - i. Handling client appeals and grievances;
 - ii. Reporting abuse and denial of critical care of Children;
 - iii. Confidentiality; and
 - iv. Staff training.
- c) Develop and implement written plans for the Contractor's response to disasters and other emergencies that are consistent with State, federal, and local guidelines.
- d) Develop an internal continuous Quality Assurance process using data analysis, process and practice modification, supervision, and other methods to ensure the quality of services provided.
- e) Collaborate with the Agency to review and make recommendations regarding implementation of Evidence-Based Practices, beginning in the first year of the Contract or at the point-in-time specified by the Agency.
- f) Participate in the Agency's annual child welfare services Contractors' meeting if one is held.
- g) Utilize encrypted email for any electronic communication regarding a Child and/or a Child's family.
- h) Accept referrals and provide contracted services on a No Reject, No Eject basis.

1.3.5.2.2 Delivery of SAL services

Throughout the delivery of SAL services, the Contractor shall support each Child's development of necessary skills, tools, and abilities to attain Self-Sufficiency while ensuring the safety, Permanency, and well-being of the Child. The Contractor shall:

- a) Collaborate with the Agency to explore and select safe settings, where the Child is able to experience relative independence, learn life skills, and help put the Child on a successful path to adulthood.
- b) Visit each Child's SAL Placement prior to the Child moving in and on a twice per week minimum basis to confirm there is no reasonable cause for believing that the Child's mode of living or living situation presents unacceptable risks to the Child's health or safety and that the living arrangement has been approved by the Referring Worker and meets the following minimum standards:
 - i. Complies with applicable State and local zoning, fire, sanitary, and safety regulations;

- ii. Provides reasonably convenient access to schools, places of employment, community resources, and services and supports required by the Child; and
 - iii. Is reasonably priced to fit within the Child's budget.
- c) Provide ongoing supervision of the Child including, but not limited to:
- i. Guidance, oversight, and behavior monitoring to ensure that the Child's living arrangement is maintained in a safe condition.
 - ii. Ensuring the following:
 - 1) The Child has immediate access to their living arrangement 24/7;
 - 2) The Child can access SAL staff in the event of an emergency 24/7;
 - 3) The Child has access to a functioning telephone;
 - 4) There is an operating smoke alarm on each level of occupancy;
 - 5) The Child receives necessary health care;
 - 6) The Child receives appropriate and sufficient services and supports that meet individual needs; and
 - 7) The Child is complying with Service Plan requirements.
- d) Implement Cultural Equity Alliance Guiding Principles as adopted by the Agency (Attachment I). Each Child engaged in care shall be provided services that address any special language needs, reinforce positive cultural practices, and acknowledge and build upon ethnic, socio-cultural, and linguistic strengths.
- e) Provide for the Child's participation in other necessary programs and services to ensure the Child's overall needs are met. Such programs or services include, but are not limited to, the following:
- i. Various medical services;
 - ii. Outpatient mental health or substance abuse treatment;
 - iii. Behavioral Health Intervention Services (BHIS);
 - iv. Educational or vocational services;
 - v. Other community-based services; and
 - vi. Food assistance, if applicable.
- f) Utilize the Agency's Treatment Outcome Package (TOP). Follow all Agency TOP instructions including adherence to the timeframes contained therein.
- g) Design SAL programs with varying levels of structure that can be applied as a Child's need for supervision changes (for example, demonstrated by a Child's increased level of responsibility and Self-Sufficiency). The programming design as well as the setting, to the extent feasible, should change as a result, focusing on the Child acquiring and building life skills that allow the Child better access to the community.

1.3.5.2.3 Budgeting

Assist each Child to develop a budget based upon Child's monthly SAL Stipend from the Agency and other income. The Contractor shall:

- a) Assist the Child to open a savings account in the Child's name that is only accessible with a signature from both the Child and the Contractor's staff designee.
- b) Assign a staff member to hold the duties and obligations of a fiduciary to the Child, including ensuring the Contractor and staff member receive no financial benefit from the Child's finances.
- c) If needed, receive the monthly SAL Stipend on the Child's behalf.
- d) Develop a budget with the Child using the budget format and instructions provided by the Agency. In cluster, as a part of the Child's budget plan, the Contractor shall specifically outline how no more than 30% of the Child's monthly stipend is being used by the Contractor for rent and/or living expenses. In scattered, if the Contractor owns the scattered site, no more than 30% of the Child's monthly stipend may go to the Contractor for rent and/or living expenses. If the Contractor does not own the scattered site facility,

the Contractor shall not use any of the Child's SAL Stipend. For both cluster and scattered sites, the Agency maintains the right to reject any expenditure that the Agency does not consider rent and/or living expenses.

- e) Assure each Child has access to their SAL Stipend and, if needed, their SAL Start-Up Allowance, for the Child's personal use.
- f) Provide assistance to the Child to help make monthly deposits into the Child's savings account. The amount to be deposited will be specified in Child's budget.
- g) Reconcile and update the budget monthly with each Child.
- h) Maintain monthly documentation regarding the Child's budget and make the documentation available to the Agency and Referral Worker upon request. Maintain a detailed record of all financial transactions including all deposits and withdrawals.
- i) Assist the Child to gain full access to the Child's savings account when the Child exits SAL.

1.3.5.2.4 Service Documentation and Individual Service Plan / Quarterly Progress Report / Discharge Summary

Contractors shall maintain a system of individual service documentation and files/records for each Child referred and maintain these notes and files/records in an organized and confidential fashion. See link to current Documents for SAL at:

<https://dhs.iowa.gov/child-welfare-systems/implementation-information>

Specifically, the Contractor shall:

- a) Develop an individualized Service Plan that is based on each Child's unique needs and contains goals and objectives with projected dates of accomplishment. Specifically, the Contractor shall:
 - i. Develop a Service Plan utilizing the Agency's approved Service Plan form for each Child in the timeframe required by Agency. This Service Plan shall include references to the Positive Youth Development and Motivational Interviewing framework utilized with the youth.
 - ii. Complete a Service Planning Conference for each Child within five (5) Business Days of a Child's admission and utilize the information gathered at this conference to develop the individualized Service Plan.
 - iii. Make sure the Caseworker is an active participant in the development and directing of the Service Plan.
 - iv. Develop the Service Plan, that is youth centered with input from the Child, the Referring Worker, the Child's Family, and the Child's permanency team, unless a reason for noninvolvement is documented in the case record.
 - v. Include in the Service Plan information from other plans that affect the Child's care including but not limited to other child welfare services, Juvenile justice involvement, or Behavioral Health and Intervention Services (BHIS).
 - vi. Submit the completed Service Plan to the Referring Worker in the timeframe required by the Agency (within fifteen (15) Business Days of the date of admission).
 - vii. Provide a copy of the completed Service Plan to the Child and the Child's parents or guardians, in the timeframe required by the Agency (within fifteen (15) Business Days of the date of admission).
 - x. Complete a monthly Service Planning Follow-Up Conference for each Child and utilize the information gathered at this conference to update the individualized Service Plan.
- b) Complete a quarterly progress report for each Child using the Agency's approved quarterly progress report form and send to the Referring Worker in the timeframe

- required by Agency (ninety (90) days following the date of admission, and every ninety (90) days thereafter throughout the episode of service).
- c) Complete a discharge summary utilizing the Agency's approved discharge summary report form for each Child in the timeframe required by Agency (within ten (10) Business Days of the Child's discharge date).
 - d) Make sure supporting documentation for services billing purposes and service provision pursuant to 441 Iowa Admin. Code ch. §108.10(238); 441 Iowa Admin. Code ch. §202.9(238) and according to SAL Required Services supports the provision of child welfare services. Documentation shall be done, at a minimum, on a weekly basis and include, but not be limited to, the following detail:
 - i. Date(s) of each face-to-face and other contact with the Child;
 - ii. A summary of each contact including service provision provided and the Child's reaction to service provision
 - iii. A description of ongoing supervision of the Child (including but not limited to guidance, oversight, and behavior monitoring) and the Child's reaction to supervision;
 - iv. The Contractor's response in addressing the Child's needs including expectations, assignment, or activities to be accomplished by the next contact.
 - v. A summary of the Child's involvement in services and activities to achieve self-sufficiency; and,
 - vi. Observation of the Child's Supervised Apartment Living situation to ensure there is no reasonable cause for believing that the Child's mode of living or living situation presents unacceptable risks to the Child's health or safety.

1.3.5.3 One Caseworker Model

The Contractor shall provide one Caseworker for each Child and Child's Positive Support System while the Child is in SAL. This person shall be the day-to-day liaison for the Child and the Child's Family to seek answers to questions and express concerns. The person assigned to each Child and Child's Family shall be the chief point of contact for the Referring Worker. Other individuals delivering services will interact with the Child and Family; however, the Contractor shall ensure these services are coordinated through the Child's Caseworker. Each Child's Caseworker shall help identify life skill needs and help the Child to receive the necessary training to gain identified life skills. The Caseworker is the key person in the coordination of service to assist the Child in gaining Self-Sufficiency and preparing for adulthood. Any major information, ranging from transfer of service to Clinical results, shall be communicated to the Child and Family through the Caseworker. The Caseworker shall be assigned before and be present at the Service Planning Conference. The name and contact information for this individual shall be documented in the Child's Service Plan and provided to the Referring Worker.

1.3.5.4 Individual Child Development and Life Skills

The Contractor shall provide services to assist Child development and life skills learning. SAL Foster Care is provided using evidence informed practices, including a framework of Positive Youth Development. The result is client driven, individualized services for youth that ensure that basic needs—physical and psychological health, food and shelter, safety, and other needs—are met.

- a) When a Child enters SAL services, the Contractor shall review the life skills section of the Child's Case Permanency Plan if it is available and the Agency's Pre-Placement Screening for SAL Foster Care form for each Child referred to the program to determine how the Contractor's program can best meet the needs of the Child. The Contractor shall:
- b) Obtain the results of the latest Casey Life Skills Assessment (CLSA), if one has been completed within the previous sixty (60) days. If the Contractor is unable to obtain a copy, utilize the Agency approved standard Casey Life Skills Assessment within 30 days of placement with every Child to determine the Child's needs and basis for service approach. The CLSA may be used to

- measure a Child's strengths and needs regarding development of life skills necessary for successful Reintegration and transition to adulthood. Other assessments (e.g., those titled Caregiver, Parenting, GLBT, Younger Youth, etc.) are available but not required to be completed.
- c) The Contractor shall reassess the Child using the CLSA within thirty (30) days of the Child's 14th, 16th, and 18th birthdays and prior to a planned discharge or hand-off to another Contractor. The results of the Casey Life Skills Assessment shall be logged uniformly, as specified by the Agency, and shall be sent to the Child's Referring Worker within ten (10) days of completion. The results of the Casey Life Skills Assessment shall be provided to the Child. The Contractor shall follow any instructions in the data entry portal related to the completion of the CLSA.
 - d) Provide the results of all CLSA to the Child and to the Referring Worker within ten (10) days of completion.
 - e) Reassess each Child using the CLSA within thirty (30) days prior to a planned exit from the program and prior to hand-off to another Contractor.
 - f) Facilitate a Youth Transition Decision Making (YTDM) meeting or Youth Centered Planning Meeting (YCP) with youth at intervals as driven by the individual youth's needs, but not limited to once on or after the youth's 16th birthday and a follow up meeting within 90 days prior to the youth's 18th birthday.
 - g) Engage each Child, the Child's Family members, and the Child's Positive Support System to assist in developing goals and action steps for acquiring and building upon life skills based on formal and informal assessment results.
 - h) Facilitate the completion of assessments and individual plans, working with the Referring Worker, and facilitating the Child's connections with their Positive Support System.
 - i) Offer each child the opportunity to learn and practice leadership skills.
 - j) Explain house rules with each Child, including identification of natural and programmatic consequences.
 - k) Offer the opportunity for adult mentors for every Child, increasing the Child's informal support system when possible. This may include identifying mentors in the Child's relative and kin group.
 - l) Involve each youth in real life skills lessons on campus and in the community (when applicable).
 - m) Honor youth with awards or other recognition to help them experience success. Provide opportunities for them to recognize others, in the program and in the community.
 - n) Ensure Children are active participants in identifying other skills, plans, and community connections not captured in the Casey Life Skills Assessment.
 - o) Support the creation of a Child-driven, effective life skills component of the Service Plan to help each Child develop skills identified through assessment.
 - p) Utilize a Life Skills Training curriculum, per the guidance provided by the Agency, for each Child served and demonstrate effective practices used in their administration of the Child's plan. The Agency shall reserve the right to approve the curriculum provided by the Contractor.
 - q) Continually assist the Child in achieving life skills including, but not limited to, budgeting, job searching and interviews, completion of a rental agreement, chores and household duties, and educational or employment planning. This work also includes facilitating a Child's access to important documents such as a Social Security card, birth certificate, and driver's license or permit, as appropriate.

1.3.5.5 Family and Community Connections

The Contractor shall assist the Child in developing and maintaining relationships with the Child's Family and community. Throughout the provision of care, the Contractor shall actively ensure that the Child stays connected to the Child's kin, culture, spirituality and community as documented in the Child's Case Permanency Plan/Juvenile Court Services Plan. Community connections are essential to the Child's success while living in a SAL setting and as the Child moves towards Self-Sufficiency and adulthood. For each Child in care longer than one month, Contractors shall report Child and Family connections no less than at the end of each calendar month the Child is in care using the Agency's online reporting system. The Contractor shall:

- a) Follow the Standards of Family Interaction (see Attachment K) when a Child has a Family Interaction Plan and coordinate the Child's Family Interaction plan with the Service Plan.
- b) Ensure the Family and Community Connection section of each Child's initial Service Plan includes a comprehensive plan for Family and Community Connections that is unique and suited to each Child's needs. Each subsequent Service Plan and Progress Report shall report on the outcomes of this plan.
- c) The Family and Community Connection plan shall include, but not be limited to:
 - i. Identification of the persons (e.g., parents, guardian, other family members, and others in the Child's Positive Support System) with whom the Child will maintain contact during care.
 - ii. The methods the Contractor will use to facilitate meaningful contact (e.g., how face-to-face visits can be achieved, access to phones, use of internet video, or comparable means).
 - iii. The frequency of contacts that will occur with each of the person's identified.
- d) During development of the plan, visitation limitations imposed by JCS, a Court order, the Agency, or the distance between the Child's SAL placement and the location of the Child's parents or other, shall be considered.
- e) If a Child's sibling(s) is also in a child welfare or juvenile justice placement, the Contractor shall work with the sibling's Placement to facilitate contacts.
- f) Ensure Child engagement within the community on a regular basis including, but not limited to, school attendance, employment (if appropriate), and participation in Organized Community Activities
- g) Participate in Solution Focused Meetings or Youth Centered Planning Meetings (YCPM) when invited.
- h) Support each Child's engagement with the Child's Positive Support System and assist the Child to maintain or secure connections with the Child's Family members and/or other persons important in the Child's life. If the Child lacks a Positive Support System, the Contractor shall work with the Child and Referring Worker to create a Positive Support System by various means, including review of persons that could be or are engaged in the Child's life.
- i) Assist the Child with Family Finding Efforts and assist the Child in identifying and locating Family members and/or other Positive Support Persons with whom the Child may live.
- j) Assist the Child with identifying other positive informal supports. Document in Agency approved format (Discovering Connections Tool, Attachment Z). For each Child in care longer than one month, Contractors shall report positive informal supports no less than at the end of each calendar month the Child is in care using the Agency's online reporting system.

1.3.5.6 Crisis Intervention and Stabilization

Contractors shall have a global Crisis Intervention and Stabilization Plan, and an individualized plan for Crisis Intervention and Stabilization incorporated into each Child's Service Plan. The Contractor shall:

- a) Follow the Agency's procedure to submit notification of all Critical Incidents to the Agency.
- b) Notify the Child's parent(s) or guardian and Referral Worker immediately of any serious illness, incident involving serious bodily injury, or circumstances causing Removal of the Child from the facility. In the event of the death of a Child, a Contractor shall immediately notify the Child's parent(s) or guardian, the Referral Worker, the appropriate State authority, and the physician (if applicable). The Contractor shall document in the Child's case file how this notice was provided (e.g., via telephone, face to face, etc.) and to confirm that the notice was received by all parties contacted.
- c) Develop, implement, and follow a Contractor-specific Crisis Intervention and Stabilization Plan to identify and respond to Critical Incidents, mitigate trauma, and address staff training that shall develop staff competencies to implement this plan. The Contractor shall:
 - i. Train staff in Trauma-Informed Care, behavior management, and de-escalation techniques as a means to reduce and address situations that may lead to Critical Incidents;

- ii. Cultivate a culture that includes de-escalation training, expectations, procedures, and policies that are appropriate for the needs of a Child placed in SAL;
 - iii. Submit this plan to the Service Contract Specialist and the Agency's program manager within 30 days of Contract implementation and by July 31st annually for approval; and,
 - iv. Amend the plan as requested by the Agency
- d) Include Child-specific Crisis Intervention and Stabilization planning as a component of each Child's Service Plan. The crisis components of the Service Plan shall:
- i. Be individualized to the Child's unique needs and reflect the elements of the Agency-approved Contractor Crisis Intervention and Stabilization Plan; and
 - ii. Consider appropriate staffing patterns and competencies, Child trauma, treatment needs, and other elements needed to appropriately de-escalate and manage a Child's behavior.

1.3.5.7 Transition Planning

The Contractor shall initiate Transition Planning when a Child enters SAL and incorporate Transition Planning in the Child's Service Plan to ensure successful Transition to adulthood. The Contractor shall:

- a) Align services with the Agency Transition Planning and Services, as described in DHS employee manual [Chapter 18 C\(2\)](#).
- b) Incorporate Transition Planning, including the Youth Transition Decision Making (YTDM) process utilized by DHS, or the Youth Centered Planning Meeting process utilized by JCS, if applicable, into the Service Plan.
- c) Identify informal support network including family connection plan (SAL discharge plan).
- d) Ensure transportation for each Child including connecting them to resources such as vehicles/bicycles, gas card, bus passes, and other relevant important resources to facilitate transportation to/for Family visits, treatment services, jobs, and school. The Contractor shall ensure that transportation is not a barrier that prevents Child and Family engagement, treatment services, jobs, or school.
- e) Help a Child Transitioning out of SAL to secure all appropriate records such as, but not limited to, birth certificates, Social Security cards, green card/visa, and education records.
- f) Make referrals to help meet a Child's needs after Transition for various support services. These referrals may include, but are not limited to:
 - i. AmeriCorps or other career and education programs;
 - ii. Aftercare;
 - iii. Healthcare services;
 - iv. Vocational Rehabilitation/Disability supports; and
 - v. Other government and private services.
- g) Plan for Clinical and/or other support staff to be in place prior to the Child's exit from the program to ensure continuity of Clinical and support services as the Child exits.

1.3.5.8 Education & Career Planning

Completion of education and planning for post-secondary education or vocation is essential to a Child's success at the time of Transition into adulthood. In addition to life skill development, education and career planning/attainment are areas requiring significant attention from the Contractor. The Contractor shall place great emphasis on school attendance and ensure the Child is attending school and attaining a high school diploma or working toward a high school equivalency diploma. The Contractor shall:

- a) Provide and thoroughly train an Education Specialist who is responsible for coordinating educational needs with a Child's Caseworker to support education activities including, but not limited to:
 - i. School records; with quarterly updates provided to the Service Plan Update/discharge to include transferring/accumulating credits, attendance, and goals.
 - ii. Addressing special education recommendations
 - iii. Needed transportation;
 - iv. School supplies needed;

- v. Arrange relevant academic testing;
 - vi. Ensure transcripts are complete and needed core courses are taken;
 - vii. Coach and ensure eligible Children to complete ACT, SAT, ASVAB, and secondary education planning; and assist with connection to any other career or education programs (college, technical, military, and career planning).
 - viii. Assist a Child with college planning if the Child desires to attend college. This may include assistance scheduling campus visits, completing college applications, and assistance with financial aid and scholarship applications.
 - ix. Maintain a working relationship with education points of contact (POC) in child welfare and in local education districts, in order to ensure youth served have access to appropriate education. Ensure staff are informed of and active in ESSA policies and practices.
- b) Develop an education and career-planning component of the Child's Service Plan.
 - c) Arrange for and ensure each school-aged Child attends an educational or vocational program in accordance with all applicable State, federal, and local laws.
 - d) Confirm that the Child attends post-secondary education on a full-time basis (based upon the educational institution's definition of full-time) if the Child has obtained their high school diploma or high school equivalency, and they choose to pursue post-secondary education rather than employment.
 - e) Confirm that the Child is employed at least an average of 80 hours per month or participating in a work training program leading to said employment, if a Child is no longer attending school.
 - f) Permit a Child to work part-time, as long as the Child is able to do so without compromising the Child's education.
 - g) Prevent a Child that is attending school from having to work in order to meet their maintenance needs based upon the Child's budget, services, and supports.
 - h) Monitor and address educational progress and needs.
 - i) Provide access to supplemental educational support such as tutoring and school-based conferences as needed.
 - j) Explore alternatives to learning, like online courses and other options that might be available. The Contractor may use on-line curriculums and reporting to ensure school progress.
 - k) Assist in facilitating transportation as necessary to attend school, secure and maintain employment, or to participate in other activities.
 - l) Coordinate and/or provide transportation each school day to each Child to enable attendance at their school of origin (which is the school they attended prior to the Placement) unless the following conditions exist:
 - i. School is more than 45 miles from facility; and
 - ii. School is not in the Child's academic, emotional, or social best interest. For example, if a Child has special needs or diagnoses that would limit travel.
 - m) Provide youth aging out of care their school records, including transcripts and diplomas, or the means to obtain those records, at time of discharge

1.3.5.9 Physical Health

Children may or may not have received needed health and medical services prior to entry into SAL. In order to follow the Agency's goal of providing for a Child's well-being, the Contractor is responsible for ensuring the Child receives necessary medical services. The Contractor shall also teach the Child to begin assuming responsibility for managing their own physical health so that at Transition the Child is able to schedule and attend medical appointments and manage any prescribed medications. The Contractor shall:

- a) Arrange for the Child to receive necessary medical, dental, and vision care.
- b) Confirm that the current Service Plan provides for appropriate and sufficient services and supports to meet the individual needs of a Child.
- c) At intake, gather standard health information, including the Child's last physical exam, primary care physician information, current medications, allergies, and vision and dental information.
- d) At intake schedule the following exams for each Child:

- i. A medical exam scheduled within one week if a Child's last appointment was more than one year ago or if the date of the last appointment cannot be determined;
 - ii. A dental appointment scheduled within two weeks if a Child's last appointment was more than six months ago or the date of the last appointment cannot be determined;
 - iii. A vision exam scheduled within the first month if a vision exam is not scheduled with the physical exam; and
 - iv. If the Contractor is having difficulty attaining required authorizations from a Child's Family for medical, dental, or vision care, the Contractor shall contact the Referring Worker immediately.
- e) Arrange for 24-hour emergency medical and dental health care.
 - f) Coordinate appropriate medical care appointments, treatment needs, and medication management for all Children.
 - g) Communicate emerging and relevant medical issues to the Referring Worker.
 - h) Coordinate and/or collaborate with prevention or service-based organization to develop and provide sexual health services that cover safe sex practices, pregnancy prevention, health-related issues, peer pressure, sexually transmitted diseases, and healthy relationships.
 - i) Hygiene items must be provided – and must reflect the cultural, racial, and ethnic needs of the youth living in their programs

1.3.5.10 Mental and Behavioral Health and Clinical Supports

Each Child's mental and behavioral health needs are a key component of a Child's safety and well-being goals. As Self-Sufficiency is key for each Child in SAL, the Contractor shall assist the Child in gaining the skills necessary to manage the Child's mental health needs including how to schedule and attend mental health appointments and how to manage mental health medications. The Contractor shall:

- a) Coordinate or provide mental, behavioral, and Clinical supports and arrange for required mental and behavioral health appointments, including coordinating for any necessary consent with the Agency or JCS as needed.
- b) Assess and communicate concerns pertaining to mental and behavioral health to the Referring Worker.
- c) Follow any treatment instructions developed by the Child's mental and/or behavioral health providers.
- d) Incorporate and educate Children and parents and/or guardians about any mental or behavioral health treatment instructions developed by the Child's providers including how the Child will be monitored and how medication will be managed.
- e) Be aware of mental health needs and ensure mental health assessments are referred to an appropriate practitioner, as needed. This includes ensuring the medical intake screening is completed as it affects dosage, medication type, and other mental health needs.
- f) Coordinate treatment with Integrated Health Homes.
- g) At intake, communicate with the Child's Referring Worker regarding the need for substance abuse evaluation and, if necessary, coordinate with a substance abuse professional and the Child's Family. Further, if behaviors emerge during the Placement indicating a need for substance abuse evaluation, coordinate with a substance abuse professional.
- h) Actively engage in medication management, beyond simply ensuring proper administration of medications. Activities shall include, but not be limited to:
 - i. Developing an awareness of effects of medications given to a Child;
 - ii. Identifying and reporting of side effects
- i) Teach a Child how to self-manage medication and how to identify (and report as needed) possible side effects.
- j) Provide relevant medical history to mental and behavioral health providers and ensure new information is maintained in the Contractor's file for the Child and shared with the Referring Worker.
- k) Provide relevant information to youth aging out of care at time of discharge.

- l) Develop training and competencies for staff to complete these mental and behavioral health duties and ensure staff have received these trainings and competencies.

1.3.5.11 Training

The Contractor shall provide all staff with appropriate and comprehensive training to deliver the services for which the individual is responsible and in a manner that teaches staff to promote the safety, Permanency, and well-being for each Child. The Contractor shall:

- a) Develop a training plan and submit to the Agency for review and approval within 30 days after the Contract's start date.
- b) Incorporate any changes requested by the Agency and submit a final training plan to the Agency within 30 days of the Agency's completed review.
- c) Execute, adhere to, and provide training set forth in the Agency-approved training plan.
- d) Resubmit updated training plans to the Agency whenever changes are made.
- e) Provide the training described in the training plan for all Contractor or subcontractor staff.
- f) Provide information in the training and training plan regarding Children and Family's identified needs, including but not limited to:
 - i. The Guiding Principles, Child Welfare Model of Practice, JCS's Model of Practice, and Family-Centered Model of Practice;
 - ii. Life Skills;
 - iii. Crisis Interventions and Stabilizations including Trauma-Informed Care, de-escalation techniques, and policies and procedures regarding Critical Incidents;
 - iv. Mandt or comparable training for appropriate physical restraints to ensure safety;
 - v. Mental and Behavioral Health support, as appropriate to the staff person's role;
 - vi. Culturally and Linguistically Appropriate Service Standards (CLASS);
 - vii. Domestic Violence prevention and support;
 - viii. Human trafficking identification, intervention, and prevention; and
 - ix. Transition Planning, including the Life Skills Assessment tool.
- g) Incorporate the use of training information provided on the Agency's "Transitioning to Adulthood" web page at: <https://dhs.iowa.gov/transitioning-to-adulthood>
- h) Provide annual training plan update 30 days after the annual renewal.

1.3.5.12 Contractor Reports and Data

The Contractor shall provide the Agency with data, reports, and information to determine areas of strength and areas to improve in all aspects of SAL. Reports and data shall not only include directly quantifiable data, but will also include active, meaningful reporting regarding the quality of services provided to Children receiving SAL services. Reports shall also continually and proactively inform and improve SAL service delivery. See "Annual Innovation and Improvement Report: 470-5654 under "Documents for SAL" for an example of this documentation:

<https://dhs.iowa.gov/child-welfare-systems/implementation-information>

At all times, reports and data shall be used to ensure SAL services are following the JCS's Model of Practice and the Agency's Model of Practice as well as consistently improving and innovating the provision of service.

Reports shall be provided electronically to the Service Contract Specialist and the Contract Manager. The Contractor shall use their established internal Quality Assurance and improvement system for preparing, submitting, and validating their data and reports to the Agency.

The format and timing for all reports shall be contingent upon Agency approval. The Contractor shall provide all applicable data and reports in an Agency approved format, either by inputting into an electronic database, via other electronic means, or through written reports. The Agency will provide SAL Contractors standardized report templates or procedures prior to the implementation of Contracts.

1.3.5.12.1 Critical Incident Reporting

The Contractor shall utilize the Agency's online reporting system to report all Critical Incidents within twenty-four (24) hours of occurrence. This does not replace the need for immediate notification to the Referral Worker, the Child's parents or guardian, or others of incidents, circumstances, or events as described elsewhere in this Contract.

The Contractor shall follow its operating procedures regarding developments, and they shall be reported to the Referring Worker and parents or guardian immediately after an elopement is confirmed.

1.3.5.12.2 CareMatch or other Agency-approved system

The Contractor shall utilize the CareMatch or other Agency-approved system and make all entries as required to provide daily census information to the Agency. The Contractor shall:

- a) Follow all CareMatch system instructions including the timeframes contained therein for submitting required information.
- b) Use the CareMatch system as determined by the Agency to capture in real time a roster of Children in care, by name, date of birth, and other data required by the Care Match system.

1.3.5.12.3 Review Meetings

The Contractor shall participate-in review meetings at the Agency's/Juvenile Court Service's request and held at Agency/JCS determined times and methods of meeting. Methods may include face to face or video conferencing. These meetings shall focus on, but not be limited to the Contractor's qualitative delivery of SAL; a discussion of services, trends, collective outcomes, challenges, and successes; and milestones and Contract Deliverables. These meetings may also include issues and examples discussed by Service Area leadership teams and in local quality improvement meetings.

1.3.5.12.5 Annual Innovation and Improvement Report

The Contractor shall report in an Agency approved format on work done to advance innovative ideas and achieve improvements throughout SAL. These reports shall include information on how the Contractor has incorporated Positive Youth Development and Motivational Interviewing into SAL service-provision. These reports shall identify strengths, successes, and challenges and highlight work done by the Contractor to move toward the Agency's future goals and improve the child welfare system of care.

1.3.5.12.6 Annual Staffing Report

The Contractor shall provide an annual staffing report in an Agency approved format at the end of the state fiscal year that includes at the minimum the following information:

- a) Organizational structure;
- b) Staffing ratios;
- c) Staff turnover;
- d) Full-time equivalents;
- e) Salaries and benefits; and
- f) Other items as determined by the Agency after joint conversations with the Contractor.

1.3.5.13 Financial Management

The Contractor shall adhere to the following guidelines regarding their financial responsibilities:

- a) Maintain accurate, current, and complete records of financial activity that sufficiently and properly document and calculate all charges billed to the Agency.
- b) Not charge the Agency more than the Contractor receives for the same services provided to non-Agency entities.

- c) All Contractor Invoices shall document financial information in an Agency-approved manner so that the Agency obtains information necessary to report such costs to federal programs.
- d) Complete and submit a Uniform Combined Cost Report to the Bureau of Contract Support's identified personnel within ninety (90) days after the end of the Contractor's fiscal year. The Contractor shall conduct and submit a quarterly time study as part of the Uniform Combined Cost Report. Congregate care providers must complete the time studies on one school day and one non-school day each quarter of the fiscal year. Non-congregate care providers can opt to complete the time studies on two (2) weekdays each quarter of the fiscal year.

1.3.5.14 Staffing

The Contractor shall meet all staff qualifications as defined in 441 Iowa Admin. Code 441 Ch. 108. In addition, the Contractor shall meet the following criteria and requirements related to staffing:

- a) Employ staff that have a strong desire to participate in the program, support, encourage, and help Children, and meet Agency goals.
- b) Train staff in, and continually reinforce at all times, the Agency's Model of Practice, JCS's Model of Practice, EPICS-I, and Guiding Principles.
- c) Take all steps necessary to ensure implementation of the One Caseworker Model.
- d) Ensure Contractor staffing ratios are adjusted to meet the population considerations of the Children.
- e) Ensure each staff member serving the Caseworker role shall serve no more than fifteen (15) Children at one time and shall have limited other duties.
- f) Have staff fully dedicated to the contract – full time supervisors, Caseworkers, and other staff.
- g) Implement policies to encourage staff retention.
- h) Train staff to develop Cultural Competency skills.
- i) Provide Clinical supervisory support.
- j) Staff working directly with SAL youth shall be trained and certified in Motivational Interviewing or working towards training and certification.

1.3.5.14.1 Program Director

The Contractor shall maintain a Program Director dedicated to the administration of this Contract, including problem solving, resolving staff issues, and all other Agency required and requested concerns. The Program Director shall be the point of contact for the Agency as related to items pertaining to contracted duties and daily operations.

1.3.5.14.2 Caseworker Supervisors

The Contractor shall employ supervisors who oversee the work of Caseworkers as well as coordinate SAL services. The Caseworker Supervisor shall be trained and certified in Motivational Interviewing or working towards training and certification. A supervisor shall have a bachelor's degree that meets the requirements in 441 Iowa Administrative Code §108.4(3). The experience shall be in the area of child welfare services.

1.3.5.14.3 Caseworkers

The Contractor shall employ Caseworkers to become the one Caseworker Children and their families, acting as the single point of contact for SAL services for their assigned Children. The Caseworker shall be trained and certified in Motivational Interviewing or working towards training and certification.

- a) Caseworkers shall meet the education requirements in 441 Iowa Admin Code §108.4(3).
- b) Caseworkers shall serve no more than fifteen (15) Children at one time and shall have limited other duties.

1.3.5.14.4 Education Specialist

When a Child is in SAL, the Contractor shall provide a staff person, who may also be employed as a Caseworker or Supervisor, to act as an Education Specialist responsible for coordinating educational needs with a Child's Caseworker, Area Education Agencies, and Local Education Agencies to support education activities including, but not limited to the following:

- a) Special education and other education or school behavior plans;
- b) Transportation to and from school;
- c) Acquisition of school supplies for Children;
- d) Retention in Children's school of origin unless not in best interest of a Child;
- e) Arrangement of relevant academic testing;
- f) College, Technical, Military, and career planning;
- g) Completion of high school diploma or High-School Equivalency; and
- h) Completion of transcripts and needed core classes.

1.3.5.15 Payment Methodology

Contractors will be contracted for a specified number of Guaranteed Payment Beds for Cluster Sites and/or Scattered Sites determined by the Agency. Within each State fiscal year, the Agency will pay the Contractor as follows:

Cluster Sites: The Contractor shall receive a guaranteed per diem payment per Cluster Site bed determined by the Agency. The fixed rate will be paid based on the total number of Cluster Site Guaranteed Payment Beds under Contract, regardless of whether they are occupied. The per diem fixed rate for Cluster Site Guaranteed Payment Bed shall be \$170.00.

Scattered Sites: The Contractor shall receive guaranteed per diem payment per Scattered Site determined by the Agency. The fixed rate will be paid based on the total number of Scattered Sites under Contract, regardless of whether they are occupied. The per diem fixed rate for Scattered Sites shall be \$35.00.

Contractors shall submit monthly Invoices reflecting actual utilization of Cluster Site beds and/or Scattered Sites. The Agency will pay the Contractor on a monthly basis. Monthly payments will be made based only on actual bed day utilization. Note that no payments will be made for the day in which a Child is discharged from the bed. Movement of a Child from a cluster Guaranteed Payment Bed to a scattered Non-Guaranteed Payment Bed (or vice versa) is not considered a discharge.

Payment for the Cluster Site Beds and Scattered Sites included in the Contract will be reconciled at the end of each quarter.

At the end of each payment quarter, if the total actual utilization paid or Invoiced is less than the total Guaranteed payment for that quarter, the Contractor shall submit an approved, completed Invoice to the Service Contract Specialist for the balance due up to the guaranteed payment amount that quarter. If the total actual utilization paid or Invoiced is equal to the total guaranteed payment for that quarter, the guaranteed payment will have been met and no additional payment will be made. The Service Contract Specialist will verify the totals submitted and approve final payment.

The Service Contract Specialist will verify the totals submitted and approve final payment.

Payment will be contingent on the Agency's timely receipt of service reports detailing expenses, services provided, and the number of Children served. The Contractor shall submit an Invoice with the maintenance and service portions of the payments separated. All Contractor Invoices shall document financial information in an Agency-approved manner so that the Agency obtains information necessary to report such costs to federal programs.

Performance measure incentive payments will be made semi-annually following the payment schedule for each performance measure when the Agency's review of the applicable reports and documentation show compliance with the performance measures that are described in Section 1.3.5.16

The Agency is placing a cap on the amount of funds that may be spent for Administrative Costs in any contract(s) resulting from this RFP. Spending on Administrative Costs under each contract, for both the Contractor and all their subcontractors, cannot exceed 15% of the total contract amount.

At Agency discretion, an annual rate increase may be implemented to reflect the Consumer Price Index.

1.3.5.16 Performance Measures

Performance measures and targets are included as a part of this Contract and used to assess performance by the Contractor. The performance measures are designed to help further align Contractor incentives with better outcomes for Children. By meeting or exceeding the performance measures, the Contractor will show their commitment to improving SAL services and outcomes.

The performance measures and targets included are the performance expectations and shall be measured and earned separately by Contract.

Contractors shall submit Invoices for performance incentive payments after review and approval by the Agency Service Contract Specialist.

Determination of whether a Contractor has met a performance measure will be made at the sole discretion of the Agency. The Agency may re-evaluate performance measures at the end of the initial two-year contract period.

The following performance measures determine eligibility for performance incentive payments. Note that the Gold and Silver Standards are mutually exclusive and both Gold and Silver Standards cannot be earned for the same performance measure during the same measurement period. Performance measures shall be measured and earned by Contract.

1.3.5.16.1 Performance Measure 1 – Stability

In accordance with the Agency's stability and Permanency goals and recognizing the importance of a Child's completion of education and acquisition of life skills prior to aging out of child welfare programming, the Contractor shall promote Children's retention in SAL Placement. A Child shall not experience an unplanned discharge from SAL services during Placement and the Contractor shall support a Child to remain in SAL to age 18, or older as permitted by law and regulations, or discharge to their Family, a Family-Like Setting, or Positive Support System Placement.

Gold Standard (payment of an additional 5.0% of the measurement period invoiced amount) - Greater than or equal to 70% of Children Transitioning out of SAL in a six-month measurement period are Transitioning at age 18, or older as permitted by law and regulations, or discharging to their Family, a Family-Like Setting, or Positive Support System Placement. This will be calculated for each six-month measurement period.

Silver Standard (payment of an additional 2.5% of the measurement period invoiced amount) - Greater than or equal to 60% and less than 70% of Children Transitioning out of SAL in a six-month measurement period are Transitioning at age 18, or older as permitted by law and regulations or discharging to their Family, a Family-Like Setting, or Positive Support System Placement. This will be calculated for each six-month measurement period.

1.3.5.16.2 Performance Measure 2 – Aftercare Engagement

The Contractor shall continue to communicate with the Child after Transition by encouraging the Child's participation in Aftercare. When eligible, each Child is expected to participate in Aftercare and the Contractor's responsibility is to advocate for the Child's participation in Aftercare to promote the Child's success in early adulthood. If a youth transitions from SAL to Aftercare and continues to engage for 3 months, Contractor will receive payment of \$100.00.

1.3.5.16.3 Performance Measure 3 – Life Skills Attainment

In accordance with the Agency's well-being goals and recognizing the importance of a Child's completion of education and acquisition of life skills prior to aging out of child welfare programming, the Contractor shall promote Children's life skills attainment. The Contractor shall track Children's performance on their pre-Placement and discharge Casey Life Skills Assessments to obtain a measurement of Children's acquisition of life skills during their stay in SAL. Contractors shall report using the Agency's online reporting system.

For each youth discharged in the measurement period that has shown improvement in their Casey Life Skills Assessment from pre-Placement to discharge from SAL, the Contractor will receive payment of \$100.00. This will be calculated for each six-month measurement period.

1.3.5.16.3 Performance Measure 4 – Increase in Positive Informal Supports (no payment incentive)

In accordance with the Agency's well-being goals and recognizing the importance of a Child's positive informal support network prior to aging out of child welfare programming, the Contractor shall promote Children's increased positive informal supports. The Contractor shall track Children's performance on the Agency approved Discovery Tool (Attachment Z) monthly. The child's Discovery Tool upon entry into the SAL program and their Discovery Tool on their last month in SAL will be reviewed to obtain a measurement of Children's acquisition of positive informal supports during their stay in SAL. Contractors shall report using the Agency's online reporting system.

1.3.6 General Requirements**1.3.6.1 Joint Quality Improvement Activities**

The Agency's Program Manager or designee and/or Service Contract Specialist, and the Contractor's Program Director shall meet at least semi-annually or more often as needed to review performance data, issues, trends, and problem-solve solutions for the Contract. The Contractor shall be available for all meetings with the Agency. The JCS CQI Manager shall be afforded the opportunity to participate in these meetings and provide input.

Additionally, the Contractor shall implement and utilize an established Quality Assurance and improvement system for tracking and evaluating the effectiveness of service delivery under this Contract.

1.3.6.1.2 Local Quality Improvement Meetings with Service Area Leadership Teams

The Contractor shall meet with Agency Service Area Manager(s) and/or designee(s) as scheduled by Service Area leadership to engage in local problem solving and efforts to improve performance within the Service Area. This local quality improvement group, including Service Area DHS and JCS Leadership, Contractors across child welfare core contracts, and other DHS personnel may jointly review performance data for the purpose of resolving issues and identifying positive trends. At each meeting, the local quality improvement group may develop action steps

and monitor outcomes for all areas of the Contract needing improvement. The group may engage in a more in-depth review of data and other resources.

1.3.6.1.3 Statewide Meetings

The Contractor shall attend the Agency's annual child welfare services Contractor meeting. The Contractor shall attend other meetings as needed or requested by the Agency.

1.3.6.1.4 Quality Assurance and Improvement Reporting

The Agency will conduct reviews of the Contractor's overall Quality Assurance system to validate that the Contractor is implementing a Quality Assurance system as described in their Proposal.

- a) Quality Assurance reviews by the Service Contract Specialist will occur periodically throughout the Contract period. The first review takes place within the first nine (9) months of the Contract; further reviews will be scheduled as warranted to ensure that the Agency maintains an understanding of the Contractor's Quality Assurance processes.
- b) Subsequent Quality Assurance reviews shall be scheduled at Agency discretion and may include such things as: a review of Contractor's adherence to the elements of their bid proposal; a review of employee files to ensure the Contractor's adherence to Section 1.3.4.14 Staffing; and the Contractor's training plan as it applies to the employees' files reviewed.

1.3.6.1.5 Practice Standards

- a) The Contractor shall work in collaboration with the Agency to develop Practice Standards, which will be approved and finalized by the Agency in year one (1) of the contract.
- b) Contractor will provide services consistent with Agency approved Practice Standards.
- c) The Practice Standards shall be trained and implemented in year two (2) of the contract.

1.3.6.2 Dispute Resolution Protocol for Service Provision

If a Contractor is directed by an Agency or JCS worker to provide a level of interventions or supports beyond what they believe is required or reasonable, the Contractor shall provide services to the Child and Family at the level directed by the Agency or JCS while the matter is being resolved. The Contractor must communicate the basis of their belief in writing to the Agency or JCS worker and their supervisor. Every effort shall be made to resolve the service provision dispute at the lowest level possible, through discussions between the Agency or JCS worker and their supervisor and the Contractor, generally within two (2) Business Days of receipt of the review request.

If the Contractor is not satisfied with the dispute resolution decision of the Agency or JCS worker and their supervisor, the Contractor may refer the situation in writing to the respective Agency Service Area Manager (SAM) or designee or the respective Chief Juvenile Court Officer or designee for review. This review shall be generally completed within four (4) Business Days after receipt of the request for review. After completion of this review, the Agency SAM, or his/her designee, or the respective Chief Juvenile Court Officer or his/her designee will communicate the Agency's or JCS's decision in writing to the Contractor.

If a dispute over Contract terms is identified, the respective Agency Service Area Manager (SAM) or designee reviews the Contract dispute and refers to the Agency Service Contract Specialist. The Service Contract Specialist reviews the dispute and attempts to resolve the issue. If the issue is not resolved, the dispute is elevated to the Contract Owner where the dispute is negotiated with the Contractor.

1.3.6.3 Implementation Activities

The Agency anticipates that to the greatest extent possible there will be a continuation of the existing services from the time the Successful Bidder(s) are awarded for RFP AFCS-24-001-until the beginning of

the new Contract, expected to start on July 1, 2023. Prior to the implementation of the new Contract, the Contractor shall:

- a) Have Staff fully trained to meet Contract requirements,
- b) Participate in service implementation training with Agency staff as necessary,
- c) Have all relevant infrastructure prepared, licensed, and completed. Including infrastructure necessary for transfer of Children,
- d) Maintain a system to transfer and store all relevant case information,
- e) Collaborate with the Agency to ensure a process for transitioning Children to Contractor facilities as necessary as of July 1, 2023.

If transitioning of Children to a new Contractor or facility is required, the Contractor and Agency shall work together to complete the transitions in accordance with the following principles:

- a) If a Child was served by a Contractor prior to July 1, 2023, that is either a Contractor or subcontractor under the new Contract for the same Service, Child will continue to receive services from the same Contractor. However, if the Family or Agency feels there is an extenuating circumstance that warrants a change in Contractor, the change in Contractor will occur only if the Agency approves.
- b) If a Child was served by a Contractor prior to July 1, 2023, that is no longer a Contractor or subcontractor under the new contract for the same Service, the Child will be assigned, by the Agency, to one of the new Contractors.
- c) All Contractors, and their subcontractors as necessary, shall participate in Child transition meetings with Agency staff prior to July 1, 2023, on all Children being transferred to their organization from a prior Contractor that is no longer contracted for the specific Service.

The Agency procedures described in this section are designed to maximize service continuity for Children and families receiving CWES, FGCS, and SAL Services prior to July 1, 2023, that will continue to receive services starting July 1, 2023 and ensure a fair and equitable system for making Child referrals to Contractors.

1.3.6.4 Reserved

1.3.6.5 Monitoring, Review, and Problem Reporting

1.3.6.5.1 Agency Monitoring

The Contract Manager, Service Contract Specialist, or designee will review invoices and supporting documentation itemizing work performed prior to payment, determine compliance with general Contract terms, conditions, and requirements, and assess compliance with deliverables, performance measures, or other associated requirements:

The Agency will assign a Service Contract Specialist to this Contract. The Service Contract Specialist will be responsible for the following Contract management responsibilities:

- a) Responding to day-to-day questions from the Contractor. The Service Contract Specialist may consult with the Agency Program Manager and/or other Agency staff as necessary to coordinate a response.
- b) Resolving, to the extent possible, Contract issues and disputes between the Agency and the Contractor, maintaining a log of disputes between the Agency and the Contractor, and referring any disputes that cannot be resolved to the Contract Owner.
- c) Monitoring the Agency's data on a regular basis and including any incentive payments the Contractor is eligible to obtain.
- d) Advising the Contractor of what incentive payments the Contractor is eligible for and approving such invoices.

- e) Conducting reviews of Contractor records, including the records of subcontractors as necessary, to validate the Contractor's service reporting and their compliance with the service requirements-
- f) Monitoring any Corrective Action Plan (CAP) that the Contractor is required to develop to improve their performance in meeting the service requirements described in the scope of work.
- g) Conducting reviews of the Contractor's overall Quality Assurance system as set forth in their plan in accordance with Agency requirements to validate that the Contractor is implementing a Quality Assurance system as described in their Contract.

1.3.6.6 Agency Review Clause

The Contract Manager, Service Contract Specialist or designee will use the results of monitoring activities and other relevant data to assess the Contractor's overall performance and compliance with the contract. At minimum, the Agency will conduct an annual review; however, reviews may occur more frequently at the Agency's discretion. As part of the review(s), the Agency may require the Contractor to provide additional data, may perform reviews that occur at the discretion of the Agency, and may consider information from other sources.

The Agency may require one or more meetings to discuss the outcome of a review. Meetings may be held in person. During the review meetings, the parties will discuss the Deliverables that have been provided or are in process under this Contract, achievement of the performance measures, and any concerns identified through the Agency's contract monitoring activities.

1.3.6.7 Problem Reporting

As stipulated by the Agency, the Contractor and/or Agency shall provide a report listing any problem or concern encountered. Records of such reports and other related communications issued in writing during the course of contract performance shall be maintained by the parties. At the next scheduled meeting after a problem has been identified in writing, the party responsible for resolving the problem shall provide a report setting forth activities taken or to be taken to resolve the problem together with the anticipated completion dates of such activities. Any party may recommend alternative courses of action or changes that will facilitate problem resolution. The Contract Owner has final authority to approve problem-resolution activities. In addition, the Agency and/or the Contractor shall keep JCS informed on a timely basis of significant problems and their resolution.

The Agency's acceptance of a problem report shall not relieve the Contractor of any obligation under this Contract or waive any other remedy. The Agency's inability to identify the extent of a problem or the extent of damages incurred because of a problem shall not act as a waiver of performance or damages under this Contract.

When the Agency receives the following requests during delivery of service, then Agency shall approve or disapprove such requests. If the Agency's Contract Owner approves of one or more of the following requests, then the Agency automatically imposes a Notice of Problem and may suspend guaranteed bed payment. This automatic imposition will be confirmed through electronic communication. The specific requests are:

1. To reduce, transfer, or otherwise prematurely discharge existing placements to a level below the guaranteed level.
2. To freeze, hold, or otherwise stop the number of referrals/future placements at a level below the guaranteed level.
3. To reduce the CareMatch number for referrals and placements

1.3.6.8 Addressing Deficiencies

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR)

To the extent that deficiencies are identified in the Contractor's performance and notwithstanding other remedies available under this Contract, the Agency may require the Contractor to develop and comply with a Corrective Action Plan (CAP) acceptable to the Agency to resolve the deficiencies.

When the Agency imposes an automatic Notice of Problem, then a Corrective Action Plan in a format approved by the Agency is required. (See 1.3.6.7 Problem Reporting).

Section 2 Basic Information About the RFP Process

2.1 Issuing Officer.

The Issuing Officer is the sole point of contact regarding the RFP from the date of issuance until selection of the successful Bidder. The Issuing Officer for this RFP is:

Ryan Roovaart
Bureau of Service Contract Support
Hoover State Office Building
1305 E. Walnut St.
1st Floor South
Des Moines, IA 50319

Phone: 515-281-4598

[CISR ACFS-24-001@dhs.state.ia.us](mailto:CISR.ACFS-24-001@dhs.state.ia.us)

2.2 Restriction on Bidder Communication.

From the issue date of this RFP until announcement of the successful Bidder, the Issuing Officer is the point of contact regarding the RFP. There may be no communication regarding this RFP with any State employee other than the Issuing Officer, except at the direction of the Issuing Officer or as otherwise noted in the RFP. This section shall not be construed as restricting communications related to the administration of any contract currently in effect between a Contractor and the Agency.

The Issuing Officer will respond only to questions regarding the procurement process. Questions pertaining to the interpretation of this RFP may be submitted in accordance with the Questions, Requests for Clarification, and Suggested Changes section of this RFP.

2.3 Downloading the RFP from the Internet.

The RFP and any related documents such as amendments or attachments (collectively the “RFP”), and responses to questions will be posted at the State of Iowa’s website for bid opportunities: <http://bidopportunities.iowa.gov/>. Check this website periodically for any amendments to this RFP. The posted version of the RFP is the official version. The Agency will only be bound by the official version of the RFP document(s). Bidders should ensure that any downloaded documents are in fact the most up to date and are unchanged from the official version.

2.4 Online Resources.

Resources related to this RFP are available at the following website: <https://dhs.iowa.gov/child-welfare-systems/procurement-information>

2.5 Intent to Bid.

The Agency requests that Bidders provide their intent to bid by email to the Issuing Officer by the date and time in the Procurement Timetable. Bidders are asked to provide their intent to bid using Attachment L - Intent to Bid Form. The Bidder may wish to request confirmation of receipt of the email from the Issuing Officer to ensure delivery. Do not submit letters of intent by mail, shipping service, or hand delivery. The intent to bid should include the Bidder's name, contact person, mailing address, email address, telephone number, and a statement of intent to submit a bid in response to this RFP. Though it is not mandatory that the Agency receive an intent to bid, the Agency will only respond to questions about the RFP that have been submitted by Bidders who have expressed their intent to bid. The Agency may cancel an RFP for lack of interest based on the number of letters of intent to bid received.

2.6 Bidders’ Conference.

The Bidders’ conference will be conducted via a Zoom on the date and time listed in the Procurement Timetable. Only Bidders who submitted an Intent to Bid form (Attachment L) by the due date and time listed in the

Procurement Timetable will receive a log in to attend the Bidders Conference. A Zoom invitation to the Bidders Conference will be sent to the email listed on the Intent to Bid Form.

The purpose of the Bidders' conference is to inform prospective Bidders about the work to be performed and to provide prospective Bidders an opportunity to ask questions regarding the RFP. Verbal discussions at the conference shall not be considered part of the RFP unless incorporated into the RFP by amendment. Questions asked at the conference that cannot be adequately answered during the conference may be deferred and responded to in writing. Participation in this virtual conference is optional but recommended as this will be the only opportunity to ask verbal questions regarding this RFP.

2.7 Questions, Requests for Clarification, and Suggested Changes.

Bidders who have provided their intent to bid on the RFP are invited to submit written questions, requests for clarifications, and/or suggestions for changes to the specifications of this RFP (hereafter "Questions, Request for Clarifications, and Suggested Changes") using CISR Attachment M – Questions, Requests for Clarifications and Suggested Changes by the due date and time provided in the Procurement Timetable. Bidders are not permitted to include assumptions in their Bid Proposals. Instead, Bidders shall address any perceived ambiguity regarding this RFP through the question-and-answer process. If the Questions pertain to a specific section of the RFP, the page and section number(s) must be referenced. Bidders shall submit questions to the Issuing Officer by email using the Attachment M - Questions, Request for Clarifications, and Suggested Changes spreadsheet. The Bidder may wish to request confirmation of receipt from the Issuing Officer to ensure delivery. Do not submit questions by mail, shipping service, or hand delivery.

The Agency will post responses to questions received on the State's website at: <http://bidopportunities.iowa.gov/> by the dates provided in the Procurement Timetable. Follow-up questions to initial responses are permissible as long as all questions are received by the final due date and time for Bidder Questions as provided in the Procurement Timetable.

The Agency assumes no responsibility for verbal representations made by its officers or employees unless such representations are confirmed in writing and incorporated into the RFP. In addition, the Agency's written responses to Questions will not be considered part of the RFP. If the Agency decides to change the RFP, the Agency will issue an amendment.

2.8 Submission of Bid Proposal.

Each Bidder is responsible for ensuring that the Issuing Officer receives the Bid Proposal by the time and date specified in the Procurement Timetable at the address provided in the RFP for the Issuing Officer. The Agency will not waive this mandatory requirement. Any Bid Proposal received after this deadline will be rejected and will not be evaluated.

Bid Proposals are to be submitted in accordance with the Bid Proposal Formatting section of this RFP. Bid Proposals may not be hand-delivered to the Issuing Officer. Rather, Bid Proposals are to be mailed through the postal service or shipping service.

2.9 Amendment to the RFP and Bid Proposal.

Each Bidder is responsible for ensuring that the Issuing Officer receives the Bid Proposal and any permitted amendments by the established deadlines at the address provided in the RFP for the Issuing Officer. Amendments must be received utilizing the same delivery method as set forth in the RFP for the submission of the original Bid Proposal.

Bidders may amend a previously submitted Bid Proposal at any time before the bid submission date and time. Any such amendment must be in writing and signed by the Bidder. The Bidder shall provide the same number of copies of the amended Bid Proposal as is required for the original Bid Proposal, for both hardcopy and electronic copies, in accordance with the Bid Proposal Formatting Section.

The Agency reserves the right to amend or provide clarifications to the RFP at any time. RFP amendments will be posted to the State's website at <http://bidopportunities.iowa.gov/>. If an RFP amendment occurs after the closing date for receipt of Bid Proposals, the Agency may, in its sole discretion, allow Bidders to amend their Bid Proposals.

2.10 Withdrawal of Bid Proposal.

The Bidder may withdraw its Bid Proposal prior to the closing date for receipt of Bid Proposals by submitting a written request to withdraw signed by the Bidder, scanned, then emailed to the Issuing Officer. The Bidder should request confirmation of receipt of the email from the Issuing Officer to ensure delivery.

2.11 Costs of Preparing the Bid Proposal.

The costs of preparation and delivery of the Bid Proposal are solely the responsibility of the Bidder.

2.12 Rejection of Bid Proposals.

The Agency reserves the right to reject any or all Bid Proposals, in whole and in part, and to cancel this RFP at any time prior to the execution of a written contract. Issuance of this RFP in no way constitutes a commitment by the Agency to award or enter into a contract.

2.13 Review of Bid Proposals.

Only Bidders that meet the mandatory requirements and are not subject to disqualification will be considered for award of a contract.

2.13.1 Mandatory Requirements.

Bidders must meet these mandatory requirements or will be disqualified and not considered for award of a contract:

- The Issuing Officer must receive the Bid Proposal, and any amendments thereof, prior to or on the due date and time (See RFP Sections 2.8 and 2.9).
- The Bidder is not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving federal funding by any federal department or Agency (See RFP Additional Certifications Attachment).

2.13.2 Reasons Proposals May be Disqualified.

Bidders are expected to follow the specifications set forth in this RFP. However, it is not the Agency's intent to disqualify Bid Proposals that suffer from correctible flaws. At the same time, it is important to maintain fairness to all Bidders in the procurement process. Therefore, the Agency reserves the discretion to permit cure of variances, waive variances, or disqualify Bid Proposals for reasons that include, but may not be limited to, the following:

- Bidder initiates unauthorized contact regarding this RFP with employees other than the Issuing Officer (See RFP Section 2.2);
- Bidder fails to comply with the RFP's formatting specifications so that the Bid Proposal cannot be fairly compared to other bids (See RFP Section 3.1);
- Bidder fails, in the Agency's opinion, to include the content required for the RFP;
- Bidder fails to be fully responsive in the Bidder's Approach to Meeting Deliverables Section, states an element of the Scope of Work cannot or will not be met, or does not include information necessary to substantiate that it will be able to meet the Scope of Work specifications (See RFP Section 3.2.3);
- Bidder's response materially changes Scope of Work specifications;
- Bidder fails to submit the RFP attachments containing all signatures (See RFP Section 3.2.6);
- Bidder marks entire Bid Proposal confidential, makes excessive claims for confidential treatment (See RFP Section 3.1);

- Bidder includes assumptions in its Bid Proposal (See RFP Section 2.7); or
- Bidder fails to respond to the Agency's request for clarifications, information, documents, or references that the Agency may make at any point in the RFP process.
- Bidder is a "scrutinized company" included on a "scrutinized company list" created by a public fund pursuant to Iowa Code §12J. This list is maintained by the Iowa Public Employees' Retirement System. The list is currently found here: <https://ipers.org/investments/restrictions>.

The determination of whether or not to disqualify a proposal and not consider it for award of a contract for any of these reasons, or to waive or permit cure of variances in Bid Proposals, is at the sole discretion of the Agency. No Bidder shall obtain any right by virtue of the Agency's election to not exercise that discretion. In the event the Agency waives or permits cure of variances, such waiver or cure will not modify the RFP specifications or excuse the Bidder from full compliance with RFP specifications or other contract requirements if the Bidder enters into a contract.

2.14 Bid Proposal Clarification Process.

The Agency may request clarifications from Bidders for the purpose of resolving ambiguities or questioning information presented in the Bid Proposals. Clarifications may occur throughout the Bid Proposal evaluation process. Clarification responses shall be in writing and shall address only the information requested. Responses shall be submitted to the Agency within the time stipulated at the occasion of the request.

2.15 Verification of Bid Proposal Contents.

The contents of a Bid Proposal submitted by a Bidder are subject to verification.

2.16 Reference Checks.

The Agency reserves the right to contact any reference to assist in the evaluation of the Bid Proposal, to verify information contained in the Bid Proposal, to discuss the Bidder's qualifications, and/or to discuss the qualifications of any subcontractor identified in the Bid Proposal.

2.17 Information from Other Sources.

The Agency reserves the right to obtain and consider information from other sources concerning a Bidder, such as the Bidder's capability and performance under other contracts, and the Bidder's authority and ability to conduct business in the State of Iowa. Such other sources may include subject matter experts.

2.18 Criminal History and Background Investigation.

The Agency reserves the right to conduct criminal history and other background investigations of the Bidder, its officers, directors, shareholders, or partners and managerial and supervisory personnel retained by the Bidder for the performance of the resulting contract. The Agency reserves the right to conduct criminal history and other background investigations of the Bidder's staff and subcontractors providing services under the resulting contract.

2.19 Disposition of Bid Proposals.

Opened Bid Proposals become the property of the Agency and will not be returned to the Bidder. Upon issuance of the Notice of Intent to Award, the contents of all Bid Proposals will be in the public domain and be open to inspection by interested parties subject to exceptions provided in Iowa Code chapter 22 or other applicable law.

2.20 Public Records and Request for Confidential Treatment.

Original information submitted by a Bidder may be treated as public information by the Agency following the conclusion of the selection process unless the Bidder properly requests that information be treated as confidential at the time of submitting the Bid Proposal. See the Bid Proposal Formatting Section for the proper method for making such requests. The Agency's release of information is governed by Iowa Code chapter 22. Bidders are encouraged to familiarize themselves with Chapter 22 before submitting a Bid Proposal. The Agency will copy public records as required to comply with public records laws.

The Agency will treat the information marked confidential as confidential information to the extent such information is determined confidential under Iowa Code chapter 22 or other applicable law by a court of competent jurisdiction. However, the Bidder shall certify by signing and returning RFP Attachment B its understanding that any Agency references to Bid Proposal information marked confidential made during the evaluation process may become part of the public domain

In the event the Agency receives a request for information marked confidential, written notice shall be given to the Bidder seventy-two (72) hours prior to the release of the information to allow the Bidder to seek injunctive relief pursuant to Iowa Code § 22.5 or 22.8.

The Bidder's failure to request confidential treatment of material pursuant to this section and the relevant law will be deemed, by the Agency and State personnel, as a waiver of any right to confidentiality that the Bidder may have had.

2.21 Copyrights.

By submitting a Bid Proposal, the Bidder agrees that the Agency may copy the Bid Proposal for purposes of facilitating the evaluation of the Bid Proposal or to respond to requests for public records. By submitting a Bid Proposal, the Bidder acknowledges that additional copies may be produced and distributed, and represents and warrants that such copying does not violate the rights of any third party. The Agency shall have the right to use ideas or adaptations of ideas that are presented in the Bid Proposals.

2.22 Release of Claims.

By submitting a Bid Proposal, the Bidder agrees that it shall not bring any claim or cause of action against the Agency based on any misunderstanding concerning the information provided herein or concerning the Agency's failure, negligent or otherwise, to provide the Bidder with pertinent information as intended by this RFP.

2.23 Reserved. (Presentations)

2.24 Notice of Intent to Award.

Notice of Intent to Award will be sent to all Bidders that submitted a Bid Proposal by the due date and time. The Notice of Intent to Award does not constitute the formation of a contract between the Agency and the apparent successful Bidder.

2.25 Acceptance Period.

The Agency shall make a good faith effort to negotiate and execute the contract. If the apparent successful Bidder fails to negotiate and execute a contract, the Agency may, in its sole discretion, revoke the Notice of Intent to Award and negotiate a contract with another Bidder or withdraw the RFP. The Agency further reserves the right to cancel the Notice of Intent to Award at any time prior to the execution of a written contract.

2.26 Review of Notice of Disqualification or Notice of Intent to Award Decision.

Bidders may request reconsideration of either a notice of disqualification or notice of intent to award decision by submitting a written request to the Agency:

Bureau Chief
c/o Bureau of Service Contract Support
Department of Human Services
Hoover State Office Building, 1st Floor
1305 E. Walnut Street
Des Moines, Iowa 50319-0114
email: reconsiderationrequest@dhs.state.ia.us

The Agency must receive the written request for reconsideration within five days from the date of the notice of disqualification. The written request may be emailed or delivered by postal service or other shipping service. Do

not deliver any requests for reconsideration to the office in person. It is the Bidder's responsibility to ensure that the request for reconsideration is received prior to the deadline. Postmarking or submission to a shipping service by the due date shall not substitute for actual receipt of a request for reconsideration by the Agency.

The request for reconsideration shall clearly and fully identify all issues being contested by reference to the page and section number of the RFP. If a Bidder submitted multiple Bid Proposals and requests that the Agency reconsider a notice of disqualification or notice of intent to award decision for more than one Bid Proposal, a separate written request shall be submitted for each. At the Agency's discretion, requests for reconsideration from the same Bidder may be reviewed separately or combined into one response. The Agency will expeditiously address the request for reconsideration and issue a decision. The Bidder may choose to file an appeal with the Agency within five days of the date of the decision on reconsideration in accordance with 441 IAC 7.41 et seq.

2.27 Definition of Contract.

The full execution of a written contract shall constitute the making of a contract for services and no Bidder shall acquire any legal or equitable rights relative to the contract services until the contract has been fully executed by the apparent successful Bidder and the Agency.

2.28 Choice of Law and Forum.

This RFP and the resulting contract are governed by the laws of the State of Iowa without giving effect to the conflicts of law provisions thereof. Changes in applicable laws and rules may affect the negotiation and contracting process and the resulting contract. Bidders are responsible for ascertaining pertinent legal requirements and restrictions. Any and all litigation or actions commenced in connection with this RFP shall be brought and maintained in the appropriate Iowa forum.

2.29 Restrictions on Gifts and Activities.

Iowa Code chapter 68B restricts gifts that may be given or received by state employees and requires certain individuals to disclose information concerning their activities with state government. Bidders must determine the applicability of this Chapter to their activities and comply with the requirements. In addition, pursuant to Iowa Code § 722.1, it is a felony offense to bribe or attempt to bribe a public official.

2.30 Exclusivity.

Any contract resulting from this RFP shall not be an exclusive contract.

2.31 No Minimum Guaranteed.

The Agency anticipates that the selected Bidder will provide services as requested by the Agency. The Agency does not guarantee that any minimum compensation will be paid to the Bidder or any minimum usage of the Bidder's services.

2.32 Use of Subcontractors.

The Agency acknowledges that the selected Bidder may contract with third parties for the performance of any of the Contractor's obligations. The Agency reserves the right to provide prior approval for any subcontractor used to perform services under any contract that may result from this RFP.

2.33 Bidder Continuing Disclosure Requirement.

To the extent that Bidders are required to report incidents when responding to this RFP related to damages, penalties, disincentives, administrative or regulatory proceedings, founded child or dependent adult abuse, or felony convictions, these matters are subject to continuing disclosure to the Agency. Incidents occurring after submission of a Bid Proposal, and with respect to the successful Bidder after the execution of a contract, shall be disclosed in a timely manner in a written statement to the Agency. For purposes of this subsection, timely means within thirty (30) days from the date of conviction, regardless of appeal rights.

Section 3 How to Submit a Bid Proposal: Format and Content Specifications

These instructions provide the format and technical specifications of the Bid Proposal and are designed to facilitate the submission of a Bid Proposal that is easy to understand and evaluate.

Important Note on Proposal Submissions: As described in the RFP Purpose section, Bidders may choose to bid on one or more services (CWES, FGCS/QRTP, and/or SAL) in one or more Service Areas. Bids may be submitted for:

- One service (CWES, FGCS, or SAL) in one Service Area;
- One service (CWES, FGCS, or SAL) in multiple (or all) Service Areas;
- Multiple (or all) services (CWES, FGCS, and/or SAL) in one Service Area; or
- Multiple (or all) services (CWES, FGCS and/or SAL) in multiple (or all) Service Areas.

Bidders are required to submit a separate Proposal for each service for which they intend to bid: CWES, FGCS, and SAL. A Bidder submitting a Proposal for one service will submit only one Proposal regardless of the number of Service Areas proposed. A Bidder submitting Proposals for two services will submit two separate Proposals regardless of the number of Service Areas being proposed. A Bidder submitting Proposals for all three services will submit three separate Proposals regardless of the number of Service Areas being proposed. If bidding on multiple Service Areas for a service (CWES, FGCS, or SAL), one Proposal (per service) will encompass all the Service Areas for which the Bidder intends to bid, however, Service Area specific topics are required to be addressed in the response.

The following information applies to each separate Proposal. Proposals for multiple services (CWES, FGCS, and SAL) may not be combined.

3.1 Bid Proposal Formatting.

Subject	Specifications
Paper Size	8.5" x 11" paper (one side only). Charts or graphs may be provided on legal-sized paper.
Font	Bid Proposals must be typewritten. The font must be 11 point or larger (excluding charts, graphs, or diagrams). Acceptable fonts include Times New Roman, Calibri and Arial.
Page Limit	Pages included in Proposal Tab 3 and any attachments the Bidder creates in a "Tab 3 Attachments" section are limited as described below. See Section 3.2 for further information about Tab 2 Attachments. There will be page limits in place for the Technical Response for FGCS/QRTP, CWES, and SAL (Attachments N, O, P). <ul style="list-style-type: none"> • The Page limit for CISR Attachment N - CWES Technical Proposal Template is 100 pages. • The Page limit for CISR Attachment O - FGCS/QRTP Technical Proposal Template is 200 pages. • The Page limit for CISR Attachment P - SAL Technical Proposal Template is 100 pages.
Pagination	All pages in Proposal Tabs 1-3 are to be sequentially numbered from beginning to end (do not number these Proposal sections independently of each other). The contents in Proposal Tab 6 may be numbered independently of other sections.
Bid Proposal General Composition	<ul style="list-style-type: none"> • Technical Proposals submitted in multiple volumes shall be numbered in the following fashion: 1 of 4, 2 of 4, etc. • Bid Proposals must be bound and use tabs to label sections.

Subject	Specifications
Envelope Contents and Labeling	<ul style="list-style-type: none"> • Envelopes shall be addressed to the Issuing Officer. • The envelope containing the original Bid Proposal shall be labeled “original.”
Number of Hard Copies	Submit one (1) original hard copy of the Proposal. The original hard copy must contain original signatures.
USB Flash Drive	<ul style="list-style-type: none"> • The Technical Proposal must be provided on separate USB flash drives. Bidders shall submit <u>5</u> flash drives, each with a copy identical to the content of the original hard copy of the Technical Proposal. • The Technical Proposal must be saved in less than three files, with a preference for the entire Technical Proposal in one file. Proposals shall be provided in either PDF or Microsoft Word format. Files shall be text-based and not scanned image(s) and shall be searchable and not password protected or contain restrictions that prevent copying, saving, highlighting, or printing of the contents.
Request for Confidential Treatment	<p>Requests for confidential treatment of any information in a Bid Proposal must meet these specifications:</p> <ul style="list-style-type: none"> • The Bidder will complete the appropriate section of the Primary Bidder Detail Form & Certification which requires the specific statutory citation supporting the request for confidential treatment and an explanation of why disclosure of the information is not in the best interest of the public. • The Bidder shall submit one complete paper copy of the Bid Proposal from which confidential information has been redacted. This copy shall be clearly labeled on the cover as a “public copy” and each page upon which confidential information appears shall be conspicuously marked as containing confidential information. The confidential material shall be redacted in such a way as to allow the public to determine the general nature of the material removed. To the extent possible, pages should be redacted sentence by sentence unless all material on a page is clearly confidential under the law. The Bidder shall not identify the entire Bid Proposal as confidential. The Bidder shall submit a USB flash drive containing an electronic copy of the Bid Proposal from which confidential information has been redacted. This USB flash drive shall be clearly marked as a “public copy”. • The Technical Proposal must be saved in less than three files, with a preference for the entire Technical Proposal in one file. Proposals shall be provided in either PDF or Microsoft Word format. Files shall be text-based and not scanned image(s) and shall be searchable and not password protected or contain restrictions that prevent copying, saving, highlighting, or printing of the contents.
Exceptions to RFP/Contract Language	<p>If the Bidder objects to any term or condition of the RFP or attached Sample Contract, specific reference to the RFP page and section number shall be made in the Primary Bidder Detail & Certification Form. In addition, the Bidder shall set forth in its Bid Proposal the specific language it proposes to include in place of the RFP or contract provision and cost savings to the Agency should the Agency accept the proposed language.</p> <p>The Agency reserves the right to either execute a contract without further negotiation with the successful Bidder or to negotiate contract terms with the selected Bidder if the best interests of the Agency would be served.</p>

3.2 Contents and Organization of Technical Proposal.

This section describes the information that must be in the Technical Proposal. Bid Proposals should be organized into sections **in the same order provided here**. Hard copies of Bid Proposals should use tabs to separate each section. If a Bidder chooses to provide information in attachments to respond to any section below, please create a new tabbed attachment section immediately behind the applicable section. For example, to add attachments related to information asked for in Section 3.2.2 Information to Include Behind Tab 2: Bidder's Approach to Meeting Deliverables, the Bidder would create a new tab in the Technical Proposal that is called Tab 2 Attachments and place the attachment(s) there. The Bidder would follow suit by creating new tabbed sections for attachments created to respond to any other section below in their bid proposal.

3.2.1 Information to Include Behind Tab 1: Proposal Table of Contents.

The Bid Proposal must contain a table of contents.

3.2.2 Information to Include Behind Tab 2: Bidder's Approach to Meeting Deliverables.

The Bidder shall complete the **Technical Response Template** for the services (CWES, FGCS/QRTP, and/or SAL) for which the Bidder intends to offer. The respective Technical Response templates are included as Attachment N (CWES), Attachment O (FGCS/QRTP), and Attachment P (SAL). Completion and submission of this document, along with the rest of the Technical Proposal described in Section 3.2, is a requirement for a complete Proposal. Bidder shall address each Deliverable that the successful Contractor will perform as listed in the Technical Response Template (Attachments N, O, P), by detailing the Bidder's planned approach to meeting each Contractor Deliverable. Bid responses should provide sufficient detail so that the Agency can understand and evaluate the Bidder's approach, and should not merely repeat the Deliverable.

Bidders are given wide latitude in the degree of detail they offer or the extent to which they reveal plans, designs, examples, processes, and procedures. Bidders do not need to address any responsibilities that are specifically designated as Agency responsibilities.

Note:

- Bid Proposals shall identify any deviations from the specifications the Bidder cannot satisfy.
- Bid Proposals shall not contain promotional or display materials unless specifically required.
- Any diagrams, certificates, graphics, tables or other exhibits referenced in the relevant Technical Proposal answer field should be included behind Tab 2 as a legible accurately referenced Attachment.
 - For example, the Background Experience Section of the Technical Proposal Documents request a Matrix be created as well as 3 Letters of Reference among other things. Please include your Matrix, the 3 Letters of Reference, and any other exhibits required by the Technical Proposals as referenced Attachments in Tab 2 after your Technical Proposal(s).

If a Bidder proposes more than one method of meeting the RFP requirements, each method must be drafted and submitted as separate Bid Proposals. Each will be evaluated separately.

3.2.3 Information to Include Behind Tab 3: RFP Forms.

The forms listed below are attachments to this RFP. Fully complete and return these forms behind Tab 6:

- Attachment A - Release of Information Form
- Attachment B - Primary Bidder Detail & Certification Form
- Attachment C - Subcontractor Disclosure Form (one for each proposed subcontractor)
- Attachment E - Certification and Disclosure Regarding Lobbying

Section 4 Evaluation Of Bid Proposals

Important Note about Evaluations: As described in the RFP Purpose section, Bidders may choose to bid on one or more services (CWES, FGCS/QRTP, and/or SAL) in one or more Service Areas. Bidders are required to submit a separate Proposal for each service for which they intend to bid: CWES, FGCS, and SAL. Each Service (CWES, FGCS/QRTP, SAL) will be evaluated separately and independently. The following information applies separately to the evaluations of Proposals submitted for each Service (CWES, FGCS/QRTP, SAL).

4.1 Introduction.

This section describes the evaluation process that will be used to determine which Bid Proposal provides the greatest benefit to the Agency. When making this determination, the Agency will not necessarily award a contract to the Bidder offering the lowest cost to the Agency or to the Bidder with the highest point total. Rather, a contract will be awarded to the Bidder that offers the greatest benefit to the Agency.

4.2 Evaluation Committee.

The Agency intends to conduct a comprehensive, fair, and impartial evaluation of Bid Proposals received in response to this RFP. In making this determination, the Agency will be represented by an evaluation committee.

There will be separate evaluation committees for each of the services (4 committees total). (CWES-1 committee, FGCS/QRTP-2 committees, SAL-1 committee).

4.3 Proposal Scoring and Evaluation Criteria.

The evaluation committee will use the method described in this section to assist with initially determining the relative merits of each Bid Proposal.

Scoring Guide.

Points will be assigned to each evaluation component as follows, unless otherwise designated:

4	Bidder has agreed to comply with the requirements and provided a clear and compelling description of how each requirement would be met, with relevant supporting materials. Bidder's proposed approach frequently goes above and beyond the minimum requirements and indicates superior ability to serve the needs of the Agency.
3	Bidder has agreed to comply with the requirements and provided a good and complete description of how the requirements would be met. Response clearly demonstrates a high degree of ability to serve the needs of the Agency.
2	Bidder has agreed to comply with the requirements and provided an adequate description of how the requirements would be met. Response indicates adequate ability to serve the needs of the Agency.
1	Bidder has agreed to comply with the requirements and provided some details on how the requirements would be met. Response does not clearly indicate if all the needs of the Agency will be met.
0	Bidder has not addressed any of the requirements or has provided a response that is limited in scope, vague, or incomplete. Response did not provide a description of how the Agency's needs would be met.

Technical Proposal Components.

Proposed Beds by Service

Bidders shall indicate the number of beds proposed for each bed type and/or Service Area using the Technical Response Template (Attachments N, O, P). The Agency will decide the number of beds per contract after contract award. The number of contracted beds per Contractor may differ from the number of beds proposed by the Bidder.

When Bid Proposals are evaluated, the total points for each component (*Multiple Service Provider Preference, Common Technical Proposal, Service Area Specific Technical Proposal*) are comprised of the component's assigned weight multiplied by the score the Bid Proposal earns. Points for all components will be added together. The evaluation components, including maximum points that may be awarded, are as follows:

Multiple Service Provider Preference:

Each of the Technical Proposals CWES, FGCS/ Q RTP, and SAL (Attachments N, O, P) also include a section that provides additional points to Bidders who are proposing more than one service. If a provider is bidding 2 Services (CWES, FGCS/Q RTP, or SAL) the Bidder will have 8 points added. If the Bidder is proposing all three services, they will have additional 8 points (total 16 points) added to their score.

The SAL Technical Proposal also provides an additional 8 points to providers who are offering Cluster and Scattered sites in at least one service area.

Common Technical Proposal:

For each Bidder, there will be a Common Technical Proposal totaling a possible One Thousand Five Hundred Sixty (1560) points as shown below for each Service. These Common Technical Proposal points will be allocated to the Respondent's proposal regardless of Service Areas covered.

Service Area Specific Technical Proposal:

Additionally, there will be a Service Area-Specific Technical Proposal for every Service Area the Bidder chooses to bid for, totaling a possible One hundred twenty (120) points per Service Area as shown below.

For each Service Area, the Respondent's total technical proposal score will be the sum of its Multiple Service Provider Preference (maximum of 16 for CWES and Q RTP, and maximum of 24 for SAL), Common Technical Proposal score (a maximum of 1560), and its Service Area Specific Technical Score for that Service Area (a maximum of 120).

The evaluation components are separate by Service and are as follows (See Attachments N (CWES), O (FGCS), P (SAL) Technical Response Templates for more information):

Attachment N - CWES – Technical Proposal

Name of Bidder:			
<u>Technical Response Template Components</u>	<u>Weight</u>	<u>Score (0-4)</u>	<u>Potential Maximum Points</u>
<i>Multiple Service Providers Preference</i>			
Multiple Services (2 services = if No enter 0, if Yes enter 1)	8		8
Multiple Services (2 services = if No enter 0, if Yes enter 1)	8		8
<i>Multiple Services Additional points Total</i>			16
<i>Common Technical Proposal</i>			
Background/Experience 3.2.4	40		160

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR)

Agency Model of Practice, JCS Model of Practice, FF Blueprint for Iowa's Future Child Welfare System	10		40
1.3.1 Service Area Coverage	20		80
1.3.2 Collaboration and Consultation	20		80
1.3.3.2 Program Administration	60		240
1.3.3.3 One Caseworker Model	20		80
1.3.3.4 Individual Child Development and Life Skills	20		80
1.3.3.5 Family and Community Connections	30		120
1.3.3.6 Crisis Intervention and Stabilization	10		40
1.3.3.7 Reintegration Planning	20		80
1.3.3.8 Education	20		80
1.3.3.9 Physical Health	10		40
1.3.3.10 Mental/Behavioral Health and Clinical Supports	10		40
1.3.3.11 Training	10		40
1.3.3.12 Contractor Reports and Data	10		40
1.3.3.13 Financial Management	10		40
1.3.3.14 Staffing	30		120
1.3.3.6.1 Joint Quality Improvement Activities	10		40
1.3.6.2 Dispute Resolution Protocol for Service Provision	5		20
1.3.6.3 Implementation Activities	5		20
1.3.6.8 Addressing Deficiencies	5		20
Cultural Equity Alliance (CEA) provided in Attachment I	15		60
Total Common Technical Proposal			1560
Service Area Specific Technical Proposal			
Service Area Specific – Service Area 1	30		120
Service Area Specific – Service Area 2	30		120
Service Area Specific – Service Area 3	30		120
Service Area Specific – Service Area 4	30		120
Service Area Specific – Service Area 5	30		120
Total Score by Service Area (Multiple Service Provider Preference + Common + Specific)			
Total – Service Area 1			1696
Total – Service Area 2			1696
Total – Service Area 3			1696
Total – Service Area 4			1696
Total – Service Area 5			1696

Attachment O - FGCS – Technical Proposal

Name of Bidder:			
<u>Technical Response Template Components</u>	<u>Weight</u>	<u>Score (0-4)</u>	<u>Potential Maximum Points</u>
<i>Multiple Service Providers Preference</i>			
Multiple Services (2 services = if No enter 0, if Yes enter 1)	8		8
Multiple Services (2 services = if No enter 0, if Yes enter 1)	8		8
<i>Multiple Services Additional points Total</i>			16
<i>Common Technical Proposal</i>			
Background/Experience	40		160
Agency Model of Practice, JCS Model of Practice, FF Blueprint for Iowa's Future Child Welfare System	10		40
1.3.1 Service Area Coverage	20		80
1.3.2 Collaboration and Consultation	20		80
1.3.4.2 Program Administration	60		240
1.3.4.3 One Caseworker Model	20		80
1.3.4.4 Individual Child Development and Life Skills	20		80
1.3.4.5 Family and Community Connections	30		120
1.3.4.6 Crisis Intervention and Stabilization	10		40
1.3.4.7 Reintegration Planning	20		80
1.3.4.8 Education	20		80
1.3.4.9 Physical Health	10		40
1.3.4.10 Mental/Behavioral Health and Clinical Supports	10		40
1.3.4.11 Training	10		40
1.3.4.12 Contractor Reports and Data	10		40
1.3.4.13 Financial Management	10		40
1.3.4.14 Staffing	30		120
1.3.3.6.1 Joint Quality Improvement Activities	10		40
1.3.6.2 Dispute Resolution Protocol	5		20
1.3.6.3 Implementation Activities	5		20
1.3.6.8 Addressing Deficiencies	5		20
Cultural Equity Alliance (CEA) provided in Attachment I	15		60
<i>Total Common Technical Proposal</i>			1560
<i>Service Area Specific Technical Proposal</i>			
Service Area Specific – Service Area 1	30		120
Service Area Specific – Service Area 2	30		120
Service Area Specific – Service Area 3	30		120
Service Area Specific – Service Area 4	30		120

Service Area Specific – Service Area 5	30		120
Total Score by Service Area (Multiple Service Provider Preference + Common + Specific)			
Total – Service Area 1			1696
Total – Service Area 2			1696
Total – Service Area 3			1696
Total – Service Area 4			1696
Total – Service Area 5			1696

Attachment P - SAL Technical Proposal

Name of Bidder:			
<u>Technical Response Template Components</u>	<u>Weight</u>	<u>Score (0-4)</u>	<u>Potential Maximum Points</u>
Multiple Services Additional Points			
Multiple Services (2 services = if No enter 0, if Yes enter 1)	8		8
Multiple Services (3 services = if No enter 0, if Yes enter 1)	8		8
Points for Cluster and Scattered within at least one service area (if No enter 0, if Yes enter 1)	8		8
Multiple Services Additional Points Total			24
Common Technical Proposal			
Background/Experience	40		160
Agency Model of Practice, JCS Model of Practice, FF Blueprint for Iowa's Future Child Welfare System	10		40
1.3.1 Service Area Coverage	20		80
1.3.2 Collaboration and Consultation	20		80
1.3.5.2 Program Administration	60		240
1.3.5.3 One Caseworker Model	20		80
1.3.5.4 Individual Child Development and Life Skills	20		80
1.3.5.5 Family and Community Connections	30		120
1.3.5.6 Crisis Intervention and Stabilization	10		40
1.3.5.7 Transition Planning	20		80
1.3.5.8 Education	20		80
1.3.5.9 Physical Health	10		40
1.3.5.10 Mental/Behavioral Health and Clinical Supports	10		40

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR)

1.3.5.11 Training	10		40
1.3.5.12 Contractor Reports and Data	10		40
1.3.5.13 Financial Management	10		40
1.3.5.14 Staffing	30		120
1.3.3.6.1 Joint Quality Improvement Activities	10		40
1.3.6.2 Dispute Resolution Protocol	5		20
1.3.6.3 Implementation Activities	5		20
1.3.6.8 Addressing Deficiencies	5		20
Cultural Equity Alliance (CEA) provided in Attachment I	15		60
Total Common Technical Proposal			1560
Service Area Specific Technical Proposal			
Service Area Specific – Service Area 1	30		120
Service Area Specific – Service Area 2	30		120
Service Area Specific – Service Area 3	30		120
Service Area Specific – Service Area 4	30		120
Service Area Specific – Service Area 5	30		120
Total Score (Multiple Service Provider Preference +Common + Specific)			
Total – Service Area 1			1704
Total – Service Area 2			1704
Total – Service Area 3			1704
Total – Service Area 4			1704
Total – Service Area 5			1704

4.4 Recommendation of the Evaluation Committee.

The evaluation committee shall present a final ranking and recommendation(s) to the Division Administrator for consideration. In making this recommendation, the committee is not bound by any scores or scoring system used to assist with initially determining the relative merits of each Bid Proposal. This recommendation may include, but is not limited to, the name of one or more Bidders recommended for selection or a recommendation that no Bidder be selected. The Division Administrator shall consider the committee's recommendation when making the final decision but is not bound by the recommendation.

The Agency may award contracts to as many Bidders as necessary to meet the purpose of this RFP. The Agency reserves the right to select bidders, make awards, determine the number of beds awarded to each selected Bidder, and fund resulting Contracts based on the needs of the Agency, Service Areas, JCS, and the Children and families to be served. The Agency will decide the number of beds per contract after contract award.

Attachment A: Release of Information

(Return this completed form behind Tab 6 of the Bid Proposal.)

_____ (name of Bidder) hereby authorizes any person or entity, public or private, having any information concerning the Bidder’s background, including but not limited to its performance history regarding its prior rendering of services similar to those detailed in this RFP, to release such information to the Agency.

The Bidder acknowledges that it may not agree with the information and opinions given by such person or entity in response to a reference request. The Bidder acknowledges that the information and opinions given by such person or entity may hurt its chances to receive contract awards from the Agency or may otherwise hurt its reputation or operations. The Bidder is willing to take that risk. The Bidder agrees to release all persons, entities, the Agency, and the State of Iowa from any liability whatsoever that may be incurred in releasing this information or using this information.

Printed Name of Bidder Organization

Signature of Authorized Representative

Date

Printed Name

Attachment B: Primary Bidder Detail & Certification Form

(Return this completed form behind Tab 6 of the Proposal. If a section does not apply, label it "not applicable".)

Primary Contact Information (individual who can address issues re: this Bid Proposal)	
Name:	
Address:	
Tel:	
Fax:	
E-mail:	
Primary Bidder Detail	
Business Legal Name ("Bidder"):	
"Doing Business As" names, assumed names, or other operating names:	
Parent Corporation Name and Address of Headquarters, if any:	
Form of Business Entity (i.e., corp., partnership, LLC, etc.):	
State of Incorporation/organization:	
Primary Address:	
Tel:	
Local Address (if any):	
Addresses of Major Offices and other facilities that may contribute to performance under this RFP/Contract:	
Number of Employees:	
Number of Years in Business:	
Primary Focus of Business:	
Federal Tax ID:	
DUNS #:	
Bidder's Accounting Firm:	
If Bidder is currently registered to do business in Iowa, provide the Date of Registration:	
Do you plan on using subcontractors if awarded this Contract? {If "YES," submit a Subcontractor Disclosure Form for each proposed subcontractor.}	
	(YES/NO)

Request for Confidential Treatment (See Section 3.1)		
Check Appropriate Box: <input type="checkbox"/> Bidder Does Not Request Confidential Treatment of Bid Proposal <input type="checkbox"/> Bidder Requests Confidential Treatment of Bid Proposal		
Location in Bid Proposal (Tab/Page)	Specific Grounds in Iowa Code Chapter 22 or Other Applicable Law Which Supports Treatment of the Information as Confidential	Justification of Why Information Should Be Kept in Confidence and Explanation of Why Disclosure Would Not Be in The Best Interest of the Public

Exceptions to RFP/Contract Language (See Section 3.1)			
RFP Section and Page	Language to Which Bidder Takes Exception	Explanation and Proposed Replacement Language:	Cost Savings to the Agency if the Proposed Replacement Language is Accepted

PRIMARY BIDDER CERTIFICATIONS

1. **BID PROPOSAL CERTIFICATIONS. By signing below, Bidder certifies that:**
 - 1.1 Bidder specifically stipulates that the Bid Proposal is predicated upon the acceptance of all terms and conditions stated in the RFP and the Sample Contract without change except as otherwise expressly stated in the Primary Bidder Detail & Certification Form. Objections or responses shall not materially alter the RFP. All changes to proposed contract language, including deletions, additions, and substitutions of language, must be addressed in the Bid Proposal. The Bidder accepts and shall comply with all Contract Terms and Conditions contained in the Sample Contract without change except as set forth in the Contract;
 - 1.2 Bidder has reviewed the Additional Certifications, which are incorporated herein by reference, and by signing below represents that Bidder agrees to be bound by the obligations included therein;
 - 1.3 Bidder has received any amendments to this RFP issued by the Agency;
 - 1.4 No cost or pricing information has been included in the Bidder’s Technical Proposal;
 - 1.5 If Bidder requests confidential treatment of any information submitted in its Proposal, the Bidder expressly acknowledges and agrees that the Agency’s evaluation document(s) may reference information of which the Bidder requested confidential treatment in the Bid Proposal. These Agency evaluation documents may then be in the public domain and be open to inspection by interested parties upon the Agency’s issuance of a Notice of Intent to Award. The Agency will not redact information or references to information in evaluation documents even in instances which a Bidder requested confidential treatment in the Bid Proposal; and,
 - 1.6 The person signing this Bid Proposal certifies that he/she is the person in the Bidder’s organization responsible for, or authorized to make decisions regarding the prices quoted and, Bidder guarantees the availability of the services offered and that all Bid Proposal terms, including price, will remain firm until a contract has been executed for the services contemplated by this RFP or one year from the issuance of this RFP, whichever is earlier.

2. SERVICE AND REGISTRATION CERTIFICATIONS. By signing below, Bidder certifies that:

- 2.1 Bidder certifies that the Bidder’s organization has sufficient personnel and resources available to provide all services proposed by the Bid Proposal, and such resources will be available on the date the RFP states services are to begin. Bidder guarantees personnel proposed to provide services will be the personnel providing the services unless prior approval is received from the Agency to substitute staff;
- 2.2 Bidder certifies that if the Bidder is awarded the contract and plans to utilize subcontractors at any point to perform any obligations under the contract, the Bidder will (1) notify the Agency in writing prior to use of the subcontractor, and (2) apply all restrictions, obligations, and responsibilities of the resulting contract between the Agency and contractor to the subcontractors through a subcontract. The contractor will remain responsible for all Deliverables provided under this contract;
- 2.3 Bidder either is currently registered to do business in Iowa or agrees to register if Bidder is awarded a Contract pursuant to this RFP;
- 2.4 Bidder certifies it is either: 1) registered or will become registered with the Iowa Department of Revenue to collect and remit Iowa sales and use taxes as required by Iowa Code chapter 423; or 2) not a “retailer” of a “retailer maintaining a place of business in this state” as those terms are defined in Iowa Code subsections 423.1(42) & (43). The Bidder also acknowledges that the Agency may declare the Bid Proposal void if the above certification is false. Bidders may register with the Department of Revenue online at: <http://www.state.ia.us/tax/business/business.html>; and,
- 2.5 Bidder certifies it will comply with Davis-Bacon requirements if applicable to the resulting contract.

3. EXECUTION.

By signing below, I certify that I have the authority to bind the Bidder to the specific terms, conditions and technical specifications required in the Agency’s Request for Proposals (RFP) and offered in the Bidder’s Proposal. I understand that by submitting this Bid Proposal, the Bidder agrees to provide services described herein which meet or exceed the specifications of the Agency’s RFP unless noted in the Bid Proposal and at the prices quoted by the Bidder. The Bidder has not participated, and will not participate, in any action contrary to the anti-competitive obligations outlined in the Additional Certifications. I certify that the contents of the Bid Proposal are true and accurate and that the Bidder has not made any knowingly false statements in the Bid Proposal.

Signature:	
Printed Name/Title:	
Date:	

Attachment C: Subcontractor Disclosure Form

*(Return this completed form behind Tab 6 of the Bid Proposal. Fully complete a form for **each** proposed subcontractor. If a section does not apply, label it “not applicable.” If the Bidder does not intend to use subcontractor(s), this form does not need to be returned.)*

Primary Bidder (“Primary Bidder”):	
Subcontractor Contact Information (individual who can address issues re: this RFP)	
Name:	
Address:	
Tel:	
Fax:	
E-mail:	

Subcontractor Detail	
Subcontractor Legal Name (“Subcontractor”):	
“Doing Business As” names, assumed names, or other operating names:	
Form of Business Entity (i.e., corp., partnership, LLC, etc.)	
State of Incorporation/organization:	
Primary Address:	
Tel:	
Fax:	
Local Address (if any):	
Addresses of Major Offices and other facilities that may contribute to performance under this RFP/Contract:	
Number of Employees:	
Number of Years in Business:	
Primary Focus of Business:	
Federal Tax ID:	
Subcontractor’s Accounting Firm:	
If Subcontractor is currently registered to do business in Iowa, provide the Date of Registration:	
Percentage of Total Work to be performed by this Subcontractor pursuant to this RFP/Contract.	
General Scope of Work to be performed by this Subcontractor	
Detail the Subcontractor’s qualifications for performing this scope of work	

By signing below, Subcontractor agrees to the following:

1. Subcontractor has reviewed the RFP, and Subcontractor agrees to perform the work indicated in this Bid Proposal if the Primary Bidder is selected as the winning Bidder in this procurement;
2. Subcontractor has reviewed the Additional Certifications and by signing below confirms that the Certifications are true and accurate and Subcontractor will comply with all such Certifications;
3. Subcontractor recognizes and agrees that if the Primary Bidder enters into a contract with the Agency as a result of this RFP, all restrictions, obligations, and responsibilities of the contractor under the contract shall also apply to the subcontractor;
4. Subcontractor agrees that it will register to do business in Iowa before performing any services pursuant to this contract, if required to do so by Iowa law; and,
5. Subcontractor certifies that it will comply with Davis-Bacon requirements if applicable to the resulting contract.

The person signing this Subcontractor Disclosure Form certifies that he/she is the person in the Subcontractor's organization responsible for or authorized to make decisions regarding the prices quoted and the Subcontractor has not participated, and will not participate, in any action contrary to the anti-competitive obligations outlined in the Additional Certifications.

I hereby certify that the contents of the Subcontractor Disclosure Form are true and accurate and that the Subcontractor has not made any knowingly false statements in the Form.

Signature for Subcontractor:	
Printed Name/Title:	
Date:	

Attachment D: Additional Certifications
(Do not return this page with the Bid Proposal.)

1. CERTIFICATION OF INDEPENDENCE AND NO CONFLICT OF INTEREST

By submission of a Bid Proposal, the Bidder certifies (and in the case of a joint proposal, each party thereto certifies) that:

1. The Bid Proposal has been developed independently, without consultation, communication or agreement with any employee or consultant of the Agency who has worked on the development of this RFP, or with any person serving as a member of the evaluation committee;
2. The Bid Proposal has been developed independently, without consultation, communication or agreement with any other Bidder or parties for the purpose of restricting competition;
3. Unless otherwise required by law, the information in the Bid Proposal has not been knowingly disclosed by the Bidder and will not knowingly be disclosed prior to the award of the contract, directly or indirectly, to any other Bidder;
4. No attempt has been made or will be made by the Bidder to induce any other Bidder to submit or not to submit a Bid Proposal for the purpose of restricting competition;
5. No relationship exists or will exist during the contract period between the Bidder and the Agency that interferes with fair competition or is a conflict of interest.
6. The Bidder and any of the Bidder's proposed subcontractors have no other contractual relationships which would create an actual or perceived conflict of interest.

2. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION -- LOWER TIER COVERED TRANSACTIONS

By signing and submitting this Bid Proposal, the Bidder is providing the certification set out below:

1. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the Bidder knowingly rendered an erroneous certification, in addition to other remedies available to the federal government the Agency or Agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
2. The Bidder shall provide immediate written notice to the person to whom this Bid Proposal is submitted if at any time the Bidder learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
3. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principle, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this Proposal is submitted for assistance in obtaining a copy of those regulations.
4. The Bidder agrees by submitting this Proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the Agency or Agency with which this transaction originated.
5. The Bidder further agrees by submitting this Proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

6. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. A participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
7. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
8. Except for transactions authorized under paragraph 4 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, the Agency or Agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND/OR VOLUNTARY EXCLUSION--LOWER TIER COVERED TRANSACTIONS

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

4. CERTIFICATION OF COMPLIANCE WITH PRO-CHILDREN ACT OF 1994

By signing and submitting this Bid Proposal, the Bidder is providing the certification set out below:

The Bidder must comply with Public Law 103-227, Part C Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act). This Act requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted 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. Federal programs include grants, cooperative agreements, loans or loan guarantees, and contracts. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such federal funds. The law does not apply to children's services provided in private residences; portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable federal funds is Medicare or Medicaid; or facilities (other than clinics) where WIC coupons are redeemed.

The Bidder further agrees that the above language will be included in any subawards that contain provisions for children's services and that all subgrantees shall certify compliance accordingly. Failure to comply with the provisions of this law may result in the imposition of a civil monetary penalty of up to \$1000 per day.

5. CERTIFICATION REGARDING DRUG FREE WORKPLACE

1. **Requirements for Contractors Who are Not Individuals.** If the Bidder is not an individual, by signing and submitting this Bid Proposal the Bidder agrees to provide a drug-free workplace by:
 - a. publishing a statement notifying employees that the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited in the person's workplace and specifying the actions that will be taken against employees for violations of such prohibition;

- b. establishing a drug-free awareness program to inform employees about:
 - (1) the dangers of drug abuse in the workplace;
 - (2) the person's policy of maintaining a drug-free workplace;
 - (3) any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) the penalties that may be imposed upon employees for drug abuse violations;
 - c. making it a requirement that each employee to be engaged in the performance of such contract be given a copy of the statement required by subparagraph (a);
 - d. notifying the employee in the statement required by subparagraph (a), that as a condition of employment on such contract, the employee will:
 - (1) abide by the terms of the statement; and
 - (2) notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than 5 days after such conviction;
 - e. notifying the contracting Agency within 10 days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction;
 - f. imposing a sanction on, or requiring the satisfactory participation in a drug abuse assistance or rehabilitation program by, any employee who is so convicted, as required by 41 U.S.C. § 703; and
 - g. making a good faith effort to continue to maintain a drug-free workplace through implementation of subparagraphs (a), (b), (c), (d), (e), and (f).
2. **Requirement for Individuals.** If the Bidder is an individual, by signing and submitting this Bid Proposal the Bidder agrees to not engage in the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance in the performance of the contract.
 3. **Notification Requirement.** The Bidder shall, within 30 days after receiving notice from an employee of a conviction pursuant to 41 U.S.C. § 701(a)(1)(D)(ii) or 41 U.S.C. § 702(a)(1)(D)(ii):
 - a. take appropriate personnel action against such employee up to and including termination; or
 - b. require such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate Agency.

6. NON-DISCRIMINATION

The Bidder does not discriminate in its employment practices with regard to race, color, religion, age (except as provided by law), sex, marital status, political affiliation, national origin, or handicap.

Attachment E: Certification and Disclosure Regarding Lobbying Attachment
(Return this executed form behind Tab 6 of the Bid Proposal.)

Instructions:

Title 45 of the Code of Federal Regulations, Part 93 requires the bidder to include a certification form, and a disclosure form, if required, as part of the bidder's proposal. Award of the federally funded contract from this RFP is a Covered Federal action.

- 1) The bidder shall file with the Agency this certification form, as set forth in Appendix A of 45 CFR Part 93, certifying the bidder, including any subcontractor(s) at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) have not made, and will not make, any payment prohibited under 45 CFR § 93.100.
- 2) The bidder shall file with the Agency a disclosure form, set forth in Appendix B of 45 CFR Part 93, in the event the bidder or subcontractor(s) at any tier (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) has made or has agreed to make any payment using non-appropriated funds, including profits from any covered Federal action, which would be prohibited under 45 CFR § 93.100 if paid for with appropriated funds. All disclosure forms shall be forwarded from tier to tier until received by the bidder and shall be treated as a material representation of fact upon which all receiving tiers shall rely.

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an Agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

Child Welfare Crisis Intervention, Stabilization, and Reunification Services (CISR)

Submission of this statement is a pre-requisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 for each such failure.

I certify that the contents of this certification are true and accurate and that the bidder has not made any knowingly false statements in the Bid Proposal. I am checking the appropriate box below regarding disclosures required in Title 45 of the Code of Federal Regulations, Part 93.

- The bidder is NOT including a disclosure form as referenced in this form's instructions because the bidder is NOT required by law to do so.
- The bidder IS filing a disclosure form with the Agency as referenced in this form's instructions because the bidder IS required by law to do so. If the bidder is filing a disclosure form, place the form immediately behind this in the Proposal.

Signature:	
Printed Name/Title:	
Date:	

Attachments Specific to this RFP:

Attachment A - Release of Information
Attachment B - Primary Bidder Detail & Certification Form
Attachment C - Subcontractor Disclosure Form
Attachment D - Additional Certifications
Attachment E - Certification and Disclosure Regarding Lobbying Attachment
Attachment F - Service Map
Attachment G - FF Blueprint for Iowa's Future Child Welfare System
Attachment H - CWES Admission and Discharge Protocol
Attachment I - Cultural Equity Alliance (CEA) Guiding Principles 2020
Attachment J - CWES Intake Form
Attachment K - Standards of Family Interaction
Attachment L - Intent to Bid Form
Attachment M - Questions, Request for Clarifications, and Suggested Changes Template
Attachment N - CWES Technical Response Template
Attachment O - FGCS/QRTP Technical Response Template
Attachment P - SAL Technical Response Template
Attachment Q - Iowa Juvenile Court Services Model of Practice
Attachment R - Link to Families First Resources
Attachment S - CWES FGCS/QRTP and SAL DATA
Attachment T - IDA
Attachment U - Candidate Assessment tool
Attachment V - Link to Treatment Outcome Package (TOP) Resources
Attachment W - Positive Youth Development (PYD)
Attachment X - Motivational Interviewing
Attachment Y - DHS Child Welfare Model of Practice
Attachment Z - Discovering Connections
Attachment AA - Reasonable and Prudent Parent Standards
Attachment BB - IPRC Handout
Attachment CC - Specialized Delinquency Beds Training Narrative
Attachment DD - Contract Sample

Attachment DD: Sample Contract

(These contract terms contained in the Special Terms, General Terms, and Contingent Terms for Services Contracts are not intended to be a complete listing of all contract terms but are provided only to enable Bidders to better evaluate the costs associated with the RFP and the potential resulting contract. Bidders should plan on such terms being included in any contract entered into as a result of this RFP. See RFP Section 3.1 regarding Bidder exceptions to contract language.)

This is a sample form. DO NOT complete and return this attachment.

CONTRACT DECLARATIONS AND EXECUTION

RFP #	Contract #
ACFS24-001	<i>{To be completed when contract is drafted.}</i>

Title of Contract
<i>{To be completed when contract is drafted.}</i>

This Contract must be signed by all parties before the Contractor provides any Deliverables. The Agency is not obligated to make payment for any Deliverables provided by or on behalf of the Contractor before the Contract is signed by all parties. This Contract is entered into by the following parties:

Agency of the State (hereafter "Agency")	
Name/Principal Address of Agency: Iowa Department of Human Services 1305 E. Walnut Des Moines, IA 50319-0114	Agency Billing Contact Name / Address: <i>{To be completed when contract is drafted.}</i>
Agency Contract Manager (hereafter "Contract Manager") /Address ("Notice Address"): <i>{To be completed when contract is drafted.}</i>	Agency Contract Owner (hereafter "Contract Owner") / Address: <i>{To be completed when contract is drafted.}</i>

Contractor: (hereafter "Contractor")	
Legal Name: <i>{To be completed when contract is drafted.}</i>	Contractor's Principal Address: <i>{To be completed when contract is drafted.}</i>
Tax ID #: <i>{To be completed when contract is drafted.}</i>	Organized under the laws of: <i>{To be completed when contract is drafted.}</i>
Contractor's Contract Manager Name/Address ("Notice Address"): <i>{To be completed when contract is drafted.}</i>	Contractor's Billing Contact Name/Address: <i>{To be completed when contract is drafted.}</i>

Contract Information	
Start Date: <i>{To be completed when contract is drafted.}</i>	End Date of Base Term of Contract: End Date of Contract: <i>{To be completed when contract is drafted.}</i>
Possible Extension(s): <i>{To be completed when contract is drafted.}</i>	
Contract Contingent on Approval of Another Agency: Yes Which Agency? DHS	ISPO Number: <i>{To be completed when contract is drafted.}</i>
Contract Include Sharing SSA Data? Yes	DoIT Number: N/A

Contract Execution

This Contract consists of this Contract Declarations and Execution Section, the Special Terms, any Special Contract Attachments, the General Terms for Services Contracts, and the Contingent Terms for Service Contracts.

In consideration of the mutual covenants in this Contract and for other good and valuable consideration, the receipt, adequacy and legal sufficiency of which are hereby acknowledged, the parties have entered into this Contract and have caused their duly authorized representatives to execute this Contract.

SECTION 1: SPECIAL TERMS

1.1 Special Terms Definitions.

{To be completed when contract is drafted.}

1.2 Contract Purpose.

{To be completed when contract is drafted.}

1.3 Scope of Work.

1.3.1 Deliverables.

The Contractor shall provide the following:

{To be completed when contract is drafted.}

1.3.2 Performance Measures.

{To be completed when contract is drafted.}

1.3.3 Agency Responsibilities.

{To be completed when contract is drafted.}

1.3.4 Monitoring, Review, and Problem Reporting.

1.3.4.1 Agency Monitoring Clause. The Contract Manager or designee will:

- Verify Invoices and supporting documentation itemizing work performed prior to payment;
- Determine compliance with general contract terms, conditions, and requirements; and
- Assess compliance with Deliverables, performance measures, or other associated requirements based on the following:
 - *{To be completed when contract is drafted.}*

1.3.4.2 Agency Review Clause. The Contract Manager or designee will use the results of monitoring activities and other relevant data to assess the Contractor's overall performance and compliance with the Contract. At a minimum, the Agency will conduct a review semi-annually; however, reviews may occur more frequently at the Agency's discretion. As part of the review(s), the Agency may require the Contractor to provide additional data, may perform on-site reviews, and may consider information from other sources.

The Agency may require one or more meetings to discuss the outcome of a review. Meetings may be held in person. During the review meetings, the parties will discuss the Deliverables that have been provided or are in process under this Contract, achievement of the performance measures, and any concerns identified through the Agency's contract monitoring activities.

1.3.4.3 Problem Reporting. As stipulated by the Agency, the Contractor and/or Agency shall provide a report listing any problem or concern encountered. Records of such reports and other related communications issued in writing during the course of Contract performance shall be maintained by the parties. At the next scheduled meeting after a problem has been identified in writing, the party responsible for resolving the problem shall provide a report setting forth activities taken or to be taken to resolve the problem together with the anticipated completion dates of such activities. Any party may recommend alternative courses of action or changes that will facilitate problem resolution. The Contract Owner has final authority to approve problem-resolution activities.

The Agency's acceptance of a problem report shall not relieve the Contractor of any obligation under this Contract or waive any other remedy. The Agency's inability to identify the extent of a problem or the extent of damages incurred because of a problem shall not act as a waiver of performance or damages under this Contract.

1.3.4.4 Addressing Deficiencies. To the extent that Deficiencies are identified in the Contractor's performance and notwithstanding other remedies available under this Contract, the Agency may require the Contractor to develop and comply with a plan acceptable to the Agency to resolve the Deficiencies.

1.3.5 Contract Payment Clause.

1.3.5.1 Pricing. In accordance with the payment terms outlined in this section and the Contractor's completion of the Scope of Work as set forth in this Contract, the Contractor will be compensated as follows:

{To be completed when contract is drafted.}

1.3.5.2 Payment Methodology.

{To be completed when contract is drafted.}

1.3.5.3 Timeframes for Regular Submission of Initial and Adjusted Invoices. The Contractor shall submit an Invoice for services rendered in accordance with this Contract. Invoice(s) shall be submitted monthly. Unless a longer timeframe is provided by federal law, and in the absence of the express written consent of the Agency, all Invoices shall be submitted within six months from the last day of the month in which the services were rendered. All adjustments made to Invoices shall be submitted to the Agency within ninety (90) days from the date of the Invoice being adjusted. Invoices shall comply with all applicable rules concerning payment of such claims.

1.3.5.4 Submission of Invoices at the End of State Fiscal Year. Notwithstanding the timeframes above, and absent (1) longer timeframes established in federal law or (2) the express written consent of the Agency, the Contractor shall submit all Invoices to the Agency for payment by August 1st for all services performed in the preceding state fiscal year (the State fiscal year ends June 30).

1.3.5.5 Payment of Invoices. The Agency shall verify the Contractor's performance of the Deliverables and timeliness of Invoices before making payment. The Agency will not pay Invoices that are not considered timely as defined in this Contract. If the Contractor wishes for untimely Invoice(s) to be considered for payment, the Contractor may submit the Invoice(s) in accordance with instructions for the Long Appeal Board Process to the State Appeal Board for consideration. Instructions for this process may be found at:

http://www.dom.state.ia.us/appeals/general_claims.html.

The Agency shall pay all approved Invoices in arrears and in conformance with Iowa Code 8A.514. The Agency may pay in less than sixty (60) days, but an election to pay in less than sixty (60) days shall not act as an implied waiver of Iowa law.

1.3.5.6 Reimbursable Expenses. Unless otherwise agreed to by the parties in an amendment to the Contract that is executed by the parties, the Contractor shall not be entitled to receive any other payment or compensation from the State for any Deliverables provided by or on behalf of the Contractor pursuant to this Contract. The Contractor shall be solely responsible for paying all costs, expenses, and charges it incurs in connection with its performance under this Contract.

1.4 Insurance Coverage.

The Contractor and any subcontractor shall obtain the following types of insurance for at least the minimum amounts listed below:

Type of Insurance	Limit	Amount
General Liability (including contractual liability) written on occurrence basis	General Aggregate	\$2 Million
	Product/Completed Operations Aggregate	\$1 Million
	Personal Injury	\$1 Million
	Each Occurrence	\$1 Million
Automobile Liability (including any auto, hired autos, and non-owned autos)	Combined Single Limit	\$1 Million
Excess Liability, Umbrella Form	Each Occurrence	\$1 Million
	Aggregate	\$1 Million
Workers' Compensation and Employer Liability	As required by Iowa law	As Required by Iowa law
Property Damage	Each Occurrence	\$1 Million
	Aggregate	\$1 Million
Professional Liability	Each Occurrence	\$2 Million
	Aggregate	\$2 Million

1.5 Data and Security. If this Contract involves Confidential Information, the following terms apply:

1.5.1 Data and Security System Framework. The Contractor shall comply with either of the following:

- Provide certification of compliance with a minimum of one of the following security frameworks, if the Contractor is storing Confidential Information electronically: NIST SP 800-53, HITRUST version 9, COBIT 5, CSA STAR Level 2 or greater, or ISO 27001 prior to implementation of the system and again when the certification(s) expire,

or

- Provide attestation of a passed information security risk assessment, passed network penetration scans, and passed web application scans (when applicable) prior to implementation of the system and again annually thereafter. For purposes of this section, "passed" means no unresolved high or critical findings.

1.5.2 Vendor Security Questionnaire. If not previously provided to the Agency through a procurement process specifically related to this Contract, the Contractor shall provide a fully completed copy of the Agency's Vendor Security Questionnaire (VSQ).

1.5.3 Cloud Services. If using cloud services to store Agency Information, the Contractor shall comply with either of the following:

- Provide written designation of FedRAMP authorization with impact level moderate prior to implementation of the system, or
- Provide certification of compliance with a minimum of one of the following security frameworks: NIST SP 800-53, HITRUST version 9, COBIT 5, CSA STAR Level 2 or greater, or ISO 27001 prior to implementation of the system and again when the certification(s) expire.

1.5.4 Addressing Concerns. The Contractor shall timely resolve any outstanding concerns identified by the Agency regarding the Contractor's submissions required in this section.

1.6 Reserved. (Labor Standards Provisions.)

1.7 Incorporation of General and Contingent Terms.

1.7.1 General Terms for Service Contracts (“Section 2”). The version of the General Terms for Services Contracts Section posted to the Agency’s website at <https://dhs.iowa.gov/contract-terms> that is in effect as of the date of last signature in the Contract Declarations and Execution section, or a more current version if agreed to by amendment, is incorporated into the Contract by reference. The General Terms for Service Contracts may be referred to as Section 2.

The contract warranty period (hereafter "Warranty Period") referenced within the General Terms for Services Contracts is as follows: The term of this Contract, including any extensions.

1.7.2 Contingent Terms for Service Contracts (“Section 3”). The version of the Contingent Terms for Services Contracts posted to the Agency’s website at <https://dhs.iowa.gov/contract-terms> that is in effect as of the date of last signature in the Contract Declarations and Execution section, or a more current version if agreed to by amendment, is incorporated into the Contract by reference. The Contingent Terms for Service Contracts may be referred to as Section 3.

All of the terms set forth in the Contingent Terms for Service Contracts apply to this Contract unless indicated otherwise in the table below:

<p>Contract Payments include Federal Funds? Yes <i>{The items below will be completed if the Contract includes Federal Funds}</i> The Contractor for federal reporting purposes under this Contract is a: <i>{To be completed when contract is drafted.}</i> Office of Child Support Enforcement (“OCSE”) Funded Percentage: <i>{To be completed when contract is drafted.}</i> Federal Funds Include Food and Nutrition Service (FNS) funds? <i>{To be completed when contract is drafted.}</i> DUNS #: <i>{To be completed when contract is drafted.}</i> The Name of the Pass-Through Entity: <i>{To be completed when contract is drafted.}</i> CFDA #: <i>{To be completed when contract is drafted.}</i> Grant Name: <i>{To be completed when contract is drafted.}</i> Federal Awarding Agency Name: <i>{To be completed when contract is drafted.}</i></p>	
<p>Contractor a Business Associate? Yes</p>	<p>Contractor a Qualified Service Organization? Yes</p>
<p>Contractor subject to Iowa Code Chapter 8F? Unknown</p>	<p>Contract Includes Software (modification, design, development, installation, or operation of software on behalf of the Agency)? No</p>

1.8 Additional Terms. The Contractor shall comply with the following:
{To be completed when contract is drafted.}