



REQUEST FOR PROPOSALS FOR PARENTING EDUCATION SERVICES

SC01-24R

Issued by

THE HAMILTON COUNTY DEPARTMENT OF JOB & FAMILY SERVICES

222 E. CENTRAL PARKWAY

CINCINNATI, OHIO 45202

January 2024

RFP Conference:

Location: This conference is being held virtually – the call-in number is:

1 (614) 721-2972

Conference ID: 553 429 065#

Deadline for Proposal Registration: February 2, 2024, no later than noon EST

Due Date for Proposal Submission: On or Before March 1, 2024, no later than 11:00 a.m.

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REQUEST FOR PROPOSAL (RFP) PARENTING EDUCATION SERVICES

MISSION STATEMENT

We, the staff of the Hamilton County Department of Job & Family Services, provide services for our community today to enhance the quality of living for a better tomorrow.

1.0 REQUIREMENTS AND SPECIFICATIONS

1.1 Introduction & Purpose of the Request for Proposal

Hamilton County Department of Job & Family Services (HCJFS) is seeking proposals for the purchase of parenting education services for families active with HCJFS Children's Services. The Board of County Commissioners, Hamilton County, Ohio (BOCC) reserves the right to award Contracts for these services to multiple Providers and to award Contracts for all or any portion of the services requested herein. The Contract(s) shall be for an initial term of one (1) year ("Initial Term") with two (2) one (1) year renewal options ("Optional Renewal Terms") at the sole discretion of HCJFS.

If at any time during the Initial Term or any Optional Renewal Term, HCJFS determines service capacity needs to be expanded, then HCJFS may re-release this RFP. Any contracts awarded from a re-issued RFP(s) will expire at the same time as the contracts awarded under the initial RFP. All proposals submitted as part of a re-released RFP will be subject to and evaluated based upon the same criteria set forth in the initial RFP (plus any addenda issued as a part of the initial RFP).

Provider agrees that if selected by HCJFS under this RFP or any re-released RFP and if requested by HCJFS, that it will enter into an extension of the Contract for up to 180 days following the expiration of the term then in effect under the current terms, conditions and prices applicable at that point in time. This will allow HCJFS to make a seamless transition to any new Provider and mitigate negative impact for customers.

1.2 Scope of Service

HCJFS is seeking organizations to provide and coordinate a wide spectrum of community-based parenting education services for referred families with an active child welfare case in Hamilton County. Services provided need be relevant to the child welfare system and support the goals of safety, permanency, and well-being for children and families. These services will support and achieve the following goals/principals:

1. Demonstrate measurable change in parenting skills of parents and caretakers.
2. Changes will manifest through these agency goals:
 - A. Safely preserve the family unit through teaching and modeling interventions resulting in significant improvements in parent protective capacities and parent/child relationships, while reducing safety threats;
 - B. Safely reunite parents or guardians with the child(ren) by providing interventions resulting in significant improvements in parent protective capacity, parent/child relationships, while reducing safety threats.
 - C. Reduce the likelihood of the family having future involvement with child welfare system by increasing parental protective capacities, strengthening appropriate family bonding, and enhancing parents' abilities to effectively reduce or mitigate safety threats self-sufficiently.

Provider(s) will need to conduct an initial assessment of the parent, with input from the HCJFS caseworker and documentation, on each referred family to determine the most effective selection of services to support their success with achieving the above goals. Provider (s) will need to customize their assessment and service delivery to meet the individual needs of the parent including possible cognitive delays, physical disabilities, and mental health symptoms. The population utilizing these contractual services will present with a wide range of needs.

All services should be delivered within a model of trauma informed care and cultural competence, consistent with the legal framework of the child protection system and its values. HCJFS is seeking providers who utilize evidence-based practice models and other well-

supported models to provide in-home and community-based services. HCJFS seeks parenting services that address:

1. Physical abuse and neglect – prevention of and behavioral modification regarding;
2. Attachment – interpreting children’s behavioral signals and responding consistently with nurturance;
3. Discipline – education on positive methods, concepts, and the purpose of discipline; controlling anger; reasonable parental expectations; awareness of various cultural practices;
4. Trauma – how to identify parents’ own traumatic experiences as children and/or adults that affect their current parenting and attachment to their child (ren); responding to children who have experienced trauma; building resiliency in children and adults;
5. Child development – understanding child development and each individual child’s limitations and how this affects parenting practices; knowledge of age-appropriate expectations; empathy for child; education on child needs such as medical care;
6. Communication– developing healthy and safe ways of communicating to resolve conflict; using communication to enhance family functioning and bonding;
7. Roles and responsibility as a parent – parental motivation, ability to adapt and put aside one’s own needs. Addressing cognitive, mental, and physical limitations and the effects on their parenting and learn safe practices to parent their child (ren) without agency intervention;
8. Children with mental health needs, behavioral challenges, developmental delays, physical health concerns – how parenting is affected, and adaptive parenting techniques to meet these needs;
9. Parenting adolescents – how to deal with changes in the family and parenting style; responding to defiant and disruptive behaviors including those with delinquent behaviors;
10. Teen parents – modeling appropriate behaviors; essential safe parenting practices and skills, providing clear directives; addressing issues specific to teen culture;

11. Building safeguards for children – positive intervention by other adults in the child’s life; mentors, community support, developing a natural support network for the family system;
12. Working with parents to manage self-control, develop appropriate judgment and decision-making;
13. Self-Care – how the parent manages his/her own life; coping, stress management, and health; importance of mental health;
14. Substance use – how in-utero exposure can affect a child’s temperament and development, how it affects the entire family and ability to parent safely;
15. Domestic violence – education on the impact on the entire family and child safety, special focus on younger moms who may be more vulnerable;
16. Community and family support – assist the parent with learning how to build and utilize a safe support network within their community and family, and develop safety plans for themselves and children;
17. Co-parenting – engagement of non-residential parent and successful co-parenting practices and remaining child focused; and
18. LGBTQ – work with families with LGBTQ youth or family members, for support, acceptance, and advocacy.

Parenting education services are not a replacement for services specifically intended to treat or educate individuals regarding mental health, substance abuse, or domestic/intimate partner violence. HCJFS’ goal is to work with Providers who are able to deliver the entire continuum of services, however, reserves the right to award contracts to multiple successful Providers for all or some of the services proposed.

1.2.1 Population

The following data is provided for planning purposes only. HCJFS does not guarantee that the current service level will increase, decrease or remain the same. There were 400 referrals averaging 34 referrals per month during 2023. Referrals can vary from a single parent or caregiver

with one child, to one or two parents with multiple children of various ages. Participating children range in age primarily from birth to eight years, along with some children from nine to twelve years of age, and adolescents. Referrals may include parents who are involved in other services such as behavioral health services, substance abuse services, the criminal justice system and/or developmental disability services. Parents may present as low functioning, or borderline intellectual functioning.

The service level described herein is for information purposes only and is HCJFS' best estimate as to the number of customers that it will serve during the Initial Term. Provider understands that HCJFS is not making any guarantees or assurances as to the quantity of services it will purchase under the Contract.

1.2.2 Service Components and Business Deliverables

Provider(s) will begin with the initial assessment of the family's needs. Based on that initial assessment, the Provider will identify and manage enrollment into the specific components of that family's plan. The service components will:

1. Utilize evidence-based curriculum and best practices from both research and experience in the field that aim to demonstrate measurable change in parenting skills and protectiveness. Examples include (but are not limited to): Teaching-Family Model (TFM), Combined Parent-Child Cognitive-Behavioral Therapy (CPC-CBT), Triple P- Positive Parenting Program, Nurturing Parenting Program, Parent-Child Interaction Therapy (PCIT), Attachment and Bio-behavioral Catch-up (ABC) , Trauma-Informed Parent Management Training Oregon (Trauma-Informed PMTO), etc.;
2. Provide trauma-informed care in all aspects of service;
3. Focus on individualized services utilizing modeling, behavior specific service plans with defined outcomes specific to the needs of the family. Services will be family-centered, culturally competent and consistent with the legal framework and the safety practice model of the child protection system and its values;

4. Engage and partner with the parents and value the strengths of the family and honor their unique family circumstance. Recognize the parent's role in setting goals for improving their parenting skills and strengthening their family dynamics;
5. Consider the age, developmental needs, mental health, and behavior needs of the child (ren) in determining interventions. This includes but is not limited to use of child development curriculum and/or groups specific to parents with young children, adolescents, or other targeted needs;
6. Emphasize a holistic approach that emphasizes depth of understanding and real change in behavioral outcomes and provides for follow-up planning for parents to achieve the goals stated in section 1.2(B). Focus on engagement and measurable change in parenting skills, as opposed to attendance and completion of services;
7. Engage individuals and families "where they are," while also working towards self-sufficiency and promoting safe, resilient, strong families;
8. Provide options for facilitated groups, when indicated, to reduce isolation, to sustain what is learned in other service components, and/or to provide an initial base for learning;
9. Provide options for in-home programming, programming at provider location(s), and/or at community sites, such as churches, community centers, as appropriate, and may include virtual sessions to accommodate parents' needs, although in person is preferred and should be primary program delivery method;
10. Utilize individualized coaching and/or parent mentor with the child (ren) present to demonstrate and reinforce learned skills and areas of growth;
11. Include interaction between parents and children where feedback and coaching is given to the parent. Provide programming which is inclusive of the children in the family (i.e. age appropriate classes for children, parent/child interaction therapy, etc.) when possible;
12. As needed or requested, conduct formalized parenting assessments through a licensed psychologist or Independently licensed clinician incorporating an assessment of cognitive and emotional status to gain better understanding of targeted intervention

needs and parent's ability to respond or make positive gains from parenting intervention services;

13. Provider will measure performance through pre- and post- measurement tools designed to measure changes in knowledge, behaviors, attitudes, and responses regarding parent and child relationships, and behavior/development. Tools should be made available to HCJFS as requested;
14. Recognize that Parent Educators have responsibility to assess and report on parenting capacity (cognitive, behavioral and emotional) and testify in court proceedings when required;
15. Include collaboration with HCJFS agency caseworkers during traditional work hours Monday-Friday 8:00a.m. to 4:30p.m through phone calls, team meetings, etc.;
16. Include collaboration with other service providers to ensure adequate information gathering and understanding of need; avoid duplication of services and ensure coordination of care (i.e. mental health, substance abuse, domestic violence);
17. Include referrals to community resources to support the family's needs in coordination with case worker and case plan services;
18. Address transportation issues by site selection close to bus routes and provision of transportation services, or in-home services as required;
19. Provide consistent availability for classes and meetings. Services are also available during evening and weekend hours as necessary to serve the target population;
20. Provide programming that is cost efficient, responsive to families, seeks to maximize capacity of services, and actively reduces and eliminates barriers to engagement and participation; and
21. Reporting:
 - A. Monthly administrative report to HCJFS detailing clients entering service, discharging from service, and current provider capacity.
 - B. Monthly case-specific progress reports indicating parent goals, services provided to meet goals, progress towards goals, and attendance and engagement.

- C. Ad hoc reporting regarding challenges or behaviors with families that are problematic.
 - D. Discharge summaries for all parents exiting services, indicating reason for discharge, success towards meeting service goals, and attendance and engagement summary.
 - E. Assigned HCJFS caseworker is provided a copy of the assessment plan as needed; and a report on enrollment and service plan.
 - F. Annual program report detailing overall program statistics, outcomes, and trends.
 - G. HCJFS will review the reporting content needs and required reporting schedules for potential adjustments or changes as needed.
22. Offer multiple opportunities for families to engage in service provision. In-person interaction is preferred; however, in the event in-person contact is not possible utilize other platforms necessary to meet service goals.

Provider must answer, in narrative format, demonstrating how you will meet the following expectations, or have unique experiences demonstrating capacity to perform service.

Services provided or facilitated by the Provider will be trauma-responsive and culturally relevant.

Clinical Program Components

1. Utilize evidence-based curriculum and best practices from both research and experience in child welfare that aim to demonstrate measurable change in the parenting skills of the consumer. **If provider(s) program is based on a published best practice or research method, please include a description of curriculum;**
2. Provide individualized services with case specific plans and defined outcomes for the specific needs of the family; provide services that are family-centered and culturally competent; provide classes or other tailored programming such as a parent mentor or coach to meet these specific.

Include a description of the kinds of services, classes or programming offered in

curriculum. Describe specifically how services will be family-centered and culturally competent;

3. Describe your process to assess parenting needs. Include your ability to conduct formal parenting assessments through a licensed psychologist or independently licensed clinician and the assessment itself;
4. Include interaction between parents and children. Provide programming which is inclusive of the children in the family (i.e. age appropriate classes for children, parent/child interaction therapy, etc.) as described in Service Components, Section 1.2.2.

Include a description of the types of programming/classes for children and model for family interactions;

5. Provide programming that considers the age, developmental needs, mental health, and behavioral needs of the child in determining interventions. **Include a description of the types of child development curriculum used or other how other services take age of the children into consideration;**
6. Recognize the parent's role in setting goals for improving their parenting skills and how this is incorporated into the family plan;
7. Provide programming and interventions that address parenting topics as described in Scope of Service, Section 1.2 including but not limited to:
 - A. Physical abuse and neglect – prevention of and behavioral modification regarding;
 - B. Attachment – interpreting children's behavioral signals and responding consistently with nurturance;
 - C. Discipline – education on positive methods, concepts, and the purpose of discipline; controlling anger; reasonable parental expectations; awareness of various cultural practices;
 - D. Trauma – how to identify parents' own traumatic experiences as children and/or adults that affect their current parenting and attachment to their child (ren); responding to children who have experienced trauma; building resiliency in children and adults;

- E. Child development – understanding child development and each individual child’s limitations and how this affects parenting practices; knowledge of age-appropriate expectations; empathy for child; education on child needs such as medical care;
- F. Communication– developing healthy and safe ways of communicating to resolve conflict; using communication to enhance family functioning and bonding;
- G. Roles and responsibility as a parent – parental motivation, ability to adapt and put aside one’s own needs. Addressing cognitive, mental, and physical limitations and the effects on their parenting and learn safe practices to parent their child (ren) without agency intervention;
- H. Children with mental health needs, behavioral challenges, developmental delays, physical health concerns – how parenting is affected, and adaptive parenting techniques to meet these needs;
- I. Parenting adolescents – how to deal with changes in the family and parenting style; responding to defiant and disruptive behaviors including those with delinquent behaviors;
- J. Teen parents – modeling appropriate behaviors; essential safe parenting practices and skills, providing clear directives; addressing issues specific to teen culture;
- K. Building safeguards for children – positive intervention by other adults in the child’s life; mentors, community support, developing a natural support network for the family system;
- L. Self-control, judgment and decision-making;
- M. Self-Care – how the parent manages his/her own life; coping, stress management, and health; importance of mental health;
- N. Substance use – how in-utero exposure can affect a child’s temperament and development, how it affects the entire family and ability to parent safely;
- O. Domestic violence – education on the impact on the entire family and child safety, special focus on younger moms who may be more vulnerable;
- P. Community and family support – assist the parent with learning how to build and utilize a safe support network within their community and family;

- Q. Co-parenting – engagement of non-residential parent and successful co-parenting practices and remaining child focused; and
- R. LGBTQ – work with families with LGBTQ youth or family members, for support, acceptance and advocacy.

Please address each topic in your response

- 8. Include facilitated support groups to sustain what is learned and reduce isolation. Provider must explain how often this will be held and a sample agenda;
- 9. Offer community-based services including community sites and in-home;
- 10. Measure performance by developing or utilizing a tool to measure pre and post service outcomes/activities. This instrument should measure changes in knowledge, behaviors and attitudes regarding parenting and child behavior/development. Tool and results should be made available to HCJFS. **An example of a performance assessment tool must be attached to your proposal;**
- 11. Describe how you assess and report on parenting capacity (cognitive, behavioral, and emotional) and testify in court proceedings when required. **Provide a copy of an assessment tool, proposed progress report, and service summary report that includes measurable progress and recommendations;**
- 12. Provide examples of how you will incorporate trauma-informed care into all aspects of services, including your staff;
- 13. Emphasize a holistic approach that stresses depth and real change in behavioral outcomes and provides for follow-up planning for parents. Focus on measurable change in parenting skills as opposed to attendance and completion of services;
- 14. Reduce and eliminate barriers to engagement and participation in services;
- 15. Address transportation issues by delivering service in the families' homes as well as site selection close to bus routes and provision of transportation services, as needed;
- 16. Provide consistent hours of operation for classes and individual meeting, including potential availability for evening and weekend classes;

17. Provide a description of how referrals to community resources to support the family's needs will occur, and be coordinated with family caseworkers;
18. Collaborate with other service providers to avoid duplication of services and coordination of care (i.e. mental health, substance use, domestic violence, etc.);
19. Collaborate with HCJFS agency caseworkers through phone calls, team meetings, etc.;
20. Describe your ability to cooperate with HCJFS requirements to provide a copy of the assessment and progress reports indicating goals, services provided to meet goals, progress towards goals, and attendance as requested by HCJFS;
23. Describe where services will be delivered. Describe credentials and training of those providing interventions such as, individual coaching, in-home support, community-based classes, etc.,
24. In the event in person contact is not possible provide other platforms you will utilize to meet service goals;
25. Describe the frequency and format of how you will provide the assessment, service plan, and ongoing progress notes to HCJFS; and
26. Provide any other information to consider related to scope and service components.

Service and Business Deliverables

Provider should clearly state its competitive advantage and its ability to meet the terms, conditions, and requirements as defined in this RFP in responding to this section. Provider must describe in detail all information set forth in Section 1.2.2 Service Components and Business Deliverables, and Section 2.8. System and Fiscal Administration Components:

A. Licensure, Administration and Training

1. Identify any actions against your organization through ODJFS, ODMHAS or any other licensing body over the past 2 years that included Corrective Action Plans, Temporary License or Revocation. For the past 10 years, provide outcome of any action that resulted in a revocation.

2. Provide a description of your organization's employee screening and clearance policy.
3. Provide copies of any relevant licenses and certifications.
4. Identify if your organization is a Small Business Enterprise (SBE), Minority Business Enterprise (MBE) or a Women Business Enterprise (WBE) and provide certification of such designations. If your organization is a non-profit and is not certified as a SBE, MBE or WBE, and your organization is Women or Minority owned, please share this information, as HCJFS is tracking our equity and inclusion efforts with businesses who deliver our services to families and individuals we serve.
5. Describe training, supervision, and support provided to staff.

1.3. Employee Qualifications

Provider shall ensure that any employee who shall have direct contact with customers under the terms of this Contract will meet the following qualifications:

- A. Education and training: Staff will have education and licensure commensurate with responsibilities and programmatic licensing criteria.
- B. Work history: All employees who are assigned to this project to work with HCJFS's customers shall have information on job applications verified. Verification shall include references and work history information.
- C. HCJFS reserves the right to interview Program Managers and other staff as they deem necessary approve or veto the hire for the role.
- D. Criminal Record Check: Provider warrants and represents it will comply with ORC 2151.86 and will annually complete criminal record checks on all individuals assigned to work with, volunteer with or transport customers. Provider will obtain a statewide conviction record check through the Bureau of Criminal Identification and Investigation ("BCII"), and obtain a criminal record transcript from the Cincinnati Police Department, the Hamilton County Sheriff's Office (or your local Police and Sheriff's Departments) and any law enforcement

or police department necessary to conduct a complete criminal record check of each individual providing services.

SCREENING AND SELECTION

A. Criminal Record Check and Fingerprint-Based Checks

Provider warrants and represents it will comply with ORC 2151.86 and will complete all required criminal record checks with respect to any person under final consideration for appointment or employment as a person responsible for delivering service to HCJFS customers. Provider shall perform all criminal records check consistent with the provisions ORC 2151.86 at the time of initial application for appointment or employment and every year thereafter. In addition to a request to the Bureau of Criminal Identification and Investigation ("BCII"), Provider shall also obtain a criminal record transcript from the Cincinnati Police Department, the Hamilton County Sheriff's Office (or appropriate local police and sheriff' offices) and any additional law enforcement or police department necessary to conduct a complete criminal record check of each individual assigned to work with Customers. When a request is made to the BCII at the time of initial application for appointment or employment, it shall include a request that the BCII obtain information from the federal bureau of investigation as part of the criminal records check, including fingerprint-based checks of national crime information databases as described in 42 USC 671, for the person subject to the criminal records check. In all other cases, when a request is made to the BCII at the time of initial application for appointment or employment, it may include a request that the BCII obtain information from the federal bureau of investigation as part of the criminal records check, including fingerprint-based checks of national crime information databases as described in 42 USC 671, for the person subject to the criminal records check.

Provider shall provide all persons who are subject to a criminal records check a copy of the form prescribed pursuant to ORC 109.572(C)(1) and a copy of an impression sheet prescribed pursuant to ORC 109.572(C)(2). Provider shall obtain and forward the completed form and impression sheet to the BCII at the time the criminal records check is requested. Provider agrees to comply with requirements of ORC 2151.86 in relation to all persons requested to complete the form and impression sheet described in ORC 109.572.

Provider shall obtain a signed a release of information on the form attached hereto and incorporated herein as Exhibit IX. Provider shall allow inspection and audit of the above criminal records transcripts, fingerprint-based checks, or reports by Agency or a private vendor hired by Agency to conduct compliance reviews on its behalf.

B. Requirements for the Transportation of Customers

Any individual transporting Customers shall possess the following qualifications:

1. Prior to allowing an individual to transport a Customer, an initial satisfactory Bureau of Motor Vehicle (“BMV”) transcript from the State of Ohio (or the state the provider conducts its business) and, if applicable, from the individual’s state of residence must be obtained;
2. Thereafter, an annual satisfactory BMV abstract report must be obtained from the State of Ohio (or the state the provider conducts its business) and, if applicable, from the individual’s state of residence; and
3. Maintenance of a current and valid driver’s license.

Provider must, at all times, comply with Ohio’s Child Passenger Safety Law as set forth in Ohio Revised Code 4511.81 while transporting any Customer.

In this same regard, no Customer that is required to have a seat restraint can be

transported by Provider until such requirement is met.

In addition to the requirements set forth above, Provider will not permit any individual to transport a Customer if:

1. the individual has a condition which would affect safe operation of a motor vehicle;
 2. the individual has six (6) or more points on his/her driver's license; or
 3. the individual has been convicted of driving while under the influence of alcohol or drugs.
- C. Provider shall not assign any individual to work with or transport Customers until a BCII report and a criminal records transcript has been obtained. A BCII report must be dated within six (6) months of the date an employee or volunteer is hired.
- D. Except as provided in Section I below, Provider shall not utilize any individual who has been convicted or plead guilty to any violations contained in ORC 5153.111(B)(1) and OAC Chapters 5101:2-5, 5101:2-7, 5101:2-48.
- E. Central Registry Report: Provider warrants and represents it will secure a release for an annual Central Registry report from all individuals assigned to work with or transport Customers. Instructions and guidance on how to obtain this clearance can be found at <https://jfs.ohio.gov/ocf/childprotectiveservices.stm>. All completed and documented checks shall be maintained in the employee file.
- F. Provider shall not assign any individual to work, volunteer with or transport Customers until a Central Registry report has been obtained. A Central Registry report must be dated within six (6) months of the date an employee is hired.

G. Employees who have been convicted: Employees convicted of, or plead guilty to any violations contained in ORC 5153.111 (B) (1) may not come into contact with HCJFS' Customers.

H. All completed and documented checks shall be maintained in the employee file.

1. Provider shall ensure that every above described individual will sign a release of information, attached hereto and incorporated herein as Attachment F - Release of Personnel Records and Criminal Record Check to allow inspection and audit of the above Central Registry report by HCJFS or anyone conducting compliance reviews on their behalf.

2. Provider shall not assign any individual to work, volunteer with or transport Customers until a Central Registry report has been obtained. A Central Registry report must be dated within six (6) months of the date an employee is hired.

I. Rehabilitation

Notwithstanding the above, Provider may make a request to HCJFS to utilize an individual if Provider believes the individual has met the rehabilitative standards of Ohio Administrative Code Section 5101 as follows:

If the Provider is seeking rehabilitation for any other individual serving Customers, Provider must provide written verification from the individual that the rehabilitative conditions of OAC 5101:2-5-09 have been met.

Agency will review the facts presented and may allow the individual to work with, volunteer with or transport HCJFS Customers on a case-by-case basis. It is Agency' sole discretion whether to permit a rehabilitated individual to work with, volunteer with or transport our customers.

J. Verification of Job or Volunteer Application

Provider will check and document each applicant's personal and employment references, general work history, relevant experience, and training information. Provider further agrees it will not employ an individual to provide Services in relation to this Contract unless it has received satisfactory employment references, work history, relevant experience, and training information.

2.0 PROVIDER PROPOSAL

HCJFS will only accept proposals via e-mail. Please note the maximum file size for proposals being submitted is 24MB. Proposals should be sent to the RFP Contact Person at: Hamil_ContractServicesProcurementCarson@jfs.ohio.gov.

A. Requirements

- All proposal pages must be numbered sequentially from beginning to end, including attachments.
- Each proposal should not exceed a total of 300 pages.
- Proposal in a pdf format and the pages must be numbered from 1 - ???.
- Each proposal must be written in twelve (12) point font.
- Budget in unlocked Excel format.

B. Proposal Organization

Proposals must contain all the specified elements of information listed below **without exception**, including all subsections therein:

- Section 2.1 - Cover Sheet
- Section 1.2.2 - Service Components
- Section 2.3 –Cost Considerations
- Section 2.4 – Customer References
- Section 2.5 – Personnel Qualifications
- Section 2.8 – Proposal Documents

The following will need to be submitted if proposal is accepted and prior to contract negotiations:

- Section 2.6 – Financial Documentation
- Section 2.7 – Declaration of Property Tax Delinquency

2.1 Cover Sheet

Each Provider must complete the Cover Sheet, Attachment A, and include such in its proposal. The Cover Sheet must be signed by an authorized representative of the Provider and also include the names of individuals authorized to negotiate with HCJFS. The signature line must indicate the title or position the individual holds in the company. All unsigned proposals may be rejected.

The Cover Sheet must also include the proposed Unit Rate(s) for each service Provider is proposing for Contract Years 1, 2, and 3. Provider is to make sure to include the request for all rates for the original Contract period (year 1), and the 2 subsequent renewal period options (years 2 and 3). These Unit Rates must be supported by the Budget, Attachment C.

2.2 RESERVED

2.3 Budgets and Cost Considerations

- A. HCJFS anticipates services will begin approximately April 1, 2024. Provider must submit a Budget and a calculation of the Unit Rate and Cost Reimbursement for the initial Contract term that Provider understands will be used to compensate Provider for services provided. In addition, if Provider is requesting *an increase in costs for renewal years 1 and 2, you must complete the data sheet* in the budget that lists each budget line item with an estimated expense amount and percentage increase from the prior year. Budgets and Unit Rates and Cost Reimbursement must be submitted in the form provided as Attachment list correct attachment letter. Contracts will be written for the initial term of one (1) year.

For renewal years, any increases in Unit Rates will be at the sole discretion of HCJFS, subject to funding availability and Contract performance, and will be limited to no more than 3% of the Rates of the prior term. HCJFS does not guarantee the Rates

will be increased from one Contract term to the next. Nothing in the RFP shall be construed to be a guarantee of any Unit Rate increase.

- B. Provider must warrant and represent the Budget is based upon current financial information and programs, and includes all costs relating to, but not limited by, the following:

1. General services;
2. Crisis intervention services;
3. Case management;
4. Referral and information services;
5. Consultation;
6. Non-Medicaid funded services; and
7. Any other relevant services.

All revenue sources available to Provider to serve Hamilton County Customers identified in the Scope of Service shall be listed in the Budget, and utilized where permissible, to reduce the *Unit Rate/Cost Reimbursement*. All costs must be specified for the various parts of the program. Cost must be broken down by type of work as well as classifications for staff, i.e., senior program manager vs. lower-level position.

The *Unit Rate/Cost Reimbursement* for each service proposed for each Contract year must be listed on the Cover Sheet, Attachment A.

- C. Provider must submit a detailed narrative demonstrating how costs are related to the service(s) presented in the proposal.
- D. Provider must take note that “profit” will be a separately negotiated element of price pursuant to OAC 5101:9-4-07 if Provider is a for-profit organization.

- E. For the purposes of this RFP, “unallowable” program costs (detailed list is located in 2 CFR Part 200 Subpart E) include:
1. cost of equipment or facilities procured under a lease-purchase arrangement unless it is applicable to the cost of ownership such as depreciation, utilities, maintenance, and repair;
 2. bad debt or losses arising from uncorrectable accounts and other claims and related costs;
 3. contributions to a contingency(ies) reserve or any similar provision for unforeseen events;
 4. contributions, donations, or any outlay of cash with no prospective benefit to the facility or program;
 5. entertainment costs for amusements, social activities, and related costs for staff only;
 6. costs of alcoholic beverages;
 7. goods or services for personal use;
 8. fines, penalties, or mischarging costs resulting from violations of, or failure to comply with, laws and regulations;
 9. gains and losses on disposition or impairment of depreciable or capital assets;
 10. cost of depreciation on idle facilities, except when necessary to meet Contract demands;
 11. costs incurred for interest on borrowed capital or the use of a governmental unit’s own funds, except as provided in OAC 5101:2-47-25(n);
 12. losses on other Contracts’;
 13. organizational costs such as incorporation, fees to attorneys, accountants and brokers in connection with establishment or reorganization;
 14. costs related to legal and other proceedings;
 15. goodwill;
 16. asset valuations resulting from business combinations;
 17. legislative lobbying costs;

18. cost of organized fundraising;
19. cost of investment counsel and staff and similar expenses incurred solely to enhance income from investments;
20. any costs specifically subsidized by federal monies with the exception of federal funds authorized by federal law to be used to match other federal funds;
21. advertising costs with the exception of service-related recruitment needs, procurement of scarce items and disposal of scrap and surplus;
22. cost of insurance on the life of any officer or employee for which the facility is beneficiary;
23. major losses incurred through the lack of available insurance coverage; and
24. cost of prohibited activities from section 501(c)(3) of the Internal Revenue Code.

If there is a dispute regarding whether a certain item of cost is allowable, HCJFS' decision is final.

2.4 Customer References

Provider must submit at least three (3) current letters of reference for whom services were provided similar in nature and functionality to those requested by HCJFS. Reference letters from HCJFS or HCJFS employees will not be accepted. Each reference must include at a minimum:

- A. Company name;
- B. Address;
- C. Phone number;
- D. Fax number;
- E. Contact person;
- F. Nature of relationship and service performed; and,
- G. Time period during which services were performed.

If Provider is unable to submit at least three (3) letters of reference, Provider must submit a detailed explanation as to why.

2.5 Personnel Qualifications

Please submit resumes with the below information for key clinical and business personnel who will be working with the program. These positions are Agency Director, CFO, Clinical Director and Administrators:

- A. Proposed role;
- B. Industry certification(s), including any licenses or certifications and, whether such licenses or certifications have been suspended or revoked at any time;
- C. Work history; and
- D. Professional reference (company name, contact name and phone number, scope and duration of program).

Provider's program manager must have a minimum of two years' experience as a program manager with a similar program.

It is the proposing agency's responsibility to redact all personal information from resumes.

RFPs and all attachments are public documents and are available for general viewing. Please make sure the resume reflects the person's position title instead of their name so we can tie the position back to the budget.

2.6 Financial Documentation

Prior to Contract award, a copy of the most recent independent annual audit report, most recent single audit, if applicable and the most recent Form 990. For a sole proprietor or for-profit entities, include copies of the two (2) most recent year's federal income tax returns and the most recent year- end balance sheet and income statement. If no audited statements are available, Provider must supply equivalent financial statements certified by Provider to fairly and accurately reflect the Provider's financial status. Provider's failure to provide these documents may result in rejection of the proposal and subsequently a Contract will not be awarded. **It is the responsibility of the Provider to redact tax identification numbers from all documents prior to submission to HCJFS.**

2.7 Declaration of Property Tax Delinquency

After award of a Contract, and prior to the time a Contract is entered into, the successful bidder shall submit a statement in accordance with ORC Section 5719.042. Such statement shall affirm under oath that the Provider with whom the Contract is to be made was not charged at the time the bid was submitted with any delinquent personal property taxes on the general tax list of personal property of any county in which the taxing district has territory or that such Provider was charged with delinquent personal property taxes on any such tax list, in which case the statement shall also set forth the amount of such due and unpaid delinquent taxes any due and unpaid penalties and interest thereon. If the statement indicates that the taxpayer was charged with any such taxes, a copy of the statement shall be transmitted by the fiscal officer to the county treasurer within thirty days of the date it is submitted.

A copy of the statement shall also be incorporated into the Contract, and no payment shall be made with respect to any Contract to which this section applies unless such statement has been so incorporated as a part thereof.

2.8 Proposal Documents

The following items are to be attached to the proposal:

Agency/Company Ownership - Describe how the agency/company is owned (include the form of business entity -i.e., corporation, partnership or sole proprietorship) and financed.

1. Annual Report - A copy of Provider's most recent annual report.
2. Licensure - A copy of appropriate licensure from ODJFS, ODMHAS or other licensing agencies. If Provider does not have a finalized license by the end of the proposal selection process, Provider will be granted 60 days from the date of acceptance of the proposal to finalize its license or Provider's proposal will be disqualified.

4. Contact Information - Provide the address for the Provider's headquarters and service locations. Include a contact name, address, and phone number.
5. Agency/Company History - Provide a brief history of Agency/Company's organization. Include the Agency/Company mission statement and philosophy of service.
6. Subcontracts - Submit a letter of intent from each subcontractor indicating its commitment, the service(s) to be provided and three (3) references. All subcontractors must be approved by HCJFS and will be held to the same Contract standards and obligations as the Agency/Company.
7. Agency's/Company Primary Business - State the agency's/company's primary line of business, the date established, the number of years of relevant experience, and the number of employees.
8. Table of Organization - Clearly distinguish programs, channels of communication and the relationship of the proposed provision of services to the total company. In addition, please provide a list of all subsidiaries, affiliated companies, brother/sister companies and any other related companies, as well as each company's major line of business.
9. Insurance and Worker's Compensation - A current certificate of insurance, current endorsements and Worker's Compensation certificate.

Provider must note that as a Contract requirement the following conditions must be met:

During the Contract and for such additional time as may be required, Provider shall provide, pay for, and maintain in full force and effect the insurance specified in the attached sample Contract, for coverage at not less than the prescribed minimum limits covering Provider's activities, those activities of any and all subcontractors or those activities anyone directly or

indirectly employed by Provider or subcontractor or by anyone for whose acts any of them may be liable.

Certificates of Insurance

As a matter of proof of insurance, prior to the effective date of the Contract, Provider shall give the County and HCJFS the certificate(s) of insurance completed by Provider's duly authorized insurance representative, with effective dates of coverage at, or prior to, the effective date of the Contract, certifying that at least the minimum coverage required is in effect; specifying the form that the liability coverage's are written on; and, confirming liability coverage's shall not be cancelled, non-renewed, or materially changed by endorsement or through issuance of other policy(ies) of issuance without thirty (30) days advance written notice. Waiver of subrogation shall be maintained by Provider for all insurance policies applicable to this Contract, as required by ORC 2744.05. Certificates are to be sent to Hamil_ContractServicesCommunication@JFS.Ohio.gov and the Hamilton County Risk Manager at COI@hamilton-co.org.

10. Job Descriptions - For all key clinical and business personnel who will be working with the program, to include: CFO, Clinical Director, Administrators, staff and Supervisors.
11. If needed: Daily Service/Attendance Form - Include a blank copy of the forms used to record services provided. Information must include: date of service, beginning and end time of service, names of all participants who received service, the type of service received, and name of the instructor or social worker. Also include forms used to record participant progress.
12. Program Quality Documents - Attach documents which describe and support program quality. Such documents might be the forms used for monitoring

and evaluation or copies of awards received for excellent program quality.

QA manual need not be included.

13. Agency's/Company's Brochures - A copy of the Agency's/Company's brochures which describe the services being proposed.

14. Federal Programs- Provide a description of the Agency's/Company's experience with federal programs.

3.0 PROPOSAL GUIDELINES

The RFP, the evaluation of responses, and the award of any resultant Contract must be made in conformance with current federal, state, and local laws and procedures.

3.1 Program Schedule

ACTION ITEM	DELIVERY DATE
RFP Issued	January 12, 2024
RFP Conference	January 26, 2024
Deadline for Receiving Final RFP Questions	February 2, 2024
Deadline for Issuing Final RFP Answers	February 9, 2024
Deadline for Registering for the RFP Process	February 2, 2024
Deadline for Proposals Received by RFP Contact Person	March 1, 2024. no later than 11:00 a.m. EST
Oral Presentation/Site Visits – if needed	Week of March 11, 2024
Anticipated Proposal Review Completed	March 15, 2024
Anticipated Start Date	April 1, 2024

3.2 RFP Contact Person

RFP Contact Person and mailing address for questions about the proposal process, technical issues, the Scope of Service or to send a request for a post-proposal meeting is:

Sandra Carson, Contract Services
Hamilton County Department of Job & Family Services
222 East Central Parkway, 3rd floor
Cincinnati, Ohio 45202
Hamil_ContractServicesProcurementCarson@ifs.ohio.gov

3.3 Registration for the RFP Process

EACH PROVIDER MUST REGISTER TIMELY FOR AND RESPOND TO THIS RFP TO BE CONSIDERED. THE DEADLINE TO REGISTER FOR THE RFP IS FEBRUARY 2, 2024 NO LATER THAN NOON.

All interested Providers must complete Registration Form (see Attachment G) and e-mail the RFP Contact Person to register, leaving their name, company name, email address, fax number and phone number. The RFP Contact Person's e-mail address is

Hamil_ContractServicesProcurementCarson@jfs.hamilton-co.org.

3.4 RFP Conference

The RFP conference will be held virtually on January 26, 2024, 10:00 a.m. – 12:00 p.m. EST. The phone number to watch the conference is (614) 721-2972, Conference ID: 553 429 065#. If you register prior to the conference date, you will be sent the link to be able to watch the video conference on-line. You will not be permitted to speak, but you will be able to type questions that will be addressed at the end of the conference and via addenda.

All registered Providers may also submit written questions regarding the RFP or the RFP Process. All communications being e-mailed are to be sent only to the RFP Contact Person at Hamil_ContractServicesProcurementCarson@jfs.ohio.gov

- A. Prior to the RFP Conference, questions may be e-mailed regarding the RFP or proposal process to the RFP Contact Person. The questions and answers will be distributed at the RFP Conference and by e-mail to Providers who have registered for the RFP Process but are unable to attend the RFP Conference.
- B. After the RFP Conference, questions may be e-mailed regarding the RFP or the RFP Process to the RFP Contact Person.
- C. No questions will be accepted after February 2, 2024, noon. The final responses will be e-mailed no later than February 9, 2024 by the close of business.

- D. Only Providers who register for the RFP Process will receive electronic, unlocked budget, attachments and addenda.
- E. The answers issued in response to such Provider questions become part of the RFP.

3.5 Prohibited Contacts

The integrity of the RFP process is very important to HCJFS in the administration of our business affairs, in our responsibility to the residents of Hamilton County, and to the Providers who participate in the process in good faith. Behavior by Providers which violates or attempts to manipulate the RFP process in any way is taken very seriously. Neither Provider nor their representatives should communicate with individuals associated with the RFP process. If an interested Provider or anyone associated with an interested Provider attempts any unauthorized communication, Provider's proposal is subject to rejection.

Individuals associated with this RFP and related program include, but are not limited to the following:

- A. Public officials; including but not limited to the Hamilton County Commissioners; and
- B. Any HCJFS employees, except for the RFP Contact Person listed in Section 3.2.

Examples of unauthorized communications prior to the award of the contract, except to the RFP Contact Person listed in Section 3.2, including but are not limited to:

- A. Telephone calls;
- B. Letters, emails, social media contacts and faxes regarding the RFP process, anything related to the RFP or the RFP process; and
- C. Visits in person or through a third party attempting to obtain information regarding the RFP, anything related to the RFP or the RFP process.

Notwithstanding the above, there shall be no contact with anyone, including the RFP Contact Person after February 2, 2024.

3.6 Provider Disclosures

Provider must disclose any pending or threatened court actions and claims brought by or against the Provider, its parent company, or its subsidiaries. This information will not necessarily be cause for rejection of the proposal; however, withholding the information may be cause for rejection of the proposal.

3.7 Provider Examination of the RFP

THIS RFP AND THE REQUIREMENTS HEREIN HAVE BEEN MODIFIED SINCE THE PREVIOUS RFP PROCESS. PLEASE REVIEW ALL REQUIREMENTS AND THE PROPOSAL TO ENSURE ACCURACY. ATTENDANCE AT THE RFP CONFERENCE IS HIGHLY ENCOURAGED.

Providers shall carefully examine the entire RFP and any addenda thereto, all related materials and data referenced in the RFP or otherwise available and shall become fully aware of the nature of the request and the conditions to be encountered in performing the requested services.

If Providers discover any ambiguity, conflict, discrepancy, omission, or other error in this RFP, they shall immediately notify the RFP Contact Person no later than February 2, 2024, noon of such error in writing and request clarification or modification of the document. Modifications shall be made by addenda issued pursuant to Section 3.8, Addenda to RFP. Clarification shall be sent by e-mail to all parties who registered for the RFP, Section 3.3, without divulging the source of the request for same.

If a Provider fails to notify HCJFS prior to February 2, 2024, noon of an error in the RFP known to the Provider, or of an error which reasonably should have been known to the Provider, the Provider shall submit its proposal at the Provider's own risk. If awarded the Contract, Provider shall not be entitled to additional compensation or time by reason of the error or its later correction.

3.8 Addenda to RFP

HCJFS may modify this RFP by issuance of one or more addenda to all parties who registered for the RFP, Section 3.3. In the event modifications, clarifications, or additions to the RFP become necessary, all Providers who registered for the RFP Conference will be notified and will receive the addenda via e-mail. In the unlikely event emergency addenda by telephone are necessary, the RFP Contact Person, or designee, will be responsible for contacting only those Providers who registered for the RFP Conference. All addenda to the RFP will be posted to

<http://www.hcjfs.hamilton-co.org>

3.9 Availability of Funds

Contract awards are conditioned upon the availability of federal, state, or local funds appropriated or allocated for payment for services provided. By sole determination of HCJFS, if funds are not sufficiently allocated or available for the provision of the services performed by Provider, HCJFS reserves the right to exercise one of the following alternatives:

- A. Reduce the utilization of the services provided under the Contract, without change to the terms and conditions of the Contract; or
- B. Issue a notice of intent to terminate the Contract.

HCJFS will notify Provider at the earliest possible time of such decision. No penalty will accrue to HCJFS in the event either provision is exercised. HCJFS will not be obligated or liable for any future payments due or for any damages as a result of termination.

4.0 SUBMISSION OF PROPOSAL

Provider must certify the proposal and pricing will remain in effect for 365 calendar days after the proposal submission date.

4.1 Preparation of Proposal

Proposals must provide a straightforward, concise delineation of qualifications, capabilities, and experience to satisfy the requirements of the RFP. Emphasis should be concentrated on conformance to the RFP instructions, responsiveness to the RFP requirements, completeness, and clarity of content. The proposal must include all costs relating to the services offered.

4.2 Cost of Developing Proposal

The cost of developing proposals is entirely the responsibility of the Provider and shall not be chargeable to HCJFS under any circumstances. All materials submitted in response to the RFP will become the property of HCJFS and may be returned only at HCJFS' option and at Provider's expense.

4.3 False or Misleading Statements

If, in the opinion of HCJFS, information included within Provider's proposal was intended to mislead the County in its evaluation of the proposal, the proposal will be rejected.

4.4 Delivery of Proposals

Proposals must be e-mailed to the RFP Contact Person, Sandra Carson at Hamil_ContractServicesProcurementCarson@jfs.ohio.gov on or before March 1, 2024 no later than 11:00 a.m. ***Proposals received after this date and time will not be considered.*** An email confirmation for receipt of proposals will be issued.

It is absolutely essential that Providers carefully review all elements in their final proposals. Once received, proposals cannot be altered; however, HCJFS reserves the right to request additional information for clarification purposes only.

4.5 Acceptance and Rejection of Proposals

HCJFS reserves the right to:

- A. award a Contract for one or more of the proposed services;
- B. award a Contract for the entire list of proposed services;
- C. reject any proposal, or any part thereof; and
- D. waive any informality in the proposals.

The recommendation of HCJFS staff and the approval by the HCJFS Director shall be final. Waiver of an immaterial defect in the proposal shall in no way modify the RFP documents or excuse the Provider from full compliance with its specifications if Provider is awarded the Contract.

4.6 Evaluation and Award of Contract

The review process shall be conducted in four stages. Although it is hoped and expected that a Provider will be selected as a result of this process, HCJFS reserves the right to discontinue the procurement process at any time.

Stage 1. Preliminary Review

A preliminary review of all proposals submitted on or before March 1, 2024, no later than 11:00 a.m. will be performed to ensure the proposal materials adhere to the Mandatory Requirements specified in the RFP. Proposals which meet the Mandatory Requirements will be deemed Qualified. Those which do not, shall be deemed Non-Qualified. Non-Qualified proposals will be rejected. Qualified proposals in response to the RFP must contain the following Mandatory Requirements:

- A. Registry for RFP;

- B. Timely Submission – The proposal is e-mailed to the RFP Contact Person, Sandra Carson, at Hamil_ContractServicesProcurementCarson@ifs.ohio.gov no later than 11:00 a.m. on or before March 1, 2024.
- C. Signed and Completed Cover Sheet, Section 2.1;
- D. Responses to Program Components, Section 1.2.2;
- E. Completed Budgets, Section 2.3; and
- F. Responses to System and Fiscal Administration Components, Section 2.8.

Stage 2. Evaluation Committee Review

All Qualified proposals shall be reviewed, evaluated, and rated by the Review Committee. Review Committee shall be comprised of HCJFS staff and other individuals designated by HCJFS. Review Committee shall evaluate each Provider’s proposal using criteria developed by HCJFS. Ratings will be compiled using a Review Committee Rating Sheet. Provider past performance can be referenced or influence the evaluation if well documented, in writing, and previously shared with Provider. This could include but be limited to Performance Improvement Plans, Referral Holds, or contract terminations for non-performance.

Responses to each question will be evaluated and ranked using the following scale:

Does Not Meet Requirement	A particular RFP requirement was not addressed in the Provider’s proposal.
Partially Meets Requirement	Provider’s proposal demonstrates some attempt at meeting a particular RFP requirement, but that attempt falls below an acceptable level.
Meets Requirement	Provider’s proposal fulfills a particular RFP requirement in all material respects, potentially with only minor, non-substantial deviation.

Exceeds Requirement	Provider's proposal fulfills a particular RFP requirement in all material respects and offers some additional level of quality in excess of HCJFS expectations.
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Stage 3 Other Materials

Review Committee members will determine what other information is required to complete the review process. All information obtained during Stage 3 will be evaluated using the scale set forth in Stage 2 Review and incorporated into the overall rating for the proposal. Review Committee may request information from sources other than the written proposal to evaluate Provider's programs or clarify Provider's proposal. Other sources of information may include but are not limited to the following:

- A. Written responses from Provider to clarify questions posed by Review Committee. Such information requests by Review Committee and Provider's responses must always be in writing;
- B. Oral presentations. If HCJFS determines oral presentations are necessary, the presentations will be focused to ensure all of HCJFS' interests or concerns are adequately addressed. The primary presentation must include Provider's key program personnel. HCJFS reserves the right to video tape the presentations.
- C. Site visits may be conducted with Providers as HCJFS deems necessary. Site visits will be held at the location where the services are to be provided.

Stage 4 Evaluation Scoring

Final scoring for each proposal will be calculated. For this RFP, the evaluation percentages assigned to each section are:

- A. Program Evaluation including responses to Section 1.2.2 Questions, Section 2.4 Customer References and Section 2.5 Personnel Qualifications are worth 60% of the total evaluation score.
- B. Fiscal Evaluation, Section 2.3 Questions, Cost Analysis and Project Budget are worth 20% of the total evaluation score.

- C. System and Fiscal Administration Evaluation including responses to Section 2.8 Questions are worth 10% of the total evaluation score.
- D. Section 4.6, Stage 3, Other Materials considered are worth 10% of the total evaluation score.

If HCJFS determines that it is not necessary to conduct a Stage 3 review, the evaluation percentages assigned to each section are:

- A. Program Evaluation including responses to Section 1.2.2 Questions, Section 2.4 Customer References and Section 2.5 Personnel Qualifications are worth 70% of the total evaluation score.
- B. Fiscal Evaluation, Section 2.3 Questions, Cost Analysis and Project Budget are worth 20% of the total evaluation score.
- C. System and Fiscal Administration Evaluation including responses to Section 2.8 Questions are worth 10% of the total evaluation score.

4.7 Proposal Selection

Proposal selection does not guarantee a Contract for services will be awarded. The selection process includes:

- A. All proposals will be evaluated in accordance with Section 4.6 Evaluation & Award of Contract. The Review Committee's evaluations will be scored and sent through administrative review for final approval.
- B. Based upon the results of the evaluation, HCJFS will select Provider(s) for the services who it determines to be the most responsive and most advantageous to the program, with price and other factors considered.
- C. HCJFS will work with selected Provider to finalize details of the Contract using Attachment B, Contract Sample, to be executed between the BOCC on behalf of HCJFS and Provider.

- D. If HCJFS and selected Provider are able to successfully agree with the Contract terms, the BOCC has final authority to approve and award Contracts. The Contract is not final until the BOCC has approved the document through public review and resolution through quorum vote.
- E. If HCJFS and successful Provider are unable to come to terms regarding the Contract, in a timely manner as determined by HCJFS, HCJFS will terminate Contract discussions with Provider. In such event, HCJFS reserves the right to select another Provider from the RFP process, cancel the RFP or reissue the RFP as HCJFS deems necessary.
- F. If a proposal is selected with a Provider who has not yet received its licensure from the appropriate Board, the proposal will be disqualified unless the Provider receives its licensure within 60 days of acceptance of the proposal.

4.8 Post-Proposal Meeting

The post-proposal meeting process may be utilized only by Providers who submitted Qualified Proposals, who wish to obtain clarifying information regarding their non-selection. If a Provider wishes to discuss the selection process, the request for an informal meeting and the explanation for it must be submitted in writing and received by HCJFS within fourteen (14) business days after the date of notification of the decision. All requests must be signed by an individual authorized to represent the Provider and be emailed to the RFP Contact Person at the address listed in Section 3.2. Certified or registered mail must be emailed to the contact person listed in Section 3. A meeting will be scheduled within 21 calendar days of receipt of the request and will be for the purpose of discussing a Provider's non-selection.

4.9 Public Records

All proposals submitted shall become the property of HCJFS to use or, at its option, return such proposals. All proposals and associated documents will be considered to be public information and will be open for inspection to interested parties after the award of a contract unless

identified as a trade secret or otherwise exempted from disclosure under the Ohio Public Records Act.

Trade secrets or otherwise exempted information must be clearly identified and marked as such in the proposal. Each page containing such material must:

1. Be clearly identified within the proposal;
2. Must have the basis for non-disclosure status provided in narrative on a separate page and have "Trade Secret" typed on the upper righthand corner of the page and the envelope; and
3. Be placed in the required order of the response format.

For example - if Pages 1-5 are not trade secrets or otherwise exempted from disclosure and Page 6 contains a trade secret then:

- the word "Trade Secret" would be typed on the right-hand corner of pages 1 through 5 of the proposal.

**DO NOT MARK EVERY PAGE OF YOUR PROPOSAL AS TRADE SECRET OR OTHERWISE
EXEMPTED FROM DISCLOSURE OR YOUR PROPOSAL MAY BE REJECTED**

If HCJFS is requested by a third party to disclose those documents which are identified and marked as Trade Secret or Otherwise Exempted from disclosure, HCJFS will notify Provider of that fact. Provider shall promptly notify HCJFS, in writing, that either a) HCJFS is permitted to release these documents, or b) Provider intends to take immediate legal action to prevent its release to a third party. A failure of Provider to respond within five (5) business days shall be deemed permission for HCJFS to release such documents.

It is Provider's sole responsibility to legally defend the actions of HCJFS for withholding Provider's documents as trade secrets or otherwise exempted information if the issue is challenged.

4.10 Provider Certification Process

HCJFS reserves the right to complete the Provider Certification process for selected Providers. The purpose of the process is to provide some assurance to HCJFS that Provider has the administrative capability to effectively and efficiently manage the Contract. The process covers three (3) key areas: Section A - basic identifying information; Section B - financial and administrative information; and Section C - quality assurance information. The process may be abbreviated for Providers already certified through another process, such as Medicaid, JCAHO, COA, CARF, etc.

4.11 Public Record Requests Regarding this RFP

Per ORC 307.862 (C), in order to ensure fair and impartial evaluation, proposals and any documents or other records related to a subsequent negotiation for a final Contract that would otherwise be available for public inspection and copying under section 149.43 of the Revised Code, shall not be available until after the award of the Contract(s). Award is defined as when the Contract is fully executed by all parties.