

**Chester County Office of Managed Behavioral Health
Chester County Department MH/IDD, Drug and Alcohol**

Issues this

REQUEST FOR PROPOSAL (RFP)

FOR THE

PEER SUPPORT EXPANSION INITIATIVE (PSEI)

**Chester County Office of Managed Behavioral Health
Government Services Center
601 Westtown Road, Suite 330
West Chester, PA 19380**

Important Information and Instructions:

Please send all correspondence to the attention of Nancy McDonald, Project Manager at nmcdonald@chesco.org

- 1. **Release of RFP** **March 14, 2108**
- 2. **Letter of Intent:** please submit via *email* **March 23, 2018**
- 3. **Bidder’s conference call** will be held on **Wednesday** **April 4, 2018 @ 11AM**
Eastern Time Call in # 1-641-715-3272 Access code 253657#
- 4. **Additional questions** regarding the RFP will be accepted by email until **April 9, 2018 COB**
- 5. An **FAQ** will be distributed by **April 12, 2018 COB**
- 6. Pleaset **submit** seven (7) original proposals and four (4) fiscal proposals **April 30, 2018 COB**

Directions

- 1. Respond to the questions in the sequence that they appear in the RFP.
- 2. There is a limit of 20 pages for all of Sections A, B and C. Please repeat the question at the top of the response.
- 3. All pages must be sequentially numbered.
- 4. All responses must be typed using 12 pt. font.
- 5. The Appendix should contain any references or other exhibits in support of the narrative of your response.

**Additional supporting or requested documentation should be attached as Appendices.
Late, faxed or emailed proposals can not be considered.

Please submit completed RFP documents to the address below:

**Chester County Office of Managed Behavioral Health
Government Services Center
601 Westtown Road, Suite 330
West Chester, PA 19380
Attn: Nancy McDonald**

Please use this format for all correspondence. Thank you.

Agency Name _____
 Address _____
 Telephone _____ Fax: _____
 Email _____ Contact Person _____
 Submitted by (name and title) _____
 Statement of Intent or Question - _____

Signature _____ Date _____

**Peer Support Expansion Initiative (PSEI)
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I. Introduction: Overall Context for the Peer Support Expansion Initiative (PSEI)

Chester County Departments of Human Services, Mental Health/Intellectual Developmental Disabilities (MH/IDD) and Drug and Alcohol Services (collectively referred to as “the County”) along with its managed care partner, Community Care Behavioral Health Organization (Community Care) maintains a comprehensive network of substance abuse and mental health service providers for all residents living in Chester County. This extensive network provides a diversity of location, choice and specialization for all.

Chester County has deliberated on its role in improving the preparation of individuals interested in becoming Certified Recovery Specialists (CRS) and/or Certified Peer Specialist (CPS). The County acknowledges that these roles can increasingly strengthen the existing service system by pairing excellent treatment with a focus on the life domains of treatment program participants. The CRS/CPS role both within treatment programs and beyond the treatment episode can have significant impact on deepening the recovery, expanding the resilience and thus afford sturdiness to the long-term health of individuals. Consequently the Department is seeking proposals that would:

Develop a ready, willing, able and culturally diverse workforce to meet growing peer support employment needs of Chester County by developing high quality educational and professional strategies for emerging peer positions to be developed as a part of the Peer Support Expansion Initiative.

Key to the design and implementation of the Chester County Peer Support Expansion Initiative (PSEI) will be the participation of approximately ten organizations that will benefit from training, consultation and support. These organizations will receive priority in the placement of enrollees completing the educational steps of the PSEI.

The PSEI is grounded and informed by a growing literature associated with the impact of long term recovery support, upon the disabling aspects of Substance Use Disorders (SUD) and Mental Health (MH) challenges as well as its’ impact on the other key determinants of a positive and affirming health status. These include environmental, lifestyle and biological factors. Recovery coaches and/or peer specialists with “lived experience” are demonstrating the powerful role that they can play in addressing behavioral health challenges while simultaneously attending to these critical healthcare factors.

SAMHSA’s initiatives and the literature on peer-based recovery support services (P-BRSS) <https://www.samhsa.gov/brss-tacs> indicate the growing significance of peer culture, support and leadership as fundamental to the long-term recovery of people receiving SUD and MH services. As an example, twenty-two (22) recovery coaching teams associated with either SUD treatment programs, community-based organizations or peer-run organizations in the state of Texas are demonstrating that infusing recovery coaches within their long term recovery support strategy, is resulting in meaningful increases in employment, housing and significant impacts on abstinence and/or decreased use over the course of one year at 3, 6, 9 and 12 month recovery coach check-ups. (Univ of Texas at Austin, Steve Hicks School of Social Work, Addiction Research Institute: FY17 Interim Evaluation Report). Findings from other national efforts are demonstrating the benefits derived from CRS/CPS-type positions to individuals pursuing long-term recovery.

As Chester County continues to advance its' Recovery Oriented System of Care (ROSC), peer support will be an essential and integral component. Peer Support services will maximize opportunities to create a lifetime of recovery and wellness for individuals, families and Chester County communities.

II. County Commitment to a ROSC and the Goals of the PSEI

Chester County is committed to delivering high quality substance abuse and mental health treatment paired with the infusion of recovery support services. Beginning in 2014, the County convened a Recovery Oriented System of Care (ROSC) Leadership Group (RLG) whose initial task was to determine the strengths, barriers and opportunities for system enhancement regarding recovery support. Key community stakeholders participated in the completion of an Asset Mapping Process that led to the creation of a refined System Vision and subsequently to the issuance of this RFP.

Chester County System Vision:

The system will support the long-term recovery of people receiving services, through the delivery of exceptional treatment paired with an intentional focus on the multiple life domains of those served, their hopes, dreams and their achievement of a fulfilling life in the community.

This County Peer Support Expansion Initiative (PSEI) is itself driven by the County Vision and informed by the Substance Abuse and Mental Health Services Administration (SAMHSA) definition of recovery:

Recovery from Mental Disorders and/or Substance Use Disorders: A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

- **Health:** Overcoming or managing one's disease(s) or symptoms - for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem - and for everyone in recovery, making informed, health choices that support physical and emotional wellbeing;
- **Home:** a stable and safe place to live;
- **Purpose:** meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society; and
- **Community:** relationships and social networks that provide support, friendship, love, and hope.

Chester County is committed to this System Vision and recovery definition as well as in aligning funding, the scope/orientation of program services and staff practices with this Recovery Oriented System of Care foundation. Providers within our contracted system will have a like-minded commitment to the above philosophy.

Goal of the Peer Support Expansion Initiative (PSEI)

In order to achieve the promise of this “System Vision” Chester County intends to significantly increase its alignment with a Recovery Oriented System of Care by infusing peer culture, support and leadership throughout its’ service system. To that end the Peer Support Expansion Initiative will implement a series of actions over the next several years. Enhancing the size, quality and impact of the peer workforce is a primary goal of this Initiative. Additionally the treatment system itself must be prepared to include peer support within its’ overall treatment/recovery approach.

The goal of the Chester County Peer Support Expansion Initiative (PSEI) is to:

Develop a ready, willing, able and culturally diverse workforce to meet growing peer support employment needs of Chester County treatment and recovery support organizations by developing high quality educational and professional strategies for emerging peer positions to be developed as a part of the Peer Support Expansion Initiative.

In order to build such a workforce, one that is prepared to provide services supporting long-term recovery, this Initiative will work towards creating a solid foundation for the establishment and institutionalization of policies, procedures and funding that can support the continued success of this workforce. The County will have hands-on oversight of the Contractor during all phases of the Initiative to ensure that the infrastructure being built and the implementation of the Initiative remain in alignment with the approved proposal. It must be acknowledged that without the commitment by the system and provider partners to the centrality of long-term recovery support, any attempt at implementing the “infusion” of peer support staff within programs without such a commitment, are less likely to succeed.

III. Workforce and Organizational Targets of the PSEI

A significant level of effort will occur with three distinct population and organizational targets. The Contractor guided by the leadership of the County and in partnership with treatment and other organizations, will be expected to produce high quality deliverables for all three targets of the effort. These three targets are:

1. *Potential CRS/CPSs*: People who have lived experience with substance use and/or mental health challenges and who desire to be employed as a CRS and/or CPS are a primary target population for the PSEI;
2. *Treatment Providers and other Service Organizations*: The Contractor, guided by Chester County leadership, will place significant emphasis on the preparation of an organization’s program environment and the enhancement of recovery oriented practice, thus laying the foundation for the successful infusion of peer support within the program’s overall treatment/recovery approach. It is anticipated that approximately ten organizations will be initially engaged in the PSEI effort;
3. *Implementation and Sustainability for the System*: Finally, the overall system (County, Providers, Community Organizations) will be tasked to create finance strategies, policy, protocols and practices in sustaining the delivery of long-term recovery supports for

treatment program participants, family members and allies as well as people in recovery who are benefitting from other organizations in the County.

IV. Initiative Specifications and RFP Questions Requiring Response

This section of the RFP provides additional detail on the goals of the Initiative and includes the questions Respondents are expected to address. Please answer all questions within each Section and include the question at the beginning of each response. Any supporting information (citations or other exhibits) is to be included in the proposal's Appendix. See other specifications for the Proposal on page 18.

In addition, Respondents are expected to present specific strategies, creative solutions, relevant deliverables and measureable outcomes over and above what is stated in this RFP. The four (4) Sections of the PSEI are weighted and will be scored based on the quality, comprehensiveness and the creativity of Respondent proposals.

The four Sections are:

- Section A: Background, Recovery Orientation and Relevant Experience
- Section B: Phases of the Initiative
- Section C: Evaluation Component
- Section D: Financial Requirements

Section A: Background, Recovery Orientation and Relevant Experience.

These questions focus on the background and capacity of the Respondent organization to fulfill the expectations of the PSEI.

Question A-1: What is your organization's mission statement? Briefly describe your organization's history and current scope of service. What values inform your strategic direction, decision-making process and the services you provide?

Question A-2: Describe your organization's orientation to recovery/resilience and share how that orientation is evidenced in your day-to-day operations? Describe how peer culture, support and leadership are evidenced in your organization's day-to-day operations?

Question A-3: How do people with lived experience with substance use and/or mental health challenges occupy decision-making and leadership positions within your organizations? Describe their contribution to your organization's functioning as well as to its success.

Question A-4: State how your organization's capability, capacity and experience are directly relevant to the expectations of this RFP. Please be specific. Please describe the strengths of your organization as well as its challenges.

Question A-5: Please describe your familiarity with the economy, population, service system and other critical factors regarding Chester County, PA. How did you or how will you come to be familiar with Chester County?

Section B: Phases of the Initiative.

The County has established three “phases” to the preparation, implementation and ongoing execution of the Peer Support Expansion Initiative. The three phases are:

- Phase 1: Infrastructure Development
- Phase 2: Preparing the Organizational Culture
- Phase 3: Implementation of PSEI Strategies

This Section contains the most important set of questions in this RFP. The County has worked diligently at creating an Initiative designed to address the demands of a growing workforce while simultaneously applying lessons learned from similar local, regional and national efforts. The RFP is asking all Respondents to do the same in preparing their proposal. This RFP process will help to further shape the PSEI and that is why you will see the invitation to add your original thinking and experience within your responses.

At the beginning of each Phase, there is a **description** of the goals of that Phase followed by associated questions that Respondents are expected to address. Please respond to each question in sequence and include the question at the beginning of the response. If you include research findings, best practices, etc. please include their citations in the Appendix.

Proposals should include detail of your proposed goals, strategies and deliverables in meeting both the specific intent of each Phase as well as including enhancements that in your opinion, more effectively and/or efficiently achieve the goals of each phase. It is important that each Phase contains its’ own *implementation plan* that provides the specific action steps, timelines and sequence in accomplishing the tasks of the proposal. The County expects that Phases 1 and 2, though not beginning simultaneously, will overlap. Proposals should describe such overlap in their implementation plan.

Phase 1: Infrastructure Development: Description.

This *development phase* will include the creation by the Contractor of recruitment, training, internships and all related Initiative-specific strategies necessary to fulfill the following: the vision of the PSEI; the specifications of the CRS/CPS certifying bodies; the educational needs of PSEI enrollees; and finally, the needs of treatment and other relevant organizations. The County envisions that people interested in being employed as a Certified Recovery Specialist or a Certified Peer Specialist and interested in participating in a comprehensive approach to preparing for employment, will be recruited by the PSEI Contractor, selected and enrolled in the Peer Support Expansion Initiative either before or after receiving CRS/CPS certification/certificates and before employment in a County treatment or other organization in a peer support position.

Questions for Phase 1

Question B-1: Comprehensive Recruitment, Vetting and Selection for the PSEI. What specific methods will you employ to ensure that PSEI candidates are recruited across all cultural, economic, racial, social and religious groups and are representative of the general population in Chester County? If you were proposing to the County the selection criteria for the PSEI candidates today,

what would they be? How will you ensure that PSEI candidates will have lived experience as well as relevant abilities that will prepare them for successful completion of the PSEI and eventual employment? What should be the minimum requirements for PSEI selection regarding basic skills in reading, writing, general communication, computer proficiency and other relevant capabilities prior selection? Given these questions, what relevant experience would you bring to this Initiative in these matters?

Question B-2: Mentorship, Internship and Training. *These three educational strategies are meant to augment the basic CRS/CPS curricula/training provided statewide and will include the availability of standardized mentorships, internships and training designed to provide pre-employment work experience and additional training over and above that provided for certification preparation. In your opinion, why are these three educational/experiential strategies important to the success of PSEI enrollees? What are the educational goals for each? What would be the key features of each of these three strategies in providing a meaningful educational impact on PSEI enrollees? Please describe each strategy in detail. Do you recommend additional strategies to increase the capabilities of PSEI enrollees prior to employment? Given these questions, what relevant experience would you bring to this Initiative in these matters?*

Question B-3: Ongoing Professional Development. *In addition to pre-employment preparation, the PSEI intends to partner with relevant organizations to ensure that the ongoing support and professional education of employed peer support staff (including graduates of the PSEI not yet employed) is in place and designed to advance their knowledge and skills in their roles. Given this PSEI specification, please propose how you would fulfill this expectation? Who would be involved? How will ongoing professional development remain relevant and cutting edge in response to changes in the overall field of behavioral health and more specifically to developments in recovery oriented practice? What additional supports do you recommend for employed peer support staff and what role should the Contractor, Provider and County play in this regard? Given these questions, what relevant experience would you bring to this Initiative in these matters?*

Question B-4: Co-Occurring Competence. *The PSEI seeks to optimize the educational opportunities that will be implemented as a result of this Initiative by intentionally including cross-training (both didactic and experiential) of all PSEI enrollees in both the SUD and mental health body of knowledge relevant to peer support staff roles. Propose strategies that will create significant opportunities for cross training of all CRS/CPSs in the SUD/MH knowledge base. Propose strategies to unify, where possible the knowledge base appropriate to the CRS and CPS, as well as in the development and delivery of a more unified approach to intermediate and advanced training for peer support staff no matter what credential/certificate is held. Given these questions, what relevant experience would you bring to this Initiative in these matters?*

Question B-5: Communication. *Given the benefits anticipated as a result of the implementation of the PSEI, communication to all stakeholders will be a valuable asset. For instance, routine communication to stakeholders regarding the stage of PSEI development, the specifics of the strategies it will employ and any new developments will be important. Propose comprehensive communication strategies that will maintain a high level of awareness of the Initiative with all stakeholders and the public in general. Additionally propose communication strategies that will assist in influencing public understanding and perceptions of recovery-oriented practice, long-term peer support and other relevant issues to the success of the PSEI. Given these questions, what relevant experience would you bring to this Initiative in these matters?*

Question B-6: Sustainability. Propose strategies designed to explore and secure funding options for sustaining the PSEI.

Question B-7: Policies/Procedures. *It is critical that all PSEI strategies, enrollee selection, etc. conform to all relevant Federal and State labor laws, licensing regulations and specifications regarding this protected class of employee to ensure the PSEI, providers and other organizational partners are properly aligned with these expectations.* How are your proposal and the specific strategies and action steps you recommend, aligned with the specifications outlined above?

Question B-8: Implementation Plan. Provide the specific action steps, timelines and sequence in accomplishing all the tasks associated with Phase 1, Infrastructure Development.

Phase 2: Preparing the Organizational Culture: Description

The PSEI will include the further enrichment of organizations where people completing the PSEI could be placed for permanent employment. At this time, the County anticipates that as many as ten (10) organizations may be selected to participate in the initial PSEI. Some of the content of Phase 2 of the PSEI are drawn from the recently published *Peer Support Toolkit* which devotes its' first Module to *Preparing the Organizational Culture* (DBHIDS, 2017, p17-45). (<http://dbhids.org/peer-support-toolkit/>) PSEI-related activity during this Phase will include a focus on organizational policies and practices that will result in an environment where peer support is valued and central to the recovery of people receiving services both during and following a treatment episode. This may include the review of the organization's on-boarding practices, supervision and other training/supports related to peer support as part of a multi-disciplinary treatment and recovery approach. It is anticipated that the needs of programs to achieve such enhancement will vary.

It is anticipated that the exact process to be used during Phase 2 will require further development. But for the purposes of the RFP, the process and tasks associated with Phase 2 at this time are:

1. At the beginning of Phase 2, the Contractor will propose to the County for approval, the specifications and methods the Contractor seeks to use for determining the degree of *environmental readiness* of each of the ten organizations to be involved with the PSEI at that time;
2. Using the *approved environmental readiness assessment* the Contractor, in partnership with each of the ten organizations, will administer the assessment;
3. The *assessment* findings will be analyzed to identify the strengths and program challenges that exist at that time and thus determine the *readiness* of each organization to provide an effective and supportive environment for the infusion of peer support staff.
4. A *change strategy* will be guided by a provider-based *Change Management Team (CMT)*. The purpose of the CMT is to fulfill the work outlined in the *change strategy* and to achieve program readiness for the effective infusion of peer support staff.

All Phase 2 related specifications, methods and change strategies will be approved by the County prior to implementation by the Contractor and prior to on-site engagement with organizations. The County will receive routine updates of the progress of all individual organizations engaged with the Contractor during the execution by the CMT of the work outlined in their *change strategy*.

Questions for Phase 2

Question B-9: Readiness Criteria, Assessment and Change Strategy. Propose the expectations, policies and practices that should be present in an organization, indicating their *readiness* for the infusion of peer support. Please be specific. Based on the description of Phase 2 above, what *organizational assessment* method(s) would you propose for determining such readiness? How would you conduct such an *assessment* in partnership with the organization? What in your opinion are the critical components of a *change strategy* that can successfully guide the organization toward achieving *readiness*? If selected as the Contractor, in general, what would be your consultation approach in assisting organizations in completing the necessary work of their change strategy? Given these questions, what relevant experience would you bring to this Initiative in these matters?

Question B-10: Change Management. Describe how you would facilitate the Change Management Team (CMT) in achieving its' goals both during and between CMT meetings? Specifically how would you employ the developed *change strategy*? Describe your consultation role in conveying your expertise relevant to peer support and organizational culture change that will be fundamental ingredients to the CMT in achieving its' goals? Given these questions, what relevant experience would you bring to this Initiative in these matters?

Question B-11: Collaborative Team Approach. In order for peer support staff to be significantly included on organizational teams tasked with facilitating the treatment and recovery of their program participants, how would you assist in creating a team approach in this regard? What are indicators (e.g. peer support staff included in team meetings where discussion of recovery strategies for particular program participants are involved, etc.) of such meaningful inclusion? For example, how would you help to create a collaborative team approach and culture that leverages the strengths, knowledge and experience of all staff? Please present specific strategies that you may use to facilitate the establishment of effective collaborative practices across all staff involved with participants. Given these questions, what relevant experience would you bring to this Initiative in these matters?

Question B-12: Peer Support Supervision. What are the goals of peer support staff supervision? What should be the structure, frequency and type of supervision that not only ensures good performance of peer support staff, but excellent performance? What is the role of the peer support staff supervisor in assuring that the role remains in alignment with the approved job description? What is the role of the peer support staff supervisor in ensuring that these staff is included in the key meetings appropriate to the important work they do with program participants? What is unique about the role of peer support staff? Given these questions, what relevant experience would you bring to this Initiative in these matters?

Question B-13: Critical Partnerships. Given the description of the PSEI during both Phases 1 and 2, what will be the important partnerships necessary for Contractor, PSEI participant and organizational success? Please consider all potential partners and cite the anticipated benefits of each. What steps would you take to engage and solidify these relationships? Given these questions, what relevant experience would you bring to this Initiative in these matters?

Question B-14: Self-Assessment Tools, Best Practice Strategies, Fidelity Measures, etc. Propose program supports including self-assessments, fidelity tools, supervisory coaching methods, etc. for the use by programs during this phase and beyond.

Question B-15: Implementation Plan. Provide the specific action steps, timelines and sequence in accomplishing all the tasks associated with Phase 2, *preparing the Organizational Culture*.

Phase 3: Implementation of Peer Support Expansion Initiative Strategies: Description

This phase implements the comprehensive array of recruitment, selection and educational strategies on the one hand, and the initiation of organizational assessment and consultation with potential recipient organizations of PSEI graduates on the other. Phase 3 is the “Go Live” Phase and will ultimately produce and support a vibrant workforce capable of focusing on the long-term recovery of people receiving services in Chester County.

Questions for Phase 3

Question B-16: Implementation Plan. Provide the specific action steps, timelines and sequence in accomplishing all the tasks associated with Phase 3, Implementation of PSEI Strategies

Question B-17: PSEI Sustainability. Provide your current recommendations for the sustainability of the PSEI. Please consider any and all innovative ideas for supporting the long-term relevance and viability of the PSEI.

Section C: Evaluation Component – Introduction

The PSEI will include a robust evaluation component that will stand as a requirement under the contract. Data regarding the metrics of this component will be reported on a monthly basis and used as a means of determining the progress for initiatives and interventions in each of the three Phases. It is understood that the evaluation component that is proposed in response to this RFP, may and probably will change as the specifics of each Phase are finalized with the County. Evaluation strategies included in proposals, should be guided by the specifications enumerated below.

Overall the County is interested in proposals that include an evaluation component that is dynamic, where findings can immediately be put to use and one that is guided by and able to fulfill the requirements of the following:

1. The proposal must indicate how the quality of the effort will be measured over time;
2. The proposal must indicate in its implementation plans the target dates for the completion of requirements and other accountabilities;
3. The proposal must indicate the methods and the criteria to be used in determining the organizational readiness of programs to infuse peer support staff within their day-to-day practices;
4. The proposal must indicate the methods to be used in determining the employment readiness, ability, knowledge and skills acquired by people completing the Peer Support Expansion Initiative;
5. The proposal must indicate how the contractor (in collaboration with the County and its providers) will support the placement of CRS/CPSs within the treatment system and other organizations. In so doing the contractor must establish an information system that will be capable of tracking the status of all employed and unemployed CRS/CPSs that have or are participating in the Peer Support Expansion Initiative on a basis determined by the County. The Contractor's information system will be able to respond to data inquiries made by the County and do so on a timely basis.

Description of the Evaluation Component and Related Questions for Phase 1, Infrastructure Development

At the outset of Phase 1, the County and the Contractor will establish *baseline measures*, data of which the Contractor will collect during the first quarter of the Initiative. Baseline measures will include but not be limited to the following:

1. The number of CRS/CPSs working at any of the treatment programs or related organizations in the County (point of time = day 30 of the contract);
2. A survey of the range of peer support roles currently being fulfilled within organizations; as well as a determination of the match between current roles and those that are to be promulgated by the Peer Support Expansion Initiative;
3. Estimate the size of the potential target population of potential enrollees for the PSEI;
4. Using surveys, focus groups or other methods, determine the quality of the current CRS/CPS workforce *from the treatment provider perspective*; and,

5. *From the perspective of employed CRS/CPSs, determine the match between the current job description for peer support positions and the actual duties of CRS/CPSs.*

Question C-1: Baseline Measures. Based on the specifications of the baseline measures above, indicate how you would execute **the data collection process**. Please be specific to each specification.

The findings from the baseline study described above, will inform the direction of the PSEI. Phase 1 will focus squarely on the *development* of the *infrastructure* for the PSEI – the specifics of the educational strategies, internships, mentorships, etc. The deliverables for Phase 1 will include the submission and ultimately County approval of the designs for each of the key PSEI components. This Phase 1 evaluation shall, on a monthly basis, indicate the progress being made and ultimately the completion of each of the following components:

1. Completion of the design of recruitment and selection processes for prospective applicants to the PSEI;
2. Completion of the designs for internships, mentorships, training programs, and other key PSEI components cited in Section 3 of this RFP for Phase 1;
3. The establishment of key partnerships necessary for the success of PSEI educational components (for instance, established relationships with organizations who will serve as PSEI internship sites);
4. Completion of proposed methods for on-going job supports, etc.; and,
5. All other Phase 1 components of this RFP, and including how a Respondent to this RFP would evaluate enhancements they propose in their individual proposals.

Question C-2: Phase 1, Infrastructure Evaluation. Based on the specifications noted above, indicate your design for a process that will ultimately build high quality educational components that will benefit potential CPS/CRSs and the participants they will serve.

Description of the Evaluation Component and Related Questions for Phase 2, Organizational Culture

The following Phase 2 outcome measures will partially fulfill the County's expectations for data reports over the course of the contract. (It is anticipated that additional data fields will be added.) These include:

1. Number and kind of Contractor/organizational Memos of Understanding (MOU) created to support Initiative goals – It is expected that the Contractor will establish two-way MOUs with each of the treatment providers, certification bodies, educational institutions, professional guilds, etc. in service to PSEI and PSEI enrollee success;
2. Number and kind of less formal professional relationships with key stakeholders in service to the mission of PSEI;
3. Development and utilization of readiness, educational and self-assessment tools to benefit organizations engaged in the PSEI during Phase 2;
4. Number of mentorship types, programs, mentors, internships sites/placements, etc. established for implementation during Phase 3;

5. Measures associated with the progress/completion of the *individualized change strategy* at PSEI organizational sites; finally,
6. Measure of the cohesiveness of the organizational collaborative team sought as a key goal of Phase 2.

Question C-3: Phase 2, Organizational Culture. Based on the specifications noted above, indicate an evaluation design that will satisfy these expectations.

***Description of the Evaluation Component and Related Questions for
Phase 3, PSEI Implementation***

The following Phase 3 outcome measures will partially fulfill the County's expectations for data reports over the course of the contract. (It is anticipated that additional data fields will be added.) These include:

1. Number of people recruited for potential inclusion in the PSEI;
2. Number of people who have completed an application for formal entry into the PSEI;
3. On a quarterly basis, the number of people completing the basic CRS/CPS training;
4. On a quarterly basis, the number of people not completing Initiative expectations within a yet to be defined period of time;
5. On a quarterly basis, the number of PSEI enrollees placed in a mentorship opportunity;
6. On a quarterly basis, the number of PSEI enrollees who have completed an internship, mentorship, PSEI-sponsored training program;
7. On a quarterly basis, the number of PSEI graduates placed in treatment or similar organizations for employment;
8. Once placed, a report on the progress made by each placement – identify strengths and challenges for each;
9. On a quarterly basis, indicate what we are learning about the quality of the PSEI approach to the preparation of the CRS/CPS;
10. Proposals should indicate how the employment retention status of each PSEI placement would be reported on a quarterly basis.

Question C-4: Phase 3, Implementation. Based on the specifications noted above, indicate an evaluation design that will satisfy these expectations.

Section D: Financial Requirements

Response to Section D Financial Requirements MUST be bound separately.

RFP Questions for the Financial Requirement Section

Question D-1: Provide a complete six (6) month Start-up Budget using the HealthChoices Excel budget forms (attached). Include all expected revenue sources for the proposed services. Budget forms must be filled out completely and include the justification pages.

Question D-2: Provide an Annual Budget using the HealthChoices Excel budget forms. Include all expected revenue sources for the proposed services. Budget forms must be filled out completely and include the justification pages.

Question D-3: Identify the percentage of administration expenses to total expenses, and the share of administration expense charged to the program by the parent company. Include the Allocation Methodology.

Question D-4: Provide a brief narrative where needed to support justifications and to explain the relation of these budgets to the parent organization budget. Describe the organization's in-kind contribution/support for the proposed services.

Question D-5: Identify the organization's compliance officer. Note and explain any compliance issues with the PA Bureau of Program Integrity in FY 2016-17 or current.

Include the following items as Attachments:

- The two most recent financial audits of the organization, if not already on file with Chester County DHS. If organization is a new entity, provide the business plan.
- Unaudited Financial Statements for Fiscal Year 2016-17 (including cash flow).
- Explain any contingent liabilities expected in the organization's 2016-17 audit.
- Aged accounts receivable schedule at 7/1/17 and 9/30/17.
- Credit line information including list of banks, amount of credit line, balance available at 7/1/17 and 9/30/17. Include bank references.
- Copy of Corporate Compliance Plan.
- Identify and explain any arbitration or legal actions in 2016-17 or current.

V. Intent, Review Process, Selection and Award

It is the intent of Chester County to solicit proposals and execute a start-up contract with the Department of Human Services, Office of Managed Behavioral Health.

This notwithstanding, any proposal shall be submitted with the following expressed understanding:

- This Request for Proposals is not subject to the competitive bidding process and any contract entered into as a result of any proposal will not be based on the concept of the “lowest cost applicant”.
- Chester County has the right to reject any and all proposals at any time during the process.
- Chester County may modify the selection process or the scope of the Initiative, or the required responses at any time.
- All costs of developing proposals and any subsequent expenses relating to contract negotiations are entirely the responsibility of the applicant and may not be charged to Chester County.

PROPOSAL REVIEW

Chester County reserves the right to reject any and all proposals received as a result of this RFP and to negotiate separately with competing applicants. If all proposals are unacceptable, Chester County reserves the right to reject the proposals and to issue a new RFP. Chester County also reserves the right to reject a proposal at any time during the process.

SELECTION/REJECTION PROCEDURE

Applicants will be notified by Chester County, in writing, of the status of their proposal within 30 days of submission.

UPON AWARD

It is the intent of this two (2) year start-up contract with the Chester County Department of Human Services, Office of Managed Behavioral Health, to allow this new vendor sufficient time to hire, train and develop the required programming and build to full census. Outcome indicators will be developed and closely monitored to ensure required outcomes/deliverables.

The award resulting from this RFP does not ensure that the need in the community is sufficient to support the development and/or sustainability of this service. The new program will require outreach, marketing and networking with other providers to develop a strong source of referrals and available local community resources.

There is no commitment by Chester County and Community Care Behavioral Health on anything beyond what is directly stated in this RFP and it is contingent on funding availability.

Important Dates for PSEI RFP	
RFP Released	March 14, 2018
Letter of Intent to apply (<i>via email</i>)	March 23, 2018 COB
Bidders conference call	April 4, 2018 11AM
Additional questions accepted	Up to April 9, 2018 COB
FAQ document distributed	April 12, 2018 COB
Proposals due to nmcdonald@chesco.org	April 30, 2018 COB
Scoring begins	May 3, 2018
Top 3 highest scoring proposals interviews	May 24, 2018
Award of contract	week of June 11, 2018

**COB – Close of Business*