**STATE OF MAINE**

**Department of Health and Human Services**

*Office of Child and Family Services*



**RFP# 202309205**

**Clinical Consultation and Support Services**

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| --- | --- |
| **RFP Coordinator** | *All communication regarding the RFP must be made through the RFP Coordinator identified below*.**Name:** Brittany Hall **Title:** Procurement Administrator**Contact Information:** Brittany.hall@maine.gov  |
| **Submitted Questions Due** | *All questions must be received by the RFP Coordinator identified above by:***Date:** November 6, 2023, no later than 11:59 p.m., local time |
| **Proposal Submission** | *Proposals must be received by the Division of Procurement Services by:***Submission Deadline:** December 12, 2023, no later than 11:59 p.m., local time.*Proposals must be submitted electronically to the following address:***Electronic (e-mail) Submission Address:** Proposals@maine.gov |

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PUBLIC NOTICE

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**State of Maine**

**Department of Health and Human Services**

**RFP# 202309205**

**Clinical Consultation and Support Services**

The State of Maine is seeking proposals for Clinical Consultation and Support Services.

A copy of the RFP, as well as the Question & Answer Summary and all amendments related to the RFP, can be obtained at: <https://www.maine.gov/dafs/bbm/procurementservices/vendors/rfps>.

Proposals must be submitted to the State of Maine Division of Procurement Services, via e-mail, at: Proposals@maine.gov. Proposal submissions must be received no later than 11:59 p.m., local time, on December 12, 2023. Proposals will be opened the following business day. Proposals not submitted to the Division of Procurement Services’ aforementioned e-mail address by the aforementioned deadline will not be considered for contract award.

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**RFP TERMS/ACRONYMS with DEFINITIONS**

The following terms and acronyms, as referenced in the RFP, shall have the meanings indicated below:

| **Term/Acronym** | **Definition** |
| --- | --- |
| **Assessment** | As defined in [22 M.R.S.A. §4252(2)](http://www.mainelegislature.org/legis/statutes/22/title22sec4252.html). |
| **Case** | When a family is actively involved in the Child Protective Services (CPS) system, either via open Assessment, Service Case, or child protection proceeding. Refer to [22 M.R.S.A. §4004(2)(E)](http://www.mainelegislature.org/legis/statutes/22/title22sec4004.html). |
| **Children’s Emergency Services**  | CPS staff who provide services outside normal business hours to ensure continuity of CPS. |
| **Child Protective Services (CPS)** | As defined in [22 M.R.S.A. §4004](http://www.mainelegislature.org/legis/statutes/22/title22sec4004.html). |
| **Child Welfare Providers** | Community agencies and individuals who provide services and support to children and families, including CPS staff and contracted providers. |
| **Clinical Consultation Service** | Provides support and guidance to CPS staff and Child Welfare Providers, by reviewing Department Case records while providing clinical knowledge and expertise in treatment modalities, behavioral approaches, and understanding mental health, behavioral needs, and parental capacity.  |
| **Clinical Support Services** | Provides CPS staff with a formal, highly structured, and professionally recognized process when they are involved or impacted by a Critical Incident. Clinical Support Services also supports the Department in improving staff functioning by providing input, guidance, and research. |
| **Critical Incident** | A Case which involves a child death, serious injury, CPS staff Safety event, or any other situation that is difficult to navigate. |
| **Critical Incident Stress Management (CISM)** | An adaptive, short-term psychological helping-process that focuses solely on an immediate and identifiable problem. CISM includes pre-incident preparedness, acute crisis management, and post-crisis follow-up. CISM’s purpose is to enable people who experience traumatic events to return to their daily routine more quickly, and with less likelihood of experiencing post-traumatic stress disorder. |
| **Debriefing Services** | A structured process which reviews the actions taken and/or experiences of CPS staff. The goal of Debriefing Services is to allow CPS staff to process the actions taken and events occurred as well as minimize any emotional impact. |
| **Department** | Department of Health and Human Services |
| **District/District Offices** | The Department and the Maine Legislature approved the establishment of the eight (8) public health Districts to improve coordinated delivery of essential public health services.  District boundaries were established using population size, geographic areas, hospital service areas, and county borders. Each District includes at least one (1) District Office, refer to **Appendix J**.  |
| **Intake Unit** | A unit within the Department’s Office of Child and Family Services (OCFS) that accepts, and processes reports of Child Abuse or Neglect. |
| **OCFS** | The Department’s Office of Child and Family Services |
| **RFP** | Request for Proposal |
| **Safe/Safety** | When there is no evidence of Child Abuse or Neglect, or when Child Abuse or Neglect has occurred, but is unlikely to reoccur, and there is no danger, risk, or threats present.  |
| **State** | State of Maine |

**State of Maine - Department of Health and Human Services**

*Office of Child and Family Services*

**RFP# 202309205**

**Clinical Consultation and Support Services**

**PART I INTRODUCTION**

1. **Purpose and Background**

The Department of Health and Human Services (Department) is seeking proposals to provide Clinical Consultation and Support Services as defined in this Request for Proposals (RFP) document. This document provides instructions for submitting proposals, the procedure and criteria by which the Provider(s) will be selected, and the contractual terms which will govern the relationship between the State of Maine (State) and the awarded Bidder(s).

The Department is dedicated to promoting health, safety, resiliency, and opportunity to all Maine Residents. In addition, the Department assists families in providing for the developmental, health, and Safety needs of their children while respecting the rights and preferences of individuals and families. The Department’s Office of Child and Family Services (OCFS) top priority is ensuring the Safety of all Maine children. OCFS empowers families to access services that keep their family Safe and help prepare children for the transition to adulthood through early intervention and prevention services, Child Protective Services (CPS), and behavioral health services.

Clinical Support and Consultation Services shall be provided pursuant to the [128th Legislature L.D. 1923, An Act to Improve the Child Welfare System](https://legislature.maine.gov/legis/bills/bills_128th/billtexts/SP075801.asp). The services provided as a result of this RFP are intended to strengthen the consistency of the Department’s CPS practice by providing ongoing consultation related to Critical Incidents and Clinical Consultation Services to CPS staff in each District Office (**Appendix J**). The goal of Clinical Support and Consultation Services is to maintain Child Safety and build critical thinking and decision-making skills among the Department’s CPS staff.

1. **General Provisions**
	1. From the time the RFP is issued until award notification is made, all contact with the State regarding the RFP must be made through the RFP Coordinator. No other person/ State employee is empowered to make binding statements regarding the RFP. Violation of this provision may lead to disqualification from the bidding process, at the State’s discretion.
	2. Issuance of the RFP does not commit the Department to issue an award or to pay expenses incurred by a Bidder in the preparation of a response to the RFP. This includes attendance at personal interviews or other meetings and software or system demonstrations, where applicable.
	3. All proposals must adhere to the instructions and format requirements outlined in the RFP and all written supplements and amendments (such as the Summary of Questions and Answers), issued by the Department. Proposals are to follow the format and respond to all questions and instructions specified below in the “Proposal Submission Requirements” section of the RFP.
	4. Bidders will take careful note that in evaluating a proposal submitted in response to the RFP, the Department will consider materials provided in the proposal, information obtained through interviews/presentations (if any), and internal Departmental information of previous contract history with the Bidder (if any). The Department also reserves the right to consider other reliable references and publicly available information in evaluating a Bidder’s experience and capabilities.
	5. The proposal must be signed by a person authorized to legally bind the Bidder and must contain a statement that the proposal and the pricing contained therein will remain valid and binding for a period of 180 days from the date and time of the bid opening.
	6. The RFP and the awarded Bidder’s proposal, including all appendices or attachments, will be the basis for the final contract, as determined by the Department.
	7. Following announcement of an award decision, all submissions in response to this RFP will be public records, available for public inspection pursuant to the State of Maine Freedom of Access Act (FOAA) ([1 M.R.S. § 401](http://www.mainelegislature.org/legis/statutes/1/title1sec401.html) et seq.).
	8. The Department, at its sole discretion, reserves the right to recognize and waive minor informalities and irregularities found in proposals received in response to the RFP.
	9. All applicable laws, whether or not herein contained, are included by this reference. It is the Bidder’s responsibility to determine the applicability and requirements of any such laws and to abide by them.
2. **Eligibility to Submit Bids**

Bidders and any proposed subcontractors must have or provide evidence of the ability to obtain a valid State of Maine, [Mental Health License](https://www.maine.gov/dhhs/dlc/licensing-certification/behavioral-health) pursuant to the Department’s Division of Licensing and Certification, Community Services Programs, Mental Health Agency Licensing Standards, prior to the start of the initial period of performance, in order to submit a bid in response to this RFP.

1. **Contract Term**

The Department is seeking a cost-efficient proposal to provide services, as defined in the RFP, for the anticipated contract period defined in the table below. Please note, the dates below are estimated and may be adjusted, as necessary, in order to comply with all procedural requirements associated with the RFP and the contracting process. The actual contract start date will be established by a completed and approved contract.

Contract Renewal: Following the initial term of the contract, the Department may opt to renew the contract for two (2) renewal periods, as shown in the table below, and subject to continued availability of funding and satisfactory performance.

The term of the anticipated contract, resulting from the RFP, is defined as follows:

|  |  |  |
| --- | --- | --- |
| **Period** | **Start Date** | **End Date** |
| Initial Period of Performance | 7/1/2024 | 6/30/2026 |
| Renewal Period #1 | 7/1/2026 | 6/30/2028 |
| Renewal Period #2 | 7/1/2028 | 6/30/2029 |

1. **Number of Awards**

The Department anticipates making one (1) award as a result of the RFP process.

**PART II SCOPE OF SERVICES TO BE PROVIDED**

**Specific instructions for the Bidder to provide a narrative response to the Scope of Services may be found in Part IV, Section III, Services to be Provided.**

1. **Clinical Consultation Services**
2. Obtain, prior to the initial period of performance, and maintain valid State of Maine, [Mental Health License](https://www.maine.gov/dhhs/dlc/licensing-certification/behavioral-health) pursuant to the Department’s Division of Licensing and Certification, Community Services Programs, Mental Health Agency Licensing Standards.
3. **Clinical Support Services**
	* + 1. Provide Critical Incident Stress Management (CISM) and Debriefing Services in-person to CPS staff in each District Office, upon request.
4. Debriefing Services shall be held within the timeframes established within the specific CISM protocol.
5. Provide other Department-approved CISM interventions, as needed, including but not limited to:
	1. Defusing;
	2. Grief and loss; and
	3. Crisis management.
		* 1. Conduct research, provide recommendations, and provide technical assistance with a goal of strengthening the Department’s response to Critical Incident(s) and improving Department staff response to traumatic events, upon request of the Department.
			2. Provide technical assistance to CPS staff and Child Welfare Providers:
	4. Review Department Case records and provide clinical knowledge and expertise in treatment modalities, behavioral approaches, mental health, behavioral needs, and parental capacity.
6. **CPS Staff Training**
7. Provide Clinical Consultation Services trainings in each District Office **(Appendix J)**, including but not be limited to:
	1. Ensuring trainings are held in-person or remotely, quarterly, for four (4) hours per District, to CPS staff;
	2. Developing and providing training materials to CPS staff, including but not limited to:
		1. Attendee sign-in sheets;
		2. Training agendas;
		3. Handouts reflecting the content of each training;
		4. Evaluation forms for rating the training; and
		5. Certificate of completion.
	3. Ensuring all CPS staff who attend and complete the trainings are provided with the evaluation form and certificate of completion at the close of the training session.
	4. Ensuring documentation of continuing education contact hours is maintained for each training provided to CPS staff and available upon the Department’s request.
8. Ensure Clinical Consultation Services trainings include:
	1. Topics focused on improving response to Critical Incidents;
	2. Development of motivational interviewing skills;
	3. Development of critical thinking skills as it relates to analysis of underlying causes, contributing factors and how they relate to CPS practice, Case-related decision-making, and child Safety;
	4. Behavioral modification as it relates to family planning;
	5. Current child welfare practices and research;
	6. Discussion which facilitates effective interventions for children and families; and
	7. Other child welfare practice topics as agreed-upon by the awarded Bidder and/or Department.

Provide Psychoeducation in person or by phone to Office of Child and Family Services (OCFS) staff as requested.

Provide information that can increase general knowledge or skills.

Psychoeducation may include, but not be limited to:

Local resources;

Therapy modalities for consideration;

Diagnostic information; and

Other information as requested.

# **Staffing Requirements**

1. Provide a sufficient number of clinical staff to provide Clinical Consultation Services in-person and/or by phone for up to fourteen (14) hours per month, per District, specifically by providing:
2. In-person consultation, four (4) hours per month, to OCFS staff (Child Protective Services (CPS), Children’s Emergency Services, and Intake Unit staff) which may include reviewing Case records prior to the meetings;
3. Consultation, as needed for specific Cases, two (2) hours per week, which may include obtaining a verbal or written summary of the Case from the CPS staff or reviewing Case records prior to the meetings; and
4. In-person Consultation for OCFS staff and Child Welfare Providers, two (2) hours per month.
5. Ensure clinical staff are certified in a Department approved CISM training prior to providing Clinical Support Services to Department staff.
	* + - 1. Clinical Consultation Services staff shall have and maintain a valid and in good standing Maine license to practice as a:

[Licensed Clinical Professional Counselor](https://www.maine.gov/pfr/professionallicensing/professions/board-of-counseling-professionals-licensure);

[Licensed Clinical Social Worker](https://www.maine.gov/pfr/professionallicensing/professions/state-board-social-worker-licensure); or

[Psychologist](https://www.maine.gov/pfr/professionallicensing/professions/board-examiners-psychologists).

**b.** Training and Clinical Support Services staff shall have and maintain a valid and in good standing Maine license to practice as a:

[Licensed Clinical Professional Counselor](https://www.maine.gov/pfr/professionallicensing/professions/board-of-counseling-professionals-licensure);

[Licensed Clinical Professional Counselor-Conditional](https://www.maine.gov/pfr/professionallicensing/professions/board-of-counseling-professionals-licensure);

[Licensed Clinical Social Worker](https://www.maine.gov/pfr/professionallicensing/professions/state-board-social-worker-licensure);

[Licensed Master Social Worker](https://www.maine.gov/pfr/professionallicensing/professions/state-board-social-worker-licensure);

[Licensed Master Social Worker-Conditional Clinical](https://www.maine.gov/pfr/professionallicensing/professions/state-board-social-worker-licensure); or

[Psychologist](https://www.maine.gov/pfr/professionallicensing/professions/board-examiners-psychologists).

# **Reports**

* 1. Track and record all data/information necessary to complete the required reports listed in **Table 1**:

|  |
| --- |
| **Table 1 – Required Reports** |
| **Name of Report**  | **Description or Appendix #** |
| **a.** | Provider Packet  | **Appendix I** |
| **b.** | Program Report | Reporting may include but not be limited to, total:Hours Clinical Consultation Services provided, per District Office; Hours of Clinical Support Services provided, per District Office; andTrainings completed and number of as agreed, between the Department staff attended per District Office and awarded Bidder. |

# Submit all the required reports to the Department in accordance with the timelines established in **Table 2**:

|  |
| --- |
| **Table 2 – Required Reports Timelines** |
| **Name of Report**  | **Period Captured by Report**  | **Due Date** |
| **a.** | Provider Packet | Each Quarter | Thirty (30) calendar days after each quarter |
| **b.** | Program Report | Each Quarter and Annually | Thirty (30) calendar days after each quarter and annually by 8/1 |

**PART III KEY RFP EVENTS**

1. **Questions**
	1. **General Instructions:** It is the responsibility of all Bidders and other interested parties to examine the entire RFP and to seek clarification, in writing, if they do not understand any information or instructions.
		1. Bidders and other interested parties must use **Appendix K** (Submitted Questions Form) for submission of questions. The form is to be submitted as a WORD document.
		2. The Submitted Questions Form must be submitted, by e-mail, and received by the RFP Coordinator, identified on the cover page of the RFP, as soon as possible but no later than the date and time specified on the RFP cover page.
		3. Submitted Questions must include the RFP Number and Title in the subject line of the e-mail. The Department assumes no liability for assuring accurate/complete/on time e-mail transmission and receipt.
	2. **Question & Answer Summary:** Responses to all questions will be compiled in writing and posted on the following website no later than seven (7) calendar days prior to the proposal due date: [Division of Procurement Services RFP Page](https://www.maine.gov/dafs/bbm/procurementservices/vendors/rfps). It is the responsibility of all interested parties to go to this website to obtain a copy of the Question & Answer Summary. Only those answers issued in writing on this website will be considered binding.
2. **Amendments**

All amendments released in regard to the RFP will also be posted on the following website: [Division of Procurement Services RFP Page](https://www.maine.gov/dafs/bbm/procurementservices/vendors/rfps). It is the responsibility of all interested parties to go to this website to obtain amendments. Only those amendments posted on this website are considered binding.

1. **Submitting the Proposal**
	1. **Proposals Due:** Proposals must be received no later than 11:59 p.m. local time, on the date listed on the cover page of the RFP. E-mails containing original proposal submissions, or any additional or revised proposal files, received after the 11:59 p.m. deadline will be rejected without exception.
	2. **Delivery Instructions:** E-mail proposal submissions are to be submitted to the State of Maine Division of Procurement Services at Proposals@maine.gov.
		1. Only proposal submissions received by e-mail will be considered. The Department assumes no liability for assuring accurate/complete e-mail transmission and receipt.
			1. Proposal submission e-mails that are successfully received by the proposals@maine.gov inbox will receive an automatic reply stating as such.
		2. E-mails containing links to file sharing sites or online file repositories will not be accepted as submissions. Only e-mail proposal submissions that have the actual requested files attached will be accepted.
		3. Encrypted e-mails received which require opening attachments and logging into a proprietary system will not be accepted as submissions. Please check with your organization’s Information Technology team to ensure that your security settings will not encrypt your proposal submission.
		4. File size limits are 25MB per e-mail. Bidders may submit files separately across multiple e-mails, as necessary, due to file size concerns. All e-mails and files must be received by the due date and time listed above.
		5. Bidders are to insert the following into the subject line of their e-mail proposal submission: **“RFP# 202309205 Proposal Submission – [Bidder’s Name]”**
		6. Bidder’s proposal submissions are to be broken down into multiple files, with each file named as it is titled in bold below, and include:
* **File 1 [Bidder’s Name] – Preliminary Information:**

*PDF format preferred*

**Appendix A** (Proposal Cover Page)

**Appendix B** (Debarment, Performance and Non-Collusion Certification)

**Appendix C** (Eligibility to Submit Bids Form)

All required eligibility documentation stated in PART IV, Section I.

* **File 2 [Bidder’s Name] – Organization Qualifications and Experience:**

*PDF format preferred*

**Appendix D** (Organization Qualifications and Experience Form)

**Appendix E** (Subcontractors Form), if applicable

**Appendix F** (Litigation Form)

All required information and attachments stated in PART IV, Section II.

* **File 3 [Bidder’s Name] – Proposed Services:**

*PDF format preferred*

**Appendix G** (Response to Proposed Services Form)

All required information and attachments stated in PART IV, Section III.

* **File 4 [Bidder’s Name] – Cost Proposal:**

*Excel format preferred*

**Appendix H** (Cost Proposal Form)

All required information and attachments stated in PART IV, Section IV.

**PART IV PROPOSAL SUBMISSION REQUIREMENTS**

This section contains instructions for Bidders to use in preparing their proposals. The Department seeks detailed yet succinct responses that demonstrate the Bidder’s qualifications, experience, and ability to perform the requirements specified throughout the RFP.

The Bidder’s proposal must follow the outline used below, including the numbering, section, and sub-section headings. Failure to use the outline specified in PART IV, or failure to respond to all questions and instructions throughout the RFP, may result in the proposal being disqualified as non-responsive or receiving a reduced score. The Department, and its evaluation team, has sole discretion to determine whether a variance from the RFP specifications will result either in disqualification or reduction in scoring of a proposal. Rephrasing of the content provided in the RFP will, at best, be considered minimally responsive.

Bidders are not to provide additional attachments beyond those specified in the RFP for the purpose of extending their response. Additional materials not requested will not be considered part of the proposal and will not be evaluated. Include any forms provided in the submission package or reproduce those forms as closely as possible. All information must be presented in the same order and format as described in the RFP.

**Proposal Format and Contents**

**Section I Preliminary Information** (File #1)

* 1. **Proposal Cover Page**

Bidders must complete **Appendix A** (Proposal Cover Page). It is critical that the cover page show the specific information requested, including Bidder address(es) and other details listed. The Proposal Cover Page must be dated and signed by a person authorized to enter into contracts on behalf of the Bidder.

* 1. **Debarment, Performance and Non-Collusion Certification**

Bidders must complete **Appendix B** (Debarment, Performance and Non-Collusion Certification Form). The Debarment, Performance and Non-Collusion Certification Form must be dated and signed by a person authorized to enter into contracts on behalf of the Bidder.

* 1. **Eligibility Requirements**

Bidders must provide documentation to demonstrate meeting eligibility requirements stated in PART I, C. of the RFP. This documentation includes:

1. **Appendix C** (Eligibility to Submit Bids Form)

**Section II Organization Qualifications and Experience** (File #2)

* 1. **Overview of the Organization**

Bidders must complete **Appendix D** (Qualifications and Experience Form) describing their qualifications and skills to provide the requested services in the RFP. Bidders must include three (3) examples of projects which demonstrate their experience and expertise in performing these services as well as highlighting the Bidder’s stated qualifications and skills.

* 1. **Subcontractors**

If subcontractors are to be used, including consultants, Bidders must complete **Appendix E** (Subcontractors Form) by providing a list that specifies the name, address, phone number, contact person, and a brief description of the subcontractors’ organizational capacity and qualifications.

* 1. **Organizational Chart**

Bidders must provide an enterprise-wide organization chart showing officers, major organization components, and the project team proposed to meet the requirements of this RFP. This chart must indicate to whom the project team reports. Note: individual project team positions are to be identified in the job description and staffing plan requirements of **Appendix G** (Response to Proposed Services).

* 1. **Litigation**

Bidders must complete **Appendix F** (Litigation Form) providing a list of all current litigation in which the Bidder is named and a list of all closed cases that have closed within the past five (5) years in which the Bidder paid the claimant either as part of a settlement or by decree.  For each, list the entity bringing suit, the complaint, the accusation, amount, and outcome. If no litigation has occurred, write “none” on **Appendix F** (Litigation Form).

* 1. **Financial Viability**

Bidders must provide the three (3) most recent years of Financial Statements audited or reviewed by a Certified Public Accountant.

* 1. **Certificate of Insurance**

Bidders must provide a valid certificate of insurance on a standard ACORD form (or the equivalent) evidencing the Bidder’s general liability, professional liability and any other relevant liability insurance policies that might be associated with the proposed services.

|  |
| --- |
| **Required Attachments Related to Organization Qualifications and Experience**  |
| **Attachment #:** | **Attachment Name:** |
| One (1) | Qualifications and Experience Form  |
| Two (2) | Subcontractors Form |
| Three (3) | Organizational Chart |
| Four (4) | Litigation |
| Five (5) | Financial Viability  |
| Six (6) | Certificate of Insurance |

Attachments 1 – 6, must be included in numerical order, as part of File 2, as outlined in PART III “Submitting the Proposal” of this RFP. Attachments 1 – 6 will be reviewed and evaluated by the Department’s evaluation team under the Organization Qualifications and Experience section of this RFP.

**Section III Proposed Services** (File #3)

Bidder must complete **Appendix G** (Response to Proposed Services Form) by providing a detailed response to the requirements outlined in this RFP.

|  |
| --- |
| **Required Attachments Related to Proposed Services** |
| **Attachment #:** | **Attachment Name:** |
| Seven (7) | Job Descriptions |
| Eight (8) | Staffing Plan |
| Nine (9) | Implementation - Work Plan |

Attachments 7 – 9, must be included in numerical order, as part of File 3, as outlined in PART III “Submitting the Proposal” of this RFP. Attachments 7 – 9 will be reviewed and evaluated by the Department’s evaluation team under the Proposed Services section of this RFP.

**Section IV Cost Proposal** (File #4)

* 1. **General Instructions**
		1. Bidders must submit a cost proposal that covers the initial period of performance, starting 7/1/2024 and ending on 6/30/2026.
		2. The cost proposal must include the costs necessary for the Bidder to fully comply with the contract terms, conditions, and RFP requirements.
		3. No costs related to the preparation of the proposal for the RFP, or to the negotiation of the contract with the Department, may be included in the proposal. Only costs to be incurred after the contract effective date that are specifically related to the implementation or operation of contracted services may be included.
	2. **Cost Proposal Form Instructions**

Bidders must fill out **Appendix H** (Cost Proposal Form), following the instructions detailed here and in the form. Failure to provide the requested information, and to follow the required cost proposal format provided, may result in the exclusion of the proposal from consideration, at the discretion of the Department.

**PART V PROPOSAL EVALUATION AND SELECTION**

Evaluation of the submitted proposals will be accomplished as follows:

1. **Evaluation Process - General Information**
	1. An evaluation team, composed of qualified reviewers, will judge the merits of the proposals received in accordance with the criteria defined in the RFP.
	2. Officials responsible for making decisions on the award selection will ensure that the selection process accords equal opportunity and appropriate consideration to all who are capable of meeting the specifications. The goals of the evaluation process are to ensure fairness and objectivity in review of the proposals and to ensure that the contract is awarded to the Bidder whose proposal provides the best value to the State of Maine.
	3. The Department reserves the right to communicate and/or schedule interviews/presentations with Bidders, if needed, to obtain clarification of information contained in the proposals received. The Department may revise the scores assigned in the initial evaluation to reflect those communications and/or interviews/presentations. Changes to proposals, including updating or adding information, will not be permitted during any interview/presentation process and, therefore, Bidders must submit proposals that present their rates and other requested information as clearly and completely as possible.
2. **Scoring Weights and Process**
	1. **Scoring Weights:** The score will be based on a 100-point scale and will measure the degree to which each proposal meets the following criteria.

**Section I. Preliminary Information (No Points – Eligibility Requirements)**

Includes all elements addressed above in Part IV, Section I.

**Section II. Organization Qualifications and Experience (30 points)**

Includes all elements addressed above in Part IV, Section II.

**Section III. Proposed Services (40 points)**

Includes all elements addressed above in Part IV, Section III.

**Section IV. Cost Proposal (30 points)**

Includes all elements addressed above in Part IV, Section IV.

* 1. **Scoring Process:** For proposals that demonstrate meeting the eligibility requirements in Section I, the evaluation team will use a consensus approach to evaluate and score Sections II & III above. Members of the evaluation team will not score those sections individually but, instead, will arrive at a consensus as to assignment of points for each of those sections. Section IV, the Cost Proposal, will be scored as described below.
	2. **Scoring the Cost Proposal:** The total cost proposed for conducting all the functions specified in the RFP will be assigned a score according to a mathematical formula. The lowest bid will be awarded thirty (30) points. Proposals with higher bids values will be awarded proportionately fewer points calculated in comparison with the lowest bid.

The scoring formula is:

(Lowest submitted cost proposal / Cost of proposal being scored) x 30 = pro-rated score

No Best and Final Offers: The State of Maine will not seek or accept a best and final offer (BAFO) from any Bidder in this procurement process.  All Bidders are to provide their best value pricing with the submission of their proposal.

* 1. **Negotiations:** The Department reserves the right to negotiate with the awarded Bidder to finalize a contract. Such negotiations may not significantly vary the content, nature or requirements of the proposal or the Department’s Request for Proposal to an extent that may affect the price of goods or services requested. The Department reserves the right to terminate contract negotiations with an awarded Bidder who submits a proposed contract significantly different from the proposal they submitted in response to the advertised RFP. In the event that an acceptable contract cannot be negotiated with the highest ranked Bidder, the Department may withdraw its award and negotiate with the next-highest ranked Bidder, and so on, until an acceptable contract has been finalized. Alternatively, the Department may cancel the RFP, at its sole discretion.
1. **Selection and Award**
	1. The final decision regarding the award of the contract will be made by representatives of the Department subject to approval by the State Procurement Review Committee.
	2. Notification of conditional award selection or non-selection will be made in writing by the Department.
	3. Issuance of the RFP in no way constitutes a commitment by the State of Maine to award a contract, to pay costs incurred in the preparation of a response to the RFP, or to pay costs incurred in procuring or contracting for services, supplies, physical space, personnel or any other costs incurred by the Bidder.
	4. The Department reserves the right to reject any and all proposals or to make multiple awards.
2. **Appeal of Contract Awards**

Any person aggrieved by the award decision that results from the RFP may appeal the decision to the Director of the Bureau of General Services in the manner prescribed in [5 M.R.S.A. § 1825-E](http://www.mainelegislature.org/legis/statutes/5/title5sec1825-E.html) and [18-554 Code of Maine Rules Chapter 120](https://www.maine.gov/dafs/bbm/procurementservices/policies-procedures/chapter-120).  The appeal must be in writing and filed with the Director of the Bureau of General Services, 9 State House Station, Augusta, Maine, 04333-0009 within 15 calendar days of receipt of notification of conditional contract award.

**PART VI CONTRACT ADMINISTRATION AND CONDITIONS**

1. **Contract Document**
	1. The awarded Bidder will be required to execute a State Service Contract with appropriate riders as determined by the issuing department.

Forms and contract documents commonly used by the Department can be found on the Department’s [Division of Contract Management website](https://www.maine.gov/dhhs/about/financial-management/contract-management).

* 1. Allocation of funds is final upon successful negotiation and execution of the contract, subject to the review and approval of the State Procurement Review Committee. Contracts are not considered fully executed and valid until approved by the State Procurement Review Committee and funds are encumbered. No contract will be approved based on an RFP which has an effective date less than fourteen (14) calendar days after award notification to Bidders. (Referenced in the regulations of the Department of Administrative and Financial Services, [Chapter 110, § 3(B)(i)](https://www.maine.gov/dafs/bbm/procurementservices/policies-procedures/chapter-110).)

This provision means that a contract cannot be effective until at least fourteen (14) calendar days after award notification.

* 1. The State recognizes that the actual contract effective date depends upon completion of the RFP process, date of formal award notification, length of contract negotiation, and preparation and approval by the State Procurement Review Committee. Any appeals to the Department’s award decision(s) may further postpone the actual contract effective date, depending upon the outcome. The contract effective date listed in the RFP may need to be adjusted, if necessary, to comply with mandated requirements.
	2. In providing services and performing under the contract, the awarded Bidder must act as an independent contractor and not as an agent of the State of Maine.
1. **Standard State Contract Provisions**
	1. Contract Administration

Following the award, a Contract Administrator from the Department will be appointed to assist with the development and administration of the contract and to act as administrator during the entire contract period. Department staff will be available after the award to consult with the awarded Bidder in the finalization of the contract.

* 1. Payments and Other Provisions

The State anticipates paying the Contractor on the basis of net thirty (30) payment terms, upon the receipt of an accurate and acceptable invoice. An invoice will be considered accurate and acceptable if it contains a reference to the State of Maine contract number, contains correct pricing information relative to the contract, and provides any required supporting documents, as applicable, and any other specific and agreed-upon requirements listed within the contract that results from the RFP.

**PART VII LIST OF RFP APPENDICES AND RELATED DOCUMENTS**

**Appendix A** – Proposal Cover Page

**Appendix B** – Debarment, Performance, and Non-Collusion Certification

**Appendix C** – Eligibility to Submit Bids Form

**Appendix D** – Qualifications and Experience Form

**Appendix E** – Subcontractors Form

**Appendix F** – Litigation Form

**Appendix G** – Response to Proposed Services Form

**Appendix H** – Cost Proposal Form

**Appendix I** – Provider Packet Report Template

**Appendix J** – Department District Offices

**Appendix K** – Submitted Questions Form

**APPENDIX A**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

**PROPOSAL COVER PAGE**

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |
| **Vendor Customer Code** (for current State of Maine vendors)**:** | VC |
| **Chief Executive - Name/Title:** |  |
| **Tel:** |  | **E-mail:** |  |
| **Headquarters Street Address:** |  |
| **Headquarters City/State/Zip:** |  |
| ***(Provide information requested below if different from above)*** |
| **Lead Point of Contact for Proposal - Name/Title:** |  |
| **Tel:** |  | **E-mail:** |  |
| **Street Address:** |  |
| **City/State/Zip:** |  |

* This proposal and the pricing structure contained herein will remain firm for a period of 180 days from the date and time of the bid opening.
* No personnel currently employed by the Department or any other State agency participated, either directly or indirectly, in any activities relating to the preparation of the Bidder’s proposal.
* No attempt has been made, or will be made, by the Bidder to induce any other person or firm to submit or not to submit a proposal.
* The above-named organization is the legal entity entering into the resulting contract with the Department if they are awarded the contract.
* The undersigned is authorized to enter contractual obligations on behalf of the above-named organization.

*To the best of my knowledge, all information provided in the enclosed proposal, both programmatic and financial, is complete and accurate at the time of submission.*

|  |  |
| --- | --- |
| **Name (Print):** | **Title:** |
| **Authorized Signature:** | **Date:** |

**APPENDIX B**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

**DEBARMENT, PERFORMANCE, and NON-COLLUSION CERTIFICATION**

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

*By signing this document, I certify to the best of my knowledge and belief that the aforementioned organization, its principals and any subcontractors named in this proposal:*

1. *Are not presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from bidding or working on contracts issued by any governmental agency.*
2. *Have not within three years of submitting the proposal for this contract been convicted of or had a civil judgment rendered against them for:*
	1. *Fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a federal, state, or local government transaction or contract.*
	2. *Violating Federal or State antitrust statutes or committing embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.*
3. *Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (b) of this certification.*
4. *Have not within a three (3) year period preceding this proposal had one or more federal, state, or local government transactions terminated for cause or default*.
5. *Have not entered into a prior understanding, agreement, or connection with any corporation, firm, or person submitting a response for the same materials, supplies, equipment, or services and this proposal is in all respects fair and without collusion or fraud. The above-mentioned entities understand and agree that collusive bidding is a violation of state and federal law and can result in fines, prison sentences, and civil damage awards.*

|  |  |
| --- | --- |
| **Name (Print):** | **Title:** |
| **Authorized Signature:** | **Date:** |

**APPENDIX C**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

## ELIGIBILITY TO SUBMIT A BID FORM

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |
| **Eligibility Certification**Bidders and any proposed subcontractors must have or provide evidence of the ability to obtain a valid State of Maine, [Mental Health License](https://www.maine.gov/dhhs/dlc/licensing-certification/behavioral-health) pursuant to the Department’s Division of Licensing and Certification, Community Services Programs, Mental Health Agency Licensing Standards, prior to the start of the initial period of performance, in order to submit a bid in response to this RFP. |
| Does the Bidder meet the requirements of Part I.C. Eligibility to Submit Bids? Explain and provide evidence of meeting the requirement: | [ ]  Yes or [ ]  No |
|  |

**APPENDIX D**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

## QUALIFICATIONS and EXPERIENCE FORM

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

|  |
| --- |
| **Present a brief statement of qualifications, including any applicable licensure and/or certification. Describe the history of the Bidder’s organization, especially regarding skills pertinent to the specific work required by the RFP and any special or unique characteristics of the organization which would make it especially qualified to perform the required work activities. You may expand this form and use additional pages to provide this information.** |
|  |

|  |
| --- |
| **Provide a description of projects that occurred within the past five (5) years which reflect experience and expertise needed in performing the functions described in the “Scope of Services” portion of the RFP. For each of the project examples provided, a contact person from the client organization involved should be listed, along with that person’s telephone number and e-mail address. Please note that contract history with the State of Maine, whether positive or negative, may be considered in rating proposals even if not provided by the Bidder.***If the Bidder has not provided similar services, note this, and describe experience with projects that highlight the Bidder’s general capabilities.*  |

|  |
| --- |
| **Project One** |
| **Business Reference Name:** |  |
| **Reference Contact Person:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
| **Description of Project** |
|  |

|  |
| --- |
| **Project Two** |
| **Business Reference Name:** |  |
| **Reference Contact Person:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
| **Description of Project** |
|  |

|  |
| --- |
| **Project Three** |
| **Business Reference Name:** |  |
| **Reference Contact Person:** |  |
| **Telephone:** |  |
| **E-Mail:** |  |
| **Description of Project** |
|  |

**APPENDIX E**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

## SUBCONTRACTORS FORM

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

|  |
| --- |
| **If subcontractors, including consultants, are to be used, provide each individual subcontractor’s business or consultant’s name, contact person, address, phone number, and a brief description of the subcontractor’s organizational or consultant’s capacity and qualifications. Bidders may add additional Subcontractors/Consultants as needed.** |

|  |
| --- |
| **Subcontractor/Consultant** |
| **Subcontractor Business or Consultant’s Name:** |  |
| **Contact Person:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **E-Mail:** |  |
| **Subcontractor/consultant organizational capacity and qualifications** |
|  |

|  |
| --- |
| **Subcontractor/Consultant** |
| **Subcontractor Business or Consultant’s Name:** |  |
| **Contact Person:** |  |
| **Address:** |  |
| **Phone Number:** |  |
| **E-Mail:** |  |
| **Subcontractor/consultant organizational capacity and qualifications** |
|  |

**APPENDIX F**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

## LITIGATION FORM

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |

|  |
| --- |
| **Provide a list of all current litigation in which the Bidder is named and a list of all closed cases that have closed within the past five (5) years in which the Bidder paid the claimant either as part of a settlement or by decree. For each, list the entity bringing suit, the complaint, the accusation, amount, and outcome. If no litigation has occurred, write “none.”**  |

|  |
| --- |
|  |
| **Case #** |  |
| **Entity Filing Suit:** |  |
| **Complaint/Accusation:** |  |
| **Amount:** |  |
| **Outcome** |  |
|  |
| **Case #** |  |
| **Entity Filing Suit:** |  |
| **Complaint/Accusation:** |  |
| **Amount:** |  |
| **Outcome** |  |
|  |
| **Case #** |  |
| **Entity Filing Suit:** |  |
| **Complaint/Accusation:** |  |
| **Amount:** |  |
| **Outcome** |  |

**APPENDIX G**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

## RESPONSE TO PROPOSED SERVICES FORM

**RFP# 202309205**

**Clinical Consultation and Support Services**

**The response to proposed services form may be obtained in a Word (.docx) format by double clicking on the document icon below.**

****

**APPENDIX H**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

**COST PROPOSAL FORM**

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Bidder’s Organization Name:** |  |
| **Proposed Cost:** | **$**  |

**Instructions:** The Bidder must complete and submit budget forms providing a detailed breakdown of expenses in performing the services for the initial period of performance as described in this RFP and in the Bidder’s proposal.  The total expenses amount is the proposed cost to be used in the scoring cost formula for evaluation purposes.

**The Budget Form may be obtained in an Excel (.xlsx) format by double clicking on the document icon below.**



**APPENDIX I**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

**PROVIDER PACKET REPORT TEMPLATE**

**RFP# 202309205**

**Clinical Consultation and Support Services**

**The provider packet report template may be obtained in an Excel (.xlsx) format by double clicking on the document icon below.**

****

**APPENDIX J**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

**DEPARTMENT DISTRICT OFFICES**

**RFP# 202309205**

**Clinical Consultation and Support Services**

|  |  |  |
| --- | --- | --- |
| **District Number** | **Maine Counties Served** | **OCFS District Office Locations** |
| 1 | York | Portland151 Jetport BoulevardSouth Portland ME | Sanford890 Main Street, Suite 208Sanford ME 04073 |
| 2 | Cumberland, Sagadahoc | Portland151 Jetport BoulevardSouth Portland ME |  |
| 3 | Androscoggin, Oxford, Franklin | Lewiston200 Main StreetLewiston ME 04240 |  |
| 4 | Knox, Waldo, Lincoln | Rockland91 Camden StreetRockland ME 04841 |  |
| 5 | Kennebec, Somerset | Augusta35 Anthony AvenueAugusta ME 04333*OCFS’s Intake Unit Location:*OCFS Central Office2 Anthony AvenueAugusta ME 04333 | Skowhegan98 North Avenue Suite 10Skowhegan ME 04976 |
| 6 | Penobscot, Piscataquis | Bangor396 Griffin RoadBangor ME 04401 |  |
| 7 | Washington, Hancock | Ellsworth17 Eastward LaneEllsworth ME 04605 | Machias38 Prescott Drive, Suite 3Machias ME 04654 |
| 8 | Aroostook | Caribou30 Skyway DriveSkyway Plaza Unit 100Caribou ME 04736 | Houlton11 High StreetHoulton ME 04730 |

**APPENDIX K**

**State of Maine**

**Department of Health and Human Services**

*Office of Child and Family Services*

**SUBMITTED QUESTIONS FORM**

**RFP# 20230205**

**Clinical Consultation and Support Services**

|  |  |
| --- | --- |
| **Organization Name:** |  |

|  |  |
| --- | --- |
| **RFP Section & Page Number** | **Question** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

*\* If a question is not related to any section of the RFP, state “N/A” under “RFP Section & Page Number”.*

*\*\* Add additional rows, if necessary*

*\*\*\* Submit in WORD format, not PDF*