

ADDENDUM TWO

QUESTIONS and ANSWERS AND REVISED SCHEDULE OF EVENTS

Date: June 14, 2019

To: All Applicants

From: Nanette Simmons
Department of Health and Human Services

RE: Addendum for Request for Applications Number 101, due **June 28, 2019**

Questions and Answers

Following are the questions submitted and answers provided for the above mentioned Request for Applications. The questions and answers are to be considered as part of the Request for Applications. It is the Applicant's responsibility to check the DHHS website for all addenda or amendments.

Question Number	RFA Section Reference	RFA Page Number	Question	DHHS Response
1	A. Funding Information	4	Is the dollar amount noted for the pilot statewide or per provider, per service area?	The dollar amount is statewide.
2	E. Award of Funding	5	If a provider is not selected for the pilot, will there be opportunity later for additional providers to provide the service?	Yes, the State intends to continue contracting for these services after the completion of the pilot. If DHHS determines that the project should continue, DHHS will comply with all applicable state laws regarding the procurement of state contracts.
3	A. Project Overview	6	Why the rush with this and so many other	Many of these services/initiatives have been discussed with current providers/stakeholders for several months. Feedback from

			service requests – with so many important initiatives it becomes increasingly challenging for providers to submit proposals, implement, execute and sustain high quality programs.	providers/stakeholder recommended DHHS have this as a pilot. The sense of urgency is based on the needs of children and families ability to reunify safely with a supportive network and strong community ties.
4	A. Project Overview	6	Were current resource parents consulted and given voice in the planning of this program and RFA?	This concept has been discussed multiple times with provider agencies as well as foster parents, biological parents and other community resources.
5	A. Project Overview	6	Is resource family care intended to replace agency based foster care as we know it today? If no, what is the inclusion criteria for Resource Family care?	It is intended to replace agency based foster care as it is known today. This is a pilot to gather information/data on this service.
6	A. Project Overview	6	Could more than one provider be selected in each service area?	DHHS will award to the top scoring Applicant in each Service Area.
7	A. Project Overview, #2	6	There are few to no EBP's for foster care – how is it possible to meet this requirement?	There are EBP's regarding the engagement of families, behavior management programs for adolescents in child welfare and resource parent programs to name a few.
8	B. Background and Purpose, #1	6	Please provide the actual number of families/youth receiving family support and visitation services and an average of intensity of current services to aide in understanding capacity needs. Please separate	Services that had paid claims in 2018, there are 1,294 unique Master Cases/Families for the state, some show up in more than one service area as you'll see in the table below. DHHS does not have all of the data for ESA at this time.

			by service area.	<table border="1"> <thead> <tr> <th>Service Area</th> <th>Families Receiving Family Support/Visitation</th> </tr> </thead> <tbody> <tr> <td>Central</td> <td>230</td> </tr> <tr> <td>Eastern</td> <td>4</td> </tr> <tr> <td>Northern</td> <td>317</td> </tr> <tr> <td>Southeast</td> <td>469</td> </tr> <tr> <td>Western</td> <td>280</td> </tr> <tr> <td>Grand Total</td> <td>1,300</td> </tr> </tbody> </table> <p>Services that were used for the data above are: 4331-Family Support Services (changed to LOA Family Support SVCS in 2018) 7360-PARENT SKILLS & VISIT (changed to LOA PARENT SKILLS & VISIT in 2018) 8873-PARNT TIME/SUPRVSED VISIT</p>	Service Area	Families Receiving Family Support/Visitation	Central	230	Eastern	4	Northern	317	Southeast	469	Western	280	Grand Total	1,300
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9	C. Program Requirements, #16	8	Currently DHHS is required to ensure the Youth Bill of Rights is distributed. Why would this change?	The Youth Bill of Rights must be signed within 72 hours of first removal and the youth may or not be willing to talk with DHHS.														
10	C. Program Requirements, #31	9	Resource Families will not always be available to provide ALL supervised or monitored visits, is it acceptable that a provider staff person assist? AND, who determines "visits between parents and their children that are <u>long enough in length to promote parent-child</u>	The intent of the Resource Family is for them to build and support a respectful and supportive relationship with the biological family/caregiver the child was removed from and provide support/mentoring by respecting a child's identified family connections and being culturally humble. DHHS will follow recommendations of visitation based on the recommendations and decisions made in the family team meeting or determined by order of the court.														

			attachment”.	
11	C. Program Requirements, #39	9	Can not locate section 2.3.32.1 and 2.3.32.2 in the document – please clarify what is stated in those sections pursuant to providing ongoing support to the caretaker once the child is returned to the caretakers home.	See Addendum Three.
12	D. Administrative Requirements, #4	10	Please elaborate on the DHHS approved assessment to recruit Resource Family parents.	The applicant should propose an assessment that it would use to recruit Resource Families to provider Resource Family Services. This assessment should include a measurement of the family’s ability/capacity provide a safe and nurturing home, to mentor parents whose children have been removed from the family home, and provide support to families after the children have been returned to the parent
13	D. Administrative Requirements, #5	10	Does DHHS believe there is an existing “placement matching instrument” or can a provider develop this?	Provider can develop this.
14	D. Administrative Requirements, #9	11	Was provider input included in the new home study template?	There is no new home study template currently. DHHS is in the process of developing an RFP for Home Studies.
15	D. Administrative Requirements, #10	11	395 NAC 3 has proposed changes that could have a impact on resource families, licensure, etc. How will provider concerns related to these proposed changes be addressed?	Concerns regarding proposed changes to regulations may be directed to DHHS during the public comment period of the regulation promulgation process.
16	D. Administrative Requirements, #15	12	Please elaborate on the requirement to deliver	The Resource Family should be training in the Parent Management Training model in order to provide mentoring and

			services in accordance with Parent Management Training.	support to parents who have become involved with DHHS.
17	E. Financial Requirements, #3b	13	Maintaining Title IV-E documents seems to absolutely be the job of the department. Providers rarely get court orders and never get removal petitions. Why would this now be a providers responsibility?	Providers should have all documents including but not limited to those that indicate the home is licensed, the service they provided, who and how they provided that service, specific hours worked, and mileage. DHHS will continue to maintain other documents such as the court orders.
18	E. Financial Requirements	13	Is DHHS still planning to use the NCR as the tool to determine levels of care for children/youth in care and to ensure uniformity in rates paid?	Yes.
19	I. A.	4	Will the \$1.5m in funding be evenly distributed by Service Area or based on the number of cases in each Service Area?	The funding will be distributed based on the number of cases in each Service Area.
20	I. A.	1	If the funding is broken down by the number of cases, will DHHS please provide the number of cases per Service Area?	The Rate Sheet provides estimated number of cases per Service Area. DHHS does not have the actual number of cases per service area.
21	II. D. 20	12	Will considerations in travel & distance costs be made in rural areas, such as the tier levels available for Intensive Family Preservation services?	Applicants should provide a single rate per county in each county of a Service Area where it can provide services.
22	III. D.	13	Is there a maximum page	There is not a maximum page limit.

			limit for the entire response or for any of its constituent parts?	
23	III. D.	13	Should responses be formatted to a particular font, font size, margin size, etc.?	There are no formatting requirements.
24	III. F. 2	19	Should Form 2 be included as Item L. in the Work Plan or included individually at the beginning of the proposal, following Form 1, with the response to Item L identifying its inclusion as the second document?	Form 2 should be submitted separate from the Work Plan.
25	II. A.	6	How many children does DHHS expect to put in the pilot project, and does this amount vary by service area?	The amount varies by Service Area. The estimated amount, annually, for each service area is as follows: Central Service Area :60 Eastern Service Area: 100 Northern Service Area: 70 Southeast Service Area: 100 Western Service Area: 40
26	II. A.	6	Will there be a cap on the number of children in each tier level referred to an awarded agency?	No. The contracts will have a capacity of cases rather than children.
27	I. A.	4	Does the total award to a service area cover all the costs of all FSW and parenting time services to the assigned family?	The bidder must propose what the rate will be.

28	II. K. 1.	16	Is the cost of the NCR payment to each resource home included in the award?	The proposed rates will include the NCR payment.
29	II. A.	6	How are the cases selected for this pilot and about what percentage of total cases for the service area will this population comprise?	The cases selected for the pilot need to meet the following criteria: -Children were removed from the home, - Parents lack capacity for parenting skills as determined through SDM assessment. - Permanency objective is reunification Please see answer to question 8 and 25 for number of case per Service Area.
30	Form 2, 3. c.	30	What criteria or tool will DHHS utilize to determine which families are referred to the pilot project?	Please see answer to question 29.
31	II. E.	13	What are the monthly financial reporting requirements for this award?	See section II.K for Reporting Requirements.
32	II. D. 1.	10	Is there a timeframe from when a youth/family is referred for the pilot project to placement in a Resource home if a specialized placement is needed to meet the youth's needs?	The child should be placed within 2 hours of referral for Resource Family placement.
33	II. A. 2.	6	Do the evidence-based models used need to be listed or rated on a particular clearinghouse? If so, which	Yes, any evidence-base models used should be rated on either: - The California Evidence Based Clearinghouse for Child Welfare: https://www.cebc4cw.org/ ;

			clearinghouse(s) and which ratings are acceptable?	<ul style="list-style-type: none"> - The Title IV-E Prevention Services Clearinghouse: www.acf.hhs.gov/opre/resource/title-iv-e-prevention-services-clearinghouse-2018-2023-overview, or; - SAMHSA Evidence-Based Practices Resource Center: https://www.samhsa.gov/ebp-resource-center
34	II. C. 22	8	Does DHHS mean home school/school of origin as "Home school district" or the exact school the child was previously attending?	The school the child was attending.
35	II. D. 15	12	Please define what is required for the Subrecipient to provide in regard to core training (initial and on-going) for Parent Management Training.	Completion of the PMT professional training certification through the PMT institute.
36	II. D. 15	12	Are staff required to be trained in the basic, advanced, or certified PMT program?	Staff should be trained in basic PMT program.
37	II. C. 26-28	9	Please clarify whether Resource Family parents will receive reimbursement for transportation above 100 miles a month. If the Subrecipient provides transportation that is greater than a 25-mile radius from the Resource Family's home, will the Subrecipient be reimbursed for mileage?	See answer to question #21.
38	II. C. 29	9	Please clarify what is meant by the reference to	See Addendum Three.

			the Resource Family providing ongoing support defined as in sections 2.3.32.1 and 2.3.32.1- where are these sections located?	
39	II. D. 4	10	Is the reference to ensuring all Resource Family homes comply with 395 NAC 3 a reference to Nebraska State policy?	395 NAC 3 refers to Title 395, chapter 3 of the Nebraska Administrative Code, which are regulations promulgated under the Administrative Procedure Act and carry the force of law in Nebraska.
40	II. E. 1. a.	13	Does the State have a standard format for the centralized random moment in time study, and does the State determine who needs to complete the study each month?	There is not a standard format for the random moment time study or other time tracking method. The Subrecipient must complete a monthly centralized random moment time study or other time tracking method as consistent with 45 CFR §§ 75 et seq.
41	II. H. 1. e. ii.	15	“The proportion of Resource Family homes for the provider will meet or exceed the statewide percentage of the Enhanced or Intensive NRC level...” is this for the entire program as a whole or that specifically related to this pilot project?	Specific to this pilot project.
42	II. H. 1. a.	15	In reference to this outcome, does this mean attempted contact or successful conversation?	Successful conversation.
43	II. H. 1. b.	15	Does a move to a relative	No.

			or kinship placement count against the 94%?	
44	II. H. 1. e. ii.	15	At what NCR level of care will children be referred? Will there be a variety of level placements or will all placements be Enhanced or Intensive?	Will be Enhanced and Intensive Levels.
45	II. H. 1. e.	15	What will the referral process look like? Will providers be involved in selecting cases or will all referrals be determined by DHHS?	Families will be chosen for Resource Family if the family meets criteria, family will be referred to Resource Family provider for staffing to determine appropriate home for placement and services.
46	II. H. 1. b.	15	With regard to the performance measure, is there a time frame connected to it?	See Addendum Three.
47	II. H. 1. f.	15	With regards to the performance measure related to communication plans, is there a definition of what frequency the regular contact is to be? Is this intended to measure that there is a plan in place, or that contact is occurring, or both?	Regular contact will be defined as a consistent pattern of contact between the caretaker and the child in order to provide visitation and allow the caretaker to build parenting skills with the child. This is meant to measure both, that there is a plan in place and that contact is occurring.
48	II. D. 4.	10	Please clarify or provide an example of what is meant by a "DHHS approved assessment to recruit Resource Family	Please see answer to Question 12.

			parents.”	
49	II.A Project Description	6	We understand that we may be able to renew this contract, if awarded, for an additional one-year term. At the end of this additional term, does the state intend on once again opening a RFA for this service, or if meeting expected outcomes, would Providers involved in the pilot be awarded another contract?	Upon the expiration of this contract, DHHS will determine whether to continue this project based on a number of considerations. If DHHS determines that the project should continue, DHHS will comply with all applicable state laws regarding the procurement of state contracts.
50	II. C.11 Project Description, Program Requirements	7	What is the pre-service educational curriculum?	Currently DHHS is utilizing TIPS- MAPP.
51	II.C.39 Project Description, Program Requirements	9	Please expand on what the State’s definition is of “ongoing support” upon a child’s return to their caregiver. We are not finding this definition within sections 2.3.32.1 and 2.3.32.2.	See Addendum Three.
52	II.D.4 Project Description, Administrative Requirements	10	“Subrecipient must utilize approved DHHS assessment” in recruiting Resource Parents. What is the assessment the State is requesting we use, or are we able to create our own?	Please see answer to question #12.

53	II.D.15 Project Description, Administrative Requirements	10	"Subrecipient must implement and utilize a placement matching instrument." Again, what is the assessment the State is requesting we use, or are we able to create our own?	DHHS is requiring the subrecipient to implement and utilize a matching instrument that includes, but is not limited to matching criteria in II. D. 7. a-f. The subrecipient should create this assessment.
54	II.C.31 Project Description, Program Requirements	9	<p>When it comes to visits, we are assuming that the state expects that we follow current Parenting Time Guidelines as discussed below. Is this correct and if not, what are the expectations?</p> <ul style="list-style-type: none"> • Age Birth to Eighteen Months Five (5) times a week, Daily visits are optimal • Age Eighteen Months to Three years Four (4) times a week • Age Three to Eight Years Three (3) times a week, preferably on nonconsecutive days • Age Eight to Fourteen Years Two (2) times a week • Age Fourteen to Nineteen Years Two (2) times a week <p>Families should have additional contact separate from the MINIMUM Hours listed</p>	DHHS will follow recommendations of visitation time decisions made in the family team meetings or order by the court

			<p>above. Those contacts may include: telephone contact, school activities, doctor's appointments, and other family functions. Visits should be long enough to promote parent-child attachment. The lengths of visits should gradually increase as the parent(s) show he and/or she is able to respond to the child's cues in consistent and nurturing ways, soothe the child, and attend to the child's needs. Initially limiting visits to one or two hours may allow the parent to experience small successes without becoming overwhelmed. As the family approaches reunification, unsupervised all-day, overnight, and weekend visits should be completed.</p>	
55	II.C.29-33, 35 Project Description, Program Requirements	9	<p>DHHS is requesting that Resource Parents transport as well supervise and monitor youth on visits with their</p>	<p>The intent of the Resource Family is for them to build the relationship with the biological family/caregiver the child was removed from and provide support/mentoring. DHHS will follow recommendations of visitation time by decisions made in the family team meeting or by order of the court.</p>

			<p>caretaker including on weekends and holidays. When looking at Normalcy, if a Resource Parent has more than one foster child as well as their own biological children, it may become difficult for a Resource Parent to consistently monitor visits and still provide the time necessary to all other children within their home. In order to provide a greater level of Normalcy for all of the children in the home, is the provider able to use additional staff who support the Resource Parents for these visits, appointments, etc.?</p>	
56	Rate Sheet		<p>Is a provider able to include in the RFA specific counties they are able to serve within a given service area?</p>	<p>Applicant can submit pricing for any or all Service Areas, but must be able to provide services for all counties within a Service Area.</p>
57	Rate Sheet		<p>Based upon the estimated annual cases that are included in each service area on the rate sheet, what criteria will determine which cases will become Resource Family cases in the pilot versus non-piloted,</p>	<p>Please see answer to question #29.</p>

			traditional Foster Care cases?	
58	Request for Applications-Federal Funds	1	Please clarify if this is a sub award.	Yes, this is a RFA that will result in a subaward(s).
59	II. A Project Description, Project Overview	6	Can you provide background on this as a yearlong pilot project? What happens at the end of the one year term?	The information and data gathered through this yearlong pilot will help inform DHHS on next steps. The intent is that DHHS will have Resource Families statewide in the future. If DHHS determines that the project should continue, DHHS will comply with all applicable state laws regarding the procurement of state contracts.
60	II. C.9 Project Description, Program Requirements	7	FSNA is not always provided with the referral or seldom done with the team (caseworker and Provider). How will this process be different so that pertinent youth and family information can be shared for planning purposes?	DHHS will provide any pertinent information to the subrecipient that is legally permissible.
61	II. C.10 Project Description, Program Requirements	7	Could you provide current ethnic and racial diversity of children in each county so that providers can begin to develop a Recruitment and Retention Plan?	See Attachment 3.
62	II.H.1.g Project Description, Performance Measures	15	This performance measure refers to a Parenting Time/Visitation worker. Is this considered the Resource Parent or another staff member?	Please see answer to #55.

			Would it be possible to offer Visitation through a team approach, as discussed above, as it would allow for more Normalcy for all youth and families involved? If yes, could this performance measure be changed to read "Eighty percent of families will maintain the same Parenting Time/Visitation Team during the month"?	
63	II. C .27 Project Description, Program Requirements	9	How will transportation beyond the 25 mile radius be addressed or coordinated?	Please see answer to question #21.
64	II.D. 15 Project Description, Administrative Requirements	12	Please explain in more depth the requirements of the state to provide core training through PMT.	Parent Management Training is a recognized evidence-based parent training model that has proven effective in bolstering the skill needed to manage children's behaviors. DHHS would like PMT to be utilized in order to more effectively build the caretaker's parenting skills.
65	II.K. 16 Project Description, Administrative Requirements	16	The RFA states the visitation worker must submit monthly reports. Does this mean that a team of people (i.e. visitation worker) in addition to the Resource Parents are able to complete visitation?	No, Visitation should be conducted by the Resource Family parent(s). The Resource Family parent should submit monthly reports.
66	II. C. 31 Project Description, Program Requirements	9	This item states that visits between parents and their children will be "long enough in length to promote parent-child attachment". Will these be	See answer to question #55.

			determined by the Nebraska Supreme Court Commission on Children in Courts, Guidelines for Parenting Times for Children in Out of Home Care?	
67	Section II. Project Description. A. Project Overview	Page 6 - A	The first paragraph mentions that subrecipients will provide services to a portion of all families residing in the child welfare system and will be dependent on the number of Resource Family home beds an applicant has available. Does that mean that the state will consider the number of home/beds available in the area currently? If so should smaller agencies apply for this or intend to subcontract with a larger provider?	All licensed Child Placing Agencies in Nebraska who are accredited are able to apply.
68	Section II. Project Description. A. Project Overview	Page 6 - A	Follow-up to the above question. What portion of the families will be referred to the pilot and can agencies not chosen for this pilot still provide foster homes and family support and supervised visitation services by contracting directly with DHHS or would we have to contract with another	Agencies who are not awarded this RFA can continue to provide foster care, family support, and visitation if they have a contract with DHHS.

			agency in order to continue to provide these services if not chosen for the pilot?	
69	Section II. Project Description. C. Program Requirements	Page 9 – Question #39	#39 refers to section 2.3.32.1 and 2.3.32.2. In what document can these sections be located?	See Addendum Three.
70	Section II. Project Description. C. Program Requirements	Page 9-10 Question #40	#40 refers to the Subrecipient helping with adoption preparation when the case plan goal changes. Does this imply that the same resource family caring for the child in foster care would be expected to adopt the child if needed and if not, who is responsible for locating an adoptive placement?	The Resource Family may be the adoptive family but it is not required. All involved are responsible in preparation for adoption and assisting with finding an adoptive placement.
71	Section II. Project Description. E. Financial Requirements	Page 14 Question #5	Does the bonus need prior approval if it is offered to all employees of the agency and part of the employment benefit package?	Yes.
72	General Question		How will the second tier recipient process work? What is the role of the contractor and what is theirs in terms of outcomes and responsibilities if	Subrecipients are responsible for complying with all terms and conditions of the award.

			contracting with other agencies for homes?	
73	General Question		What format does the Cost Allocation Plan need to be in?	See answer to question 40.
74	General Question		Does a Budget/Cost Allocation Plan Narrative need to be submitted?	See section II.E.1.a for requirements of the Cost Allocation Plan. A Budget Narrative is not required.
75	General Question		Does the submission need to follow the layout of the RFP?	See section IV.A for a list of items that need to be included with an Application.
76	Section III. RFP Procedures D. Submission of Applications	Page 20 Number 1	It mentions that it needs to be in PDF format. Is there any other formatting requirements such as margins, page numbers, page limits, number of copies (if not e-mailed), etc.	No.
77	Section III. RFP Procedures		Can one proposal be submitted that indicates which area(s) we are bidding on or does the proposal need to be submitted for each area?	If an Applicant can provide services in multiple Service Areas, only one submission is required.

Schedule of Events

The State expects to adhere to the tentative procurement schedule shown below. It should be noted, however, that some dates are approximate and subject to change. It is the Applicant's responsibility to check the DHHS Grants and Contracts Opportunities website for all addenda or amendments.

ACTIVITY		DATE/TIME
1.	Release RFA	05/21/2019
2.	Last day to submit written questions	05/29/2019
3.	State responds to written questions through RFA "Addendum" and/or "Amendment" to be posted to the Internet at: http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx	06/14/2019 06/13/2019 06/10/2019
4.	Application Review Period Begins (Application due date)	06/28/2019 06/27/2019 06/24/2019 2:00 PM Central Time
5.	Evaluation Period	07/01/2019 06/28/2019 06/25/2019 through 07/12/2019
6.	Post "Intent to Subaward" to Internet at: http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx	07/15/2019
7.	Period of Performance Start*	10/01/2019

This addendum will become part of the proposal and should be acknowledged with the RFA.