REQUEST FOR INFORMATION REGARDING THE PROVISION OF APPROPRIATE SERVICES IN TREATMENT HOMES FOR CHILDREN WITH INTELLECTUAL AND/OR DEVELOPMENTAL DISABILITIES

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Commissioner

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The Governor of the State of New Jersey signed P.L. 2012, c. 16, into law on June 28, 2012. The provisions of that law took effect immediately and transferred responsibility for providing services for persons with developmental disabilities under age 21 from the Division of Developmental Disabilities (DDD) in the Department of Human Services (DHS) to the Children’s System of Care (CSOC) in the Department of Children and Families (DCF). DCF now seeks information from providers with demonstrated expertise in the provision of services in treatment homes to children, youth, adolescents, or young adults under the age of 21 who have intellectual/developmental disabilities. For more background information on the transfer of responsibilities from DDD to CSOC, please visit:

http://www.state.nj.us/dcf/about/divisions/dcsc/

All responses to this RFI are due by 12:00 PM on or before November 1, 2012. Responses may provide a basis for CSOC to develop Requests for Proposals (RFP) for Treatment Home Services specifically designed for children, youth, adolescents, or young adults under the age of 21, who have intellectual/developmental disabilities. The Department is seeking brief and concise answers to each of the questions listed below. Applicants shall not contact the Department directly, in person, or by telephone, concerning this RFI. Applicants may request information and/or assistance from DCFASKRFP@dcf.state.nj.us

Responses received after 12:00 PM on November 1, 2012 may not be considered in our current planning process but can be submitted at any time. DCF makes no representation regarding the volume of activity that is to be expected with respect to this RFI. All services will be determined and managed by CSOC as needed.
I. Introduction:

CSOC is considering the role of the treatment home model as one possible community-based means of providing services to children and youth with intellectual/developmental disabilities. This model features treatment home professional parents who are hired, trained, and supervised by agencies who will serve as the hub from which behavioral, clinical and medical services are provided. Treatment home agencies are charged with hiring, training, and providing these professional parents with an array of coordinated services appropriate for each child residing within the treatment home. The treatment home family would provide support and guidance that would assist the youth to function optimally in a community-based setting. CSOC is soliciting feedback from agencies and individuals that would maximize the benefits of this model.

II. Information about your past experience and expertise in caring for intellectually/developmentally disabled children and youth:

A. If you are an individual responding to this RFI, please provide your curriculum vitae and a brief summary of why you are qualified to provide information in response to this RFI.

B. If you are an out of home provider of services for children and youth, please respond to the following questions:

1. Are you a for-profit or not-for-profit corporation duly registered to conduct business within the State of New Jersey?
2. Are you an approved NJ Medicaid provider for Out of Home services?
3. What is your agency's history and mission?
4. Do you have any experience in providing out of home services to intellectually/developmentally disabled children and youth?
5. If so, please describe the services you currently provide.
6. Are you currently licensed by DCF to provide out of home services to children and youth?
7. Are you currently contracted by DCF to provide out of home services to children and youth?
8. If so, what number and type of out of home placement beds are you currently licensed and contracted to provide to DCF?
9. Are you currently licensed by DDD to provide out of home services to intellectually/developmentally disabled children and youth?
10. Are you currently contracted by DDD to provide out of home services to intellectually/developmentally disabled children and youth?
11. If so, what number and type of out of home placement beds for intellectually/developmentally disabled children and youth are you currently licensed and contracted to provide to DDD?

III. Information about the types of services you recommend for children and youth with intellectual/developmental disabilities while residing in treatment homes:

A. CSOC envisions that children in treatment homes should be provided with the following services:

Psychiatric assessments
Psychiatric treatment
Psychological assessments
Psychosocial assessments
Level of Functioning assessments
Instruction in Activities of Daily Living
Clinical Therapy
Allied Therapy
Behavioral Analysis (e.g. FBA, ABA)
Behavioral Supports (e.g. PBS)
Nursing
Crisis management
Respite
Care Coordination
Camp
Skill Development (e.g. Social Skills, Problem Solving, Stress Reduction, Frustration Tolerance, Decision Making)
Augmentative/Alternative Communication Supports and Functional Communication Training
Education
Parent/guardian training on implementation of Behavior Support Plan, use of Assistive Technology, if needed, and support for transition of the youth/young adult back home or to an alternative living arrangement
Referrals for medical, dental, neurological or other identified evaluations

1. Do you agree that this is an appropriate list of the treatment home services that should be included?
2. Are there other services that should be included? Why?
3. Are any of the services on this list not necessary? Why?
4. Please define and explain the ideal scope and purpose of each of the listed services, or any additional services you suggest we include?
5. What information would you need in order to make a determination of which services are most appropriate for a particular youth?

IV. Information about the frequency of services you recommend for children and youth with intellectual/developmental disabilities while residing in treatment homes:

A. CSOC envisions that children in treatment homes should be provided the following minimal services:

- Psychiatric assessments – at admission, annually and when needed
- Psychosocial assessments – at admission, annually and when needed
- Medical assessments – at admission, annually and when needed
- Medical treatment - as needed
- Psychiatric treatment – as needed
- Clinical Therapy - as needed
- Psychological assessments - at admission or acceptable if within one year of admission and then as needed
- Nursing – at admission and as needed
- Medication Distribution - as needed
- Crisis management – as needed
- Allied Therapy - 30 hours per month
- Skill Development- 18 hours per month
- Behavioral assessment (e.g. ABA, FBA) – at admission and as needed
- Behavioral Analysis (Master’s level) - 14 hours per week
- Behavioral Supports (Bachelor’s level) - ongoing during waking hours
- Respite - 20 hours per month
- Direct Care Staff (to assist professional parents) - 60 hours per month
- Care Coordination - 12 hours per month
- Educational services - in accordance with local requirements
- Dental, Neurological or other identified treatment – as needed

1. Do you agree that treatment home services should be provided this often?
2. Should any of these services be offered more frequently? Which services? Why?
3. Should any of these services be offered less frequently? Which services? Why?
4. Do you suggest any additional services be included? Why?

5. How frequently should any additional services you have suggested be provided?
6. What is your vision for a clearly defined role to be performed by the direct care staff?
7. What is your protocol for coordinating with Education for the provision of educational supports and related services?
8. What is your protocol for crisis management and prevention?
V. Information about the staff you recommend as essential for serving children and youth with intellectual/developmental disabilities while residing in treatment homes:

A. In addition to the child and the professional parents, CSOC envisions the inclusion of the following treatment team members at a minimum:

- Family of origin members
- Other natural supports identified by the child and family
- Licensed Practical Nurse under the supervision of a Registered Nurse
- Psychiatrist
- Psychologist
- Allied Therapist
- Licensed clinicians
- Educational professionals
- Direct Care staff at Bachelor’s level with experience
- Program Coordinator at Master’s level with experience
- CSOC case management entity
- CP&P case management entity (if applicable)
- BCBA- Board Certified Behavior Analyst
- BCaBA-Board Certified Assistant Behavior Analyst under the supervision of a BCBA

1. Do you agree that this is an appropriate list of the treatment team members that should be included?
2. Are there any other team members who should be included? Who? Why?
3. Are there any members on this list who are not necessary? Who? Why?

VI. Information about the model budget you suggest for serving children and youth with intellectual/developmental disabilities while residing in treatment homes:

A. CSOC is considering the following factors in constructing a budget for a treatment home model for the care of children and youth with intellectual/developmental disabilities:

- Cost of assessments
- Cost of operating a home with private bedrooms for 3 youth
- Recruitment costs/payment of treatment home parents
- Payment of treatment home team members
Staff training costs  
Facility repairs costs  
Transport costs  
Start up costs  
Ramp up costs  
Environmental modifications

1. Do you agree that these are the appropriate factors?  
2. Do you think any other factors should be considered? Which factors? Why?  
3. Do you agree that the home and services should be priced for 3 children per home, or do you think another number of youth per home is most appropriate given the population? Why?  
4. What specific recruitment strategies would you employ for treatment home parents?  
5. What kinds of environmental modifications do you think are necessary? Why?

VII. Information about the performance outcomes you suggest are appropriate for measuring the success of a treatment home services:

A. CSOC is considering the following measures of success (or benchmarks) for the treatment home model for children with intellectual/developmental disabilities:

   Regular attendance at the child’s least restrictive educational option  
   Improvement of identified needs domains at the time of admission  
   Improved stability  
   Improved functioning  
   Improved health

   1. Do you agree that these are appropriate performance outcomes?  
   2. Do you think any other factors should be considered? Which factors? Why?

VIII. Methodology for Submitting Responses:

Responses must be signed and dated by the Chief Executive Officer or equivalent. Applicants should submit one (1) original of the response in one of the following ways:

A. In person:

Catherine Schafer, Director of Grants Management, Auditing and Records  
Department of Children and Families
Please allow time for the elevator and access through the security guard. Applicants submitting proposals in person or by commercial carrier should submit one (1) signed original and one CD ROM with all documents including a signed cover letter of transmittal.

B. Commercial Carrier (hand delivery, federal express or UPS) to:

Catherine Schafer, Director of Grants Management, Auditing and Records
Department of Children and Families
101 South Broad Street, 7th Floor
Trenton, New Jersey 08625

Applicants submitting proposals in person or by commercial carrier should submit one (1) signed original and one CD ROM with all documents including a signed cover letter of transmittal.

C. Online- Https://ftpw.dhs.state.nj.us:

DCF offers the alternative for our bidders to submit proposals electronically to the web address above. Online training is available at the bidder’s conference and on our website at: www.nj.gov/dcf/notices/

We recommend that you do not wait until the date of delivery in case there are technical difficulties during your submission. Only a registered Authorized Organization Representative (AOR) or the designated alternate is eligible to send in a submission. Registration forms are available on our website. Registered AOR forms must be received 5 business days prior to the date the bid is due. You need to register only if you are submitting a proposal online.