NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES

Children's System of Care (CSOC)

Children's Interagency Coordinating Council (CIACC) for Atlantic County

VIRTUAL CONFERENCE

July 22, 2026

Agenda & Objectives

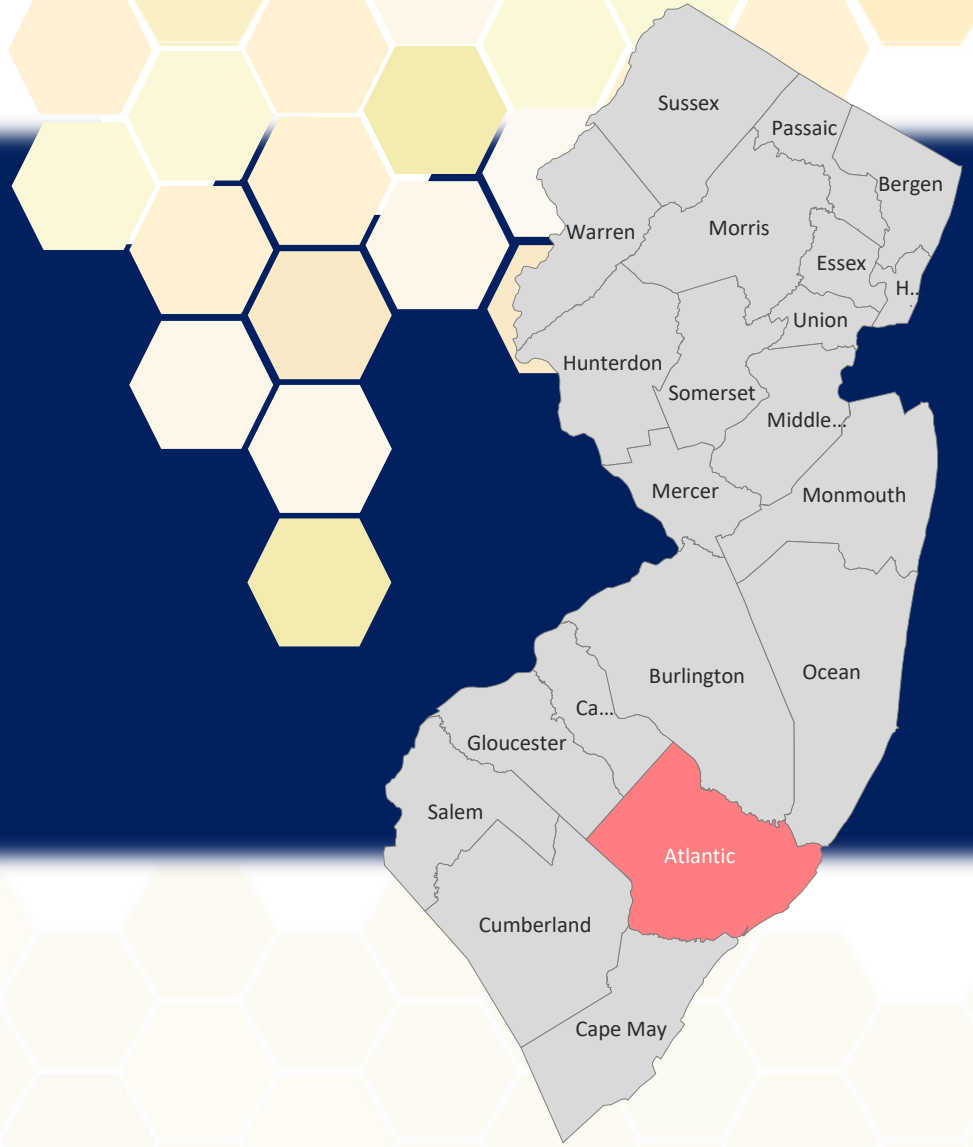
- Welcome & Introductions
- RFP Timeframes
- CIACC RFP Overview
- Programmatic Requirements
- Staffing & Training
- RFP Requirements
- Organizing the RFP Application
- Technical Assistance (TA)
- Q & A

RFP Timeframes

Date	Event
Tuesday, July 7th	**RFP Published**
Tuesday, July 22nd at 1:00pm	**Virtual Conference**
Friday, July 24th	**Program Related Questions Due**
Tuesday, August 4th	**Authorized Organization Representative (AOR) Form Due**
Tuesday, August 11th at 12:00PM *(SHARP)*	**Response Deadline**

* DCF recommends not waiting until the due date to submit your response in case there are technical difficulties during your submission.

The RFP Initiative



Children's Interagency Coordinating Council (CIACC) for Atlantic County

DCF Office

- NJ DCF (New Jersey Department of Children and Families) is the state's cabinet-level agency dedicated to ensuring the safety, well-being, and success of children, youth, families, and communities.
- NJ CSOC (Children's System of Care) is a Division within DCF that serves children, youth, and young adults up to and including age 21 with a wide range of challenges associated with emotional and behavioral health, intellectual/developmental disabilities, and substance use.
- CSOC is committed to providing services based on the individualized need of each youth and family within a system of care approach that is strength-based, individualized, youth and family-guided, culturally competent, family-centered, and in a community-based environment.
- The Children's Interagency Coordinating Councils (CIACCs) sit within CSOC's Office of System Access and Medicaid Operations (OSAMO).
- OSAMO is charged with the management and oversight of the 21 CIACC contract deliverables, attendance and participation at the local monthly county CIACC meetings, quarterly statewide county meetings, and other CIACC-related meets as needed, and general liaison duties to the CIACC convenors.

Background/Overview

- DCF CSOC contracts with 21 CIACC agencies statewide (one CIACC in each county) to serve New Jersey's youth and families.

- DCF establishes and works with the CIACC for each county to monitor and evaluate the needs of children and families, and the outcomes of community-based services that are implemented as part of an individualized and appropriate child and family driven care system.

- The CIACC will serve as the lead coordinating system partner for Atlantic county and is expected to support the statewide initiatives or priorities and to engage in work that serves the youth and families of the State of New Jersey or improves upon the CSOC.

- This Bid Solicitation seeks to reprocure the CIACC in Atlantic County, which does not currently have a CIACC agency in place.

Target Population

- The awardee of this RFP will serve youth and families from Atlantic County.
- CSOC serves all youth, ages 0 up to and including 21, residing in the State of New Jersey, who have needs related to behavioral or mental health, intellectual or developmental disability, and/or substance use.
- As CSOC is constantly improving upon and expanding its service array, there may be times when CSOC shifts or adjusts its focus to other subpopulations or to youth with needs not specifically referred to in this RFP.
- CIACCs provide inclusive support to all New Jersey youth and families, regardless of whether they have current, prior, or no previous involvement with the Division of Child Protection and Permanency (CP&P).

Program Goals

The goal of the CIACCs is to connect New Jersey youth and families to vital services and supports, fostering community ties that drive better long-term outcomes. To meet this goal, CIACCs will:

- ✓ Serve in an advisory capacity to County government, DCF, and CSOC.
- ✓ Foster relationships with school personnel to enhance access to CSOC services for youth.
- ✓ Attend to the evolving needs and concerns of special populations, such as youth with I/DD, substance use challenges, and youth involved with the justice system.
- ✓ Cultivate relationships and collaborate with local system partners, providers, stakeholders, family, and youth to collectively improve upon and maintain the local system of care.
- ✓ Participate in processes to identify quality improvement and trends in the local system of care.
- ✓ Engage with youth and family members and encourage their participation in CIACC meetings to learn from their experiences.

Services/Key Deliverables

***Please refer to the Bid Solicitation for additional details relating to these service requirements:**

Structural Requirements:

- ✓ Prepare and disseminate an agenda prior to each meeting.
- ✓ Special populations, including youth with intellectual/developmental disabilities, substance use challenges, and youth with juvenile justice involvement, and the activities of all subcommittees of the CIACC, shall be included on each agenda as a standing agenda item.
- ✓ Ensure that minutes are taken and, upon approval by the CIACC, shall disseminate the minutes to meeting participants.

Subcommittee Requirements:

- ✓ Develop or maintain an Educational Partnership (EP) as a subcommittee of the CIACC.
- ✓ At a minimum, provide two (2) trainings and/or presentations to local school personnel per calendar year, to enhance access to CSOC services for all youth.
- ✓ Develop or maintain a Juvenile Justice Subcommittee or participate in a pre-existing planning body that addresses needs related to youth involved with the juvenile justice system.
- ✓ Develop or maintain an Intellectual / Developmental Disabilities (I/DD) Subcommittee or participate in a pre-existing planning body that addresses needs related to youth with I/DD challenges.
- ✓ Develop or maintain ad hoc subcommittees as needed.

Services/Key Deliverables (cont.)

Meeting Frequency Requirements:

- ✓ The large CIACC body shall meet no fewer than eight (8) times in a calendar year.
- ✓ Subcommittees shall meet no fewer than four (4) times in a calendar year.
- ✓ The awarded respondent shall make every effort to reschedule cancelled meetings.
- ✓ The awarded respondent shall notify all CIACC members and the CSOC CIACC Program Lead and/or other designated CSOC staff person of cancelled/rescheduled meetings prior to the cancellation/rescheduling of the meeting in question.

Community Partnership Requirements:

- ✓ The membership of the CIACC shall reflect a partnership among county governments, community-based organizations, family and youth, informal supports, agencies providing services, and other stakeholders, if deemed appropriate.
- ✓ The rewarded respondent shall consider recruitment, engagement, and retention of youth and family members.
- ✓ CIACC membership shall reflect and represent the county population and service recipients based on the most recent U.S. Census data available.

Services/Key Deliverables (cont.)

Maintenance of Written Policies and Procedures:

- ✓ Maintain up-to-date written policies and procedures reflective of the goals and principles of CSOC and the CIACC contract deliverables.
- ✓ Written policies and procedures may be updated as needed but must be ratified by the full CIACC body on an annual basis.
- ✓ Ratified, updated written policies and procedures or notification of ratification of existing written policies and procedures shall be provided to the CIACC Program Lead or other designated CSOC staff person(s) on an annual basis.

Identification and Documentation of Trends and Recommendations:

- ➢ Identify trends highlighting both the strengths and deficiencies in service accessibility, identifying specific service gaps and social determinants of health.
- ➢ Special focus is given to racial and ethnic disparities in access. Based on these trends, recommendations are provided to bridge gaps and drive systemic improvements.
- ➢ Ensure that the CIACC routinely identifies and documents trends and recommendations via meeting minutes or annual plans.
- ➢ Inform CSOC of any identified trends or recommendations in as expeditious a manner as possible via email.

Staffing

- The awarded respondent shall identify a CIACC coordinator for Atlantic County.

- Awarded respondent may use funds to subsidize the salaries of the staff who perform CIACC work, electing whether these will be full-time or part time.

Expected Outcomes

- **The outcomes required of this program initiative will be demonstrated by:**

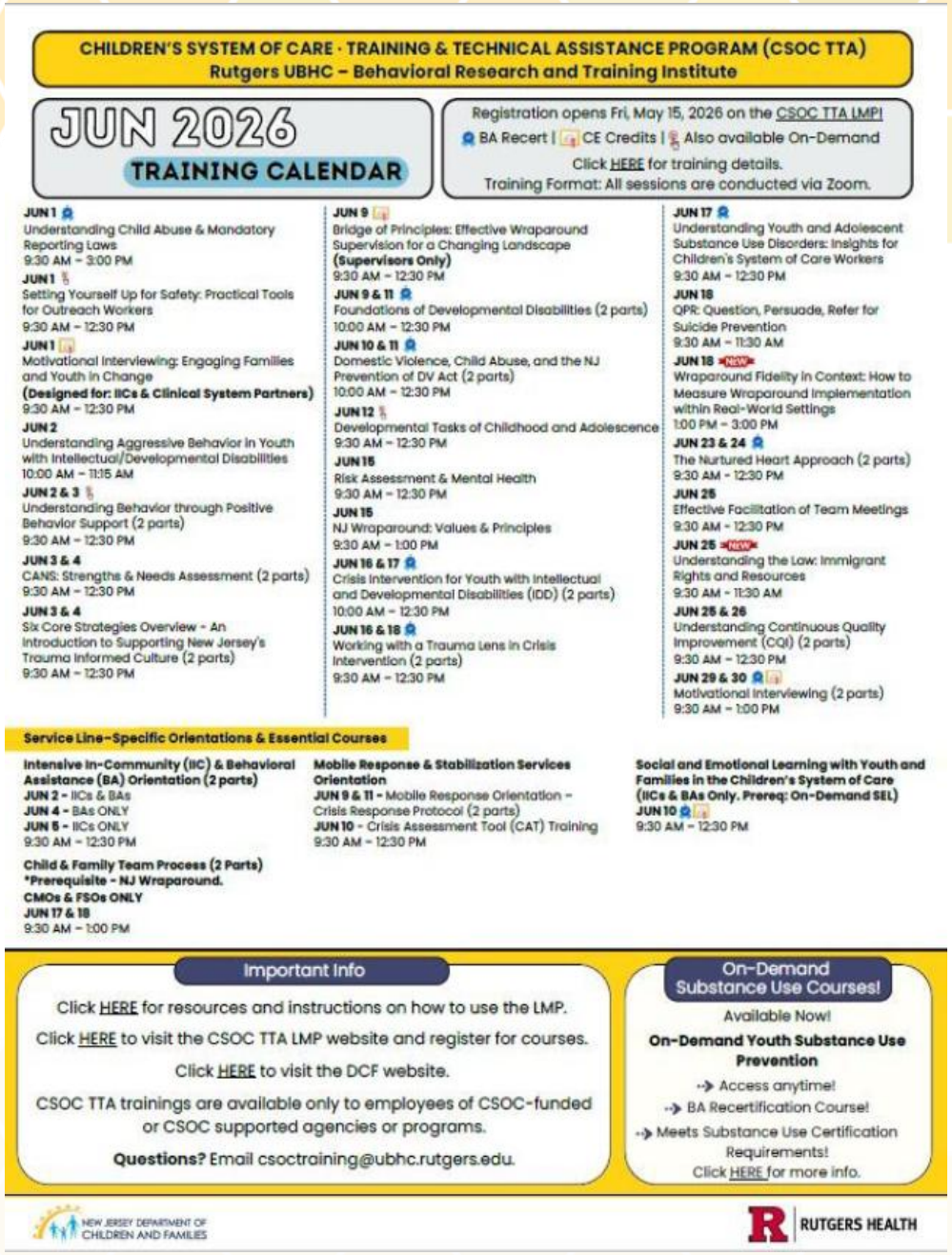
1. Meeting minutes: Minutes recorded at 100% of the required meetings.
2. Required use of databases: Ensure that the CIACC routinely reviews data pertinent to service provision. Data sources should include, at a minimum, the CIACC Dashboards and the Rutgers CSOC Data Hub and Portal.
3. Reporting requirements: An annual report, reflective of the past year's activities, trends, and recommendations.

Please refer to the Bid Solicitation for additional details relating to these requirements.

Training

CSOC Training and Technical Assistance (TTA) is provided by Rutgers University Behavioral Health Care

- CIACC conveners, coordinators, and committee heads are eligible to be trained.
- Trainings are currently online and include live webinars and an on-demand platform.
- The training topics and schedule varies each month.
- Access to the trainings is through the DCF CSOC website where the calendar is updated each month.



CHILDREN'S SYSTEM OF CARE · TRAINING & TECHNICAL ASSISTANCE PROGRAM (CSOC TTA)
Rutgers UBHC – Behavioral Research and Training Institute

JUN 2026 TRAINING CALENDAR

Registration opens Fri, May 15, 2026 on the CSOC TTA LMP!
BA Recert | CE Credits | Also available On-Demand
Click HERE for training details.
Training Format: All sessions are conducted via Zoom.

JUN 1
Understanding Child Abuse & Mandatory Reporting Laws
9:30 AM – 3:00 PM

JUN 1
Setting Yourself Up for Safety: Practical Tools for Outreach Workers
9:30 AM – 12:30 PM

JUN 1
Motivational Interviewing: Engaging Families and Youth in Change
(Designed for: IICs & Clinical System Partners)
9:30 AM – 12:30 PM

JUN 2
Understanding Aggressive Behavior in Youth with Intellectual/Developmental Disabilities
10:00 AM – 11:15 AM

JUN 2 & 3
Understanding Behavior through Positive Behavior Support (2 parts)
9:30 AM – 12:30 PM

JUN 3 & 4
CANS: Strengths & Needs Assessment (2 parts)
9:30 AM – 12:30 PM

JUN 3 & 4
Six Core Strategies Overview - An Introduction to Supporting New Jersey's Trauma Informed Culture (2 parts)
9:30 AM – 12:30 PM

JUN 9
Bridge of Principles: Effective Wraparound Supervision for a Changing Landscape
(Supervisors Only)
9:30 AM – 12:30 PM

JUN 9 & 11
Foundations of Developmental Disabilities (2 parts)
10:00 AM – 12:30 PM

JUN 10 & 11
Domestic Violence, Child Abuse, and the NJ Prevention of DV Act (2 parts)
10:00 AM – 12:30 PM

JUN 12
Developmental Tasks of Childhood and Adolescence
9:30 AM – 12:30 PM

JUN 15
Risk Assessment & Mental Health
9:30 AM – 12:30 PM

JUN 15
NJ Wraparound: Values & Principles
9:30 AM – 1:00 PM

JUN 16 & 17
Crisis Intervention for Youth with Intellectual and Developmental Disabilities (IDD) (2 parts)
10:00 AM – 12:30 PM

JUN 16 & 18
Working with a Trauma Lens in Crisis Intervention (2 parts)
9:30 AM – 12:30 PM

JUN 17
Understanding Youth and Adolescent Substance Use Disorders: Insights for Children's System of Care Workers
9:30 AM – 12:30 PM

JUN 18
QPR: Question, Persuade, Refer for Suicide Prevention
9:30 AM – 11:30 AM

JUN 18 NEW
Wraparound Fidelity in Context: How to Measure Wraparound Implementation within Real-World Settings
1:00 PM – 3:00 PM

JUN 23 & 24
The Nurtured Heart Approach (2 parts)
9:30 AM – 12:30 PM

JUN 25
Effective Facilitation of Team Meetings
9:30 AM – 12:30 PM

JUN 25 NEW
Understanding the Law: Immigrant Rights and Resources
9:30 AM – 11:30 AM

JUN 25 & 26
Understanding Continuous Quality Improvement (CQI) (2 parts)
9:30 AM – 12:30 PM

JUN 29 & 30
Motivational Interviewing (2 parts)
9:30 AM – 1:00 PM

Service Line-Specific Orientations & Essential Courses

Intensive In-Community (IIC) & Behavioral Assistance (BA) Orientation (2 parts)
JUN 2 - IICs & BAs
JUN 4 - BAs ONLY
JUN 5 - IICs ONLY
9:30 AM – 12:30 PM

Child & Family Team Process (2 Parts)
***Prerequisite - NJ Wraparound.**
CMOs & FSOs ONLY
JUN 17 & 18
9:30 AM – 1:00 PM

Mobile Response & Stabilization Services Orientation
JUN 9 & 11 - Mobile Response Orientation - Crisis Response Protocol (2 parts)
JUN 10 - Crisis Assessment Tool (CAT) Training
9:30 AM – 12:30 PM

Social and Emotional Learning with Youth and Families in the Children's System of Care (IICs & BAs Only. Prereq: On-Demand SEL)
JUN 10
9:30 AM – 12:30 PM

Important Info

Click HERE for resources and instructions on how to use the LMP.
Click HERE to visit the CSOC TTA LMP website and register for courses.
Click HERE to visit the DCF website.
CSOC TTA trainings are available only to employees of CSOC-funded or CSOC supported agencies or programs.
Questions? Email csoctraining@ubhc.rutgers.edu.

On-Demand Substance Use Courses!

Available Now!
On-Demand Youth Substance Use Prevention
→ Access anytime!
→ BA Recertification Course!
→ Meets Substance Use Certification Requirements!
Click HERE for more info.

NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES
RUTGERS HEALTH

Request For Proposals (RFP)

Children's Interagency Coordinating Council (CIACC)
for Atlantic County

RFP Proposal Submission

Pre-Submission Instructions: AOR

Registration for the Authorized Organization Representative (AOR)
To Submit a Grant Application Electronically

Organization Name: Example, Inc.

Type of Organization: ■ **Non-Profit;** ☐ **For-Profit;** ☐ **University;** ☐ **LLC**

Organization Mailing Address: 123 Main Street, Cherry Hill, NJ 08002

Organization Email Address: main@exampleinc.org

Organization Phone Number: (856) 555-5555

AOR Contact Name: John Smith

AOR Contact Phone Number: (856) 555-5555

AOR Contact Email Address: john@exampleinc.org

I hereby designate the **above-named organization, AOR Contact, and valid email address** to be authorized to submit a Request for Proposal (RFP) / Request for Qualifications (RFQ) application in response to a competitive procurement advertised by the Department of Children and Families called:

RFP/RFQ: ENTER RFP/RFQ NAME HERE

County/Region/Location to be served (if applicable): ENTER HERE

Note: You need to register for each RFP/RFQ to be provided access. You may keep the name and password the same. This information will be retained.

Signature of Organization Authority (CEO/President)

Print Name and Exact Title. This signature indicates the authority to permit the submission of the RFP/RFQ electronically. Permission and access information will be provided by email to the AOR Contact email address provided above.

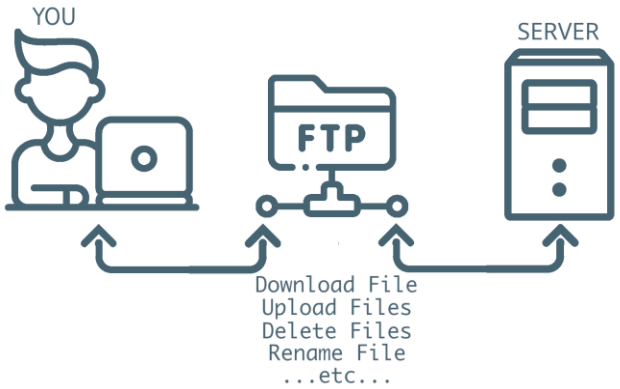
Print Name/Title: John Smith **Date:** 5/5/2025

Signature: SIGN HERE

CEO Email Address: john@exampleinc.org

- Submit a completed AOR form to DCF.ASKRFP@dcf.nj.gov at least 5 business days before the response deadline.
- Ensure the form is filled out **completely and signed**.
- Please enter the name of the RFP on the line RFP/RFQ - **Children's Interagency Coordinating Council (CIACC) for Atlantic County**
- Please enter **Atlantic County** for the County/Region/Location to be served.
- **Note**: The contact name/email address on this form will be the only point person we correspond with and the one with access to the FTP site for submitting the response.

Uploading Proposals on the FTP Site



- **The identified respondent contact will be provided with instructions on how to access the FTP Site.**
- **Files may be uploaded and/or updated, if needed, up to the RFP proposal deadline.**
  - Start uploading your proposal submission EARLY, to ensure sufficient time and a successful transmission of all required documentation.
- **If you encounter any difficulties or require assistance, please submit questions to DCF.ASKRFP@dcf.nj.gov**

Request For Proposals (RFP)

Children's Interagency Coordinating Council (CIACC)
for Atlantic County

RFP Requirements

Organizing & Submitting Your Application

- **The application must be organized and submitted as three (3) separate PDFs.**

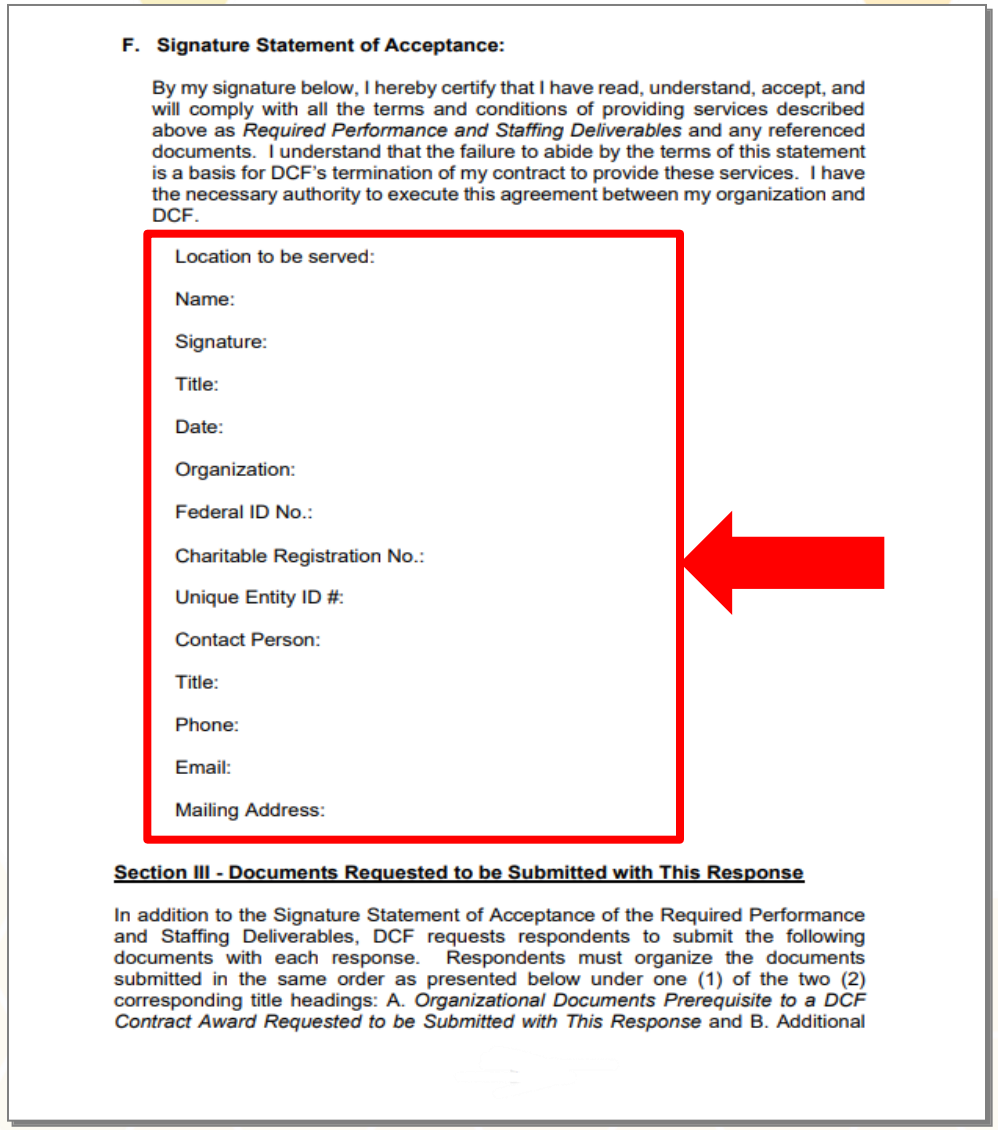
PDF 1 	**Section II – Required Performance and Staffing Deliverables**	
	Submit a signed *Statements of Acceptance*. Your PDF 1 must include a PDF of the entire Section II content, along with the final, signed and completed page.	**Pages 5-14**
PDF 2 	**Section III A – Documents Requested to be Submitted with This Response**	
	Twenty-five (25) numbered organizational documents. If any are N/A for your organization, please explicitly say so.	**Pages 15-18**
PDF 3 	**Section IV – Respondent Narrative Responses**	
	A narrative response must be completed, answering ALL questions posed within Section IV. Responses should mirror the RFP format by section and sequence of questions included.	**Pages 18-20**

Organizing Your Application

PDF 1:

Section II – Required Performance and Staffing Deliverables

Organizing Your Application - PDF 1



F. Signature Statement of Acceptance:

By my signature below, I hereby certify that I have read, understand, accept, and will comply with all the terms and conditions of providing services described above as *Required Performance and Staffing Deliverables* and any referenced documents. I understand that the failure to abide by the terms of this statement is a basis for DCF's termination of my contract to provide these services. I have the necessary authority to execute this agreement between my organization and DCF.

Location to be served:

Name:

Signature:

Title:

Date:

Organization:

Federal ID No.:

Charitable Registration No.:

Unique Entity ID #:

Contact Person:

Title:

Phone:

Email:

Mailing Address:

Section III - Documents Requested to be Submitted with This Response

In addition to the Signature Statement of Acceptance of the Required Performance and Staffing Deliverables, DCF requests respondents to submit the following documents with each response. Respondents must organize the documents submitted in the same order as presented below under one (1) of the two (2) corresponding title headings: A. *Organizational Documents Prerequisite to a DCF Contract Award Requested to be Submitted with This Response* and B. Additional

PDF 1: Section II – Required Performance and Staffing Deliverables

Complete and sign **Signature Statement of Acceptance** (fill in fields and sign on page 14)

Submit a **complete PDF of the entire content of Section II, pages 5-14, ending with your signed statements of acceptance for each section,** as a single PDF document.

This will be the first PDF submission in your response packet and is to be labeled as: PDF 1: Section II - Required Performance and Staffing Deliverables.

Your signature certifies that you have read, understood, accepted and, if awarded a contract, will comply with all the deliverables, terms and conditions included in the RFP.

How to fill in and sign PDF 1

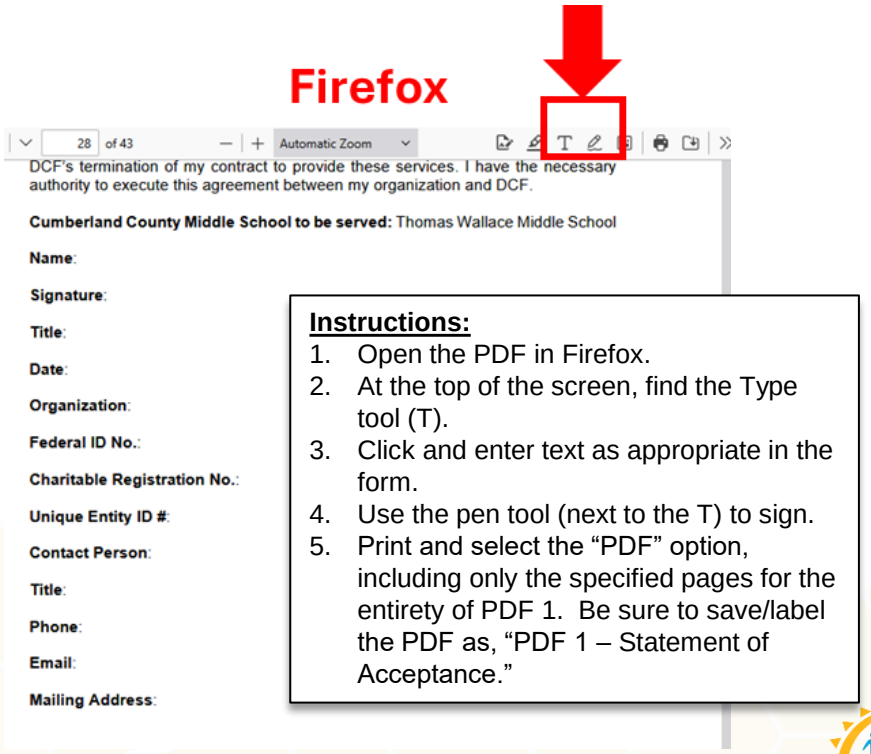
Technical Support Tip

Options for fill in/sign and save PDF #1, include:

A. Print, fill out, and scan pages **5-14** into a PDF file, or
B. Use software such as Adobe Acrobat Reader (free), or
C. Use web browsers such as Edge and Firefox

Note: Copy-pasted text will **not** be accepted.

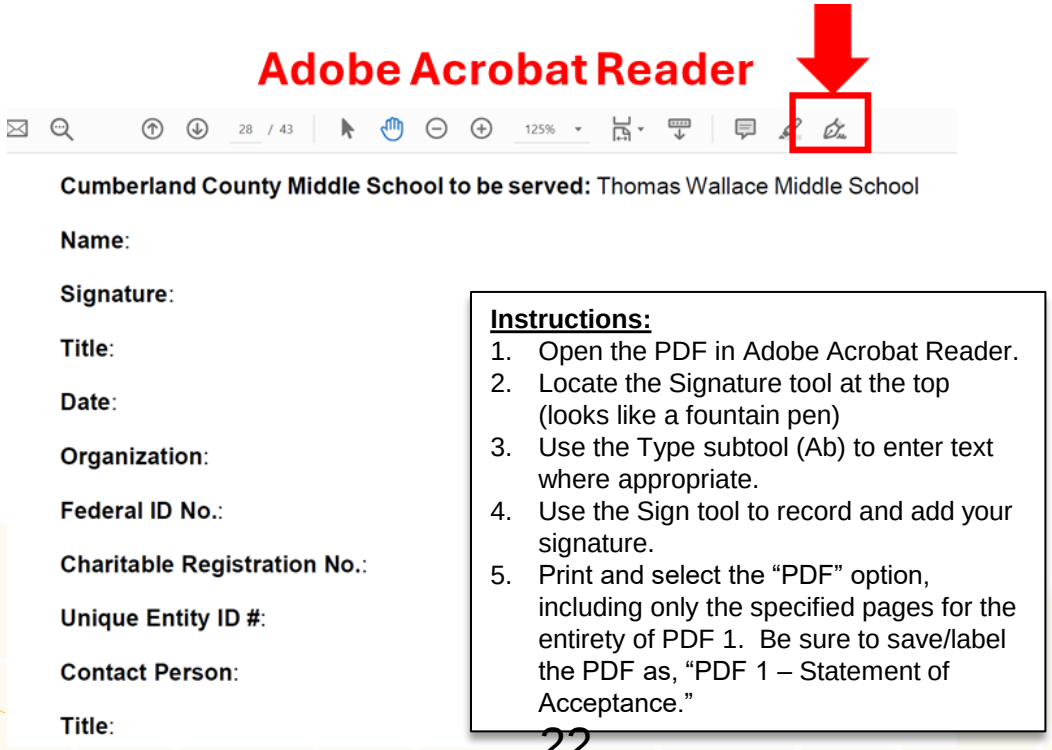
Firefox



Instructions:

1. Open the PDF in Firefox.
2. At the top of the screen, find the Type tool (T).
3. Click and enter text as appropriate in the form.
4. Use the pen tool (next to the T) to sign.
5. Print and select the "PDF" option, including only the specified pages for the entirety of PDF 1. Be sure to save/label the PDF as, "PDF 1 – Statement of Acceptance."

Adobe Acrobat Reader



Instructions:

1. Open the PDF in Adobe Acrobat Reader.
2. Locate the Signature tool at the top (looks like a fountain pen)
3. Use the Type subtool (Ab) to enter text where appropriate.
4. Use the Sign tool to record and add your signature.
5. Print and select the "PDF" option, including only the specified pages for the entirety of PDF 1. Be sure to save/label the PDF as, "PDF 1 – Statement of Acceptance."

Organizing Your Application

PDF 2:

Section III A – Documents Requested to be Submitted with This Response

Organizing Your Application – PDF 2 Documents

- **PDF 2: Section III A – Documents Requested to be Submitted with This Response**
  There are **twenty-five (25) organizational documents** that should be combined into **PDF 2**:

  Section III A documents include:

  1. Description of Accounting System
  2. Employee Information Report (Affirmative Action Certificate)
  3. Internal Governance:
     - Agency By-Laws – or –
     - Management Operating Agreement
  4. Statement of Assurances
  5. Governing Body:
     - Board of Directors – or –
     - Managing Partners (LLC) – or –
     - Board of Trustees
  6. NJ Business Registration Certificate (for Profit/LLC) or Non-profit (N/A)
  7. Business Associate Agreement—HIPAA *
  8. Organization's Conflict of Interest Policy (not the DCF policy)

Q&A

Question: What if the document does not apply to my organization?

Answer: If a request does not apply, you are required to submit a ***Statement of Non-Applicability*** on your agency's letterhead, detailing the reason and the document you are referencing

* = Signature required.

Organizing Your Application - PDF 2 Documents *Continued*

PDF 2: Section III A – Documents Requested to be Submitted with This Response

There are **twenty-five (25) documents** that should be combined into **PDF 2:**

9. Compliance and Quality Assurance
   - Corrective Action Plan(s)/Review(s) and/or Performance Improvement Plan(s) (PIP) – or –
   - N/A Signed Statement of Non-Applicability
10. Certification Regarding Debarment *
11. Disclosure of Investigations and Other Actions *
12. Disclosure of Investments in Iran *
13. Ownership Disclosure Form
14. Disclosure of Prohibited Activities in Russia and Belarus *
15. Source Disclosure Form *
16. System for Award Management (SAM)
17. Business Entity Filing
    - Certificate of Incorporation – or –
    - LLC Formation
18. Notice of Standard Contract Requirements, Processes, and Policies *

Required Signature

Requested documents with an "*" require the organization's leadership signature.

* = Signature required.

Organizing Your Application - PDF 2 Documents *Continued*

PDF 2: Section III A – Documents Requested to be Submitted with This Response

There are **twenty-five (25) documents** that should be combined into **PDF 2:**

19. Organizational Chart
20. Chapter 271/Vendor – Certification and Political Contribution Disclosure Form *
21. Prevent Child Abuse New Jersey Safe-Child standards
22. Contractual Agreement - Submit one (1)
    - Standard Language Document * – or –
    - Individual Provider Agreement – or –
    - Department Agreement
23. Tax Exempt Organization Certificate / IRS Determination Letter (Non-Profit Only) – or – For Profit/LLC (N/A)
24. Tax Forms:
    - Non-Profit: Form 990 Return of Organization Exempt from Income Tax – or –
    - For Profit: Form 1120 US Corporation Income Tax Return – or –
    - LLCs: Form 1040 Form 1040 (Schedule C, E, F) and may delete/redact any SSN or personal identifying information
25. Trauma Informed Practices

Guidelines & Resources

Follow all RFP guidelines and review available DCF standards and practices.

* = Signature required.

Helpful Links for Documents #21 and #25

Prevent Child Abuse New Jersey's (PCA-NJ) Safe-Child Standards

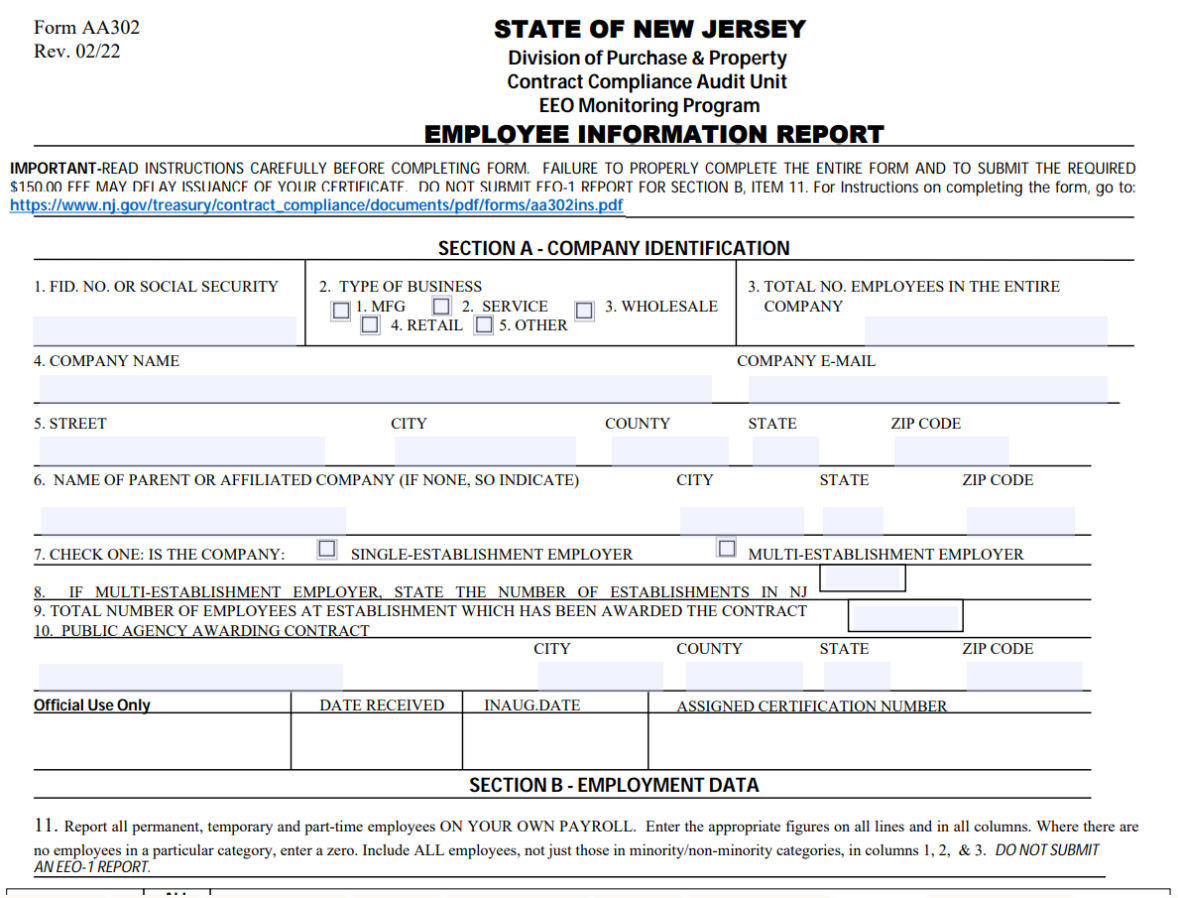
"Sexual Abuse Safe-Child Standards"

Trauma Informed Practices

DCF | Trauma Informed Practices

Common Questions & Errors

PDF 2 – Document #2



Form AA302
Rev. 02/22

STATE OF NEW JERSEY
Division of Purchase & Property
Contract Compliance Audit Unit
EEO Monitoring Program

EMPLOYEE INFORMATION REPORT

IMPORTANT-READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND TO SUBMIT THE REQUIRED $150.00 FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE. DO NOT SUBMIT EEO-1 REPORT FOR SECTION B, ITEM 11. For Instructions on completing the form, go to: https://www.nj.gov/treasury/contract_compliance/documents/pdf/forms/aa302ins.pdf

SECTION A - COMPANY IDENTIFICATION

1. FID. NO. OR SOCIAL SECURITY
2. TYPE OF BUSINESS ☐ 1. MFG ☐ 2. SERVICE ☐ 3. WHOLESALE ☐ 4. RETAIL ☐ 5. OTHER
3. TOTAL NO. EMPLOYEES IN THE ENTIRE COMPANY
4. COMPANY NAME
COMPANY E-MAIL
5. STREET CITY COUNTY STATE ZIP CODE
6. NAME OF PARENT OR AFFILIATED COMPANY (IF NONE, SO INDICATE) CITY STATE ZIP CODE
7. CHECK ONE: IS THE COMPANY: ☐ SINGLE-ESTABLISHMENT EMPLOYER ☐ MULTI-ESTABLISHMENT EMPLOYER
8. IF MULTI-ESTABLISHMENT EMPLOYER, STATE THE NUMBER OF ESTABLISHMENTS IN NJ
9. TOTAL NUMBER OF EMPLOYEES AT ESTABLISHMENT WHICH HAS BEEN AWARDED THE CONTRACT
10. PUBLIC AGENCY AWARDING CONTRACT CITY COUNTY STATE ZIP CODE

Official Use Only	DATE RECEIVED	INAUG.DATE	ASSIGNED CERTIFICATION NUMBER

SECTION B - EMPLOYMENT DATA

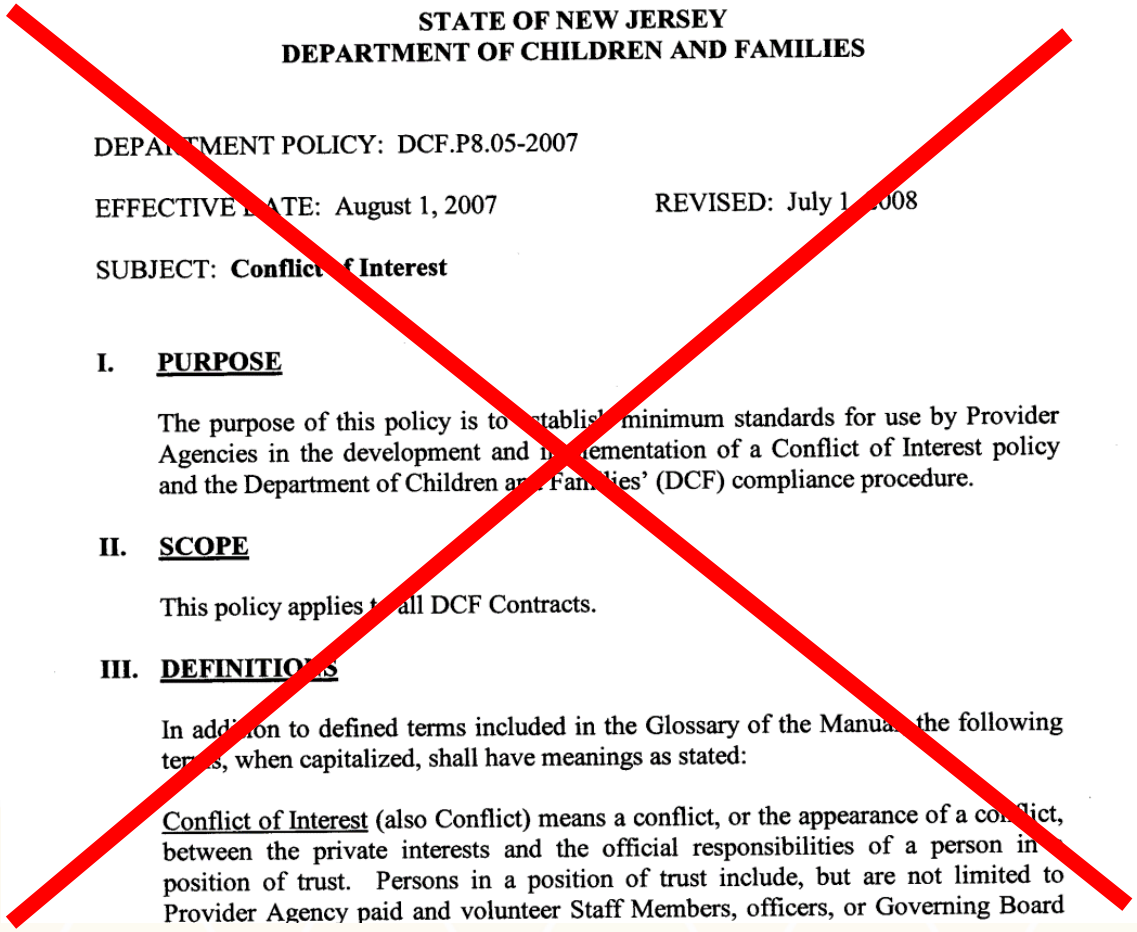
11. Report all permanent, temporary and part-time employees ON YOUR OWN PAYROLL. Enter the appropriate figures on all lines and in all columns. Where there are no employees in a particular category, enter a zero. Include ALL employees, not just those in minority/non-minority categories, in columns 1, 2, & 3. *DO NOT SUBMIT AN EEO-1 REPORT.*

2. Affirmative Action Certificate (Employee Information Report)

- If you are a startup, you may submit a completed AA302 form (left) and a receipt of payment from Treasury ($150.00).
- Otherwise, you must submit your active Affirmative Action Certificate.

Common Questions & Errors

PDF 2 – Document #8



STATE OF NEW JERSEY
DEPARTMENT OF CHILDREN AND FAMILIES

DEPARTMENT POLICY: DCF.P8.05-2007

EFFECTIVE DATE: August 1, 2007 REVISED: July 1, 2008

SUBJECT: Conflict of Interest

I. PURPOSE

The purpose of this policy is to establish minimum standards for use by Provider Agencies in the development and implementation of a Conflict of Interest policy and the Department of Children and Families' (DCF) compliance procedure.

II. SCOPE

This policy applies to all DCF Contracts.

III. DEFINITIONS

In addition to defined terms included in the Glossary of the Manual, the following terms, when capitalized, shall have meanings as stated:

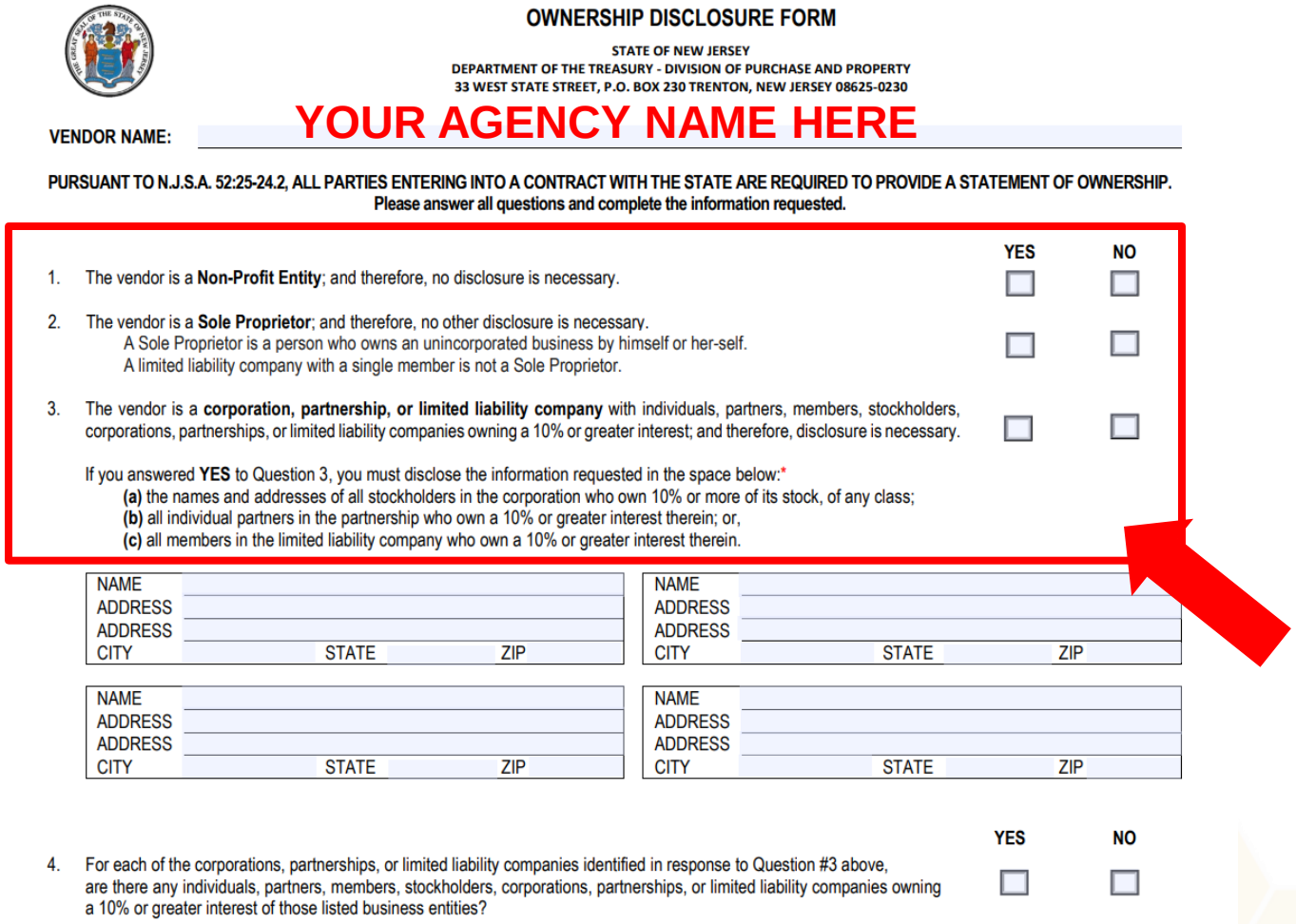
Conflict of Interest (also Conflict) means a conflict, or the appearance of a conflict, between the private interests and the official responsibilities of a person in a position of trust. Persons in a position of trust include, but are not limited to Provider Agency paid and volunteer Staff Members, officers, or Governing Board

8. Your Organization's Conflict of Interest Policy

- **Do not submit the DCF Conflict of Interest Policy.**

Common Questions & Errors

PDF 2 – Document #13



OWNERSHIP DISCLOSURE FORM

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY - DIVISION OF PURCHASE AND PROPERTY
33 WEST STATE STREET, P.O. BOX 230 TRENTON, NEW JERSEY 08625-0230

VENDOR NAME: YOUR AGENCY NAME HERE

PURSUANT TO N.J.S.A. 52:25-24.2, ALL PARTIES ENTERING INTO A CONTRACT WITH THE STATE ARE REQUIRED TO PROVIDE A STATEMENT OF OWNERSHIP.
Please answer all questions and complete the information requested.

	YES	NO
1. The vendor is a **Non-Profit Entity**; and therefore, no disclosure is necessary.	☐	☐
2. The vendor is a **Sole Proprietor**; and therefore, no other disclosure is necessary. A Sole Proprietor is a person who owns an unincorporated business by himself or her-self. A limited liability company with a single member is not a Sole Proprietor.	☐	☐
3. The vendor is a **corporation, partnership, or limited liability company** with individuals, partners, members, stockholders, corporations, partnerships, or limited liability companies owning a 10% or greater interest; and therefore, disclosure is necessary.	☐	☐

If you answered **YES** to Question 3, you must disclose the information requested in the space below:*
(a) the names and addresses of all stockholders in the corporation who own 10% or more of its stock, of any class;
(b) all individual partners in the partnership who own a 10% or greater interest therein; or,
(c) all members in the limited liability company who own a 10% or greater interest therein.

NAME		NAME	
ADDRESS		ADDRESS	
ADDRESS		ADDRESS	
CITY	STATE ZIP	CITY	STATE ZIP

NAME		NAME	
ADDRESS		ADDRESS	
ADDRESS		ADDRESS	
CITY	STATE ZIP	CITY	STATE ZIP

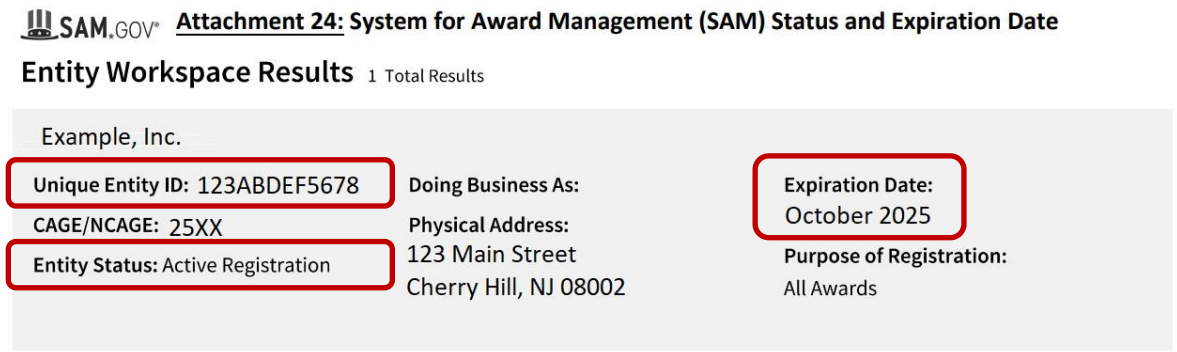
	YES	NO
4. For each of the corporations, partnerships, or limited liability companies identified in response to Question #3 above, are there any individuals, partners, members, stockholders, corporations, partnerships, or limited liability companies owning a 10% or greater interest of those listed business entities?	☐	☐

13. Ownership Disclosure Form

- **You must submit this with your response, or it will not be considered.**
- **Read and complete each section carefully.**

Common Questions & Errors

PDF 2 – Document #16



SAM.GOV **Attachment 24: System for Award Management (SAM) Status and Expiration Date**

Entity Workspace Results 1 Total Results

Example, Inc.

Unique Entity ID: 123ABDEF5678

CAGE/NCAGE: 25XX

Entity Status: Active Registration

Doing Business As:

Physical Address:
123 Main Street
Cherry Hill, NJ 08002

Expiration Date:
October 2025

Purpose of Registration:
All Awards

16. System of Award Management (SAM)

- **Submit a printout showing your Unique Entity ID Number (UEID), Active Status, and Expiration Date.**
- **This is a two-step process:**

1. **Apply for a UEID number at sam.gov – this is *FREE*. Once you have the UEID number;**
2. **Register your UEID number, also at sam.gov. This process may take about two weeks.**

Common Questions & Errors

PDF 2 – Document #22

22. Contractual Agreement

Please submit only one (1) of the following:

- **Standard Language Document (most common)**

  - OR -

- **Individual Provider Agreement**

  - OR -

- **Department Agreement (if you are a state agency)**

Organizing Your Application

PDF 3:

Section IV – Respondent Narrative Responses

Organizing Your Application - PDF 3

PDF 4: Section IV – Narrative Responses

(Pages 18-20)

Subsections include:			Page Limitation	Score
A	**Community and Organizational Fit** Community and Organizational fit refers to respondent's alignment with the specified community and state priorities, family and community values, social norms and history, and other interventions and initiatives.	? ? ?		40
B	**Organizational Capacity** Organizational Capacity refers to the respondent's ability to meet and sustain the specified minimum requirements financially and structurally.	? ? ?		40
C	**Organizational Support** Organizational Supports refers to the respondent's access to Expert Assistance, Staffing, Training, Coaching & Supervision.	? ? ?		20
		TOTAL:	15	100

RFP Review and Important Reminders

The Evaluation Committee review the following items:

PDF 3 Narrative Responses

Subsections include:

A. Community and Organizational Fit
B. Organizational Capacity
C. Organizational Support

Important Reminders:

- Ensure your response follows the RFP format by section and sequence of questions included.
- Your narrative response must convey an understanding of the program deliverables and goals, as well as provider responsibilities stated within the RFP.
- Answer ALL questions – your response will be carefully reviewed and scored.

Request For Proposals (RFP)

Children's Interagency Coordinating Council (CIACC)
for Atlantic County

Questions & Technical Assistance (TA)

Technical Assistance (TA)

Technical Assistance (TA) is available to prospective applicants.

Questions regarding the completion and submission of a DCF Request For Proposals (RFP) must be submitted to DCF.ASKRFP@dcf.nj.gov.

DCF.ASKRFP@dcf.nj.gov

Questions & Answers

Submit all questions to:
DCF.ASKRFP@dcf.nj.gov

- **Respondent may not contact the DCF Children's System of Care (CSOC) directly, in person, or by telephone, concerning this RFP. Questions must be sent via email to: DCF.ASKRFP@dcf.nj.gov**
- **Technical inquiries about required forms, documents, and format may be sent at any time prior to the response deadline,12:00 PM on Tuesday, August 11th.**
- **Questions about the content and deliverables of the RFP must be sent by Friday, July 24th.**

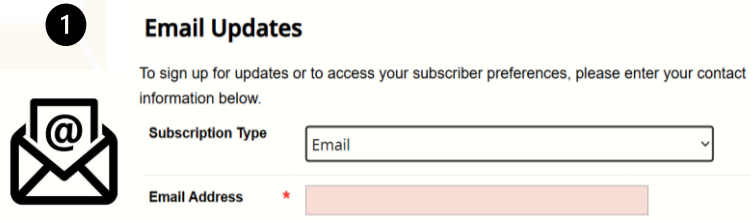
- **All answers to content and deliverables related questions will be posted on the DCF website at: DCF | Requests for Proposals, Qualifications/or Information and Funding Opportunities (nj.gov)**

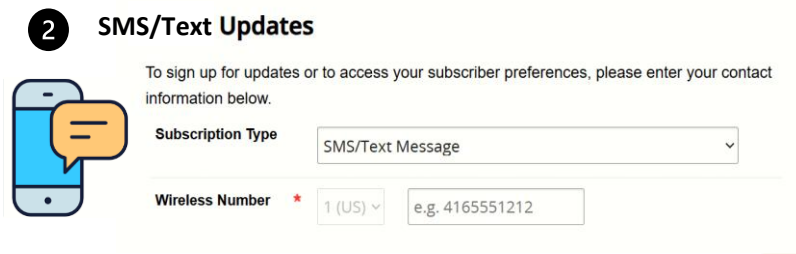
Sign-up for DCF Notifications

NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES

https://www.nj.gov/dcf/stay-connected/providers-and-contractors/contracting-opportunities/

Click on → Receive notices announcing funding opportunities by email





RFP Timeframes

Date	Event
~~Tuesday, July 7th~~	~~RFP Published~~
~~Tuesday, July 22nd~~	~~Virtual Conference~~
Friday, July 24th	Program Related Questions Due
Tuesday, August 4th (earlier if possible)	Authorized Organization Representative (AOR) Form Due
Tuesday, August 11th @ 12:00PM	Response Deadline

* DCF recommends not waiting until the due date to submit your response in case there are technical difficulties during your submission.

Questions