



## **REQUEST FOR PROPOSALS**

**FOR**

**Positive Parenting Program (Triple P)**

**Publication Date March 19, 2025**

**Response Deadline: April 30, 2025, by 12:00 P.M.**

**Funding of \$4,853,629 Available in State Funds**

**There will be a non-mandatory virtual conference on**

**March 25, 2025, at 9:30 A.M.**

**The link for the conference is:**

**<https://www.zoomgov.com/j/1607066203>**

**Christine Norbut Beyer, MSW**

**Commissioner**

**The Department of Children and Families (DCF) is the agency dedicated to ensuring all New Jersey residents are safe, healthy, and connected. To that end, DCF announces to potential respondents its intention to award a new contract.**

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## **Section I - General Information**

### **A. Summary Program Description:**

The Department of Children and Families (DCF), Division of Family and Community Partnerships (FCP), Office of Family Preservation and Reunification (FPR), announces its intent to award contracts to establish the Triple P – Positive Parenting Program evidence-supported service model in 21 counties assigned to nine (9) regional programs as part of a comprehensive, statewide family support services continuum.

These Triple P contracted programs will support families involved with DCF's Division of Child Protection and Permanency (DCP&P). Each program will provide supportive and educational in-home services for parents/caregivers of children ages birth through twelve (12) years old, who are involved in the child welfare system. The Triple P intervention will provide parents/caregivers with effective parenting skills and strategies, and teach them about enhanced social connections, social emotional competency, child safety, and child development.

Respondents must submit a separate response for each region it is interested in serving. A respondent may submit up to two (2) responses and may be awarded the opportunity to form a contract for up to two (2) regions.

### **B. Funding Information:**

All funding is subject to appropriation. The continuation of funding is contingent upon the availability of funds and resources in future fiscal years.

Respondents are on notice that no annual increases will be considered as part of this contract to salaries, fringe, or benefits in future negotiations or contracts, unless approved by the State legislature for all contracting entities. Funds awarded may not be used to supplant or duplicate existing funding.

DCF will make available \$4,853,629 in state funds. Of this amount, up to \$4,178,629 is available for operating expenses for 9 months and up to \$675,000 is available for one-time approved start-up costs. DCF reserves the right to award all or a portion of these funds.

Available funding is for up to \$539,292 per award for up to nine (9) awards. Each award supports pro-rated anticipated operating costs of up to \$464,292, and one-time approved start-up costs of up to \$75,000.

The intended funding period for the contract is: July 1, 2025 – June 30, 2026. The funds available are to be budgeted to cover the expenses incurred during

the initial contract term. DCF will not reimburse expenses incurred prior to the effective date of the contract except for approved start-up costs.

Contract renewal on July 1, 2026, is contingent on the availability of funds. Note: If the award results in a contract renewal, the anticipated operational costs for the twelve-month contract will be up to \$625,400 in FY27+.

The anticipated costs required for program operations must be entered for the initial term of this contract -and submitted with this response using the Proposed Budget Form found at: <https://www.nj.gov/dcf/providers/contracting/forms/> and a justification and detailed summary of the costs must be provided in the Proposed Budget Narrative. The Proposed Budget Form and the Proposed Budget Narrative must be submitted as documents included in PDF 3: Section III - *Documents to be Submitted with This Response, Subsection B. Additional Documents Requested to be Submitted in Support of This Response.*

The Proposed Budget Form will detail anticipated operational expenditures of up to up to \$539,292, of which \$464,292 is operational expenses and \$75,000 is for one-time start-up expenses for the budget period from 7/1/25 to 6/30/26.

All start-up costs and operational expenses must be expended by June 30, 2026.

DCF may reimburse start-up costs for this program. The anticipated costs required to begin program operations must be entered into the appropriate Start-up Funding column of the Proposed Budget Form found at: <https://www.nj.gov/dcf/providers/contracting/forms/> and a justification and summary of the costs must be included in the Proposed Budget Narrative. The completed Proposed Budget Form and the Proposed Budget Narrative must be submitted as documents included in PDF 3: Section III - *Documents to be Submitted with This Response, Subsection B. Additional Documents Requested to be Submitted in Support of This Response.* Respondents may propose total start-up costs of up to \$75,000. Start-up costs shall include but not be limited to laptops/tablets equipped with broadband to be used in the field; the purchasing of or upgrades to Electronic Health Records (EHRs) to align with documentation expectations; the purchasing of curriculum workbooks for families and the costs of a program vehicle.

All start-up costs are subject to contract negotiations and DCF approval. Funds for approved start-up cost funds will be released upon the execution of a finalized contract and are paid via Scheduled Payments.

NOTE: The Proposed Budget submitted with a response is not the actual budget an awarded respondent will submit for DCF approval as part of the contract. If awarded a contract, the awarded respondent then shall submit their budget information again using the more detailed Annex B Budget Form found at: <https://www.nj.gov/dcf/documents/contract/forms/AnnexB.xls>.

The awarded respondent shall prepare and submit an annual budget each fiscal year. Each budget will require Quarterly Reports of Expenditures to be submitted ten (10) days following the close of the quarter and be subject to the DCF contract close out process.

Each budget will require Reports of Expenditures and be subject to the DCF contract close out process following the end of the contract term in accordance with the DCF Contract Close Out policy at:

[https://www.nj.gov/dcf/documents/contract/manuals/CPIM\\_p7\\_closeout.pdf](https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p7_closeout.pdf). DCF will compare the actual approved expenditures appearing on the final report of expenditures and the independent audit with the total contract revenue realized through the receipt of scheduled payments and may recoup as an overpayment the funds that exceeded the actual allowable contract expenditures of the approved budget.

Once awarded a contract, the awarded respondent shall submit for approval its first Annex B Budget for the period of July 1, 2025 through June 30, 2026. In addition to these first 9 months of operating costs, all start-up costs also must be included in this Annex B Budget.

Matching funds are not required.

### **C. Pre-Response Submission Information:**

There will be a non-mandatory Virtual Conference for all respondents held on March 25, 2025, at 9:30 A.M.

Join ZoomGov Meeting

<https://www.zoomgov.com/j/1607066203>

Meeting ID: 160 706 6203

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One tap mobile

+16692545252,,1607066203# US (San Jose)

+16469641167,,1607066203# US (US Spanish Line)

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Dial by your location

- +1 669 254 5252 US (San Jose)
- +1 646 964 1167 US (US Spanish Line)
- +1 646 828 7666 US (New York)
- +1 669 216 1590 US (San Jose)
- +1 415 449 4000 US (US Spanish Line)
- +1 551 285 1373 US (New Jersey)

Meeting ID: 160 706 6203

Find your local number: <https://www.zoomgov.com/join/1607066203>

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Join by SIP

- [1607066203@sip.zoomgov.com](mailto:1607066203@sip.zoomgov.com)

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Join by H.323

- 161.199.138.10 (US West)
- 161.199.136.10 (US East)

Meeting ID: 160 706 6203

Respondents may not contact DCF in person or by telephone concerning this RFP. Questions may be sent in advance of the response deadline via email to [DCF.ASKRFP@dcf.nj.gov](mailto:DCF.ASKRFP@dcf.nj.gov).

Technical inquiries about forms, documents, and format may be requested at any time prior to the response deadline, but **questions about the content of the RFP must be requested by 12 P.M. on March 27, 2025**. Questions should be asked in consecutive order, from beginning to end, following the organization of the RFP and each question should reference the page number and section number to which it relates. All inquiries submitted should reference the program name appearing on the first page of this RFP. Written inquiries will be answered and posted on the DCF website as a written addendum to this RFP at: <https://nj.gov/dcf/providers/notices/requests/>

#### **D. Response Submission Instructions:**

**All responses must be delivered ONLINE by 12:00 P.M. on April 30, 2025. Responses received after this deadline will not be considered.**

**To submit online, respondent must first complete an Authorized Organization Representative (AOR) form found at [AOR.pdf \(nj.gov\)](#).** The completed AOR form must be signed and dated by the Chief Executive Officer or designated alternate and sent to [DCF.ASKRFP@dcf.nj.gov](mailto:DCF.ASKRFP@dcf.nj.gov). Only one (1) AOR form is required, even if the respondent intends to file multiple responses. The respondent is required to enter each location to be served on the AOR form

Upon receipt of the completed AOR, DCF will grant the respondent permission to proceed and provide instructions for the submission of the response(s) electronically.

Completed AOR forms should be received in the [DCF.ASKRFP](mailto:DCF.ASKRFP@dcf.nj.gov) mailbox not less than five (5) business days prior to the date the response is due. DCF recommends emailing your AOR forms as soon as you know you will be filing a

response to allow time to report to DCF any technical difficulties you may encounter and to timely resolve them.

**E. Required PDF Content of the Response:**

Submit in response to this RFP four separate PDF documents labeled as follows:

**PDF 1:** *Section II - Required Performance and Staffing Deliverables (ending with a Signed Statement of Acceptance)*

**PDF 2:** *Section III - Documents Requested to be Submitted with This Response, Subsection A. (Organizational Documents Prerequisite to a DCF Contract Award Requested to be Submitted with the Response)*

**PDF 3:** *Section III – Documents Requested to Submitted with This Response, Subsection B. (Additional Documents Requested to be Submitted in Support of This Response)*

**PDF 4:** *Section IV - Respondent’s Narrative Responses, subsections ABC (A. Community and Organizational Fit; B. Organizational Capacity; and C. Organizational Supports)*

**F. Respondent Eligibility Requirements:**

Respondents that have State or Federal grants or contracts must be compliant with all their terms and conditions and in good standing as grantees and contractors.

Respondents must not be suspended, terminated, or barred for deficiencies in the performance of any grant or contract award, and if applicable, all past issues must be resolved as demonstrated by written documentation.

DCF may disqualify and decline to forward for the review of the Evaluation Committee a response from those under a corrective action or performance improvement plan in process with DCF or any other New Jersey State agency or authority.

Respondents must be fiscally viable and be able to comply with the contracting rules and regulations set forth in the DCF Contract Policy and Information Manual (CPIM) found at: [DCF | Contracting Policy Manuals \(nj.gov\)](#).

Where required, all respondents must hold current State licenses.

Respondents must have a governing body that provides oversight as is legally required in accordance with how the entity was formed, such as a board of

directors for corporations, or the managing partners of a Limited Liability Corporation (LLC)/Partnership, or the members of the responsible governing body of a county or municipality.

Respondents must have the capability to uphold all administrative and operating standards as outlined in this RFP.

Participants in the program may not be receiving duplicative services funded by Medicaid.

Respondents must be business entities that are duly registered to conduct business within the State of New Jersey, for profit or non-profit corporations, partnerships, limited liability companies, etc. or institutions of higher education located within the State of New Jersey.

Respondents awarded a contract should ensure their program is operational within sixty (60) days of contract award or the award may be rescinded. Extensions may be available by way of written request to DCF.

Respondents awarded a contract must be prepared to execute any planned sub-contracts, memorandum of agreements with vendors, consultants, or agencies, after the review and approval of DCF, within thirty (30) days of contract execution.

## **Section II - Required Performance and Staffing Deliverables**

**NOTE: After reviewing the required deliverables listed below, respondents must sign the statement at the bottom of this Section II to signify acceptance of all of them.**

**(SUBMIT A COMPLETE COPY OF THE CONTENT OF SECTION II, ENDING WITH YOUR SIGNED STATEMENT OF ACCEPTANCE, 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.*)**

**A. Subject Matter - The below describes the needs the awarded respondent must address in this program, the goals it must meet, and its prevention focus.**

- 1) The need for this program as indicated by data regarding the health and human services issues and parent and community perceptions is:**

DCF's vision is for all New Jersey residents to be safe, healthy, and connected. Since its creation in 2006, DCF has designed and managed a strong, statewide network of core services, including child protection and child welfare services, children's behavioral health care, programming to support children with intellectual and developmental disabilities and their families, community-based family strengthening services, specialized educational programming, services and programming to support women, and more. Over 100,000 New Jersey constituents are impacted by these services monthly. DCF, as demonstrated by our Strategic Plan, is committed to providing high-quality, evidence-based, or evidence-informed services to individuals and families in New Jersey.

Over the last ten years, New Jersey's rate of foster care placement per 1,000 children has declined to less than one-third of its 2014 level (2.5 per 1,000 in 2014, compared to 0.8 per 1,000 in 2021). Today, New Jersey has the lowest rate of foster care placement in the country. Placement rates vary based on race and age. New Jersey's placement rate for Black or African American children is four times as high as the placement rate for White children (2.0 per 1,000 compared to 0.5 per 1,000) and its placement rate for infants under 1 is 4 times higher than the placement rate for any other age group (4.2 per 1,000 compared to 0.5 – 0.8 per 1,000 for other age groups). In 2021, 55% of children entering foster care were aged 5 years or younger and 27% were infants under the age of one year. Between 2014-2021, about 80% of the children who entered foster care did so for the first time and 20% entered for at least a second time.

The core approaches included in DCF's strategic plan—race equity, family voice, protective factors, healing centered practice, and collaborative safety—are essential and catalytic components of New Jersey's existing prevention strategy. Recognizing both the strengths and limitations of this prevention system, DCF used the findings from a multi-year information gathering process to devise a prevention strategy oriented towards achieving outcomes in three domains: (1) identity, (2) process and (3) program. More on each domain can be found in the [NJDCF Family First Act Prevention Plan Concept Paper](#).

DCF's vision of the family strengthening system is rooted in the Protective Factor's Framework. In the forefront, it is comprised of the natural connections between families and their extended family, friends, and community. Secondly, it includes a myriad of concrete supports and social, health and education services, all existing outside of the child protection system, aimed at helping family's function at their best. When the elements of this system work together, families and communities are supported to thrive safely together and state

intervention through the child protection system is reserved for rare situations in which a child is unsafe or at risk of harm.

However, when a family system is so challenged that children are unsafe or at a high risk of abuse or neglect, child protection interventions are available to support the family and ensure the safety of children. In New Jersey, such interventions include DCF's core child protection services, e.g., investigations, case management and planning, etc., and its statewide network of social and clinical services for families with active child protection involvement.

Most often, when DCP&P becomes involved with a family, the Division is able to help the family develop and carry plans that allow for the family to remain together, safely. The majority (90%) of the children with active DCP&P involvement remain in their own homes with their family. DCP&P works with families to identify their needs and to connect them with appropriate services and supports. DCP&P has access to DCF's comprehensive network of services, which includes an array of mental health services, substance use disorder services, parenting supports and services, domestic violence services, and more.

New Jersey's Prevention Strategy & Family First Prevention Services Act 5- year Plan includes adding Triple P to DCF's current service array to support families in high risk or unsafe situations. Triple P is part of the continuum of family support services designed to strengthen families and connect them to the resources and support they need within their own community that can prevent crisis, mitigate risks, and prevent future child abuse and neglect.

The design of the NJDCF-funded Triple P program is informed by the results of a statewide constituent survey conducted by DCF-Office of Family Preservation and Reunification Services in May 2023. Constituents surveyed reflect the diversity of the populations served by DCP&P. The purpose of the voluntary survey was to inform the program design and service delivery approach of the new portfolio of in-home family support services. Caregivers conveyed that parenting education, specifically individualized parenting guidance to meet the developmental needs of their child, was the most important function of an in-home family support service followed by connections to community resources and group parenting support. Caregivers also provided feedback related to their experiences with service providers. Family priorities include providers who worked around families' schedules, were supportive, compassionate, and respectful of their families' cultures, provided personalized tools, and had clear and consistent communication with their family and DCP&P around service delivery and progress. Feedback and suggestions from the constituent

survey are incorporated throughout the program model and embedded within provider partner expectations.

2) **The goals to be met by this program are:**

The Positive Parenting Program (Triple P) System is a suite of interventions that enhances the knowledge, skills, and confidence of parents. Triple P gives parents clear strategies to respond to their child's needs and remain calm, promoting attachment as children learn and meet developmental milestones. Triple P encourages parents to create a nurturing environment, allowing children to grow in a safe, stable, and loving home. Triple P encourages self-regulation, the capacity to solve problems independently, and reducing dependency on others.

The Triple P system is based on five core principles of positive parenting:

1. Ensuring a safe, supervised, and engaging environment.
2. Creating a positive learning environment that helps children learn to solve problems.
3. Using consistent, predictable, and assertive discipline to help children learn to accept responsibility for their behavior and become aware of the needs of others.
4. Having realistic expectations, assumptions, and beliefs about children's behavior.
5. Taking care of oneself as a parent so that it is easier to be patient, consistent and available to children.

The goals of Triple P are to increase parenting competence, improve parental adjustment and partner relationships, enhance child wellbeing, improve systems of care, and promote healthier communities. Triple P's primary goal is to help parents ensure a safe, stable, and nurturing environment for their children, while also addressing common developmental tasks of childhood. Triple P aims to teach practical parenting skills in a self-regulatory way, providing support to enable change. Services are family centered and focus on the development of the protective factors of the family. The program gives parents the confidence and skills to be self-sufficient and to manage problems independently. Parents develop personal coping and communication skills.

3) **The prevention focus of this program is:**

Includes prevention of: Emotional Abuse/Neglect, Neglect, Family Separation, Physical Abuse.

**B. Target Population - The below describes the characteristics and demographics the awarded respondent must ensure the program serves.**

- 1) **Age:**  
Children and youth aged 0-12 and their parents/caregivers.  
Enrollment must occur prior to the youth's 13<sup>th</sup> birthday.
- 2) **Grade:**  
N/A
- 3) **Gender:**  
Female; Male; Trans; Non-binary; All
- 4) **Marital Status:**  
Includes: Married; Divorced; Separated; Widowed; Civil Partnership;  
Single
- 5) **Parenting Status:**  
N/A.
- 6) **Will the program also serve the children of the primary service recipient?**  
No
- 7) **DCF CP&P Status:**  
Families should have a DCP&P In Home Case at the time of initial referral and engagement. DCP&P case goal should reflect Family Stabilization. DCP&P open case status is not a requirement to continue receiving Triple P services.
- 8) **Descriptors of the primary service recipient:**  
N/A
- 9) **Descriptors of the Family Members / Care Givers / Custodians of the primary service recipients also required to be served:**  
N/A
- 10) **Other populations/descriptors targeted and served by this program:** N/A
- 11) **Does the program have income eligibility requirements?** N/A

**C. Activities - The below describes the activities this program initiative requires of awarded respondents, inclusive of how the target population will be identified and served, the direct services and service modalities that will be provided to the target population, and the professional**

development and training that will be required of, and provided to, those delivering the services.

- 1) **The level of service increments for this program initiative:**  
Unduplicated Families Served
  
- 2) **The frequency of these increments to be tracked:**  
Monthly, Quarterly, Annually
  
- 3) **Estimated Unduplicated Service Recipients:** N/A
  
- 4) **Estimated Unduplicated Families:**

Each region will serve 187 unduplicated families per year. Approximately 115 families will be served via Triple P Standard; In-Home Sessions and 72 families will be served via Triple P Group; In-Community Sessions.

The minimum number of families served is based on model fidelity, needs data, and specified by county below.

<b>Region 1: Atlantic, Burlington, Cape May</b>	<b>Counties</b>	<b>Approximate Percentage of Caseload</b>	<b>Estimated Unduplicated Families – Standard</b>	<b>Estimated Unduplicated Families – Group</b>
	Atlantic	45%	52	72
	Burlington	40%	46	
	Cape May	15%	17	

<b>Region 2: Cumberland, Gloucester, Salem</b>	<b>Counties</b>	<b>Approximate Percentage of Caseload</b>	<b>Estimated Unduplicated Families – Standard</b>	<b>Estimated Unduplicated Families – Group</b>
	Cumberland	40%	46	72
	Gloucester	45%	52	
	Salem	15%	17	

<b>Region 3: Camden</b>	<b>Counties</b>	<b>Approximate Percentage of Caseload</b>	<b>Estimated Unduplicated Families – Standard</b>	<b>Estimated Unduplicated Families – Group</b>
	Camden	100%	115	72

	<b>Counties</b>	<b>Approximate Percentage of Caseload</b>	<b>Estimated Unduplicated</b>	<b>Estimated Unduplicated</b>

Region 4: Monmouth, Ocean			Families – Standard	Families – Group
	Monmouth	45%	52	72
	Ocean	55%	63	

Region 5: Hunterdon, Mercer, Somerset, Warren	Counties	Approximate Percentage of Caseload	Estimated Unduplicated Families – Standard	Estimated Unduplicated Families – Group
	Hunterdon	10%	12	72
	Mercer	35%	40	
	Somerset	25%	29	
	Warren	30%	34	

Region 6: Middlesex, Union	Counties	Approximate Percentage of Caseload	Estimated Unduplicated Families – Standard	Estimated Unduplicated Families – Group
	Middlesex	60%	69	72
	Union	40%	46	

Region 7: Essex	Counties	Approximate Percentage of Caseload	Estimated Unduplicated Families – Standard	Estimated Unduplicated Families – Group
	Essex	100%	115	72

Region 8: Morris, Sussex, Passaic	Counties	Approximate Percentage of Caseload	Estimated Unduplicated Families – Standard	Estimated Unduplicated Families – Group
	Morris	25%	29	72
	Passaic	60%	69	
	Sussex	15%	17	

Region 9: Bergen, Hudson	Counties	Approximate Percentage of Caseload	Estimated Unduplicated Families – Standard	Estimated Unduplicated Families – Group
	Bergen	40%	46	72
	Hudson	60%	69	

*Assigned county-based slots will be allowed flexibility to ensure the needs of the families within the region are met. Additional information on staffing*

requirements and caseload size can be found in D Resources, 9. Staffing Requirements.

5) **Is there a required referral process?**

Yes.

6) **The referral process for enabling the target population to obtain the services of this program initiative:**

Families with current involvement with the New Jersey Division of Child Protection and Permanency may be referred to the program through various referral sources, including:

Referral Sources	
Self-Referral	<ul style="list-style-type: none"> <li>• Families may contact the provider directly</li> </ul>
Social Service Staff	<ul style="list-style-type: none"> <li>• DCP&amp;P caseworkers</li> <li>• Other social service personnel</li> </ul>
Community Providers	<ul style="list-style-type: none"> <li>• Mental health care provider</li> <li>• Child’s pediatrician</li> <li>• Child’s school/childcare</li> <li>• Other community agency</li> </ul>

7) **The rejection and termination parameters required for this program initiative:**

Families with children who are placed in out of home care, are not eligible to participate in the intervention.

This is a voluntary service. Nevertheless, repeatedly missed or cancelled visits could allow, but should not automatically call for, termination or suspension of the service. Awarded respondents will communicate termination parameters with families at the time of enrollment.

8) **The direct services and activities required for this program initiative:**

**Core services and activities relevant to Triple P Standard and Group:**

Triple P promotes a self-regulatory framework, a strength-based and reflective approach to working with parents. This approach builds on parents existing knowledge and strengths that they hold while also helping them identify goals for change and strategies to help meet those goals. Triple P seeks to build parent competence through teaching skills that will help them learn to reflect, assess, and monitor their own behavior while also building parents capacity to effectively

implement strategies and independently solve problems. Practitioners will assist parents in making informed decisions by sharing knowledge and skills on developmentally appropriate strategies and incorporating active skills training to model and practice these strategies during group and individual sessions.

**Initial Needs Assessment:** The Initial Needs Assessment is completed during the intake process with the family. The Triple P team may include a combination of the Practitioner, Care Manager and/or the Supervisor who will assess the child's developmental, educational, situational, and familial history. The team also will assess the caregivers needs, including parenting knowledge, supports and concrete needs. During the intake assessment, the agency will assess for, and select a version of, Triple P based on criteria DCF provides. That criteria may include, but is not limited to, accessibility, assessment of need, and family choice.

**Safety Evaluation:** As part of the needs assessment, the Practitioner will complete an initial safety evaluation with the family using a validated safety tool that will identify whether there is immediate or imminent danger to the child or youth. As part of service delivery, the Practitioner will have regular contact with the family and will be expected to informally assess safety during every interaction. During the service delivery process, should safety concerns emerge, provider agencies will develop safety plans as needed and maintain ongoing communication to ensure families receive the supports necessary to keep children safely at home. *Additional guidance will be provided by DCF in alignment with FFA-requirements.*

**Family Service Planning:** In both in-home and Group settings, Practitioners will utilize the initial needs assessment to inform service and goal planning. Families will lead the development of their Family Service Plan which will guide their services. With ongoing coordination with DCP&P, the family's service plan will be revisited at regular intervals to ensure services are having the intended result as reported by the Practitioner or family. The family service plan is to be adjusted on an ongoing basis as the family's needs change throughout the course of service delivery.

**Service Coordination:** A core component of the Family Service Plans includes connection to community resources, supports and information intended to help the family in achieving their goals and ensure positive child and family outcomes. The Care Manager will work alongside the Practitioner to connect families to needed resources in the community and provide individual support to ensure successful linkage. The Care Manager will focus on the ongoing development of community resources to be responsive to the specific needs of the families being

served and integrating Triple P into the larger prevention system of care.

**Core services and activities specific to each Triple P Version:**  
 Awarded respondents will implement both Triple P Standard and Triple P Group as part of their service delivery model.

<b>Triple P Standard</b>	<b>Triple P Group</b>
<p>In-Home Sessions are designed to be delivered over a ten-week period, with the Practitioner typically conducting weekly one-on-one sessions in the family's home. However, it is important to tailor the schedule based on the caregivers' individual progress and needs as they work through the material. This flexible approach ensures that families receive the most effective support.</p> <p>Sessions focus on strengthening attachment, teaching news skills, child development, managing misbehavior, and developing parenting plans to address challenging situations.</p> <p>Final session - During the 10th session, the Practitioner and the family review maintenance strategies that build off of the success of their parenting strategies.</p>	<p>In-Community Sessions are designed to be delivered over an eight-week period, with the Practitioner holding four (4), weekly two-hour group sessions with all parents, three (3) one-on-one consults and either a final group session or a one-on-one closure consult.</p> <p><u>Week 1:</u> The first group session, the Practitioner addresses common causes of challenging behaviors and parents are led to identify goals they would like to address in the program.</p> <p><u>Weeks 2, 3, 4:</u> Subsequent parent group sessions focus on strengthening attachment, teaching news skills, child development, preventing misbehavior, and developing parenting plans to address challenging situations.</p> <p><u>Weeks 5, 6, 7:</u> The Practitioner provides individualized coaching on the Family Service Plan in weeks 5, 6, and 7. They offer three (3), 15-30 minute individual phone or in-person consulting sessions, conducted over a three (3) week period.</p> <p><u>Week 8:</u> The final parent group session, the Practitioner provides either a final and fifth group session in week 8 or can meet with parents 1:1 to complete the intervention and close the program.</p>

Triple P programs are authorized to allot up to \$75 per family in financial assistance funds to help address material needs that are not addressed by CP&P or to further the work of the program. Such funds are considered "Specific Assistance to Clients" and must be specified in the approved program budget (DCF Contract Annex B).

9) **The service modalities required for this program initiative are:**

**a) Evidence Based Practice (EBP) modalities:**

Positive Parenting Program (Triple P) provides evidence-based intervention strategies and curriculum based on the individual needs and characteristics of children and families and is a model with promising research study outcomes

- Triple P has been ranked by the United Nations as the world’s most extensively researched family skills training program.<sup>1</sup>
- Results from a South Carolina study funded by the Centers for Disease Control showed that in the nine counties where Triple P was implemented, there was a decrease in the rates of substantiated child abuse reports, out-of-home placements and emergency room visits for childhood injuries.<sup>2</sup>
- A North Carolina study of Triple P (Level 4) Outcomes found that parents had a reduction in lax, over-reactive and hostile parenting styles after participation in the program. Parents reported improvements in their child’s emotional symptoms, peer problems and prosocial behaviors.<sup>3</sup>
- Studies have demonstrated Triple P’s long-term impact as well. In Western Australia, 15-year follow-up data shows that children whose parents participated in Group Triple P when they were aged 3 to 5 years, achieved higher scores on standardized tests of numeracy and literacy in primary school and higher rates of school attendance in upper secondary school.<sup>4</sup>
- Another recent evaluation looked at adolescent outcomes 10 years after parents of preschoolers participated in Group Triple P in Braunschweig, Germany. Findings indicated reduced behavior problems and improved child wellbeing during children’s early adolescence, 10 years after parents initially participated in the program.<sup>5</sup>

**b) DCF Program Service Names:**

Positive Parenting Program “Triple P”

**c) Other/Non-evidence-based practice service modalities: N/A**

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<sup>1</sup> The United Nations Office on Drugs and Crime. (2009). *Compilation of evidence-based family skills training programs*. [http://www.unodc.org/docs/youthnet/Compilation/10-50018\\_Ebook.pdf](http://www.unodc.org/docs/youthnet/Compilation/10-50018_Ebook.pdf)

<sup>2</sup> Prinz, R. J., Sanders, M. R., Shapiro, C. J., Whitaker, D. J., & Lutzker, J. R. (2009). Population-based prevention of child maltreatment:

The U.S. Triple P system population trial. *Prevention Science*, 10(1), 1-12. <https://doi.org/10.1007/s11121-009-0123-3>

<sup>3</sup> NC Department of Health and Human Services & North Carolina Public Health. (2019). *“Triple P spoken here” North Carolina Triple P 2010-2017 evaluation report*.

<sup>4</sup> [Annual Report 2014](#)

<sup>5</sup> Kim, J. H., Schulz, W., Zimmermann, T., & Hahlweg, K. (2018). Parent-child interactions and child outcomes: Evidence from randomized intervention. *Labour Economics*, 54, 152-171. <https://doi.org/10.1016/j.labeco.2018.08.003>

10) **The type of treatment sessions required for this program initiative are:**

Treatment sessions will consist of initial assessments, individual sessions, family sessions, group sessions and phone consultations as described in the direct services and activities.

11) **The frequency of the treatment sessions required for this program initiative are:**

Participants of Triple P (Standard) receive an average of ten weekly, one-on-one sessions in the home.

Participants of Triple P (Group) receive four, two-hour, in person parent group sessions, followed by three 15–30-minute individual phone consulting sessions, conducted over a three-week period. A final group session is held in person during the 8<sup>th</sup> and final week; or this may be delivered 1:1 with a parent.

Care Managers provide 3-4 contacts per month, approximately 90 minutes of care management per family/per month.

12) **Awarded respondents are required to communicate with Parent/Family/Youth Advisory Councils, or to incorporate the participation of the communities the providers serve in some other manner:**

Providers are expected to participate in advisory councils/boards in their local community/area of service. Programs are required to incorporate participation of the community in which they serve. For example, program should partner and collaborate with schools, health care centers, pediatrician's offices, etc. to facilitate awareness of program availability, eligibility criteria and referral process.

Specific advisory councils and boards include but are not limited to:

- Connecting NJ/Family Connects NJ Advisory Board
- County Councils for Young Children
- Human Service Advisory Council
- Children's Interagency Coordinating Council
- NJ4S Advisory Boards

13) **The professional development through training, supervision, technical assistance meetings, continuing education, professional board participation, and site visits, required for this program initiative are:**

Staff of awarded respondents must participate in all Positive Parenting Program training, as well as any other training deemed necessary by DCF. This training will include, but is not limited to:

- Three Day Mandatory Training Program in Standard Triple P 0-12
- Two Day Mandatory Triple P Group 0-12
- One Day Mandatory Pre-Accreditation Workshop
- One-Day Mandatory Accreditation Workshop

Consistent with the Triple P Implementation Framework, awarded respondents shall participate in three fidelity monitoring processes:

- **Accreditation of Practitioners.** The Accreditation of Practitioners form is designed to be completed simultaneously with provider training courses. This form is meant to aid in the establishment of a baseline competency across all Practitioners, measuring Practitioner's ability to implement the program as intended. It will also allow for tracking of staff who have successfully completed the required training.
- **Session Checklists.** Triple P-Standard and Group have session checklists which assists Practitioners in implementing the model as intended. These checklists are integrated into the training protocol and are in all Triple P manuals. DCF intends to utilize these instruments as part of its formal, ongoing CoQI process.
- **Implementation Planning and Fidelity Monitoring.** Triple P provides resources to agencies for planning to implement and sustain the model as well as Core Component Checklists to monitor fidelity that will be used in the formal, ongoing CoQI process.
- **Peer Support Networks.** Practitioners will receive ongoing feedback on cases from other trained Triple P providers through their participation in peer support networks.

Model implementation fees are required and includes the cost of training, fidelity, and consultation.

Awarded respondents are to budget the following for implementation supports:

Activity/Item	Unit Cost	FY26	FY27+
<b>Costs Related to Training:</b>		Initial implementation	Attrition estimates
3-Day Mandatory Training Program in Standard Triple P	\$2,935 per person x3 staff	\$6,900	\$8,805
2-Day Mandatory Training Program in Group Triple P	\$2,125 per person x3 staff		\$6,375
Post-Training Consultation	Per agency	\$1,400	\$840
<b>Costs Related to Ongoing Implementation:</b>			
Family Workbooks (Standard)	\$39.45 per workbook x115 families (est caseload size)	\$3,375*	\$4,545
Family Workbooks (Group)	\$31.95 per workbook x72 families (est caseload size)	\$1,725*	\$2,300
Training Consultation	\$280/hour every other month—shared cost	\$4,200	\$200
Implementation Consultation	\$280/hour per quarter—shared cost	\$200	\$200
<b>Total Costs per Region</b>		<b>\$17,600</b>	<b>\$23,265</b>

\*Costs are prorated based on the implementation timeline and estimated families to be served.

- 14) **The court testimony activities, which may address an individual’s compliance with treatment plan(s); attendance at program(s), participation in counseling sessions, required for this program initiative are:**

Practitioners and their Supervisors may on rare occasions be called upon/subpoenaed to testify in court. Sources that may call upon Practitioners are Public Defenders/Parental representation, and/or DAG/DCF representation. Attending court hearings is accounted for within funding and may not be billed separately.

- 15) **The student educational program planning required to serve youth in this program: N/A**

**D. Resources - The below describes the resources required of awarded respondents to ensure the service delivery area, management, and assessment of this program.**

- 1) **The program initiative’s service site is required to be located in:**  
The awarded respondent’s service site (i.e., primary office, headquarters, etc.) can be in any location, in state or out of state.

2) **The geographic area the program initiative is required to serve is:**

Each program is required to serve one of the regions listed below. All counties listed in each region must be served.

Respondents must submit a separate response for each region it is interested in serving. A respondent may submit up to two (2) responses and may be awarded the opportunity to form a contract for up to two (2) regions.

<b>Region</b>	<b>Counties</b>
1	Atlantic, Burlington, Cape May
2	Cumberland, Gloucester, Salem
3	Camden
4	Monmouth, Ocean
5	Mercer, Somerset, Hunterdon, Warren
6	Middlesex, Union
7	Essex
8	Morris, Sussex, Passaic
9	Bergen, Hudson

3) **The program initiative's required service delivery setting is:**

For Triple P (Standard), the primary service delivery location is in the family home.

For Triple P (Group), Parent Group Sessions are to occur in the community at a location with considerations for accessibility for participants, and/or at the provider site. One-on-one consults may occur in-person via telehealth or phone.

Care Managers may also utilize telehealth or phone communications to deliver information and concrete resources to families.

4) **The hours, days of week, and months of year this program initiative is required to operate:**

Monday through Friday, 12 months per year. Awarded respondents are also expected to offer weekend and evening hours to ensure accessibility to the service.

5) **Additional procedures for on call staff to meet the needs of those served twenty-four (24) hours a day, seven (7) days a week?**

There is no requirement for on call staff for this program.

Awarded respondents shall operate an answering service that will provide individuals and families with special instructions of where to go in case of an emergency and/or to call 911. Awarded respondents also shall provide clients with emergency numbers such as the Crisis Intervention Unit phone number, the PerformCare hotline to be connected with Mobile Response Stabilization Services, the hospital emergency number, and any other appropriate hotline number.

Awarded respondents shall bring all concerns regarding the safety and well-being of a caregiver or child involved in the family being served by Triple P to the attention of the assigned DCP&P staff as soon as possible. If the concerns are noted outside of normal business hours, or the family no longer has an active case with DCP&P, then Triple P is directed to contact the State Central Registry at 1-877-NJ ABUSE. DCF's normal business hours are defined as Monday through Friday 9 a.m.-5 p.m.

6) **Additional flexible hours, inclusive of non-traditional and weekend hours, to meet the needs of those served?**

Yes. Programs should be operational to meet the needs of youth and families being served. This is inclusive of non-traditional (evening) and weekend hours.

7) **The language services (if other than English) this program initiative is required to provide:**

Efforts should be made to provide direct services in the family's primary language. Translation services will be utilized to service families. Recruitment of bi/multi-lingual staff must be evidenced in recruitment plans; awarded respondents may also offer a pay differential for bi/multilingual staff. Triple P has materials available in English, Spanish and up to 20 additional languages upon request. Services shall be provided with sensitivity to cultural differences.

8) **The transportation this program initiative is required to provide:**

The core services of the Triple P model are provided to families in their home or within the community. Nevertheless, ensuring successful linkages to other community resources may require transportation assistance. Respondents should address how caregivers and families would be able to access services through a variety of resources when transportation is a barrier.

The program should assess the family's transportation needs up front and address inequities exacerbated by transportation issues. Transportation may be provided by the care manager, on a limited and

as needed basis. If transportation is needed, it should be to mitigate delays in achieving goals as identified in the family case plans. Transportation supports should be explored to assist families. Respondents should address how parents would be able to access group-based services through a variety of resources when transportation is a barrier.

9) **The staffing requirements for this program initiative, including the number of any required FTEs, ratio of worker to youth, shift requirements, supervision requirements, education, content knowledge, credentials, and certifications:**

Each program is to have a Program Director, Program Supervisor, Care Manager, Administrative Support, and a team of Practitioners.

Minimum Staffing Requirements per program serving each region:

Position	Caseload Requirements
.25 FTE Program Director	---
.5 FTE Supervisor	---
1 FTE Care Manager	Program's entire caseload
3 FTE Practitioner	Standard: 6-8 families, at any given time Group: 3 groups/year (8-12 parents/group)
.25 Administrative Support/Data Management	---

As applied to this program, one full time equivalent (FTE) employee of an awarded respondent shall be scheduled to work 35-40 hours per week. Employees scheduled to work 17.5 to 20 hours per week are 0.5 FTEs. Each Supervisor shall be a half time employee scheduled to work 17.5 to 20 hours per week. Each Practitioner may be scheduled to work full-time or part-time hours that add up to the required total number of 3 FTEs.

Caseloads may range depending on the complexity of the needs of the child and family, the level of competency of the worker, functions assigned, and the time required for activities related to the case, and the geographic area served.

Awarded respondents shall ensure the above individuals:

- a) attend initial and on-going training sessions;
- b) have cell phones, personal transportation, and a computer;
- c) document notes in shared files that are stored securely, and
- d) receive travel expense reimbursement (mileage) for home visits.

**Position Descriptions & Credentials:**

Position	Responsibilities	Education/Credentials/ Certificates
Director	<ul style="list-style-type: none"> <li>• Position requires a high level of accountability and an ability to make critical decisions and work to ensure the success of those decisions</li> <li>• Provide supervision and oversight</li> <li>• Additional support provided to employees with lived experience</li> </ul>	<ul style="list-style-type: none"> <li>• Master's Degree in Social Work with an LCSW or LICSW and five years' experience managing a program --OR--</li> <li>• Master's degree in business or related field is appropriate; at least two years' experience with children and families; two years of management and supervisory experience;</li> </ul>
Supervisor	<ul style="list-style-type: none"> <li>• Support Practitioners including direct service to families.</li> <li>• Oversee and provide reflective supervision to 3 Practitioners and 1 Care Manager.</li> <li>• Additional support provided to employees with lived experience</li> </ul>	<ul style="list-style-type: none"> <li>• Bachelor's Degree in Social Work, Education, Early Childhood or the equivalent or related experience in the field of early childhood</li> <li>• Minimum of three years of case management, home visiting experience, mental health experience or work with at-risk families</li> </ul>
Care Manager  Minimum Salary: \$52,000 (commensurate with education and/or experience)	<ul style="list-style-type: none"> <li>• Care Manager will support the program's entire caseload</li> <li>• Act as a resource broker, by building a relationship with the community, collecting community-based resources and linking families to supports that will enhance their protective factors</li> <li>• Applicants should be embedded in the communities that they serve</li> <li>• Limited transportation of families is required</li> </ul>	<ul style="list-style-type: none"> <li>• Bachelor's degree in psychology, Social Work or equivalent experience within the child welfare system preferred.</li> <li>• Minimum of at least one years' experience in parent/family support, maternal-child health.</li> <li>• Candidates should also demonstrate knowledge and experience in care coordination for families and community stakeholders.</li> </ul>
Practitioner	<ul style="list-style-type: none"> <li>• Practitioners to maintain caseloads of up to 8 families receiving Standard (individualized) services</li> </ul>	<ul style="list-style-type: none"> <li>• Bachelor's Degree in Social Work or related field with at least one years' experience working with families experiencing trauma, mental</li> </ul>

<p>Minimum Salary: \$47,000 (commensurate with education and/or experience)</p>	<ul style="list-style-type: none"> <li>Practitioners to also facilitate Triple P Groups, serving 8-12 parents per group</li> <li>Practitioners to complete assessments of families and children, aid families in developing goals for change, and conduct sessions with families focusing on child development, managing misbehavior, encouraging independent routine and child play.</li> <li>Practitioners to complete other duties as assigned, based on program needs</li> </ul>	<p>health, substance abuse, domestic violence, homelessness, and child abuse and/or neglect.</p> <p>----OR----</p> <p>Practitioners may possess a GED or High School Diploma and demonstrate a minimum of 2 years of experience in providing direct care to minors and/or related lived experience with the child welfare system</p> <ul style="list-style-type: none"> <li>Caregivers with lived experience must demonstrate the ability to effectively advocate within the child welfare system while maintaining the appropriate level of diplomacy and model these skills to families being served</li> </ul>
<p>Administrative Support/Data Management</p>	<ul style="list-style-type: none"> <li>Support collection of program data.</li> <li>Provides administrative support to the program including, but not limited to referral management, training tracking and family group tracking.</li> </ul>	<ul style="list-style-type: none"> <li>GED or HS diploma</li> <li>Experience with the Microsoft suite of programs preferred.</li> </ul>

10) **The legislation and regulations relevant to this specific program, including any licensing regulations:**

Triple P is a program on the prevention services continuum of NJ's Family First Prevention Services Act Plan. Awarded respondents will need to ensure fidelity to the model and meet reporting requirements identified below.

DCP&P Policy III.C.2.150 Service Provision:

<https://dcfpolicy.nj.gov/api/policy/download/III-C-2-150.pdf>

directs the use of services for families to protect the child, reduce stressful situations within the family, and increase the family's abilities to function more adequately without the constant and ongoing intervention of a social service agency.

Awarded Respondents are reminded of their obligation to comply with legislative and regulatory requirements found in the Standard Language Document and the Notice of Standard DCF Contract Requirements.

11) **The availability for electronic, telephone, or in-person conferencing this program initiative requires:**

DCP&P and referred families should be able to connect with the provider via all modes of communication, electronic, telephone and in person. Awarded respondents shall ensure the ability to present visual materials, ie power point, for participants in the group setting. Additionally, respondents shall ensure their proposed budgets include funds for a HIPPA compliant tele-conference platform. This will be used to support the individual sessions with parents that occur during group format of Triple P.

In person or virtual conferences will occur between the provider agency, DCF Office of Family Preservation and Reunification, and Division of Child Protection and Permanency. These conferences will occur at least quarterly.

During the inception of the program, weekly email communication to local offices shall be sent to advise regarding new families referred to the program from Non- DCP&P entities, all families starting the program, as well as available slots.

12) **The required partnerships/collaborations with stakeholders that will contribute to the success of this initiative:**

Awarded respondents shall create and maintain strong, meaningful relationships with the following stakeholders to ensure success of the program:

- a) Triple P America for implementation support
- b) DCF's DCP&P and Division of Family and Community Partnerships, Office of Family Preservation & Reunification (DFCP, OFPR)
- c) Community human service agencies
- d) Local community-based service providers

13) **The data collection systems this program initiative requires:**

Awarded respondents will be expected to collect and report on participant demographics, individual-level client and program data, including, but not limited to contacts with families, assessment outcomes, referrals made, fidelity metrics, and other performance metrics.

Awarded respondents will be required to use Triple P's Automated Score and Reporting Application (ASRA), in addition to other DCF approved data collection and reporting systems. ASRA is an online program that scores Triple P assessment measures and provides a family profile and report.

Adaptations to existing Electronic Health Record systems may be required to meet the clinical and reporting expectations of Intercept®. In addition, awarded respondents may be required to use a DCF approved data collection and reporting system.

14) **The assessment and evaluation tools this program initiative requires:**

In accordance with the Triple P model, one or more family-centered assessments tools are completed with caregivers to determine areas of strength and to measure progress. These tools are included as part of the Triple P model.

- a) The Parenting Scale is a tool to measure dysfunctional discipline practices in parents of young children
- b) Strengths and Difficulties Questionnaire is a short, youth behavioral screening questionnaire
- c) Child Adjustment and Parenting Efficacy Scale is a parent-self report measure of child behavior problems, child emotional maladjustment and parent self-efficacy in managing specific child behaviors

**E. Outcomes - The below describes the evaluations, outcomes, information technology, data collection, and reporting required of respondents for this program.**

1) **The evaluations required for this program initiative:**

Awarded respondents are expected to engage in collaborative evaluation planning and evaluation implementation activities with DCF and consultants, as needed.

2) **The outcomes required of this program initiative:**

**a) Short/Mid Term Outcomes:**

The short and mid-term outcomes for Triple P are:

- Increased knowledge of parenting skills, including age-appropriate discipline and age-appropriate supervision
- Reduced use of coercive and punitive methods of disciplining children

- Increased use of positive parenting strategies in managing children's behavior
- Improved partner communication regarding parenting issues
- Improved child/parent relationships
- Reduced incidents of child abuse and neglect

**b) Long Term Outcomes:**

The primary long-term outcome of Triple P is the prevention of child abuse and neglect, specifically family stabilization and the prevention of out-of-home placements.

Additional outcomes include, but are not limited to:

- Increased competence in promoting healthy development and managing common child behavior problems & developmental issues
- Increased confidence in parenting skills
- Decreased behavior problems in children (for families experiencing difficult child behaviors)
- Reduced stress associated with raising children
- Decreased preventable accidents to youth in the care of their parent/caregiver
- Improved social connections

**3) Required use of databases:**

Awarded respondents will be required to use Triple P's Automated Score and Reporting Application (ASRA), in addition to other DCF approved data collection and reporting systems. Programs are expected to collect and report program data in the prescribed format.

**4) Reporting requirements:**

Awarded respondents will be expected to collect program data and provide monthly and/or quarterly reports to DCF as indicated.

Awarded respondents must ensure data is accurate, consistent, complete, reliable, and relevant when providing it to DCF through data systems.

Format of reports will be determined collaboratively with providers post-award.

Awarded respondents will also be expected to participate in Continuous Quality Improvement and monitoring activities as indicated by DCF and are expected to complete and submit quarterly expenditure reports (ROE) to their identified DCF Business Office and other reports specified in

Section VI - Post Award Requirements of this RFP, subsection C.  
Contractor Requirements for Reporting.

**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.

Enter the name of the region you will serve if this response results in an award:  
[Add drop down options for each RFP]

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 Documents Requested to be Submitted in Support of This Response*. **Each of these two (2) sections must be submitted as a separate PDF, which would be the second and third PDF submission in your response packet.**

**A. Organizational Documents Prerequisite to a DCF Contract Award Requested to be Submitted with this Response:**

**THIS WILL BE THE SECOND PDF SUBMISSION IN YOUR RESPONSE PACKET AND IS TO BE LABELED AS: PDF 2: SECTION III - DOCUMENTS REQUESTED TO BE SUBMITTED WITH THIS RESPONSE, SUBSECTION A. (ORGANIZATIONAL DOCUMENTS PREREQUISITE TO A DCF CONTRACT AWARD REQUESTED TO BE SUBMITTED WITH THIS RESPONSE.)**

- 1) A description of how your **Accounting System** has the capability to record financial transactions by funding source, to produce funding source documentation, authorization to support all expenditures, and timesheets which detail by funding source how the employee spent their time, invoices, etc.
- 2) **Affirmative Action Certificate:** Issued after the renewal form [AA302] is sent to Treasury with payment.  
Note: The AA302 is only applicable to new startup agencies and may only be submitted during Year One (1). Agencies previously contracted through DCF are required to submit an Affirmative Action Certificate.  
Website: [https://www.state.nj.us/treasury/contract\\_compliance/](https://www.state.nj.us/treasury/contract_compliance/)
- 3) **Agency By-Laws -or- Management Operating Agreement** if a Limited Liability Corporation (LLC) or Partnership
- 4) **Statement of Assurances** signed and dated.  
Website: <https://www.nj.gov/dcf/providers/notices/requests/#2>  
Form: <https://www.nj.gov/dcf/providers/notices/Statement.of.Assurance.doc>
- 5) Dated List of Names, Titles, Emails, Phone Numbers, Addresses and Terms of either the Board of Trustees of a nonprofit organization, **Board of Directors** of a corporation, the **Managing Partners** of a Limited Liability Corporation (LLC)/Partnership, or the **members** of the responsible governing body of a county or municipality. This is not applicable for sole proprietors.
- 6) For Profit: **NJ Business Registration Certificate** with the Division of Revenue (see instructions for applicability to your organization).  
Website: <https://www.nj.gov/treasury/revenue/busregcert.shtml>

- 7) **Business Associate Agreement/HIPAA** - Sign and date as the Business Associate.  
Form: [HIPAA Form 200-B](#)
- 8) **Your Organization's Conflict of Interest Policy** (not the DCF Conflict of Interest Policy).
- 9) **Corrective action plans, performance improvement plans, or reviews** in process or completed by DCF (inclusive of DCF Licensing, Divisions and Offices) or other State entities within the last two (2) years.

**If applicable**, a copy of the corrective action or performance improvement plan should be provided and any other pertinent information that will explain or clarify the respondent's current position under the corrective action plan and remedial measures implemented.

**If not applicable**, the respondent should complete, sign, date, and submit the Statement of Non-Applicability Regarding Corrective Action or Performance Improvement. Form:  
<https://www.nj.gov/dcf/providers/notices/requests/Statement-of-Non-Applicability-Regarding-Corrective-Action.pdf>

Note: DCF may consider all materials in our records concerning audits, reviews, performance improvement, or corrective active plans as part of the review process. DCF may disqualify and decline to forward for the review of the Evaluation Committee responses from those under corrective action plans in process with DCF or any other New Jersey state agency or authority.

- 10) **Certification Regarding Debarment**  
Form: <https://www.nj.gov/dcf/documents/contract/forms/Cert.Debarment.pdf>
- 11) **Disclosure of Investigations & Other Actions Involving Respondent**  
Form:  
<https://www.nj.gov/treasury/purchase/forms/DisclosureofInvestigations.pdf>
- 12) **Disclosure of Investment Activities in Iran**  
Form:  
<https://www.nj.gov/treasury/purchase/forms/DisclosureofInvestmentActivitie sinIran.pdf>
- 13) **Ownership Disclosure Form**  
\* THIS FORM MUST BE SUBMITTED WITH THE RESPONSE. A RESPONSE SHALL BE DEEMED NON-REPONSIVE UNLESS THIS FORM IS SUBMITTED WITH IT.  
Form:  
<https://www.nj.gov/treasury/purchase/forms/OwnershipDisclosure.pdf>

The Ownership Disclosure form must be completed and returned by non-profit and for-profit corporations, partnerships, and limited liability companies. The failure of a for-profit corporation, partnership, or limited liability company to complete the form prior to submitting it with the response shall result in rejection of the response.

14) **Disclosure of Prohibited Activities in Russia and Belarus**

Form:

<https://www.state.nj.us/treasury/administration/pdf/DisclosureofProhibitedActivitesinRussiaBelarus.pdf>

15) **Source Disclosure Form** (Disclosure of Source Location of Services Performed Outside the United States)

Form:

<http://www.state.nj.us/treasury/purchase/forms/SourceDisclosureCertificatio n.pdf>

16) **System for Award Management (SAM)** - Submit a printout showing the Unique Entity Identification Number, active status, and the expiration date. Available free of charge.

Website:

<https://sam.gov/content/home>

Helpline: 1-866-606-8220

17) **Certificate of Incorporation**

Website: <https://www.nj.gov/treasury/revenue>

18) **Notice of Standard Contract Requirements, Processes, and Policies** - Sign and date as the provider

Form: [Notice.of.Standard.Contract.Requirements.pdf \(nj.gov\)](#)

19) **Organizational Chart of Respondent** - Ensure chart includes the agency name, current date, and the allocation of personnel among each of the agency's DCF programs with their position titles and names.

20) **Chapter 271/Vendor Certification and Political Contribution Disclosure** [2006 Federal Accountability & Transparency Act (FFATA)]

Form: <https://www.nj.gov/treasury/purchase/forms/CertandDisc2706.pdf>

21) **Prevent Child Abuse New Jersey's (PCA-NJ) Safe-Child standards** - A brief description (no more than two (2) pages double spaced) of the ways in which respondent's operations (policies and/or practices) mirror these standards. The document should include the agency name & current date. The Standards are available at: ["Sexual Abuse Safe-Child Standards" \(state.nj.us\)](#)

22) **Standard Language Document (SLD)** (or Individual Provider Agreement or Department Agreement with another State Entity as designated by DCF.)

Sign and date as the provider

**SLD Form:**

<https://www.nj.gov/dcf/documents/contract/forms/StandardLanguage.doc>

**Individual Provider Agreement:**

<https://www.nj.gov/dcf/providers/contracting/forms/Individual.Provider.Agreement.pdf>

**State Entity Agreement:**

<https://www.nj.gov/dcf/providers/contracting/forms/DCF.Departmental.Agreement.with.Another.State.Entity.pdf>

23) **Tax Exempt Organization Certificate (ST-5) -or- IRS Determination Letter 501(c)(3)**

Website: <https://www.nj.gov/treasury/taxation/exemptintro.shtml>

24) **Tax Forms:** Submit a copy of the most recent full tax return.

- **Non-Profit:** Form 990 Return of Organization Exempt from Income Tax - or-
- **For Profit:** Form 1120 US Corporation Income Tax Return -or-
- **LLCs:** Applicable Tax Form and must delete/redact any SSN or personal identifying information

Note: Store subsequent tax returns on site for submission to DCF upon request.

25) **Trauma Informed and Cultural Inclusivity Practices** - Submit written policies describing the incorporation of these practices into your provision of services.

**B. Additional Documents Requested to be Submitted in Support of This Response**

**(THIS WILL BE THE THIRD PDF SUBMISSION IN YOUR RESPONSE PACKET AND IS TO BE LABELED AS: PDF 3: SECTION III – DOCUMENTS REQUESTED TO BE SUBMITTED WITH THIS RESPONSE, SUBSECTION B. ADDITIONAL DOCUMENTS REQUESTED TO BE SUBMITTED IN SUPPORT OF THIS RESPONSE.)**

1) A completed **Proposed Budget Form** documenting all costs associated with operating the program. If DCF is allowing funding requests for **start-up costs**, document these separately in the appropriate column of the Proposed Budget Form. This form is found at:

<https://www.nj.gov/dcf/providers/contracting/forms/>

- 2) A completed **Budget Narrative** is required for the proposed program that:
  - a) clearly articulates budget items, including a description of miscellaneous expenses or “other” items; b) describes how funding will be used to meet the project goals, responsibilities, and requirements; and c) references the costs associated with the completion of the project as entered in the Proposed Budget Form found at: <https://www.nj.gov/dcf/providers/contracting/forms/>. When DCF allows funding requests for start-up costs, include in the Budget Narrative a detailed summary of, and justification for, any one-time program implementation costs documented in the final column of the Proposed Budget Form.
- 3) An **Implementation Plan** for the program that includes a detailed timeline for implementing the proposed services, or some other detailed weekly description of your action steps in preparing to provide the services and to become fully operational.
- 4) Two (2) **Letter(s) of Support** from community organizations with which you already partner. Letters from any New Jersey State employees are prohibited.
- 5) **Proposed Respondent Organizational Chart** for the program services required by this response that includes the respondent’s name and the date created.

#### **Section IV - Respondent’s Narrative Responses**

Respondents who sign the above Statement of Acceptance to provide services in accordance with the *Required Performance and Staffing Deliverables* additionally must submit a narrative response to every question below. A response will be evaluated and scored as indicated on each of the following three Narrative Sections: A. Community and Organizational Fit; B. Organizational Capacity; and C. Organizational Supports. Respondents must organize the Narrative Response sections submitted in the same order as presented below and under each of the three corresponding title headings.

There is a 20 page limitation for the combined three (3) narrative sections of the response. The narrative should be double-spaced with margins of one (1) inch on the top and bottom and one (1) inch on the left and right. Narrative Sections of the responses should be double-spaced with margins of one (1) inch on the top and bottom and one (1) inch on the left and right. The font shall be no smaller than twelve (12) points in Arial or Times New Roman.

**(ALL THREE (3) OF THESE SECTIONS MUST BE SUBMITTED AS A SINGLE PDF DOCUMENT, WHICH WOULD BE THE FOURTH PDF SUBMISSION IN YOUR RESPONSE PACKET AND IS TO BE LABELED AS: PDF 4 – SECTION IV: RESPONDENT’S NARRATIVE RESPONSES, SUBSECTIONS A. COMMUNITY AND ORGANIZATIONAL FIT; B. ORGANIZATIONAL CAPACITY; AND C. ORGANIZATIONAL SUPPORTS.)**

**A. Community and Organizational Fit (35 Points)**

*Community and Organizational fit refers to respondent’s alignment with the specified community and state priorities, family and community values, culture and history, and other interventions and initiatives.*

- 1) Describe how your mission is aligned with what we hope to accomplish with this program. Tell us about how you make your values "real" for the people this program is intended to support.
- 2) Describe how this initiative fits with existing initiatives/programming in your organization.
- 3) Describe your agency's experience, if any, implementing evidence-based services aimed at promoting child safety, parenting skills, problem solving skills, building social connections, and accessing community supports and local resources. Include in your response successes related to your agency meeting evidence-based service delivery and expectations. Describe if these services were provided to DCF-involved families. Data should be used to demonstrate your success whenever it is available.
- 4) Describe your organization’s experiences in serving diverse communities.
- 5) Provide any data your agency has that demonstrates your knowledge of the dynamics and diversity within the community you are proposing to serve. Include, in narrative or table format, supporting data about the race, ethnicity, culture and languages of the communities you are seeking to serve. Community needs data should reflect at minimum, county-level data.

Utilize local resources and/or the following data sources to complete this section:

- U.S. Census: <https://www.census.gov/quickfacts/fact/table/US/PST045222>
- NJ Dept. of Health: <https://www-doh.state.nj.us/doh-shad/home/Welcome.html>
- NJ Child Welfare Data Hub: <https://njchilddata.rutgers.edu/#home>
- NJ Kids Count (2023) <https://assets.aecf.org/m/resourcedoc/aecf-2023kidscountdatabook-2023.pdf>

Applicants are encouraged to draw from other recent county/local needs assessments and reports, e.g., Human Services Advisory Council (HSAC).

- 6) From your agency's perspective, and/or from your work with caregivers and families, where are their gaps in services? Describe any anticipated challenges your organization may encounter in the community you are proposing to serve and your organization's experience in meeting and overcoming similar challenges in other service communities (please use specific examples).
- 7) Specify the catchment area for which your organization is applying. Please describe the level of current presence your agency has in the proposed catchment areas. If your agency does not currently have a presence, detail your plans for integrating into the community within these areas.
- 8) Describe your organization's experience with addressing inequities and racism.
  - a) How do these efforts address inequities and racism? How do you support staff in addressing inequities and racism?
  - b) Identify experiences with providing accessible culturally responsive services and supports.
  - c) Describe the relationships and involvement your organization has with the community to be served.

## **B. Organizational Capacity (35 Points)**

*Organizational Capacity refers to the respondent's ability to meet and sustain the specified minimum requirements financially and structurally.*

- 1) Describe how the organization's leadership is knowledgeable about and in support of this initiative. Include how the requirements of this initiative will be met through your governance and management structure, including the roles of senior executives and governing (Board of Directors, Managing Partners, or the members of the responsible governing body of a county or municipality). Do leader have the diverse skills and perspectives representative of the community being served?
- 2) Staff Recruitment and Retention: Describe the proposed structure of the Triple P Program and the implementation and staffing plan (i.e., qualifications of existing staff, use of consultants, and use of volunteers). The staffing plan should include the following:
  - a) A detailed description of how staff will be recruited and selected. Include your agency's plan to recruit a diverse staff, including bi/multi-lingual staff, who reflect the racial and ethnic composition of the communities you plan to serve;

- b) A description of how the staffing plan will be appropriate to the language, age, gender, sexual orientation, disability, and ethnic/racial/cultural factors of the target population. Include data on your agency's ability to hire and retain multi-cultural/multi-lingual staff;
  - c) A staff retention plan detailing measures taken to reduce staff turnover. The plan should describe how staff hiring and retention has been achieved to maintain contract staffing levels or how challenges in recruitment and turnover have been addressed; and
  - d) A description of how the program will continue to provide services that are timely, effective, and true to the models when regularly scheduled staff experience sickness, training, vacancies, leaves of absence, etc.
- 3) Describe your agency's prior experience collecting and reporting data for program administration, continuous quality improvement (CQI), and for reporting on program progress. Include your agency's CQI processes, and examples of your agency's success meeting the data and reporting requirements of funders. Describe how this experience positions your organization to meet the data and reporting requirements of this RFP.
- 4) What administrative practices must be developed and/or refined to support the program? What administrative policies and procedures must be adjusted to support the work of the staff and others to implement the program?
- 5) DCF and each awarded respondent will collaborate on marketing strategies and development of effective referral pathways for the Triple P program.
- a. Provide a detailed and specific description of your agency's history and success of partnering with both traditional and non-traditional community services, institutions that support families, particularly families involved with child welfare, and services critical in strengthening the family system such as, mental, or behavioral health, substance use treatment, services to improve family functioning and concrete supports.
  - b. Describe how you will engage the target population and maintain their participation in services in accordance with service recipients' needs.
- 6) Describe the strategies your agency will implement to ensure that agency policies, procedures, and service delivery practices promote equitable access and minimize barriers to service that include, at a minimum, the following: safety considerations, language, transportation, hours of operation, office locations, signage, and physical accessibility options for those served.

### **C. Organizational Supports (30 Points)**

*Organizational Supports refers to the respondent's access to Expert Assistance, Staffing, Training, Coaching & Supervision.*

- 1) The Triple P model has defined requirements around training, coaching and supervision. Describe your organization's experience with adapting training and supervision practices to achieve model fidelity with an evidence based model, or other externally imposed requirements.
- 2) Describe how this program will be supported by your use of the data after it is analyzed and reported to evaluate program performance. If your organization has experience with evidence-based programs, how have you used data to ascertain fidelity to evidence-based practices?
- 3) Describe the role the families you serve play in your organization's quality assurance and performance improvement processes.
- 4) Describe how your organization supports safety, wellness, and mental health of its staff, such as providing access to online mental health and wellness resources, establishing regular programming focused on common issues, or providing mental health counselors for employees in need of assistance.

## **Section V - Response Screening and Review Process**

### **A. Response Screening for Eligibility, Conformity, and Completeness:**

DCF will conduct a preliminary review of each response to determine whether it is eligible for evaluation or immediate rejection in accordance with the following criteria:

- 1) The response was received prior to the stated deadline.
- 2) The Statement of Acceptance is signed by the person with the necessary authority to execute the agreement.
- 3) The response is complete in its entirety, including all documents requested to be submitted in support of the response listed in Section III. A. and the organizational documents prerequisite to a contract award listed in Section III. B. If any of these documents are missing from the response, DCF may provide an email notice to the respondent after the response is submitted. Respondents will have up to five (5) business days after notice from DCF

to provide the missing documentation, except those documents, such as the Ownership Disclosure Form, required by the applicable law to be submitted with the response. If the documents are not then timely submitted in response to that notice, the response may be rejected as non-responsive.

- 4) The response conforms to the specifications set forth in the RFP.

Failure to meet the criteria outlined above, constitutes grounds for rejection of the response.

Responses meeting the initial screening requirements of the RFP will be distributed to the Evaluation Committee for its review and recommendations.

## **B. Response Review Process**

DCF convenes an Evaluation Committee in accordance with existing policy to review all responses. All voting and advisory reviewers complete a conflict-of-interest form. Those individuals with conflicts or with the appearance of a conflict are disqualified from participation in the review process. The voting members of the Evaluation Committee will review responses, deliberate as a group, and recommend final funding decisions.

DCF reserves the right to reject any response when circumstances indicate that it is in its best interest to do so. DCF's best interests in this context include, but are not limited to, the State's loss of funding, inability of the respondent to provide adequate services, applicant's lack of good standing with a State Department, and an indication or allegation of misrepresentation of information or non-compliance with any State contracts, policies and procedures, or State or Federal laws and regulations.

A response to an RFP may result in a contract award if the Evaluation Committee concludes the respondent will comply with all requirements as demonstrated by submitting the specified documentation and signing the Statement of Acceptance. All respondents are required to provide all the requested documentation, to confirm their ability to meet or exceed all the compulsory requirements, to provide services consistent with the scope of services delineated, and to comply with the service implementation and payment processes described. In addition, a response to an RFP will be evaluated and scored by the Evaluation Committee based on the quality, completeness, and accuracy of each of the three Narrative Sections: A. Community and Organizational Fit; B. Organizational Capacity; and C. Organizational Supports. A response earning the highest score may result in a contract award. The narrative must be organized appropriately and address the key concepts outlined in the RFP. The quality and completeness of the required documents may impact the score of the Narrative Sections to which they relate.

All respondents will be notified in writing of DCF's intent to award a contract.

### **C. Appeals**

An appeal of a determination to reject a response as incomplete or unresponsive may be considered only to dispute whether the facts of a particular case are sufficient to meet the requirements for rejection and not to dispute the existence of any of the requirements.

An appeal of a determination not to award contract funding may be considered only if it is alleged that DCF has violated a statutory or regulatory provision in its review and evaluation process.

Pursuant to DCF policy P1.08, such appeals must be submitted in writing within ten (10) business days following the date on the Notice of Disqualification or Notice of Regret letter by emailing it to [DCF.AHUAppeals@dcf.nj.gov](mailto:DCF.AHUAppeals@dcf.nj.gov) and/or mailing it to:

Department of Children and Families  
Office of Legal Affairs  
Contract Appeals  
50 East State Street 4th Floor  
Trenton NJ 08625

## **Section VI - Post Award Requirements**

### **A. General Conditions of Contract Execution:**

Respondents who receive notice of DCF's intent to award them a contract will be referred to the DCF Office of Contract Administration (OCA). As a condition of executing a contract, awarded respondents must resolve with OCA any issues raised in the award letter or otherwise found to be need of clarification. If DCF finds after sending a notice of intent to award that the awarded respondent is incapable of providing the services or has misrepresented any material fact or its ability to manage the program, the award may not proceed to contract execution. DCF determines the effective date of any contract, which is the date compensable services may begin.

An awarded respondent shall be required to comply with the terms and conditions of DCFs' contracting rules, regulations, and policies as set forth in the Standard Language Document, the Notice of Standard DCF Contract Requirements, the Contract Reimbursement Manual, and the Contract Policy and Information Manual. Awarded respondents may review these items via the

Internet at: [www.nj.gov/dcf/providers/contracting/manuals](http://www.nj.gov/dcf/providers/contracting/manuals)  
<https://www.state.nj.us/dcf/providers/contracting/forms/>.

Awarded respondents also shall comply with all applicable State and Federal laws and statutes, assurances, certifications, and regulations regarding funding.

**B. Organizational Documents Prerequisite to Contract Execution to be Submitted After Notice of Award:**

The contract administrator assigned to initiate and administer an awarded respondent's contract will require the awarded respondent to submit the following documents prior to finalizing the contract for funding:

**Post-Award Documents Prerequisite to the Execution of All Contracts**

- 1) **Acknowledgement of Receipt** of NJ State Policy and Procedures:  
Return the receipt to DCF Office of EEO/AA.  
Form: <https://www.nj.gov/dcf/documents/contract/forms/DiscriminationAcknowledgmentReceipt.pdf>  
Policy: <https://www.nj.gov/dcf/documents/contract/forms/AntiDiscriminationPolicy.pdf>
- 2) **Annual Report to Secretary of State** proof of filing.  
Website: <https://www.njportal.com/dor/annualreports>
- 3) **Attestation Form for N.J.S.A. 30:1-1.2b** - Complete, sign and date as the provider.  
Form: <https://www.nj.gov/dcf/providers/contracting/forms/Attestation-of-DCF-Contractors-Required-by-N.J.S.A.-301-1.2b.pdf>  
Note: Read each statement carefully and do not check all options. Pay attention to the 'or-either-and' statements. A signature and date are required.
- 4) **Employee Fidelity Bond Certificate** (commercial blanket bond - crime/theft/dishonest acts)

Bond must be at least 15% of the full dollar amount of all NJ State contracts for the current year when the combined dollar amount exceeds \$50,000. The \$50,000 threshold includes fee-for-service reimbursements made via NJ FamilyCare/Medicaid. If not applicable, respondent must submit a signed/dated written statement on agency letterhead stating they will not exceed \$50,000 in combined NJ State contracts for the current year.

Email To: [OfficeOfContractAdministration@dcf.nj.gov](mailto:OfficeOfContractAdministration@dcf.nj.gov) and copy your contract administrator

Policy:[https://www.nj.gov/dcf/documents/contract/manuals/CPIM\\_p8\\_insurance.pdf](https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_insurance.pdf)

5) **Liability Insurance** (Declaration Page/Malpractice Insurance/Automobile Liability Insurance)

Important: Policy must show:

- a. DCF as the certificate holder – NJDCF 50 E State Street, Floor 3, P.O. Box 717, Trenton, NJ 08625
- b. Language Stating DCF is “an additional insured”
- c. Commercial Liability Minimum Limits of \$1,000,000 an occurrence, \$3,000,000 aggregate
- d. Commercial Automobile Liability Insurance written to cover cars, vans or trucks, limits of liability for bodily injury and property damage should not be less than \$2,000,000/occurrence.

Email To: [OfficeOfContractAdministration@dcf.nj.gov](mailto:OfficeOfContractAdministration@dcf.nj.gov) and copy your contract administrator

Policy:[https://www.nj.gov/dcf/documents/contract/manuals/CPIM\\_p8\\_insurance.pdf](https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_insurance.pdf)

6) Document showing **NJSTART Vendor ID Number** (NJ's eProcurement System) Website: <https://www.njstart.gov/> Helpline: 609-341-3500 or - [njstart@treas.nj.gov](mailto:njstart@treas.nj.gov)

7) **Standardized Board Resolution Form**

Form:[https://www.nj.gov/dcf/documents/contract/manuals/CPIM\\_p1\\_board.pdf](https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p1_board.pdf)

8) **Program Organizational Chart**

Should include agency name & current date

**Post-Award Documents Prerequisite to the Execution of This Specific Contract**

- 1) **Copy of Accreditation** (Joint Commission, COA, CARF, as applicable) Cancellation of accreditation must be reported Immediately.
- 2) **Annex A** – Sections 1.1, 1.3 (& 2.4 if not a CSOC OOH Contract).  
Note: Contract Administrators will provide any Annex A forms customized for programs when they are not available on the DCF public website.  
Website: <https://www.nj.gov/dcf/providers/contracting/forms>
- 3) **Annex B Budget Form** – Include Signed Cover Sheet  
Form: <https://www.nj.gov/dcf/documents/contract/forms/AnnexB.xls>  
Note: The Annex B Expense Summary Form is auto populated. Begin data input on Personnel Detail Tab.

Website: <https://www.nj.gov/dcf/providers/contracting/forms>

4) **Certification Regarding Exemptions**

Website: <https://www.nj.gov/dcf/providers/contracting/forms>

5) **Certification Regarding Reporting**

Website: <https://www.nj.gov/dcf/providers/contracting/forms>

6) **Equipment Inventory** (of items purchased with DCF funds) Policy: [https://www.nj.gov/dcf/documents/contract/manuals/CPIM\\_p4\\_equipment.pdf](https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p4_equipment.pdf)

7) **Schedule of Estimated Claims** (SEC) - signed

Form: Provided by contract administrator when applicable.

8) **Fixed Rate Information Summary** – signed

Form: Provided by contract administrator when applicable.

9) **Professional Licenses and/or Certificates** currently effective related to job responsibilities.

10) **Subcontracts/Consultant Agreements/ Memorandum of Understanding** related to this contract for DCF review and approval.

### C. Reporting Requirements for Awarded Respondents

Awarded respondents are required to produce the following reports in accordance with the criteria set forth below, in addition to the reporting requirements specified above in this RFP related to the delivery and success of the program services.

- 1) **Audit or Financial Statement** (Certified by accountant or accounting firm.)  
A copy of the Audit must be submitted to DCF by all agencies expending over \$100,000 in combined federal/state awards/contracts if cognizant with any department of the State of NJ. As noted in the Audit DCF Policy CON -I-A-7-7.6.2007 Audit Requirements, section 3.13 of the Standard Language Document, DCF also may request at any time in its sole discretion an audit/financial statement from agencies expending under \$100,000 that are not cognizant with any department of the State of NJ. Note: Document should include copies of worksheets used to reconcile the department's Report of Expenditures (ROE) to the audited financial statements. (DCF Policy CON -I-A-7-7.6.2007 Audit Requirements)

Awarded respondents are to submit the most recent audit or financial statement with the initial contract and then each subsequent one within 9 months of the end of each fiscal year.

Policy:

[https://www.nj.gov/dcf/documents/contract/manuals/CPIM\\_p7\\_audit.pdf](https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p7_audit.pdf)

2) Photocopies of Licensed Public Accountant firm's **license to practice**, and most recent **external quality control review** to be submitted with the NPLA.

**3) Reports of Expenditures (ROE):**

A. Scheduled Payments Contract Component: A quarterly ROE is to be submitted during the contract year 15 calendar days after the end of each fiscal quarter, and a Final ROE is to be submitted 120 calendar days after the end of the fiscal year. Alternatively, an ROE is to be submitted in accordance with any separate DCF directive to file ROEs at other intervals for specific contracted programs.

The format for the ROE must match that of the Annex B budget form.

Form: <https://nj.gov/dcf/providers/contracting/forms/>

Note: An ROE must be prepared in accordance with the governing cost principles set forth in the DCF Contract Reimbursement Manual (CRM Section 6). [Microsoft Word - SECTION 6 - Expenditure Reporting.doc \(nj.gov\)](#)

B. Fee for Service Contract Component: Not Required.

**4) Level of Service (LOS) Reports**

Enter the cited DCF Standard Template Form for each month the number of youth, adults, and families served and ages of those receiving services, and the hours/days, county locations, etc. of those services, or record this data into another form, survey, or database that DCF agrees can serve to track LOS for the contracted program.

Website: <https://www.nj.gov/dcf/providers/contracting/forms/>

**5) Significant Events Reporting:**

Timely reports as events occur to include, but not be limited to, changes to: (1) Organizational Structure or Name [DCF.P1.09-2007]; (2) Executive and/or Program Leadership; (3) Names, titles, terms and addresses, of the Board of Directors; (4) Clinical Staff; (5) Subcontract/consultant agreements and the development or execution of new ones; (6) a FEIN; (7) Corporate Address; (8) Program Closures; (9) Program Site locations; (10) Site Accreditations (TJC,COA,CARF); (11) the contents of the submitted Standard Board Resolution Form; (12) Debarment and SAM status; and (13) the existence and status of Corrective Action Plans, Audits or Reviews by DCF (inclusive of DCF Licensing, Divisions and Offices) or other State entities.

Note: Awarded respondents are under a continuing obligation, through the completion of any contract with the State of NJ, to renew expired forms filed

with the NJ Department of the Treasury and to notify Treasury in writing of any changes to the information initially entered on these forms regarding: Investment Activities in Iran as per P.L. 2012, C.25; Investment Activities in Russia or Belarus as per P.L. P.L.2022, c.3; Disclosures of Investigations of the Vendor; Ownership Disclosure if for profit; Service Location Source Disclosure as per P. L. 2005, C.92; Political Contribution Disclosure as per P.L. 2005, C.271; and Report of Charitable Organizations.

Policy:

[https://nj.gov/dcf/documents/contract/manuals/CPIM\\_p1\\_events.pdf](https://nj.gov/dcf/documents/contract/manuals/CPIM_p1_events.pdf)

Website:

<https://www.state.nj.us/treasury/purchase/forms.shtml>

**D. Requirements for Awarded Respondents to Store Their Own Organizational Documents on Site to be Submitted to DCF Only Upon Request**

- 1) Affirmative Action Policy/Plan
- 2) Copy of Most Recently Approved Board Minutes
- 3) Books, documents, papers, and records which are directly pertinent to this contract for the purposes of making audits, examinations, excerpts, and transcriptions, and to be produced for DCF upon request.
- 4) Personnel Manual & Employee Handbook (include staff job descriptions)
- 5) Awarded Respondent's Procurement Policy