



**Division of Family and Community Partnerships**

**2023 RFP UHV Universal Home Visitation**

**QUESTIONS AND ANSWERS**

Technical inquiries about forms and other documents may be requested at any time at [dcf.askrfp@dcf.nj.gov](mailto:dcf.askrfp@dcf.nj.gov)

**Please Note**

1. Registered AOR forms must be received by **June 21, 2023**
2. All responses must be submitted ONLINE by **June 28, 2023 (by 12:00 NOON)**

DCF has divided the State into eleven (11) catchment areas. With this first RFP, DCF seeks to identify providers of UHV services in five (5) of the eleven (11) catchment areas.

<b>Catchment areas included in this RFP</b>	<b>Counties</b>
1	Camden, Gloucester, Salem
2	Burlington, Atlantic, Cape May, Cumberland
7	Essex
10	Middlesex
11	Monmouth, Mercer

Respondents may apply for up to 5 catchment areas during this procurement. If applying for more than one, a **separate response per catchment area is required**.

Each catchment area will be awarded to one respondent.

There is no limit to the number of catchment areas that may be awarded to one respondent.

- 1. Section C. Funding Information on page 4 of the Universal Home Visitation RFP that states “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,”**

**How would potential awardees be expected to approach raises for Union nurses who require annual increases?**

This statement refers to the fact that legislative appropriations/allocations are the basis for DCF’s ability to increase the funds it dedicates to its contracts. The funds available for contracts cannot otherwise increase. Respondents are expected to prepare annual budgets using the funds set forth in their contracts for that year to meet their obligations.

- 2. Pg 27: Minimum Staffing Requirements**

- Please clarify the educational / certification level for the Nurses**
- Please clarify the duties of the Program Support Specialist**

Nurses are required to be Registered Nurses or Advanced Practice Nurses with licenses to practice in the State of New Jersey. Additional information on requirements for licensure in the State of New Jersey can be found on the Division of Consumer Affairs website.

<https://www.njconsumeraffairs.gov/nur/pages/applications.aspx>

Responsibilities for the Program Support Specialist are outlined in the table on page 26 and 27 of the RFP. They include:

- Outreaches and enrolls families, including assistance in scheduling of nurse visits, as needed.
- Maintains materials necessary for the nursing team to conduct visits, such as educational materials for families.
- In collaboration with Connecting NJ, executes post visit call process with clients served.

DCF is currently working on outreach and referral mechanisms and plans to include input from awarded respondents as these processes are finalized. The materials required for the visit are part of the established model and will be shared with the awarded respondents.

The post visit call process is performed after the nursing visit(s) are complete and involves the collection of information regarding satisfaction with the services provided, as well as following up on referrals made during the home visit process.

**3. Page 11 (chart), Catchment Area 11 Funding: Mercer and Monmouth Counties**

**Is there a reason why there is nothing budgeted for Supplemental Translation Support for Mercer County in SFY 24 through SFY 28?**

Supplemental translation support is provided for only those counties that have higher than average translation needs, based on US Census data. Average translation needs are accounted for in the funds awarded. Mercer County did not meet the criteria for supplemental translation support.

**4. Page 26 (chart), Page 27 - Minimum Staffing Requirements**

**Specific to the Program Support Specialist (PSS), has it been determined how the PSS will recruit families when they are responsible for multiple counties in a catchment area and/or if there are multiple hospitals which they will be recruiting families from to assure that appointments are made for home visits in a timely manner to assure visits take place within the time frame outlined in this RFP?**

DCF is currently working on outreach and referral mechanisms and plans to include input from awarded respondents as these processes are finalized. In the traditional FCI model, recruitment is done at the bedside in the hospital when families give birth. DCF is focusing on educating families and providers during the prenatal period, to allow for recruitment of more families earlier in a pregnancy, which we believe will be a more efficient way to enroll families. In addition, as awarded respondents are authorized to expand into additional counties, they will have an opportunity to hire additional PSS staff with the additional funds provided for the expansion county.

**5. Page 39, Question 21**

- **Can you clarify the content of the organizational chart that you are requesting?**
- **Do you want an organizational chart of the entire organization which would include all programs regardless of funder which would illustrate where this program UHV would sit as well as chart that only includes DCF programs with the allocation of personnel, titles, and names?**

Yes. The request for an Organizational Chart for the respondent on page 39 of the RFP refers to a chart that includes the respondent's agency name, current date, and the allocation of personnel among each of the agency's DCF programs with their position titles and names. This same

chart also may include all respondent programs regardless of funder which would illustrate where the UHV program would sit.

In addition, on page 41 the request for a Proposed Respondent Organizational Chart on page 41 of the RFP refers to a second chart displaying the planned allocation of personnel by title for just the UHV program that includes the respondent's name and the date created.

- **Does allocation of personnel mean percentage of time that employee spends on the grant, i.e., 1.0 FTE vs. 0.5 FTE, etc.?**

Yes. The allocation refers to the percentage of time an actual or planned employee in a specified position title will dedicate to the program.

- 6. Section ID, page 12: On the bottom of page 12, it states that "Where required, all respondents much hold current State licenses."**

**In addition to hiring appropriate licenses held by nursing staff working on the project, can you please advise what organizational licenses would be required? Our organization currently provides nursing services at transitional residences and group homes funded and overseen by NJ DMHAS and NJ DDD.**

**Is there additional licensure that would be needed for us to be able to deliver services under this initiative?**

There will not be additional licensure required at the agency level to deliver services under this initiative, however, awarded respondents are required to adhere to the planning, operational, and quality process dictated by DCF and the model, and to ensure that all staff receive initial and ongoing training required by DCF and the model.

- 7. Section IID, p25: For the medical director, are there any additional requirements related to specialty?**

Preferably the medical director will have experience in maternal (OB-GYN, midwifery) care, neonatal and/or pediatric care, labor and delivery, adult mental health, or a closely related field. Additionally, unique knowledge and/or ties to the community being served should also be considered.

- 8. Section IIIB, page 40-41: Are leased vehicle costs allowable under this grant?**

Yes.

**9. Section IIIB, page 40-41: Are vehicle purchases allowable under this grant?**

Yes.

**10. Section IIIB, page 40-41: Where program staff turnover during the grant period, how are costs to train staff on FCI model funded?**

Training will continue to be provided periodically after program launch to address staff additions and/or turnover at no cost to awarded respondents. The line item for “FCI Training” in the funding tables provided in the RFP reflects funds provided during the startup period to cover the cost of staff participation in training activities. The training itself is provided at no cost to the awarded respondents. Once services begin, the cost of staff time for those participating in training should be part of normal personnel costs of the awarded respondent’s budget.

**11. Section II, Part D (9) Staffing Requirements (Page 25)**

**Local Medical Director Education/Credentials/Certificates states “Graduation from an accredited college or university with a Doctorate in Medicine (M.D.) or Doctorate in Osteopathic Medicine (D.O.) ...”**

- **Does graduation from an international MD program which is accredited by the Independent Agency for Accreditation and Rating (IAAR), whose accreditation is recognized by the World Federation of Medical Education (WFME), the European Quality Assurance Register in Higher Education (EQAR) and the European Association for Quality Assurance in Higher Education (ENQA), and whose graduates are eligible for ECFMG certification meet the criteria?**
- **Must the Local Medical Director be licensed? Page 12 states that “where required, all respondents must hold current State licenses” but page 25 does not state that the Medical Director must be licensed.**

The Medical Director must be licensed in the State of New Jersey or eligible for licensure and willing to pursue licensure.

**12. Section C Funding Information (page 5-11)**

**“If a respondent would like to access these contract funds, a justification and detailed summary of the anticipated costs required for program operations for the catchment area must be entered for the first twelve (12) months of the five-year contract term (FY24) into the Proposed Budget Form...”**

- **Should the Proposed Budget Form cover the period of January 1, 2024-December 31, 2024 (and therefore the last 2 quarters of SFY24 and first two quarters of SFY25?)**

The Proposed Budget Form to be submitted with the response should cover the period of July 1, 2023, through June 30, 2024. In addition to the operating costs of providing services from January 1, 2024 through June 30, 2024, all anticipated start-up costs incurred after the start of the funding period on July 1, 2023, must be included in the “Start-up Funding” column on the Proposed Budget Form.

The Proposed Budget is not the actual budget that an awarded respondent will submit for DCF approval as part of the contract. As noted at the bottom of page 5 of the RFP:

*If awarded a contract, the awardee then will be required to 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 awardee shall prepare and submit an annual budget each fiscal year for each catchment area awarded. Each budget will require a Reports of Expenditures and be subject to the DCF contract close out process.*

Once awarded a contract, the awarded respondent will submit for approval its first Annex B Budget for the period of July 1, 2023, through June 30, 2024. In addition to the operating costs of providing services from January 1, 2024 through June 30, 2024, all start-up costs incurred after the start of the funding period on July 1, 2023, must be included in this Annex B Budget.

- **Are the funding amounts for each catchment area shown in tables labeled SFY24 for a six- or twelve-month period? (1/1/24-6/30/24 or 1/1/24-12/31/24?)**

The amounts listed are for SFY2024 (7/1/2023- 6/30/2024) but assumes that services to families will not begin until January 2024.

In your response, submit one (1) proposed budget that cannot exceed the amount allotted only for the SFY24 Catchment Area Funding the county for which you are applying, found in Section C, Funding Information, in a chart with a heading “The following funding is allotted for [County Name] for SFY24”.

The following categories of funds are expected to be spent primarily in the startup period (7/1/23-12/31/23):

- FCI Academy/Preparation for Service
- Non-Personnel Startup Costs
- FCI Training
- Salesforce Licenses (licenses fee is annual fee)

The following categories of funds are expected to be spent primarily once services to families begin (1/1/24-6/30/24):

- Supplemental Operating costs for Initial Ramp Up Period
- Operations Costs
- Supplemental Translation Support (if applicable)