



Office on Mental Health

Core Service Agency of Harford County, Inc.

REQUEST FOR PROPOSAL (RFP)

IN-HOME RESPITE SERVICES

Issued by the Office on Mental Health/Core Service Agency (CSA) of Harford County 1/8/2020

Project Title: In-home/Community-based Respite Care Services

RFP Original Issue Date: January 8, 2020

Period of Performance: The contract will be awarded for July 1, 2020 through June 30, 2021, with the possibility of additional one-year extensions through June 30, 2025, based on satisfactory performance by the provider and continued availability of funds.

Proposal Due Date: February 28, 2020- No later than 3:00 p.m.

Point of Contact for this RFP:

Angela Gray
2231 Conowingo Road, Suite A
Bel Air, MD 21015
410-803-8726
agray@harfordmentalhealth.org

Mail or Deliver Completed Proposal to:

Office on Mental Health/ Core Service Agency of Harford County, Inc.
Attention: Angela Gray
2231 Conowingo Road, Suite A
Bel Air, MD 21015

Please submit an electronic version of the proposal via email to:

Angela Gray agray@harfordmentalhealth.org

Anticipated Notification Date: On or before 4/1/20

INTRODUCTION:

The Office on Mental Health/Core Service Agency of Harford County, Inc. (OMH/CSA) is seeking proposals from a licensed agency to provide in-home/community-based respite care services to children residing in Harford, Baltimore and Cecil Counties. The services will be performed by qualified individuals in order to relieve the family or informal caregiver from the demands of caring for a child with special needs. This temporary care provides a period of rest and renewal for the family while contributing to maintaining the child in the community, enabling the child to live in a family or family-like environment, and assisting the child in achieving a greater level of independence.

CONTRACT DELIVERABLES:

Provide in-home/community-based respite care services to support family members and caregivers of children and adolescents 0-18 years old. Work with individuals with an active Behavioral Health diagnosis assigned by the Diagnostic and Statistical Manual (DSM) and meet Medical Assistance Eligibility. Children receiving respite services must reside at home with a family member or caregiver. Services must be provided by a vendor approved under COMAR 10.63.01, 10.63.02, 10.63.03 and COMAR 10.09.89.

- 1) Ensure an aggregated total of 2,380 hours of in-home/community-based respite care is provided to at least 50 families.
- 2) Participate with the Behavioral Health Administration (BHA) in the development of an annual impact statement on the effectiveness of the program in concert with all other Core Service Agencies (CSA), Local Behavioral Health Authorities (LBHA), and respite providers.
- 3) Participate in monthly respite committee meetings chaired by the BHA.
- 4) Complete and submit monthly reports on or before the due date to the Harford County CSA.
- 5) Complete and submit a semi-annual report on or before the due date to the Harford County CSA.
- 6) Secure and maintain any and all applicable Licenses and Certifications as required by COMAR to provide Respite services.
- 7) Contact at least 80% of the referrals within 5 working days of receipt.
- 8) Maintain a Home-Based Respite Client Handbook.
- 9) Provide appropriate Maryland Department of Health (MDH) budget forms and information as requested within the timelines provided.

AWARD AMOUNT:

A total of \$114,220.00 is available for FY 2021. This grant is effective July 1, 2020-June 30, 2021. Please note, under the Human Services Agreement Manual, contracts totaling over \$100,00 will require an independent audit of those grant funds received. The agency will need to furnish this audit to the OMH/CSA annually.

PROPOSALS

Proposal Format

1) Proposal narratives submitted in response to this request shall not exceed 10, typed, double-sided, single-spaced pages in Times New Roman size 12 font, and should address the criteria specified above. Proposals should include a program budget using MDH Forms 432A thru 432H. The MDH Forms 432 A thru 432 H can be downloaded at www.harfordmentalhealth.org. under News and Events. Budget pages MDH Forms 432A thru 432H and attachments, such as letter of reference, are not include in the 10-page maximum.

2) All interested and qualified providers may submit a proposal that responds to the aforementioned program requirements. Providers are asked to submit one electronic copy to agray@harfordmentalhealth.org and mail/deliver three (3) hard copies of their proposal to the Office on Mental Health/Core Service Agency located at 2231 Conowingo Road, Suite A, Bel Air, MD 21015.

The deadline for submission of proposals is February 28, 2020 at 3:00 PM. Late proposals will be returned unopened.

Proposal to Provide In-Home/Community Based Respite Services Outline (Please follow this format):

- 1. Transmittal letter:** The letter should be prepared on the provider's business stationary. The letter must be signed by an individual who is authorized to bind the agency to all statements contained in the proposal.
- 2. Organizational and Management Summary:** Proposal should contain a description of the agency and its qualifications to provide the requested services. Proposal should include organizational history, related experience, and provide the names and credentials of staff assigned to manage the respite program.
- 3. Related Experience:** The agency should provide information on their experience with providing respite services, including a description of similar services provided in other jurisdictions. Prior positive working experiences and collaborative relationships should also be included in this section.
- 4. Timeline for Implementation:** Proposal should contain a brief description on how the agency will commit adequate clinical time to start July 1, 2020.
- 5. Proposed Services/Contract Deliverables:** This section should outline how the agency intends to address the contract deliverables listed on page 3. This should include a sound and workable plan of action to provide 2,380 hours of care to at least 50 families.
- 6. Additional Information:** This section, which is optional, should include any information the agency deems relevant to this procurement.
- 7. References:** The agency must supply a minimum of two current letters of reference to support their proposal.
- 8. Please attach a copy of Respite Care licenses.**