

1. What is the anticipated number of youth/families to be served by county for staffing estimates?

**Answer-**Minimum of 30 families at a time

2. Is DYS requiring a particular degree and/or credential for those administering FFT?

**Answer-**This decision should be based on the FFT model in consultation with the FFT parent company... One such national provider recommends Master's level clinicians.

3. Our understanding of the FFT model is that trained supervisors can support up to eight clinicians. Full-time clinicians work with caseloads averaging 10-12 active cases at any given time. FFT requires an average of 12 sessions over a three to four-month period. Clinicians spend an average of 2.5 - 3 hours per family per week for face-to-face contact, collateral services, travel, case planning, and documentation. Does this align with DYS' expectation for the program?

**Answer-** Yes-that is correct.

4. How many providers does DYS plan to award to?

**Answer-**One.

5. Is the provider responsible for sourcing referrals?

**Answer-**Yes-through contact with the juvenile court.

6. When can a provider anticipate receiving their first referral?

**Answer-** Expect to begin operations on March 1, 2019.

7. Is DYS flexible to work with providers during the implementation period to allow adequate time for staff to complete the required pre-service training components of FFT?

**Answer-**The period January 3-February 28 is reserved for training and technical assistance. Exigent circumstances that may impact your ability to complete all the requirements during that period will have to be discussed and approved through DYS.

8. How is the per diem payment assessed? For example, are providers paid a per diem for every active day in service or only days when services are rendered?

**Answer-** DYS will pay a per-diem rate for active days in service. The rate should be reflective of all aspects of the model delivered with fidelity. (Including face to face work with youth and family, collateral contacts, correspondence, follow up, travel, etc.)

9. If a provider is unable to engage the family, does the agency still receive the per diem rate? How will DYS handle instances where families/youth disengage from a reimbursement perspective?

**Answer-**DYS expects the provider to work with the families and referral sources to engage families consistently. Per-diem days will begin at formal acceptance of services and then consistent family engagement will be a performance measure reviewed periodically through the contract. Effort beyond simply calling on the phone will be expected. Work with the probation staff, etc., would count toward the per diem. Clinically we will need to assess circumstances on a case by case basis, to be approved by a DYS representative. For example, discussion will be required regarding minimum and maximum periods of time appropriate to engage and motivate families for program participation, which will include consideration of matters specific to the case or family situation.

10. Does DYS intend to expand to other regions in the state in the future?

**Answer-**Depending on availability of future state funds, we would like to expand where we have needs in our state.

11. When can we anticipate response to submitted questions? Will these responses be emailed or posted online?

**Answer-Both**

12. Please confirm that items listed under the “documentation required with proposal” header on RFP pages 10-11 are not included within the identified page limits

**Answer-**Page limit is in regards to the program description. Technical narrative is limited to 30 pages and addendum is limited to 20 pages (which could include anything not contained in the program description).

13. Please confirm the table of contents is not included within the identified page limits

**Answer-** Confirmed.

14. Please define what DYS means by the word “addenda” on RFP page 10 when stating “addenda, if necessary, must not exceed twenty (20) pages...”

**Answer-**Additional attachments....daily schedule, meeting times, etc.

15. Please confirm that graphics/charts/tables are not subject to the double-spaced, 12 point font requirements

**Answer-**Correct...graphs and tables are not subject to the same formatting requirements.

16. Are attachments allowed beyond the “addenda” and is the attachments section page-limited?

**Answer**-See above

17. Please explain the floor plan requirement?

**Answer**-We need an idea of what your “home-hub’ will look like. This does not need to be extensive

\_1. Does DYS have an approximate number of families that it would like to serve in the five counties identified in the RFP?

Answer-Minimum of 30 families at a time

2. The RFP refers to the payment being per diem. Will the per diem be billed only on days that services are provided to youth? Or will it be based on the total number of youth enrolled?

**Answer**- Number of youth actively enrolled

3. Will you please confirm whether the Agreement of Accountability referenced on page 11 of the RFP is referring to the HIPAA compliance requirement?

**Answer**-Yes

4. Regarding the Affirmative Action policy to be included with the proposal, are we required to submit a copy of an organizational policy or will a statement suffice?

Answer-Policy would be preferred.

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1) Does AL DYS want one response for FFT services for all 5 of the counties listed as a regional proposal or individual county proposals?

**Answer**- All 5 counties, as a region

2) How many children would have the potential to be referred for this evidence based model by county each year? Please give a breakdown of Juvenile Justice and Child Welfare estimates. By county, what would be the monthly anticipated population?

**Answer** -Minimum of 30 families at a time, this would be 90-120 per year.  
-These are all Juvenile Justice involved youth.  
- Number undetermined. Percentage of caseload would be close to the following

Butler	13%
Covington	59%
Crenshaw	2%
Lowndes	5%
Pike	21%

- 3) Is there a minimum guaranteed number of youth for this contract? If so, what is the minimum number?

**Answer** – No, courts will make referrals

- 4) Is there a target budget that DYS has established for this regional program? Are there plans to expand the model to other parts of the state?

**Answer** -\$400,000

-See above-depends on state funding and need

- 5) While the solicitation asks for a daily rate (which we will provide), is DYS open to a cost reimbursement structure for the initial year while the project ramps up? We understand start-up costs would not be funded. In our extensive work in starting up evidence based models, we have found that a collaborative funding structure (with shared risk) ensures both the clinical and business aspects of the model are considered. Staff needs to be hired/trained with ongoing consultation despite the number of referrals. As such, an organization can lose a lot of money both at start up and throughout the life of the program if the referrals are insufficient to sustain the team, which can ultimately jeopardize the existence of the program. Is DYS willing to discuss such a structure to ensure the quality programs are sustained in these rural communities?

**Answer-** DYS recognizes that bringing an evidence based program on line has significant front end cost. DYS will fund this program under a cost reimbursement model up to the contracted amount for the remainder of the fiscal year ending 9/30/19. An estimated cost for this time period (2/1/19 – 9/30/19) should be submitted separately from the budget section requiring a per diem rate of reimbursement proposal. (two budgets)

- 6) Does the GIMS system currently track outcomes and recidivism? If so, can examples of this information be shared? On an ongoing basis, will the provider be able to access reports from GIMS based on the data entered or does the provider staff have to enter the same information into its own or a second system as well in order to get reports based on the provider data entered?

**Answer-**GIMS does track outcomes

-We track Destination, School involvement, Employment and reoffending

-You will be able to get reports from GIMS data through a DYS staff member. A second system under your control is allowable, provided you follow confidentiality practices

- 7) To ensure Continuity of Care and a Trauma Informed Care approach, what assessments are DYS currently using? Which assessments will be provided to the provider upon referral?

**Answer-**We do not currently use standardized assessments at our diversion sites. This will be determined by the provider

- 8) We understand from the JJTF report and the solicitation that these counties are lacking community based services. So that we can properly estimate costs, how many families or what percentage of families are estimated to have basic needs unmet (broken out by county)?

**Answer-** Information is not available at this time

- 9) On page 14, under the last bullet under “Qualifications of Staff”, it indicates that staff have to submit to background checks and be cleared through the central registry before an offer of employment and contact with youth. Does DYS allow for conditional offers of employment to be made which are contingent upon clearance of both the background checks and the registry?

**Answer-** Yes-provided they have no contact with youth .

1. Would the circumstances of the youth referred to us be pre- or post-adjudication? In researching the literature, I want to apply the most relevant issues to my search, such as if the youth referred have already been incarcerated and are referred to the program as a stipulation of release, or if they have been arrested, or just thought to be at-risk.  
Do you happen to have contact names I could reach out to in the DYS office of each county to request information?

ANSWER: Our plan is to offer this service to the population that would be at risk for commitment to DYS. This would mean the youth has been charged with a delinquent act which was handled formally or informally by the court. There must be court involvement- not just school referrals or parents seeking help outside of juvenile court.

We may see a need for aftercare/post-incarceration situations as well.

Here is the contact information for the Juvenile Probation Officers in the counties we plan to service through FFT.

Butler	<a href="mailto:Keisha.williams@alacourt.gov">Keisha.williams@alacourt.gov</a>	334-548-2717
Lowndes	<a href="mailto:Keisha.williams@alacourt.gov">Keisha.williams@alacourt.gov</a>	334-548-2717
Crenshaw	<a href="mailto:gina.folmar@alacourt.gov">gina.folmar@alacourt.gov</a>	334-335-6568
Covington	<a href="mailto:david.pearce@alacourt.gov">david.pearce@alacourt.gov</a>	334-428-2550
Pike	<a href="mailto:joe.fluker@alacourt.gov">joe.fluker@alacourt.gov</a>	334-566-5548

2. The RFP states that 3/1/19 is the date to “begin FFT Operations.” Does that mean begin accepting referrals and providing services, or begin the FFT training and hiring, etc.

ANSWER: It would be our desire that you begin accepting referrals on that date.

3. If the former, can we begin FFT training at contract award on 12/28?

ANSWER: Once the provider is selected, it is our desire that training begin prior to accepting referrals.

4. What is meant by “program recruitment/local agreement/DYS TA” on the RFP timeline, page 9?

ANSWER: This would be the time period for you to recruit your staff; enter agreements with local providers, court staff, education authority, site selection, begin training and obtain needed technical assistance from DYS representatives.

5. How would you like the project timeline to reflect ongoing treatment if each family is in a different point of the program?

ANSWER: Your program protocol and experience would lend guidance to this aspect.

6. The FFT training has several timeline points during each of the three years of implementation (i.e., Phase 1 has a one-day onsite training that includes a two-hour orientation for funders and other stakeholders to join, and has weekly phone consultations for the staff). Would you like those included in the project timeline for the first year?

ANSWER: Yes

7. Is there any training we need to schedule to use the GIMS?

ANSWER: GIMS is a web based program. Training can be done through a conference call with DYS representatives. We will schedule it at your convenience.

8. 8. As a follow-up to the budget question, I appreciate the willingness of DYS to do year one a bit differently. From the response, it appears that the \$400K target would be for the first 8 months of the fiscal year (February 1-Sept 30, 2019). Is the target then every year still \$400K or is the \$400K for 8 months with an annualized target of \$600K?

ANSWER:

The budget for this project in subsequent years is expected to be \$400,000. We have funds for the partial year (8-9 month) up to the same amount, which we will allow for training and other costs.

9. Is there a page limit to the Qualifications of the Proposer Section?

ANSWER: No. Like many of the mandatory pages, it won't count toward the page limit.