REQUEST FOR PROPOSAL FOR
Children’s Integrated Services- Early Intervention in accordance with IDEA Part C

Proposals must be received by 3/27/2020
Purpose and Scope

Howard Center, Inc. is a private, nonprofit organization located in Burlington, Vermont committed to providing effective and accessible services, for the benefit of our community. Founded in 1873 as an agency serving the children of the destitute, it now offers life-saving professional crisis and counseling services to children and adults; therapeutic interventions and education programs for children with emotional and behavioral issues; supportive services to individuals with autism and intellectual disabilities who need help with education, employment, and life maintenance skills; and counseling and medical services for adults struggling with substance abuse and mental health issues. Howard Center (HC) is seeking a bid response from qualified organizations to administer services with regard to Children’s Integrated Services (CIS) Early Intervention in accordance with IDEA Part C.

Children’s Integrated Services

The Vermont Agency of Human Services, Department for Children and Families, Child Development Division (CDD) Children’s Integrated Services provides health promotion, prevention, and early intervention services to pregnant and postpartum people, infants and children birth up to age six (6) (unless otherwise noted) and their families and child development providers. CIS services include:

1. Strong Families Vermont Home Visiting
2. Early Intervention in accordance with IDEA Part C;
3. Early Childhood and Family Mental Health; and
4. Specialized Child Care Supports (to age 13).

CIS services are part of a consistent, comprehensive, and collaborative continuum of care across multiple types of providers and settings, through connections with high-quality community health and child development support services. The goal is to improve the health and well-being of pregnant/postpartum people, infants and children, so that progress on maternal and child safety, family stability, and optimal healthy development is achieved.

Early Intervention in Accordance with IDEA Part C

Early Interventionists deliver services to infants and toddlers, birth to the child’s third birthday. Early Interventionists’ services are directed to the child’s caregivers, whether this is a parent, foster parent, child care provider, or other primary caregiver. Early Interventionists must uphold rights of client’s parent/guardian in accordance with Part C of IDEA. The intention is to model, coach, and support children’s caregivers to use strategies identified in the child’s One Plan to help them help the child develop and learn. Early interventionists coordinate services, develop strategies, and provide specialized instruction caregivers can implement within the child’s daily routines to improve the child’s functional skills in the following areas:
• Positive social emotional skills (including social relationships). Making new friends and learning to get along with others is an important accomplishment of the early childhood years. Children develop a sense of who they are by having rich and rewarding experiences interacting with adults and peers. They also learn that different rules and norms apply to different everyday settings and that they need to adjust their behavior accordingly. This outcome involves relating to adults, relating to other children, and for older children, following rules related to groups or interacting with others. The outcome includes concepts and behaviors such as attachment/separation/autonomy, expressing emotions and feelings, learning rules and expectations in social situations, and social interactions and social play.

• Acquisition and use of knowledge and skills (including early language and communication). Over the early childhood period, children display tremendous changes in what they know and can do. The knowledge and skills acquired in the early childhood years, such as those related to communication, preliteracy and pre-numeracy, provide the foundation for success in kindergarten and the early school years. This outcome involves activities such as thinking, reasoning, remembering, problem solving, number concepts, counting, and understanding the physical and social worlds. It also includes a variety of skills related to language and literacy including vocabulary, phonemic awareness, and letter recognition.

• Use of appropriate behaviors to meet their needs. As children develop, they become increasingly more capable of acting on their world. With the help of supportive adults, young children learn to address their needs in more sophisticated ways and with increasing independence. They integrate their developing skills, such as fine motor skills and increasingly complex communication skills, to achieve goals that are of value to them. This outcome involves behaviors like taking care of basic needs, getting from place to place, using tools (such as forks, toothbrushes, and crayons), and, in older children, contributing to their own health, safety, and well-being. It also includes integrating motor skills to complete tasks; taking care of one’s self in areas like dressing, feeding, grooming, and toileting; and acting on the world in socially appropriate ways to get what one wants.

(https://ectacenter.org/~pdfs/eco/Child_Outcomes_handout.pdf)
Proposal Timeline

The Request for Proposal timeline is as follows:

Request for RFP Released by HC: March 2, 2020

Bidder’s Conference: March 9, 2020

Answers to Questions: March 11, 2020

Final Bid to Howard Center, Inc.: March 27, 2020

Selection of Top Bidders / Notification to Unsuccessful Bidders: April 6, 2020

Contract Award Start Date: July 1, 2020

Howard Center, Inc. will endeavor to administer the proposal process in accordance with the terms and dates outlined; however, the Howard Center, Inc. reserves the right to modify the activities, timeline, or any other aspect of the process at any time, as deemed necessary.

RESPONSE DATE

A Bidder’s conference will be held at Howard Center 1138 Pine Street, Burlington VT, in the Independence Conference Room. Bidders are not required to attend in order to be selected. Any question not raised in writing or on or before March 9, 2020 at 1:30 PM at the conference will be waived. Answers to questions posed will be released on March 11, 2020.

Respondents to this RFP must submit one electronic or paper copy of their proposal. Responses must be received no later than 4:00 pm on March 27, 2020. Responses should be clearly marked “RFP-Howard Center: Children’s Integrated Services” and mailed or delivered to the contact person listed below.

Respondents to this RFP may include a one page cover letter with any additional information they feel is relevant.

Mail or deliver responses to:

Howard Center, Inc.
Lesley Hendry, Healthcare Reform Manager
1138 Pine Street
Burlington, VT 05401
Phone 802-488-6702
Fax 802-488-6601
LHendry@howardcenter.org
SELECTION CONSIDERATIONS & SERVICES REQUESTED

Howard Center, Inc., is seeking services for CIS EI in accordance with IDEA Part C. Typically eight hundred and eighty (880) to nine hundred and twenty (920) direct encounters occur per month for an average of one hundred and ninety seven (197) unique clients. The average encounter duration is twenty eight (28) minutes. For items 1 through 23 please provide an attestation and a narrative description of your organization’s capacity and/or experience in delivering these services. Please number your responses just as they are listed below.

1. Background and Experience: Provide details concerning the form of business organization, company size and resources; describe particular experience relevant to the proposed services. Please include a copy of your most recent independent financial audit (if applicable) and/or your most recently filed Form 990 and related schedules.

2. Data and Reporting Requirements: Describe your infrastructure capacity to meet required data collection, documentation, and reporting requirements.

3. Describe your role in the local community’s system of care for this population. If not currently established in this community, describe your role in the community where you are currently part of the local system plan of care, including a strategic plan for networking, collaborating, and connecting with the local system.


5. Gather, maintain, and submit all data required under the CIS contract in accordance with their role;

6. Serve as the primary service coordinator as assigned and in accordance with Appendix 3 of the CIS Contract. Service coordination is defined as an active, ongoing process that assists and enables families to access services and assures their rights and procedural safeguards. Service coordination may be carried out by the early interventionist or another designated service coordinator. A service coordinator will, among other activities:
   a. Serve as the single point of contact for families and other service providers;
   b. Coordinate evaluations and assessments;
   c. Facilitate and participate in the development, review, and evaluation of the One Plan;
   d. Assist parents of infants and toddlers with disabilities in gaining access to, and coordinating the provision of, the early intervention services as outlined in the One Plan;
   e. Make referrals to providers for needed services and scheduling appointments for infants and toddlers with disabilities and their families for other services (such as educational, social, and medical services that are not provided for diagnostic or evaluative purposes);
   f. Conduct referral and other activities to assist families in identifying available Early Intervention service providers;
g. Coordinate, facilitate, and monitor the delivery of services required to ensure that the services are provided in a timely manner;

h. Conduct follow-up activities to determine that appropriate Part C services are being provided; and

i. Inform and ensure families know their rights and procedural safeguards.

7. Provide services in adherence with Part C of the Individuals with Disabilities Education Act (IDEA), as referenced in Vermont’s Special Education Rules, Part C – Vermont Rules Governing Services to Children Birth Up To Age Three (https://education.vermont.gov/sites/aoe/files/documents/edu-series-2360-special-education-rules.pdf), and with guidance provided by the State, Children’s Integrated Services Unit of the Child Development Division;

8. Conduct formal screenings and evaluations to determine eligibility for Part C services using Vermont’s State Approved tools as outlined in the CIS contract, Appendix 1;

9. Conduct ongoing assessments using formal, means-tested tools, family and provider reports, and observations;

10. Provide specialized instruction to caregivers as needed including:
   a. Providing direct instruction/modeling of intervention techniques and strategies to families, caregivers, and other providers;
   b. Supporting the design of learning opportunities and activities within child’s natural environment that promote a child’s acquisition of skills in all developmental areas;
   c. Ensure that each child is able to access, and successfully participate in, learning activities through the adaptation and modification of activities, materials and the child’s environment, as appropriate to the needs of the individual child
   d. Providing families/caregivers with information, skills, and support related to enhancing the development of the child; and
   e. Working with the child to enhance the child’s development.

11. Perform administrative work relevant to the delivery of early intervention services and for reporting information to the State as required.

12. Develops and maintains community partnerships to support appropriate client referrals to local CIS and community system of care

13. Participates in multi-disciplinary team planning and consultation meetings as appropriate

14. Provides information to contractor for timely and accurate data input and billing information

15. Maintain professional documentation of all activities performed in the course of your role in accordance with the CIS contract;

16. Assist with program evaluation, program improvement plans and other related activities as requested by the state;

17. Maintains confidentiality

18. Build caregiver’s self-advocacy skills to effectively address their basic needs, and access resources and supports to improve children’s health and development;

19. Creates, maintains and supports a safe environment for open discussions with CIS
service recipients

20. Consult with and provide interpretation/synthesis of information for caregivers, including assessments and strategies developed by other providers, to help them achieve the outcomes identified in the One Plan;

21. Elicits and considers differing viewpoints when collaborating with regional CIS providers for the purpose of One Plan development and service delivery

22. Ability to meet/improve performance measures:

   a. **Performance Measure #1**: Increase the number of CIS referrals received directly by CIS Coordinator from a primary referral source
   b. **Performance Measure #2**: Increase in the percentage of those served by CIS within timelines documented in the CIS Appendix 4: Timeline
   c. **Performance Measure #3**: Increase in the percentage of those served by CIS who achieve one or more outcomes (plan goals) by the annual review or exit from all CIS services (whichever is earliest)
   d. **Performance Measure #4**: Increase in percentage of those served by CIS who have exited, transitioned or discharged as a result of having met all of their plan goals as articulated by the client.

The selection criteria will include but are not limited to:

1. Organization is eligible to receive state and federal funds
2. Organization has a Record System that allows for collection of initial evaluations, eligibility criteria, and identification of service needs and goals (One Plan)
3. Ability to meet all CIS Integrated Services Timeline (below)
4. Ability to collect required CIS authorization, intake, and referral forms (see https://cispartners.vermont.gov/forms)
5. Ability to collect and report accurate and timely data in accordance with Chapter 16 at https://cispartners.vermont.gov/manual
6. Current and past performance within the same or similar service provision
7. Keeping costs low. Provide a detailed schedule of expenses associated with services described in this proposal in the attached table.
8. Ability to meet performance outcomes
9. Ability to provide services in client’s natural setting
10. Meets client’s needs as identified in One Plan
Applicant Information Sheet
(To be page 1 and included in the proposal packet)

Applicant Organization: __________________________________
Contact Person: _________________________________________
Title: __________________________________________________
Mailing Address: _________________________________________
Town, State, ZIP: _________________________________
Telephone: _________________________________
E-mail Address: __________________________________________

Organization Contacts:
- Person Authorized to Enter into Agreement
  o Name
  o Phone
  o Email
- Program Manager
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  o Phone
  o Email
- Contract Manager
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- Financial Contact
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## Pricing

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*Please note any additional licensure requirements

** General Operating includes phone, computer, equipment, training, office, etc.

### CIS Early interventionist (also known as a Developmental Educator)

#### Minimum Qualifications

**Education, License, and/or Credentials:**

1. Bachelor’s Degree in Special Education, Early Education, or Early Childhood Development; or
2. Physical or Occupational Therapy, Speech and Language Therapy, Social Work, or other related Human Services field with a minimum of at least two years of experience providing direct services to children under the age of three with disabilities or special needs and their families, utilizing developmentally appropriate and evidence-based practices; and
3. Early Interventionist responsible for certifying evaluations conducted for the purpose of determining Part C eligibility must hold a current Vermont CIS-EI certification, another state’s equivalent, or Early Childhood Special Education license endorsement.

**Restrictions:**

Early Interventionists who hold the role of being the lead on signing off on evaluations conducted to determine initial and ongoing eligibility for Part C must hold and keep current a CIS-EI Certificate.
Family Resource Coordinator

Minimum Qualifications

Education, License, or Credentials:
1. Personal experience with own child or family member with a disability, and
2. At least one year of direct experience navigating and coordinating services for that child or family member, and
3. Meet the minimum qualifications outlined in the Early Interventionist job description, or
4. Have at least 6 credits of course-work in Early Childhood Development, Social Work, or another related Human Services field, or
5. a minimum of two years of experience providing direct services to children under the age of three with disabilities and their families, utilizing developmentally appropriate and evidence-based practices;
6. Family Resource Coordinator’s responsible for certifying evaluations conducted to determine Part C eligibility must hold a current Vermont CIS-EI certification, another state’s equivalent, or Early Childhood Special Education license endorsement.

Restrictions
Family Resource Coordinators who do not meet the minimum qualifications outlined in the Early Intervention job description above must be appropriately supervised and have all legally binding documents (ex. One Plans), signed by their supervisor or other qualified Early Interventionist.

Early Intervention Associate

Education, License, or Credentials:
1. High School diploma, this may include from a vocation or technical education program and at least one year working directly with children birth to five years of age with developmental delays or disabilities; or
2. General Education Diploma and at least two years’ experience working directly with children birth to five years of age with developmental delays or disabilities. Volunteer or part-time experience may be used for not more than 1-years’ worth of experience; or
3. Associates Degree in a health or human services field with at least 6 course credits in early childhood development; or
4. Four (4) years’ experience working directly with children birth to five years of age with disabilities or delays and their families.

Restrictions
1. Early Intervention Associates cannot make up more than 30% of an Early Intervention Program’s overall direct service staff.
2. While it is expected for Early Intervention Associates to maintain documentation such as visit notes, they shall not be responsible for any documentation that is legally binding (ex. One Plans).
3. Early Intervention Associates are not qualified to perform initial evaluations, any formal assessments, or develop One Plans. However, they may provide information that contributes to the development of those. Additionally, they may be responsible for administrative tasks related to producing such documents.

4. Early Intervention Associates may not be the only service provider listed on a One Plan.
Children’s Integrated Services Timelines

**Day 1**
- Referral is received by CIS (any door)
  - Re-referral = a referral received for a person who never utilized CIS services after a previous referral, or who had previously exited all CIS services.
- Initial contact with the client/family (within 5 calendar days for all services)
  - Primary Service Coordinator is assigned
  - Intake is completed, and authorization form signed
  - Screening, assessments, and evaluations are conducted with appropriate signed consents

**Day 5**
- Initial One Plan meeting is held by the team, including the client/family, and eligibility for services is determined (including Family Support FAP if needed).
- CIS One Plan is developed by the team, including the family, and signed by all parties.
  - Once the family signs the consent to receive services: it is considered a "Completed One Plan"

**6 Month/Periodic Review**
- The 6 Month Review date is determined by the date of the most recent signed completed One Plan.

**Annual Review**
- The 1st Annual Review date is determined by the date of the first signed Completed One Plan; subsequent Annual Review dates are determined by preceding Annual Review date.

**Transition/Exit**
- The transition process begins 90 days prior to the 3rd birthday and transition conference held 90 days prior to client’s 3rd birthday.

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1. Any non-CIS service that is needed may be coordinated by a CIS Primary Service Provider, but is not subject to these timelines.
2. A delay caused by family/child/client circumstances (using CSEP definitions of client circumstances) is an allowable exception to the timeline with appropriate documentation identifying this cause.
3. “Completed One Plan” means the date of the most recent One Plan with signed parental consent for services.