**Instructions**: Provide detailed responses in the text boxes to the questions below. If additional attachments are required as specified below, submit the attachments in the order they are requested below. There is no page limit for this Appendix D – Technical Response to Questions or any associated attachments.

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| **Vendor Name** |  |

1. **Describe your experience providing Adult Day Program services and working with the covered population described in Section 1.4.3 of this RFA.**

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1. **Describe your capacity to perform the entire scope of work outlined in this RFA. Please identify operating location(s) and hours. Please include your proposed staffing plan, including your organizational chart, resumes for key staff who will be responsible for managing the programmatic, administrative and financial requirements, and any specialized staff training completed.**

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1. **Describe your networking experience, including community resources and collaborations that you will utilize when providing Adult Day Program services.**

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1. **Provide a sample service/care plan that describes the Adult Day Program services that will be delivered for a typical client. Include a description for each service that will be provided.**

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