



OFFICIAL RESPONSES TO VENDOR QUESTIONS RFP-2024-DBH-05-YOUTH

No.	Question	Answer
1.	<p>General What is a reasonable proportion of contract value to allocate to contract administration and reporting?</p>	<p>Proposers must submit a budget for all proposed costs associated with fulfilling the requirements of this RFP.</p>
2.	<p>Sections 1.4.2., 1.4.3., and 1.4.3.1.1. A. Does the definition of grief, for the purposes of this RFP, refer to a loss specific to death, or does it include other kinds of loss, for example, medical or mental health trauma, separation from family, bullying, etc.? B. Is the expectation that the selected Vendor offer services for loss other than a death?</p>	<p>A. Grief and loss, for the purposes of this RFP are specific only to the death of a loved one (family member, significant other, friend, etc.), or the anticipated death of a loved one (e.g. grandmother may die of cancer at any time) B. No.</p>
3.	<p>Sections 1.4.2. and 2.1.1.1. Do youth need to be screened for Adverse Childhood Experiences (ACES) to be eligible for any programs, and if so, who would do the screening?</p>	<p>No, there is no official ACEs screening that is required for enrollment in this program; however, it is expected that those who are getting support for grief related to the death, or anticipated death of a loved one have been exposed to an adverse childhood experience by virtue of experiencing the loss of a loved one.</p>
4.	<p>Sections 1.4.2., 2.1.1.1.2., 2.1.5.4., and 2.1.7. What is meant by “peer support” for the purposes of this RFP? Does this include youth (minors) being trained to provide support to other minor youth?</p>	<p>Peer support, for the purposes of this RFP, refers to youth or adolescents with lived experience concerning grief and loss, or family peers (e.g. parents, caregivers) with lived experience related to grief and loss as it relates to children and youth.</p>



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5.	<p>Section 1.4.3.1.2. Who are the providers within the Children's Behavioral Health System of Care?</p>	<p>The Children's Behavioral Health System of Care is composed of the following providers, including, but not limited to:</p> <ul style="list-style-type: none"> -School/Childcare -Primary Care -Federally Qualified Health Centers -Community Mental Health Centers -Doorways and SUD providers -Care Management Entities -Residential Treatment Providers -Community Organizations -Alternative Peer Groups -Hampstead Hospital -Emergency Departments
6.	<p>Section 2.1 and all Subsections Is the selected Vendor expected to provide all services required by the RFP, or can referrals be made and/or subcontracted to other existing programs?</p>	<p>The selected Vendor must ensure that all peer support service requirements of this RFP are met. Subcontracts, where appropriate, should be detailed in the Vendor's proposal.</p>
7.	<p>Section 2.1.1.1. What are Tiers 1-5?</p>	<p>Tier 1: Assessment, Screening and Treatment Tier 2: Community-based services Tier 3: Intensive community-based services Tier 4: Residential treatment Tier 5: Acute Psychiatric Care</p>
8.	<p>Sections 2.1.1.1., 2.1.1.2., 2.1.7. and 2.1.8. A. What is considered individual peer-to-peer support versus group and/or family peer-to-peer support? B. Can the Department define expectations regarding "individually and in group settings" related to in-person or virtual peer-to-peer grief support?</p>	<p>A. <u>Individual</u> peer-to-peer support is 1:1 peer support with an individual experiencing grief and/or loss. This could include a youth or family peer (see Department's response in #4). For example, a teen whose father died meets for peer support with another teen with lived experience, or a mother whose husband died and is trying to support her children meets with another adult with lived experience for peer support.</p> <p><u>Group</u> peer-to-peer support is when multiple youth (or parents/caregivers), who have experienced loss, meet together in a</p>



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	<p>C. Can the Department define expectations regarding developing and maintaining a consultation program?</p>	<p>peer facilitated setting to support one another.</p> <p><u>Family</u> peer-to-peer support is when a family experiencing the death of a child/sibling meets with a family peer support specialist as a unit for facilitated support.</p> <p>B. <u>In-Person</u> peer-to-peer support is whenever the providers of the service and the recipients of the services are simultaneously in the same physical space for whatever intervention is being delivered. This applies to individuals, groups, and families.</p> <p><u>Virtual</u> peer-to-peer grief support is whenever providers of the service and the recipients of the services are simultaneously connected using a technological tool for remote access specifically via video such as Zoom, Teams, Doxy.me, Webex, StarLeaf or other video conferencing/telehealth software, excluding educational formats such as presentations, training, classes, etc. This applies to individuals, groups, and families.</p> <p>*Both In-Person and Virtual refer to face-to-face interactions where the individual or family can see and is seen by the provider. This excludes methods that are audio only such as a telephone call.</p> <p>C. <u>Consultation Program</u>: it is expected that the selected Vendor will offer support and information regarding how to best address providing care to those experiencing loss and grief for Children's Behavioral Health System of Care providers as they provide services to children, youth, adolescents and families.</p>
9.	<p>Section 2.1.5. Is the selected Vendor required to develop a new survey, or is it possible to use an existing survey, as long as it is approved by the Department?</p>	<p>The survey may or may not be new, existing, or revised. As part of this contract, the survey will need to be approved by the Department.</p>



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10.	<p>Section 2.1.6.1. We offer resources to all of our families on an as-needed and as-requested basis – we do not make referrals through a direct process with other organizations. Does this section imply that we need to adhere to a referral process as laid out by the Department?</p>	<p>The selected Vendor is required to facilitate referrals to other providers for ongoing care as appropriate, and if the needs of those children, youth, and families are beyond the scope of the selected Vendor's services. For example, if a family needs housing support due to a loss of a parent, a referral to 211 would be appropriate. Or, if there are underlying behavioral health problems exacerbated by grief, then a referral to a Community Mental Health Center (CMHC) would be appropriate. Additionally, the selected Vendor is required to facilitate incoming referrals as well, for example, a CMHC or 211 may refer to the selected Vendor for peer-to-peer youth grief support as well. Please also see Section 2.1.4 regarding the facilitation of appropriate referrals and coordination of care for children, youth, and families.</p>
11.	<p>Section 2.1.9. Does this section indicate that the Department determines where the selected Vendor attends training?</p>	<p>No.</p>
12.	<p>Section 2.1.12.2. This section identifies covered populations as grieving kids/families and System of Care providers. Was the intention of this paragraph to add an additional focus on peers (who may or may not be grieving) to support them in helping their grieving friends?</p>	<p>No, the intent is that peers will be provided with the tools or skills they may need to assist those, other than themselves, experiencing grief or loss.</p>
13.	<p>Section 2.1.13. Does this section refer to complaints made against the selected Vendor and by whom?</p>	<p>Yes, this section references complaints against the vendor by those that are receiving the vendors services or by other vendors attempting to get access to grief/loss services on behalf of their existing client. For example, a mother is upset that a peer interacted with one of her children in a way that was inappropriate, or a CMHC was refused consultation by the vendor on a case that involved a youth, child, adolescent or family experiencing grief/loss.</p>



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14.	<p>Section 2.1.14. Does “all materials” include materials that have already been developed?</p>	Yes.
15.	<p>Section 2.2.2.2.22. What are “other metrics as defined by the Department,” and will these be identified before a contract is signed?</p>	The Department, at its sole discretion, may identify other metrics that may be important for reporting as part of ongoing implementation and evaluation of the program, and not at the time the contract is signed.
16.	<p>Section 2.2.2.3. Who is the Department’s identified data analytics and reporting provider?</p>	This will be determined. The Department will work with the selected Vendor to connect them to the data analytics and reporting provider.
17.	<p>Section 2.3.4. Is the method of payment on a reimbursement basis?</p>	<p>Yes, payment is on a cost reimbursement basis. Please see Section 2.3.4. The selected Vendor must submit monthly invoices using a form satisfactory to the Department, which identifies and requests reimbursement for authorized expenses incurred. The selected Vendor must ensure invoices are completed, dated and submitted to the Department to initiate payment.</p>
18.	<p>Section 8.4.1. Does this statement cover everything produced during the grant period, including materials for events?</p>	Yes.
19.	<p>Sections 8.4.2. and 8.4.3. Is the selected Vendor required to comply with Sections 8.4.2. and 8.4.3.?</p>	Yes.



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20.	<p>Section 8.7.3. What is the Privacy Impact Assessment (PIA), and what is Personally Identifiable Information (PII)?</p>	<p>Section 8.7.3. Personally Identifiable Information (PII) is any information connected to a specific individual that can be used to uncover that individual's identity, such as their social security number, full name, or email address.</p> <p>A Privacy Impact Assessment (PIA) is an analysis of how PII is collected, used, accessed, shared and stored. Please see Section 8.7.3. for details on the specific information the Department will assess.</p>