



SEPTEMBER 2016 REQUEST FOR PROPOSALS

Tri-Counties Regional Center (TCRC) in collaboration with The Integrated Health Project (IHP) and North Los Angeles Regional Center (NLARC) is soliciting proposals for the following Community Placement Plan (CPP) contracted service:

Posting Date: September 30th, 2016

Service Type: **Two (2)** Adult Residential Facilities for Persons with Special Health Care Needs (ARFPSHN) – Service Code 853

Five (5) beds

Start-up available: Funding will be available in fiscal year 2017 pending approval from the Department of Developmental Services (DDS). Given the critical need for this unique service model due to the closure of Fairview and Porterville Developmental Centers, Tri-Counties Regional Center is seeking to identify a provider prior to the allocation of funding.

These homes will be acquired and developed by a non-profit housing organization. Start-Up funds can only be used for non-recurring costs associated with initially establishing a service, which may include administrative components, licensing, staff recruiting and training, general equipment, and other costs as described per contract. Start-Up funds are not intended to cover 100% of the development costs.

Reimbursement: 853 Rates (not to exceed the applicable Median Rate)

Location: San Luis Obispo County, Santa Barbara County, or Ventura County

Service Description:

The ARFPSHN is a residential model that was created to serve the most medically fragile individuals who were transitioning from Agnews Developmental Center into the local community. The purpose of these developments is to provide residential supports and services to a total of five (5) medically fragile individuals per home, who will be moving out of the Developmental Centers.

These facilities will be a resource for adults who have highly intensive medical conditions and who may be non-ambulatory. The facility will be subject to the requirements of California's Welfare and Institutions Code, Division 4.5, Chapter 6, Article 3.5, Sections 4684.50 – 4684.75. All applicants should thoroughly review these regulations in order to be familiar with the service model prior to submitting a proposal in response to this RFP.

Applicants for this RFP must have residential care experience in serving individuals with developmental disabilities who have intensive medical needs. Applicants must demonstrate expertise in the delivery of clinical services and have the ability to provide a program that includes 24-hour nursing.

The ARFPSHN program will include services and staffing levels that exceed that of a Level 4I facility. The selected provider must adopt a "no reject" policy toward individuals, with a commitment to modifying supports to specific needs and communicate a vision dedicated to long-term, stable support in inclusive communities. The awardee will be required to arrange consultation from an existing ARFPSHN provider to navigate the development, certification and licensing process.

OVERVIEW OF SERVICES PROVIDED

Applicants should design a program that is equipped and prepared to serve individuals who will have health conditions that require nursing supports for any of the following types of care:

- Nutritional support, total parenteral feeding, gastronomy feeding (G-Tube), and hydration
- Cardiorespiratory monitoring and oxygen support
- Tracheostomy care and suctioning
- Nursing interventions for colostomy, ileostomy, or other surgical procedures
- Special medication regimens, including injections and intravenous medications
- Management of insulin-dependent diabetes
- Manual fecal impaction removal, enemas, or suppositories
- Indwelling urinary catheter procedure
- Treatment for staphylococcus infection
- Treatment for wounds or pressure ulcers
- Postoperative care and rehabilitation
- Pain management and palliative care
- Renal dialysis

MINIMUM QUALIFICATIONS FOR APPLICANTS, ADMINISTRATOR & STAFF

Facility Administrator: Requirements for the facility administrator include:

- A minimum of two years prior administrative and supervisory experience in a licensed residential program for persons with developmental disabilities;
- Be a licensed registered nurse, nursing home administrator or psychiatric technician with 5 years experience serving persons with developmental disabilities or have a bachelor's degree or more advanced degree in the health or human services field and two years experience working in a licensed residential program for persons with developmental disabilities and special health care needs;
- Completion of DSP Year 1 and 2 training;

The administrator must devote a minimum of 20 hours per week to the facility and may not serve as administrator for more than two (2) facilities. Any other program(s) with which the Administrator has been associated must have been in good standing with the regional center and CCL during the period of the Administrator's association with that program.

Direct Care Staff: Requirements for direct care staff include:

- DSP Year I and II certificates prior to serving individuals;
- DSP must have minimum of one (1) year experience in the field of developmental disabilities
- DSP must speak the language of the people they support.

General Requirements:

- Facility will require ARFPSHN certification and licensure by the Department of Social Services and Community Care Licensing (CCL) prior to vendorization by TCRC.
- Facility must support five (5) individuals, with private bedrooms and a minimum of two (2) bathrooms for exclusive use by regional center individuals.
- Program must meet all applicable Title 17 and Title 22 regulations.

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- The facility must have a commercial fire sprinkler system
- Facility must meet applicable Americans with Disabilities Act (ADA) standards.
- Service design will include specification of at least four (4) consultant hours per resident per month.
- Applicants must identify all types of consultants they propose to utilize, such as Occupational Therapists, Physical Therapists, Respiratory Therapists, Speech Pathologists, and Dieticians.
- Applicants who are current vendors of TCRC will not be considered for this RFP if any TCRC contracts are unsigned or if any monies are owed by the applicant to TCRC.
- Applicants responding to this RFP who are currently vendored providers for TCRC or any other regional center must have services in good standing. Providers with Substantial Inadequacies (SI's), or Type A deficiencies with Community Care Licensing in the past twenty-four (24) months shall provide a written description of the SI(s) and/or Type A deficiencies and of all corrections that have been made. Applicants must also disclose any past, present, or pending licensure revocations, probation or denials, including but not limited to: CCL, Public Health Licensing or any agency providing services to people with disabilities, children or the elderly.
- Tri-Counties Regional Center (TCRC) reserves the right to reject any or all proposals and to cancel the RFP process at its discretion. TCRC may disqualify any proposal that is incomplete or does not meet the requirements described in this RFP.

Service Summary Content Guidelines:

Please include all information requested below and provide in the same order in your document. For additional guidance in writing the Service Summary, please refer to Title 17 and Title 22 regulations and to the TCRC website (www.tri-counties.org) for information on Universal Service Expectations and the Person-Centered Thinking Initiative.

- a) **Mission, Vision, and Value Statements:** Provide any agency MVV statements and how these were developed for the agency.
- b) **Current Commitments:** Provider will include a complete description of current and completed projects.
- c) **Agency Outcomes:** Describe anticipated outcomes of proposed service for people residing in the home and how achievement of outcomes will be measured.
- d) **Assessment and Planning:** Briefly describe the planning process. How will individual goals/objectives be determined and progress measured?
- e) **Administrative / Consultant Roles:** Describe roles of licensee, administrator, assistant administrator, and consultants.
 - Provide qualifications of consultants and any other licensed professionals who will assist with clinical services implemented in the home. Attach résumés. (See Statement of Obligation form.)
- f) **Methods and Procedures:** Under a "Methods and Procedures" section of the RFP response, applicants will describe how they will:
 - Create a plan that describes how health care services and intensive support needs will be provided including equipment and supplies to be available. Program services must include a licensed nursing staff awake and on duty 24-hours per day, seven days per week
 - Implement meaningful activities during the day as some individuals may not participate in typical organized day activities or work programs

g) Describe Staff Training Plan

- Initial and ongoing training, dispensing of medication, implementation of medical care plans and data collection.
- Required certifications in addition to any specialized training for providing medical support to individuals
- Initial and ongoing training and certification in First Aid and CPR.

h) Staff Recruitment and Retention: Describe your plan to recruit, and retain quality staff. Include:

- Job descriptions, qualifications, and desired characteristics for all staff positions.
- Retention strategies including any wage, benefit, or other incentives provided to retain staff.
- Health and criminal background screening procedures.
- Initial and ongoing training, including required certifications. Include any specialized training for supporting medical conditions

i) Staffing Schedule: Provide a sample one-week staffing schedule including Administrator/Assistant Administrator, direct support professionals, consultant(s), and program prep time.

j) Transportation: Describe how transportation will be provided for day / work services, therapy and medical appointments, recreation and other activities.

k) Continuous Quality Improvement (CQI): Describe how the service agency will use data, such as agency outcomes, stakeholder satisfaction, or other existing data (e.g. incident reports, medication logs) to identify service problems pursuant to corrective changes such as revised staff training curriculums, staff training procedures (e.g., using competency based teaching methods), agency practices and procedures or other operations (e.g., supervision, medication management, recruiting, etc.). Providers shall describe the feedback loop by which problem procedures will be identified, corrected through revised practices, and further monitored to measure the effectiveness of those changes in agency practice.