

STATE OF ARKANSAS

OFFICE OF PROCUREMENT ARKANSAS DEPARTMENT OF HUMAN SERVICES 700 Main Street Little Rock, Arkansas 72203

RESPONSE PACKET 710-20-0011

CAUTION TO VENDOR

Vendor's failure to submit required items and/or information as specified in the *Bid Solicitation Document* **shall** result in disqualification.

SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION							
Company:							
Address:							
City:				State:		Zip Code:	
Business Designation <i>:</i>	☐ Individual☐ Partnership	□ Sole Pro □ Corporat	• •	ip □ Public Service Corp □ Nonprofit			
Minority and Women-Owned	Not ApplicableAfrican American	 ☐ American Indian ☐ Hispanic American 	□ Asian American □ Pacific Islander American		□ Service Dis □ Women-Ov	sabled Veteran wned	
Designation*:	AR Certification #:		* See Minority and Women-Owned Business Policy				

PROSPECTIVE CONTRACTOR CONTACT INFORMATION Provide contact information to be used for bid solicitation related matters.				
Contact Person:		Title:		
Phone:		Alternate Phone:		
Email:				

CONFIRMATION OF REDACTED COPY

□ YES, a redacted copy of submission documents is enclosed.

□ NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.

Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.

ILLEGAL IMMIGRANT CONFIRMATION

By signing and submitting a response to this *Bid Solicitation*, a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION

By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.

□ Prospective Contractor does not and will not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:

Authorized Signature:

Printed/Typed Name:

Use Ink Only.

Title:

Date:

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are <u>NON-mandatory</u> must be declared below or as an attachment to this page. Vendor must clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements shall cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. *Use Ink Only*

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are <u>NON-mandatory</u> must be declared below or as an attachment to this page. Vendor must clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements shall cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. *Use Ink Only*

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

SECTION 3,4,5 - VENDOR AGREEMENT AND COMPLIANCE

• Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. *Use Ink Only*

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

PROPOSED SUBCONTRACTORS FORM

• Do not include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

□ PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

By signature below, vendor agrees to and **shall** fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

Vendor Name:	Date:	
Authorized Signature:	Title:	
Print/Type Name:		

INFORMATION FOR EVALUATION

• Provide a response to each item/question in this section. Vendor may expand the space under each item/question to provide a complete response.

• Do not include additional information if not pertinent to the itemized request.

		Maximum RAW Score Available
E.1	MINIMUM QUALIFICATIONS	
	A. Submit social work licenses for all staff identified to execute the Scope of Work.	5 points
	B. Describe your experience in social work or child welfare related field.	5 points
	C. Submit an organization chart displaying all staff that will execute the Scope of Work. Clearly Show title and line of supervisory.	5 points
	D. Provide three (3) letters of recommendation from three (3) different sources, dated within the last six (6) months of bid submittal date, relating to the Scope of Work of this RFP.	5 points
	E. Explain your plan for meeting the requirement of working nights and weekends.	5 points
	F. Describe how you propose to maintain sufficient staffing levels to ensure successful completion of task requires in the Scope of Work.	5 points
E.2	APPROACH TO SCOPE OF WORK	
	A. Submit a sample describing vendor's approach to gathering, assessing and providing pertinent information to be used in decision making regarding the appropriateness of approval of homes.	5 points
	B. Describe vendor approach to face-to-face interviews to prospective families as stated in section 2.4a 2	5 points
	C. State how will you ensure a SAFE Home Study will be completed within the timeframe stated in 2.4a 3.	5 points
E.3	ADDITIONAL CONTRACT REQUIREMENTS	
	A. Explain how you will ensure timely reporting as required in 2.3a and b.	5 points
	B. State your mode of transportation that will be used to meet the Scope of Work in this RFP.	5 points
E.4	REPORTING AND BILLING	
	A. State your plan to comply with the training requirement as set forth in 2.5a	5 points
	B. Explain how you will ensure timely billing of DHS for services	5 points
	C. What your agency's or organization policy on confidentiality and record retention?	5 points

DIVISION OF CHILDREN AND FAMILY SERVICES (DCFS) HOME STUDY AREA(S)

- Please Check each area in which you are willing to provide the service.
- **Do not** include additional information if not pertinent to the itemized request.
- Please return with your response packet.
- □ AREA 1
- □ AREA 2
- \Box AREA 3
- \Box AREA 4
- \Box AREA 5
- \Box AREA 6
- □ AREA 7
- □ AREA 8
- □ AREA 9
- □ <u>AREA 10</u>