

# STATE OF ARKANSAS

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

# *RESPONSE PACKET* 710-20-0018*R*

# **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<br>Designation <i>:</i>     | <ul><li>☐ Individual</li><li>☐ Partnership</li></ul>          | □ Sole Pro<br>□ Corpora  | prietorship<br>tion                             | Public Service Corp     Nonprofit |                           |                        |        |
| Minority and<br>Women-Owned          | <ul><li>☐ Not Applicable</li><li>☐ African American</li></ul> | <ul> <li>☐ American Indian</li> <li>☐ Hispanic American</li> </ul> | □ Asian American<br>□ Pacific Islander American |                                   | □ Service Di<br>□ Women-O | sabled Veteran<br>wned |        |
| Designation* <i>:</i>                | AR Certification #:   |  | * See Min                                       | ority and                         | Women-Ow                  | ned Business           | Policy |

| <b>PROSPECTIVE CONTRACTOR CONTACT INFORMATION</b><br>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:

Title:

Use Ink Only.

Printed/Typed Name: \_\_\_\_\_ 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:      |        |  |

# **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<br>RAW Score<br>Available |
|--|-----------------------------------|
| E.1 MINIMUM QUALIFICATIONS   |                                   |
| A. Provide information regarding staffing. Identify key personnel that will execute the requirements of this RFP. Include name, status (full time employee or part-time employee), title, role, responsibility and credentials. 2.2C   | 5 points                          |
| B. Provide an organizational chart displaying the overall business structure. 2.2D   | 5 points                          |
| C. Describe how the vendor proposes to maintain sufficient staffing levels to ensure successful implementation of the Scope of Work. 2.2D  | 5 points                          |
| D. Submit a brief history, including the number of years, of experience in providing social work or work in a child welfare related field. 2.2E  | 5 points                          |
| <ul> <li>E. Submit a minimum of three (3) letters of recommendation, from three (3) different sources, describing the work performed relative to the Scope of Work. Letters must be dated within the last six (6) months and meet the following criteria:</li> <li>Must be on official letterhead of the party submitting the recommendation.</li> <li>Must be from individuals who can directly attest to the respondent's qualifications relevant to the Scope of Work in this RFP.</li> <li>Must include current phone numbers, mailing address, email address, printed name and title.</li> <li>Must contain the signature of the individual party submitting the recommendation.</li> </ul> | 5 points                          |
| E.2 APPROACH TO SCOPE OF WORK  |                                   |
| A. Describe your ability to provide the services described in this RFP statewide. 2.3A   | 5 points                          |
| B. Describe how vendor plans to comply with DCFS policy and procedures. 2.3, A3-4  | 5 points                          |
| C. Describe in detail how the vendor plans to execute the Scope of Work independent of DCFS. 2.3, A5   | 5 points                          |
| D. Describe vendor's admission criteria. 2.3, A8   | 5 points                          |
| E. Describe how you will work with DCFS to achieve reunification and permanence for children and youth. 2.3, A9  | 5 points                          |
| F. State your plan for continued placement support and crisis intervention surrounding placement disruption. 2.3, A11  | 5 points                          |
| G. Explain how you will work with DCFS to achieve visitation. 2.3B   | 5 points                          |

| E.3 ADDITIONAL CONTRACT REQUIREMENTS   |          |
|--|----------|
| A. State how the vendor proposes to ensure all employees have required background checks. 2.4C               | 5 points |
| B. Describe how you will comply with the reporting and billing requirements stated in this RFP, 2.4 F, G, H. | 5 points |
| C. Describe your record retention and confidentiality policies. 2.4I   | 5 points |