

Date Issued: June 23, 2017

The County of Franklin, Pennsylvania



Requests for Proposals (RFP) for *Program Evaluator*

PART I: GENERAL INFORMATION FOR AGENCIES

PART II: INFORMATION REQUESTED FROM AGENCIES

ATTACHMENT A: PROGRAM FLOWCHART

PART I: GENERAL INFORMATION FOR AGENCIES

Summary:

The County of Franklin, PA is requesting proposals from agencies capable of providing program evaluation for the new Jail To Community Treatment program (JTCT). A selection panel will determine the successful fund recipient, based on the quality of the proposals as determined by the section scoring and the ability of the applicants to meet the needs of the project. County staff members comprise the selection panel. The awards will be announced July 28, 2017, and funding is anticipated to begin on August 10, 2017.

Funds are provided on a reimbursable basis. Applicants must certify that they are able to manage the program funds on a reimbursement basis with no lapse in program activities. Payment of expenses will be made within 45 days of submission of a complete invoice. The County reserves the right to withhold payments for costs determined not eligible for reimbursement under these guidelines. State funds support this program and as such, applicants must be able to comply with all State funding requirements.

Funds must be expended between August 10, 2017 and April 25, 2018; funding is dependent upon award of the State DoC grant contract. Quarterly reports detailing the expenditure of funds, and the resultant outcomes as outlined in Section IV of the Project Narrative, will be due no later than 15 days after each quarter ends.

To apply, please submit one (1) electronic copy of the completed application by 4:30 p.m., **Friday, July 21, 2017**, to Ms. Shalom Black, seblack@franklincountypa.gov.

Required Attachments

Please attach the following items to this application:

- Organizational Structure, including Board of Directors (with officers noted), if applicable
- IRS Determination Letter Showing 501(c)(3) Status (for non-profit agencies)
- Most Recent Audit (if no audit, provide an annual Financial Statement and explanation for why a recent audit is unavailable)
- FY 2016 and FY 2017 Organizational Budgets
- Résumé of any existing staff who will be working to fulfill the requirements of this contract, if awarded.

CALENDAR OF EVENTS

The County will make every effort to adhere to the following schedule:

Activity	Responsibility	Date
Deadline to submit questions via email to Shalom Black: seblack@franklincountypa.gov	Contractors	July 18, 2017
Answers to Potential Contractor questions posted to https://sites.google.com/a/franklincountypa.gov/grants-rfp---program-evaluator-for-jail-to-community-treatment-program/questions-answers no later than this date.	Issuing Office	July 19, 2017
Please monitor the project web site for all communications regarding the RFP.	Contractors	Ongoing
Emailed proposal must be received by the Point of Contact at: seblack@franklincountypa.gov	Contractors	July 21, 2017
Awards announced	Issuing Office	July 28, 2017

1. **BACKGROUND:** In January of 2017, the Pennsylvania Department of Corrections awarded a grant to Franklin County to implement an evidence-based Medication Assisted Treatment (MAT) pilot project for the treatment of eligible individuals within Franklin County Jail and continuing into the community, post-release, through the Jail To Community Treatment program (JTCT). Through this new program, Franklin County is addressing one of its fastest growing concerns—incarcerated individuals with substance use disorders. The higher recidivism rate and tendency toward relapse makes this concern a priority in planning new programs that increase the likelihood of successful recovery and decrease the likelihood of individuals returning to Jail. The JTCT program addresses the needs of inmates with both alcohol and opiate use disorders by initiating treatment opportunities for individuals who are incarcerated and transitioning to the community; and developing the inmate’s cognitive, behavioral, social, vocational, and other skills to address the cause of substance use and related problems.

The County is seeking a consultant with expertise in formulating a data collection system and the ability to analyze data to determine participant compliance, program effectiveness, and outcome measurement tracking as required by the Department of Corrections Non-narcotic Medication Assisted Treatment grant.

SERVICES SOUGHT THROUGH THIS SOLICITATION

The evaluator will create an electronic database which will contain the required fields for each participant based upon consultation with jail providers, community providers, and probation officers. Documentation will be kept in case files with each individual provider as well as with probation officers. The database will be used to track and report outcomes and will be reviewed quarterly by the Franklin County Grants Director. The evaluator will develop a program evaluation protocol, recommend analytic strategies, contact each data provider, analyze and report findings, and provide training and technical assistance to County staff in order to fully understand the evaluation methodology.

The evaluator will collect and analyze the following information, at minimum:

- Number of inmates who were enrolled in the program, as identified in provider’s files
- Percent of treatment goals met by participants, as identified in provider’s files
- Number of participants in the program who have been reincarcerated (3-month, 6-month, 1-year follow-up after release from jail) due to by commitment type (new crime vs. convicted parole violation vs. technical parole violation); as identified by Probation.
- Number of participants in the program who have been reincarcerated (3-month, 6-month, and 1-year follow-up after release from jail) due to committing an alleged drug and/or alcohol related criminal offense; as identified by Probation.
- Number of participants who relapsed after release from jail (3-month, 6-month, and 1-year follow-up), including type of drug triggering the relapse; as identified in provider’s files.
- Qualitative data, such as personal outcomes for each participant, looking beyond recidivism and relapse rates to the barriers faced and factors to their success.

In addition to the established data points, the evaluator will also ensure that program participants are complying with treatment services through routine communication with Probation and tracking to show participant compliance with the terms of their probation and any return to incarceration on new charges or technical violations.

REQUIREMENTS OF CONTRACTED SERVICE PROVIDERS

All County contracted service providers are required to:

- Enter into a contract (hereinafter “Agreement”) with Franklin County, to provide the specific program evaluation services;
- Warrant and represent that their agency is an independent business or nonprofit organization and has complied with all federal, state and local laws, ordinances and regulations regarding business permits and licenses of any kind that may be required to carry out the business and the services to be rendered pursuant to the Agreement with the County;
- Provide evidence of General Liability, Auto Liability, Employers Liability, Umbrella Liability and Professional Liability insurances (if such exposure exists), and Workers’ Compensation insurance to the extent necessary under applicable law, at the minimum amounts determined by the County as set forth in the Agreement:
 - General Liability - \$1,000,000/occurrence – Franklin County shall be named as an Additional Insured for the Project or Program.
 - Employee Dishonesty Coverage - \$25,000 limit
 - Workers’ Compensation & Employers Liability – Statutory Limits
 - Professional Liability – Current Policy Limits

Franklin County shall be named as the Certificate Holder for all insurance coverage, receiving a 30 day notice of cancellation or non-renewal. If the Provider has a Business Owners Policy instead of Commercial General Liability coverage, the Provider may submit evidence of insurance for the County’s consideration.

- Submit a completed W-9 form and a current Certificate of Insurance for their agency;
- Participate in quarterly meetings, and other regular County meetings and work sessions as needed;
- Comply with all regulations regarding State funding as a subrecipient of the County’s grant, as set forth in the Agreement.

As a JTCT partner, the selected provider is required to develop and implement practices and procedures to support the system outcomes outlined above.

2. **PURPOSE:** The purpose of this RFP is to solicit proposals for Evaluator services to track Jail To Community Treatment (JTCT) program participants as they transition from incarceration to treatment in the community, making contact with probation officers, treatment providers, and program participants, and also monitoring outcomes.

3. **ISSUING OFFICE:** The issuing office for this RFP is Franklin County Administration. If the Issuing Office deems it necessary to revise any part of this RFP before the proposal response date, the Issuing Office will contact all interested parties and forward the stated addendum.

4. **INCURRING COSTS:** Franklin County is not liable for any costs incurred by the proposer to prepare their response and proposal.

5. **PROPOSALS:** The proposer is asked to submit a complete response to this RFP using the format provided in Part II. Each proposal page should be numbered for ease of reference. For this RFP, the

proposal information must remain valid for ninety (90) days after the submission date.

6. **RESPONSE DATE:** The County requests that all proposals arrive on or before **July 21, 2017 at 4:30pm**. All proposals should be e-mailed to Shalom Black: **seblack@franklincountypa.gov**.

7. **SELECTION CRITERIA:** Proposals will be evaluated based on completeness, ability to meet criteria as set forth in this RFP, experience and fiscal solvency. As such, Franklin County is not bound to accept the lowest bid. County reserves the right to request a best and final offer from the top three proposers. The Issuing Office reserves the right, in its sole and complete discretion, to reject any proposal received in response to the RFP, or to re-advertise for new proposals. The County reserves the right to waive any minor deviation in proposal responses received when such waiver is in the best interests of the County.

8. **DISCLOSURE OF PROPOSAL CONTENTS:** Cost and price information provided in proposals will be held in confidence and will not be revealed or discussed with competitors. All other materials submitted become the property of Franklin County and may be returned only at the County's option. Proposals submitted to the County may be reviewed and evaluated by any person at the discretion of the County. The County has the right to use any or all ideas presented in any reply to the RFP. Any RFP information that is incorporated into a contract for services is available for review by any interested party. After issuance of a contract or purchase order pursuant to this RFP, all proposal submissions may be subject to disclosure pursuant to Pennsylvania Right to Know Law.

9. **PROPOSAL CONTENTS:** Proposals will be held in confidence and will not be revealed or discussed with competitors except as set forth herein. Financial information may only be disclosed if: 1.) The information or proposal is disclosed to a consultant who is retained by Franklin County and who has signed a confidentiality agreement; 2.) The information or proposal is used to defend the County's interest in a legal action; 3.) The information or proposal is disclosed under a court order or a Right to Know request; 4.) Franklin County is otherwise required by law to release the information.

10. **RFP CONTENTS:** From the issue date of the RFP until the selection by the Issuing Office of a proposal, the Issuing Office is the sole point of contact concerning the RFP and no part of the proposal shall be shared with anyone or any office outside of the Issuing Office and proposal reviewers. Violation of this paragraph shall be deemed grounds for disqualification.

11. **AGREEMENT FOR SERVICES:** Successful proposer will be required to enter into an agreement of services incorporating RFP information and County requirements (Agreement). The Agreement shall be in a form and manner acceptable to the Issuing Office and is a condition precedent to the performance of the services by successful proposer. No work shall commence under this Proposal until certificates of insurance required are provided to the County, as set forth in the Agreement.

12. **INDEPENDENT CONTRACTOR:** The relationship between Franklin County and Agency/applicant providing the herein services is that of an independent contractor and contracting agency/applicant. Nothing herein contained shall be construed to give the Agency/applicant any interest as an employee, joint venturer or partner of or with the County.

13. **NEWS RELEASES:** News releases pertaining to this project will not be made without prior Franklin

County approval, and then only in coordination with the Issuing Office.

14. NO ASSIGNMENT ALLOWED: Unless specifically noted in this RFP, Provider must provide all services to complete the identified work.

15. RFP CLARIFICATION: Questions concerning the RFP should be directed in writing and e-mailed to Shalom Black: seblack@franklincountypa.gov. All inquiries should be made in writing no later than three days prior the RFP due date; the County has no obligation to answer inquiries received later than 3 days prior to the deadline. Answers to Potential Contractor questions will be posted to <https://sites.google.com/a/franklincountypa.gov/grants-rfp---program-evaluator-for-jail-to-community-treatment-program/questions-answers> no later than July 18, 2017.

16. ACCOUNTABILITY: Agency/applicant will be accountable to Franklin County Administration for contract outcomes.

PART II: INFORMATION REQUESTED FROM AGENCIES

Name of Organization: _____

Address, City, State, Zip: _____

Authorized Contact Person: _____

Federal ID Number: _____

Title: _____

Phone Number: _____

E-mail Address: _____

Has your organization received a 501(c)3 designation from the IRS? Yes No

If yes, have you attached an IRS determination letter showing your 501(c)3 status? Yes No

Have you attached your organizational structure, including Board of Directors? Yes No

Have you attached the most recent audit or financial statements for your agency? Yes No

Have you attached your FY2016 and FY2017 budgets? Yes No

I certify that all the information contained in this application is true and accurate. I understand that material omission or false information contained in this application constitutes grounds for disqualification for the applicant(s) and this application. I further understand that by submitting an application, I, as an authorized representative of the organization, am accepting the terms and conditions as approved by the County Commissioners.

I also represent and warrant that the organization does not discriminate on the basis of race, creed, sex, age, color, national origin, physical or mental disabilities for employment or the achievement of the mission or goal of the organization.

I understand that any and all applications submitted, as well as supporting documentation, may be considered public documents. As such, all applications and supporting documents may be viewable and obtained by the public under provisions of PA laws.

Authorized Representative

Signature: _____

Name (Please Print): _____ Date: _____

Title: _____

PROJECT NARRATIVE

The County requests that all proposals include numbered section headings for each corresponding question and numbered pages.

I. Background & Qualifications (two pages maximum; 20 points maximum)

- 1) Please provide the name, title, and contact information of an individual authorized to represent your organization in discussing the proposed project.
- 2) Provide a brief background of your organization or agency, and experience in working with program evaluation.
- 3) Describe the methods, models, and/or programs utilized by your organization in providing evaluator services.

II. Project Description (three pages maximum; 20 points maximum)

- 1) Describe your program structure in detail, including organizational policies and practices regarding data collection and analysis. Please enclose, as an attachment, a sample analysis and/or report.

III. Work Plan (two pages maximum; 20 points maximum)

- 1) Describe how the project will be carried out. Provide a timeline for any specific steps you will take to get started and the proposed date of completion for each.

IV. Evaluation (two pages maximum; 20 points maximum)

- 1) List your deliverables.
- 2) State and explain your measures of success in meeting your goals. Discuss how outcomes data will be collected, managed, and assessed.

V. Budget Narrative (two pages maximum; 20 points maximum)

- 1) Please provide a narrative budget justification for each cost per line item on the budget summary worksheet. The narrative must specify how each cost is directly related and/ or necessary for the proposed project. The worksheet which follows is where you should provide a succinct overview of project costs.

Budget Summary Worksheet

Personnel costs must include number of hours estimated and hourly rate. Use additional budget lines if needed.

Project Title: _____

Budget breakdown:

Project Task	Description	Amount In-Kind/ Matching. (Not required). Source?	County Request	Total Project Cost
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Total Budget		\$	\$	\$

Name and address of proposed location(s) if available:

Name and signature of authorized individual submitting costs:

Name: _____ Title: _____

Signature: _____ Date: _____

VI. Sub-recipient Questionnaire

1. Has your agency contracted with Franklin County before? If so, list all contracts held within the last 5 years.

Yes _____ No _____ N/A _____

Comments _____

2. Is the program area (Evaluation) new for your agency (less than three years)?

Yes _____ No _____ N/A _____

Comments _____

3. Describe any staff turnover or agency reorganization within the last 3 years.

Comments _____

4. Are the staff assigned to the program new to your agency (worked for the agency for less than two years)?

Yes _____ No _____ N/A _____

Comments _____

5. Has your agency had a lawsuit filed against them within the last 10 years? If yes, please explain.

Yes _____ No _____ N/A _____

Comments _____

6. Has your agency been suspended or debarred, currently or in the past 10 years?

Yes _____ No _____ N/A _____

Comments _____

7. Within the last 5 years, have any of your agency's staff been jailed, convicted of a felony or currently under criminal investigation?

Yes _____ No _____ N/A _____

Comments _____

8. Does your agency have experience with a financial management system to track and record program expenditures? (Quickbooks, visual bookkeepers, Socrates Media, Peachtree or a custom system)

Yes _____ No _____ N/A _____

Comments _____

9. If funded, what percentage of overall funding for your agency would the grant represent?

Comments _____

10. Describe the oversight in monetary decisions by the board of directors and senior management (frequency, timeliness, and nature of financial reporting):

Comments _____