



COUNTY
SOCIAL SERVICES

REQUEST FOR PROPOSAL (RFP)

Mobile Crisis Response

7/24/20

County Social Services

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RFP Mobile Crisis Response

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Attachment A: DHS Crisis Response Provider Policies (May 1, 2018)

I. INFORMATION AND BACKGROUND

State Program

441-24.33(225C) Twenty-four-hour crisis response. The purpose of 24-hour crisis response is to provide access to crisis screening and assessment to de-escalate and stabilize the crisis. When the assessment indicates, a stabilization plan is developed to support the individual's return to a prior level of functioning. Twenty-four-hour crisis response staff link the individual to appropriate services. Crisis response staff provide service to individuals of any age.

Mobile Crisis Response services is a crisis service component of community-based crisis stabilization services (CSCBS) and we anticipate the MCR provider will meet the eligibility requirements to provide CSCBS services as well.

Local Program

County Social Services Region (CSS) plans to facilitate the implementation of Mobile Crisis Response (MCR) services throughout the entire Region. CSS will entertain and coordinate implementation by multiple providers within the CSS North, East, and South Quadrant catchment areas that accomplishes regional coverage of MCR services. There must be a designated expert agency responsible for coordination, implementation, and outcome measures of fidelity.

The goal of Mobile Crisis Response services is to provide on-site, in-person intervention for individuals experiencing a mental health crisis. Crisis stabilization community-based services are a component of mobile response which provide short-term services designed to de-escalate a crisis situation and stabilize an individual experiencing a mental health crisis, provided where the individual lives, works, or socializes.

Mobile Crisis Response is a mental health core service established in HF2456. Intensive mental health core services are to be available by July 1, 2021.

Goals/Values for Mobile Crisis Response

To provide connectivity to mental health services through all available resources to increase community capacity by allowing individuals to continue living in their own home with the least amount of displacement possible.

To offer Mobile Crisis Response services by trauma-informed staff who will assess the crisis, attempt to stabilize and diffuse the crisis, provide emotional support, and refer individuals to community resources to assist them in living hopeful and happy lives.

To promote community inclusion and capacity through nurturing partnerships.

To provide individual's with a person-centered crisis plan which identifies supports and resources they can access to assist with managing their mental health.

Questions may be submitted prior to the Bidder's Meeting on Friday August 7th, 2020 at 11:00am via Go-To Meeting however, no answers will be provided and/or circulated prior to that date.

Questions may be submitted in written form no later than Friday August 14, 2020 to:

RFP Contact Name: Megan Taets

Contact Address: 415 Pleasant Street

Telephone Number: 641-832-2615 ext. 228

Email Address: mtaets@countysocialservices.org

Answers to questions provided will be posted on the CSS website:

www.countysocialservices.org

II. INTENT

It is the intent of this Request for Proposal (RFP) to award a contract to the proposal(s) that best accommodates the various program requirements. CSS reserves the right to award any contract prior to the proposal deadline stated within the “Scheduled Timeline” or prior to the receipt of all proposals and refuse any proposal or contract without obligation to either CSS or to any Bidder offering or submitting a proposal.

All invited Bidders are required to submit a “Letter of Intent” no later than 4:30pm on Friday July 31, 2020 informing CSS of their intent to submit a proposal. Bidders who fail to meet this deadline will not be eligible to submit a proposal.

III. MINIMUM APPLICATION REQUIREMENTS

1. Each Minimum Qualification and item in the Evaluation Criteria will be addressed. Organize responses in the same order as items are shown on the RFP.
2. Responses will be prepared simply and economically, providing straightforward and concise, but complete and detailed description of your ability to meet the requirements outlined in this document. Emphasis will be on the completeness of content.
3. The response must use standard size type (a font size of no less than 12 point) and must be on 8.5X11-inch white paper.
4. Responses will contain, in the following order:
 - Proposer Qualifications
 - Scope of Work
 - Proposed Budget
 - Proposed Budget Narrative
5. RFP submissions can be sent via email in PDF format.

IV. PROPOSER QUALIFICATIONS

The following are the minimum requirements the proposer, hereafter referred to as the Agency, must demonstrate in order to continue in the proposal review process. AGENCIES THAT DO NOT MEET THESE REQUIREMENTS WILL NOT BE REVIEWED.

1. The Agency must be able to provide services in compliance with PL 1-1-645 Title V, Subtitle B; Part 438 Balanced Budget Act (BBA); 45 CFR Health Insurance Portability and Accountability Act (HIPAA), Pacts 160 and 164; the Iowa Code section 249A.4 Chapters 77-79; Iowa Administrative Code (ARC 9276B) rule 441-24.33 (225C); and the CSS Administration Policies and Procedures and its revisions.
2. The Agency must be currently enrolled as a Medicaid provider and work with individuals who have mental health and developmental disability needs.
3. The Agency must provide proof that they are contracted with all Managed Care Organizations (MCO's) in Iowa.
4. The Agency must follow standards in 441 IAC 79.3(249A) for maintenance of records. These standards pertain to all Medicaid providers.
5. The Agency must assure that any services delivered by an individual or agency, either through employment by or a contract with the enrolled provider, shall comply with the requirements that are applicable to the enrolled provider.
6. The Agency must be able to submit data electronically in the CSS approved format to the CSS Information System (CSN) or describe an implementation plan in detail on how the agency will submit data electronically to the CSN network prior to award.
7. The Agency must submit with the proposal a transmittal letter signed by an individual authorized to legally bind the organization to fulfill the RFP requirements. The letter will include a statement indicating the legal entity, licensure, and tax status of the organization(s) responding to the RFP, and the name, title, mailing address, email, telephone, and fax number of the individual(s) to be contracted by CSS during the proposal review and selection process.
8. Include a statement attesting that Mobile Crisis Response funding will not be used to supplant any existing programming.

V. SCOPE OF WORK

A. Goal

To implement Mobile Crisis Response services within the CSS Region- North, East, and South Quadrants.

B. Number of Program Individuals Served

The Agency will have the capacity to serve the number of projected individuals needing this service within 6 months of service implementation.

C. Definition

Mobile Response- Crisis Response staff provide on-site, in-person intervention for individuals experiencing a mental health crisis.

MCR is a component of community-based crisis stabilization services which deescalates a crisis situation and stabilizes an individual following a mental health crisis where the individual lives, works, or socializes.

D. Program Requirements

1. Mobile Crisis Response staff provide crisis response services in the individual's home or at locations in the community. Staff work in pairs to ensure staff safety and the safety of the individual served. A single staff member may respond if another person who meets one of the criteria listed in 24.24(2)a will be available on-site.
2. Twenty-four-hour access to a mental health professional is required.
3. Mobile response services are delivered to individuals in crisis in a timely manner.
4. Mobile response staff are dispatched immediately after a crisis screening has determined the appropriate level of care. If mobile response staff are already responding to another call, staff explain to the caller that there may be a delay in receiving a mobile response and offer an alternative response.
5. Mobile response staff have face-to-face contact with the individual in crisis within 60 minutes from dispatch. If the mobile response staff are responding to another request, there may be a delay in receiving mobile response and an alternative response should be provided.

6. Mobile response staff will have the capacity to provide transportation for the individual to the appropriate level of care.

*See Attachment A- Crisis Response Program Policies

E. Collaboration

Mobile Response (MR) will connect individuals to the mental health system while successfully delivering MR services.

F. Reporting Requirements

1. Data Collection

Data is collected to track and trend response time from initial dispatch, the time to respond to dispatch when a team is already in response; diversion from or admission to hospitals, correctional facilities and other crisis response services.

- a. The Agency will collect and report participant data to the CSS Administration Information System (CSN) according to the CSS Administration Policies and Procedures and the contract.
- b. The Agency will collect data and report to the department within 60 days of the close of the fiscal year as outlined in IAC 441-24.36(2).
- c. When an action plan is developed, a copy is sent within 24 hours, with the individual's signed consent, to service providers, the individual, and others as appropriate.

The following information is documented in the individual's service record:

1. Triage and referral information
 2. Reduction in level of risk present in the crisis situation
 3. Coordination with other mental health resources
 4. Names and affiliation of all individuals participating in mobile response.
- d. A follow-up appointment with the individual's preferred provider will be made, and mobile response staff will follow up with the individual and document contact or attempt to contact on a periodic basis until the appointment is made.

2. Reports

- a. The Agency will submit quarterly reports to CSS Administration on progress as required by the contract.

- b. The Agency will participate with CSS Administration in measuring, reporting, and evaluating the project.
- c. The Agency will provide CSS Administration or its designee access to all necessary data and data sources required for completion of the evaluation process.
- d. Failure to submit required reports within the time specified may result in suspension or termination of the contract, withholding of additional awards for the project, or other enforcement activities, including withholding of payments.

G. Record Keeping

- 1. The Agency will maintain records that adequately identify the source and application of funds provided for financially assisted activities.

- 2. The Agency must maintain medical records for five years from the date of service as evidence that the services provided were:
 - Medically necessary
 - Consistent with the diagnosis of the member’s condition
 - Consistent with evidence-based practices

2. Timeline for Program Implementation Schedule

July 22, 2020	Board Initiates RFP for Mobile Response Services
July 31, 2020	Request Letter of Intent*
August 7, 2020 at 11:00am	Bidder’s Meeting
August 14, 2020	End Question Period
August 31, 2020	RFP Submission Deadline
September 11, 2020	Selection Committee Reviews and Scores RFP
September 18, 2020	RFP Award and Plan Development
September 23, 2020	CSS Board Approves Contract
January 1, 2021	Program Launch South Quadrant
April 1, 2021	Program Launch North and East Quadrants

*Letter of Intent should include the following: Name of Agency, Contact Information, and Contact Person

VI. FUNDING

The annual amount of funding available for the Program will depend on the Agencies projected start-up costs and progressive enrollment of pre-screened CSS funded individuals. The Agency must provide a letter of support from each of the designated Managed Care Organizations (MCO's) stating their willingness to add this service to their contract for members they determine eligible. The intent of the terms of the negotiated contract with the winning bidder(s) will be cost reimbursement for services provided.

A. Operating Expenses

1. The Agency will submit their agency budget for a partial year budget from your start date-June 30, 2021 and a second report for the period July 1, 2021 to June 30, 2022. The Agency is not eligible for reimbursement costs that exceeds their budget.
2. If needed CSS may provide funding for start-up and outreach/public education 3 months prior to the implementation of Mobile Crisis Response services. CSS will pay the verified expenses submitted on a monthly basis.
3. The Agency will bill monthly. The bill will itemize individuals served for Intervention and Follow-Up services and identify Outreach activities performed.
4. The Agency will submit a cost report for the next fiscal year within 3 months, by September 30th to reconcile reimbursements.
5. The Agency will agree to provide MR services to all residents of the CSS region regardless of their ability to pay or third-party coverage.

B. Availability of Mobile Crisis Response Funds

1. Program start-up funds will be available after the RFP process has been completed and a contract is negotiated and signed.
2. The Agency will bill an enrolled individual's third-party insurance and deduct any third-party reimbursements from the cost to CSS. This will be measured by audit and review.
3. The Agency will submit a report by client for third party reimbursements.

VII. PROPOSAL EVALUATION CRITERIA

A total of 500 points will be awarded for the written response to the RFP in the following categories:

1. Agency Qualifications (100 points)
2. Services to be Provided (50 points)
3. Collaboration (100 Points)
4. Evidence-based Outcomes (50 points)
5. Budget Detail and Narrative (50 points)
6. Agency Performance on current and past projects and contracts (100 points)
7. Optional Interview (50 points)

1. Agency Qualifications

Points in this category will be awarded based on the extent to which the Agency can demonstrate experience with the identified areas described below. The RFP Selection Review committee will score the responses.

The Agency must demonstrate a commitment to the crisis model and willingness to implement recovery-based practice guidelines and crisis training/coaching for staff.

The proposal should describe and document the Agency's experience with:

1. Providing crisis response services to adult persons with mental illness who are experiencing a mental health crisis.
2. Providing mental health services in the geographic area, e.g. urban, suburban, in which the Mobile Crisis Response Team will operate.
3. Engaging individuals with IDD and mental health with the CSS ISTART team to be the first follow up call to create a support network that is able to respond to crisis needs at the community level.
4. Providing 24-hour 7 days a week face-to-face crisis response.

5. Provision of multidisciplinary team services for individuals who experience mental illness.
6. Providing integrated co-occurring disorder treatment.
7. Providing comprehensive crisis assessment services including co-occurring disorder screening/assessment.
8. Provision of services that promote community tenure and/or reduce recidivism (include outcome data that demonstrates current program performance).
9. Providing culturally relevant services to diverse populations.
10. Involving individuals and their families in the conceptualization, planning, implementation, and evaluation of mental health resources and services.

2. Services to Be Provided

Points in this category will be awarded for complete, coherent, and realistic descriptions of the services to be provided. Proposals must demonstrate that the agency understands Mobile Crisis Response and has a commitment to providing this service with high fidelity. Please respond to each of the content areas below. Proposals should describe, in detail, the agency's plan for each of the areas below.

A. Staff Composition, Roles, Hours of Operation, and Training:

1. Describe how the Agency will meet the standards for crisis response staff identified in IAC 44124.24(225C).

a. One or more of the following qualifications are met:

1. A mental health professional as defined in Iowa Code section 228.1
2. A bachelor's degree with 30 semester hours or equivalent in a human services field (including, but not limited to, psychology, social work, nursing, education) and a minimum of one year of experience in behavioral or mental health services.
3. A law enforcement officer with minimum of two years experience in the law enforcement officer's field.

4. An emergency medical technician (EMT) with a minimum of two years experience in the EMT's field.
 5. A peer support specialist with a minimum of one year experience in behavioral or mental health services.
 6. A family support peer specialist with a minimum of one year experience in behavioral or mental health services.
 7. A registered nurse with a minimum of one year of experience in behavioral health or mental health services.
 8. A bachelor's degree in a non-human services-related field, associate's degree, or high school diploma (or equivalency) with a minimum of two years of experience in behavioral or mental health services, and 30 hours of crisis and mental health in-service training (in addition to the required 30 hours of department-approved training).
2. Documentation in staff records to verify satisfactory completion of department-approved training including:
 - a. A minimum of 30 hours of department-approved crisis intervention and training.
 - b. A post-training assessment of competency is completed.
3. Describe how the Agency will staff and structure the Mobile Crisis Response Team to provide 24 hour 7 days a week face-to-face crisis response and intervention.
4. Describe the Agency's plan to provide outreach and public education to inform persons from schools, hospitals, local law enforcement, and other referral sources regarding the protocol for MCR services.
5. Describe the Agency's staffing plan, including disciplines, position titles, qualifications, number of positions, and full-time equivalents, for this project.
6. Describe the Agency's program start-up, team building and staff training activities. Provide a program implementation schedule, including start-up to full implementation. Describe Agency's ability to meet start-up timelines specified in section V. The CSS Region will work collaboratively with the Mobile Crisis Response Team to identify training resources.

7. Describe in detail the training needs of program staff, including specific staff competencies and practice guidelines needed to implement Mobile Response. Include sources of the training and an approximate schedule.

B. Program Size, Location and Intensity:

1. Describe the geographical area or areas in which the Mobile Crisis Response Team(s) will operate and how services might meet the needs of persons from different parts of the region.
2. Describe the Agency's plan for service delivery of face-to-face contact with the individual in crisis within 60 minutes from dispatch.
3. Describe the Agency's plan for obtaining data to track and trend response time from initial dispatch, the time to respond to dispatch when a team is already in response, diversion from or admission to hospitals, correctional facilities, and other crisis response services.
4. Provide a copy of the Agency's action plan to include: triage and referral information, reduction in the level of risk present in the crisis situation, coordination with other mental health resources, and names and affiliation of all individuals participating in the mobile response.
5. Describe the Agency's plan to track that the action plan is signed by the individual and is sent within 24 hours to the individual, service providers, and others as appropriate.
6. Describe the Agency's plan to follow up with the individual and document contact or attempt to contact on a periodic basis until a follow-up appointment with the individual's preferred provider is made.

C. Admission Activities for Mobile Response:

- a. The member is presenting active symptomology consistent with a mental health crisis
- b. The mental health crisis is interfering with the member's activities of daily living

- c. The factors leading to admission and/or the member's history of treatment suggest that the symptoms can be stabilized with crisis stabilization services within the community
- d. A crisis screening indicates that mobile response service is appropriate to be provided where the crisis is occurring.

3. Collaboration

1. The Agency shall establish a working relationship with the 24/7 crisis line- Your Life Iowa/dispatch to coordinate effective dispatch for the Mobile Crisis Response team. They will coordinate the crisis screening process and criteria necessary to meet the appropriate level of care. For calls needing MR services the Agency will ensure the crisis line has direct contact access to mobile crisis response first responder for each county.
2. The Agency(s) shall establish collaborative working relationships with the individual's natural supports in an attempt to directly involve friends, family, and the community of the individual to receive the best outcome.
3. The Agency shall establish collaborative working relationships with the individual's provider network to assist with implementing a crisis action plan/their existing WRAP plan/cross systems plan, or other advanced directive the individual has in place with the most coordinated response.
4. The Agency shall establish collaborative working relationships and provide outreach at least on a quarterly basis to local police and sheriff departments. The Agency can respond with law enforcement when requested.
5. The Agency shall establish collaborative working relationships with the CSS ISTART team and make referrals or work together with an established client. The ISTART coordinators are on-call 24/7 for consultation for individuals with a MH/ID diagnosis. ISTART coordinators can provide follow-up to ensure the individual connects with referring agencies and assist with identifying available resources.

6. The Agency shall establish collaborative working relationships with the CSS care teams, MCO case managers, or IHH care coordinators. The Agency will connect individuals to their assigned social worker and if not working with a social worker the CSS care team can make this referral. If the MR team is experiencing several calls for an individual they can staff the case with the CSS Quadrant Supervisor to identify additional support needs.
7. The Agency shall establish collaborative working relationships and provide outreach to schools, colleges, and universities on a quarterly basis. The Agency will establish a point of contact at each school, college, or university to ensure they follow protocol in providing Mobile Response services.
8. The Agency shall establish working relationships and provide outreach to rural access hospitals on a quarterly basis. The Agency will respond to rural access hospital emergency departments and collaborate with the emergency departments for psychiatric screenings and discharge planning to the community or an alternate level of care other than inpatient hospitalization. The Agency will provide transportation to the next alternative or appropriate level of care.
9. The Agency shall establish working relationships and provide outreach to the major hospitals, primary care physicians, and the local public health agencies. The Agency will provide awareness of how to access mobile response services and educate them about the appropriate referrals.

4. Evidence-based/Outcome Measures

Points in this category will be awarded based on the understanding of evidence-based/outcomes and the likelihood of them being successfully integrated. Practices that should be considered in this group should include but may go beyond SAMSHA's Evidence-based Practices of Motivational Interviewing and Family Psycho-Education.

The Agency should demonstrate a commitment to evidence-based practices and a willingness to implement evidence-based practice guidelines, train staff to the practices, and monitor fidelity to these standards.

Proposals should describe the agency's plan of each of the areas below:

1. Describe which evidence-based practices the agency believes are feasible in this Mobile Crisis Response program at the existing funding level.

2. Describe how the agency will staff and structure their staff to meet the MCR requirements and the evidence-based practice standards.
3. Describe the Agency's start-up plan and time-schedule for each of the evidence-based practices they commit to develop within MCR.
4. Describe the training needs of program staff to implement each of the evidence-based practices the agency commits to develop within MCR.
5. Describe how funds will be allocated to implement evidence-based practices within MCR.
6. Describe the Agency's outcomes of MCR and how will the Agency measure their outcomes.

5. Budget Detail and Narrative

1. Provide a partial year start date-6/30/2021 line item budget.
2. Provide an annual (12-month period) Line Item Budget not to exceed expenditures.
3. Submit a projected budget for years 2 and 3.
4. Provide detailed information of the staffing configuration and the costs for proposed staffing as required.
5. Specify the source and amount of any funds and resources to be used from other sources including third party reimbursements, grants, etc.
6. Describe how the budget sufficiently supports the proposed response to the requirements of the RFP.
7. Describe how records will be maintained identifying the source and application of funds provided.

8. Please identify any start-up funds needed to implement the program, including an outreach and training budget.

6. Agency Performance of Current and Past Projects and Contracts

Points will be awarded in this area based on Agency history and past performance with serving this population and delivering crisis services. We will also consider success in implementing new projects according to award specifications, demonstrated fiscal management, and demonstrated compliance with contract reporting requirements.

7. Optional Interview

If a selection cannot be made based on the written proposal evaluation and the Agency performance rating alone, CSS Administration shall elect to interview the top two or more Agencies. Interviews will be worth 50 points. If interviews are conducted, the final award would be based upon the total points awarded for the written evaluation, agency performance and the oral interview.

VIII. DECISION PROCESS

Only those proposals that meet the minimum requirements stated in Section III will be reviewed by the Selection Committee and approved by the CSS Administration. The responses will be rated according to the points specified in the Evaluation Criteria above.

It is tentatively scheduled that within one week after the response deadline, August 31, 2020 the selection committee will meet to review the submitted RFP's. At that meeting, the committee will:

- Review each bidder's independent ratings of the responses
- Tabulate scores for each proposal
- Generate for those tabulated scores a final ranking for all responses

IX. GENERAL PROCUREMENT INFORMATION

RFP Amendments

CSS may, at any time before execution of a contract, amend all or any portion of this RFP. CSS will mail any RFP amendments to you. If there is any conflict between amendments or between an amendment and the RFP, whichever document was issued last in time shall be controlling.

Retraction of this RFP

CSS is not obligated to contract for the services specified in this RFP. CSS reserves the right to retract this RFP in whole, or in part, and at any time without penalty.

Rejection of All Proposals

This RFP does not obligate the CSS to contract for services specified herein.

Most Favorable Terms

CSS reserves the right to make an award without further discussion of the proposal submitted. Therefore, the proposal should be submitted initially on the most favorable terms that the proposer can put forward. There will be no best and final offer procedure. CSS reserves the right to contact a bidder for clarification of its proposal.

The proposer should be prepared to accept this RFP for incorporation into a contract resulting from the RFP. Contract negotiations may incorporate some or the entire proposal. It is understood that the proposal will become a part of the official procurement file on this matter without obligation to CSS.

Attachment A

 Iowa Department of Human services	Provider and Chapter Crisis Response Services	Page 5
	Chapter III. Provider-Specific Policies	Date May 1, 2018

- Prescription medication.
- Crisis details.
- Stress indicators and level of stress.
- Substance use.

2. Mobile Response

Legal reference: [441 IAC 24.36\(225C\)](#)

Mobile crisis response services are on-site, in-person interventions for individuals experiencing a mental health crisis.

Mobile crisis response services are provided in the individual's home or at any other location where the individual lives, works, attends school or socializes.

Mobile response staff are dispatched immediately after crisis screening has determined the appropriate level of care.

Admission criteria for mobile response services:

- The member is presenting active symptomology consistent with a mental health crisis, *AND*
- The mental health crisis is interfering with the member's activities of daily living, *AND*
- The factors leading to admission and/or the member's history of treatment suggest that the symptoms can be stabilized with crisis stabilization services within the community, *AND*
- A crisis screening indicates that mobile response service is appropriate to be provided where the crisis is occurring.

3. Twenty-Three-Hour Crisis Observation and Holding Legal

reference: [441 IAC 24.37\(225C\)](#)

Twenty-three-hour crisis observation and holding services are designed for individuals who need short-term crisis intervention in a safe environment less restrictive than hospitalization.