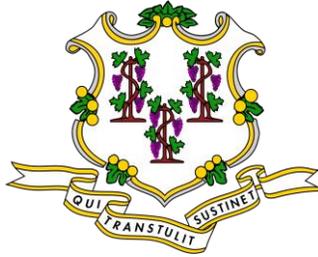


**STATE OF CONNECTICUT PROCUREMENT NOTICE**



**Request for Proposals (RFP) For  
Home Visiting Programs**

RFP Name: OEC-21-CT Home Visiting System

**Reissued By:**

**Office of Early Childhood**

**November 24~~October 5~~, 2020**

The Request For Proposal is available in electronic format on the State Contracting Portal by searching by Organization for Early Childhood, Office of [https://biznet.ct.gov/SCP\\_Search/BidResults.aspx](https://biznet.ct.gov/SCP_Search/BidResults.aspx)

or from the Department's Official Contact:

Name: Sondra Crute  
Address: Office of Early Childhood, 450 Columbus Blvd, Suite 205, Hartford, CT 06103  
Phone: (860) 500-4434  
E-Mail: OEC.RFP@ct.gov

The RFP is also available on the Department's website at [ctoec.org](http://ctoec.org) and on the [OEC Home Visiting Webpage](#). Respondents must register for the pre-bid conference at the following link:

<https://attendee.gotowebinar.com/register/6353923074810094863>

**RESPONSES MUST BE RECEIVED NO LATER THAN**

**January ~~29~~15, 2021**

**No later than 5:00pm EST**



Ned Lamont  
Governor  
Susan Bysiewicz  
Lt. Governor

# STATE OF CONNECTICUT

## OFFICE OF EARLY CHILDHOOD



Connecticut Office of  
Early Childhood  
Beth Bye  
Commissioner

**\*Please see supplemental cover letter for summary of RFP changes posted on [OEC website](#) and [Biznet](#) released on November 24th.**

September 1, 2020

Dear Colleagues and Partners in This Work:

Thank you for your interest in the Office of Early Childhood's (OEC) Home Visiting Program. These are indeed difficult times for children and families. COVID-19 has challenged our systems in ways that we could not have anticipated. We need to be patient and flexible with one another at this time. OEC is committed to working closely with our home visiting providers to support our workforce and programs through this moment of great uncertainty. We will be responsive to your questions as you decide if this opportunity is right for your organization, as you plan, and if you apply.

This is also a moment to reflect on and re-imagine how our home visiting system can move in a direction that produces better outcomes for families, many of whom were hurting even before the pandemic, and to address the other crisis in this nation - ongoing equity issues.

### **About this procurement:**

OEC is excited to share this procurement with a bold new vision that we believe will help focus our system and move the system "upstream" to address family needs and service gaps throughout the state. The vision laid out in this RFP focuses on three key outcomes:

- Improving healthy births for babies and mothers;
- Improving child development and parenting practices; and
- Reducing child maltreatment.

In our journey towards becoming a state with more just and equitable outcomes, this also means a shift towards prioritizing:

- Pre-natal enrollments;
- Mothers and fathers under the age of 20;
- Mothers and fathers who come from racial/ethnic communities disproportionately likely to experience adverse birth outcomes.

This focus came as the result of ***an intense engagement and learning process***. Efforts began more than a year ago and included listening sessions, focus groups centered on family experiences, a needs assessment that looked at the data for every single town across the state, collaboration with various partners to make more data-driven decisions on how we spend limited funding wisely and surveys of providers to understand your challenges.

**We designed this RFP to be responsive to this feedback.**

Through intense engagement, we learned that:

1. Families value home visits and are eager to engage with services sooner rather than later.
2. Navigating referral sources and the current complex service array was often confusing.
3. Families want to be able to refer themselves, not rely on someone else to decide need.

4. The broad reach of home visiting left families uncertain about engaging with services. Of particular concern for families was the potential stigma of home visiting being associated with the child welfare system.

**Vision for Home Visiting:**

Going forward, we envision a more unified Birth-to-Five system with home visiting programs serving as one of the earliest opportunities to engage families in building strong foundations for their children. We aim to:

- *Provide a family-centric service array that links families to the appropriate services.* Family voice is a core principle for our agency and we will continue to uplift it in our policies and practices going forward.
- *Employ streamlined referral and intake processes so that the onus is no longer on families to navigate multiple systems and service arrays.* Providers will be asked to help build out referral networks to better connect families to home visiting and to other services, when appropriate. OEC will work with providers to develop a standardized intake process for families who may find home visiting beneficial.
- *Deploy evidence-based home visiting models that have shown success in the target outcome areas.* OEC will continue to monitor progress towards outcomes through active contract management and performance measurement.

OEC is looking for partners interested in collaborating to launch this responsive approach and help us improve service delivery. Providers will meet regularly with OEC to review data, identify improvements, troubleshoot challenges, and develop strategies to enhance program effectiveness. We also envision a home visiting field that compensates its workers fairly and works towards cultural competence.

**Laying out a Plan to Achieve our Vision:**

We recognize that these changes to our system will require all of us to re-think the way we have been doing things. OEC is committed to collaborating with families and the provider community to realize this vision - informed by families, communities and providers.

**Other Guidance:**

We have an extended RFP period to allow you to think through these changes and out of recognition that COVID-19 may make things harder to plan. We have taken a regional approach to allocating the approximately \$19 million per year in funding available for this procurement. We believe this approach better takes into account existing funding streams and helps make OEC's funding more equitable and responsive to the different needs that exist within our state.

With this additional time and a focus on regional collaboration, we ask that you to take this as an opportunity to develop deeper partnerships in nearby towns, cities, and in your region. We are encouraging applicants to think in terms of regional collaboration.

**Thank you for your service to children and families at this time in Connecticut. Your communities have been counting on you, and you have been answering the call. We know that.**

In Partnership,



Commissioner Beth Bye

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## I. GENERAL INFORMATION

### ■ A. INTRODUCTION

- 1. RFP Name or Number.** OEC-21-CT Home Visiting System
- 2. Executive Summary.** The Connecticut Office of Early Childhood (OEC) is seeking proposals from private and public organizations to implement home visiting programs that prioritize prenatal and infant enrollment using an evidence based home visiting model. OEC is seeking to develop a home visiting system that promotes healthy births, enhances child development and positive parenting practices, and prevents child maltreatment.
- 3. RFP Purpose.**

The Connecticut Office of Early Childhood (OEC) seeks community providers to promote healthy births, enhance child development and positive parenting practices, and prevent child maltreatment.

To achieve the greatest impact, OEC encourages providers to prioritize enrolling caregivers prenatally or with children up to six months of age; mothers and fathers under the age of 20; and/or women from racial/ethnic minorities who are more likely to experience adverse birth outcomes, however providers who employ evidence-based models to support children and families outside of this group are not precluded. According to the Center for Disease Control, Black and American Indian/Alaska Native women have higher rates of pregnancy-related mortality than any other racial/ethnic groups due to disparities in access to care, the compounding effects of structural racism, and other systemic factors.<sup>1</sup> These racial/ethnic disparities often persist across age and education levels.

Providers may enroll families without these characteristics, but OEC requests that providers develop referral pathways to support and prioritize enrolling target families when possible. These target population factors were chosen because of their 1) relationships to policy priorities, 2) linkages to key outcomes, 3) existing outcome disparities, as seen in historical Connecticut home visiting data, and 4) feedback from family focus groups and community listening sessions. OEC will be using active contract management to ensure the prioritization of identified target populations.

- 1. Relationship to policy priorities:** OEC recognizes the meaningful impact of home visiting services on families. To maximize impact, OEC emphasizes early engagement with families, specifically enrollment of caregivers prenatally.
- 2. Linkage to priority outcomes:** A review of the home visiting literature and analysis of historical Connecticut home visiting data highlights relationships between several key target population factors (e.g., child's age, caregiver's age, and race/ethnicity) to priority outcomes.
- 3. Existing outcome disparities:** Analysis of historical Connecticut home visiting data highlights outcome disparities; for example, the preterm birth rate for Black mothers is approximately 14% versus roughly 10% for White mothers and the low birthweight rate for Black mothers is approximately 14% versus about 8% for White

<sup>1</sup> Petersen EE, Davis NL, Goodman D, et al. Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. *MMWR Morb Mortal Wkly Rep* 2019;68:762–765. DOI: <http://dx.doi.org/10.15585/mmwr.mm6835a3>.

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mothers. OEC acknowledges the structural disparities and social determinants of health that can lead to disproportionate negative birth outcomes for many marginalized communities. Thus, OEC encourages providers to promote equitable access to prenatal care and support, which has been shown to improve birth outcomes.<sup>2,3</sup>

In this procurement, providers should articulate their ability [to prioritize enrolling caregivers with the aforementioned](#) characteristics and address the key outcomes (listed in the Performance Measures section of this RFP). Upon contract execution, providers will be required to attend trainings and to enter data into OEC's Early Childhood Information System (ECIS-HV); providers' [target-priority](#) populations and outcomes will be assessed based on programmatic data collected and reviewed for the life of the contract.

This procurement will fund approximately \$19M per year in home visiting services and administration, including performance incentives across the state for 36 months (July 1, 2021 – June 30, 2024). High-performing providers will have the possibility of a two-year extension.

**4. Commodity Codes.** The services that OEC wishes to procure through this RFP are as follows:

- 0600: Services (Professional, Support, Consulting and Misc. Services)

**5. RFP Definitions.** See Appendix A for a full list of defined terms in the RFP.

## ■ B. INSTRUCTIONS

**1. Official Contact.** OEC has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of OEC. Proposers, prospective proposers, and other interested parties are advised that any communication with any other OEC employee(s) (including appointed officials) or personnel under contract to the OEC about this RFP be strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: Sondra Crute

Address: Office of Early Childhood, 450 Columbus Blvd, STE 205, Hartford, CT 06103

Phone: (860) 500-4434

E-Mail: OEC.RFP@ct.gov

Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

**2. Registering with State Contracting Portal.** Respondents must register with the State of CT contracting portal at <https://biznet.ct.gov/AccountMaint/NewLogin.aspx> if not already registered. Respondents shall submit the following information pertaining to this application to this portal, which will be checked by the OEC contact.

- Secretary of State recognition – Click on appropriate response

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<sup>2</sup> Gennaro, Susan, and Bernadette Mazurek Melnyk. "Improving prenatal care for minority women." *MCN. The American journal of maternal child nursing* 41.3 (2016): 147.

<sup>3</sup> Lu, Michael C., et al. "Closing the black-white gap in birth outcomes: A life-course approach." *Ethnicity & disease* 20.1 0 2 (2010): S2.

- Non-profit status, if applicable
- Notification to Bidders, Parts I-V
- Consulting Agreement Affidavit (OPM Ethics Form 5) – Requires Notarization  
<https://portal.ct.gov//media/OPM/OPMForm5ConsultingAgreementAffidavit32814.pdf.pdf?la=en>
- Affirmation of Receipt of State Ethics Affidavit (OPM Ethics Form 6) – Requires Notarization  
<https://portal.ct.gov/media/OPM/Finance/psa/OPMEthicsForm6Final91511PDFpdf.pdf?la=en>
- Iran Certificate (OPM Ethics Form 7) – Requires Notarization  
<https://portal.ct.gov/media/OPM/OPMForm7IranCertification32814pdf.pdf?la=en>

**3. RFP Information.** The RFP, amendments to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:

- OEC's RFP Web Page  
[Ctoec.org](http://Ctoec.org) and on Home Visiting webpage
- State Contracting Portal (go to search solicitations, select "Early Childhood, Office of" as the organization type)  
[https://biznet.ct.gov/SCP\\_Search/default.aspx?Src=CISplash](https://biznet.ct.gov/SCP_Search/default.aspx?Src=CISplash)

It is strongly recommended that any proposer or prospective proposer interested in this procurement subscribe to receive e-mail alerts from the State Contracting Portal. Subscribers receive daily e-mails announcing procurements and addendums that are posted on the portal. This courtesy is provided to assist in monitoring activities associated with State procurements, including this RFP.

**4. Procurement Schedule.** See below. Dates after the due date for proposals ("Proposals Due") are target dates only (\*). OEC may amend the schedule, as needed. Any change will be made by means of an amendment to this RFP and will be posted on the State Contracting Portal and on OEC's RFP Web Page.

- Mandatory Pre-Bid Conference September 15, 2020
- RFP Re-Issued: ~~October 5~~ **November 24**, 2020
- Mandatory Letter of Intent Due: December 18, 2020 by 5:00pm EST
- Deadline for Questions: December 18, 2020 by 5:00pm EST
- Answers Released: Released weekly on Fridays until December 18<sup>4</sup>
- Proposals Due: January ~~29~~<sup>15</sup>, 2021 by 5:00pm EST
- (\*) Proposer Selection: ~~February~~ **March** 22, 2021
- (\*) Contract Negotiations: March ~~22~~<sup>1</sup> - April 30
- (\*) Start of Contract: July 1, 2021

<sup>4</sup> OEC reserves the right to not post answers during holiday weeks.

**5. Contract Awards.** The award of any contract pursuant to this RFP is dependent upon the availability of funding to OEC, the number of proposals received, past provider performance, models selected, and cost to serve considerations. Regions listed below refer to the Department of Children and Families' (DCF) established service regions. Please see the service requirements section of the scope of work for additional details on page 17. OEC anticipates the following funding details:

Region	Estimated Annual Funding
1	\$3,800,000
2	\$2,200,000
3	\$3,400,000
4	\$3,700,000
5	\$3,300,000
6	\$2,200,000

OEC estimated an equitable funding distribution across the regions, as illustrated in the above table, using the estimated need for home visiting, key findings from the federally-mandated Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Needs Assessment, and current home visiting funding from the Department of Children and Families. The estimated annual funding amounts were determined by:

- Establishing an initial funding baseline based on the total population within each region with [OEC's target population factors and/or that had adverse birth outcomes considerations for multiple factors, including demographics, outcome disparities, and geospatial analysis.](#)
- Adjusting this baseline to shift more funding towards regions with a larger number of people living in towns identified as "at risk" by the MIECHV Needs Assessment.
- Adjusting the funding amounts a second time to shift more funding towards regions with a larger number of people living in towns identified in the MIECHV Needs Assessment as lacking DCF-funded home visiting.

Number of Awards: Multiple, at least one per region depending on applications and regional needs.

Contract Term: An **initial term of 36 months**, with the possibility of a two year-extension. Extension will be determined on a case-by-case basis reserved exclusively for high-performing providers that meet key outputs and outcomes discussed in the RFP in the performance metrics section, as well as those that engage effectively in active contract management processes. Final decisions will also be dependent on availability of state and federal funds.

Funding Source: Final awards may include a combination of federal and state funding. This will be determined during contract negotiation and will be dependent on geographic need, funding requirements, and the optimal service array. All contracted providers, including subcontractors, should be able to meet federal and state requirements regardless if they receive state or federal funding. OEC's intention is to ensure consistency between federal and state funding requirements.

**6. Eligibility.** Public or private organizations, for-profits or non-profits legally registered with CT's Secretary of State are eligible to submit proposals in response to

this RFP. Respondents claiming non-profit status must provide proof of nonprofit status, such as a copy of the Internal Revenue Service (IRS) determination letter.

**7. Minimum Qualifications of Proposers.** To qualify for a contract award, a proposer must have the following minimum qualifications:

- Provide sufficient staff at the time of award, including managerial and administrative support to implement the required operational, research, and evaluation services, including the ability to meet OEC data/technology and report requirements defined in the scope of work section.
- Registered with [System of Award Management \(SAM\)](#) by the time of contract execution.

**8. Letter of Intent.** A Letter of Intent (LOI) is required by this RFP. The LOI must be submitted to the Official Contact by e-mail by the deadline established in the Procurement Schedule. The LOI must clearly identify the sender, including name, postal address, telephone number, and e-mail address. Respondents must designate an authorized representative and one (1) alternate. Signing the LOI acknowledges that the representative and one alternate enable only those individuals to communicate with OEC during the open submission period. The organization's chief executive officer or another official with signatory authority must sign the LOI. If a change in representative is needed, contact the official OEC contact to amend the information. The required LOI should also include the anticipated evidence-based model(s) selected and region served (DCF regions 1-6). A sample LOI form can be found in Appendix B. Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.

**9. Inquiry Procedures.** All questions regarding this RFP or OEC's procurement process must be directed, in writing, to [OEC.RFP@ct.gov](mailto:OEC.RFP@ct.gov) before December 18<sup>th</sup>. The early submission of questions is encouraged. Questions will not be accepted or answered in person or over the telephone. All questions received before the deadline will be answered. However, OEC will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed by OEC to be unrelated to the RFP or the procurement process will not be answered. At its discretion, OEC may or may not respond to questions received after the deadline. OEC reserves the right to answer questions only from those who have attended the RFP conference. OEC may combine similar questions and give only one answer. All questions and answers will be compiled into written amendments to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such.

OEC will publish any and all amendments to this RFP on the State Contracting Portal and on OEC's RFP Web Page. At its discretion, OEC may distribute any amendments to this RFP to prospective proposers who attended the RFP Conference.

**10. RFP Conference.** A virtual RFP conference was held on **September 15th** to answer questions from prospective proposers. Respondents were asked to preregister for the conference by **September 11<sup>th</sup>** at the following link:

<https://attendee.gotowebinar.com/register/6353923074810094863>

Attendance at the conference was mandatory. Exceptions or emergency situations that resulted in a respondent not being able to attend the RFP conference had to be

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approved in writing by OEC at least 24 hours before the conference. Failure to attend or receive written approval to miss the mandatory RFP conference resulted in disqualification from the RFP process. Weather emergencies or service disruptions were also considered. OEC reviewed excuses for validity after the conference.

Prospective proposers were asked to read the RFP in advance of the conference. At the conference, attendees were provided an opportunity to ask questions, which OEC representatives answered at the conference. Any oral answers given at the conference by OEC representatives were tentative and not binding on OEC. All questions submitted were answered in a written amendment to this RFP, which served as the OEC's official response to questions asked at the conference. If any answer to any question constituted a material change to the RFP, the question and answer were placed at the beginning of the amendment and duly noted as such. OEC will release the amendment on the date established in the Procurement Schedule. OEC will publish any and all amendments to this RFP on the State Contracting Portal and on OEC's RFP Web Page.

- 11. Electronic Proposal Due Date and Time.** The email address of [OEC.RFP@ct.gov](mailto:OEC.RFP@ct.gov) is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be received on or before January ~~29~~<sup>15</sup>th at 5:00pm EST.

Proposal received after the due date and time will be ineligible and will not be evaluated. OEC will send an official letter alerting late respondents of ineligibility.

**An acceptable submission must include the following:**

- One (1) conforming electronic copy of the original proposal.

The proposal must be complete, properly formatted and outlined, and ready for evaluation by the Screening Committee.

The electronic copy of the proposal must be emailed to [OEC.RFP@ct.gov](mailto:OEC.RFP@ct.gov) for this procurement. The subject line of the email must read: RFP OEC 21-CT Home Visiting System. Required forms and appendices may be scanned and submitted as PDFs at the end of the main proposal document. Please ensure the entire email submission is within 25MB as this reflects OEC's server limitations. Respondents should work to ensure there are not additional IT limitations from the provider side.

- 12. Multiple Proposals as a Lead Agency are Not Permitted.** The submission of multiple proposals is not an option with this procurement. Respondents can only submit one proposal for a specific region (or within a specific region with established partnerships or a plan to collaborate with other home visiting services). OEC will also be supporting the formation of critical collaborations if needed. Respondents seeking to serve additional geographic boundaries beyond their selected region must seek broader partnerships with another entity and serve as a subcontractor for respondents for those additional regions/geographic areas.

## II. PURPOSE OF RFP AND SCOPE OF SERVICES

### ■ A. OFFICE OF EARLY CHILDHOOD OVERVIEW

The OEC is the state agency charged with fostering cross-systems integration, coordination, and collaboration at the state and local level in order to enhance the health and well-being of young children, families and communities. The OEC brings together leadership and expertise, and a wide range of early childhood and family support services that were formerly at five agencies. The goal of this office is to build an integrated early childhood system that includes high quality services for family support and home visiting services, early intervention services, early care and education programming, and regulation.

Established in 2013, the OEC provides funding standards, regulations, training, and oversight to ensure that early care and education programs for young children:

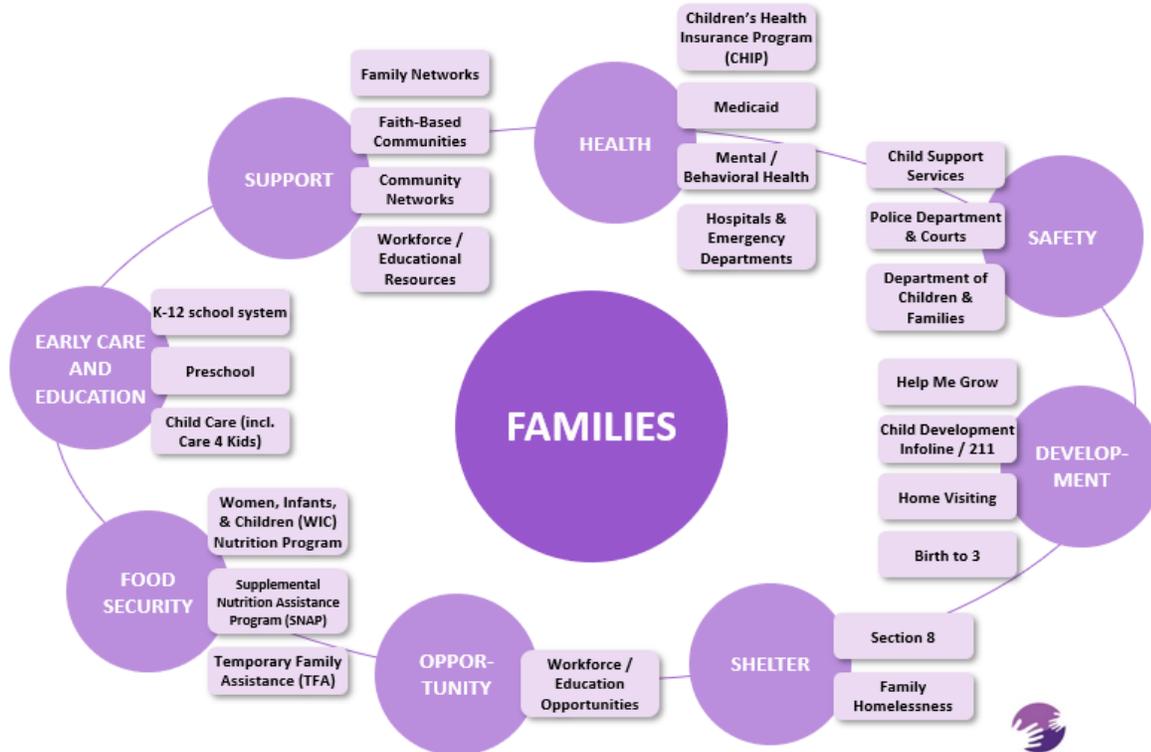
- Are safe, healthy, and nurturing;
- Effectively support children's physical, social, emotional and cognitive development; and
- Are accessible to all children, particularly those facing barriers, risks or challenges to their health development and success.
- Provide equitable access for all.

The OEC is organized into three divisions: Early Care and Education and Quality, Child Care and Camp Licensing, and Family Support. The OEC is the State's lead agency for the prevention of child abuse and neglect (Community Based Child Abuse Prevention-CBCAP), the Birth to Three program, state-funded home visiting programs and the Maternal Infant Early Childhood Home Visiting (MIECHV) grant. The OEC is the State's Child Care and Development Fund (CCDF) agency for child care. In addition, OEC is the state affiliate of the national Help Me Grow program.

#### **CT Birth-to-Five System**

The graphic below describes the overall Birth-to-Five System across CT. Families connect with a variety of systems on a daily basis. While the eight domains below represent critical areas of importance to families, many of the providers operating within each domain function independently with limited interactions. Families are forced to navigate multiple systems and early childhood providers are often unaware of all the systems that families are involved with. OEC recognizes the importance of linkages between early childhood stakeholders and the families that rely on their services. OEC intentionally sought a range of early childhood providers to participate in Community Listening Sessions across the state. The goal was to understand how home visiting fits into the Birth-to-Five system and how to strengthen the connections between these domains and the providers within them.

## Connecticut's Birth-to-Five System



OEC also seeks to coordinate home visiting services into the continuum of care of the Family First Prevention Plan. While the Connecticut plan through the Department of Children and Family Services (DCF) has not been finalized, home visiting's focus on supporting families as early as possible (prenatally or shortly after birth), fits well with Family First's emphasis on supporting families who are experiencing more complex family characteristics such as: substance use; mental health conditions, interpersonal violence; disability and incarceration. Both OEC and Family First focus on the importance of children growing up in safe, stable and secure families. By partnering with families early, home visiting seeks to support them in obtaining healthy birth outcomes, enhance their knowledge of child development and positive parenting practices and prevent child maltreatment.

### ■ B. PROGRAM OVERVIEW (PROBLEM STATEMENT)

#### **Office of Early Childhood Home Visiting Programs**

The Office of Early Childhood is seeking partners to provide evidence-based home visiting services to families [and to prioritize enrollment](#) prenatally or shortly after birth to promote healthy birth outcomes, enhance and promote positive parenting practices, and prevent child maltreatment. By [prioritizing early intervention](#), OEC seeks to cultivate the physical, social, emotional, psychological, and economic conditions that promote family wellbeing. [Recognizing not all children or families are referred at this stage and behavioral health challenges can develop when children are older, OEC is committed to supporting families with these particular needs. However, the overall goal of the home visiting system is to intervene at the earliest possible time.](#)

OEC understands that with limited funding not all families who could benefit from home visiting will receive it. According to the National Home Visiting Resource Center, in 2018 there were 171,700 families in Connecticut who could have benefited from home visiting

services. Connecticut served only 4,624 families. In order to determine how best to allocate limited funding, OEC collaborated with state and national experts to make careful, data-driven decisions on outcome priorities and target populations. Data sources included 12 family focus groups, 12 Community Listening Sessions, 3 Early Childhood Stakeholder meetings, geospatial analysis, OEC Home Visiting data analysis, and a Home Visiting Provider Survey. For the complete findings, please see a research brief developed by the University of Connecticut's School of Social Work [here](#).

The following are the key takeaways:

- Prenatal and other upstream populations are preferred by many, but difficult to access.
- Potential referral sources and families are confused by the array of service models and model eligibility requirements in the state.
- Parents most like the support their child receives in development and learning from home visiting.
- Communities report urgent needs in supporting child social-emotional well-being.
- Parents have concerns about the potential stigma of home visiting and the misconception of being associated with DCF.

Through this procurement, OEC seeks to address these concerns by partnering with providers who can work towards achieving the following key objectives ~~concurrently~~:

1. Promote healthy birth outcomes for the mother and child.
2. Enhance child development and positive parenting practices.
3. Prevent child maltreatment.

OEC recognizes that structural racism and barriers to accessing prenatal services have generated disparate outcomes between different communities in the objectives listed above. While not precluding providers who serve more expansive populations, OEC is particularly interested in working with and awarding providers who can:

- Demonstrate a successful track record of engaging with and serving caregivers from historically marginalized communities as identified by the CDC, including Black and American Indian/Alaska Native women<sup>5</sup> and younger mothers and fathers (i.e. under the age of 20); and
- Articulate clear plans to enroll families prenatally or within the first six months of a child's life.

In addition, OEC plans to work with awarded providers to develop a standardized intake process, designed to increase families' access to home visiting services using evidence-based models that have proven success in achieving the following prioritized outcomes.

**Promote healthy births.** Every year in Connecticut, there are approximately 12% of new mothers who report having late or no prenatal care.<sup>6</sup> Additionally, research has shown that systemic inequities and social determinants of health lead to racial disparities in birth outcomes<sup>7</sup>. Through home visiting, OEC sees a specific opportunity to focus on upstream support and promote healthy birth outcomes and healthy beginnings for both parents and babies. By targeting services to caregivers prenatally and to children during the perinatal

<sup>5</sup> Petersen EE, Davis NL, Goodman D, et al. Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. *MMWR Morb Mortal Wkly Rep* 2019;68:762–765. DOI: <http://dx.doi.org/10.15585/mmwr.mm6835a3>.

<sup>6</sup> Pulled from the [Office of Vital Records](#) for 2018.

<sup>7</sup> Petersen EE, Davis NL, Goodman D, et al. Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. *MMWR Morb Mortal Wkly Rep* 2019;68:762–765. DOI: <http://dx.doi.org/10.15585/mmwr.mm6835a3>.

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period, providers can engage families earlier and longer to better generate long-term impacts. This outcome will be measured through key outcome metrics: reductions in preterm birth rate and low birthweight rate, and increases in postpartum care, well-child visits, and maternal depression referral rate (see the performance measures and incentives section for more details).

**Enhance child development and positive parenting practices.** The existing service array in Connecticut is well-positioned to improve child development and encourage positive parenting practices. Home visiting could thus improve school readiness as a longer-term effect, while continuing to encourage healthy parent-child interactions, which are at the core of home visiting's theory of change. Importantly, enhancing child development will also focus on detecting developmental delays in children and referring children to other services within the state. This outcome will be measured through key outcome metrics: improvements in child development and positive parenting practices, and increased developmental delay referral rate.

**Prevent child maltreatment.** In achieving these goals and thereby establishing healthy starts and positive parent engagement, OEC seeks to prevent child maltreatment in the long-term.

### **Key Background Data**

The following background data provides key information related to the [target-priority](#) population identified in this RFP. Additional insights can be found in the provider report on [OEC's Home Visiting Website](#).

In 2016, there were 36,015 live births in Connecticut. Of those, 3,247 were births with a gestational age less than 37 weeks and 2707 with a birth weight of below 2,707 grams. Within OEC programs, 39% of primary female caregivers enroll prenatally.

Data from the 2019 OEC Community Listening sessions indicated that an overwhelming number of providers wanted home visiting services to move upstream and focus on engaging families before they were in crisis. Participants in the parent focus groups also noted that the prenatal time period was a good time to learn of home visiting services.

With an intentional focus on prenatal enrollment, OEC can provide support to families and women most at risk for poor pregnancy outcomes to promote healthy births and reduce the incidence of preterm birth and low birthweight.

Healthy child development is a critical component of home visiting services and was identified by home visiting families as the main attraction for their enrollment. Parents appreciated the support home visiting provided in their child's development. Through developmental screening, home visiting helps connect families and children to developmental support services. Among enrolled children within OEC's MIECHV funded home visiting programs, 17% have had a delay risk indicated on a developmental screen. Of those, 75% were referred for additional support. According to early intervention data from 2017-2019, on average, 3,053 children received Birth to Three evaluations for delays, but did not meet the service criteria for early intervention services. By engaging in home visiting services, families that are ineligible for early intervention services, are supported, monitored, and continuously screened as their children develop.

Through healthy child development and parent-child attachment, home visiting aims to reduce and prevent child maltreatment. About 3% of enrolled children in OEC home visiting programs have a reported child injury or maltreatment. Children of caregivers with mental

illness or substance use disorder are at increased risk for maltreatment, 18% with mental illness vs. 12% without and 50% with substance use disorder vs. 29% without.

### **Vision for a Successful Program:**

The State's vision is that families are identified and engaged with home visiting early to provide families with the knowledge and support needed to raise healthy children in a safe and nurturing environment. OEC home visiting service providers awarded contracts through this RFP will [prioritize enrolling](#) prenatal caregivers or families with children under 6 months of age and prioritize services to parents under 20 years of age and families most at risk of poor pregnancy outcomes. The OEC is looking to create a home visiting system that accomplishes the following:

1. Utilizes evidence-based home visiting models that have shown success in specific priority outcomes identified by the OEC.
2. Offers a family-centric service array with strength-based approaches that uplifts family voices and links families with the appropriate home-visiting program, regardless of funding stream or state agency.
3. Provides an easily identifiable referral contact for all referral sources including families, medical providers and early childhood stakeholders looking to receive or refer to home visiting and empowers innovative referral networks across the state.
4. Identifies and implements a standardized intake process, in collaboration with awarded providers, to ensure families are referred to the appropriate model of home visiting program.
5. Achieves outcome and performance measures that will be used to inform future provider re-authorization eligibility and re-procurement competitiveness every three to five years. This outcomes-based contracting approach will be a condition of each contract award by incentivizing positive outcomes for clients through outcomes rate card bonuses, designing contracts for active contract management, and requiring participation in OEC-sponsored initiatives.
6. Functions as part of a larger system of Birth-to-Five services that ensures all CT families are positioned for health, opportunity, and success.

### **Priorities for Improving Results**

The following home visiting policy and implementation priorities are a result of careful consideration within OEC of lessons learned during past experiences; feedback from the community sessions, focus groups, and surveys; and an assessment of best practices in other states. OEC also encourages creative proposal responses that include innovative program elements not described in the Scope of Services section, but which the respondent believes would assist with the goals outlined below.

Priorities for this new procurement include:

1. **Implementing data-driven performance management:** As mentioned in the "Vision for a Successful Program" section, OEC will be engaging in active contract management – utilizing data to partner with providers and to work together on challenges, as well as set clear expectations. Additionally, this will help to create regular data feedback loops, so that providers can see how their reported data and information is being used by OEC. In order to

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accomplish this, OEC will expect that providers collect the required data (to be determined by OEC throughout the contract term) in a timely and accurate manner.

**2. Building a strong home visiting workforce within CT:** National research on strengthening the home visiting workforce includes the following: strategic recruitment efforts to find qualified, culturally and linguistically competent staff to address the complexities of home visiting; the provision of strong professional development and continuous learning opportunities; regular reflective supervision by clinical supervisors who are endorsed or are pursuing endorsement in Infant Mental Health; competitive salaries and opportunities for leadership and advancement. OEC is seeking partnerships with providers that can demonstrate a commitment to implementing and adhering to all five principles of a strong home visiting workforce.<sup>8</sup>

**3. Developing consistent intake and referral processes to tailor services to families' needs:** OEC seeks a coordinated, family centric home visiting system that identifies families as early as possible and refers them to the appropriate home visiting program or community service in their region. Programs in all regions of the state should provide a system that identifies and implements a process to ensure families are referred to the appropriate level, intensity and duration of services that they need. OEC plans to work with awarded providers collaboratively to create a consistent intake process statewide.

**4. Increasing family engagement and reducing stigma:** Family focus groups held throughout the state in the summer of 2019 indicated families were concerned about the stigma related to home visiting and the perception that home visiting was linked to the child welfare system. Families believed the best way to reduce this stigma was to market home visiting as a program that would engage parents in achieving health and developmental outcomes for their child. Families also indicated they wanted to be the one making the decision to sign up for home visiting, rather than a referral source doing so on their behalf. OEC will expect awarded providers to present a clear, strategic and coordinated marketing approach for home visiting in their region that targets both early childhood stakeholders and families and clearly delineates how to refer to voluntary home visiting. Additionally, providers are expected to incorporate family voice into improving service delivery as part of their programmatic planning. This may include parents enrolled in home visiting participating in OEC's Parent Cabinet.

**5. Increasing resources for home visiting and expanding billing capacity for providers (i.e. Medicaid):** Currently, the demand for prenatal home visiting services in Connecticut exceeds the supply that can be funded by OEC. OEC is currently working with the Department of Social Services to assess the feasibility of using Medicaid funding for home visiting services across the state, with the hopes of increasing the amount of resources available for providers. OEC will expect awarded providers, if eligible, to participate in Medicaid billing opportunities as they arise during the contract term.

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<sup>8</sup> Sandstrom, Heather, Sarah Benatar, Rebecca Peters, Devon Genua, Amelia Coffey, Cary Lou, Shirley Adelstein, and Erica Greenberg. 2020. Home Visiting Career Trajectories: Final Report. OPRE Report #2020- 11, Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

## ■ C. SCOPE OF SERVICE REQUIREMENTS

### **Organization Requirements:**

OEC is seeking partnerships with *community organizations*<sup>9</sup> to provide evidence-based home visiting services to vulnerable pregnant and/or parenting families to support positive birth outcomes and maternal/child health, increase parental knowledge of child development and reduce and prevent child abuse, neglect and unintentional injuries. Organizations must serve communities within the OEC-identified region they are awarded, however service to additional communities outside of their designated region will be allowed on a case-by-case basis through sub-contractual relationships.

Awardees are expected to utilize the evidence-based model(s) outlined in their application and adhere to all requirements and protocols prescribed by their model(s).

### **Home Visiting Models:**

OEC has determined that there are four current [preventative](#) evidence-based models that meet Health and Human Services criteria for effectiveness and that can be tailored to make progress on all OEC identified key outcomes related to healthy births, positive parenting practices, and the prevention of child maltreatment (see Appendix C for additional details).

1. Healthy Families America (HFA)
2. Nurse Family Partnerships (NFP)
3. Parents as Teachers (PAT)
4. Early Head Start

~~Justification for the choice of the model must be clearly stated in the proposal submission section. In addition, respondents must demonstrate a theory of change and how this intervention will bring specific results aligning with OEC identified priorities.~~

Respondents can propose additional models that have met [HHS criteria for evidence of effectiveness, including models tailored for more intensive services](#). ~~However, these models must~~ [should](#) directly focus on OEC's identified [target populations on page 19, as well as](#) ~~and~~ articulate a clear justification of effectiveness in addressing OEC prioritized outcomes.

~~Justification for the choice of the model must be clearly stated in the proposal submission section. In addition, respondents must demonstrate a theory of change and how this intervention will bring specific results aligning with OEC identified priorities.~~

### ***Pilot Initiatives and Innovative Approaches:***

Additionally, OEC is open to supporting pilot initiatives for smaller innovative proposals. As an example, OEC is partnering with the Department of Corrections to promote positive parenting practices to parents that are currently incarcerated and home visits to their children. OEC is also working with doulas to promote healthy birth outcomes among teens.

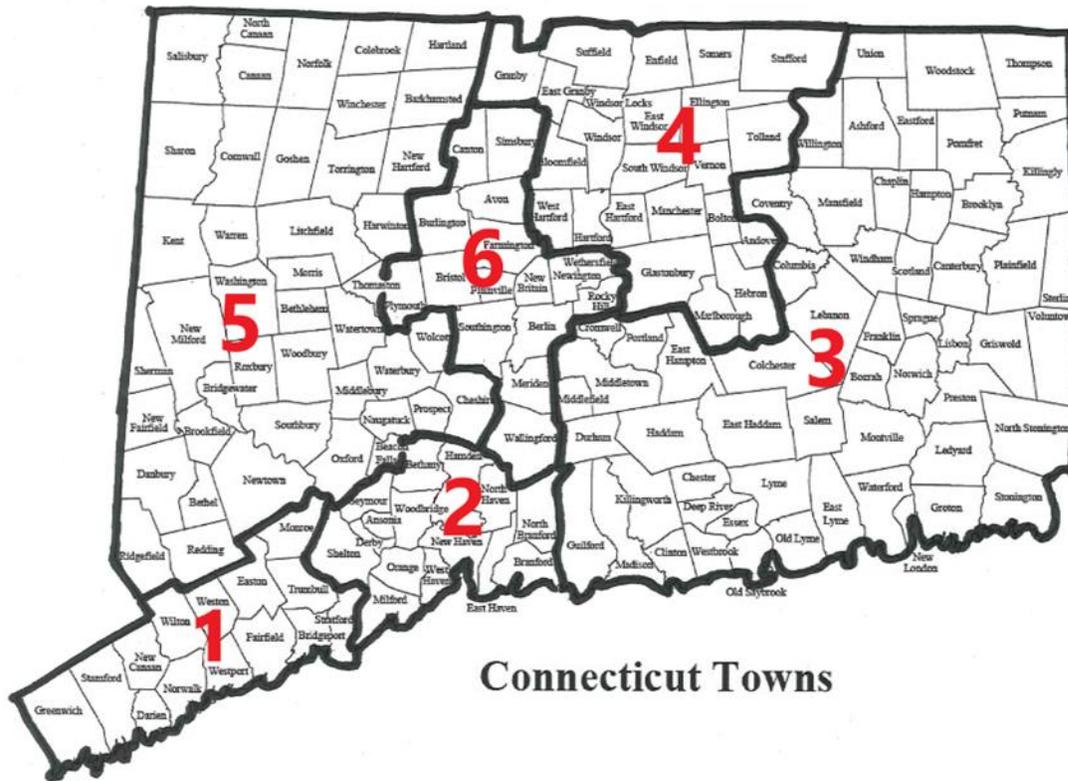
Respondents may also describe approaches to incorporating teleservices for home visiting given the COVID public health emergency and a desire to reach more remote locations.

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<sup>9</sup> A public or private organization that provides services at a local level to improve the well-being of individuals in the community. At least 50% of the board of directors must reside or work in such designated community.

**Service Requirements:**

All towns in CT lie within one of the six OEC-identified regions, based on the Department of Children and Families service regions. Applicants are required to identify municipalities that they plan to serve within their designated region and demonstrate partnerships in their region. OEC will also be supporting the formation of critical collaborations if needed. Awarded organizations must have a physical office in the region they are proposing to serve.



Providers are expected to offer flexible hours of operation that meet the needs of families living within their region. This may also include the use of teleservices as long as model(s) or funding requirements allow it. Awarded providers will be expected to stay up to date on teleservice requirements.

Providers are expected to establish detailed protocols for model eligibility and enrollment to ensure a seamless experience for parents and families. This also includes timely referral procedures to ensure there are links for families to the appropriate services based on need. This includes the use of community partnerships and collaborations.

Awarded providers are expected to maintain the number of family slots agreed upon during contract negotiations. Waitlists are not encouraged by OEC, but if they become necessary, providers must develop appropriate protocols for servicing waitlist families until they are enrolled. Providers will also be required to implement a variety of recruitment strategies to reach and maintain program capacity.

Home visiting programs should be family-centered and provide the support each family needs. Programs will be required to assess families for the following risk factors:

depression, intimate partner violence, child development (including social-emotional) and parent-child interaction. Providers must implement protocols for assessing these risk factors, including specific assessment tools. These protocols should also include additional screening requirements of their prescribed evidence-based model.

Awarded providers will also be expected to take the lead on the recruitment of families and the marketing of home visiting services across their region. Awarded providers are allowed to use allocated funds for marketing services as long as it relates specifically to outreach for home visiting services. This includes active recruitment in places such as maternity wards, doctor's offices, family health centers, and community centers. Awarded providers are encouraged to utilize creative marketing to de-sensitize parents to home visiting and to build trust directly with families. Specific details should be included in respondent's budget proposals.

### **Target-Priority Population:**

OEC Home Visiting Service [providers should prioritize enrolling individuals and families with the following characteristics:](#)

- Families, including fathers, who enroll prenatally or with children up to six months of age.
- Parents under the age of 20, including fathers.
- Women at highest risk for poor pregnancy outcomes and low birth weight babies as defined by the CDC, which includes Black and American Indian/Alaska Native women.<sup>10</sup>

OEC estimates that there are about 35,000 live births a year in CT with approximately 1,200 births to teenage mothers and 4,800 births to women at highest risk for poor pregnancy outcomes. See page 14 for additional background data.

[The aforementioned characteristics should not be considered](#) eligibility criteria, but rather prioritization considerations when programs are considering families to recruit and enroll. Awarded providers are expected to follow the eligibility requirements of their chosen evidence-based model. OEC also recognizes the diversity of regions across CT and the implications for serving particular [target-priority](#) populations.

[OEC does not intend for 100% of the home visiting system to be made up the priority population. The priority population serves as a focal point for prevention services, but OEC will continue to support families as part of a continuum of services. Currently, approximately 80% of OEC home visiting children are enrolled by the age of two. OEC will be working with providers to increase this percentage over time, while ensuring older children are served and appropriately connected to services that meet their needs.](#)

OEC will work with providers through tracking of performance measures and active contract management to ensure [target-priority](#) populations are appropriately enrolled in home visiting services and to troubleshoot intake prioritization challenges. This may include an OEC sponsored intake form developed collaboratively with awarded providers.

### **Older Children with Behavioral Health Challenges:**

[Given the increasing need for mental health services for young children and the impact of COVID 19 pandemic on children and families, OEC understands the need to support children 3-5 years of age. Although this group does not fall within the priority population identified](#)

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<sup>10</sup> Petersen EE, Davis NL, Goodman D, et al. Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. *MMWR Morb Mortal Wkly Rep* 2019;68:762–765. DOI: <http://dx.doi.org/10.15585/mmwr.mm6835a3>

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[above, OEC recognizes that some families may not become aware of home visiting services until the child is older. OEC's objective is to connect with families at the earliest possible stage to prevent behavioral health challenges later in the child's development. This early intervention is not always possible and OEC expects awarded providers to work with families that may have missed enrollment opportunities earlier or that face acute behavioral health challenges. OEC is committed to creating a family centric service array that links families with the appropriate level, intensity, and duration of home visiting programs throughout the state.](#)

### **Staffing Requirements:**

The OEC desires a highly skilled workforce, reflective of the identified at-risk communities and awarded service areas across all roles. This includes bicultural and bilingual employees.

The OEC partnered with the University of Connecticut to conduct an evaluation of the home visiting workforce as part of the MIECHV Innovation grant. Part of the evaluation was to examine further high turnover in the home visiting workforce. The number one reason home visitors left their home visiting role was feeling undercompensated. Home visitor turnover results in not only the loss of families, but also increased program costs due to training of new staff. The OEC is seeking partnerships with providers that can demonstrate a commitment to competitively compensating staff within the OEC salary guidelines for home visiting personnel (see Appendix D for additional information). Staffing salaries and employee turnover will be monitored as part of active contract management.

Awarded providers must implement a strong professional development portfolio and/or training plan for home visiting staff that includes evidence-based home visiting model trainings and credentials for working with families.

Awarded providers are highly encouraged to employ clinical supervisors who have received endorsement in Infant Mental Health, or who are in the process of endorsement. This includes participation in or registration for the CT Association of Infant Mental Health eight-day training, reflective supervision training, and participation in a reflective supervision group. OEC values Infant Mental Health certifications and will financially support programs in the endorsement process. Awarded providers will need to implement a plan ensuring all clinical supervisors are endorsed in Infant Mental Health at level 3 or 4.

### **Subcontractor Requirements:**

Awarded providers must request and obtain prior written approval from OEC before finalizing any subcontractor arrangement. Awarded providers are expected to be responsive and accountable to the OEC for the performance of any subcontractor.

### **Data and Technology Requirements:**

Accurate data is critical when telling the story of OEC Home Visiting to funders and key stakeholders. The OEC currently uses the Early Childhood Information System (ECIS-HV) to collect data on services provided across home visiting models. The use of ECIS-HV or an alternative OEC prescribed data system will be required for all awarded providers. Awarded providers must collect and enter timely, accurate and thorough data on a regular basis. This includes submission of rate card outcomes. Providers are also expected to implement procedures to ensure data is protected; including compliance with personal privacy laws, against loss and unauthorized access.

Awarded providers are allowed to use allocated funds to hire individuals to assist with data entry and performance management. Specific details should be included in respondent's budget proposals.

Awarded providers will be expected to implement continuous quality improvement tools and strategies to improve practices and meet goals. OEC will be providing trainings to assist in this effort. OEC also expects provider procedures for ensuring that family participation and voice inform program improvement.

**Financial Requirements:**

The OEC seeks applications from fiscally strong agencies, therefore, proposers must submit the most recent two years of complete sets of annual financial statements prepared by an independent Certified Public Accountant, and reviewed or audited in accordance with Generally Accepted Accounting Principles (USA).

If a proposer agency has been in business for less than two years, such proposer must include any financial statements prepared by a Certified Public Accountant, and reviewed or audited in accordance with Generally Accepted Accounting Principles (USA) for the entire existence of such firm or corporation.

Awarded providers will be expected to adhere to federal requirements specific to funding allocated in the contract. Further guidance is available at:

- [https://www.acf.hhs.gov/sites/default/files/assets/general\\_terms\\_and\\_conditions\\_2019\\_final.pdf](https://www.acf.hhs.gov/sites/default/files/assets/general_terms_and_conditions_2019_final.pdf)
- [https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=df3c54728d090168d3b2e780a6f6ca7c&ty=HTML&h=L&mc=true&n=pt45.1.75&r=PART#sg45.1.75\\_1344\\_675\\_1350.sg4](https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=df3c54728d090168d3b2e780a6f6ca7c&ty=HTML&h=L&mc=true&n=pt45.1.75&r=PART#sg45.1.75_1344_675_1350.sg4) .

Awarded providers are also required to submit an annual audit no later than six months after the close of the Contractor's fiscal year for all program funds. Such an audit shall include audit recommendations.

OEC is working with the Department of Social Services (DSS) to increase funding to home visiting through Medicaid reimbursement. This will allow home visiting contractors to increase the number of families they serve. Once DSS has a state plan amendment for home visiting services, all eligible contractors will be expected to follow DSS state rules and regulations to bill for additional reimbursement for home visiting.

**Budget Requirements:**

Applications must include program budgets that do not exceed the allocated regional funding as indicated in the RFP.

- **Program Funding Sources and Total Available Funding:** State funding appropriated to Home Visiting is \$10,278,822 and federal funding under the Maternal, Infant, Childhood Home Visiting Grant Program CFDA 93.870 is \$8,716,078.

Budgetary information included in the Respondent's response to this RFP must comply with the cost standards published by the State of Connecticut Office of Policy and Management. The cost standards are available online at <https://portal.ct.gov/-/media/OPM/POSCostStandards101816pdf.pdf?la=en>

Respondents utilizing federal funds will also be expected to adhere to standards prescribed by the Federal Office of Management and Budget Cost Principles <https://www.federalregister.gov/agencies/management-and-budget-office>

Following award, OEC will reach out to awarded providers about allowable expenditures.

In addition to required compliance with the published cost standards, Respondents are advised that a responsive budget must limit annual administrative costs to 10% of the total over the activity budget. Respondents with a federal administrative cap must use the federal percentage. State or federal funding, by activity, will be determined at point of contracting for final determination of administrative cap.

Per OPM Cost Allocation guidelines, unused/unexpended State funding at the end of the State Fiscal Year (SFY) has to be returned to the State and cannot be carried forward to the following SFY. Federal Funds can be carried forward to the next Federal Budget year with OEC review and approval.

In order to comply with State & Federal requirements, awarded providers must maintain separate accounting/cost centers for State and Federal funding using generally accepted accounting practices.

#### ■ D. PERFORMANCE MEASURES

The following performance metrics highlight key priorities that will be analyzed with providers collaboratively during the life of the contract. This is not an exhaustive list, but rather an indication of significant performance metrics of interest to OEC. OEC looks forward to working with providers to define additional important performance metrics.

Metric	Data Source	Data Frequency	Responsibility	Review Cadence	OEC HV Program Past Performance Average <sup>11</sup>
<b>Priority Population Metrics</b>					
<b>Metric #1: Prenatal enrollment</b> Percentage of caregivers enrolled prenatally	ECIS	Monthly	Provider	Monthly during ACM and review of quarterly reports	~40%
<b>Metric #2: Child's age under six months</b> Percentage of children (who enroll after birth) who are under the age of six months	ECIS	Monthly	Provider	Monthly during ACM and review of quarterly reports	~63%
<b>Metric #3: Teenage parents (parent's age under 20 years)</b> Percentage of parents under the age of 20 at enrollment	ECIS	Monthly	Provider	Monthly during ACM and review of quarterly reports	~19%
<b>Metric #4: Women at highest risk for poor pregnancy outcomes and low birth weight babies</b> Percentage of this <a href="#">target priority</a> population	ECIS	Monthly	Provider	Monthly during ACM and review of quarterly reports	Black: ~28%

<sup>11</sup> Source: Connecticut Office of Early Childhood Information System (2017-2020) for OEC-funded Child First, Early Head Start Home-Based Option, Family Check-Up, Nurse-Family Partnership, and Parents as Teachers

Outcome Metrics					
<b>Metric #1: Prenatal care</b> Care trimester initiated in	ECIS	Quarterly	Provider	During review of quarterly reports	<i>No prenatal care:</i> ~3%  <i>1<sup>st</sup> trimester:</i> ~82%
<b>Metric #2: Preterm birth rate</b> Preterm birth rate: the rate of children born before 37 weeks of gestation	ECIS	Quarterly	Provider	During review of quarterly reports	~10.6%
<b>Metric #3: Low birthweight rate</b> Low birthweight rate: the rate of children born at less than 2,500 grams	ECIS	Quarterly	Provider	During review of quarterly reports	~9.2%
<b>Metric #4: Postpartum care and well-child visits</b> Proportion of new mothers having a first comprehensive post-partum visit three months after birth and at least two well-child visits within one month after birth	ECIS Parent self-report	Quarterly	Provider	During review of quarterly reports	~68% Post-partum visit
<b>Metric #5: Maternal depression referral rate</b> Referral rate after risk is indicated from depression screening	ECIS Validated tool	Quarterly	Provider	During review of quarterly reports	~62%
<b>Metric #6: Child development</b> Scores on a validated tool/assessment* to assess child development  <i>*Note: To be decided upon during contracting phase; would either be specified by model or at the provider's discretion</i>	ECIS Validated tool (such as ASQ)	Quarterly	Provider	During review of quarterly reports	N/A
<b>Metric #7: Positive parenting practices</b> Scores on a validated tool/assessment* to assess parent-child interaction and positive parenting practices  <i>*Note: To be decided upon during contracting phase; would either be specified by model or at the provider's discretion</i>	ECIS Validated tool (such as PICCOLO, DANCE, HOME, and CHEERS)	Quarterly	Provider	During review of quarterly reports	N/A
<b>Metric #8: Developmental delay referral rate</b> Referral rate to services if developmental delay is ever indicated on an ASQ or ASQ:SE screening	ECIS Using ASQ or ASQ:SE for screening	Quarterly	Provider	During review of quarterly reports	~75%

<b>Metric #9: Child maltreatment</b> Voluntary self-report or validated tool/assessment  <i>*Note: To be decided upon during contracting phase</i>	ECIS  Validated tool (such as Child Abuse Potential Inventory)	Quarterly	Provider	During review of quarterly reports	N/A
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In addition to performance metrics relating to enrollment and key outcomes, OEC will also be tracking engagement with OEC data systems and initiatives. For example, as OEC launches survey tools such as the Sparkler App to engage families, OEC will use participation metrics as a factor in measuring provider performance.

Performance Incentives:

In 2018, the Connecticut Office of Early Childhood launched a year-long home visiting outcomes rate card pilot. An outcomes rate card is an innovative procurement tool through which government defines a menu of outcomes it wishes to “purchase” and the amount it is willing to pay each time a given outcome is achieved.

In developing the home visiting rate card pilot, OEC focused on outcomes that generated significant value to families, communities and government; were measurable, observable, and could be linked to administrative data sets; and focused on two-generational impacts. The rate card offered all providers equal and fair opportunity to earn bonus payments by incorporating family risk levels and historical data. The additive, outcome-based bonus payments served as a quality improvement mechanism for providers— shifting their attention to key, near-term outcomes.

Through this RFP, OEC will continue its progress toward performance orientation for multi-generational services and utilize rate cards as a measurement tool and a mechanism to encourage providers to focus on achieving meaningful outcomes. Though the rate card outcomes have not been defined for the contracts awarded through this RFP, they will likely be closely related to the metrics in the “Performance Measures” section.

The total amount allocated to rate card payments and the payments per outcome achievement will be determined by OEC after the contracts are executed, when available appropriations for this purpose are clearer.

**■ E. CONTRACT MANAGEMENT/DATA REPORTING**

As part of the State’s commitment to becoming more outcomes-oriented, OEC seeks to actively and regularly collaborate with providers to enhance contract management, improve results, and adjust service delivery and policy based on learning what works. Therefore, OEC expects all awarded agencies to actively engage with OEC and their peers to use data to monitor and understand performance, troubleshoot challenges, and spread best practices.

OEC will work with providers to set expectations for what contract management will look like in any resulting contract. These expectations include, but are not limited to attending convenings and regularly scheduled meetings focused on assessing progress towards service provisions for [target-priority](#) populations, measuring outcome indicators, and advancing OEC’s stated vision for a more unified home visiting system.

This contract management strategy necessitates timely and complete data entry into Early Childhood Information System (ECIS-HV); this is a requirement of this procurement cycle. Reliable and relevant data ensures compliance, informs trends to be monitored, evaluates results and performance, and drives service improvements. As such, OEC reserves the right

to request/collect other key data and metrics from providers – including client-level demographic, performance, and service data. While OEC strives to harmonize data and reporting requirements between state and federal funding streams, any contracted providers receiving federal funds as a result of this procurement will also be expected to comply with federal data reporting requirements, as noted on the Health Resources and Service Administration’s (HRSA) website.

While no explicit performance targets are being set at this time, OEC will use system-level historical averages and/or provider-specific prior performance figures as benchmarks to assess ongoing provider performance.

Furthermore, data collected will be used to identify high-performing providers for a potential two-year extension at the end of Year 3. The magnitude of data performance on future funding allocations is to be determined; OEC will offer flexibility as providers transition services to potentially new [target-priority](#) populations and continue to adapt in light of COVID-19.

### III. PROPOSAL SUBMISSION OVERVIEW

#### ■ A. SUBMISSION FORMAT

1. **Required Outline.** All proposals must follow the required outline presented in Section IV – Proposal Outline. Proposals that fail to follow the required outline will be deemed non-responsive and not evaluated.
2. **Cover Sheet.** The Cover Sheet is Page 1 of the proposal. The proposer must develop a Cover Sheet that includes the information below. *Legal Name* is defined as the name of private provider organization, CT State agency, or municipality submitting the proposal. *Contact Person* is defined as the individual who can provide additional information about the proposal or who has immediate responsibility for the proposal. *Authorized Official* is defined as the individual empowered to submit a binding offer on behalf of the proposer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto.
  - RFP Name or Number:
  - Legal Name:
  - FEIN:
  - Street Address:
  - Town/City/State/Zip:
  - Contact Person:
  - Title:
  - Phone Number:
  - E-Mail Address:
  - Authorized Official:
  - Title:
  - Signature:
3. **Table of Contents.** All proposals must include a Table of Contents that conforms with the required proposal outline.

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- 4. Executive Summary.** Proposals must include a high-level summary, not exceeding 2 pages, of the main proposal and cost proposal.
- 5. Attachments.** Attachments other than the required Appendices or Forms identified in this RFP are not permitted and will not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions will result in disqualification.
- 6. Style Requirements.** THIS IS AN ELECTRONIC SUBMISSION. Submitted proposals must conform to the following specifications:
- Paper Size: 8 ½ x 11 (Letter)
  - Page Limit: **Maximum 40 pages for main proposal**, exclusive of Executive Summary, Appendices, Attachments, and Budget Forms. See proposal submission outline section for details.
  - Font Size: 12
  - Font Type: Times New Roman
  - Margins: Normal (1 inch)
  - Line Spacing: 1 ½
- 7. Pagination.** The proposer's name must be displayed in the header of each page. All pages, including the required Appendices and Forms, must be numbered in the footer.
- 8. Declaration of Confidential Information.** Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), the Privacy Act, and all rules, regulations and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL prior to submission. In subsection F of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).
- 9. Conflict of Interest - Disclosure Statement.** Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. OEC will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a proposer must affirm such in the disclosure

statement. *Example: "[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

## ■ B. EVALUATION OF PROPOSALS

- 1. Evaluation Process.** It is the intent of OEC to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful proposers, and awarding contracts, OEC will conform with its written procedures for POS and PSA procurements (pursuant to C.G.S. § 4-217) and the State's Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85). Final funding allocation decisions will be determined during contract negotiation to find a balance between geographic coverage, service array, and cost-effective use of services.
- 2. Review Committee.** The OEC will designate a Review Committee to evaluate proposals submitted in response to this RFP. The Review Committee will be composed of individuals, OEC staff or other designees as deemed appropriate. The contents of all submitted proposals, including any confidential information, will be shared with the Review Committee. The Review Committee shall evaluate all proposals that meet the Minimum Submission Requirements by score and rank ordered and make recommendations for awards. The Commissioner of the Office of Early Childhood will make the final selection. Attempts by any Respondent (or representative of any Respondent) to contact or influence any member of the Review Committee will result in disqualification of the Respondent.
- 3. Minimum Submission Requirements.** All proposals must comply with the requirements specified in this RFP. To be eligible for evaluation, proposals must (1) be received on or before the due date and time; (2) meet the Proposal Format requirements; (3) follow the required Proposal Outline; and (4) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. OEC will reject any proposal that deviates significantly from the requirements of this RFP.
- 4. Evaluation Criteria (and Weights).** Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Screening Committee will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals.

Note:

As part of its evaluation of the Staffing Plan, the Evaluation Committee will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

Evaluation Criterion Title	Percentage of Total	What would a top score look like?
Criterion A: Strengths and Qualifications of the Applicant Agency and Staff	20%	Proposer has history of providing services to the identified <a href="#">target RFP</a> -populations within their proposed service area. They have skilled, culturally diverse workforce across all roles that reflects the proposed catchment area or have detailed plans of

		how they will. Supportive of staff and encourages self and team-care to ensure staff retention.
Criterion B: Regional Partnerships, Referral Network and Catchment Area	20%	Applicant demonstrates partnerships with other home visiting providers in proposed regions and have collaborative relationships with other community service providers in their region. Applicant(s) have explained how families will be located and referred to home visiting programs in their region.
Criterion C: Service Delivery	25%	History of working with families using an evidence-based model to fidelity (not necessarily the model selected for this RFP). Experience screening and assessing families for various concerns related to the <a href="#">target-priority</a> populations and performance measures. Applicant will service a sufficient number of families based on model requirements and community need. Effective use of <a href="#">innovative approaches in service delivery</a> .
Criterion D: Achieving Key Outcomes, Reporting, and Continuous Quality Improvement	20%	History of demonstrated success with meeting deliverables of contract(s). Past experience meeting RFP outcomes or demonstrated success meeting similar outcome measures. Selection of a Home Visiting Model that shows evidence of meeting RFP outcomes or applicants demonstrate compelling theory of change, including the use of innovative approaches. Regular reviews of data, including examples of using data to drive results. Experience with continuous quality improvement tools and strategies to improve programming. Positive history of compliance with funders and timely submission of contract deliverables.
Criterion E: Cost Competitiveness and Budget Narrative	15%	Budget is reflective of proposed services, does not exceed allocated funding amount, and only includes allowable expenses. Budget demonstrates competitively compensated home visitors and supervisors. Budget narrative is thorough and justifies line items. No significant audit findings.

**Additional Scoring Details:**

Scoring methodology: The Review Committee will assess the applicant for each of the qualification areas below. The total score will be the sum of the points for each of the qualification areas. The Review Committee reserves the right to define further detailed point allocations based on previously established review procedures.

**Criterion A: Strengths and qualifications of the applicant agency and staff (20 points)**

- i. Experience providing evidence-based home visiting services or delivering in-home, evidence-informed services to families **(3 points)**
- ii. Knowledge of and experience working with ~~target~~ population(s)-identified by this RFP **(3 points)**
- iii. Ability to engage and collaborate with key stakeholders such as parents, the community, and local government officials **(3 points)**
- iv. Skilled and culturally diverse workforce **(8 points)**
- v. Ability to support staff and increase home visitors' retention **(3 points)**

**Criterion B: Regional Partnerships, Referral Network and Catchment Area (20 Points)**

- i. Level of partnerships with other home visiting agencies within OEC identified region(s) **(5 points)**
- ii. Ability of established regional partnerships to collaborate to meet family and community needs **(5 points)**
- iii. Applicant understanding of the needs within the proposed service area and its connection to the community **(5 points)**
- iv. Ability to raise awareness of home visiting within their communities or region **(5 points)**

**Criterion C: Service Delivery (25 pts)**

- i. History and focus of working with families experiencing challenging circumstances **(7 points)**
- ii. Ability to work with families on promoting healthy birth outcomes, enhancing child development and positive parenting practices and preventing child maltreatment **(8 points)**
- iii. Ability to use assessments or screens with families **(5 points)**
- iv. Appropriate projected number of families served in home visiting and annual service capacity **(3 points)**
- v. Uses effective innovative approaches in service delivery, including adapting to the recent public health emergency. If proposed or applicable, ability to offer a variety of services, including phone support, groups or special events at their agency. **(2 points)**

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**Criterion D: Achieving Key Outcomes, Reporting, and Continuous Quality Improvement (20 pts)**

- i. Applicant demonstrated past success in meeting contractual and program outcomes or deliverables, as well as selection of model and theory of change clearly articulates ability to achieve OEC identified outcomes. **(7 points)**
- ii. Applicant demonstrates history or ability to participate in funder initiatives **(2 points)**
- iii. Applicant demonstrates capacity to collect and enter timely data **(3 points)**
- iv. Applicant demonstrates effective internal protocols and procedures for ensuring data is protected; including compliance of personal privacy laws, against loss and unauthorized access **(3 points)**
- v. Applicant demonstrates proven approach with continuous quality improvement (CQI) **(3 points)**
- vi. Applicant has provided a record of timely and accurate submissions of compliance reports to funders **(2 points)**

**Criterion E: Cost Competitiveness and Budget Narrative (15 pts)**

- i. Respondent included a complete budget **(3 points)**
- ii. Applicant provides competitive compensation for home visiting staff over the grant period **(6 points)**
- iii. Applicant provides a reasonable budget for proposed services **(6 points)**

**5. Proposal Selection.** Upon completing its evaluation of proposals, the Review Committee will submit the rankings of all proposals to the OEC Commissioner. The final selection of a successful proposal is at the discretion of the OEC Commissioner. The OEC will notify all organizations with proposals selected for award an opportunity to negotiate a contract with OEC. Such negotiations may, but will not automatically, result in a contract. Pursuant to Governor M. Jodi Rell's Executive Order No. 3, any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at OEC's discretion, about the outcome of the evaluation and proposer selection process. OEC reserves the right to decline to award contracts for activities in which OEC's Commissioner considers there are not adequate respondents.

**6. Debriefing.** Within ten (10) days of receiving notification from OEC, unsuccessful proposers may contact the Official Contact and request information about the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days. If unsuccessful proposers still have questions after receiving this information, they may contact the Official Contact and request a meeting with OEC to discuss the evaluation process and their proposals. If held, the debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. OEC will

schedule and hold the debriefing meeting within fifteen (15) days of the request. OEC will not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

- 7. Appeal Process.** Proposers may appeal any aspect OEC’s competitive procurement, including the evaluation and proposer selection process. Any such appeal must be submitted to OEC’s Commissioner. A proposer may file an appeal at any time after the proposal due date, but not later than thirty (30) days after OEC notifies unsuccessful proposers about the outcome of the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered “day one” of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for OEC to delay, suspend, cancel, or terminate the procurement or contract execution processes. More detailed information about filing an appeal may be obtained from the Official Contact.
- 8. Contract Execution.** Any contract developed and executed as a result of this RFP is subject to OEC’s contracting procedures, which shall include approval of the contract by the Office of the Attorney General. The successful awardees who will be interacting with federal funds are required to register and be active in the Federal System for Award Management (SAMS). Fully executed and approved contracts will be posted on State Contracting Portal and the OEC website.

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## **IV. REQUIRED PROPOSAL SUBMISSION OUTLINE**

All proposals must follow this outline in order with clearly marked sections. Submissions that fail to follow the required outline will be deemed non-responsive and not evaluated.

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**A. Cover Sheet**

**B. Table of Contents**

**C. Executive Summary**

**D. Main Proposal**

**E. Attachments:** clearly referenced to summary and main proposal where applicable

**F. Declaration of Confidential Information** (as applicable)

**G. Conflict of Interest - Disclosure Statement**

**H. Statement of Assurances**

***A: Cover Sheet***

The Respondent must use a Cover Sheet capturing the following information:

- RFP Name or Number:
- Legal Name:
- FEIN:
- Street Address:
- Town/City/State/Zip:
- Contact Person:
- Title:
- Phone Number:
- E-Mail Address:
- Authorized Official:
- Title:
- Signature:

*Legal Name* is defined as the name of private provider organization, CT State agency, or municipality submitting the proposal. *Contact Person* is defined as the individual who can provide additional information about the proposal or who has immediate responsibility for the proposal. *Authorized Official* is defined as the individual empowered to submit a binding offer on behalf of the proposer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto.

***B: Table of Contents***

Respondents must include a Table of Contents that lists sections and subsections with page numbers that follow the organization outline and sequence for this proposal.

## **C: Executive Summary**

The page limitation for this section is two (2) pages briefly describing how the Respondent meets the eligibility criteria outlined in the Proposal Overview and a brief overview of why the Respondent should be selected for the activities highlighted in the scope of services.

## **D: Main Proposal Submission Questions**

**\*\*\*Please note the maximum total page length for this section is 40 pages** (all appendices and other attachments should be referred to in section D and then placed in section E. The OEC Review Committee will not read answers longer than 40 pages in this section.

### 4.1 Application Submission Details

*4.10 Application Service Geography:* Applications should clearly identify in which region they are proposing services, including the specific towns. Any town that is not being proposed as the applicant's catchment area should include an explanation, including the identification of other home visiting programs/models that are proposing to service with an MOA, already have non-OEC funds servicing it, or demonstrate a plan if awarded to move forward with collaborations in their region. This may include an official request for OEC to assist establishing these regional partnerships. Respondents should include all satellite or contractor locations and service areas.

*4.11 Application Model Selection and Implementation:* Applications must explain and provide information supporting their selection of the evidence-based model(s) chosen for the community(ies). The menu of approved models shown to be effective in addressing the OEC identified priority outcomes are listed on Page 13. Respondents must detail their experience and history of implementing one of the evidence-based home visiting models identified by the OEC or demonstrate a history of delivering in-home, evidence-informed services to families with a compelling theory of change to achieving OEC identified outcomes. Past performance of implementation should be included with the application, including but not limited to history of model affiliation status and notable certificates/awards.

*4.12 Application Target-Priority Population:* Applicants must identify the community and population needs they plan to address through their selected home visiting model. Applications should indicate which of the OEC identified target-priority population(s)-they are going to serve, based on supporting evidence of need and agency experience, including highlighting specific areas of children who may enroll after.

### 4.2 Strengths and Qualifications of Agency & Staff

*4.20 Organization Description and History:* Provide a general overview of your organization including its history and prior experiences engaging with relevant key stakeholders such as parents, the community, and local government officials.

*4.21 Hours of Operation:* Include hours of operation of applicant agency and all sub-contractors and/or satellite offices included in application. Please indicate how working families will have access to home visiting during non-traditional hours and on weekends.

*4.22 Overall Staffing Plan and Program Organizational Chart:* Applications should include the home visiting model(s) required staffing plan, including employee FTE status. An

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agency and program organizational chart should be included with the application that details reporting structures. Respondents should also highlight any culturally diverse leadership.

*4.23 Staff Experience:* Applications should demonstrate the experience of staff, including education levels. Attach all staff resumes and applicable licensures.

*4.24 Culturally Diverse Workplan:* Successful respondents will employ or detail in a work plan, a workforce that is culturally diverse and representative of the community population across all roles, including bicultural and bilingual employees. Applications should include a description of the agency's progress over the last three years that diversifies the workforce. A detailed plan can be included if the agency is still working towards this meeting this priority.

*4.25 Staff Retention:* Applications should include the program staff retention rate (the number of staff currently employed divided by the total number of staff who were employed at any point over the last 2 years) for all staff in home visiting family support programs, including part-time, full-time, frontline, supervisors and managers. Of the staff who left the organization(s), please indicate how many were frontline/home visitors and how many were supervisors or managers (provide explanations for departures).

*4.26 Managing Staff Turnover:* Applicants should describe their plan for addressing turnover, including supporting self-care and team-care. Proposals should also include strategies for serving the same number of families and steps for minimizing the time between vacancies.

*4.27 Infant Mental Health Expertise:* Applicants should list any clinical supervisors who have received endorsement in Infant Mental Health, or who are in the process of endorsement. This includes participation in or registration for the CT Association of Infant Mental Health eight-day training, reflective supervision training, and participation in a reflective supervision group. Applicants should also list any clinical supervisor who has formerly begun the endorsement process, has completed Infant Mental Health competencies, and has begun the portfolio collection. Applicants should describe their plan for having all clinical supervisors endorsed in Infant Mental Health at level 3 or 4.

*4.28 Professional Development and Training:* Applicants must demonstrate a strong professional development portfolio and/or training plan for home visiting staff that includes trainings and credentials for working with families. A description of the pre-service training and orientation of staff should be included with a list of all trainings and applicable certificate(s) for all staff. Future or uncompleted trainings should be detailed with a timeline of completion. Applicants should describe how ongoing professional development needs will be met. This may include past and/or future professional development calendars.

*4.29 Use of Subcontractors in Service Delivery:* Please describe the different activities the applicant and subcontractors would undertake to supervise and support staff and how frequently these activities will occur. This should include the legal name of agency, address, FEIN, contact person, services currently provided, and subcontractor oversight processes.

### 4.3 Regional Partnerships, Referral Network, and Catchment Area

*4.30 Referral Process:* Applications should provide a clear identifiable and simple referral process for families seeking home visiting and referral sources seeking to make a referral to follow, including screening at-risk for a specific need. This process should include regional home visiting partners that are included in their referral network. Strong applications will include memorandums of Agreement/Understanding with such partners. These memorandums must clearly depict specific activities of each referral partner. The OEC will allow funding to be used to support such partnerships for purposes of referrals. Applicant organizations should demonstrate their capacity to meet the varying needs of families or their ability to connect families within their proposed service area to the necessary resources, including any process for following up on the outcome of a referral. Community partnerships and collaborations should be demonstrated to successfully address the nature of the relationship(s).

*4.31 Referral Process Case Study:* A mother with three young children (the youngest three months old), lingers after story hour at a local library to talk with the children's librarian. The mother tells the librarian she has just moved to the state after leaving an abusive relationship. She is temporarily living with her grandmother but knows this cannot last long. Her two and four-year-old sons are very active and seem to be fighting with each other more and more. Her baby is colicky, hard to get sleep and still wakes up every hour at night. She is exhausted, stressed, worried and wants to know if the librarian know of a program that can help her. The mother tried calling 211 for help but was on hold for 40 minutes. She hung up before anyone answered because she was afraid of using up all of her phone minutes. The librarian remembers hearing about a home visiting program but is not sure what to tell this mother or who to call. How can the mother find support and connect to home visiting? What resources can the librarian share with her?

*4.32 Increasing HV Awareness:* The OEC strives for a unified home visiting system that locates families, connects them to the appropriate services based on need, and has a clear, easy identifiable and simple referral process for families to self-refer and other potential referral sources like doctor's offices to make referrals. Respondents must explain how they will increase the awareness of home visiting within their region to families and community providers and destigmatize the services to families.

*4.33 Community Outreach and HV Recruitment:* Applications should clearly demonstrate outreach and recruitment efforts to engage families. A thorough explanation of recruitment strategies and activities that will be used to reach and maintain capacity should be included. Any community collaborations or partnerships that support recruitment should be detailed.

### 4.4 Service Delivery

*4.40 Service Caseload:* Applications should indicate the total family slots based on the home visiting model(s) selected. Family slot capacity should be identified two ways; One by home visitor FTE caseload capacity at any given time and two, program annual capacity.

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*4.41 Historical Service Enrollment:* To demonstrate capability to successfully engage pregnant and parenting families, applications should submit evidence of past performance around capacity and referrals that enroll in programming and retention rate of families for the past two years. Applications should include strategies used to support retention of families.

*4.42 Intake Process:* Applicants must provide a detailed explanation of the intake, eligibility and enrollment process. This process should highlight how the provider will ensure the intake system links families to the appropriate level and intensity of services. Copies of all applicant-created and evidence-based model intake, eligibility and enrollment forms should be included with the application.

*4.43 Screening and Risk Assessment Process:* Funded programs will be required to assess families for the following risk factors: depression, intimate partner violence, child development (including social-emotional) and parent-child interaction. Applicants must include a detailed explanation of how they will assess families for those risk factors, including what assessment tools they plan to use. Applicants should also include any additional assessments they plan to conduct that are required by their selected evidence-based home visiting model or prove to be necessary based on community needs. If these assessments are not a common tool, applicants should include a short (max 25 word) research brief.

*4.44 Waitlist Protocol:* Waitlists are discouraged. If the selected home visiting model(s) has a waitlist, the applicant must explain the necessity of the waitlist and detail the number of families that are expected on the waitlist and how families waiting will be serviced until they are enrolled in the home visiting model.

*4.45 Discharge Management:* Include how families are informed of services ending and how they are supported during the discharge or transfer process.

*4.46 Cultural Competence and Humility:* The OEC values diversity and ensures equal access to services, regardless of age, gender, race, language, religion, and sexual orientation. Applications should demonstrate how cultural competence and cultural humility will be a priority in service delivery. Applicants must detail the organization(s) capacity to meet cultural beliefs and values, behaviors and needs of families, including how trust and rapport is established with families. Applications may include a plan that details how the agency and program staff will meet and maintain this priority.

*4.47 Cultural Competence Case Study:* A woman gives birth at a local hospital to her fourth child. She does not speak English, nor does she appear to have any social supports. She was alone when she gave birth, did not identify a father of her new baby on the birth certificate and has had no visitors since her baby was born. The Spanish-speaking interpreter the hospital uses expressed that he had difficulties understanding her dialect. He suspects she might have a cognitive impairment. The hospital staff are concerned about a number of things: the baby's low birth weight and jaundice; the possible cognitive impairment of the mother; the apparent lack of social supports; and the mother's disinterest in supplemental formula specific to preemies. They suspect parental neglect, which would require them to call DCF. However, one nurse suggests referring the mother to a home visiting program. Please explain how your program can engage with and assist this mother. Please be specific on the steps you will take to address each of the concerns of the hospital.

*4.48 Use of Innovation in Service Delivery:* The OEC desires applications that include innovative approaches to stabilizing families and support them in achieving key outcomes. A detailed description of any innovative approaches should be included with the application.

*4.49 Adapting and Planning for Future Public Health Emergencies:* Applicants should highlight any contingency plans for current and/or future service disruptions due to Covid-19, including details on provider capacity to shift to teleservices if necessary.

#### 4.5 Achieving Key Outcomes, Reporting, and Continuous Quality Improvement

*4.50 Inputting Timely Data:* The OEC uses the Early Childhood Information System (ECIS-HV) to collect data on services provided across home visiting models. The use of ECIS will be required by all awarded applications. Accurate data is critical when telling the story of OEC home visiting to funders and stakeholders. Applicants must demonstrate their capacity to collect and enter timely, accurate and thorough data. This includes agency data protocols and policies or procedures, and IT systems such as current software/hardware that ensure the integrity of program data.

*4.51 Meeting Performance Data Outcomes:* Applications must include applicant and subcontractor's history of successful data collection and meeting contractual outcome measures and deliverables. If applicable, this includes rate card outcomes, past benchmark reports and home visiting model program annual data reports. Applicants may also include agency data that shows the ability to effectively serve and achieve positive outcomes for children and families of multiple diverse groups. All providers are required to populate supplemental form entitled "HV RFP Data Entry Form" found on BizNet in the solicitation as an additional attachment. New providers or providers switching service models to better meet new OEC identified requirements will not be penalized for a failure to populate relevant data for this form. Respondents are encouraged to use the additional rows in the outcomes section to highlight their expertise in achieving similar outcomes.

*4.52 Ensuring Data Privacy and Protection:* Applicants should describe internal protocol and procedures for ensuring data is protected; including compliance of personal privacy laws, against loss and unauthorized access.

*4.53 Continuous Quality Improvement:* Applicants should detail their experience with continuous quality improvement tools and strategies to improve practice and meet goals. Applications should include examples of how family participation and voices are used in program improvement. If applicable, applications should provide examples of current or past program goals and Specific, Measurable, Achievable, Relevant and Time Sensitive (SMART) aims and detail the progress achieved.

*4.54 Contract Compliance:* Applicants should demonstrate previous contract compliance with a record of timely and accurate submissions of reports to funders, including fiscal reporting and program reporting.

#### 4.6 Cost Competitiveness and Budget Narrative

*4.60 Financial Profile:* To submit a responsive proposal, the Respondent shall provide audited financial statements for each of the last two fiscal years. If audited financial statements for each of the last two fiscal years are not available, the Respondent shall provide comparable statements that will document the financial stability of the

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Respondent and include an explanation of the submission of documents other than audited financial statements.

*4.61 Financial Policies and Procedures:* Respondents should include any written policies that describe approaches to managing and tracking cash receipts/disbursements, budgeting processes/cost allocation plans, procurement processed, reconciling expenditures, separation of duties and functions within the fiscal department, payroll and time-sheet tracking, and how employee time dedicated to State and Federal funding sources will be tracked among two different funding sources.

*4.62 Budget Information:* To submit a responsive proposal, the Respondent shall complete a proposed budget (see the document entitled "RFP Budget Form" found on BizNet in the solicitation as an additional attachment, as well as OEC's website and refer to the estimated awards per region on page 7) for the period 7/1/21 through 6/30/24 with details on salaried positions. The budget will identify expenditures across the fiscal years covered by this funding. One budget will cover the period from 7/1/21 through 6/30/22, the second budget will cover the period 7/1/22 through 6/30/23, and the third budget will cover the period 7/1/23 through 6/30/24.

*4.63 Budget Narrative:* In addition to populating the OEC provided budget template, respondents are encouraged to provide further details via a budget narrative including any in-kind contributions.

*4.64 Cost Schedules for Subcontractors:* If applicable, cost schedules are required for each subcontractor listed in a proposal. This can be an estimate if specific details are not yet finalized.

*4.65 History of Violations:* Describe any financial, programmatic and/or administrative sanctions, fines, penalties, or letters of noncompliance issued against the Respondent by any contracting entities such as government or philanthropy. List all issues describing the circumstance eliciting the sanction, fine, penalty, or letter of noncompliance and the corrective action or resolution to the sanction, fine, penalty, or letter of noncompliance. If no sanctions, fines, penalties, or letters of noncompliance were issued, a statement that attests that no sanction, fine, penalty, or compliance action has been imposed on the Respondent within the three years immediately preceding the RFP posting/release date.

*4.66 Detailed Implementation Work Plan:* Proposals must include a detailed implementation process and timeline, including the identification of all necessary steps to operationalizing their Home Visiting Services. Providers switching to new models should also highlight their transition plan for families currently served that no longer meet service requirements.

## ***E: Attachments***

Attachments other than the required attachments identified are not permitted and will not be evaluated. See the Proposal Checklist in Appendix F for a list of relevant attachments. Further, the required attachments must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions may result in disqualification.

**F: Declaration of Confidential Information**

If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL prior to submission. The proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).

**G: Conflict of Interest – Disclosure Statement**

Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement. *Example: "[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

**H: Statement of Assurances**

Place after Conflict of Interest-Disclosure Statement. Sign and return Appendix E.

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## V. MANDATORY PROVISIONS

### ■ A. POS STANDARD CONTRACT, PARTS I AND II

*By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract" for POS:*

Part I of the standard contract is maintained by the Department and will include the scope of services, contract performance, quality assurance, reports, terms of payment, budget, and other program-specific provisions of any resulting POS contract. A sample of Part I is available from the Department's Official Contact upon request.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the POS contract. Part II is available on OPM's website at: [http://www.ct.gov/opm/fin/standard\\_contract](http://www.ct.gov/opm/fin/standard_contract)

Note:

Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a proposer is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the proposer must inform the proposer's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected proposer (contractor), and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's Office.

### ■ B. ASSURANCES

*By submitting a proposal in response to this RFP, a proposer implicitly gives the following assurances:*

- 1. Collusion.** The proposer represents and warrants that the proposer did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the proposer's proposal. The proposer also represents and warrants that the submitted proposal is in all respects fair and is made without collusion or fraud.
- 2. State Officials and Employees.** The proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The Department may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the proposer, contractor, or its agents or employees.

- 3. Competitors.** The proposer assures that the submitted proposal is not made in connection with any competing organization or competitor submitting a separate proposal in response to this RFP. No attempt has been made, or will be made, by the proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the proposer knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.
- 4. Validity of Proposal.** The proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto. The proposal shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Department may include the proposal, by reference or otherwise, into any contract with the successful proposer.
- 5. Press Releases.** The proposer agrees to obtain prior written consent and approval of the Department for press releases that relate in any manner to this RFP or any resultant contract.

## ■ C. TERMS AND CONDITIONS

*By submitting a proposal in response to this RFP, a proposer implicitly agrees to comply with the following terms and conditions:*

- 1. Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.
- 2. Preparation Expenses.** Neither the State nor the Department shall assume any liability for expenses incurred by a proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
- 3. Exclusion of Taxes.** The Department is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.
- 4. Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed through the entire term of the contract.
- 5. Changes to Proposal.** No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Department may request and authorize proposers to submit written clarification of their proposals, in a manner or format prescribed by the Department, and at the proposer's expense.
- 6. Supplemental Information.** Supplemental information will not be considered after the deadline submission of proposals, unless specifically requested by the

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Department. The Department may ask a proposer to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by the Department. At its sole discretion, the Department may limit the number of proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per proposer.

- 7. Presentation of Supporting Evidence.** If requested by the Department, a proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Department may make onsite visits to an operational facility or facilities of a proposer to evaluate further the proposer's capability to perform the duties required by this RFP. At its discretion, the Department may also check or contact any reference provided by the proposer.
- 8. RFP Is Not An Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Department or confer any rights on any proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the proposer and the Department and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the proposer or for payment of services under the terms of the contract until the successful proposer is notified that the contract has been accepted and approved by the Department and, if required, by the Attorney General's Office.

#### ■ D. RIGHTS RESERVED TO THE STATE

*By submitting a proposal in response to this RFP, a proposer implicitly accepts that the following rights are reserved to the State:*

- 1. Timing Sequence.** The timing and sequence of events associated with this RFP shall ultimately be determined by the Department.
- 2. Amending or Canceling RFP.** The Department reserves the right to amend or cancel this RFP on any date and at any time, if the Department deems it to be necessary, appropriate, or otherwise in the best interests of the State.
- 3. No Acceptable Proposals.** In the event that no acceptable proposals are submitted in response to this RFP, the Department may reopen the procurement process, if it is determined to be in the best interests of the State.
- 4. Award and Rejection of Proposals.** The Department reserves the right to award in part, to reject any and all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Department may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Department reserves the right to reject the proposal of any proposer who submits a proposal after the submission date and time.
- 5. Sole Property of the State.** All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFP shall be the sole property

of the State, unless stated otherwise in this RFP or subsequent contract. The right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.

- 6. Contract Negotiation.** The Department reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Department further reserves the right to contract with one or more proposer for such services. After reviewing the scored criteria, the Department may seek Best and Final Offers (BFO) on cost from proposers. The Department may set parameters on any BFOs received.
- 7. Clerical Errors in Award.** The Department reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a proposer and subsequently awarding the contract to another proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the proposer.
- 8. Key Personnel.** When the Department is the sole funder of a purchased service, the Department reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Department also reserves the right to approve replacements for key personnel who have terminated employment. The Department further reserves the right to require the removal and replacement of any of the proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the Department.

## ■ E. STATUTORY AND REGULATORY COMPLIANCE

*By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:*

- 1. Freedom of Information, C.G.S. § 1-210(b).** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.
- 2. Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive.** CT statute and regulations impose certain

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obligations on State agencies (as well as contractors and subcontractors doing business with the State) to insure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.

- iv. **Consulting Agreements, C.G.S. § 4a-81.** Proposals for State contracts with a value of \$50,000 or more in a calendar or fiscal year, excluding leases and licensing agreements of any value, shall include a consulting agreement affidavit attesting to whether any consulting agreement has been entered into in connection with the proposal. As used herein "consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information or (C) any other similar activity related to such contract. Consulting agreement does not include any agreements entered into with a consultant who is registered under the provisions of C.G.S. Chapter 10 as of the date such affidavit is submitted in accordance with the provisions of C.G.S. § 4a-81. The Consulting Agreement Affidavit (OPM Ethics Form 5) is available on OPM's website at [http://www.ct.gov/opm/fin/ethics\\_forms](http://www.ct.gov/opm/fin/ethics_forms)

**IMPORTANT NOTE:** A proposer must complete and submit OPM Ethics Form 5 to the Department with the proposal.

4. **Gift and Campaign Contributions, C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8 and No. 7C, Para. 10; C.G.S. § 9-612(g)(2).** If a proposer is awarded an opportunity to negotiate a contract with an anticipated value of \$50,000 or more in a calendar or fiscal year, the proposer must fully disclose any gifts or lawful contributions made to campaigns of candidates for statewide public office or the General Assembly. Municipalities and CT State agencies are exempt from this requirement. The gift and campaign contributions certification (OPM Ethics Form 1) is available on OPM's website at [http://www.ct.gov/opm/fin/ethics\\_forms](http://www.ct.gov/opm/fin/ethics_forms)

**IMPORTANT NOTE:** The successful proposer must complete and submit OPM Ethics Form 1 to the Department prior to contract execution.

5. **Nondiscrimination Certification, C.G.S. §§ 4a-60(a)(1) and 4a-60a(a)(1).** If a proposer is awarded an opportunity to negotiate a contract, the proposer must provide the Department with *written representation or documentation* that certifies the proposer complies with the State's nondiscrimination agreements and warranties. A nondiscrimination certification is required for all State contracts – regardless of type, term, cost, or value. Municipalities and CT State agencies are exempt from this requirement. The nondiscrimination certification forms are available on OPM's website at [http://www.ct.gov/opm/fin/nondiscrim\\_forms](http://www.ct.gov/opm/fin/nondiscrim_forms)

**IMPORTANT NOTE:** The successful proposer must complete and submit the appropriate nondiscrimination certification form to the awarding Department prior to contract execution.

## VI. APPENDIX

### A. ABBREVIATIONS / ACRONYMS / DEFINITIONS

OEC or Department	Connecticut Office of Early Childhood
Business Days	Days of the work week Monday through Friday excluding state holidays
Calendar Days	Inclusive of all days of the week Sunday through Saturday and state holidays
Caregiver	A parent or other adult person involved in the care of an Index Child, enrolled in the Program and receiving home visits from the contractor
C.G.S.	Connecticut General Statutes
CFDA	Catalog of Federal Domestic Assistance
CHRO	Connecticut Commission on Human Rights and Opportunities
Contract	A legally executed agreement between the Contractor and the OEC, which is also referred to as a Personal Service Agreement or a Purchase of Service Contract
Contractor	An entity that is awarded a contract as a result of this RFP
CT	Connecticut
Cultural Diversity	Differences in race, ethnicity, nationality, religion, gender, sexual identity, socioeconomic status, physical ability, language beliefs, values, behavior patterns, or customs among various groups within a community, organization, or nation
DAS	CT Department of Administrative Services
DUNS	Data Universal Numbering System
ECIS-HV	Early Childhood Information System
Family	Group of two or more persons related by birth or adoption, or adults who share legal responsibility for dependent children living in that household
FOIA	CT Freedom of Information Act
HOMVEE	Home Visiting Evidence of Effectiveness
HRSA	The Health Resources and Services Administration, an agency of the US Department of Health and Human Services
Intake:	Information collected to enroll in OEC Home Visiting Services (ECIS)

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IRS	Federal Internal Revenue Service
LOI	Letter of Intent
MIECHV	Maternal, Infant, and Early Childhood Home Visiting
MOU	Memorandum of Understanding
OAG	CT Office of the Attorney General
OPM	CT Office of Policy and Management
OSC	Office of the State Comptroller
PA	CT Public Act
POS	Purchase of Service Contract
PSA	Personal Service Agreement
Prospective Respondent	An entity with a legal presence in Connecticut or Connecticut municipality that may submit a proposal to OEC in response to this RFP, but has not yet done so
Respondent	Entity responding to this RFP
RFP	Request for Proposals
Referral	Provider process for referring services to families
SAM	System for Award Management
SEEC	CT State Elections Enforcement Commission
Setting	Refers to settings where young children are serviced; such as, family child-care center, and school-based programs
Subcontractor	An individual (other than an employee of the contractor) or business entity hired by the entity contracting with OEC as a result of this RFP to provide specific services, and who will be paid with contract funds
SFY	State Fiscal Year – July 1 through June 30
Young Children	Children ages 0-5

**B. LETTER OF INTENT FORM**

**Return via e-mail to [OEC.RFP@CT.GOV](mailto:OEC.RFP@CT.GOV) and include "HV RFP [your organization name] in the subject line. All emails must be received by 5:00 pm on December 18, 2020.**

**Instructions:**

1. Respondents must designate an authorized representative and one alternate in Section A of this letter. The authorized representative and alternate will be the only individuals to communicate with the OEC official contact during the open submission period. The letter must be signed by the organization's Chief Executive Officer or another official with signatory authority.
2. Respondents must indicate which region they intend to serve; which evidence-based model(s) they intend to implement; and, if applicable, which organizations they intend to partner with to increase coverage of home visiting services within their selected service region in Section B of this letter. If applying as a single entity, respondents will be expected in your final proposal to explain how your agency fits into the referral network of your region. If you are unaware of a referral network in your region, please indicate this in Section B as well. OEC will connect you with others in your region if you ultimately are awarded.

Respondents may submit only one proposal to serve one region as a primary contractor. Respondents seeking to serve additional geographic boundaries beyond their selected region must seek partnerships with another entity and serve as a subcontractor for respondents for those additional geographic areas.

**Note:** This mandatory letter of intent is a non-binding expression of interest and does not obligate the sender to submit a proposal.

Applicant Agency: \_\_\_\_\_

To the Office of Early Childhood,

I, the undersigned, for and on behalf of the named applicant agency, do herewith intend to apply for this funding and attest that to the best of my knowledge the statements made herein are true.

**Section A. Authorized Representative and Alternate**

	Authorized Representative	Alternate
Name		
Title		
Mailing Address <i>Street, City, State, Zip</i>		
Email Address		
Telephone Number		
Normal Working Hours		

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**Section B.** Intended Service Region, Model(s), and Partner(s)

Region Number	
Intended Model(s)	
Intended Partner(s)	

If your agency is unaware of any referral networks in your region and would like OEC's assistance in connecting to such networks, please mark the box to the left.

\_\_\_\_\_  
Signature of Authorizing Official

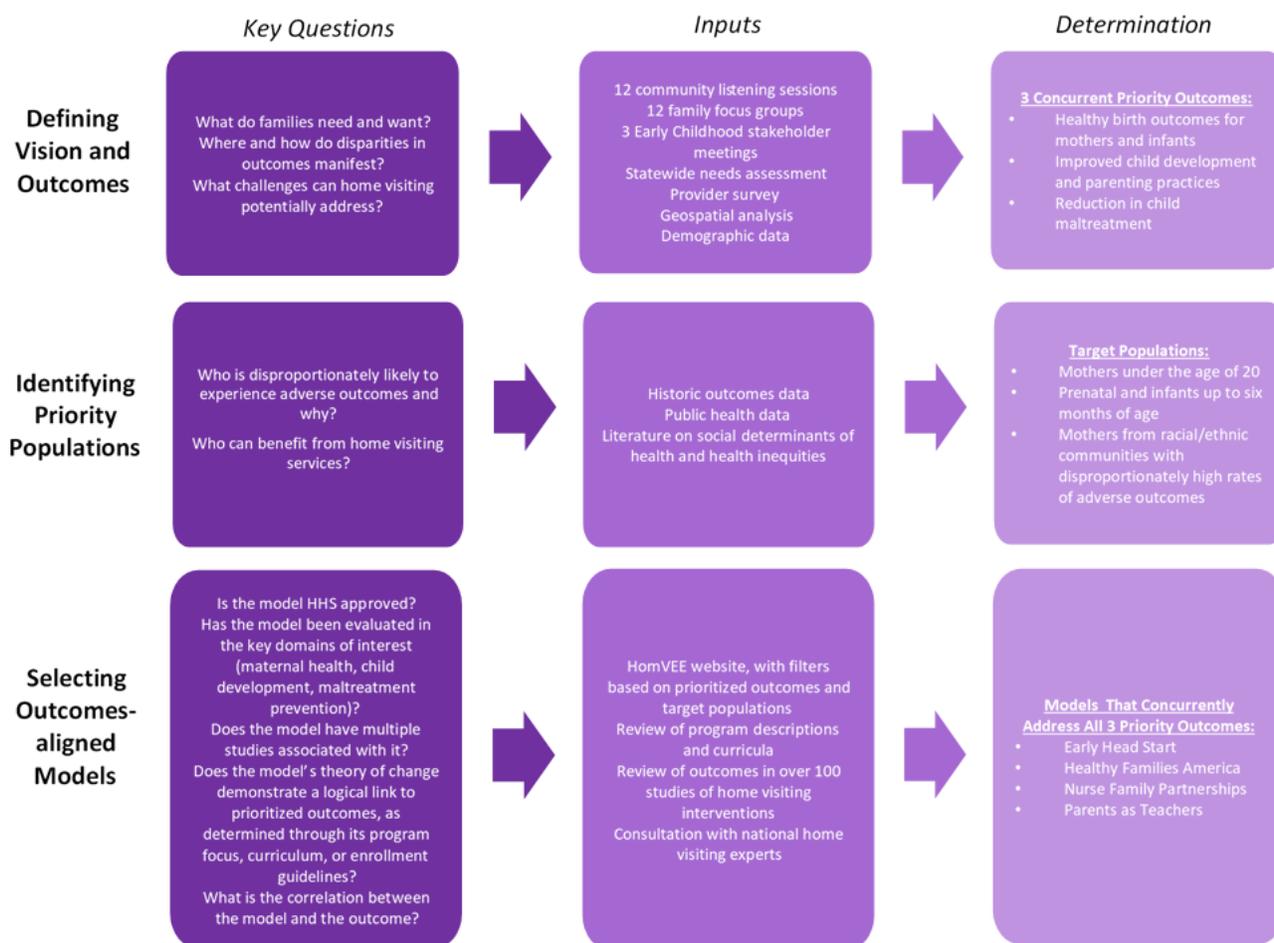
\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed Name and Title

**C. OEC RATIONALE FOR MODELS LISTED IN RFP**

To identify models that are consistent with the stated direction of OEC to focus on early engagement and primary prevention and that will support the outcomes defined in this RFP the following process was followed. The research on the HomVEE website was reviewed, including a careful examination of the specific measures used within different outcomes, and an examination of which populations the models have curricula for.

Additionally, the reports from several HRSA supported national evaluations of home visiting models were reviewed. National experts were also consulted. After a thorough review, these four models were identified. All four models have prenatal curricula, broad eligibility criteria, which supports the focus on prevention, and similar results across the outcome areas of interest.



*Guiding Principle: A family-centered and family-driven systems for all children in Connecticut*

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## D. HOME VISITOR SALARY GUIDELINES

The Connecticut Office of Early Childhood is committed to supporting the home visiting workforce. To better sustain viable career paths in home visiting and equitably distribute funds, OEC has outlined recommended salary ranges by role type in the table below. Respondents may propose salaries outside of the ranges below and/or may propose incremental salary changes to reach the proposed range over the life of the contract. Final salary amounts funded by OEC will be determined during contract negotiations.

	Recommended Salary Range
<b>Home Visitor</b>	<b>\$50,000 - \$67,000</b>
<b>Clinical Supervisor/Program Manager</b>	<b>\$51,000 - \$80,000</b>
<b>Nurse</b>	<b>\$67,000 - \$89,000</b>
<b>Clinician</b>	<b>\$50,000 - \$67,000</b>
<b>Care Coordinator</b>	<b>\$50,000 - \$67,000</b>
<b>Clinical Director</b>	<b>\$69,000 - \$80,000</b>

To generate the recommended salary ranges, OEC reviewed existing home visitor salaries and calculated the median salary by role type. OEC established salary ranges by role based on the observed variation in salaries and secondary sources. The lower bound of all salary ranges is at or above Connecticut's self-sufficiency wage for a family of two.<sup>12</sup> Thus, the minimum salary intends to provide a self-sufficient or living wage to home visitors, and the recommended maximum salary is not intended to be restrictive. Recognizing the limited sample sizes in several roles, we caveat the salary ranges and emphasize that they are directional in nature.

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<sup>12</sup> Based on the [Self Sufficiency Standard for Connecticut 2019](#) for a family of two

**E. STATEMENT OF ASSURANCES**Connecticut Office of Early Childhood Home Visiting Programs

The undersigned Respondent affirms and declares that:

**1) General**

- a. This proposal is executed and signed with full knowledge and acceptance of the RFP CONDITIONS stated in the RFP.
- b. The Respondent will deliver services to OEC at the cost proposed in the RFP and within the timeframes therein.
- c. The Respondent will seek prior approval from OEC before making any changes to the location of services.
- d. Neither the Respondent or any official of the organization nor any subcontractor or the Respondent or any official of the subcontractor organization has received any notices of debarment or suspension from contracting with the State of CT or the Federal Government.
- e. Neither the Respondent or any official of the organization nor any subcontractor or the Respondent or any official of the subcontractor's organization has received any notices of debarment or suspension from contracting with other states within the United States.

Legal Name of Organization:

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

## F. PROPOSAL CHECKLIST

To assist respondents in managing proposal planning and document collation processes, this document summarizes key dates and proposal requirements for this RFP. Please note that this document does not supersede what is stated in the RFP. Please refer to the Proposal Submission Overview, Required Proposal Submission Outline, and Mandatory Provisions (Sections II, III, and IV of this RFP) for more comprehensive details. It is the responsibility of each respondent to ensure that all required documents, forms, and attachments, are submitted in a timely manner.

### **Key Dates**

<b><u>Procurement Timetable</u></b>		
OEC reserves the right to modify these dates at its sole discretion.		
<b>Item</b>	<b>Action</b>	<b>Date</b>
1	RFP Reissued	<del>October 5</del> November 24, 2020
2	Mandatory Letter of Intent Due	December 18, 2020 by 5:00 pm EST
3	Deadline for Questions	December 18, 2020 by 5:00 pm EST
4	Proposals Due	January 29 <del>15</del> , 2021 by 5:00 pm EST

### **Registration Link for Mandatory Pre-bid Conference:**

<https://attendee.gotowebinar.com/register/6353923074810094863>

### **Registration with State Contracting Portal (if not already registered):**

- Register at: <https://biznet.ct.gov/AccountMaint/NewLogin.aspx> if
- Submit required forms:
  - Consulting Agreement Affidavit (OPM Ethics Form 5) – Requires Notarization; available at: <https://portal.ct.gov//media/OPM/OPMForm5ConsultingAgreementAffidavit32814pdf.pdf?la=en>
  - Affirmation of Receipt of State Ethics Affidavit (OPM Ethics Form 6) – Requires Notarization; available at: <https://portal.ct.gov/media/OPM/Finance/psa/OPMEthicsForm6Final91511PDFpdf.pdf?la=en>
  - Iran Certificate (OPM Ethics Form 7) – Requires Notarization; available at: <https://portal.ct.gov/media/OPM/OPMForm7IranCertification32814pdf.pdf?la=en>

### **Proposal Content Checklist**

- Cover Sheet** including required information:
  - RFP Name or Number
  - Legal Name
  - FEIN
  - Street Address
  - Town/City/State/Zip
  - Contact Person
  - Title
  - Phone Number
  - E-Mail Address
  - Authorized Official
  - Title
  - Signature

- Table of Contents**
- Executive Summary:** high-level summary of proposal and cost, not to exceed two pages in length
- Main proposal body answering all questions with relevant attachments.**  
*Proposers should use their discretion to determine whether certain required information is sufficiently captured in the body of their proposal or requires additional attachments for clarification. Additional attachments may include:*
  - Staffing plan with FTE status
  - Agency and program organizational chart detailing reporting structure
  - Staff resumes and applicable licensures
  - Work plan describing organization's efforts, progress, or plans to diversify workforce
  - List and descriptions of all pre-service and in-service trainings and applicable certificates for staff
  - Detailed plan on cultural competence and humility in service delivery
  - Memoranda of Agreement/Understanding with referral partners
  - Copies of applicant-created and/or evidence-based model intake, eligibility, enrollment, and assessment forms
  - Written financial policies and procedures
- Supplemental Data Entry Form** (available for download from BizNet)
- IRS Determination Letter** (for nonprofit proposers)
- Two years of most recent annual audited financial statements; OR any financial statements prepared by a Certified Public Accountant** for proposers whose organizations have been incorporated for less than two years
- Proposed budget**, including budget narrative and cost schedules for planned subcontractors if applicable. Budget template available for download from BizNet and OEC's website
- Conflict of Interest Disclosure Statement**
- Statement of Assurances**

### **Formatting Checklist**

- Is the proposal formatted to fit 8 ½ x 11 (letter-sized) paper?
- Is the main body of the proposal within the 40-page limit?
- Is the proposal in 12-point, Times New Roman font?
- Does the proposal format follow normal (1 inch) margins and 1 ½ line spacing?
- Does the proposer's name appear in the header of each page?
- Does the proposal include page numbers in the footer?
- Are confidential labels applied to sensitive information (if applicable)?