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**Public Health and Human Service Department – www.stlouiscountymn.gov**

**Linnea Mirsch**

**PHHS Director**

***Request for Proposal (RFP)***

**1**. **Date:** 9/13/2019

**2. Saint Louis County Contact(s):**

2.1 Name/Title: Amy Westbrook

Phone: 218- 725-5267

E-mail: [westbrooka@stlouiscountymn.gov](mailto:%20westbrooka@stlouiscountymn.gov)

2.2 Name/Title: Carrie Gertsema

Phone: 218- 725-5268

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**3. Proposal Description:**

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| **3.1 Geographic area to be served:**  St. Louis County, Duluth and surrounding communities.  **3.2 Purpose/Statement of Need:**  St. Louis County has identified a population in high need of Collaborative Case Management Services from a Public Health Nurse (PHN) and a Licensed Alcohol and Drug Counselor (LADC). This population is women who are chemically dependent and/or those women at risk of chemical dependency. The purpose of the program is to decrease the adverse effects of prenatal/in utero exposure to non-medical/illicit drugs and alcohol and to improve the well-being of families.  **3.3 Services/Resources to be Developed:**  St. Louis County wishes to purchase LADC Services from a provider for collaborative case management. A Public Health Nurse and licensed alcohol and drug counselor(s) will provide comprehensive, on-going assessments, interventions, education, and referrals using current best practices and guided by ongoing Substance Use Disorder (SUD) reform efforts for clients with history of or current chemical use issues during pregnancy and after delivery. The care of these clients will occur primarily in their own homes but may happen in public places or group settings where LADC and PHN collectively have determined it is in the best interest of the client(s). LADC and PHN will work to build integrated systems of care with other professionals who work with this population, including but not limited to child welfare, judicial, schools, and medical (including obstetrics, pediatrics, family practice, and mental health).  The Public Health Nurse will use the national evidence-based home visiting model *“Healthy Families America”* with the performance measures of   * Adequate prenatal care * Healthy pregnancy outcome * Adequate well child care with primary care provider * Decreased reports of child abuse/neglect * Decreased rate of repeat pregnancy within 2 years * Improved family self-sufficiency   The LADC provider will propose intervention(s), curriculum(s), and/or model(s) with the following performance measures (at a minimum):   * Reduction in substance abuse during pregnancy * Decrease in postpartum substance abuse relapse * Improved sober support mechanisms * Improved family self-sufficiency   **3.4 Client population to be served:**  Pregnant and postpartum women who are using or are at risk of using non-medical/illicit drugs or alcohol in St. Louis County. |

**4. SCOPE OF SERVICES:**

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| **4.1 Service Summary:**  4.1.1 Provider will designate a licensed chemical dependency counselor (LADC) to serve on a collaborative case management team and assure continuity of services.  4.1.2 Provider will assure LADC’s participation in both monthly and quarterly meetings that are designed to support the work and goals of the case management team.  4.1.3 Provider will actively participate in ongoing continuous quality improvement efforts and program development based on current identified needs of population and community, legislation, and program evaluation.  4.1.4 Provider will conduct services in accordance with guidelines and protocols developed for the program which include the following:  (a) LADC will conduct a chemical use assessment within 30days of receiving a referral and communicate findings and recommendations to the Public Health and Human Services Department / Public Health Nurse (unless client is currently in treatment).  (b) LADC will refer clients to treatment and community support services as indicated by the chemical health assessment.  (c) LADC will conduct home visits with clients at a minimum of one time per month (up to 3 years after the birth of the baby) provide therapeutic interventions and an evidence-based curriculum or strategies, including chemical use education, sober support, lifestyle changes, and relapse prevention.  (d) LADC will coordinate with a PHN to determine if a need for drug testing is indicated and to make arrangements for testing.  (e) Provider will utilize the electronic health record (EHR) system of PHHS, Nightingale Notes (NN), to house all client data in a shared chart/file.  (f) LADC will collaborate with a PHN in determining the distribution and utilization of client incentives.  **4.2 County responsibilities:**  4.2.1 The Public Health Nurse will provide the delivery of the evidence- based home visiting model, Healthy Families America (HFA). HFA’s mission is to promote child wellbeing, and prevent the abuse and neglect of our nation’s children through intensive home visiting. It provides a framework for the PHN to assess the needs of the family and plan individualized care to improve family outcomes.  4.2.2 PHN will provide weekly visits from enrollment, into collaborative case management, until baby reaches 6 months of age, bi-monthly for the following 6 months (6-12) months, and a minimum of monthly thereafter up to when the child reaches age 3 years. This frequency can change based on family goal status.  4.2.3 County will be responsible to initiate and coordinate meetings and related activities of the case management team .    4.2.4 County will make accessible entry into the EHR, for LADC staff to access shared client files.  4.2.5 County will facilitate reporting into the EHR, and offer technological support to entering data into the EHR.  **4.3 Essential job/service functions:**  LADC evaluation, case management, care coordination, client contact and on- going monitoring.  **4.4 Disclaimer:**  The above statements are intended to describe the general nature and level of work being performed by individuals performing this function. They are not to be construed as an exhaustive list of all responsibilities, duties, and skills required of personnel so classified. |

**5. Financial:**

**5.1** Funding is determined by the County. All services proposed that are billable through insurance are not to be charged against this funding.

5.1.1 Source:  County Levy Funds Grant  Allocation

5.1.2 Contract Maximum Amount:$70,000

(a) This amount is to include travel and other expenses relating to provision of services (including but not limited to client incentives, events, marketing, educational materials and activity supplies

**6. SUPPLEMENTAL QUESTIONS:**

6.1 Proposals will be considered that serve Duluth and surrounding rural communities. What geographical area can your agency serve?

6.2 Many families within the target population are of non-white race, including America Indian.

Please describe the cultural competency of your practice. What measures will you take to specifically address the needs of these populations? How will contracting with you/your agency help to address disparities of populations experiencing the greatest impact from substance use disorders?

6.3 What training and mentoring are you/your employees provided?

6.4 How would you/ your LADC integrate a trauma-informed approach into practice?

6.5 How are you integrating SUD reform legislation into practice?

6.6 St. Louis County utilizes a web-based Electronic Health Record system (Nightingale

Notes) for client documentation, data collection, and continuous quality improvement and

uses a joint information system necessary for joint accountability, communication between the PHN and LADC, and to track progress of goals. We would ask the provider to adopt this

EHR. How would you/your organization propose adopting, staying accountable, and

supporting a new EHR?

6.7 St. Louis County is actively working to build partnerships for integrated delivery of service to

the target population. How would you/ your organization work to break down silos among

other professionals who also serve this population for improved outcomes?

6.8 What are the primary interventions, curriculum, and or methods you would propose for a LADC to support sobriety work with this population? Please give rationale for why these methods are being proposed and how they would improve outcomes for this population.

6.9 Continuity of services is important when working with this population. Please describe your plan to address staff retention.

**7. Timeline:**

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| 7.1 **Due Date** for proposal submission | **10/4/2019** |
| 7.2 Target date for completion of follow-up **interviews** (if required) | **11/7/2019** |
| 7.3 Target date for notifying providers of **proposal selection** | **11/15/2019** |
| 7.4 Targeted **contract begin date** | **1/1/2020** |

**8. Provider Response:**

If your organization is interested in being considered to provide this service, please submit one (1) copy of your response to this proposal, providing *at a minimum* the information requested below (**Section 8.**) by: **10/4/2019**.

At the top of your response please clearly indicate your proposal is one to provide ***LADC Services***

8.1 Individual or Organization:

8.1.1 Name and address

8.1.2 Type of organization – Corporation, Partnership or Individual, HealthCare Agency, Contractor

8.1.3 Number of years in business

8.2 Personnel:

Provide name, educational and experience background, and other qualifications of persons who would provide LADC services indicated.

8.3 Experience:

Provide a general description of your agencies relevant activities over the past three (3) years as well as specific information regarding prior relevant services provided.

8.4 Proposal:

8.4.1 Scope of services.

8.4.2 Proposed contract maximum, related rates and budget information.

8.5 Supplemental Questions:

Insert answers to questions to, **Section 6. Supplemental Questions**.

8.6 Relevant Certifications or Licenses:

In addition: Any Purchase of Service provider contracting with the St. Louis County Board of Commissioners is expected to comply with the following requirements:

8.6.1 Data Privacy

8.6.2 Equal Employment Opportunity and Civil Rights Clause

8.6.3 Fair Hearing Appeal

8.6.4 Rehabilitation Act

8.6.5 Health Insurance Portability and Accountability Act (HIPAA)

9. Insurance:

The following insurance must be maintained for the duration of this Agreement. A Certificate of Insurance for each policy must be on file with the St. Louis County Public Health and Human Service Department Contract Services. Each certificate must include a 10-day notice of cancellation non-renewal, or material change to all named and additional insureds.

9.1 General Liability Insurance

9.1.1 $500,000 when the claim is one for death by wrongful act or omission and $500,000 to any claimant in any other case.

9.1.2 $1,500,000 for any number of claims arising out of a single occurrence.

9.1.3 No less than $2,000,000 Aggregate coverage.

9.2 Policy shall include at least premises, operations, completed operations, independent contractors and subcontractors, and contractual liability and environmental liability.

9.3 St. Louis County shall be named as an Additional Insured on a primary and non- contributory basis.

9.4 Business Automobile Liability Insurance

9.4.1 $500,000 for claims for wrongful death and each claimant.

9.4.2 $1,500,000 each occurrence.

9.4.3 No less than $2,000,000 aggregate.

9.4.4 Must cover owned, non-owned and hired vehicles.

9.5 Workers’ Compensation

Per statutory requirements, Certificate of Compliance must be executed and filed with St. Louis County.

9.6 Professional Liability Insurance For Licensed Professionals

9.6.1 Provider shall maintain at its sole expense a valid policy of insurance covering professional liability, arising from the acts or omissions of Provider, its agent and employees in the amount of not less than $500,000 per claim and $2,000,000 annual aggregate. This provision applies only in situations where Provider’s staff or volunteers are performing licensed professional services under this Agreement.

**10. Selection:**

All responses will be reviewed by Public Health and Human Services Department and other appropriate County personnel. Prior to making the final selection, interviews may be scheduled with Agency staff to determine potential fit as a provider of these services.

**11. Receipt of response:**

Your response must include one (1) copy and be received no later than **10/4/2019 .**

**11. Submit to:**

**Contract Services** – Please submit your proposal electronically to the appropriate Contract Services Representative.

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|  | ***Abby Schaefer*** | [schaefera@stlouiscountymn.gov](mailto:schaefera@stlouiscountymn.gov) | Ph: 725-5015 |

*Any additional questions regarding this proposal should be directed to the contacts listed in* ***Section 2.***

*St. Louis County Public Health & Human Services*

*Government Services Center*

*320 West 2nd Street, Suite 6E*

*Duluth, MN 55802*