

MUSKEGON COUNTY

M I C H I G A N

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June 8, 2011

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ADDENDUM #2

SPECIALIZED RESIDENTIAL SERVICES REQUEST FOR PROPOSALS RFP 11-1905

Vendor _____

The following is Addendum #2 to Proposal RFP 11-1905 Specialized Residential Services for Community Mental Health Department.

Attendees to the Non-Mandatory Pre-Proposal Meeting of Monday, June 6, 2011:

CMH - Judy Cohen, Bruce Dach, Luke Reynolds, and Marcia Vandenberg
Best Way Providers - Diane Jones, Katresu Crawford
Hope Network - Dave Simpson, Teresa Tiesma
MOKA - Thomas Zmolek
HGA Support Services - Margie Hladki
Turning Leaf - Sami AlJallad
LSSM - Ann Meldrum, Jennifer Sardoval
Pioneer Resources - Ann Hintz, Greg Scott

Mr. Reynolds began with a presentation of CMH's intent to expand the continuum of group homes to include serving persons with co-occurring severe mental illness and developmental disabilities. These consumers would likely be placed in institutions if Michigan still had institutions. These consumers will have significant challenging behaviors. The description of the intent of this RFP is described beginning at the bottom of the RFP document page 13, including the provision of treatment and structure, with intent of having highly skilled direct care staff. The group home limit will remain at six residents.

QUESTIONS AND ANSWERS

- Q: Regarding page 3, Proposal Summary, Additional Requests to be included, what needs to be included on these lines?
- A: This is a County Purchasing form, giving notice that those three items must be included. The lines themselves do not need to be filled out.
- Q: How would you like this information presented, via separate addendums or a one-page addendum?
- A: Either.
- Q: Regarding page 5, Proposal Conditions/Instructions to Bidders, do questions 3-5 for anticipated delivery date, terms of sale and length of proposal need to be completed?
- A: No. The effective date of the contract will be October 1, 2011, which will also be the delivery and start date.
- Q: Room and Board history?
- A: The home is County-owned and there is no charge to the Provider.
- Q: Staffing pattern: Would you like us to propose a minimum rate and a high rate; since we do not know the history of the consumers, this part can be tricky.
- A: We are looking for a single per diem per resident rate in the proposal. We are looking for a proposal that is innovative and flexible. Providers may propose multiple per diems with different staffing patterns.
- Q: Will a vehicle be provided?
- A: Yes, a van will be provided.
- Q: Will there be a property lease payment that needs to be factored into the rate formula?
- A: No.
- Q: Would CMH be willing to consider multiple rate proposals that are based on different staffing patterns/schedules?
- A: Yes.
- Q: Will transportation be billable if it falls outside of normal or routine expectation? For example, a consumer requiring outpatient visits three times per week in Grand Rapids would require four hours of staff time per visit plus fuel.
- A: Such incidents would be determined on a case by case basis. Generally, transportation provided for services specified in the Individual Plan of Service is incorporated into the per diem.
- Q: How will maintenance of this property be addressed? Is there an annual limit at which the Provider will be capped?
- A: Property maintenance is a shared responsibility. The provider is responsible for expenses up to \$500.00 per occurrence. The County will pay for repairs and maintenance over \$500.00 per occurrence. There is no annual cap.

- Q: With what FTEs is the home currently operating?
A: Minimally, group homes must be staffed at a 1:6 ratio. Marcoux is currently staffed at closer to 1:3. The Provider is expected to provide staffing according to consumers' person-centered plans; the staff ratio is not specified in the contract.
- Q: Are there plans to reduce the current FTEs via this proposal?
A: No.
- Q: Are there plans to reduce this home's census in the near future?
A: No.
- Q: What are the training requirements of employees in the home?
A: Minimally, basic group home and MDCH Licensing-required trainings. For the level of intensity to serve the residents of this home, additional trainings as described in the RFP will be required.
- Q: If there are no consumers at the home during the day (e.g., attending a day program), are there staff available during the day?
A: Staffing should be in accordance with an individual's Individual Plan of Service.
- Q: Will the CMH clinical team remain after the transition so as not to lose the histories of the people living in the home?
A: We cannot guarantee the same consumers or clinicians will remain with the home. The residents will likely change, and have more challenging behaviors than the current residents. Consumers placed there will be considered high-intensity, and may currently reside outside of our Muskegon county operated group homes.
- Q: Should an initial investment for repairs or remodeling be included in the proposal?
A: There are no known current repair needs.
- Q: Since there was a delay in holding this June 6, 2011 meeting, will there be a delay in the proposal due date?
A: No, the deadline is still June 13, 2011.
- Q: Do all 5-6 copies of the proposal submitted need to include the financial section?
A: Yes, each copy needs to be a stand-alone copy.
- Q: Is the evaluation SCORE sheet available?
A: Yes, and it will also be posted on the Internet.
- Q: On the SCORE sheet under "Cost", there are points for less than current cost, but it sounds like the new residents will likely be more costly than the current residents.
A: We will award points for efficiencies if you are able to achieve them. The guiding concept of this home is to ensure effective treatment and supervision of individuals who have not been successful in traditional group home models.
- Q: Are the proposals allowed from unaccredited providers?
A: Yes, the proposals will be considered, but extra points are awarded for accreditation.

Q: How are sections evaluated, such as Recipient Rights? Does the information come solely from what is submitted on the proposal?

A: We will review the proposal and do State-wide checks for recipient rights complaints and licensing issues.

Q: How fast will the review process occur?

A: Scoring will be done in a day or two after the deadline and a recommendation will be sent to the CMH Board in July and to the County Board in August.

Q: What is the current per diem paid per resident at the Marcoux home?

A: The current per diem is \$170.20 per day which includes community living support, personal care and room and board.

After all questions were answered, Mr. Dach met all interested parties at the Marcoux Home for a tour. Maps were provided in the packets.

Please be advised our Rating Form follows.

Be sure to acknowledge receipt of this Addendum #2 on the Addenda Summary.

Heath Kaplan

Director of Finance & Management Services

COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY

RFP 11-1905

Specialized Residential Services

Rating Form

		Score	Comments
Recipient Rights & Licensing	Score 5 for a history of substantial compliance with recipient rights requirements (i.e., staff training; required postings; lack of substantiated violations, cooperation with Recipient Rights staff in investigations, etc.) Score 0 for a lack of compliance.		
	Score up to 5 for a history of substantial compliance with licensing rules. Score 0 for a history of sanctions or revocations.		
Provider's Experience	Score 5 if bidder has a minimum of 5 year history of contracts to provide residential services to our consumers with a mental illness and/or a developmental disability.		
	Score 5 if bidder has an accreditation from JCAHO or CARF.		
	Score 3 if bidder has demonstrated an understanding of and a capacity to provide accurate and timely invoices for payment along with necessary supporting documentation.		
Program Description	Score up to 5 if program description addresses how costs will be controlled.		
	Score up to 5 if the program description describes how they will ensure that staff are qualified, in sufficient number, and appropriately trained and credentialed.		
	Score up to 5 if program description promotes community integration and/or self determination.		
	Score up to 5 if the program description provides flexibility in handling a range of different consumer needs and behaviors.		
	Score up to 5 if program description addresses how resident's quality of life will be assessed, promoted, and maintained by the program.		
Quality Improvement	Score 5 if program description describes an outcome based Q.I. system utilizing measurable and observable goals.		
Cost	Rank proposal based on comparative ranking of per diems proposed (ie, lowest=10, highest=0)		
	Score +3 if total cost of proposed beds is less than current costs, Score 0 if proposed cost is equal to current cost and score -3 if proposed cost is greater than current cost.		

TOTAL SCORE	
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Provider: _____

Scored By: _____