Section VIII:
CBC Foster Care and Related Services Implementation (Procurement/Contracting) in Pinellas and Pasco Counties
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Section VIII
CBC Foster Care and Related Services
Implementation (Procurement/Contracting) in Pinellas and Pasco Counties

As specified in the contract, this evaluation component focused on the implementation of procurement and contracting in the community-based care model for foster care and related services in Pinellas and Pasco Counties. The Family Continuity Program in Pasco and Pinellas Counties was selected as the Lead Agency for the CBC program on June 13, 1999. The transition contract with the Lead Agency was signed on November 11, 1999 and the service contract was signed on June 30, 2000. According to these contract dates, the Family Continuity Program had been operating as the CBC Lead Agency in Pinellas and Pasco Counties for almost 18 months at the time the field research for this evaluation was conducted.

In this component, two sets of procurement and contracting procedures are examined. The first is the Department of Children and Families’ procurement of and contracting with the CBC Lead Agency in the two counties. In this set, the primary focus is on the relationship between the Department of Community Affairs and the CBC Lead Agency. The second set of procedures is the CBC Lead Agency’s procurement of and contracting with the providers in the CBC network. Here, the relationship between the CBC Lead Agency and the providers in the CBC network is of interest.

In this section, a theoretical context is presented, research questions are listed, the methodology applied is explained, the findings are described and recommendations are presented.

Conceptual Context

Initially, it is helpful to examine a context that provides understanding of the procurement and contracting component of the CBC. Ultimately, the study findings will be presented with reference to this conceptual context. This context will be presented in two domains: privatization and service integration.

Privatization Domain

According to Gibelman and Demone (1998), privatization:

refers to the divesting of government responsibility for the funding and provision of … services…. An intermediary step in privatization widely used in the human services is that of purchase of service (POS). Here, the government retains a primary role in service funding, but delegates, through contracting, service delivery responsibility to the private sector. (p. xi)

Privatization has its roots in economics as well as ideologies. Economically, it is widely believed that the private sector offers cost and administrative efficiencies not available in the
public sector. Ideologically, privatization provides a rationale for decentralized government and local responsiveness to social service needs. The benefits of privatization include:

- Cost savings;
- Administrative efficiency;
- Quick program start up and termination;
- Programmatic flexibility;
- Reduced bureaucratic red tape;
- Enhanced quality of service;
- Flexible use of personnel;
- Opportunities for partnership-building;
- Promotion of innovation and competition;
- Responsiveness to political climate and citizen preferences;
- Reduced size and role of government; and,
- Reduced stigmatization for service recipients.

However, there are detractors who believe that:

- Cost savings are not substantiated;
- Public control and accountability are lost;
- Mechanisms are not in place to ensure standards;
- Creaming of service recipients can take place (admittance of “easiest” to serve);
- Contractors are unreliable;
- Monitoring is difficult;
- Government is ultimately accountable;
- Private agencies become agents of government;
- Agencies that have quality but not sophistication can be left out of the competitive market mechanism;
- Goal displacement can take place; and,
- A private monopoly can replace government.

Gibelman and Demone (1998) caution that planning, performance, role delegation and delineation, interorganizational relationships, service monitoring, and evaluation for accountability are essential for a successful privatized service delivery system. Kettner and Martin (1998) further refined our understanding of purchase of service contracting by stating that accountability is central: the level of accountability refers to “contractors’ answerability to governmental funding sources for the contracted services they provide” and “the answerability of government agencies to their citizens for how contracted services contribute to the overall development, maintenance, and performance of the human services system” (p. 184). Their research indicated that purchase of service contracting must ensure accountability in both fiscal and programmatic arenas via:

- Comprehensive planning and determination of need;
- Competition for contracts;
- Establishing contract expectations; and,
• Determining costs and price of services.

Service Integration Domain

Service integration includes collaboration, coordination, human service integration, one-stop shopping, and other approaches, which “all refer to efforts to reduce or eliminate divisions or boundaries between categorically defined and provided services. Efforts at service integration can take place within a single organization providing multiple services or between separate organizations and agencies providing related services” (Hassett & Austin, 1997, p. 10). It typically is a decentralized system whereby local communities assume administrative and fiscal accountability for human services. Hassett and Austin (1997) described three stages of interagency approaches:

• First generation: interagency groups such as task forces, commissions, committees, or councils formed to plan for common target population needs;
• Second generation: states provide funding, guidance, and technical assistance to local collaborative initiatives;
• Third generation: comprehensive, statewide collaborative approaches.

Collaboration has been defined as: “a mutually beneficial and well-defined relationship entered into by two or more organizations to achieve common goals ... [that] includes a commitment to: mutual relationships and goals; a jointly developed structure and shared responsibility; mutual authority and accountability for success; and sharing of resources and rewards” (Harbert, Finnegan, & Tyler, 1998).

O’Looney (1997) identified five explanations for the failure of collaboration to lead to service integration:
1. Lack of time;
2. Lack of clear definitions and identifiable starting points;
3. Lack of state and local leadership;
4. Lack of a positive benefit-cost ratio; and,
5. Threat to security (including power, status and funding).

Finally, it is important to recognize the challenges inherent in the evaluation of interagency collaboration efforts. Harbert, Finnegan, and Tyler (1998) identified the following salient evaluation questions:

• What difference does collaboration make?
• How do we know when we have achieved success?
• What have we really learned from pioneering efforts?
• How effective was the collaboration?
• Was communication improved?
• Have bureaucratic barriers been overcome?
• How can interagency collaboration be improved?
• Was the endeavor made clear to participants?
• Was the collaboration implemented as intended?
• Were the standards of measurement precise and replicable?
- Were there direct changes in the service delivery system?
- How is success defined? If part, or all, of the goals have been achieved?

Research Framework and Questions

Research Framework

In this component, there was an attempt to describe the procurement and contracting procedures; address communication among the Department, the CBC Lead Agency, and providers; and obtain information on the appropriateness and adequacy of specific aspects of the procurement and contracting process. Throughout this component, there were two sets of procedures studied. The first was DCF procurement of and contracting with a Lead Agency. The second was the Lead Agency procurement of and contracting with providers. The research model is presented below:

![Research Model Diagram]

Research Questions

Research questions were developed by the research team using a combination of methods: key informant input (primarily DCF staff); grounded theory (use of emerging data to inform research); and experience of the researchers. In this way, critical domains of inquiry were identified and appropriate research questions crafted. The field research and mail surveys were subsequently designed to gather data that could provide insight into the research questions.

1-A: Were the procurement and contracting procedures used by DCF and the CBC Lead Agency efficient and effective?

1-B: Comparing importance and actual experience, were the procurement and contracting procedures equitable and open, and did they have sufficient oversight, support, communication, and accountability?

2: Did the time frame for a response to the Invitation to Negotiate (ITN or other process for applying) allow for preparation of a comprehensive response?
3: How well did the ITN explain the roles and responsibilities of the Lead Agency and the Department under CBC and were these roles and responsibilities actually implemented?

4: How well did the Department respond to questions during the procurement process (i.e., were they timely, thorough, accurate)?

5: Were there practical advantages using the ITN or the process used by the CBC Lead Agency as opposed to another procurement process?

6: Compared to DCF, what are the benefits, if any, for procurement and contracting in the CBC model for foster care and related services?

7: What are the strengths and weaknesses of the current procurement and contracting procedures for the CBC model for foster care and related services?

8: What is considered ideal for the CBC procurement and contracting?

9: What are the three most important criteria for selecting a CBC Lead Agency and a CBC provider/subcontractor?

Research Methodology

The methodologies applied in this component were semi-structured interviews, a mail survey, and document analyses. These methods were considered the most appropriate for obtaining the necessary information, within the available time frame, regarding participants’ perceptions of the actual procurement and contracting procedures.

**Semi-Structured Interviews**

In order to obtain information necessary for the procurement and contracting procedures used in the selection of the CBC Lead Agency, semi-structured interviews were conducted with current CBC Lead Agency staff, staff for an agency that applied to be the CBC Lead Agency, and DCF staff in the regional office. The interviews with the lead CBC agency staff and DCF staff in the district also yielded information on the procurement and contracting procedures used by the CBC agency. Additional interviews were scheduled with CBC provider staff in order to get information on the CBC Lead Agency procurement and contracting procedures. The interviews occurred on April 26, 2001 and May 15, 2001. The questionnaire used in the interviews appears in Appendix VIII-A. The providers selected for the interviewing were within two different geographic vicinities in the CBC provider network. The research team developed the semi-structured interview.
**Mail Survey**

The mail survey was conducted with CBC providers in Pinellas and Pasco Counties. Among 22 providers who received the mail survey, the number of completed questionnaires received was 10. An additional 5 responses were mailed or delivered over the telephone indicating that respondents had insufficient experience with the procurement or contracting procedures implemented by the CBC Lead Agency to respond. Two of these providers wrote responses in a letter format that explained their circumstances and their minimal contact with the CBC Lead Agency. The questionnaire for the mail survey is in Appendix VIII-B.

**Document Analyses**

Additional sources of information on the procurement and contracting procedures implemented by the CBC Lead Agency were manuals or references it had developed. The first source refers to the credentialing process developed for service providers: *Credentialing Policies and Procedures Handbook* for the Agency Provider Network (Credentialing Handbook). The second source is the *Network Provider Manual*.

The first wave of surveys was mailed on May 4, 2001. Subsequent follow-up with the survey participants occurred during the remaining weeks of May. After the initial mailing of the survey, each provider that had not responded was contacted by telephone at least twice to solicit a response. A second wave of surveys was mailed on May 22, 2001 to the non-respondents for whom telephone numbers were not provided or available.

The providers who submitted completed surveys provided a variety of child welfare services. The services represented in the respondent group included family counseling, prevention, independent living, foster care, residential group care, and family reunification.

**Procurement and Contracting Procedures**

The description of the procurement and contracting procedures is based on documents available to the field research staff during the site visits, information shared during the interviews, and the responses to the mail survey. Consistent with the format described earlier in this section of the report, the description is divided into two procedure sets.

**Procedure Set 1 - DCF and CBC Lead Agency: Process**

The framework for the procedures used by DCF in the selection of the CBC Lead Agency was based on an Invitation to Negotiate (ITN), which was released at two separate times. In response to the first ITN, Devereaux Kids, Inc. was selected as the CBC provider. At the end of the time period for the transition contract, Devereaux Kids, Inc., the agency responsible for the CBC activities, changed its organizational structure and created a subsidiary to operate the CBC
model. The Department of Children and Families identified the new agency as different from that selected. A second procurement process was initiated with the release of the second ITN. It was learned during the field research that the current CBC Lead Agency, Family Continuity Program, Inc. was selected during the release of the second ITN. The time frame set by the Department for this ITN was as follows:

<table>
<thead>
<tr>
<th>Event</th>
<th>Date and Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Invitation to Negotiate Released</td>
<td>Friday, July 16, 1999</td>
</tr>
<tr>
<td>Last Day to Submit Inquiries</td>
<td>Wednesday, August 11, 1999, 5:00 pm, EDT</td>
</tr>
<tr>
<td>Completed Application Due Date</td>
<td>Tuesday, August 31, 1999, 3:00 pm, EDT</td>
</tr>
<tr>
<td>Proposal Opening</td>
<td>Tuesday, August 31, 1999, 4:00 pm, EDT</td>
</tr>
<tr>
<td>Meeting of Evaluation Team</td>
<td>September 3, 1999 and September 7-10, 1999</td>
</tr>
<tr>
<td>Notification of Rankings</td>
<td>Monday, September 13, 1999</td>
</tr>
<tr>
<td>List of Qualified Applicants Posted</td>
<td>Monday, September 13, 1999</td>
</tr>
<tr>
<td>Initiation of Negotiations</td>
<td>NLT Monday, September 20, 1999</td>
</tr>
</tbody>
</table>

Additional information obtained during field research identified several steps in the procurement and contracting procedures in Procedure Set 1. Referring to all of the information obtained from the key participants, the steps were as follows:

**Procurement:**
1. Preliminary Discussion/Planning system of care in the community (included several providers)
2. Development of the ITN
3. Release of Second ITN
4. Communication with Community Providers
5. Response to Questions Submitted by Applicants
6. Preparation of response to ITN
7. Performance Bonds and development of MIS
8. Submitting response to ITN
9. Review by evaluation committee
10. Scores posted and formal letter of selection/phone call to announce Lead Agency

**Contracting:**
1. Lead Agency Reviewed transition needs (capacity building)
2. Lead Agency Communication with Service Center
3. DCF negotiation team selected
4. Agency contacted by DCF to start negotiations
5. Negotiations for transition contract
6. Signed transition contract
7. Negotiations for service contract
8. Signed service contract

*Procedure Set 1: Invitation to Negotiate (Required Information)*
The ITN requested a core set of information, such as contact name, address, telephone, name of parent organization, geographic area served, Medicaid provider status, minority status, and the board of directors. In addition, the ITN requested information on the qualifications of the agency applying to be a Lead Agency. Qualifications specifically addressed in the ITN included the following (by major category):

1. **Ability to provide, directly or through provider network, all child protection services:**
   - Experience…
     - building networks in social services, physical health, and/or behavioral health service delivery;
     - providing or managing child protection related services;
     - negotiating and managing contracts; and,
     - implementing procedures for administrative and programmatic accountability, including reporting on the quantity of service provided performance evaluation.

2. **Ability to ensure a continuity of care for children:**
   - Applicant’s description of core components of child protection system;
   - Method the applicant would employ to insure continuity of care;
   - Method the applicant would employ for determining what services will be provided, how, and by whom;
   - Method the applicant will employ to determine whether or not the services provided meet the outcome expectations; and,
   - Method the applicant will employ to insure that children achieve permanency as quickly as possible.

3. **Ability to coordinate, manage, and integrate all child protective services in the community:**
   - Vision and values that will govern the network and how the applicant’s governing body will serve as a link between the applicant and the community;
   - The manner in which network providers will be selected;
   - The criteria for selection of network providers;
   - The procedure that will be used to resolve conflicts among agencies;
   - A description of the applicant’s current Quality Assurance System and/or its vision for the quality assurance system;
   - The procedure that will be used to insure accountability among individual network providers;
   - The anticipated sequence for phasing in components of the child protection system;
   - A diagram of how children and families will progress through the proposed system of care;
   - The primary process measures the applicant thinks are important in meeting required outcomes; and,
   - The process the applicant will follow to resolve conflicts of interest.
4. **Ability to coordinate services in cooperation with child protective investigations:**
   - Establish and maintain working relationships with District Sheriffs and/or Department child protective investigation divisions, state Attorney’s offices, and Child Protection Teams;
   - Receive referrals from the protective investigation units of the Department and/or the Pasco and Pinellas Sheriffs;
   - Involve the Department and/or Sheriffs’ protective investigation units in service planning;
   - Resolve conflicts with the Department’s and/or Sheriffs’ protective investigators;
   - Involve the Department’s and/or Sheriffs’ protective investigation units in follow-up investigations, if necessary; and,
   - Receive/share historical data on outcomes of protective investigations with Department and/or Sheriffs’ Office personnel.

5. **A description of the applicant’s experience with child abuse/neglect victims and their families.**

6. **Applicant’s organizational and financial stability and ability to manage the child protection system:**
   - Corporate infrastructure, including the organizational size and structure of the governing body and advisory boards;
   - For applicants whose organizations have foundations, nonprofit corporations, for-profit subsidiaries, or holding companies which act in the name or on behalf of the applicant, the applicant’s response must include:
     - How the applicant exercises oversight to the extent allowed by law with any entity which has been formed by it to raise or hold funds or assets on its behalf;
     - Clearly articulated roles, relationships, and responsibilities of all parties operating within the law for any organization that has formed multiple corporate entities;
     - Mechanisms used to ensure regular and ongoing communication between any separate entity and the governing body; and,
     - Mechanism for ongoing review of the relationship between the governing body of the applicant and the separate legal entity.
   - A copy of the applicant’s most recent financial and compliance audit;
   - A detailed description of credentials/requirements of the top administrative staff to be used in the implementation of lead community-based agency responsibility’
   - Any existing administrative, accounting, and personnel systems that will be utilized in this project;
   - Applicant’s ability to earn grants and federal funds and comply with federal funding requirements;
   - Federal and State funding streams intended to be used to fund services; and,
   - Other resources, if anticipated, which will be developed for this project.
7. Evidence of the applicant’s reputation for providing quality care and services for children and families, as well as community visibility.

8. Provision of a secured bond from a surety company.

Field research revealed that there was a CBC readiness assessment instrument developed to assist in the selection of CBC lead agencies. A copy of this assessment is in Appendix VIII-C. It was communicated to the research team that stakeholders in the process, including the CBC lead agency staff and staff with the Department of Children and Families, contributed to the development of the assessment. The assessment addressed several organizational and service attributes considered important in assuming the responsibilities of the CBC lead agency. Some of these were organizational purpose and relationship to the community, continuous quality improvement, organizational stability, management of human resources, quality of the service environment, financial and risk management, management information systems, and system of care. It was not clear if the assessment had been used subsequently to identify a CBC lead agency in another county.

Procedure Set 2 - CBC Lead Agency and Providers

Some procedures listed in Procedure Set 1 for DCF contracting with the Lead Agency overlap with those used in the CBC Lead Agency procurement of services and contracting with service providers. This overlap refers to the development and implementation of some of the initial procedures during the negotiations between the CBC Lead Agency and the Department. In addition, some procedures were implemented during the negotiations between the Department and the CBC Lead Agency. Examples include the initiation of contact with the DCF staff in child protection services as well as existing provider agencies who had previously contracted with DCF. It was indicated in several discussions with providers that the first year contract with FCP was very similar to the contract they had with the Department during the previous year. This finding emphasizes the importance of recognizing that the field research for this project was conducted during the first year of operation of the CBC lead agency in Pinellas and Pasco Counties. A transition from the Department as the contractor to the CBC lead agency was still underway.

The Credentialing Handbook serves as the guide for all of the procedures implemented by FCP. It includes:

- Confidentiality;
- quality improvement;
- quality assurance;
- continuous quality improvement;
- complaint resolution;
- credentialing time frame;
- notifications;
- appeals;
- membership of and meeting schedule for the credentialing committee;
• provisional privileges;
• individual provider standards;
• site visits;
• suspension or reduction of privileges; and,
• termination of privileges.

The Network Provider Manual provides procurement procedures that correspond with the credentialing requirements in the Credentialing Handbook. According to the manual, all providers “shall be agencies who are, or are in the process of, being accredited by JCAHO, CARF, or COA.” Providers must complete an agency application, which is then submitted to FCP and the FCP credentialing committee. A copy of the agency provider application is in Appendix VIII-D. The major categories of information that must be provided in the application are:

- Agency History;
- Programs and Services;
- Staffing;
- Community Needs/Client Rights;
- Malpractice Claims History;
- Quality Assurance Program;
- Management Information Systems; and,
- Financials.

In the credentialing process, a list of criteria is used to evaluate the agency. These criteria are as follows:

- Ability, training, and experience with a particular service;
- Ability to work in an integrated team approach;
- History/Philosophy matches service delivery;
- Stable operational, fiscal, and business practices;
- Qualified and credentialed staff;
- Cultural competency and language capability;
- Participation in quality assurance and outcomes measurement activities;
- Professional liability coverage and history;
- Consumer satisfaction surveys; and,
- MIS Capacity.

There is an appeals process for agencies that are denied participation in the CBC provider network. The appeal must occur within 10 days of the credentialing committee’s decision. The provider may submit additional information to respond to missing information in the application. Letters sent to any agency denied participation in the network are required to contain reasons for denial.

After the agency application has been submitted and the agency has been credentialed, the agency may submit a service application for the provision of services and programs. A copy of the service application is in Appendix VIII-E. Only the agencies that have been credentialed
are permitted to submit service applications. The service applications are summarized and then reviewed by the credentialing committee. The agency is permitted the opportunity to give a presentation (10 minute presentation with 20 minutes for questions and answers). The scoring of the agencies is based on service provision (weighting doubled for this criterion), quality assurance program, organization capacity and infrastructure, and fiscal capacity and budget.

As part of its development of the FCP service network, the manual includes information on quality assurance. Each agency is expected to have an internal review process similar to that developed for FCP. MIS data collection, performance indicators, and outcomes are required as part of the quality assurance system. A Quality Improvement Council reviews monthly data aggregated from systems developed in each agency. There is also a grievance procedure that allows customers, employee and subcontracted providers to redress FCP actions that are considered unjust.

Based on the available reference material from the lead agency and other information shared during the interviews conducted as part of this project, the major steps in the procurement and contracting procedures for the CBC lead agency are presented below. It is important to note that for this CBC lead agency, some of the procedures were developed and implemented during their transition contract phase.

<table>
<thead>
<tr>
<th>CBC Lead Agency Procurement</th>
<th>Communicate with child welfare providers in the community to inform them of their selection as a lead agency and review system of care or similar plan for the delivery of services developed by providers in the community</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Some of these procedures begin during the lead agency’s transition contract phase and before the service contract phase)</td>
<td>Meet with employees of the Department who provide foster care and related services to discuss preliminary plans to transition from DCF to a CBC model</td>
</tr>
<tr>
<td></td>
<td>Develop plan and requirements for procurement of services among providers (refers to credentialing procedures)</td>
</tr>
<tr>
<td></td>
<td>Notify providers of the requirements in the plan for procuring services (includes credentials and review procedure)</td>
</tr>
<tr>
<td></td>
<td>Release agency applications for selection as a provider in the CBC provider network</td>
</tr>
<tr>
<td></td>
<td>Review applications and refer to credentialing committee for review and selection</td>
</tr>
<tr>
<td></td>
<td>Notify provider agency of decision of credentialing committee</td>
</tr>
<tr>
<td></td>
<td>Service application process initiated (refer to contracting procedures in the next table)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CBC Lead Agency Contracting</th>
<th>Release of service applications to credentialed CBC providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Some of these procedures occur during the CBC lead agency transition contract phase and before the service contract phase)</td>
<td>Agency service applications submitted</td>
</tr>
<tr>
<td></td>
<td>Agency service applications reviewed and scored by credentialing committee</td>
</tr>
<tr>
<td>Selected agencies invited to give presentation and answer questions</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Agency service applications and verbal presentations scored and decision regarding selection of agency as service provider made</td>
<td></td>
</tr>
<tr>
<td>Negotiation of service contract</td>
<td></td>
</tr>
<tr>
<td>Contract signed</td>
<td></td>
</tr>
</tbody>
</table>

The order of contracting and procurement procedures for Procedure Set 2 listed by five providers¹ in response to the mail survey are displayed below:

---

¹ Only 5 responses were legible for this question.
## Order of Procurement Procedures (Procedure Set 2)

<table>
<thead>
<tr>
<th>Respondent 1</th>
<th>Respondent 2</th>
<th>Respondent 3</th>
<th>Respondent 4</th>
<th>Respondent 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop knowledge of Previous service providers</td>
<td>Receipt of invitation to submit a service application to FCP</td>
<td>Community members Planning for services</td>
<td>Community alliance formed and comprised of stakeholders to identify the system of care to be used by the Lead Agency.</td>
<td>Application to be provider was distributed and approved</td>
</tr>
<tr>
<td>Participate in application Process to join Provider Network</td>
<td>Submission of service application to FCP</td>
<td>FCP indicated all existing Contracts would be Renewed following plan for services developed by community</td>
<td>Lead Agency issued an application process whereby providers needed to apply and be accepted as community-based providers under the Lead Agency</td>
<td>Request for proposal and description of services needed.</td>
</tr>
<tr>
<td>Transition of contracts from DCF to FCP</td>
<td>Invitation to make an oral Presentation to FCP</td>
<td>Budget submittal</td>
<td>Return application</td>
<td></td>
</tr>
<tr>
<td>Notification of FCP Acceptance</td>
<td>Contract negotiation</td>
<td>Review application</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Credentialing process</td>
<td>Interview applicant</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Application sent Written portion submitted Notification of selection To make verbal Presentation Make verbal presentation Provider selected Letter sent to providers Not selected</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Announcement winning proposal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Order of Contracting Procedures (Procedure Set 2)</td>
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<tr>
<td><strong>Respondent 1</strong></td>
<td><strong>Respondent 2</strong></td>
<td><strong>Respondent 3</strong></td>
<td><strong>Respondent 4</strong></td>
<td><strong>Respondent 5</strong></td>
</tr>
<tr>
<td>FCP has signed contract with DCF</td>
<td>Invitation to contract negotiation meeting with FCP; discuss budget and resolve issues</td>
<td>Submit budget and services Information</td>
<td>Contracts (existing) were extended by the lead agency</td>
<td>Meet with selected applicants</td>
</tr>
<tr>
<td>Submittal of budget</td>
<td>Clarify/resubmit budgets</td>
<td>Meetings to negotiate Contract</td>
<td>Applications released for new services</td>
<td>Negotiate with lead agency</td>
</tr>
<tr>
<td>Submitting revised budgets</td>
<td>Receive FCP standard contract</td>
<td>Contract is finalized and Signed</td>
<td></td>
<td>Sign contract</td>
</tr>
<tr>
<td>Signing and executing Contracts</td>
<td>Provider president/CEO approves and signs contract and returns it to FCP</td>
<td></td>
<td></td>
<td>Begin implementation</td>
</tr>
<tr>
<td>FCP monitors the contract through onsite visits, discussions with staff, record reviews, and by reports of providers addressing contract requirements (i.e., service utilization, client program outcomes or measurable objectives)</td>
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</tbody>
</table>
Research Findings

The findings presented herein refer to research that is considered evaluative in nature. The various participants assessed selected procedures and aspects of procurement and contracting. These findings provide one basis for understanding the current procedures and assessing the need for change. Where appropriate, the findings address both Procedure Set 1 and Procedure Set 2. The findings are presented as responses to the research questions listed in an earlier subsection of this section as well as additional questions that were included in the questionnaire.

Research Question 1-A: Were the procurement and contracting procedures used by DCF and the CBC Lead Agency efficient and effective?

Procedure Set 1: DCF and CBC Lead Agency

The procedures used by the Department to select and contract with the CBC Lead Agency were considered somewhat effective, effective or extremely effective by two of the respondents. Another respondent indicated that the procedures were not followed as intended. Efficiency was valued because of the participation of appropriate DCF officials who could answer the necessary questions during the negotiations; the ITN allowed for efficiency (short time frame); and, negotiation of the contract was efficient because DCF contact had the expertise to address all issues.

Efficiency and effectiveness were perceived as limited by the lack of sufficient information sharing on the part of DCF regarding the amount of available funding for the CBC network.

Procedure Set 2: CBC Lead Agency and Service Providers (Refer to Appendix VIII-F.)

Based on responses to the mail survey, 8 (out of ten) respondents indicated the FCP procurement procedures were effective, very effective, or extremely effective. Seven out of 10 respondents indicated the contracting procedures were effective, very effective, or extremely effective.

Research Question 1-B: Comparing importance and actual experience, were the procurement and contracting procedures equitable and open, and did they have sufficient oversight, support, communication, and accountability?

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2 To reiterate, in Procedure Set 1, the selection of the CBC Lead Agency by the Department of Children and Families is the main focus. In Procedure Set 2, the selection of the providers by the CBC Lead Agency is the focus.
Procedure Set 1: DCF and CBC Lead Agency

Two respondents ranked the perceived importance of effective procurement as follows:

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<tr>
<th>Procurement</th>
<th>Average Rank</th>
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<tbody>
<tr>
<td>Equity</td>
<td>2.5</td>
</tr>
<tr>
<td>Openness</td>
<td>3</td>
</tr>
<tr>
<td>Communication</td>
<td>3</td>
</tr>
<tr>
<td>Accountability</td>
<td>3.5</td>
</tr>
<tr>
<td>Efficiency</td>
<td>4.5</td>
</tr>
<tr>
<td>Support</td>
<td>4.5</td>
</tr>
<tr>
<td>Oversight</td>
<td>7</td>
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</tbody>
</table>

For procurement, respondents ranked equity as the most important to their agencies, and oversight as least important.

For contracting, two respondents ranked openness as most important to their agencies and oversight as least important, as presented below:

<table>
<thead>
<tr>
<th>Contracting</th>
<th>Average Rank</th>
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</thead>
<tbody>
<tr>
<td>Openness</td>
<td>1</td>
</tr>
<tr>
<td>Equity</td>
<td>2.5</td>
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<tr>
<td>Accountability</td>
<td>3.5</td>
</tr>
<tr>
<td>Communication</td>
<td>4</td>
</tr>
<tr>
<td>Support</td>
<td>5</td>
</tr>
<tr>
<td>Efficiency</td>
<td>5</td>
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<td>Oversight</td>
<td>7</td>
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</tbody>
</table>

Participants indicated that their experience had been generally positive with all of the descriptions of effective procurement and contracting procedures listed in the above figures. However, there was an indication that openness and communication were limited by a lack of sufficient information, during the contracting procedure, on the level of available funding.

Procedure Set 2: CBC Lead Agency and Service Providers

Rankings of effective CBC Lead Agency contracting and procurement procedures in order of their importance to each organization or agency are displayed below (n = 10):

<table>
<thead>
<tr>
<th>Procurement</th>
<th>Average Rank</th>
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<tbody>
<tr>
<td>Equity</td>
<td>1.3</td>
</tr>
<tr>
<td>Communication</td>
<td>2.6</td>
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<tr>
<td>Openness</td>
<td>3.2</td>
</tr>
<tr>
<td>Accountability</td>
<td>3.8</td>
</tr>
<tr>
<td>Efficiency</td>
<td>4.7</td>
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<tr>
<td>Technical Assistance</td>
<td>6.1</td>
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</table>
For procurement, equity was the most important to provider agencies and financial assistance the least. For contracting, communication and equity were most important and oversight least (n = 9).

<table>
<thead>
<tr>
<th>Contracting</th>
<th>Average Rank</th>
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<tbody>
<tr>
<td>Communication</td>
<td>2.6</td>
</tr>
<tr>
<td>Equity</td>
<td>2.8</td>
</tr>
<tr>
<td>Openness</td>
<td>3.1</td>
</tr>
<tr>
<td>Accountability</td>
<td>4.0</td>
</tr>
<tr>
<td>Efficiency</td>
<td>4.1</td>
</tr>
<tr>
<td>Technical Assistance</td>
<td>5.9</td>
</tr>
<tr>
<td>Financial Assistance</td>
<td>6.1</td>
</tr>
<tr>
<td>Oversight</td>
<td>7.0</td>
</tr>
</tbody>
</table>

The actual experience for procurement and contracting among the service providers was mixed. Five respondents indicated their experience with their top three effectiveness criteria was good or excellent. Two other respondents indicated their experience on their top three rankings was fair or neutral; and 2 respondents reported it was poor.

**Research Question 2: Did the time frame permitted for a response to the ITN (or other process for applying) allow for preparation of a comprehensive response?**

**Procedure Set 1: DCF and CBC Lead Agency**

In this research, most of the feedback indicated that there was sufficient time allowed. However, one participant indicated there should have been more support and information provided by the Department (specifically regarding the anticipated number of children to serve and costs per child).

**Procedure Set 2: CBC Lead Agency and Service Providers**

The procedures that were identified in the mail survey that should allow for additional time are the following (total time needed is indicated following each item):
- Submitting initial budget (6 weeks)
- Subsequent submissions (2 weeks)
- RFPs (1 month)
- Time between application release and submission of written response (1 month)
- Negotiation of contract language and budget (2 weeks)
- Contracts should have been developed in March and April—rather than only June.
**Research Question 3:** How well did the ITN explain the roles and responsibilities of the Lead Agency and the Department under CBC and were these roles and responsibilities actually implemented?

**Procedure Set 1: DCF and CBC Lead Agency**

With one exception, respondents agreed that the purpose of the ITN was not to explain roles and responsibilities of the Lead Agency and the Department under CBC; rather, these were to be identified in the agency response to the ITN. Another agency respondent indicated that there was not sufficient information in the ITN, but did not specifically identify roles and responsibilities as information that was essential.

**Research Question 4:** How well did the Department respond to questions during the procurement process (i.e., were they timely, thorough, accurate)?

**Procedure Set 1: DCF and CBC Lead Agency**

Responses to this question were mixed and covered several relevant issues. The respondents described the actions of the DCF district staff as formal and objective. It was mentioned that staff at DCF headquarters also participated in the procurement and contracting procedures. Generally, the response of the district and headquarters staff to questions was considered good, but the involvement of staff at DCF headquarters was considered important for financial and legal matters. In contrast, one respondent indicated that the involvement of staff at DCF district and headquarters created confusion and uncertainty.

**Research Question 5:** Were there practical advantages using the ITN or the process used by the CBC Lead Agency as opposed to another procurement process?

**Procedure Set 1: DCF and CBC Lead Agency**

The respondents indicated advantages and disadvantages of the ITN. The advantages included the following:
- Effective and efficient;
- Encourages creative thinking;
- User-friendly and not intimidating;
- Covered the major areas that needed to be addressed;
- Forced the community to prepare.

The disadvantages included the following:
- Needed more guidance;
- Should include more legal information; and
- It did not provide guidance on what actually needs to be done—no big picture.
Procedure Set 2: CBC Lead Agency and Service Providers (Refer to Appendix VIII-F.)

The advantages and disadvantages of the process used by the CBC Lead Agency that were specified in mail survey responses are included in Appendix VIII-C. Some of the advantages listed were the following:

- Less cumbersome;
- Systematizing the application process;
- Application process streamlined by the credentialing process; and,
- Standards are clear, high, and equitable.

Some of the disadvantages listed were the following:

- Lead Agency not as experienced as DCF;
- Did not provide dollar amounts, scoring mechanism, review deadline, or grievance procedure;
- Unclear of overall plan;
- Sense of partnership unclear; and,
- Possibly too intimidating for small providers.

Research Question 6: Compared to DCF, what are the benefits, if any, for procurement and contracting in the CBC model for foster care and related services?

No complete answers to this specific question were obtained. One provider mentioned that the contracting procedures used by DCF were preferred by his agency. A reason for this opinion was the preferred use of outcome measures as the standard for performance in the contract. Responses to other questions address this question, in part, and can be reviewed elsewhere in this report (see questions 5, 7, and 8).

Research Question 7: What are the strengths and weaknesses of the current procurement and contracting procedures for the CBC model for foster care and related services?

Responses to this question are similar to those offered for Question 1 and 5. No additional information was communicated via the field research or in the mail survey.

Research Question 8: What is considered ideal for the CBC procurement and contracting?

Procedure Set 1: DCF and CBC Lead Agency

Some of the responses addressing the ideal model referred to strengthening or maintaining aspects of current procedures that were considered desirable. Needs for the implementation of the CBC model were also mentioned, such as, establishing contact with the existing DCF staff working in foster care and related services and the development of a system of care plan that is supported by the community providers. Specific recommendations were:
• Continuing to use an ITN and keeping the ITN brief and not too prescriptive;
• Careful selection of the evaluation committee; with fewer DCF representatives specifically recommended;
• Releasing an ITN even if a community is considered “not ready” by the Department. This comment was justified by stating that the release of the ITN makes the community respond and become prepared to respond; and,
• Consideration of differences between the smaller, more rural counties and the larger counties. In rural areas, the financial infrastructure might require assistance to implement the CBC model.

Procedure Set 2: CBC Lead Agency and Service Providers (Refer to Appendix VIII-F.)

Suggestions for the ideal CBC model referred to several different aspects of the relevant procedures.
• The competencies of the Lead Agency should be considered carefully;
• Contracting for results and not staff;
• Service applications should have dollar amounts specified;
• The service application process should include a time frame for review, a bidder’s conference scoring mechanism, and appeal or grievance procedures; and,
• Early contract monitoring and sufficient time to work on contracts.

Research Question 9: What are the three most important criteria for selecting a CBC Lead Agency and a CBC provider/subcontractor?

Procedure Set 1: DCF and CBC Lead Agency

The criteria listed by the respondents in this category were the following:
• Mission driven (child welfare)
• History of community experience and involvement
• Key Staff qualifications
• Which agency can be depended on to do the job
• Agency with the largest number of referrals

Procedure Set 2: CBC Lead Agency and Service Providers (Refer to Appendix VIII-F.)

Responses to this question in the mail survey are listed in Appendix VIII-C. The major criteria specified for the selection of the providers/subcontractors were the following:
• Record of Service
• Capacity
• Positive working relationship
• Ability to define objectives/outcomes
• Cost/efficiency
• Ability to partner and collaborate effectively
• Stability of services
• Financial integrity

Summary and Recommendations

Summary

Procedure Set 1—DCF and CBC Lead Agency

Procedures can be considered effective in two ways: as intended and as implemented. The study identified the perception on the part of Lead Agency representatives that procurement and contracting procedures were generally effective as intended, but not necessarily as implemented. A specific area of concern was the lack of information in the Invitation to Negotiate regarding the amount of available funding, legal context, and anticipated number of children to be served. Additionally, roles and responsibilities relevant to DCF and the Lead Agency were not specified in the ITN. The ITN did not provide a vision for applicants of the intended integrated service system. Research indicates that establishing clear contract expectations and determining the costs and price of services are key accountability concerns (see Kettner & Martin, 1998). However, the perception that the ITN provided incentive for community-level planning is beneficial and supports Kettner and Martin’s (1998) recommendation that planning be comprehensive and community-based to ensure accountability.

The procedures were seen as efficient primarily due to the inclusion of DCF officials who had expertise and authority. DCF District staff members were able to respond to questions during the process, but one respondent indicated that involvement of District and Headquarters staff at times created confusion and uncertainty. A key concern regarding effective collaborations is lack of state leadership (see O’Looney, 1997), but this leadership must be clear to all parties.

Equity and openness are highly valued by the Lead Agency representatives, but oversight was not. This is consistent with the view of service integration whereby partnerships are forged and communication and trust are essential for success (see Hassett and Austin, 1997). Communication is assumed to be a problem in terms of the steps involved in the contracting and procurement process: Lead Agency respondents reported different steps from each other and the published guide. Time was sufficient for the process of contracting and procurement with the Lead Agency, which alleviates another collaboration concern: lack of time (see O’Looney, 1997).

Finally, Lead Agency representatives offered suggestions for selection of a Lead Agency in the CBC program and ideal procedures. Appropriate qualifications for Lead Agency applicants referred to mission, experience, qualifications, and demonstrated performance. These qualifications are represented in the CBC Readiness Assessment developed by the Department and Lead Agency officials this past year. The Invitation to Negotiate process was recommended, with adjustments to the composition of the evaluation committee and emphasis placed on its role.
in promoting community-level planning. Also, the potential need for financial and technical assistance in rural areas should be considered, which is consistent with Gibelman and Demone’s (1998) concern that privatization can preclude competitive involvement of indigenous agencies.

**Procedure Set 2—CBC Lead Agency and Service Providers**

Providers perceived procurement and contracting procedures favorably in terms of general effectiveness and efficiency. Similar to the Lead Agency respondents, service providers believed equity and communication to be key features of the process. Financial assistance and oversight were seen as relatively unimportant. However, when asked to rate the overall effectiveness of their top three criteria, nearly half reported fair, neutral, or poor experiences. Perhaps ineffective communication contributed to these experiences, as evidenced by a lack of agreement among providers regarding the steps in the contracting and procurement process.

With reference to O’Looney’s (1997) caution that lack of time can contribute to the failure of a collaboration, it is important to note that service providers reported that several steps in the contracting and procurement process require more time than was provided. In addition, there were concerns expressed regarding the level of experience displayed by the Lead Agency, and expectations regarding budgets, overall plan, sense of partnership, and application evaluation criteria were not clearly communicated. Positive aspects of the application process included its systematization and streamlining (via the credentialing process), and provision of performance standards. Service providers also indicated that the process might be too sophisticated for small providers, which is similar to feedback from a respondent referring to the questions addressing procurement of a CBC lead agency.

Service providers offered several recommendations for the contracting and procurement process of the CBC model; for example, bidders’ conferences, clear scoring mechanisms, additional time and early monitoring were all seen as potential improvements to the current process. Interestingly, at least one respondent indicated the need for a grievance or appeal process, yet one is available in the **Credentialing Handbook**.

**Recommendations**

Based on the data gathered from interviews, mail surveys, and document analyses, the research team offers the following recommendations relative to the contracting and procurement component of the CBC:

1. Implement procedures that are communicated to Lead Agencies; an alternative is to periodically issue revised procedures.

2. Provide specific information in the Invitation to Negotiate, including funding amounts/availability, legal context, anticipated number of children and families to be served, roles and responsibilities of all parties, and a guiding vision for the CBC.
3. Communicate with communities the importance of comprehensive planning and offer the ITN as a vehicle for accomplishing this.

4. Foster system-wide collaborative planning processes. Ensure that the entire community is meaningfully involved in this endeavor.

5. Ensure that DCF staff have both expertise and autonomy to contribute to the process, yet develop clear roles to reduce confusion and uncertainty.

6. Emphasize equity and open communication throughout the process. De-emphasize oversight and financial assistance.

7. Develop a list of criteria for appropriate qualifications for potential CBC Lead Agencies in collaboration with all stakeholders; widely disseminate these criteria. Evaluate the effectiveness of the CBC Readiness Assessment vis-à-vis the actual selection of a competent Lead Agency; include all stakeholders in this evaluation. This process should include an assessment of the appropriateness of dual roles played by the Lead Agency (oversight and service provision).

8. Identify appropriate composition of the ITN Evaluation Committee with input from all stakeholders.


10. Retain effective and efficient features of the process. Provide timeframes that are reasonable yet efficient; develop these with input from all stakeholders and ensure their wide dissemination.

11. Require Lead Agencies to communicate all expectations, evaluation criteria, roles, and responsibilities clearly to potential service providers.

12. Ensure effective communication of the presence of grievance procedures to all stakeholders.
13. Solicit and implement suggestions from service providers on a regular basis.

14. Expand membership of the Credentialing Committee to include representation from all stakeholders; this will ensure the integrity of the service network and foster collaboration.

**Recommendations for Further Evaluation**

By reviewing Harbert, Finnegan, and Tyler's (1998) guidance for evaluation of interagency collaboration efforts, we recommend the following direction for future evaluations of the CBC procurement and contracting process:

1. Using aggregated client-level outcome data, analyze the extent to which clients’ lives have been affected by the CBC model.
2. Repeat the administration of Lead Agency and Service Provider questionnaires after one year to identify continued strengths and emerging concerns.
3. Develop criteria for effectiveness and success of the service integration system with input from all stakeholders and evaluate these criteria using appropriate research methods.
4. Conduct a benefit-cost study at the level of state expenditures. This should include the impact of a decentralized system on workloads and personnel allocation, travel costs, administrative oversight requirements, and service outlays.
References


Questionnaire for Lead Agency CBC Staff and DCF District Staff

The primary topic of interest in this interview is procurement and contracting procedures used in the development of the Community-Based Care model for foster care and related services in Pasco and Pinellas counties. There are two different sets of procedures addressed in this interview/questionnaire. One is the procurement and contracting procedures used to identify and secure a lead provider for the community-based care model for foster care and related services in Pinellas and Pasco counties. A second set of procedures is the procurement and contracting procedures used by the CBC lead agency to identify and subcontract with the service providers in the community-based care service network.

***********Procedure Set 1***********

***********Procedure Set 2***********

The primary objectives in this interview are to understand the procurement and contracting procedures, assess their strengths and weaknesses, and identify modifications that could allow or promote improvements.

In this study, **procurement** is the process of defining the services needed, identifying the options for obtaining those services, seeking possible providers of those services, and selecting among them. The Invitation to Negotiate (ITN) is encompassed in the procurement process. The submission of proposals and the review of those proposals are also part of this set of procedures. **Contracting** is writing the contract, negotiating it with the selected provider, and getting it signed or executed.

I. Procurement of and Contracting with CBC Lead Agency (Set 1)

The first section of this questionnaire addresses the Department of Children and Families’ procurement of and contracting with the CBC lead agency in Pinellas and Pasco Counties.

1. What is your role in this organization as it relates to the procurement of and contracting with the CBC lead agency in Pinellas and Pasco Counties?
2. Please describe the nature of your interactions with administrative personnel at the CBC Lead Agency or the Department in Pinellas and Pasco Counties. (advisory, technical assistance, oversight, etc.)

3. Please list the key steps in the procurement and contracting procedures in the identification and selection of the CBC lead agency in Pinellas and Pasco Counties. (in chronological order)

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4. Were the time frames sufficient for the procedures listed in #3 above? If not, which ones did not have sufficient time allowances and how much additional time was needed?

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<tr>
<th>Procurement</th>
<th>Procedure with Insufficient Time</th>
<th>Additional Time Needed</th>
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</table>
5. Which of the procedures listed in your answer to question #3 above were the most efficient?

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<th>Procedure with Insufficient Time</th>
<th>Additional Time Needed</th>
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6. Which of the procedures listed in your answer to question #3 above were the most effective?

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<thead>
<tr>
<th>Procedure with Insufficient Time</th>
<th>Additional Time Needed</th>
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7. How well did the Invitation to Negotiate (ITN) explain the role and responsibilities of the Lead Agency and the Department under the CBC model?

<table>
<thead>
<tr>
<th>DCF</th>
<th>Excellent</th>
<th>Good</th>
<th>Neutral</th>
<th>Fair</th>
<th>Poor</th>
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</thead>
<tbody>
<tr>
<td>CBC Lead Agency</td>
<td>Excellent</td>
<td>Good</td>
<td>Neutral</td>
<td>Fair</td>
<td>Poor</td>
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</tbody>
</table>

8. Are the procedures that were used by the Department the same as what was described in the ITN? If not, what is different?

9. Did the CBC lead agency pose any questions to the Department during the procurement and contracting procedures? If yes, how well did the Department respond to the questions?
10. Were there advantages and disadvantages in the use of the ITN compared to other procurement processes, such as, Request for Proposals and Invitation to Bid? Yes/No If yes, what were they?

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<thead>
<tr>
<th>Advantages of ITN</th>
<th>Disadvantages of ITN</th>
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11. Were there any procedural or legal requirements that limited the ability of the Department to identify and contract with a CBC lead agency? Yes/No If yes, what were the requirements associated with DCF and the requirements associated with the lead agency?

<table>
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<tr>
<th>DCF Requirements as Barriers</th>
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<table>
<thead>
<tr>
<th>Lead Agency Requirements as Barriers</th>
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</table>

12. With regard to procurement and contracting, what differences, if any, have you observed between counties that have the CBC program and those without.
13. What changes, if any, have occurred in the number and/or type of personnel employed for foster care and related services that can be attributed to the contracting and procurement process used to identify and contract with a CBC lead agency?

14. What changes, if any, have occurred in the cost of providing child welfare services that can be attributed to the procedures used in identifying and contracting with a CBC lead agency?

15. Are there any planned changes in the procedures for identifying and contracting with a CBC lead agency? If not, are there any that you would suggest?

16. If you could recommend an ideal model for the procurement of and contracting with a CBC lead agency, what would you recommend and why?

17. Please select the response that best describes your estimation of the effectiveness of the procedures used by the Department in procuring and contracting with a CBC lead agency.

Procurement Procedures:
- Extremely effective
- Somewhat effective
- Effective
- Not very effective
- Not at all effective

Please explain the reason for your response to this question.: __________________

Contracting Procedures:
- Extremely effective
- Somewhat effective
- Effective
- Not very effective
- Not at all effective

Please explain the reason for your response to this question.: __________________
18. Please rank the following descriptions of effective DCF procedures in the procurement of and contracting with a CBC lead agency in order of their importance to your organization or agency:

<table>
<thead>
<tr>
<th>Description</th>
<th>Rank (importance to my agency) Procurement</th>
<th>Rank (importance to my agency) Contracting</th>
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<td>Efficiency</td>
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<td>Accountability</td>
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</tbody>
</table>

19. Next, consider the same descriptions of an effective contracting and procurement process and rate your actual experience from the perspective or your organization or agency:

<table>
<thead>
<tr>
<th>Description</th>
<th>ACTUAL EXPERIENCE Procurement</th>
<th>ACTUAL EXPERIENCE Contracting</th>
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</thead>
<tbody>
<tr>
<td>Efficiency</td>
<td>Excellent</td>
<td>Good</td>
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<td>Equity</td>
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<td>Accountability</td>
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</table>

Are there specific reasons for checking a neutral, fair, or poor response for any of the “actual experience” descriptions listed in the above matrix? If yes, please state them here. ______________________________________________________
20. What should be the **3 most important criteria** for identifying a CBC lead agency? (resources, capacity, record of service???)

<table>
<thead>
<tr>
<th>Criteria for Identifying a CBC Lead Agency</th>
<th>1.</th>
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</table>

21. Are there any additional comments you would like to share regarding the Department’s procurement of and contracting with a CBC lead agency?
II. Procurement of and Contracting with Providers or Subcontractors (Procedure Set 2)

The second section of this questionnaire addresses the procurement of and contracting of the CBC lead agency in Pinellas and Pasco Counties with providers or subcontractors in those counties.

1. What is your role in this organization as it relates to the procurement of and contracting with the CBC providers or subcontractors in Pinellas and Pasco Counties?

2. Please describe the nature of your interaction with administrative personnel in the CBC provider or subcontractor agencies in Pinellas and Pasco Counties (advisory, technical assistance, oversight, etc.)

3. Please list the key steps in the procurement and contracting procedures in the identification and selection of the CBC providers in Pinellas and Pasco Counties. (in chronological order)

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<tr>
<th>Procurement</th>
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<th>Contracting</th>
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<td>9.</td>
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</table>

4. Were the time frames sufficient for the procedures listed in #3 above? If not, which ones did not have sufficient time allowances and how much additional time was needed?
5. Which of the procedures listed in your answer to question #3 above were the most efficient?

<table>
<thead>
<tr>
<th>Most efficient procedures</th>
<th>Procurement</th>
<th>Contracting</th>
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</table>

6. Which of the procedures listed in your answer to question #3 above were the most effective?

<table>
<thead>
<tr>
<th>Most effective procedures</th>
<th>Procurement</th>
<th>Contracting</th>
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</tbody>
</table>

7. Did the documents circulated by the CBC lead agency explain the roles and responsibilities of the lead agency and the providers/subcontractors? Yes/No

If yes, how well did the documents circulated by the CBC Lead Agency explain the role and responsibilities of the CBC lead agency and the providers or subcontractors?

<table>
<thead>
<tr>
<th>Lead Agency</th>
<th>Excellent</th>
<th>Good</th>
<th>Neutral</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providers</td>
<td>Excellent</td>
<td>Good</td>
<td>Neutral</td>
<td>Fair</td>
<td>Poor</td>
</tr>
</tbody>
</table>
8. Are the procedures that are being used by the CBC lead agency the same as what was described in the documents circulated by the CBC lead agency? Yes/No  If not, what is different?

9. Did the provider candidates or the CBC lead agency ask the Department questions during the procurement and contracting procedures? Yes/No  If yes, how well did the Department respond to questions during the procurement and contracting procedures involving the providers or subcontractors?

<table>
<thead>
<tr>
<th>DCF District Office</th>
<th>Excellent</th>
<th>Good</th>
<th>Neutral</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>DCF Headquarters</td>
<td>Excellent</td>
<td>Good</td>
<td>Neutral</td>
<td>Fair</td>
<td>Poor</td>
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</tbody>
</table>

10. Were there advantages and disadvantages in the procedures followed by the CBC lead agency in identifying and contracting with providers or subcontractors? Yes/No  If yes, what were the advantages and disadvantages?

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
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11. Were there any procedural or legal requirements that limited the ability of the CBC Lead Agency to procure and contract with providers or subcontractors? Yes/No  If yes, what were the requirements related to the lead agency and the requirements related to the providers?

<table>
<thead>
<tr>
<th>Lead Agency</th>
<th>Requirements as Barriers</th>
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</table>

Procurement/Contracting CBC Final Report, 6/18/01
12. Are there any planned changes in the procedures the CBC lead agency will be using for procuring and contracting with providers or subcontractors? If not, are there any that you would suggest?

13. If you could recommend an ideal process for the CBC lead agency procurement of and contracting with providers or subcontractors, what would you recommend and why?

14. Please select the response that best describes your estimation of the effectiveness of the lead agency procedures for procuring and contracting with providers or subcontractors.

Procurement Procedures:
- Extremely effective
- Somewhat effective
- Effective
- Not very effective
- Not at all effective
Please explain the reason for your response to this question.: __________________

Contracting Procedures:
- Extremely effective
- Somewhat effective
- Effective
- Not very effective
- Not at all effective
Please explain the reason for your response to this question.: __________________

15. Please rank the following descriptions of effective CBC lead agency contracting and procurement procedures in order of their importance to your organization or agency:
16. Next, consider the same descriptions of an effective contracting and procurement process and rate your actual experience with the CBC lead agency procurement of and contracting with service providers:

<table>
<thead>
<tr>
<th>Description</th>
<th>ACTUAL EXPERIENCE Procurement</th>
<th>ACTUAL EXPERIENCE Contracting</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Excellent</td>
<td>Good</td>
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<tr>
<td>Efficiency</td>
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<td>Accountability</td>
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</tbody>
</table>

Are there specific reasons for checking a neutral, fair, or poor response for any of the “actual experience” descriptions listed in the above matrix? If yes, please state them here.___________________________________________________
17. What should be the **3 most important criteria** for identifying a service provider or subcontractor in a CBC service delivery network? (resources, capacity, record of service???)

<table>
<thead>
<tr>
<th>Criteria for Identifying a CBC Lead Agency</th>
<th>1.</th>
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<td>2.</td>
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</table>

18. Are there any additional comments you would like to share regarding the CBC lead agency’s procurement of and contracting with service providers?
Appendix VIII-B

Procurement and Contracting Survey of
CBC Subcontractors/Providers in Pinellas and Pasco Counties

Introduction

The primary topic of interest in this survey is procurement and contracting procedures used in the development of the Community-Based Care (CBC) model for foster care and related services in Pasco and Pinellas counties. More specifically, we are interested in your input on the procurement and contracting procedures used by the CBC lead agency to identify and subcontract with the service subcontractors/providers in the community-based care service network in Pasco and Pinellas Counties.

Procurement and Contracting Procedures

The primary objectives of this survey are to understand the procurement and contracting procedures, assess their strengths and weaknesses, and identify modifications that could allow or promote improvements.

In this survey, procurement is the process of defining the services needed, identifying the options for obtaining those services, seeking possible subcontractors/providers of those services, and selecting among them. The Invitation to Negotiate (ITN) is encompassed in the procurement process. The submission of proposals and the review of those proposals are also part of this set of procedures. Contracting is writing the contract, negotiating it with the selected provider, and getting it signed or executed.

Please answer the following questions and return the completed survey in the enclosed addressed envelope. If the envelope was not included or is misplaced, the address for returning the completed questionnaire is Procurement and Contracting, Institute for Health and Human Services Research (IHHSR), 2035 E. Paul Dirac Drive, Suite 236 HMB, Innovation Park, Tallahassee, Florida, 32306-2810. If you have additional questions and would like to contact a member of the research team, you may call Dr. Mary Kay Falconer at (850) 644-8505, or email, mfalcone@mailer.fsu.edu. Thank you.
SUBCONTRACTOR/PROVIDER AGENCY SURVEY

1. My organization is a subcontractor/provider in the CBC process.
   Yes ___  No ___

2. What is your job title?
   Executive Director  
   Business/Financial Manager  
   Other Administrator: ________________

3. How long has your agency been a contracted provider of CBC services?
   Less than one year  
   One year  
   More than one year

4. What specific CBC service(s) does your agency provide? (please check all that apply)
   Protective services  
   Foster placement  
   Prevention  
   Permanent placement  
   Emergency shelter  
   Therapeutic foster care  
   Case management  
   Emergency placement  
   Investigative services  
   Foster care recruitment  
   Family reunification  
   Independent living  
   Residential group care  
   Foster care supervision  
   Post-placement supervision  
   Other: ________________________________
   Other: ________________________________
5. In your experience, what were the key steps in the procurement and contracting procedures in the identification and selection of the CBC service subcontractors/providers in Pinellas and Pasco Counties. (Please list in chronological order and refer to Introduction for definitions of procurement and contracting.)

5a. Procurement
1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 
9. 

5b. Contracting
1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 
9.
6. Were the time frames sufficient for the procedures listed in #5a and 5b above?

   Yes ___  No ___

   If no, which ones did not have sufficient time allowances and how much additional time was needed?

**6a. Procurement**

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<thead>
<tr>
<th>Procedure with Insufficient Time</th>
<th>Additional Time Needed</th>
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</table>

**6b. Contracting**

<table>
<thead>
<tr>
<th>Procedure with Insufficient Time</th>
<th>Additional Time Needed</th>
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7. Which of the procedures listed in your answer to question #5a and 5b above were the most efficient?

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<th>Procurement</th>
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8. Which of the procedures listed in your answer to question #5a and 5b above were the most effective?

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<th>Procurement</th>
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9. Did the documents circulated by the CBC lead agency explain the relative roles and responsibilities of the lead agency and the subcontractors/providers?

Yes ___ No ___

9a. If yes, how well did the documents circulated by the CBC Lead Agency explain the relative roles and responsibilities of the CBC lead agency and the subcontractors/providers? (please circle your response)

<table>
<thead>
<tr>
<th>Lead Agency</th>
<th>Excellent</th>
<th>Good</th>
<th>Neutral</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subcontractors/providers</td>
<td>Excellent</td>
<td>Good</td>
<td>Neutral</td>
<td>Fair</td>
<td>Poor</td>
</tr>
</tbody>
</table>

10. In your experience, are the procedures that are actually being used by the CBC lead agency the same as what was described in the documents circulated by the CBC lead agency?

Yes ___ No ___

If no, what was different?

11. During the procurement and contracting process, did your agency ask anyone at the Department of Children and Families (either District Office or Headquarters) questions regarding the process?
Yes ___   No ___

If yes, how well did the Department respond to your question(s)? (please circle your response)

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<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Neutral</th>
<th>Fair</th>
<th>Poor</th>
</tr>
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<tbody>
<tr>
<td><strong>DCF District Office</strong></td>
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<tr>
<td><strong>DCF Headquarters</strong></td>
<td>Excellent</td>
<td>Good</td>
<td>Neutral</td>
<td>Fair</td>
<td>Poor</td>
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12. Were there any advantages and/or disadvantages in the procedures followed by the CBC lead agency in **identifying and contracting with** subcontractors/providers?

Yes ___   No ___

If yes, what were the advantages and/or disadvantages?

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<tr>
<th>Advantages</th>
<th>Disadvantages</th>
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Procurement/Contracting
CBC Final Report, 6/18/01
Section VIII
13. Are you aware of any procedural or legal requirements that limited the ability of the CBC Lead Agency and/or subcontractors/providers to complete the procurement and contracting process?

   Yes ___    No ___

   If yes, what requirements were barriers for the lead agency and for subcontractors/providers?

   **13a. Lead Agency**

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<th>Requirements as Barriers</th>
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   **13b. Subcontractors/providers**

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<th>Requirements as Barriers</th>
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14. Are you aware of any planned changes in the procedures the CBC lead agency will be using for procuring and contracting with subcontractors/providers?

   Yes ___    No ___

   14a. If yes, identify and indicate your opinion of these planned changes.

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<thead>
<tr>
<th>Planned Change</th>
<th>Opinion of Planned Change</th>
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</table>

   14b. If no, please recommend any changes that you would like to see considered.

15. If you could recommend an ideal process for the CBC lead agency procurement of and contracting with subcontractors/providers, what would you recommend and why?
16. Please select the response that best describes your estimation of the general effectiveness of the lead agency procedures for procuring and contracting with subcontractors/providers.

16a. **Procurement** Procedures:
- Extremely effective
- Very effective
- Effective
- Somewhat effective
- Not at all effective

Please provide examples of your experiences that help us understand your response.

____________________________________________________________________

____________________________________________________________________

16b. **Contracting** Procedures:
- Extremely effective
- Very effective
- Effective
- Somewhat effective
- Not at all effective

Please provide examples of your experiences that help us understand your response.

____________________________________________________________________

____________________________________________________________________
17. Please rank the following descriptions of effective CBC lead agency contracting and procurement procedures in order of their importance to your organization or agency:

<table>
<thead>
<tr>
<th>Description</th>
<th>Procurement: Importance to my agency (Rank with 1=most important)</th>
<th>Contracting: Importance to my agency (Rank with 1=most important)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Efficiency</td>
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<td>Openness</td>
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<td>Oversight</td>
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<td>Communication</td>
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<td>Accountability</td>
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<tr>
<td>Technical Assistance</td>
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<tr>
<td>Financial Assistance</td>
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</tbody>
</table>

18. Next, consider the same descriptions of an effective contracting and procurement process and rate your *actual* experience with the CBC lead agency procurement and contracting process:

<table>
<thead>
<tr>
<th>Description</th>
<th>ACTUAL EXPERIENCE Procurement</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Excellent</td>
</tr>
<tr>
<td>Efficiency</td>
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<td>Equity</td>
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<td>Openness</td>
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<td>Accountability</td>
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<tr>
<td>Technical Assistance</td>
<td></td>
</tr>
<tr>
<td>Financial Assistance</td>
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</tr>
</tbody>
</table>

19. If there are specific reasons for checking a neutral, fair, or poor response for any of the “actual experience” descriptions listed in the above matrix, please describe them here.
20. What do you believe are the **3 most important criteria** for identifying a subcontractor/provider in a CBC service delivery network? *(examples: resources, capacity, record of service?)*

1. 
2. 
3. 

21. Please provide any additional comments you would like to share regarding the CBC lead agency’s procurement of and contracting with service subcontractors/providers.

Again, **thank you for your participation** in this survey. Please return your completed questionnaire in the enclosed addressed and stamped envelope or send it to:

Procurement and Contracting
IHHSR
2035 E. Paul Dirac Drive
Suite 236 HMB, Innovations Park
Tallahassee, Florida 32306-2810
Appendix VIII-C
CBC Readiness Assessment
Quality Assurance Provider Readiness Technical Assistance Worksheet

Name of CBC Organization: ______________________________________________

Technical Assistance Specialist Name: ______________________________________

Interview Date/Time: ______________________ Location ______________________

Person(s) Interviewed: ___________________________________________________

A. Organizational Purpose and Relationship to the Community

1. There is a clear organizational mission statement that is consistent with Community Based Care.

Evidence: This mission statement should be included in the response to the ITN. If so, the technical assistance specialist should accept this statement as submitted. If not, the mission statement must be reviewed.

☐ Yes ☐ No Comments: ______________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

2. Consumer and Community Involvement and Collaboration must be evident.

Evidence: The provider has established a relationship with the Community Alliance(s), who will assist the provider in meeting the goals of the community. In the event a Community Alliance has not been coordinated plans have been made to coordinate a community stakeholder group. The provider also has met with department staff and other agencies to explain their program, and referral expectations.

☐ Yes ☐ No Comments: ______________________________________________________________________________________
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3. Consumer access to services of the organization is clearly described in materials that are available to the consumer.

Evidence: The provider has materials that are appropriate for the consumer, that describe how services will be rendered, hours of operation, how they can access assistance for various services, and emergency services. These materials should be available before operation of a program or service center.
CBC READINESS ASSESSMENT

☐ Yes  ☐ No Comments: _____________________________________________________
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4. Responsiveness to individual and group differences is included in the provider’s operational plans.

Evidence: The provider has, at a minimum, made arrangements for translators for the languages spoken in the catchment area. These services must be in place at the time of operation. The provider also has plans to address the cultural diversity of the population. These plans should be available 90 days after operation and show a time frame for implementation.

☐ Yes  ☐ No Comments: _____________________________________________________
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5. The provider has assigned staff to stay current with state and federal requirements and to work with the state on policy initiatives.

Evidence: The provider indicated which staff will have this responsibility. These responsibilities should be designated before operation.

☐ Yes  ☐ No Comments: _____________________________________________________
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B. Continuous Quality Improvement

1. The provider has a formal written plan to describe the quality assurance and improvement program. The structure of the plan includes the following components and characteristics.

   a. The plan includes all staff;
   b. It is consistently implemented;
   c. All data are reviewed at least quarterly;
      d. Documentation to include minutes of meetings, action plans and follow-up monitoring documents;
   e. Data are collected to address ongoing performance, client incidents, accidents and grievances;
   f. There is a peer review component;
   g. Review by an external party included;
   h. Program evaluation capabilities must be present;
   i. A continuous improvement plan must be part of the design;
   j. Client outcome assessment and reporting must be part of the design;
   k. Methods to determine client satisfaction must be specified; and
CBC READINESS ASSESSMENT

I. Methods to keep the Department informed of QA/QI activities and findings must be delineated.

Evidence: A formal quality assurance plan must be in place prior to operation. If the provider has provided services before, the technical assistance specialist should review previous quality assurance plans and the implementation of such plans. Should there be any question about the provider’s current plan or previous implementation of quality assurance activities, the provider should be informed and a plan modification requested. The provider must demonstrate that within 90 days of operation, an appropriate quality assurance program is functional.

☐ Yes  ☐ No  Comments: _____________________________________________________
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2. The provider has mechanisms for tracking and approving service utilization.

Evidence: The provider has completed an analysis of the expected volume of children and families to be served, the anticipated service utilization patterns, the necessary resources that must be in place and the associated cost of the anticipated service provision. The provider also has plans to track critical components of service utilization, to approve services in a timely manner, and to continually analyze the pattern of care against available funds. The analysis and utilization plan must be in place prior to operation.

☐ Yes  ☐ No  Comments: _____________________________________________________
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C. Organizational Stability

1. The provider can demonstrate that they are a legal entity that can do business in Florida.

Evidence: The provider has documents that show that the provider is a legal entity to do business in Florida. The agency has a current Child Placing Agency license and does not have any significant uncorrected non-compliance issues on previous monitoring reports.

☐ Yes  ☐ No  Comments: _____________________________________________________
__________________________________________________________________________
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2. Organizational Structure and relationship to the Governing Body is clear.

Evidence: There is a table of organization that is clear and shows the reporting responsibilities of all staff. The table describes the relationship to the main corporate office, as well as the governance of the local entity and the main office must be described. The local management
CBC READINESS ASSESSMENT

decision-making process is clear including the role of the main office. This information must be available before operation.

☐ Yes  ☐ No  Comments: _____________________________________________________
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3. Staff and Board members are free of any conflicts of interests.

Evidence: Conflicts of interest was checked at the time that the provider was awarded the contract. The technical assistance specialist should check to be sure that such a review was conducted and that no conflicts of interests exist.

☐ Yes  ☐ No  Comments: _____________________________________________________
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4. The provider has an adequate financial basis for operation and has reserves to accommodate cash flow needs.

Evidence: The provider has security bonds, liability insurance and performance bonds in place. The provider has completed a cash flow analysis and can show the anticipated cost of operation for the first year by month; they can also indicate anticipated revenue and any cash shortfalls that may be anticipated. The provider has identified appropriate existing resources for at least 60 days of operation. This portion of the review should be completed by someone with accounting and budget experience. This analysis must be completed prior to operation.

☐ Yes  ☐ No  Comments: _____________________________________________________
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5. The provider has a network management plan in place that addresses the following:

a. Standards by which the provider will select members of the network;

b. Anticipated subcontracts to be completed for necessary agencies;

c. Payment mechanisms established that are clear and address risk issues;

d. Service authorization system;

e. Credentialing of subcontractors staff;

f. Caseload standards, and other performance requirements

g. Review of required licenses, facility standards etc.;

h. Written agreements with other service agencies that the provider does not directly contract (these at a minimum must include substance abuse providers, mental health providers, and medical care providers); and

i. Network complaint and grievance procedures
CBC READINESS ASSESSMENT

Evidence: The network management plan is clear and available to all network members. The provider has entered into the appropriate subcontracts and agreements necessary for the operation of their model prior to assuming service delivery.

☐ Yes  ☐ No  Comments: _____________________________________________________
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6. The organizational structure includes appropriate management staff for fiscal operation, MIS management, quality improvement, and personnel services.

Evidence: All the above staff must be hired before operation.

☐ Yes  ☐ No  Comments: _____________________________________________________
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D. Management of Human Resources

1. A written human resources planning, organization, and deployment plan exists.

Evidence: They provider must determine, by site, the anticipated number of children to be served through out of home care, protective supervision, adoption and any other voluntary services that may be provided. Number of people that must be hired, the types of positions and the time frames for training are clearly outlined. A hiring schedule has been developed for the hiring of all staff. Supervisory responsibilities have been determined. A human resource plan should be completed within the first weeks of a transitional contract. All staff necessary to render services in a program or service center must be hired prior to operation. Necessary support staff must also be in place for effective operation of the service center or program.

☐ Yes  ☐ No  Comments: _____________________________________________________
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2. Leadership’s role in the organization is clear. The accountability of the operation of the program is clearly established.

Evidence: It is clear who has the ultimate accountability for the operation of the program.

☐ Yes  ☐ No  Comments: _____________________________________________________
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____________________________________________________________________________
3. The provider has personnel policies and procedures in place.

Evidence: Personnel policies and procedures are clearly written and available to staff. The policies and procedures must address all necessary background checks. The policies and procedures must be written prior to operation. Position descriptions must be available before hiring and followed during the initial hiring phase.

☐ Yes ☐ No Comments: ______________________________________________________________
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4. The provider has a personnel records system in place.

Evidence: A personnel records management plan must be available and records are functional and are in compliance with the provider's stated policy and procedures, including the 5-year record retention requirement. The system should be in place at the time of operation.

☐ Yes ☐ No Comments: ______________________________________________________________
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5. Employee and Consumer Grievance Procedures are established.

Evidence: The employee and consumer grievance procedures are written and available for staff to review. Staff should be trained on the procedures. The procedures should be in place prior to operation.

☐ Yes ☐ No Comments: ______________________________________________________________
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6. An orientation program is in place for all new staff.

Evidence: The provider has a written orientation plan and all employees receive orientation within 30 days of assuming their duties.

☐ Yes ☐ No Comments: ______________________________________________________________
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7. The provider has a detailed staff training and development program. The program addresses how the provider will arrange for mandatory departmental training and integrate
CBC READINESS ASSESSMENT

their own training to ensure effective implementation of the provider’s service delivery model.

Evidence: The provider has a complete training program that addresses the state mandatory training and the provider’s specific training components. The provider may develop a two pronged approach. One approach would be for staff who in the last 5 years has had the state’s training. The second approach would be for staff who is new to child protection and have not received the state’s training. The scheduling of any PDC training must be completed and coordinated with PDC. All staff must receive the PDC training in accordance with state policy. The provider’s training regarding their specific requirements must be scheduled and completed. It is essential that the critical training components occur before the staff assume responsibilities and that all other training is completed as soon as possible. (Note: Trying to work in required training after staff has assumed new duties puts strain on a new system and provider.)

☐ Yes  ☐ No  Comments: ____________________________________________________
                                                                                       ____________________________________________________
                                                                                       ____________________________________________________

E. Quality of the Service Environment

1. The provider has a system that will ensure that all subcontractors and foster homes are appropriately licensed.

Evidence: The provider has completed on-site visits and a file review of all foster homes serving children in their catchment area. The provider has established a means for on-going quality review of the foster homes and a method to ensure that licenses are current. These activities should be completed prior to operation, but no later than 30 days after assuming responsibilities.

☐ Yes  ☐ No  Comments: ____________________________________________________
                                                                                       ____________________________________________________
                                                                                       ____________________________________________________

2. The provider has a system in place to evaluate the capacity of the subcontractors and foster homes.

Evidence: The provider has done a utilization analysis to determine the number of foster beds, emergency shelter beds, and group homes required; and must have completed a plan to guard against overcrowding. The number of waivers in place has been reviewed for appropriateness and a plan should be in place to reduce the number of waivers required. These activities should be completed during the transition contract. If not fully completed by that date, the must be completed within 30 days of operation.
F. Financial and Risk Management

1. The provider has a cost allocation plan that aligns financing with the provider’s service design.

Evidence: An allocation plan for the use of the federal dollars was approved at least 30 days prior to operation. The allocation plan was completed before or concurrent with the development of the operating procedures. The operating procedures have addressed the documentation and operational practices necessary to support the allocation plan. Staff are knowledgeable about how to conduct business and document care in order to earn their projected revenues. The operating procedures are in place before operation and training on required documentation must have been completed.

2. Financial Planning (Please see organizational stability section on cash flow analysis)

Evidence: The provider must be able to show the anticipated cost of the staff for the program or service center that they plan to operate and the related revenues and expenses. This must have been completed before operation. However, a long-term business plan should be available and if not at time of operation, within 90 days.

3. The accounting system must be adequate to support a community based care model, and must be sufficient to support payroll and subcontractor payments. (Similar to a managed care accounting system)

Evidence: The provider has an accounting system that collects costs by cost centers and will eventually allow the provider to evaluate costs by recipient and predict cost patterns. The provider should have such an accounting system in place before operation. But if not, the provider should put such an accounting system in place within the first year of operation.
4. The provider must have written fiscal policies and procedures that include: payment, invoices, delinquencies, reconciliation, audits, and other standard accounting procedures.

Evidence: The provider must have the above procedures in place and functional prior to operation.

☐ Yes  ☐ No  Comments: _____________________________________________________
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5. The provider must have a risk management program in place. The risk management program should include basic risk management programs as are required by insurers and a risk management components that address the unique factors required for managed care. The risk management system should be integrated with the quality assurance system and the utilization management program. The risk management program also must address payment methods to both the provider and to the subcontractors.

Evidence: The provider should be able to demonstrate a good understanding of risk management. It would be best if the plan was in place before the program became operational, but if this is not possible it should be in place within 90 days. If there are any indications that the provider has had liability problems in the past, failure to meet program expectations, or financial problems, the issue of risk management should be thoroughly reviewed. Further evidence should be required to demonstrate that the provider has addressed these risk management issues and can assure better performance. All subcontracts should address risk management issues and the subcontractors should be clear about their responsibilities.

☐ Yes  ☐ No  Comments: _____________________________________________________
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G. Management Information Systems

1. The provider must have a management information system in place that addresses the ICWIS, FCARS, Adoption systems and FAHIS requirements.

Evidence:

a. The provider has been trained on all the above systems;
b. The necessary computer equipment has been transferred by the district prior to the start of contract services
c. The agency has arranged for the necessary drop lines;
d. The agency has staff that can manage their network including interface with externally delivered applications
e. The provider is fully prepared to establish MIS connectivity with the state and with the network providers.
f. Appropriate licenses have been secured for all MIS programs and systems

☐ Yes  ☐ No  Comments: _______________________________________________________
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2. The provider will have a care management component of the MIS that will enable them to track clients progress, determine patterns of care, ensure appropriate practices, evaluate costs and communicate vital client information to network providers.

Evidence: The provider will have a care management MIS component. If not at the time of operation, it should be in place within 6 months of assuming case management. The provider should be knowledgeable about the SACWIS plans and ensure that which ever program is developed, the program will be able to electronically transfer all DCF- and state-approved, required data.

☐ Yes  ☐ No  Comments: _______________________________________________________
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H. System of Care

1. The provider must have a comprehensive description of the system of care and the model for the provision of all required services. The following components and principles should be addressed:

   a. Is strength based, provides for individualized child and family services, and is culturally appropriate,
   b. Addresses assessments, case planning, case coordination and implementation, legal responsibilities and case closure.

Evidence: The provider must have a detailed plan on file and be able to fully describe the plan for the system of care

2. The provider must have referral and/or working agreements and have determined the flow of cases and referrals with the following groups:

   a. Protective investigations
   b. Child Protection Teams
   c. Law enforcement
   d. Circuit courts
   e. State attorney
   f. Guardian Ad Litem and
   g. Department of Juvenile Justice
Evidence: All the above agreements must be in place prior to operation.

☐ Yes  ☐ No  Comments: ___________________________________________________
                                                                                      ___________________________________________________
                                                                                      ___________________________________________________

4. The provider must have policies and procedures in place that address compliance with state and federal laws and regulations. The department’s essential practice procedures must be included in the policy and procedures.

Evidence: The provider must have developed a detailed plan for their system of care. The provider must review all the department's policies and procedures to determine which ones line up with their proposed practices and which ones need to be modified. They must present any modifications to the department for approval prior to implementation. To ensure that staff are clear on the expectations and there is no confusion regarding prior practices and the providers' system of care, these policies and procedures must be in place prior to operation. These policies and procedures must be reviewed by staff who are knowledgeable in child protection requirements.

☐ Yes  ☐ No   Comments: ___________________________________________________
                                                                                      ___________________________________________________
                                                                                      ___________________________________________________

5. The provider must have a detailed plan for transferring the cases from the state to the provider. This plan must address the following components:
   a. The cases must be prior reviewed to determine the contents of the case files and activities that must be completed.
   b. A formal sign off system should be established that documents the above.
   c. Children and Families must be notified of the changes and introduced to their new workers.
   d. The plan should avoid disruptions of care
   e. Any changes in service delivery patterns should be anticipated and addressed.

Evidence: The transition plan for the cases should be written and agreed upon by the state and the provider within the first 30 days of the transition contract. All of the above transition activities must have been completed prior to the provider assuming direct case management responsibilities.

☐ Yes  ☐ No   Comments: ___________________________________________________
                                                                                      ___________________________________________________
                                                                                      ___________________________________________________
Appendix VIII-D
Agency Provider Application
FAMILY CONTINUITY PROGRAMS, INC.

AGENCY PROVIDER APPLICATION

Instructions:
- To avoid delay of returning application, please complete all of the information requested below.
- Type or print legibly.
- If additional space is required, attach another sheet, stating the question being responded to.
- For lengthier responses, pre-prepared materials or policies may be used, if appropriate.
- If a particular question does not apply, please place "N/A" in the space.

<table>
<thead>
<tr>
<th>Agency Name:</th>
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<tr>
<th>Primary Location</th>
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<td>Address:</td>
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<td>City:</td>
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<td>County:</td>
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<td>Hours:</td>
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<th>Other Service Location</th>
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<td>Address:</td>
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<td>City:</td>
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<td>County:</td>
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<td>Hours:</td>
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<th>Other Service Location</th>
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<td>City:</td>
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<td>County:</td>
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<td>Hours:</td>
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<tr>
<th>Billing Information</th>
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<td>Address:</td>
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<tr>
<td>City:</td>
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<td>Telephone:</td>
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<tr>
<td>Federal Tax ID #:</td>
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Family Continuity Programs, Inc.
2763 First Avenue North, St. Petersburg, FL 33713
Phone: (727) 321-3007 • Fax: (727) 321-2133
Languages Spoken:

E-Mail address: Age range of clients (all services):

Web site: Number of clients served annually (all locations):

Please complete the following information on state licenses and provide copies

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<thead>
<tr>
<th>License Type</th>
<th>License Number</th>
<th>Expiration Date</th>
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Attachment A - Agency History

Please attach an agency history, titled "Attachment A", including all of the following information:

- Agency mission and vision.
- The agency has been in existence since: ________.
- Total number of agency employees: ________.
- History of founding.
- Board of Directors.
- Key executive clinical staff, including degrees and experience.
- Staffing Patterns - include organizational chart.
- Agency strengths.
- Feel free to attach any relevant literature.

Attachment B - Programs and Services

Please attach a summary of programs and services, titled "Attachment B", including the following:

- All types of services offered.
- Locations of services provided.
- Clients served, age and number per service.
- After hours / on-call Policy and Procedure.
  - Include policy for backup coverage if primary does not respond.
- Projections for future services, with timeframes.
- Feel free to attach any relevant literature.
Attachment C - Staffing
Please include a separate sheet, titled "Attachment C" with the following information:

- Employee recruitment plan.
  - Which of the following recruitment means are utilized:
    - Newspaper _____
    - Internal posting _____
    - Educational Institutions _____
    - Internet _____
    - Paid media _____
    - Word of mouth _____
- Process for filling vacancies, including time frames.
- Staff turnover ratio for past one year: _____.
- Coverage and transition for clients during staff turnover.
- Policy and procedure for verification of employee credentials.
  - Licensure
  - Work history
  - Education
- Policy and procedure for DJJ / DCF background checks.
- Policy and procedure for training new and existing.
  - New employees receive _____ hours of training.
  - Existing employees receive _____ hours of training per year.

Please list certifications / accreditations received and applied for (attach certificates).

<table>
<thead>
<tr>
<th>Received Type</th>
<th>Expiration Date</th>
<th>Applied Type</th>
<th>Applied Date</th>
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Please list professional organizations and affiliations


Please list community professional staff utilized on a contractual / consultative or referral basis:
Attachment D – Community Needs / Client Rights
Please include a separate sheet, titled “Attachment D” with the following information:
• A brief summary of the agency approach to community outreach.
  • Which of the following methods are utilized:
    _____ Public speaking
    _____ Pamphlets / brochures
    _____ Educational programs
    _____ Open houses
    _____ Paid Media
• Policy and procedure regarding the agency approach to special needs populations.
• Include policy and procedure for meeting the following needs:
  • Language requirements
  • Hearing / Sight impairments
  • Physical handicap
  • Other limitations
• Policy and Procedure for informing and protecting client rights.
• Policy and Procedure for protecting client paper records.
• Policy and Procedure for protecting electronic information.
• Client, Employee and community grievance procedures.
  • Ensure you include steps of resolution and timeframes.

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<thead>
<tr>
<th>Professional Liability Insurance (attach copy of policy)</th>
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<tr>
<td>Current Carrier:</td>
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<td>Carrier Address:</td>
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<tr>
<td>Policy Number:</td>
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<tr>
<td>Policy Limits: Occurrence: Aggregate:</td>
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<td>Please include coverage history for the past five (5) years</td>
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<td>Previous Carrier:</td>
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<td>Carrier Address:</td>
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<tr>
<td>Policy Number:</td>
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<td>Policy Limits: Occurrence: Aggregate:</td>
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Attachment E - Malpractice Claims History
If the agency has had any malpractice claims filed against it in the past five (5) years, closed or pending, please list them on a separate sheet titled "Attachment E" and include the following information:
• Incident date.
• Was the agency a primary defendant or co-defendant?
• Is the current status open (pending) or closed (include date closed)?
• Plaintiff name.
• Professional liability insurer.
• Any loss amount.
• Relevant details.*
• Do not include any patient or staff names. Initials may be used for clarity, if needed.
Has the agency been sanctioned, placed on probation, lost accreditation, licensure, certification status, or in any other way been limited during the past three (5) years by any organization or entity:

<table>
<thead>
<tr>
<th>State Licensure: Y / N</th>
<th>Medicare: Y / N</th>
<th>CARF: Y / N</th>
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<tbody>
<tr>
<td>Medicaid: Y / N</td>
<td>JCAHO: Y / N</td>
<td>COA: Y / N</td>
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<tr>
<td>Other (list): Y / N</td>
<td>Other (list): Y / N</td>
<td>Other (list): Y / N</td>
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Please list reason(s):

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**Attachment F – Quality Assurance Program**

Please include on a separate sheet, titled “Attachment F” the following information

- A copy of the Agency Quality Improvement Program.
  - Including different staff or departments utilized for a multi-disciplinary approach.
- Which of the following are utilized:
  - Client satisfaction surveys
  - Employee satisfaction surveys
  - Chart Audits
  - Access to service studies
  - Treatment planning audits
  - Discharge planning audits
  - Follow-up studies
- Any ongoing Quality Improvement Studies.
  - Including opportunities for improvement and action plans.
- Please attach at least three letters of support, based upon existing services, including at least one from each of the following:
  - Previous client
  - Collaborative community agency
  - Funding source (monitoring report may be substituted)

**Attachment G – Management Information Systems**

Please include on a separate sheet titled “Attachment G” the following information

- Current agency MIS Plan.
  - Including percentage of staff utilizing computer systems on a regular basis.
- Hardware being utilized.
- Software programs and applications.
- Staffing support - please describe the internal and external support for your MIS system.
  - Please include contact name and phone number.
- A brief summary of the future plans for the information systems of the agency.

**Attachment H - Additional Information - Financials**

Please include a separate sheet, titled "Attachment H" with the following information:

- Audited financial statement.
- Agency Budget
Attestation
To be completed only by the executive director, president or CEO of the agency.

The undersigned hereby attests that the information provided in this application is truthful, correct and complete in all respects. The undersigned represents that he/she is a duly authorized representative of the agency. The undersigned further understands that the intentional submission of false or misleading information or withholding of relevant information can be used for grounds of denial of the application or termination of participation in the provider network. The undersigned hereby agrees to notify Family Continuity Programs, Inc. of any material changes in the information contained within this application within 15 days of said change.

______________________________
Signature

______________________________
Print Name

______________________________
Title

______________________________
Date

Contact person for any questions regarding responses on this application:

Name:________________________

Phone:_______________________
Appendix VIII-E
Agency Service Application
Instructions:
- Please complete the information requested below.
- Type or print legibly.
- Please list responses on another sheet, with the corresponding question number.
- For lengthier responses, pre-prepared materials or policies may be used, if appropriate.
- Please ensure that the "Agency Provider Application" has been completed prior to completing this application.

<table>
<thead>
<tr>
<th>Agency Name:</th>
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<table>
<thead>
<tr>
<th>Service: Foster Home Coordinator</th>
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<table>
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<tr>
<th>Education Requirement: Minimum of Master's degree from an accredited program in social work or other human services field.</th>
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<tr>
<th>Additional Experience Requirement: Minimum of two years experience working with foster parents.</th>
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<tr>
<th>Salary Range: $32,000 - 35,000</th>
<th>Client Transportation Required: Yes</th>
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<tr>
<th>Primary location of administrative office</th>
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<th>City:</th>
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<table>
<thead>
<tr>
<th>Location from which this service will be coordinated</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City:</th>
<th>State:</th>
<th>Zip Code:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone:</th>
<th>Fax:</th>
<th>County:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Service area(s) agency is applying to serve</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>North Pinellas</th>
<th>Mid Pinellas</th>
<th>South Pinellas</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>New Port Richey</th>
<th>Dade City</th>
<th>Other _________</th>
</tr>
</thead>
</table>

If you have applied for more than one service area, would you accept servicing fewer areas than applied for? Yes / No

Is the agency currently providing this service? Yes / No
Is the agency currently providing a similar service? Yes / No
If client transportation is required for this service, please attach automobile policy and the agency requirements for staff that provide transportation.
1. Describe the agency history of providing this service and/or similar services.

2. Describe the agency history of providing services to clients similar to those that will be served by this service.

3. Outline the proposed method of provision for this service.
   - Please ensure that each area outlined in the service description is addressed.

4. Provide a detailed budget proposal for this service.
   - If the agency has provided this service, or a similar service, previously please include that budget.
   - Please ensure that all full and part-time staff are included.

5. Describe the on-call procedure that will be utilized for this service.

6. Describe, in detail, the proposed Quality Assurance Program for this service.

7. If the agency has provided this service, or a similar service, previously please attach copies of the following:
   - A minimum of two years monitoring reports.
   - Satisfaction survey results.
   - Letters of support from the following:
     - Funding source
     - Current or past clients
     - Community agencies that have interacted with this service.

8. If the agency has not provided this service, or a similar service, please attach letters of support from the following:
   - Funding sources from other services.
   - Clients from other services.
   - Community agencies that have worked with the agency.
   - Community agencies that may be a part of the new service.

Attestation
To be completed by the executive director, president or CEO of the agency.

The undersigned hereby attests that the information provided in this application is truthful, correct and complete in all respects. The undersigned represents that he/she is a duly authorized representative of the agency. The undersigned further understands that the intentional submission of false or misleading information or withholding of relevant information can be used for grounds of denial of the application for service or termination of participation in the provider network. The undersigned hereby agrees to notify Family Continuity Programs, Inc. of any material changes in the information contained within this application within 15 days of said change.

Signature

Print Name

Title

Date

Contact person for any questions regarding responses on this application:

Name: ____________________________

Phone: ____________________________
Appendix VIII-F  
Responses Submitted in CBC Lead Agency/Provider Mail Survey

<table>
<thead>
<tr>
<th>Respondent #</th>
<th>Which procedures were the most efficient and/or effective in the identification and selection of the CBC service subcontractors/providers in Pinellas and Pasco Counties?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>All were efficient and effective.</td>
</tr>
<tr>
<td>3</td>
<td>Procurement- application process was efficient and effective</td>
</tr>
<tr>
<td>4</td>
<td>Both (procurement and contracting) were efficient</td>
</tr>
</tbody>
</table>
| 7            | Meetings with staff and providers over ITN  
Staff negotiations                                                                                                                                                                              |
<p>| 9            | As this agency has been credentialed as a FCP provider this shortens Service Application Process. Also, the application process is standardized. Materials used and prior applications can be reused. The process is very efficient, compared with other funders. The negotiating process was open, flexible, and brief. FCP was very willing to compromise and acknowledge Suncoast issues. The standard application process is very effective, and promotes a focus on the main elements of service delivery and preparing budgets. The negotiating meeting has been very effective in clarifying issues and achieving decisions acceptable to FCP and Suncoast. |
| 10           | Notified efficiently that we were selected for verbal presentation.                                                                                                                               |
| 11           | Procurement was the most efficient and effective                                                                                                                                                 |
| 16           | Application was efficient; Interview with applicant was effective                                                                                                                                 |
| 19           | These procedures were both efficient once they were initiated. However, the time frame was very close to end of contract date.                                                                 |</p>
<table>
<thead>
<tr>
<th>Respondent #</th>
<th>What were the advantages and/or disadvantages in the procedures followed by the CBC lead agency in identifying and contracting with subcontractors/providers?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Advantages- Less cumbersome</td>
</tr>
</tbody>
</table>
| 2           | Advantages- Credentialling process well done  
Disadvantages- Lead agency not as experienced at procurement as DCF |
| 3           | Advantages- Systematizing the application process  
Disadvantages- Not providing an actual dollar amount, scoring mechanism, review deadline, or a grievance procedure. |
| 7           | Advantages- Focused knowledge, practical staff, and comprehensive scope of lead agency           |
| 9           | Advantages- The application process was streamlined by the FCP credentialing process which accredited providers, thereby removing elements of their process from explanations in individual service applications. |
| 10          | Advantages- Credentialling providers, contracts don’t expire on June30th, and opportunity for amendments  
Disadvantages- Unclear of FCP’s overall plan, community no longer involved in planning for services, administration not responsive during process, lack of sense of partnership. |
| 11          | Advantages- Providers approval through application process inclusion                             |
| 16          | Advantages- Interview allows clarification of application narratives                              |

<p>| Respondent # | If you could recommend an ideal process for the CBC lead agency procurement of and contracting with subcontractors/providers, what would you recommend and why? |</p>
<table>
<thead>
<tr>
<th>Respondent #</th>
<th>What do you believe are the three most important criteria for identifying a subcontractor/provider in a CBC service delivery network?</th>
</tr>
</thead>
</table>
| 1           | 1) Record of service  
2) Capacity  
3) Positive working relationship |
| 2           | 1) Ability to define objectives/outcomes  
2) Ability to provide capacity  
3) Cost/efficiency |
| 3           | 1) Record of service, including participation in community and outcomes  
2) Capacity, including administrative oversight and experience  
3) Ability to effectively partner |
<table>
<thead>
<tr>
<th></th>
<th>1) Record of service</th>
<th>2) Capacity</th>
<th>3) Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Specialty expertise</td>
<td>History of services</td>
<td>National certification</td>
</tr>
<tr>
<td>7</td>
<td>1) Client outcomes of same/similar services and effectiveness…over time</td>
<td>2) Stability of …service programs…</td>
<td>3) Ability of provider to operate in full collaboration with lead agency and other providers</td>
</tr>
<tr>
<td>10</td>
<td>1) Record of service</td>
<td>2) Capacity</td>
<td>3) Resources</td>
</tr>
<tr>
<td>11</td>
<td>1) Record of service/ experience/effectiveness</td>
<td>2) Accountability</td>
<td>3) Performance</td>
</tr>
<tr>
<td>19</td>
<td>1) Record of service</td>
<td>2) Ability to increase services</td>
<td>3) Financial integrity</td>
</tr>
</tbody>
</table>