

Request for Proposals (RFP)

Community Placement Plan (CPP) & Community Resource Development Plan (CRDP) For Fiscal Year 2024-2025

Alta California Regional Center (ACRC), serving individuals with developmental disabilities, has identified a need to develop each of the following: Specialized Residential Facility (SRF) for Stepdown Placements for Adults, Specialized Residential Facility (SRF) for Stepdown Placements for Children, Psychiatric Treatment Services, Dental Desensitization Service, Dental APP, and a Day Program in outlying areas for individuals requiring behavioral supports that may have some medical needs.

Proposals may be submitted by an individual, a group of individuals, or an agency. The applicant must have relevant experience, including providing care and supervision, as applicable, for persons with developmental disabilities. The applicant should have and demonstrate the knowledge and understanding to effectively deliver the service for which you are applying for. Any person(s) who are employees of another Regional Center or the State of California may apply but would have to cease their employment upon being selected for the project.

SUBMISSION OF PROPOSALS

Email proposal to: rfp@altaregional.org

Your proposal must include all required sections outlined in Part III ("Proposal Guidelines") below and **must be received no later than 3:00 pm on Wednesday, January 22, 2025.**Proposals received after this deadline will not be considered. <u>ACRC will send an email confirming the proposal has been received.</u>

ACRC will not accept any hard-copy proposals. Please direct any questions to rfp@altaregional.org.

Part I Project Description

Project Type: Specialized Residential Facility (SRF)- Adult Stepdown

(Licensed as Adult Residential Facility)

Project #: ACRC-2425-3

Service area: ACRC catchment area

Number served: 4

Provider Start-up funding: \$250,000
Reimbursement rate: DDS Set Rate
Minimum direct service hours: DDS Set Amount

Description of Project

ACRC is seeking a specialized adult residential service provider for a 4-bedroom SRF that will provide intense supports and services for adult clients. Provider will be required to purchase and modify a home to accommodate 1 non-ambulatory client. ACRC will be required to approve the home prior to purchase and modifications.

Target Population

Clients stepping down from Enhanced Behavior Support Home (EBSH), Community Crisis Home (CCH), Mental Health Rehabilitation Center (MHRC), Institute for Mental Disease (IMD), or other highly restrictive settings who are ready to transition to a lower level of care.

Scope of Service for Service Provider

- Provide 24-hour care and supervision to clients between the ages of 18-59, male or female with behavioral challenges including AWOL, property destruction, verbal and physical aggression, resistiveness to programming and daily routines, hyperactivity, theft, tantrums, and/or self-injurious behaviors.
- Clients may also have psychiatric diagnoses and will require management of mental health needs.
- Service provider will be expected to assist clients with managing their ADL's, increasing their independent living skills and helping reduce/eliminate interfering behaviors, with the expectation that clients could eventually move to a less restrictive environment.
- Home will be expected to have at minimum 2 awake staff, 24 hours per day.

Eligibility of Applicant

- The applicant must qualify as an administrator of an Adult Residential Facility (ARF) as outlined in Title 22 and Title 17.
- Applicant must demonstrate the ability to successfully work with and collaborate with consultants to address a clients' behavioral and/or psychiatric support needs. This includes implementing formal behavior intervention plans and psychiatric treatment plans.
- Applicant must also have an understanding of behavior and psychiatric intervention techniques.

Expectation of the Service Provider

- To support adults stepping down from an EBSH, CCH, or other highly restrictive setting and who still require an enhanced level of structure and programming (behavioral and/or mental health).
- At least one bed would be cleared for a non-ambulatory client. Services will be provided in the least restrictive environment and in compliance with HCBS regulations.

- Direct service hours must meet the following criteria:
 - 1. Administrator on site at least 40 hours per week and provide periodic check-ins on weekend and nighttime shifts.
 - 2. All staff must be awake and on duty all hours of the day.
 - 3. create and maintain systems to ensure quality of the program and adherence to all Title 17, Title 22, and DDS directives.
- Applicant must have a behavior management system that clearly and accurately identifies interfering behaviors, a strong data tracking system, and a system in place to ensure fidelity of behavior management.
- This home will be expected to work closely with a Board Certified Behavior Analyst (BCBA), client's psychiatrist, and other mental health service providers to address a client's mental health needs.
- For clients with medical needs, the home will work closely with the primary care physician or RN to ensure their needs are taken care of.
- Applicant must require emergency intervention training for all staff.

Project Type: Wellness Center (Psychiatric Treatment/Adaptive Skills)

Project ID#: ACRC-2425-4
Service Area: Sacramento
Number Served: Varied
Provider Start-up Funding: \$50,000

Reimbursement Rate: DDS Set Rates

Description of Project

Development of mental health services that provides a lower level than wrap-around mental health support, for clients who need psychiatric support, that is inaccessible by a county agency or the individual's insurance/PCP. ACRC is proposing a clinic with a psychiatrist that can prescribe medications, and an RN that can complete injectables (monthly or quarterly). This program will also have a drop-in wellness center for ongoing support groups and classes such as: anger management, meditation, self-care, mindfulness, community re-entry, friendship and intimacy, medication management, recreation for leisure, emotional regulation, substance abuse management, symptom management, etc. The center could have a monthly calendar of support groups/classes, and a staff member available during business hours to greet/support the clients dropping into the center.

Target Population

Adult clients with severe and persistent mental health disorders (Schizophrenia, Bipolar Disorder, Major Depressive Disorder, Schizoaffective Disorder, etc.). Individuals' ineligible for county behavioral health services due to an ASD diagnosis or that are found not to benefit from a generic resource provider due to their developmental disability. Clients that may have criminal justice involvement and are required to participate in psychiatric services and/or support groups as a condition of their ACRC diversion plan.

Scope of Service for Service Provider

Outpatient treatment services offering psychiatric medication management by a licensed clinician (as needed, every 30-90 days) and access to a center that offers multiple support group options; daily or as needed.

Eligibility of Applicant

Applicants must demonstrate understanding of the target client population, ideally have a history of working with individuals with intellectual and developmental disabilities. Provider will employ a Psychiatrist/MD, Nurse Practitioner and/or Registered Nurse, and any of the following for support groups or classes: psychologist, LCSW, LMFT, case managers. Applicants could either be opening a new center or operating an existing center with an ability to expand services for clients with ID/DD and co-occurring mental health disorders.

Expectation of the Service Provider

All licensed staff must have and maintain a current license to provide services and be in good standing with their respective licensing Board. Provide progress reports on clients' participation in services (i.e. quarterly or monthly). As needed, adapt support group and/or classes curriculum for individuals with ID/DD. Order labs for clients as clinically appropriate (annual and/or as needed for therapeutic levels, etc.).

Project Type: Dental Services (Development of a Dental App)

Project ID#: ACRC-2425-5

Service area: ACRC catchment area

Number served: Varies
Provider Start-up funding: \$100,000
Reimbursement rate: DDS Set Rate

Description of Project

Development of a dental app designed to assist clients with DD and/or their caregivers to begin to implement dental-specific activities that can help the client start on improving their ability to tolerate receiving dental care and provides an easy-to-follow framework of simple steps, incorporating pictures and videos, for dental desensitization techniques. Once completed and tested, the app will be made available to all regional centers. Additionally, once completed, the app can be utilized in conjunction with service delivery models that would support its use and implementation (e.g., Dental desensitization service, BIS, AST, ILS, SLS).

The curriculum embedded within the development of the dental app is to be commensurate with the curriculum for the dental desensitization service (see "RFP for Dental Desensitization Service" below).

Target Population

This service/ app is intended for individuals with a qualifying regional center diagnosis who have caregiver or service provider support for accessing and implementing an app-based curriculum to increase routine oral hygiene practices and access to dental services. Prospective participants will (at minimum) experience barriers to completing dental hygiene routines and/or accessing dental services resultant of skill deficits or resistive behaviors and/or anxiety which will put them at risk for negative oral health outcomes.

Scope of Service for Service Provider

The intention of this service is to create an app to provide a multidisciplinary framework for dental desensitization and establishment of daily oral hygiene routines to be utilized by care givers, service providers and clients via evidence-based, behavior interventions. The app is to be used in conjunction with a licensed dental provider and a Board Certified Behavior Analyst (BCBA) guiding best practices.

Eligibility of Applicant

The identified service provider should be:

Board Certified Behavior Analyst (BCBA) with experience in developing and implementing desensitization strategies with individuals with a diagnosis of a developmental disability through a person-centered approach. This clinician would be required to ensure access to a qualified software or app developer through direct employment and/or contractual agreement.

Or;

Licensed dental provider (i.e., RDHAP, DDS or equivalent) with experience in providing dental services to individuals with developmental disabilities who experience barriers in accessing dental services related to maladaptive behaviors and/or anxiety. The licensed dental provider would be required to work in conjunction with a Board-Certified Behavior Analyst (BCBA) with

experience in developing and implementing evidence based, desensitization intervention through a person-centered approach AND a qualified software or app developer through direct employment and/or contractual agreement.

Or;

A qualified software or app developer willing to work in conjunction with a Board Certified Behavior Analyst (BCBA) with experience in developing and implementing desensitization strategies with individuals with a diagnosis of a developmental disability through a personcentered approach. This developer will work with a BCBA through direct employment and/or contractual agreement.

Expectation of the Service Provider

- Service provider to be available to consult/ collaborate on dental desensitization service development as requested.
- Collaborate with ACRC Dental Coordinator and other identified ACRC Clinical Services staff and Community Services Specialists as part of service development, referral processes and ongoing service delivery.
- Implement and utilize the dental app (once developed) as part of the dental desensitization service curriculum.
- Ensure access to required disciplines for development (BCBA, RDHAP, Doctor of Dental Surgery "DDS", or equivalent).
- Supporting ongoing updates and system development for app maintenance and dissemination.

Project Type: Dental Services (Dental Desensitization Service)

Project #: ACRC-2425-6

Service area: ACRC catchment area

Number served: N/A
Service Code: 117
Provider Start-up funding: \$75,000
Reimbursement rate: DDS Set Rate

Description of Project

Dental desensitization service. With the support of a trained staff (e.g. BCBA, RBT, dental hygienist, etc.) clients will receive direct one-on-one support prior to, during, and following non-sedation dental work (routine appointments or more invasive procedures). The service delivery location will vary based on the individualized assessed needs of each participant. It is anticipated services may begin in the home setting or alternative location that is familiar to the participant but then transition to a mock or actual dental environment as the desensitization process progresses. This service aims to limit the use of sedation dentistry for individuals with DD who can be taught to tolerate dental procedures. This dental service is designed to be a coaching model with the support of the Dental App (once developed), which will help track and monitor clients progress with becoming more comfortable with receiving/completing dental services as well as facilitate desensitization strategies outside of teaching sessions. The curriculum for the dental desensitization service and the curriculum embedded within the development of the dental app are to be commensurate.

Target Population

This service is intended for individuals with a qualifying regional center diagnosis age 7+, when there is an assessed need and the client meets the entrance criteria for the dental desensitization service. Prospective participants will (at minimum) experience barriers to completing dental hygiene routines and/or accessing non-sedation dental services resultant of maladaptive behaviors and/or anxiety which will put them at risk for negative oral health outcomes.

Scope of Service for Service Provider

The intention of this service is to provide multidisciplinary support to the participants via evidence-based, behavior interventions in conjunction with a licensed dental provider.

Eligibility of Applicant

The identified service provider should be:

(a) Board Certified Behavior Analyst (BCBA) with experience in developing and implementing desensitization strategies with individuals with a diagnosis of a developmental disability through a person-centered approach. This clinician would be required to ensure consistent access to licensed dental provider(s) (i.e., RDHAP, DDS or equivalent) through direct employment and/or contractual agreements for guidance on dental treatment approaches, assessment of oral health needs and actual dental services as appropriate.

Or;

(b) Licensed dental provider (i.e., RDHAP, DDS or equivalent) with experience in providing dental services to individuals with developmental disabilities who experience barriers in accessing dental services related to maladaptive behaviors and/or anxiety. The licensed dental provider would be required to ensure consistent access to a Board-Certified

Behavior Analyst (BCBA) with experience in developing and implementing evidence based, desensitization intervention through a person-centered approach.

Expectation of the Service Provider

- Service provider to be available to consult/ collaborate on dental app development as requested.
- Collaborate with ACRC Dental Coordinator and other identified ACRC Clinical Services staff and Community Services Specialists as part of service development, referral processes and ongoing service delivery.
- Implement and utilize the dental app (once developed) as part of the dental desensitization service curriculum.
- Ensure access to required disciplines for service delivery (BCBA, RDHAP, DDS or equivalent).
- Ensure access to mock and/or actual dental environment.
- Ensure access to all necessary dental equipment required for service delivery.

Project Type: Specialized Residential Facility (SRF) - Children Stepdown

(Licensed as Group Home)

Project #: ACRC-2425-7

Service area: ACRC catchment area

Number served: 4
Service Code: TBD
Provider Start-up funding: \$250,000
Reimbursement rate: DDS Set Rates

Description of Project

Development of a 4-bed Group Home to step down children down from an Enhanced Behavior Support Home (EBSH) or Community Crisis Home (CCH) facility to support the intensive behavioral and psychiatric needs of children in the ACRC catchment area

Target Population

Children identified for this home may present behavioral challenges such as, but not limited to, AWOL, property destruction, verbal and physical aggression, and restiveness. Children may be non-verbal, non-ambulatory, and require assistance with their ADL's. Children may also have psychiatric diagnoses and will require management of mental health needs. Children may remain in this home until age 18.

Scope of Service Frovider

Children outcomes include, but are not limited to, reduction/elimination of interfering behaviors, management of mental health needs, improving ADL's, independent living skills, etc., with the expectation that clients could move to a less restrictive environment. This home will offer extensive behavioral services utilizing a BCBA consultant and highly trained staff. The provider is to develop a schedule of activities for children when they are not attending school.

Eligibility of Applicant

Applicants must have a strong understanding and demonstrate success with behavioral management services to clients with developmental disabilities. Have the ability to understand and train staff in the implementation of behavior intervention plans and mental health treatment plans. Effective collaboration with the child's PCP, various mental health and/or other necessary consulting professionals.

Expectation of the Service Provider

Have at a minimum, two awake staff on shifts each hour of day when all the children are at home, including nighttime hours and an administrator on site at least 40 hours per week. Have a behavior management system that clearly and accurately identifies interfering behaviors, a strong data tracking system, and a system in place to ensure fidelity of behavior management. This home will be expected to work closely with a children's psychiatrist and other mental health services to address children's mental health needs. Applicants will locate a home that is not in a densely populated area, but still close to community resources. Applicants must require emergency intervention training for all staff.

Project Type: Day Program
Project #: ACRC-2425-8

Service area: ACRC catchment area

Provider Start-up funding: \$200,000 Service Code: 532

Reimbursement rate: DDS Set Rate

Description of Project

Development of a Behavioral Day Services Program that will also assist clients with some medical support needs (i.e., catheter, g-tube, epi-pen etc.) and personal care. The program shall be located in an outlying county such as El Dorado, Nevada, Yolo, Sutter, Colusa, Yuba, etc. This program shall be licensed by Community Care Licensing (CCL).

Target Population

- Adult Regional Center clients ages 18+ that have behavioral and some medical support needs.
- Clients with behaviors such as yelling, biting, self-injurious behaviors, and physical aggression which may require a behavioral intervention plan.
- Clients with medical conditions such as catheters, g-tube, epi-pen, etc. that may require restricted healthcare plans and monitoring.
- Clients may need assistance with activities of daily living (ADL's), toileting, ambulation, physical limitations, sensory support needs, etc.

Scope of Service for Service Provider

- Provider must have the ability to work with clients to reduce and manage behaviors, improve ADL's, independent living skills, etc.
- The provider must be willing to employ or contract with behavioral and medical professionals to support the clients.
- A minimum of two BCBA hours per week shall be funded through the standard hourly rate.
- ACRC will explore additional specialized services via alternative service codes/rates for nursing oversite, dependent upon client need.

Eligibility of Applicant

- Must demonstrate an understanding of the target client population and shall have a history working with individuals with intellectual and developmental disabilities.
- Must demonstrate a strong understanding and demonstrate success with behavioral management with clients with developmental disabilities, as well as the willingness to contract any necessary medical staff (RN/LVN).
- Applicants must have the ability to train staff in implementation of behavior plans, ability to work with clients to teach life skills, etc.
- The administrator of the day program must meet the criteria identified in CCR Title 22 § 82064.

- In accordance with CCR Title 17 § 56754 the:
 - Director of the Adult Day Program must have a bachelor's degree and minimum of 18 months experience in management of human services delivery system or five years of experience in the human services delivery system including at least two years in management.
 - Supervisor shall possess three years of experience in the human services delivery system including at least one year in a comparable program <u>OR</u> bachelor's degree in a human services field.

Expectation of the Service Provider

- Applicant must be able to demonstrate knowledge of the regional center, who the regional center serves, and experience working with behavioral and medical clients.
- This day program will have behavior management program staff available as well as medical staff available.
- Behavior management programs shall provide a direct care staff-to-consumer ratio of 1:2 or 1:3.
- Day Program operators will be required to develop Individual Service Plans (ISP) for consumers and provide semi-annual and annual reports to the planning team.
- Applicant will locate a site to be licensed by CCL.
- Behavior Management Programs shall meet the requirements in CCR Title 17 § 56710 56756.

Part II

Applicant Criterion and RFP Process

A. PURPOSE

The Community Placement Plan (CPP) and the Community Resource Development Plan (CRDP) are designed to address and develop unmet and under met needs of regional center clients. It includes the development of the necessary community resources for clients who are ready to transition from a State Developmental Center (SDC), Institute of Mental Disease (IMD), or other highly restrictive settings, into the community, or to assist those who are at risk of moving into one of those placements or have unique support needs. ACRC solicits the community through a Request for Proposal (RFP) to seek out qualified providers who are able and willing to meet the specialized needs of this population.

B. EXPECTATIONS OF THE SELECTED APPLICANT

It is expected that the selected applicant; (1) work collaboratively and closely with the regional center, (2) provide careful and thorough planning in all aspects of the project, (3) work diligently to complete the project in a timely manner, (4) commit to providing quality services, (5) submit updates and summaries detailing progress made towards meeting the project objectives, and (6) report any major delays with the project immediately to ACRC. ACRC will communicate regularly with the selected applicant, licensing/certification agencies (i.e. Community Care Licensing, etc.), Department of Developmental Services (DDS), and other stakeholders who have an interest in the development of the project. Through this RFP process, an applicant must demonstrate strength in the areas of clinical, administrative, and financial responsibility.

Selected provider much complete a DS1891 and have no exclusions prior to being awarded a project.

C. REFERRALS

Client referrals are initiated through the appropriate interdisciplinary teams (i.e. Specialized Services and Support Unit (SSSU), client's planning team, etc.). For clients transitioning from an SDC or IMD, the respective agencies (Porterville Developmental Center (PDC), College Hospital, etc.), representatives from those agencies will be involved until the transition to the community is done.

D. WRITTEN PROPOSAL

Proposals submitted in response to this RFP are intended to be an overview of the applicant's expected delivery of service for the targeted client population. A more detailed description of the prospective service plan/program design will be developed during the vendorization process. Proposal must be written in a professional manner and clearly reflect the applicant's intended delivery of service.

E. SELECTION PROCESS

The selection committee will review and score all proposals using a 100-point scale. Top points are given to the various sections of your proposal that reflect the appropriate supports and services offered to the individuals you are planning to serve. The top three applicants with an average proposal score of 70% or above will be interviewed. ACRC reserves the right to interview other applicants who may not be in the top three or have a score below 70%.

F. RFP TIMELINE

RFP Orientation December 12, 2024
 Proposals Due January 22, 2025
 Read and Score Proposals February 12, 2025

• Applicant Interviews February 18 through March 4, 2025

ACRC Final Selection March 7, 2025
 Contract Signed June 30, 2025

G. START-UP FUNDING

Start-up funding is available for these projects. Funds are meant to aid in the development of the project but may not cover the entire cost. The selected applicant is responsible for costs that exceed the available start-up funds. The selected applicant will complete a start-up funds allocation detailing how the funds will be used. Prior to any disbursement of funds, the start-up funds allocation must be approved by ACRC.

H. LICENSURE/VENDORIZATION

Selected applicant must have/acquire and maintain all appropriate licenses and certifications for the program/service and/or the individuals operating and providing the services which are required to operate the program/service.

Selected provider will become vendored under service code 999 (start up funds) and then become vendored under the appropriate service code for the program. Selected applicants will complete all requirements to become vendored including completion of ACRC's vendor training applicable to the service (i.e. Vendor Orientation, Behavior Management Skill Training, program design workshop, medication training, P&I training, record keeping training, SIR training, and accounting (e-billing) training). Prior to vendorization, the selected applicant must have an approved program design, approved fee schedule, if applicable, and execute a Service Provider Agreement with ACRC.

I. NON-DISCRIMINATION

ACRC shall not discriminate in the selection of an applicant on the basis of race, color, creed, national origin, ancestry, sex, marital status, disability, religious or political affiliation, age, or sexual orientation.

J. ACRC CONTACTS

rfp@altaregional.org

OR

Dan Kilmer, dkilmer@altaregional.org
DeDe Peters, dpeters@altaregional.org
Kristi Shaffer, kshaffer@altaregional.org
Courtney Cornelison, ccornelison@altaregional.org
Virginia Gabby,vgabby@altaregional.org
Jordan Eller, jeller@altarejongal.org

^{*}ACRC reserves the right to modify the above timeline.

Part III

Proposal Guidelines

When drafting your proposal, consider how you will effectively meet the unique needs of the targeted client population. Draw on your experience, education, and creativity when deciding what services and supports are necessary. Thoughtfully consider how services will be delivered and consider how your proposal will stand out from the others. Simple, generic responses or descriptions will hinder your chance of being considered for an interview.

This program summary is NOT meant to highlight every aspect of the program; a full description of the program will be developed in the program plan by the selected applicant.

Format. Double space, 12pt font, Times New Roman, and one-inch margins.

SRF Adult Step Down and SRF Children Step Down

An applicant's proposal must include all the following items:

- 1. Title Page (Attachment A)
- 2. Applicant/Agency Information (Maximum 2 Pages) (10 pts)
- 3. Program Summary (Maximum 15 Pages)
 - a. Describe the ideal layout/design of the home and property site. What amenities do you want for this home and explain how these amenities will be helpful in providing services? (10 pts)
 - b. Describe how you plan on finding qualified staff. List the different staff positions (title) and briefly describe their duties. (15 pts)
 - c. Discuss your plan to ensure quality of care for those that you serve (behavior, medical, and/or mental health). Describe your plan to ensure all client's plans (behavior plan, nursing care plan, restricted health care plan(s), and/or other treatment plans) are being implemented correctly by all staff and how you will ensure the data collection is accurate. (15 pts)
 - d. Describe your plan to meet clients' community integration needs. (10 pts).
 - e. Describe how you plan to utilize any specialized, licensed/clinical staff. Choose two <u>other</u> types of consultants that would be important in your program and explain why you choose them and how you plan to utilize them in the home. (15pts).
 - f. Describe your staff training program, including topics, and explain how this staffing training program will ensure staff will be able to effectively serve the targeted client population. (10pts)
 - g. What is your plan in serving diverse populations, included, but not limited to, culturally and linguistically? Provide an example. (15pts)

Day Program

An applicant's proposal must include all the following items:

- 1. Title Page (Attachment A)
- 2. Applicant/Agency Information (Maximum 2 Pages) (10 pts)
- 3. Program Summary (Maximum 15 Pages)

- a. Proposed location/geographic area. (5 pts)
- b. Describe the ideal layout/design of the program and property site. What amenities do you want for this program and explain how these amenities will be helpful in providing services? (10 pts)
- c. Describe how you plan on finding qualified staff. List the different staff positions (title) and briefly describe their duties. (15 pts)
- d. Discuss your plan to ensure quality of care for those that you serve (behavior, medical, and/or mental health). Describe your plan to ensure all client's plans (behavior plan, nursing care plan, restricted health care plan(s), and/or other treatment plans) are being implemented correctly by all staff and how you will ensure the data collection is accurate. (15 pts)
- e. Describe your plan to meet clients' community integration needs. (10 pts).
- f. Describe how you plan to utilize any specialized, licensed/clinical staff. (15pts).
- g. Describe your staff training program, including topics, and explain how this staffing training program will ensure staff will be able to effectively serve the targeted client population. (10pts)
- h. What is your plan in serving diverse populations, included, but not limited to, culturally and linguistically? Provide an example. (10pts)

Dental Application

An applicant's proposal must include all the following items:

- 1. Title Page (Attachment A)
- 2. Applicant/Agency Information (Include Credentials) (Maximum 2 Pages) (10 pts)
- 3. Describe the creation of your application for a dental desensitization service. Include the following areas:
 - a. Describe your overall experience with children and adults with I/DD, maladaptive behaviors and/or anxiety. (10 pts)
 - b. Describe how your experience, skills, and knowledge will work towards the creation of a dental app that will assist clients towards improved oral health and desensitization. (10 pts)
 - c. Describe the varying components of the dental application and how they would be used. (10 pts)
 - d. Describe the testing process for the effectiveness of the application. (10 pts)
 - e. Please indicate the ways you will provide technical support for clients and care providers during the process of application utilization, what challenges you anticipate and how you will mitigate potential issues. (20 pts)
 - f. Describe how the BCBA, RDHAP, DDS or equivalent will collaborate when delivering the service. (20 pts)
 - g. What is your plan in serving diverse populations, included, but not limited to, culturally and linguistically? Provide an example. (10pts)

Dental Desensitization

An applicant's proposal must include all the following items:

- 1. <u>Title Page</u> (Attachment A)
- 2. Applicant/Agency Information (Include Credentials) (Maximum 2 Pages) (10 pts)
- 3. Describe your proposed dental desensitization service. Include the following areas:

- a. Describe your overall experience with children and adults with I/DD, maladaptive behaviors and/or anxiety. (10 pts)
- b. Please describe how your experience and skills, including your coaching model, will best serve the objective of assisting clients towards desensitization. (20 pts)
- c. Describe the location(s), setting and environment where you will serve clients. (10 pts)
- d. Please indicate the ways you will provide support for the clients during the process of desensitization and how you will mitigate potential challenges. Include how you will determine the appropriate duration of service based on the client's progress in the desensitization process. (20 pts)
- e. Describe collaboration efforts for service delivery (BCBA, RDHAP, DDS or equivalent) and how you will facilitate desensitization strategies outside of teaching sessions. Describe any continuing education opportunities you plan on attending to stay up to date on best practices when working with the IDD population as well as dual disciplines. (20 pts)
- f. What is your plan in serving diverse populations, included, but not limited to, culturally and linguistically? Provide an example. (10pts)

Wellness Center (Psychiatric Treatment/Adaptive Skills Training)

An applicant's proposal must include all the following items:

- 1. <u>Title Page</u> (Attachment A)
- 2. Applicant/Agency Information (Maximum 2 Pages) (10 pts)
- 3. <u>Description of service (maximum 10 pages)</u>
 - a. Describe the types of services you can offer. (psychiatric, support groups, and classes you offer) (20pts)
 - b. Describe any assessment and evaluation tools used for individuals with an intellectual disability and how those tools will be used. (10pts)
 - c. List all staff credentials and describe the experience of the treatment provider. (15 pts)
 - d. Describe how you assess to determine if a client is making reasonable progress. What is the approach to the service if an individual is not making progress or is declining. (15 pts)
 - e. Describe any barriers you may have with serving the targeted population, and how you may overcome those barriers. (15 pts)
 - f. What is your plan in serving diverse populations, included, but not limited to, culturally and linguistically? Provide an example. (5pts)

Attachments

The following attachments must be completed and received with your proposal:

- **1.** Proposal Title Page (Attachment A)
- **2.** Sample Staff Schedule (SRF Stepdown for Adults and Children, Day Program) (Attachment B)
- **3.** References (Attachment C)
- **4.** Statement of Disclosure (Attachment D)
- **5.** Resume(s)

Attachment A

Proposal Title Page

CPP/CRDP Fiscal Year 2024/2025 December 2024 RFP

To:	o: Specialized Services & Supports Unit		Proposal must be emailed to: rfp@altaregional.org
Attention:	CPP/CRDP Resource I Alta California Regiona		
	Community Service &		nt
Project Num	uber and Description (plea	se print)	
Name of Ap	plicant or Organization Su	ibmitting Proposal (please print)
Signature of	Person Authorized to Bin	d Organization	Date
Contact Pers	son for Project (please prin	nt)	
()_	()	
Telephone Number		Fax Number	E-mail Address
Name of Par	rent Corporation (if application)	able)	
Mailing Add	lress (please print)		
Author of Pr			Date Submitted
<i>If different fi</i>	rom person submitting pro	pposal	

Attachment B

Sample Staff Schedule

Facility:	
Week of:	
	Number of clients: 4 or as identified

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1:00am							
2:00am							
3:00am							
4:00am							
5:00am							
6:00am							
7:00am							
8:00am							
9:00am							
10:00am							
11:00am							
12:00pm							
1:00pm							
2:00pm							
3:00pm							
4:00pm							
5:00pm							
6:00pm							
7:00pm							
8:00pm							
9:00pm							
10:00pm							
11:00pm							
12:00am							
TOTAL							

		Weekly Total:
Direct Care Staff:		
#1: (Admin)	#7:	
#2:	#8:	
#3:	#9:	
#4:	#10:	
#5:	#11:	
#6:	#12:	

Instructions: Place each staff member's name on a number. Then use the assigned number to fill out the staff schedule.

Attachment C

References

References for: (Applicant's Nan	ne)		
List three references who we may well as if they can attest to your eprofessional capacity.			-
	Reference No. 1		
Name of Reference:	Title:	Agency:	
Address:	City:	State:	Zip Code:
Phone:	Email:	1	ı
	- 1 · · ·		
	Reference No. 2		
Name of Reference:	Title:	Agency:	
Address:	City:	State:	Zip Code:
Phone:	Email:	I	
	Reference No. 3		
Name of Reference:	Title:	Agency:	
Address:	City:	State:	Zip Code:
Phone:	Email:	- 1	•

Attachment D

Statement of Disclosure

Please circle the correct response, as applicable. Briefly explain any "yes" answers. If a corporation, "Applicant" for the purpose of this Statement of Obligation means any entity for which the "Person Authorized to Bind Organization" as identified on the cover page is affiliated.

1. The applicant	is currently providi	ng services to regional center clients.
Yes	No	
	is currently receiving op a social service	ng or planning to apply for other grants/funds from any program(s)?
Yes	No	
3. The applicant	is vendored with an	nother regional center.
Yes	No	If yes, which regional center(s):
		cant's organization, or staff has received a citation from any l, physical, sexual, fiduciary, neglect)?
Yes	No	
	a notice of Immedi	of the applicant's organization received a Corrective Action ate Danger, or other citation from a regional center or State
Yes	No	
6. Has the applic	ant had to file for b	ankruptcy for any reason?
Yes	No	
	• • • •	icant been convicted of a crime that would prevent them require an exemption from a licensing agency?
Yes	No	
including name	e, location, type, cap	ess obligations held by the Licensee and Administrator, pacity and time commitment of each obligation (Do not ovide through this proposal).
Signature of App	olicant or Authorized	d Representative Date