

DEPARTMENT OF HUMAN SERVICES
STATEMENT OF NEED / REQUEST FOR PROPOSAL FOR
DETP & HIGH RESIDENTIAL CHILD CARE SERVICES
SSA/SONGH/18-001-S
QUESTIONS AND RESPONSES 2

Question 8: Attachment W (minimum qualifications) in the statement of needs for DETP/Hi says that a RCC must be licensed to provide DETP/Hi services. However, I have not been able to find what is actually required to obtain a DETP/Hi license. Is the issuance of the license dependent upon the clinician's and staffs experience and training dealing with trauma associated with youth sex trafficking/emotional disabilities etc.?

Response:

Yes. DETP/High Intensity license process is the same as a regular group home. The only difference is the level of services, experience with youth sex trafficking/emotional disabilities and the certification of staff. The Levels of Intensity located on the Governor's Office of Children website <https://goc.maryland.gov/wp-content/uploads/sites/8/2014/10/Levels-of-Intensity-FY-2016.pdf> can be very helpful in determining the type of requirements for DETP/Hi programs.

Question 9: At what point are the sex trafficked youth brought to a program? Do they come directly to High programs for Sex Trafficking from the streets as they are found, or is there a process that they would go through before being placed in a program?

Response: The LDSS will make an initial assessment of the child's needs and place the child based on the Provider's profile and needs of the child. Children who are currently in foster care may also be removed from existing RCC Programs if they have been identified as in need of this service.

Question 10: What credentialing, certification, or licensure is required for a Certified Trauma Professional? (Section 2.4.2.2)

Response: A Certified Trauma Professional can be a social worker that has a certification in trauma or a License Clinical Professional Counselor (LCPC) with a certification in trauma.

Question 11: What are accepted models of Trauma Certified Treatment? What are the required components for a Trauma Certified Treatment? (Section 2.4.20.1.7)

Response: According to Substance Abuse and Mental Health Services Administration (SAMHSA), the following are some well-known trauma-specific interventions: Addiction and Trauma Recovery Integration Model (ATRIUM)

- **Essence of Being Real**
- **Risking Connection®**
- **Sanctuary Model®**
- **Seeking Safety**
- **Trauma, Addiction, Mental Health, and Recovery (TAMAR)**
- **Trauma Affect Regulation: Guide for Education and Therapy (TARGET)**
- **Trauma Recovery and Empowerment Model (TREM and M-TREM)**

This list is not exhaustive.

Also according to SAMSA, Trauma-specific intervention programs generally recognize the following:

- **The survivor's need to be respected, informed, connected, and hopeful regarding their own recovery**
- **The interrelation between trauma and symptoms of trauma such as substance abuse, eating disorders, depression, and anxiety**
- **The need to work in a collaborative way with survivors, family and friends of the survivor, and other human services agencies in a manner that will empower survivors and consumers**

Question 12: What assessment tool will be used to identify a child as a sex trafficking survivor? Who will administer the assessment, make the determination, and ultimately make placement decisions?

Response: The LDSS will utilize the tool in the current Sex Trafficking policy (SSA-CW-18-10). The LDSS will make placement decisions.

Question 13: Where can providers find the data to support the need for 10 DETP sex trafficking beds and 16 DETP group home sex trafficking beds?

Response: The Department has determined that the need for services requested under this SON/RFP.

Question 14: Does the 3:1 staff to client ratio apply to overnight staffing patterns?

Response: 2 staff to 1 resident should be enough for both day and overnight staffing patterns. An amendment to the RFP will be issued to reflect this.

Question 15: What assessment tool will be used to identify a child as a sex trafficking victim placement and who would assess and identify the child as such?

Response: See the response to #12 above.

Question 16: The requirement asks for the Program to offer trauma-certified treatment. Are there particular models that you have in mind for that or what qualifies as trauma-certified treatment?

Response: See response #4 above.

Question 17: At all times, even awake overnight, there's three staff for every one kid. So if you have four kids in the program, that's 12 staff on duty?

Response: See response to #7 above.

Question 18: Section 2.4.20.1.8: "The Provider shall house and care for no more than 3 to 4 children in one facility, with one youth per bedroom." What (does) "facility" means in this case and if there is any flexibility with this rule.

Response: Facility is the location where the children will reside if provider is awarded a contract under this SON/RFP.

Question 19: Do separate wings count as separate facilities?

Response: No, facilities are licensed by building/house/site.

Question 20: Is it possible for us to propose five clients per facility (still assuming one client per bedroom)?

Response: No, contractors shall only house and care for no more than 3 to 4 children in this population in one setting with one youth per bedroom.

Question 21: If I already have two licensed group homes in Southern Md. and want to add a third as a HIGH intensity group home, will that be added to the current license, with an additional classification?

Response: The third group home will be licensed as a High Intensity group home. Each group home has its own license that indicates the type of program, gender and age range of youth.

Question 22: Will I need to submit another Proposal, when due, for the two group homes I currently have licensed or will this RFP cover those as well?

Response: This SON/RFP is only for the services requested for DETP and HI for sex trafficking and ECDD. A separate RFP will be issued for the existing group home services.

Question 23: Will the new classifications be licensed under DHR or Office of Mental Health?

Response: Please refer to Section 2.3. Depending on the type of RCC Program an Offeror proposes will determine the licensing agency, either DHS or Maryland Department of Health/Developmental Disabilities Administration (MDH/DDA).

Question 24 If I want to change the current license from 'Small group Home' to 'Therapeutic Group Home', is this the correct RFP or is there a different process?

Response: This SON/RFP may be used to obtain a license for a DETP or High Intensity Program in order to provide the services requested. Therapeutic Group Homes are licensed by MDH. . Providers must contact that agency if interested in being licensed by them. A provider's current site cannot have two licenses.

Question 25: Application outline indicates Report from Fire Authority and public health...If you have an appointment but your appointment is after the 19th can you submit your proposal including your appointment date with the fire Marshall?

Response: Amendment #2 extends the Proposal Due Date until January 9, 2018.

Question 26: Do you need to have your meal plan menu approved by a nutritionist at the health department and is a letter sufficient from the nutritionist?

Response: Refer to COMAR 14.31.06.10 B (9) (b) Food and Nutrition, which requires that licensees shall design menus that "are approved at least annually by an individual licensed by the State to practice dietetics."

Question 27: For the High Intensity group home programs serving ECDD youth, can they be served in living units licensed as a high intensity with youth that do not have an ECDD diagnosis?

Response: No, Youth that do not have a ECDD diagnosis should not be mixed with non-ECDD diagnosed youth.