

## **BOONE COUNTY, MISSOURI**

## Request for Proposal #: 48-15DEC16 - Early Childhood Prevention Programs

#### ADDENDUM #1 - Issued November 9, 2016

This addendum is issued in accordance with the Request for Proposal and is hereby incorporated into and made a part of the Request for Proposal documents. Offerors are reminded that receipt of this addendum should be acknowledged and <u>submitted with Offeror's response</u>.

Specifications for the above noted Request for Proposal and the work covered thereby are herein modified as follows, and except as set forth herein, otherwise remain unchanged and in full force and effect.

I. ADD: Question Due Date: 5:00 p.m., December 7, 2016

II. CHANGE: 3.6 to a "three-year" period

III. The attached Pre-Proposal Sign-In Sheet is attached for informational purpose.

IV. The County has received the following questions and is providing a response below:

**Question 1:** Is there a way to add supporting information such as charts and tables that would make it easier to understand the distribution of participants/recipients of the grant? Apricot does not accept tables but would there be an option to attach this document/file to our application?

**Response:** No charts or tables will be accepted.

**Question 2:** Can you clarify as to whom the services can be provided? Can the funds be used to deliver professional development for early learning teachers and caregivers that would support such programs listed in 3.3 and 3.4?

For example: We offer a collaborative library of online courses for early learning practitioners that align with NAEYC and Headstart standards that address best practices, interventions and teaching children with disabilities.

Response: Yes, professional development can be a reimbursed service.

**Question 3:** Section 3.7.2: Reference is made to consumer demographics. Our services are provided directly to practitioners for whom demographic data is not collected. Should that be stated or should we include the demographic information for the programs in which they currently serve?

**Response:** For any training/professional development the Consumer Demographics has a section that only requests the number of individuals trained. No other specific information is required.

Question 4: How do you define Universal Preventative Intervention?

**Response:** See attached sheet.

Question 5: How do you define Comprehensive Formative Assessment?

**Response:** Below are some helpful websites for the definition of Comprehensive Formative Assessment your review:

- https://elc.grads360.org/#communities/comprehensive-assessment
- http://www.ed.gov/early-learning/elc-draft-summary/definitions
- http://www.ed.gov/early-learning/elc-draft-summary/definitions
- <a href="https://www.masteryconnect.com/guide/pdf/guide-to-formative-assessment.pdf?utm">https://www.masteryconnect.com/guide/pdf/guide-to-formative-assessment.pdf?utm</a> source=content&utm medium=feature guide&utm campaign=formative

**Question 6:** Are you looking for any assessment at all?

**Response:** Yes, assessment would be considered if it is a coordinated effort with the Family Access Center of Excellence (FACE) of Boone County and other providers.

Question 7: Do you consider screening as primary prevention?

Response: Yes, keep in mind that any screening should be a coordinated county-wide effort.

**Question 8:** Do you consider family strengthening programs as preventative? Possible programs include Incredible Years, CSEFEL Parenting, Parenting Cafés

**Response:** Yes, however, we will not fund any duplicative effort. It also must be strongly supported with research and a plan to reach targeted consumers.

**Question 8:** If you get two significant applications and they dovetail, would that work? Or should they be one large proposal?

**Response:** Yes, they can be separate applications if they contemplate each other with prior discussions held and they have entered into a MOU.

**Question 9:** What if you attempt to work with some organization but they decline?

**Response:** Please include this information in your proposal response so we are made aware.

**Question 10:** Can we collaborate with groups/organizations that are not currently funded by the Children's Services Fund?

Response: Yes

Questions 11: How do we figure indirect/administrative costs into the unit service price?

**Response:** These costs should be figured in the unit rate for the service(s). There will not be a separate percentage paid for indirect/administrative costs. These costs should not exceed 15% of salary expenses as stated in the BCCSB Funding Policy.

**Question 12:** What is the initial term of the contract?

Response: We will start as soon as possible, some time after the first of the year.

Questions 13: Do you accept letters of support?

Response: No

Question 14: How are programs paid/reimbursed?

**Response:** Payments are typically made once the service has been provided but we will sometimes allow for upfront costs. Decisions will be made during contract negotiations.

By:

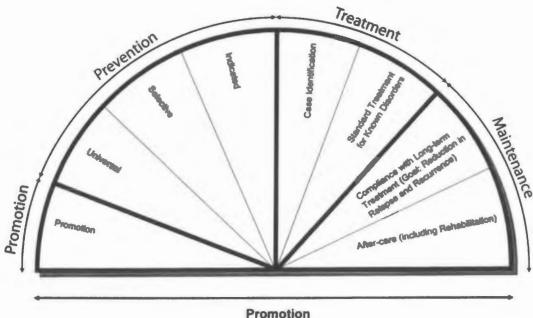
Melinda Bobbitt, CPPO, CPPB

**Director of Purchasing** 

BIDDER has examined Addendum #1 to Request for Proposal # 48-15DEC16 – Early Childhood Prevention Programs receipt of which is hereby acknowledged:

Company Name:		
Address:		
Phone Number:	Fax Number:	
E-mail:		
Authorized Representative Signature:	Date:	
Authorized Representative Printed Name:		

#### **Mental Health Intervention Spectrum**



Mental health promotion interventions: Usually targeted to the general public or a whole population. Interventions aim to enhance individuals' ability to achieve developmentally appropriate tasks (competence) and a positive sense of self-esteem, mastery, well-being, and social inclusion, and strengthen their ability to cope with adversity.

**Example:** Programs based in schools, community centers, or other community-based settings that promote emotional and social competence through activities emphasizing self-control and problem solving.

Universal preventive interventions: Targeted to the general public or a whole population that has not been identified on the basis of individual risk. The intervention is desirable for everyone in that group.

Example: School-based programs offered to all children to teach social and emotional skills or to avoid substance abuse.

Selective preventive interventions: Targeted to individuals or a population subgroup whose risk of developing mental disorders is significantly higher than average. The risk may be imminent or it may be a lifetime risk. Risk groups may be identified on the basis of biological, psychological, or social risk factors that are known to be associated with the onset of a mental, emotional, or behavioral disorder.

**Example:** Programs offered to children exposed to risk factors, such as parental divorce, parental mental illness, death of a close relative, or abuse, to reduce the risk of adverse mental, emotional, and behavioral outcomes.

Indicated preventive interventions: Targeted to high-risk individuals who are identified as having minimal but detectable signs or symptoms foreshadowing mental, emotional, or behavioral disorder, or biological markers indicating predisposition for such a disorder, but who do not meet diagnostic levels at the current time.

**Example:** Interventions for children with early problems or aggression or elevated symptoms of depression or anxiety.

National Research Council (US) and Institute of Medicine (US) Committee on the Prevention of Mental Disorders and Substance Abuse Among Children, Youth, and Youth Adults. (2009). Defining the Scope of Prevention. Washington, DC: National Academies Press (US).

# PRE-PROPOSAL CONFERENCE SIGN IN SHEET

# 48-15DEC16 – Early Childhood Prevention Programs

	Representative Name	Business Name	Telephone Number	Fax Number
1.	Melinda Bobbitt	Boone County Purchasing	886-4391	886-4390
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3.	Joanne Nelson	Children's Services	886-7219	75.7
4.	JoFey	Moberly Area Community Colle	ge 60-263-4100°	\ \ \
5.	Christina Gilbert			117 1816
6.				660 263-7563
7.	Zezhon Qi (Roger)	Department of Child Health & The Thompson Center, Mitton	(573) 489-9658	
8.	Wendy Ell	unived Missouri - Some	884-1341	
9.	Catherine Miller	Parential	268.7789	
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14.	Kristan Erangu	<u> </u>	573 974 367	l
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