Psychiatric Residential Treatment Facilities Request for Proposals
Question and Answer

1. Q: Does the physical site have to be located in Philadelphia?
   A: Yes. Please see page 5 of the RFP.

2. Q: Can the male and female program coexist be in the same building?
   A: This is not the original intention but you can propose this. Please include the rationale for a two program site in your proposal.

3. Q: Is there an allowance for startup budget?
   A: Startup costs will be discussed during contract negotiation. Please submit a detailed budget that outlines both startup costs as well as annual costs.

4. Q: Will there be additional support from DHS in family finding?
   A: The process of Family Finding should be viewed as a partnership between the provider(s) and DHS. That being said, CBH currently has a high fidelity wraparound team with staff to help with family finding. Additionally, BBI can support the family finding effort via best practices and their learning collaborative. Through this learning collaborative you will have the idea to share challenges and gather tips and techniques from other residential providers. At the end of the day, the youth will also be integral to this process as often times they know the people whom they consider family. In the RFP we have included some Family Finding documents in the footnotes. Please see page 8 of the RFP for this resource.

5. Q: In the rare instance when a restraint is indicated, an LPN could get a verbal order but cannot check the physical condition of the youth after the restraint. An RN would be able to get the verbal orders as well as do the health and safety check afterward.
   A: If you wish, in your response please include this staffing change and reflect the change in your proposed budget.

6. Q: The RFP seems to expect that the entire shift changes at once, is having staggered shifts (ex: 3-11 and 4-12) be acceptable as this allows more time to staff communication as shifts change?
   A: Staggered shift changes would be ideal. It is very important that staff have the ability to share updates and discuss clinical needs and concerns in real time.

7. Q: If submitting for two houses is there a need to submit one proposal per house?
   A: No but you must clearly indicate the number of houses you are proposing and differences in clinical scope and/or staffing between the two.
8. Q: Can the budgets reflect service for 18 children or does it have to be separated per house proposed. Even if there is no need for two proposals?

A: If you are planning on doing both locations then the budget should reflect that.

9. Q: If youth go home for the weekend, is the per diem still billable since the space is being reserved?

A: Yes. Though you may use different language programmatically, this home time must fall under the category of therapeutic leave as defined in the MA bulletin Effective September 8, 1995. It can be found here, please refer to pages 3-4.


10. Q: If the youth elopes, what is the minimum number of days that the space must be reserved before offering it to another youth? Is this time billable?

A: Providers can bill up to 48 hours following the AWOL with documented efforts to support locating youth and attempts to bring back into treatment. After that time the bed is considered open to another youth, though each such scenario will be discussed and handled individually based upon the factors involved.

11. Q: In the staffing portion of the RFP you require providers to have Mental Health Workers. But CBH just sent out a letter stating that this position will be eliminated and replaced with the state’s Child Care Worker and Child Care Supervisor. Which should be use for this RFP? Are the requirements different?

A: We will revert to the changes to Child Care Worker and Supervisor per the bulletin dated October 25, 2017. It can be found at the following link: http://dbhids.org/providers-seeking-information/community-behavioral-health/cbh-provider-bulletins/