

Announcement of Request for Proposal (RFP) Diversity in the provision of community based Social Skills Services with Westside Regional Center Fiscal year 2016-2017

Summary: Westside Regional Center (WRC) is seeking culturally competent and bi-lingual Children Services providers to expand the provision of <u>Social Skills</u> to our underserved communities within WRC catchment area which include the following zip codes:

Inglewood: 90301, 90302, 90303, 90304, 90305, 9037, 90308, 90309, 90311, 90312

Hawthorne: 90250, 90251, 90260, 90261, 90310

Lawndale: 90278, 90260

Gardena: 90247, 90248, 90249

Los Angeles: 90044

Posting date: 05/04/2017

Services Type: Social Skills

Start-up Available: Start-up funds can only be used for non-reoccurring costs associated with initially establishing services, which may include administrative components, licensing, location furnishings and supplies, personnel recruitment and training expenses, general equipment and other costs as described per contract. Start-up funds are not available to cover 100% of the development costs.

Location: Refer to zip codes

Development time: The program should be ready to provide services no later than *September 2017*

Demographics: For Social Skills the delivery of services should be both in the community and in a site based setting. WRC is encouraging unique community based locations and partnerships to increase access and utilization of social skills services for individuals who currently receive limited to no service delivery. Recent Purchase of Services data have identified that the Hispanic and African American communities residing in the identified zip codes are underserved or not receiving any services. (Please refer to WRC 2015/2016 POS data posted on the WRC website for specific information.).

Writing Requirement: Please submit a one page summary highlighting the major features of your program proposal in Spanish and English. Consider using language in the summary that is easily understood by Regional Center parents and self-advocates.

Transportation: Access to transportation should be a consideration (i.e., public transportation, Uber, taxi, vouchers, leased vehicle and parking).

Services description: The provision of services in a culturally and linguistically sensitive manner: social skills assessments and ongoing services in a community based setting. Service scheduling should be flexible including during off peak times to better meet working family's schedules.

Schedules must include some availability after 5:00 PM Monday through Friday as well as weekend hours.

Potential providers must have prior demonstrable experience including:

Qualified Social Skills Supervisors, Facilitators and Assistants shall meet the following requirements:

Supervisor:

- The Supervisor is a certified OT, PT, Speech Pathologist OR LCSW, LMFT, Ph.D. BCBA
- The Supervisor has a minimum of three years of experience with developmental disabilities

Facilitator

- The Facilitator has a minimum of a Master's degree in psychology, social work, child development or a related field
- The Facilitator has a minimum of three years of experience with developmental disabilities

Assistant:

- The Assistant has a Bachelor's degree in psychology, social work, child development or related field
- The Assistant has experience working with individuals with developmental disabilities

The Social Skills Program Curriculum shall

- Include activities that are meaningful and have measurable outcomes
- Include activities that take place in a structured setting in order to work on skill development and acquisition
- Incorporate skill development in the participant's natural environment
- Include strategies for skills development include the use of group name, social stories, videotaping, community outings, didactic practices, peer mentors/models, role playing to teach some of the following skills: turn taking, pragmatic language, feelings, empathy, friendship formation, self-confidence, respect and join attention Consist of service strategies for social skills are individualized and based on the participant's social challenges

The Social Skills Curriculum shall include a Parent Participation component that

- Includes a parent participation component
- Incorporates parent participation through the use of parent groups, homework assignments, handouts and in session participation is encouraged
- Offers parents support, training and lectures on social skills and various strategies that will encourage the attainment of the participant's meaningful and measurable goals

Vendorization

- Must be a current vendor or willing to be vendored with WRC to provide Social Skills services
- Comply with WRC vendorization requirements
- Funding source: One-time start-up funds available
- Have a business located within WRC catchment area and or identified zip codes
- Hold the educational and experience requirements aforementioned
- Be able to demonstrate verbal and written proficiency in Spanish and English language
- Demonstrate multicultural competency and participate in on-going (i.e., at least once a year) training in Cultural Sensitivity to meet the needs of the identified zip code area, including, the Hispanic and African American community
- Multicultural competency as demonstrated by coursework, direct experience and other
 experience with these communities will be considered. Additionally, applicants need to
 include a statement and examples demonstrating how they support clients of diverse
 populations, needs and different cultural backgrounds, how their agency translates materials,
 interprets for other languages and provides staff who speak other languages, etc. Per Welfare
 and Institution Code (WIC) Section 4649.11

Funding source for Social Skills services:

Funding for ongoing services will covered by the current WRC Median Rates

Deadline for submission: 5/26/17

Applications that are submitted after the deadline or incomplete or proposals that do not meet the basic requirements will be disqualified. No proposals will be returned.

This RFP does not commit WRC to procure or contract for services or supports. WRC may elect to fund all, part or none of the project, depending on funding availability as approved by the Department of Developmental Services and the quality of the proposals received.

For more information, please contact:

Ricardo Alvarado Pacheco, M.A. ricardop@westsiderc.org or 310-258-4295

APPLICATION/PROPOSAL COVERSHEET

Name of Applicant or Organization Submitting Proposal							
Traine of Applicant of Organization Cabinitally Proposed							
Name of pare	ent corporation, if	applicable					
-							
Applicant's m	nailing address						
Contact pers	on for project						
Contact phor	ne number	Contact fax number		Conta	ct e-mail addı	ress	
Author of pro	posal or consulta	nt assisting with propos	al		Author/cons	sultant pl	none number
	List all Regio	nal Centers with which y	ou have	vendor	ed programs	or service	<u>es</u>
Reg. Center	Reg. Center Name of Program/Service Type of Program/Service Vendor Num			Vendor Number			
	List all Regiona	al Centers with which yo	u have p	orograms	s/services in c	developm	<u>ient</u>
Reg. Center	Ту	pe of Program/Service i	n Devel	opment		Ser	vice Start Date
Application su	ıbmitted by:						

		_
Się	gnature (person must be authorized to bind organization)	Date
		Attachment – B
	DEVELOPMENT QUESTIONNAIRE	
Na	ame of Applicant/Organization:	
1.	Background and Experience: Summarize your education, knowledge a providing services to the <i>target population(s)</i> . Describe how y education, knowledge and experience will be a good fit for developing the	our documented
2.	<u>Development Experience</u> : Briefly summarize your current and previous services or programs. Highlight similarities between current or pre developed, and your proposed program for this RFP.	•
3.	Staff Qualifications: Do you, your staff and/or your organization curred credentials, skills, training and/or years of experience noted in the Projection as: 1) required for this RFP and/or 2) preferred for this RFP? (Br	ect Requirements
4.	<u>Staff Recruitment, Training and Retention</u> : Describe your plan for recruretaining quality staff. What is your average annual staff turnover rate?	iting, training and
5.	Summary of Program Plan: Provide a summary description of the spectreatment program you are proposing. At a minimum, your summary following: the bullets listed in the program requirements section of philosophy on providing services to persons with developmental didescription of your proposed treatment and stabilization plans.	is to address the f this RFP, your
6.	<u>Financial Resources</u> : What financial resources do you bring to the procredit, cash or fluid capital reserves, etc.)?	pject (e.g., line of

PROFESSIONAL RESUMES AND REFERENCES

Name of Applicant/Orga	nization:				
Submit a professional resume for all staff and consultants identified or referenced in application, including individuals who will be Manager/Director, if known.					
	List all staff and/or consultants for whom a resume is attached				
Na	me	Job Title/Ty	ype of Consultant		
qualifications, experience	e and ability to implement	y affiliation, who can be contact this proposal. References muning board and/or applicant's			
Name:			Phone:		
Name:			Phone:		
Job Title:					
Name:			Phone:		
Agency Affiliation:					

BUDGET SUMMARY

Name of Applicant/Organization:	

Submit budget projections using estimates that are both reasonable and realistic uses of funds.

	Physical Plant (Office)	Start-up Expense	Ongoing Monthly
1.	Lease/Insurance (3 months lease)		
2.	Utilities (gas, electric, water, phone/media)		
3.	Vehicle Lease		
4.	Vehicle Maintenance/Gas/Insurance		
5.	Furnishings/Maintenance		
6.	Total Physical Plant (add Lines 1-5)		
	General Administration	Start-Up Expense	Ongoing Monthly
7.	Admin Overhead		
9.	Office Supplies/Equipment/phone		
10.	Insurance(s)		
11.	Other-CCL fees, etc.		
12.	Staff recruitment		
13.	Training & Staff Development		
14.	Total Gen. Administration (add lines 7-13)		
	Staffing	Start-Up Expense	Ongoing Monthly
15.	Salary – Manager/Director		
16.	Direct Staffing		
17.	Program Consultants		
18.	Employee Benefits		
19.	Payroll Taxes		
20.	Worker's Compensation		
21.	Total Staffing Expenses (add lines 15-20)		
22.	Total Start-up Expenses (add lines 6,14 & 21)	\$	
23.	Total Monthly Rate Per Person (divide Line 22 by 25 clients)		\$