

**Request for Intent (RFI) Application**  
**B3 Crisis Respite**  
*February 13, 2008*

Name of Agency:	Date:
Street Address:	Mailing Address:
City:	State:
County:	Zip:
Contact Person:	CEO/Owner:
	Email Address:
	Contact Numbers Business: Fax:

**Please describe in detail your Agency’s plan and activities to implement B3 Crisis Respite services. It is important that providers base their response on financial feasibility, knowledge of community resources and experience with therapeutic foster care services rendered to children ages three (3) to twenty one (21) which have a mental illness and/or substance abuse disorder. Answers should be specific and detailed. The answers should outline your Agency’s interpretation of Crisis Respite services according to the service definitions/announcement and intentions for how the program will be operational on a day-to-day basis. Information to be documented includes:**

- a. Consumer Capacity: Crisis Respite is a twenty-four (24) hour service, provided in a Residential Treatment (level II) licensed family-type home, which will operate with a no-decline capability. Please describe the process you will use to insure this.
- b. Experience of your Agency with the identified target population to be served within Residential Treatment Level II – family type:
  1. Specifically describe the services that you provide to children and adolescents with a primary mental health or substance abuse diagnosis; or co-occurring disorder.
  2. Specifically describe your agency’s experience in providing Residential Treatment Level II – family type services to children and adolescents who have a primary mental health or substance abuse; or co-occurring disorder.
  3. Does your agency currently have or had any type A/B violations or pending sanctions with in the past 5 years with Division of Health Service Regulation (DHRS)?
  4. Is your agency currently being investigated for Medicaid fraud or have a judgment against it involving Medicaid fraud during the past five (5) years?

- c. Admission criteria and process (should be operational in nature);
- d. Discharge criteria and process (should be operational in nature);
- e. Staffing Pattern and Protocol. Please include the following:
  - 1. Proposed job descriptions, outlining qualifications of the staff for the service
  - 2. Supervision plan for staff
  - 3. Please include your *proposed* thoughts on the education, experience and competence level that your Agency would feel necessary to support individuals in this level of care. Please also include a training plan/timeline for the competency-based trainings already identified in the service definitions/RFI announcement.
  - 4. Include on call supervisory support systems to include specific Clinical, Medical, and/or Emergency coverage and response.
  - 5. In cases of a natural disaster, man-made disaster, or inclement weather how will you ensure service continuation.
  - 6. Include an Organizational Chart to exemplify understanding of intended compliance with staffing requirements. The organizational chart should specifically outline Program lines of clinical and administrative supervision.
- f. Sample of documentation that is required for the service definition (minimum: daily full service note). Other supporting sample documentation which support crisis respite programming is strongly encouraged.
- g. Include information related to your Agency's incorporation of person centered, strength based and evidence based approaches to service delivery and recovery philosophies within your program. Please include specific examples of how this is demonstrated on a day-to-day basis.
- h. Please give us a detailed description of how coordination of care will be successfully exemplified with the child and family team; to include at a minimum the legal guardian and community support worker. Coordination with other child and family team members are strongly encouraged.
- i. Please submit a *proposed* operational budget for programming.
- j. Transportation or coordination of transportation for consumers is an integral part of the crisis system. Submit your plan/proposal for transportation services for crisis respite service.
- k. Please submit your proposed agency-specific policy and procedures for crisis respite services; to include authorization/utilization management parameters outlined in the service definition/RFI announcement.
- l. Please submit plans for program reporting and compliance mechanisms for such.
- m. Please submit your agency's QA/QI plan (globally and specific to this service and program) to include provisions for consumer satisfaction surveys and utilization of services.