**APPLICANT INFORMATION**

Applicant Name:

Authorized Representative Name & Title:

Address:

Telephone: Email:

Website:

Legal Status:  For-Profit Corp.  Nonprofit Corp. Sole Proprietor Partnership

Parent Organization (if a subsidiary):

DESCRIPTION OF SERVICES

Provide a brief description of the scope of services offered, including range of ages and needs of clients. *(Attaching an organizational brochure is acceptable if it is up-to-date and complete.)*

**REFERENCES**

Provide the name and contact information (email and telephone number) of three references who can testify to your experience relative to this RFP:

* connecting children and families to supports in the mental health and drug and alcohol community of services
* working in partnership and collaborating with schools, other provider agencies and community organizations
* working with employees and employers

Include your relationship with each reference and the time frame of the relationship. (*Do not use employees of Dalton Public Schools as references.)*

By submitting this RFP Response Form, I certify and represent to Dalton Public Schools that all submitted materials are true and accurate, and that I have not offered, conferred or agreed to confer any pecuniary benefit or other thing of value for the receipt of special treatment, advantaged information, recipient’s decision, opinion, recommendation, vote or any other exercise of discretion concerning this RFP.

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**Signature of Authorized Representative Date**

**CAPACITY**

List your current SAP/EAP capacity and how many SAP/EAP staff you currently employ. *(Ratio of total clients to staff who provide direct counseling services.)* \_\_\_\_\_\_\_\_ : \_\_\_\_\_\_\_\_

List your ideal SAP/EAP capacity. \_\_\_\_\_\_\_\_ : \_\_\_\_\_\_\_\_

If selected, this contract for service will require meeting anticipated needs for about 4,100 students (Grades 6-12) and about 1,000 employees beginning August 1, 2017.

**QUALIFICATIONS**

Please respond to the following questions. The maximum score is 100 points. Responses should be complete and succinct with a preference that no individual answer exceed one page.

**Organizational Experience (20 points)**

1. Describe your experience identifying children and families in need of mental health supports and connecting them to appropriate services based on your working knowledge of the mental health system in Dalton/Whitfield County.

1. Describe your experience identifying children and families in need of drug and alcohol supports and connecting them to appropriate services based on your working knowledge of the drug and alcohol system in Dalton/Whitfield County.
2. Discuss your experience working in schools or with school-aged children and their families.

**Service Delivery (50 points)**

1. Describe your plan for providing services to students, their families and employees of Dalton Public Schools, including expectations for follow-up after initial contact/referral. What obstacles do you foresee in completing screenings in a timely manner and how will you overcome them?
2. Describe your plan for involving families in SAP activities, especially your approach to engaging with parents.
3. Describe your plan for ensuring that students, families and employees are connected to the kinds of services and supports that will best meet their needs. How will you will collaborate with the existing network of human service providers in Dalton/Whitfield County?
4. How will you incorporate student, family and employee choice into your referral process? After you make your recommendation for treatment or other services, what is your plan for providing students, families and employees with the information they need to make the best choice about how to proceed (e.g., which provider to use, which level of treatment to accept).
5. Describe your plan for supporting families after a referral has been made. How will you facilitate their connection to the referral and support them while they receive treatment or other services?
6. Describe your capacity to provide on-site services following a crisis event, such as a student suicide or active threat situation on a school campus and indicate whether this service would be included in the proposal costs or as a fee-for-service as requested.

**Staffing (10 points)**

1. Based on the number of students and staff provided in the Capacity section above, describe whether additional staffing will be necessary to fulfill this contract and the desired qualifications of any new staff.
2. Dalton Public Schools students, families and staff include many people who are native Spanish speakers. Describe your capacity to serve families in their native language.
3. Describe your expectations for SAP/EAP conduct with students and staff and how it is monitored.

**Data Collection and Delivery (5 points)**

1. Describe your plan for tracking, entering and reporting data on service utilization to the district administration in a timely way.
2. Describe your plan for quality assurance, including which data elements you will look at to determine quality.

**SAP/EAP Costs (10 points)**

1. Dalton Public Schools will serve all secondary students in grades 6-12 (approximately 4,100) and all qualifying employees (approximately 1,000) with its SAP/EAP program. Provide your proposed annual cost to the district, cost basis, cost rationale and recommended payment schedule. (You may attach a budget document as an Addendum.)

**Additional Factors (5 Points)**

1. Provide any additional factors you believe the district should consider when evaluating your organization’s capacity to provide SAP/EAP services.

**ATTACHMENTS**

In addition to this Response Form, please submit the following attachment to your response.

* + - * Your organization’s licensure/certification requirements for staff who provide counseling/support services to students, families and employees.