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**STATE OF CONNECTICUT PROCUREMENT NOTICE**



**Request for Proposals (RFP) For  
Family Bridge Project Evaluation**

**#23OHS395**

**Issued By:**

**Office of Health Strategy**

**June 29, 2023**

The Request For Proposal is available in electronic format on the State Contracting Portal by filtering by Organization for the Office of Health Strategy. <https://portal.ct.gov/DAS/CTSource/BidBoard> or from the Agency's Official Contact:

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Address: 450 Capitol Avenue, Hartford, CT 06103  
Phone: 860-418-7001  
E-Mail: [Rachel.rusnak@ct.gov](mailto:Rachel.rusnak@ct.gov)

The RFP is also available on the Agency's website at [Contracts and RFPs](#)  
Bidder Conference Link: <https://events.gcc.teams.microsoft.com/event/45ccf8ba-0f8f-459d-beec-2ccf0e277896@118b7cfa-a3dd-48b9-b026-31ff69bb738b>

**RESPONSES MUST BE RECEIVED NO LATER THAN**

**August 4, 2023**

**At Time 3:00 pm EST**

The Agency is an Equal Opportunity/Affirmative Action Employer. The Agency reserves the right to reject any and all submissions or cancel this procurement at any time if deemed in the best interest of the State of Connecticut (State).

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## I. GENERAL INFORMATION

### ■ A. INTRODUCTION

- 1. RFP Name and Number.** Evaluation of Family Bridge Pilot Project RFP #OHS23
- 2. RFP Summary.** The Office of Health Strategy (OHS) is seeking proposals from public and private organizations to work with the OHS, the Office of Early Childhood (OEC), Bridgeport Hospital, and the Southwestern Area Health Education Center to create and implement an evaluation of the Universal Nurse Home Visiting-Community Health Worker (UNHV-CHW) Pilot Program of Greater Bridgeport known as Family Bridge. The evaluator must possess the ability to coordinate data systems, particularly EPIC and SalesForce Electronic Health Record Systems, in compliance with the requirements of [Family Connects International](#) (FCI). OHS is seeking innovative and creative evaluation plans that reflect a thorough understanding of the services to be provided, their intended impact, and their significance. The respondent's proposed evaluation plan will include an evaluation of each component:
  - Universal Nurse Home Visiting delivered through the Family Connects model
  - Services led by Community Health Workers and
  - Services for those who receive both Universal Nurse Home Visiting and services led by Community Health Workers

This evaluation is separate from Family Connects' certification process, which monitors sites' fidelity to the model and population. FCI works with community partners to offer the Family Connects Model, an evidence-based model that provides vital in-home clinical care by nurses and referrals to local supports for newborns and their family members. The FC Model is designed to support optimal maternal-child health and advance equitable outcomes, while promoting better aligned community care systems.

The term of the work shall be from Date of Execution of a contract through December 31, 2026.

**3. RFP Purpose.** In 2021, Connecticut legislators allocated \$8 million of the state's American Rescue Plan Act (ARPA) funds to support a Universal Nurse Home Visiting-Community Health Worker (UNHV-CHW) Pilot Program through its passage of SB 1202. In the state's first such multiagency collaboration (known as Family Bridge State Agency Collaborative), the Office of Early Childhood (OEC), with Commissioners from four additional state agencies, including the Departments of Social Services (DSS), Children and Families (DCF), Public Health (DPH), and the Office of Health Strategy (OHS), unified to support the unique integration of a UNHV program with the CHW program.

The Office of Health Strategy and other agencies of the Family Bridge State Agency Collaborative are seeking proposals to conduct a thorough evaluation of this pilot program. The primary focus of this evaluation is to better understand the impact of the program on the health outcomes (including behavioral health) of parents and infants, health equity, and utilization of health and social services; and to identify areas for improvement in the provision and accessibility of state resources and the potential for the expansion of the program to other areas of Connecticut. A successful evaluation will provide both short-term insights into the operations of the pilot and a short and long-term perspective on its impact.

The goals of the Family Bridge Pilot Project are to (1) improve the physical and mental health outcomes of families and infants (2) offer prevention-oriented public health resources, (3) prevent and address health disparities by race, (4) support families who have been impacted by Covid-19, and (5) mitigate stressors impacting families.

**4. Commodity Codes.** The services that the Agency wishes to procure through this RFP are as follows: 0600: Services (Professional, Support, Consulting and Misc. Services)

## ■ B. INSTRUCTIONS

- 1. Official Contact.** The Agency has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Agency. Proposers, prospective proposers, and other interested parties are advised that any communication with any other Agency employee(s) (including appointed officials) or personnel under contract to the Agency about this RFP is strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: Rachel Rusnak  
Address: 450 Capitol Avenue, Hartford, CT 06103  
Phone: 860-418-7001  
E-Mail: Rachel.rusnak@ct.gov

Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

- 2. Registering with State Contracting Portal.** Respondents must register with the State of CT contracting portal at <https://portal.ct.gov/DAS/CTSource/Registration> if not already registered. Respondents shall submit the following information pertaining to this application to this portal (on their supplier profile), which will be checked by the Agency contact.
  - Secretary of State recognition – Click on appropriate response
  - Non-profit status, if applicable
  - Notification to Bidders, Parts I-V
  - Campaign Contribution Certification (OPM Ethics Form 1):  
<https://portal.ct.gov/OPM/Fin-PSA/Forms/Ethics-Forms>
- 3. RFP Information.** The RFP, amendments to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:
  - Agency's RFP Web Page [Contracts and RFPs](#)
  - State Contracting Portal (go to CTsource bid board, filter by "Office of Health Strategy"  
<https://portal.ct.gov/DAS/CTSource/BidBoard>

It is strongly recommended that any proposer or prospective proposer interested in this procurement check the Bid Board for any solicitation changes. Interested proposers may receive additional e-mails from CTsource announcing addendums that

are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFP.

**4. Procurement Schedule.** See below. Dates after the due date for proposals ("Proposals Due") are non-binding target dates only (\*). The Agency may amend the schedule as needed. Any change to non-target dates will be made by means of an amendment to this RFP and will be posted on the State Contracting Portal and, if available, the Agency's RFP Web Page.

- RFP Released: 6/29/2023
- RFP Conference: 7/18/23, 11am Est
- Letter of Intent Due: 7/14/23
- Deadline for Questions: 7/24/2023
- Answers Released: on a rolling basis
- Proposals Due: 8/4/2023

**5. Contract Awards.** The award of any contract pursuant to this RFP is dependent upon the availability of funding to the Agency. The Agency anticipates the following:

- Total Funding Available: \$1 million
- Number of Awards: 1
- Contract Term: Upon execution of contract to December 31, 2026
- Funding Source: \$800,000 in American Rescue Plan Act Funding  
\$200,000 in Centers for Disease Control and Prevention Health Disparities Grant Funding

**6. Eligibility.** Public or private organizations, non-profits legally registered with CT's Secretary of State are eligible to submit proposals in response to this RFP. Respondents claiming non-profit status must provide proof of nonprofit status, such as a copy of the Internal Revenue Service (IRS) determination letter.

**7. Minimum Qualifications of Proposers.** To qualify for a contract award, a proposer must have the following minimum qualifications:

- Demonstrated knowledge of maternal and infant health;
- Demonstrated knowledge and experience evaluating health services, preferably including home visiting, and/or models that are led by Registered Nurses (RNs) and/or take a universal approach;
- Demonstrated understanding of community health worker services, including preferably for maternal and infant health services.
- Expertise evaluating program performance;
- Expertise in collecting and analyzing health outcomes and health equity metrics;
- Expertise contracting with government agencies such as the State of Connecticut or the equivalent for a project of this nature;
- Expertise collaborating with health organizations, such as hospitals and community health worker organizations;
- Expertise in presenting analytic results to and obtaining input from stakeholders, advisory bodies, and the community; and
- Expertise in developing large-scale plans and issuing public reports.

**8. Letter of Intent.** A Letter of Intent (LOI) is required by this RFP. The LOI is non-binding and does not obligate the sender to submit a proposal. The LOI must be submitted to the Official Contact by e-mail by the deadline established in the Procurement Schedule. The LOI must clearly identify the sender, including name,

postal address, telephone number, and e-mail address. It is the sender's responsibility to confirm the Agency's receipt of the LOI. Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.

- 9. Inquiry Procedures.** All questions regarding this RFP or the Agency's procurement process must be directed, in writing, electronically, (e-mail) to the Official Contact before the deadline specified in the Procurement Schedule. The early submission of questions is encouraged. Questions will not be accepted or answered verbally – neither in person nor over the telephone. All questions received before the deadline(s) will be answered. However, the Agency will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFP, or the procurement process will not be answered. At its discretion, the Agency may or may not respond to questions received after the deadline. If this RFP requires a Letter of Intent, the Agency reserves the right to answer questions only from those who have submitted such a letter. The Agency may combine similar questions and give only one answer. All questions and answers will be compiled into a written amendment to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such.

The agency will release the answers to questions on the date(s) established in the Procurement Schedule. The Agency will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Agency's RFP Web Page. At its discretion, the Agency may distribute any amendments to this RFP to prospective proposers who submitted a Letter of Intent or attended the RFP Conference.

At its discretion, the Agency may distribute any amendments to this RFP to prospective proposers who submitted a Letter of Intent or attended the RFP Conference.

- 10. RFP Conference.** An RFP conference will be held to answer questions from prospective proposers. Attendance at the conference is mandatory. Prospective proposers who do not attend the conference are automatically disqualified and ineligible to submit proposals. Copies of the RFP will not be available at the RFP Conference. Prospective proposers are asked to bring a copy of the RFP to the conference. At the conference, attendees will be provided an opportunity to submit written questions, which the Agency's representatives may (or may not) answer at the conference. Any oral answers given at the conference by the Agency's representatives are tentative and not binding on the Agency. All questions submitted will be answered in a written amendment to this RFP, which will serve as the Agency's official response to questions asked at the conference. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the amendment on the date established in the Procurement Schedule. The Agency will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Agency's RFP Web Page.

*The RFP Conference is scheduled for July 18<sup>th</sup>, T 11 am. Advance registration is required: <https://events.gcc.teams.microsoft.com/event/45ccf8ba-0f8f-459d-beec-2ccf0e277896@118b7cfa-a3dd-48b9-b026-31ff69bb738b>*

**11. Proposal Due Date and Time.** The Official Contact is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be received by the Official Contact on or before the due date and time:

**August 4, 2023  
3:00 pm EST**

Proposals received after the due date and time will be ineligible and will not be evaluated. The Agency will send an official letter alerting late respondents of ineligibility.

**An acceptable submission must include the following:**

- One (1) conforming electronic copy of the original proposal.

The proposal must be complete, properly formatted and outlined, and ready for evaluation by the Screening Committee.

An electronic copy of the proposal must be emailed to official agency contact for this procurement. The subject line of the email must read: **Family Bridge Evaluation**. Required forms and appendices may be scanned and submitted as PDFs at the end of the main proposal document. Please ensure the entire email submission is less than 25MB as this reflects The Agency's server limitations. Respondents should work to ensure there are no additional IT limitations from the provider side.

The original proposal must carry original signatures and be clearly marked on the cover as "Original." Unsigned proposals will not be evaluated. The original proposal and each conforming copy of the proposal must be complete, properly formatted and outlined, and ready for evaluation by the Screening Committee.

**12. Multiple Proposals.** The submission of multiple proposals is not an option for this procurement.

## II. PURPOSE OF RFP AND SCOPE OF SERVICES

### ■ A. AGENCY OVERVIEW

Formally established in 2018, the Office of Health Strategy (OHS) was created in 2017 through a bipartisan effort of the Connecticut General Assembly to promote high-quality, affordable, and accessible healthcare for all residents. Connecticut reorganized existing state resources into one entity, uniting health policymaking and advancing healthcare reform initiatives that will drive down healthcare costs; close deeply entrenched racial, economic, and gender health disparities; and undertake technology-driven modernization efforts throughout the system.

Established in 2013, the Office of Early Childhood (OEC) is the state agency charged with fostering cross-systems integration, coordination, and collaboration at the state and local level in order to enhance the health and well-being of young children, families, and communities. The OEC brings together leadership, expertise, and a wide range of early childhood and family support services that were formerly housed at five different state agencies. The goal of the Office is to build an integrated early childhood system that includes high quality services for family support and home visiting services, early intervention services, early care and education programming, and regulation.

Alongside OHS and OEC, the Family Bridge State Agency Collaborative group managing the Universal Nurse Home Visiting-Community Health Worker Pilot Program—also includes partners from the Departments of Public Health, Social Services and Children and Families. Working collaboratively, the Family Bridge State Agency Collaborative will provide oversight of the evaluation plan, guidance on funding standards, regulations, quality improvement supports, and technical assistance to ensure the success of the Universal Nurse Home Visiting-Community Health Worker Pilot Program.

While this Request for Proposal is formally issued by OHS, the State will oversee the selection of contractors and the development of a universal nurse home visiting-community health worker continuum of services through the Family Bridge State Agency Collaborative. The cross-agency team will be responsible for the oversight, implementation, and coordination necessary to ensure the success of the evaluation plan(s) in support of future sustainability and expansion.

Family Connects International, located in Durham, North Carolina, will partner with the Family Bridge State Agency Collaborative, the contracted providers, and other stakeholders in the Greater Bridgeport Region to provide technical assistance to support with planning and implementation of their UNHV evidence-based model.

### ■ B. SERVICE OVERVIEW

In 2021, Connecticut legislators allocated \$8 million of the state's American Rescue Plan Act (ARPA) funds to support a Universal Nurse Home Visiting-Community Health Worker (UNHV-CHW) Pilot Program through its passage of SB 1202. In the state's first such multiagency collaboration, the Office of Early Childhood, with Commissioners from four additional state agencies, including the Departments of Social Services (DSS), Children and Families (DCF), Public Health (DPH), and the Office of Health Strategy (OHS), unified to support the unique integration of a UNHV program with the CHW program. As part of their



commitment, DPH committed \$3.696M in funding from the Centers for Disease Control and Prevention (CDC) in support of the pilot, and OEC committed \$1M in funding through the Preschool Development Grant (PDG). In 2022, Bridgeport Hospital and its subcontractor Southwestern Area Health Education Center, Inc., were awarded funding by the OEC to implement a Universal Nurse Home Visiting-Community Health Worker (UNHV-CHW) Pilot Program in the Greater Bridgeport Region.

The intent of this innovative program is to address the physical and social determinants of health that have adversely impacted many newborn families. As COVID-19 has worsened health disparities and exacerbated behavioral health concerns across Connecticut, certain communities have been disproportionately impacted. By pursuing an evidence-based Universal Nurse Home Visiting Model and complementing it with Community Health Workers, the Family Bridge State Agency Collaborative intends to achieve the following long-term goals: (1) improve the physical and mental health outcomes of families and infants (2) offer prevention-oriented public health resources, (3) prevent and address health disparities by race, (4) support families who have been impacted by Covid-19, and (5) mitigate stressors impacting families.

### ■ C. SCOPE OF SERVICE DESCRIPTION

UNHV services, implemented through the Family Connects universal nurse home visiting model, will be universally offered to all families residing in the Greater Bridgeport Region, defined as Bridgeport, Easton, Fairfield, Milford, Monroe, Shelton, Stratford, and Trumbull, and who give birth in either of two birthing hospitals in Bridgeport: Bridgeport Hospital and St. Vincent's Medical Center. There is no income eligibility requirement to participate, which distinguishes this home visiting program from other targeted home visiting programs. UNHV services include 1-3 home visits, with the first visit typically taking place at three weeks postpartum. During the first visit, called the Integrated Home Visit (IHV), the Registered Nurse assesses a family's needs using Family Connects' Family Support Matrix, which consists of 12 factors: 1) maternal health, 2) infant health, 3) health care plans, 4) child care plans, 5) parent-child relationship, 6) management of infant crying, 7) household safety and material supports, 8) family and community safety, 9) history with parenting difficulties, 10) parent well-being, 11) substance use in household, and 12) parent emotional support. Based on a family's identified needs, the Registered Nurse may offer the family 1-2 additional home visits and refer the family to voluntary, community resources (e.g., pediatrician, mental health services, substance use counseling, longer-term home visiting program, childcare). The family may receive a follow-up phone call after the home visit(s) are conducted to determine the family's satisfaction with services and connect the family back with the Registered Nurse if the family needs additional referrals.

For more information on Family Connects, please visit the [Family Connects International website](#) as well as the [program description on the Administration for Children & Families' Home Visiting Evidence of Effectiveness \(HomVEE\) resource](#).

Community Health Workers, who have been newly trained or upskilled, will serve families prenatally and postnatally as a complement to the universal nurse home visiting initiative. CHWs would identify families prenatally through existing referral channels (e.g., WIC, hospitals, OB/GYN offices, and schools) to support pregnant individuals before and during birth. CHWs could also serve as a referral destination, after families receive universal nurse home visiting services through Family Connects, for families who present various needs or who are interested in receiving sustained services (e.g., lactation support, mental health screenings, referrals, etc.) up to a year after the child's birth.

Although complementary, these services shall be administered independently. UNHV and CHW services will have separate and unique administrative and supervisory structures, as Bridgeport Hospital will lead the UNHV component, and Southwestern Area Health Education Center (SWAHEC) will lead the CHW component. At the same time, it is critical that the community health worker program and the universal nurse home visiting program are collaborative and work together to achieve positive family and community outcomes and create an effective continuum of care for all prenatal and perinatal families in the Greater Bridgeport region.

The Office of Health Strategy seeks to assess the implementation of universal nurse home visiting and community health worker visits, as well as results including cost savings, maternal and infant health outcomes, and long-term outcomes for families receiving services.

**1. Organizational Expectations, which could include:**

- History of Organization
- Mission/Vision
- Experience performing multiagency/statewide evaluations with multiple vendors and data systems.
- Expertise in creating innovative evaluation plans and staffing to ensure success.

**2. Service Expectations, which could include:**

The Family Bridge State Agency Collaborative is eager for the UNHW-CHW Pilot Program to be evaluated to understand (1) the demographics and characteristics of program participants served, (2) outcomes as observed over time, and (3) how these services meet the broader operational goals for this pilot program, such as population reach and connection to community services. Therefore, the Family Bridge State Agency Collaborative is interested in a study of the program implementation focused on short-term (i.e., within a one-year follow-up timeframe) outcomes and implementation.

The proposed evaluation must describe how to measure the performance of the UNHV-CHW Pilot Program of Greater Bridgeport's three components:

- Universal Nurse Home Visiting, as delivered through the Family Connects model, but separate from Family Connects International's certification process.
- Services led by Community Health Workers
- Services for those who receive both Universal Nurse Home Visiting and services led by Community Health Workers

Examples of evaluation research questions include but are not limited to the following:

- What are the characteristics of families served by the universal nurse home visiting program, community health worker services, and both sets of services? Are there differences between those who are engaged in each of these three program options?
- What are the health outcomes of families served by universal nurse home visiting and community health workers. Examples of health outcomes could include but are not limited to:
  - Parental health, including mental health measures and health access
  - Positive parenting behaviors
  - Infant health, including emergency medical care use
  - Connections to community resources (e.g., childcare)
  - Child maltreatment investigations and substantiations

- Measures related to health equity and cultural sensitivity
- Maternal/infant morbidity and mortality, exacerbated by Covid-19
- What percentage of families offered services receive visits over time? What factors facilitate or hinder the ability of services to have population-level reach?
- What services are families served by universal home visiting services and community health workers services in need of and/or being referred to?
- What are the gaps in health or social services identified by the UNHV/CHW program?
- To what extent are families satisfied with services offered by universal nurse home visiting and community health workers?
- Given the short-term outcomes, what if any expectations for longer-term outcomes could reasonably be modeled or assumed?

### 3. Staffing Expectations

A significant number of administrative resources are required by the evaluator to coordinate, collaborate, and engage partners to create and implement a successful evaluation plan.

The ideal respondent(s) possesses a leadership structure and staffing expertise to accomplish their evaluation plan of the UNHV-CHW Program over several years. They also have the management capacity and experience of launching and sustaining innovative and unique projects. The ideal respondent's vision and mission statement align with the project goals. The ideal respondent(s) has, or is actively working towards, a diverse workforce, with multicultural and multilingual employees that are representative of the Greater Bridgeport community.

### 4. Data and Technology Expectations

Data sharing will be negotiated with the implementing partners and selected vendor. The evaluator must coordinate data systems from Electronic Health Record Systems (EPIC and Salesforce) in compliance with requirements from FCI to support their evaluation plan.

Data Source	Data System	Needed Support
Bridgeport Hospital	EPIC	Integration link with Salesforce
Southwestern AHEC, Inc.	Currently none	Need EPIC access
Family Connects	SalesForce	Integration link with EPIC
St. Vincent Hospital	EPIC	Integration link with Salesforce

### 5. Financial Expectations (Mandatory)

Please provide your organization's financial status reports and audited financial statements.

### 6. Budget Expectations (Mandatory)

Proposers shall use the excel Budget Template in Attachment A.

### 7. Budget Narrative Expectations (Mandatory)

Provide a detailed Budget and Budget Narrative and Justification

## 8. Workplan (Mandatory)

Include a work plan and specify a timeframe in which project deliverables will be developed. Please be specific about the steps that will be taken as well as the timeline. The work plan should include a description of the anticipated products, schedule of tasks, deliverables, major milestones, and task dependencies.

## 9. References (Mandatory)

Provide three business references, including names, addresses, telephone numbers, fax numbers, and email addresses for whom work has been accomplished and briefly describe the type of service provided for them.

The Proposer must grant permission to OHS to contact the references.

## ■ D. PERFORMANCE MEASURES

The following performance metrics highlight key priorities that will be analyzed with providers/vendors collaboratively during the life of the contract. This is not an exhaustive list, but rather an indication of significant performance metrics of interest to The Agency. The Agency looks forward to working with providers/vendors to define additional important performance metrics. The study and analysis will cover the domains of data listed below. As categorized below, some of the data will be collected by the contracted service providers through pre-established data collection tools and protocols. Others will need to be developed by the evaluator in partnership with the Governance Team and service providers:

The evaluator will be expected to collaborate with Bridgeport Hospital, St. Vincent's Medical Center, Southwestern Area Health Education Center, the Family Bridge State Agency Collaborative, and Family Connects International on the refinement of an evaluation plan.

### **Data available to the evaluator:**

- a) **UNHV programmatic data:** The evaluator will have access to the following data collected to support implementation fidelity monitoring:
  - Number of families contacted,
  - Number of visits made,
  - Retention rate,
  - Scheduling rate (e.g., 75%),
  - Population reach (e.g., 60%) out of the designated Greater Bridgeport region,
  - Visits declined versus completed,
  - Type of referrals made (segmented by family needs),
  - Number of referrals connected or taken up,
  - Demographics such as race/ethnicity, education, marital status, insurance, and languages spoken.
  
- b) **Clinician (Registered Nurse) obtained data:** The registered nurse will report back the following data on health outcomes and family support as part of the home visit protocol:

- Family Support Matrix: A validated screening tool that measures 12 factors, as previously described, across four domains will be utilized by the Registered Nurse. These domains are support for healthcare, support for a safe home, support for caring for infant, and support for parent(s).
- Parent Health: These may include metrics, such as mental health symptoms, take-up of postpartum visits, etc.
- Infant Health: These may include metrics, such as emergency care episodes, breastfeeding rates, etc.
- a. Referrals to Community Resources: Information on the number and types of referrals made for various other supports (e.g., transportation, housing, health, childcare) based on the initial assessment completed through the Family Support Matrix.

### **Data collection processes and tools to be developed by the evaluator**

- a) **Community Health Worker Obtained Data:** Evaluation of the community health worker component of this program will utilize process and outcomes data reported by the CHW. This will require the development of a new survey tool or other data collection method, in partnership with Bridgeport Hospital and Southwestern Area Health Education Center. The survey tool would cover health outcomes, social determinants of health, and patient access to care and community, such as:
- Process measures:
    - Number of visits, referrals, contacts, and screens,
    - Number and types of assistance, social support, and advocacy efforts,
    - Length of time in program,
    - Changes in health, knowledge, attitudes, beliefs, practices, and behaviors,
    - Personal changes (e.g., self-esteem, self-efficacy),
    - Achievement of self-identified goals,
    - Health status measures (blood pressure, birthweight, morbidity, mortality)
  - Outcome measures:
    - Level of treatment and care (e.g., lactation support, intimate partner violence support, immunization, chronic disease management, etc.)
    - Health, knowledge, attitudes, beliefs, practices, and behaviors,
    - Self-reported well-being (self-esteem, self-efficacy),
    - Health status measures (e.g., blood pressure, cholesterol, pre and postnatal care),
    - Types of social supports provided, content of interactions, and nature of relationships,
    - Relationship between client and CHW on clients' relationship with significant others and development of clients' and families' social network.
- b) **Health equity data:** The evaluator should develop a plan to identify data that can address the program's ability to improve and advance health equity and long-term outcomes, with analyses by race, ethnicity, and language in performance key areas

such as health outcomes, patient experience, equity at baseline and progress over time. Measures for these analyses may include but are not limited to:

General Health Environment

- Insured/Uninsured
- Obesity prevalence

Reproductive Health

- Obstetrician availability
- Family planning needs
- Infant mortality rate
- Low birthweight prevalence

Behavioral Health Environment

- Mental health provider availability
- Frequent mental distress
- Unmet substance use treatment
- Prevalence of suicidal ideation

Transportation Environment

- Rural/urban
- Car Ownership
- Public transit availability

Social Support Environment

- Single parent households
- English/non-English speaking
- Poverty
- Income inequity
- Food insecurity
- Housing programs
- Racial and economic segregation

**c) Analyses**

The analyses will include, but not be limited to:

- **Descriptive Analysis:** Using the data described above, the evaluation will provide a descriptive analysis that addresses the program goals and research questions.
- **Cost-Benefit Analysis:** Using data described above, alongside publicly available data and needed cost data, the selected contractor is encouraged to conduct a cost-benefit analysis of the program and offer other critical insights.
- **Outcomes:** The evaluator will work to collect data and provide analysis on short, medium and long-term outcomes to the extent feasible, including, but not limited to, emergency department and hospital utilization, maternal and infant health outcomes, and changes in parental behaviors and knowledge. The evaluator would propose an appropriate methodology to collect these long-term outcomes.

The Family Bridge State Agency Collaborative recognizes that this is not a comprehensive list of data and analyses, and the team strongly encourages proposals that offer new and creative ways of evaluating the impact of this pilot program. The team is especially seeking feasible data collection tools, with special attention to the community health worker component of the program and measuring long-term outcomes.

The following performance metrics highlight key priorities that will be analyzed with providers collaboratively during the life of their contract. This is not an exhaustive list, but rather an indication of significant outcomes and output metrics of interest. The Family Bridge State Agency Collaborative will work closely with the successful applicant and community partners (Bridgeport Hospital, SWAHEC, and FCI) as well as the pediatricians and OB/GYNs with access to EPIC to ensure data required to address outcomes/performance measures is accessible. Rather than taking a binary success/fail approach, the Family Bridge State Agency Collaborative will review metrics with the contractor(s) and determine what's working well and where areas for improvement exist.

Examples of key performance metrics may include but are not limited to:

<b>Category</b>	<b>Metrics</b>
Universal Nurse Home Visiting	Scheduling rate Home visiting rate Population reach Connection to services rate Family and community needs assessment
Community Health Worker Services	Number of touchpoints with family Number of screenings and referrals that results in services (Food, Shelter, transportation, insurance, etc.) Length of engagement Patient satisfaction rate Reason for non-engagement

Additionally, the Family Bridge State Agency Collaborative will identify outcomes of interest to measure overall project impact on families and the community, which may include external evaluation partners and cross-agency data sharing agreements. Evaluation methods include but may not be limited to administrative data linkages, surveys and validated questionnaires, and interviews.

Examples of key outcomes may include, but are not limited to:

- Increased connections to community resources
- Reducing child maltreatment investigations and substantiations
- Reducing emergency department use of new mothers (including behavioral health) and newborns
- Improving the quality and safety of the home environment
- Increasing positive parenting behaviors
- Reducing parental anxiety
- Promoting use of high-quality childcare when non-parental care is desired

## ■ E. CONTRACT MANAGEMENT/DATA REPORTING

As part of the State’s commitment to becoming more outcomes-oriented, the Office of Health Strategy, seeks to actively and regularly collaborate with providers/vendors to enhance contract management, improve results, and adjust service delivery and policy based on learning what works. Reliable and relevant data is necessary to ensure compliance, inform trends to be monitored, evaluate results and performance, and drive service improvements. As such, the Office of Health Strategy reserves the right to request/collect other key data and metrics from providers/vendors.

The Family Bridge State Agency Collaborative will work with the awarded contractor(s) to set expectations for what contract management will look like. At minimum, this will include:

- Develop evaluation plan and methodology, including refined research questions, a theory of change, detailed descriptions of data sources and data collection tools as needed, a plan for analysis, a plan for incorporating principles of DEI and community voice in the evaluation, and suggested technical assistance activities for contracted service providers.
- Manage the data collection process, including establishing necessary data sharing agreements between project partners.
- Manage the process to establish any necessary Institutional Review Board (IRB) approvals for primary data collection.
- Analyze data from service providers and potentially other sources to respond to research questions.
- Provide technical assistance to service providers to ensure complete and high-quality data submission to support the evaluation.
- Collaborate with the Family Bridge State Agency Collaborative in regular meetings to describe evaluation activities, discuss challenges in setting up or carrying out evaluation activities, and provide updates on other activities.
- Collaborate with other stakeholders, such as Family Connects International or consultants, as needed.
- Communicate outputs of the evaluations to a variety of stakeholders (e.g., legislators, community members, service provider) in tailored, audience specific, presentations.
- As needed, attend, and testify at meetings, including public administrative or legislative, as requested.
- Complete a final report and analysis.
- Prepare several high-quality interim progress reports by the following quarterly dates:

<b>REPORTING PERIOD</b>	<b>REPORTING DUE DATE</b>
October 1-December 31, 2023	January 30, 2024
January 1-March 30, 2024	April 30, 2024
April 1-June 30, 2024	July 31, 2024
July 1-September 30, 2024	October 31, 2024
October 1-December 31, 2024	January 30, 2025
January 1-March 30, 2025	April 30, 2025
April 1-June 30, 2025	July 31, 2025
July 1-September 30, 2025	October 31, 2025



October 1-December 31, 2025	January 30, 2026
January 1 - March 30, 2026	April 30, 2026
April 1 - June 30, 2026	July 31, 2026
July 1 - September 30, 2026	October 30, 2026
October 1 - December 30, 2026	January 30, 2027

### III. PROPOSAL SUBMISSION OVERVIEW

#### ■ A. SUBMISSION FORMAT INFORMATION

- 1. Required Outline.** All proposals must follow the required outline presented in Section IV – Proposal Outline. Proposals that fail to follow the required outline will be deemed non-responsive and not evaluated.
- 2. Cover Sheet.** The Cover Sheet is Page 1 of the proposal. The proposer must develop a Cover Sheet that includes the information below. *Legal Name* is defined as the name of the provider, vendor, CT State agency, or municipality submitting the proposal. *Contact Person* is defined as the individual who can provide additional information about the proposal or who has immediate responsibility for the proposal. *Authorized Official* is defined as the individual empowered to submit a binding offer on behalf of the proposer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto.
  - RFP Name or Number:
  - Legal Name:
  - FEIN:
  - Street Address:
  - Town/City/State/Zip:
  - Contact Person:
  - Title:
  - Phone Number:
  - E-Mail Address:
  - Authorized Official:
  - Title:
  - Signature:
- 3. Table of Contents.** All proposals must include a Table of Contents that conforms with the required proposal outline.
- 4. Executive Summary.** Proposals must include a high-level summary of the main proposal and cost proposal. The summary must also include the organization's eligibility and qualifications to respond to this RFP.
- 5. Attachments.** Attachments other than the required Appendices or Forms identified in the RFP are not permitted and will not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions will result in disqualification.
- 6. Style Requirements:**

Submitted proposals must conform to the following specifications:

  - Paper Size: 8 ½ x 11 with 1-inch margins
  - Page Limit: 40 pages
  - Print Style: 1 sided
  - Font Size: Calibri 12
  - Font Type: 12-point font
  - Margins: 1-inch margins

- Line Spacing: Double Spaced

- 7. Pagination.** The proposer's name must be displayed in the header of each page. All pages, including the required Appendices and Forms, must be numbered in the footer.
- 8. Packaging and Labeling Requirements.** All proposals must be submitted and addressed to the Official Contact. The Legal Name and Address of the proposer must appear in the upper left corner of the envelope or package. The RFP Name and Number must be clearly displayed on the envelope or package. Any received proposal that does not conform to these packaging or labeling instructions will be opened as general mail. Such a proposal may be accepted by the Agency as a clerical function, but it will not be evaluated. At the discretion of the Agency, such a proposal may be destroyed or retained for pick up by the submitters.
- 9. Declaration of Confidential Information.** Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), the Privacy Act, and all rules, regulations and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL prior to submission. In subsection IV(F) of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).
- 10. Conflict of Interest - Disclosure Statement.** Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Agency will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement. *Example: "[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

## ■ B. EVALUATION OF PROPOSALS

- 1. Evaluation Process.** It is the intent of the Agency to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful proposers, and awarding contracts, the Agency will conform with its written procedures for POS and PSA procurements (pursuant to C.G.S. § 4-217) and the State's Code of Ethics (pursuant to C.G.S. §§

1-84 and 1-85). Final funding allocation decisions will be determined during contract negotiation.

- 2. Evaluation Review Committee.** The Agency will designate a Review Committee to evaluate proposals submitted in response to this RFP. The Review Committee will be composed of individuals, Agency staff or other designees as deemed appropriate. The contents of all submitted proposals, including any confidential information, will be shared with the Review Committee. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. The Review Committee shall evaluate all proposals that meet the Minimum Submission Requirements by score and rank ordered and make recommendations for awards. The Executive Director of the Office of Health Strategy will make the final selection. Attempts by any proposer (or representative of any proposer) to contact or influence any member of the Review Committee may result in disqualification of the proposer.
- 3. Minimum Submission Requirements.** To be eligible for evaluation, proposals must (1) be received on or before the due date and time; (2) meet the Proposal Format requirements; (3) meet the Eligibility and Qualification requirements to respond to the procurement, (4) follow the required Proposal Outline; and (5) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. The Agency will reject any proposal that deviates significantly from the requirements of this RFP.
- 4. Evaluation Criteria (and Weights).** Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Review Committee will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals. The weights are disclosed below.
  - Organizational Profile 10%
  - Evaluation Plan 20%
  - Staffing Plan 10%
  - Data Collection Plan and Technology Proposal 20%
  - Subcontractors, *if permitted*, 5%
  - Work Plan 20%
  - Financial Profile 5%
  - Budget and Budget Narrative 10%

**Note:**

As part of its evaluation of the Staffing Plan, the Review Committee will review the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

- 5. Proposer Selection.** Upon completing its evaluation of proposals, the Review Committee will submit the rankings of all proposals to the Commissioner or Agency Head. The final selection of a successful proposer is at the discretion of the Commissioner or Agency Head. Any proposer selected will be so notified and awarded an opportunity to negotiate a contract with the Agency. Such negotiations may, but will not automatically, result in a contract. Any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at the Agency's discretion, about the outcome of the evaluation and proposer selection process. The Agency reserves the right to decline to award

contracts for activities in which the Commissioner or Agency Head considers there are not adequate respondents.

- 6. Appeal Process.** Proposers may appeal any aspect the Agency’s competitive procurement, including the evaluation and proposer selection process. Any such appeal must be submitted to the Agency head. A proposer may file an appeal at any time after the proposal due date, but not later than thirty (30) days after an agency notifies unsuccessful proposers about the outcome of the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered “day one” of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for the Agency to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.
- 7. Contract Execution.** Any contract developed and executed as a result of this RFP is subject to the Agency’s contracting procedures, which may include approval by the Office of the Attorney General. Fully executed and approved contracts will be posted on the State Contracting Portal and the Agency website.

#### **IV. REQUIRED PROPOSAL SUBMISSION OUTLINE AND REQUIREMENTS**

*This section presents the required outline that must be followed when submitting a proposal in response to this RFP. Proposals must include a Table of Contents that exactly conforms with the required proposal outline (below). Proposals must include all the components listed below, in the order specified, using the prescribed lettering and numbering scheme. Incomplete proposals will not be evaluated.*

##### **A. Cover Sheet**

##### **B. Table of Contents**

##### **C. Executive Summary**

##### **D. Main Proposal**

##### **E. Attachments** (clearly referenced to summary and main proposal where applicable)

##### **F. Declaration of Confidential Information**

##### **G. Conflict of Interest - Disclosure Statement**

##### **H. Statement of Assurances**

*A-H are defined more specifically below. The listing above is just to provide an initial outline for proposers.*

##### **A: Cover Sheet**

The Respondent must use a Cover Sheet capturing the following information:

- RFP Name or Number:
- Legal Name:
- FEIN (not required for currently contracted providers/vendors):
- Street Address:
- Town/City/State/Zip:
- Contact Person:
- Title:
- Phone Number:
- E-Mail Address:
- Authorized Official:
- Title:
- Signature:

*Legal Name* is defined as the name of provider, vendor, CT State agency, or municipality submitting the proposal. *Contact Person* is defined as the individual who can provide additional information about the proposal or who has immediate responsibility for the proposal. *Authorized Official* is defined as the individual empowered to submit a binding offer on behalf of the proposer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto.

**B: Table of Contents**

Respondents must include a Table of Contents that lists sections and subsections with page numbers that follow the organization outline and sequence for this proposal.

**C: Proposer Executive Summary**

The page limitation for this section is 3 pages briefly describing how the Respondent meets the eligibility and qualification criteria outlined in the Proposal Overview and a brief overview of why the Respondent should be selected for the activities highlighted in the scope of services.

**D: Main Proposal Submission Requirements To Submit a Responsive Proposal:**

**\*\*\*Please note the maximum total page length for this section is 40** (all appendices and other attachments should be referred to in section D and then placed in section E. The Agency Review Committee will not read answers longer than 40 pages in this section.

## 4.1 Strengths and Qualifications of Agency &amp; Staff:

*Organization Description and History:* Provide a general overview of your organization, including its history and prior experiences engaging with relevant key stakeholders, and provide a detailed explanation for the questions below:

## 1. Provide the following information about your organization:

- a. *Purpose, Mission, Vision, Values.* . . . . .
- b. *Entity Type / Parent Organization / Years of Operation* . . . . .
- c. *Location of Offices / Facilities* . . . . .
- d. *Functional Organization* . . . . .
- e. *Current Range of Services / Clients* . . . . .
- f. *Qualifications* . . . . .
- g. *Relevant Experience* . . . . .
- h. *Accreditation / Certification / Licensure.* . . . . .
- i. *Governance System* . . . . .
- j. *References* . . . . .

2. Describe your experience relevant to home visiting and community health worker services: Please describe 1-2 recent projects that demonstrate your organization's experience/expertise in evaluating home visiting and/or community health workers, or related topics.
3. Experience in evaluation: Please describe 1-2 recent projects in which your organization (a) oversaw primary data collection (both qualitative and quantitative) and (b) managed data collection processes from various stakeholders.
4. Experience in offering technical assistance: Please describe how your organization offers technical assistance to service providers and community-based organizations in evaluations. Include details of specific tools, strategies, or resources that your organization offers.

5. Commitment to health equity: Describe your organization’s framework for advancing equity and applying cultural humility in your work. What are specific strategies that your organization takes to engage individuals with cultural competence, analyze outcomes by race/ethnicity, and communicate those results?

#### 4.2 Scope of Service:

##### 4.2.1 Evaluation

1. How would you define the core research questions of the UNHV-CHW program evaluation, based on the priorities outlined in this solicitation?
2. Please describe your proposed evaluation plan for completing descriptive analyses for participants who engage in any of the three program options: (1) universal home visiting services only, (2) community health worker services only, (3) universal home visiting services, *and* community health worker services. Describe your plan for completing the long-term outcome analyses, including the specific analytical techniques used and how a focus on health equity will be included.
3. Please describe how the short-term and long-term evaluation plans will incorporate the voices, experiences, and feedback of families served and other stakeholders.

##### 4.2.2 Stakeholder Communications

1. How would you plan to communicate the results of the evaluation and support the Family Bridge State Agency Collaborative in sharing information?
2. Community communications: How would you plan to communicate the results of the evaluation to the community, including current or former families engaged in services? Please provide 1-2 examples of projects in which your organization has performed this type of work.
3. Stakeholder engagement: Describe how staff will work across key stakeholders involved in the UNHV-CHW program, such as the Family Bridge State Agency Collaborative, service providers, Family Connects International, and other consultants to refine the research questions for the evaluation and promote ongoing learning over the lifetime of the pilot program.

#### 4.3 Staffing Plan:

Please provide a detailed staffing plan for this project, including titles, roles, expertise, and percentage of time allocated to this work for each staff member you anticipate contributing to the evaluation team. If you plan to subcontract resources, please include a detailed overview of their role and services provided, oversight structure, and related staffing plan.

- a. *Key Personnel / Managers* . . . . .
- b. *Staffing Levels & Qualifications* . . . . .
- c. *Job Descriptions* . . . . .
- d. *Personnel Organization Chart* . . . . .
- e. *Recruitment, Hiring & Retention Plan* . . . . .
- f. *Staff Training / Education / Development* . . . . .

#### 4.4 Data, Data Collection and Technology:



1. New data collection tools: Please describe 1-2 projects in which you supported the creation of new data, and methods to assist data collection. How will you work with the service providers and the Governance Team to develop new data collection tools?
2. Supporting access to data sources: How will you work with the service providers and the Governance Team to establish access to data sources for the project, including any publicly available data sources or existing administrative data sources, to support long-term outcomes tracking?
3. Data security and control: What systems do you have in place to store data related to this project? How will you maintain sufficient data security and quality control?

4.4 Subcontractors:

Please provide the following information regarding subcontractors:

- a. *Legal Name of Entity, Address, FEIN* . . . . .
- b. *Contact Person, Title, Phone, Fax, E-mail* . . . . .
- c. *Services Currently Provided* . . . . .
- d. *Services To Be Provided Under Subcontract* . . . . .
- e. *Subcontractor Oversight* . . . . .
- f. *Subcontract Cost and Term* . . . . .

4.5 Work Plan:

Please provide a high-level work plan that includes the timeline, proposed activities, and preliminary deliverables for the evaluation.

- a. *Start Date* . . . . .
- b. *Timetable / Schedule* . . . . .
- c. *Tasks, Deliverables* . . . . .
- d. *Methodologies* . . . . .
- e. *Measurable Objectives* . . . . .

4.6 Financial Profile:

Please provide the following financial profile:

- a. *Annual Budget and Revenues* . . . . .
- b. *Financial Standing* . . . . .
- c. *Financial Management Systems* . . . . .
- d. *Revenue Generation / Billing / Third Party Reimbursement* . . . . .
- e. *History of Violations (financial or programming)* . . . . .

4.7 Cost Competitiveness and Budget Narrative:

Utilize the mandatory attached Excel budget document. Please include the budget narrative, line items budget, and subcontractor costs.

**E: Attachments**

Attachments other than the required attachments identified are not permitted and will not be evaluated. See the Proposal Checklist in Appendix D for a list of relevant attachments. Further, the required attachments must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions may result in disqualification.

- a. *Memorandum of Agreement* . . . . .

- b. *Résumés of Key Personnel* . . . . .
- c. *Audited Financial Statements* . . . . .

**F: Declaration of Confidential Information**

If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL prior to submission. The proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).

**G: Conflict of Interest – Disclosure Statement**

Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement. *Example: "[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

**H: Statement of Assurances**

Place after Conflict of Interest-Disclosure Statement. Sign and return in appendices.

## V. MANDATORY PROVISIONS

### ■ A. STANDARD CONTRACT PROVISIONS

*Agencies may include any standard PSA contract provisions that are valuable to communicate in advance to the provider/vendor community. This may include a sample agency PSA, an agency specific PSA contract template, or a reference to the [Comptroller's Office PSA Terms and Conditions](#), which includes generic state contract requirements.*

### ■ B. ASSURANCES

*By submitting a proposal in response to this RFP, a proposer implicitly gives the following assurances:*

- 1. Collusion.** The proposer represents and warrants that the proposer did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the proposer's proposal. The proposer also represents and warrants that the submitted proposal is in all respects fair and is made without collusion or fraud.
- 2. State Officials and Employees.** The proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The Agency may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the proposer, contractor, or its agents or employees.
- 3. Competitors.** The proposer assures that the submitted proposal is not made in connection with any competing organization or competitor submitting a separate proposal in response to this RFP. No attempt has been made, or will be made, by the proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the proposer knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.
- 4. Validity of Proposal.** The proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto. The proposal shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Agency may include the proposal, by reference or otherwise, into any contract with the successful proposer.
- 5. Press Releases.** The proposer agrees to obtain prior written consent and approval of the Agency for press releases that relate in any manner to this RFP or any resultant contract.

## ■ C. TERMS AND CONDITIONS

*By submitting a proposal in response to this RFP, a proposer implicitly agrees to comply with the following terms and conditions:*

- 1. Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.
- 2. Preparation Expenses.** Neither the State nor the Agency shall assume any liability for expenses incurred by a proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
- 3. Exclusion of Taxes.** The Agency is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.
- 4. Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed throughout the entire term of the contract.
- 5. Changes to Proposal.** No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Agency may request and authorize proposers to submit written clarification of their proposals, in a manner or format prescribed by the Agency, and at the proposer's expense.
- 6. Supplemental Information.** Supplemental information will not be considered after the deadline for submission of proposals, unless specifically requested by the Agency. The Agency may ask a proposer to give demonstrations, interviews, oral presentations, or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by the Agency. At its sole discretion, the Agency may limit the number of proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per proposer.
- 7. Presentation of Supporting Evidence.** If requested by the Agency, a proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Agency may make onsite visits to an operational facility or facilities of a proposer to evaluate further the proposer's capability to perform the duties required by this RFP. At its discretion, the Agency may also check or contact any reference provided by the proposer.
- 8. RFP Is Not An Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Agency or confer any rights on any proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the proposer and the Agency and will supersede all prior negotiations, representations, or agreements, alleged, or made, between the parties. The State shall assume no liability for costs incurred by the proposer or for payment of services under the terms of the contract until the successful proposer is notified that the contract has been accepted and approved by the Agency and, if required, by the Attorney General's Office.

## ■ D. RIGHTS RESERVED TO THE STATE

*By submitting a proposal in response to this RFP, a proposer implicitly accepts that the following rights are reserved to the State:*

- 1. Timing Sequence.** The timing and sequence of events associated with this RFP shall ultimately be determined by the Agency.
- 2. Amending or Canceling RFP.** The Agency reserves the right to amend or cancel this RFP on any date and at any time, if the Agency deems it to be necessary, appropriate, or otherwise in the best interests of the State.
- 3. No Acceptable Proposals.** In the event that no acceptable proposals are submitted in response to this RFP, the Agency may reopen the procurement process, if it is determined to be in the best interests of the State.
- 4. Award and Rejection of Proposals.** The Agency reserves the right to award in part, to reject any and all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Agency may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Agency reserves the right to reject the proposal of any proposer who submits a proposal after the submission date and time.
- 5. Sole Property of the State.** All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFP shall be the sole property of the State, unless stated otherwise in this RFP or subsequent contract. The right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.
- 6. Contract Negotiation.** The Agency reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Agency further reserves the right to contract with one or more proposers for such services. After reviewing the scored criteria, the Agency may seek Best and Final Offers (BFO) on cost from proposers. The Agency may set parameters on any BFOs received.
- 7. Clerical Errors in Award.** The Agency reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a proposer and subsequently awarding the contract to another proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the proposer.
- 8. Key Personnel.** When the Agency is the sole funder of a purchased service, the Agency reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Agency also reserves the right to approve replacements for key personnel who have terminated employment. The Agency further reserves the right to require the removal and replacement of any of the proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the Agency.

## ■ E. STATUTORY AND REGULATORY COMPLIANCE

*By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:*

- 1. Freedom of Information, C.G.S. § 1-210(b).** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.
- 2. Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive.** CT statute and regulations impose certain obligations on State agencies (as well as contractors and subcontractors doing business with the State) to ensure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.
- 3. Consulting Agreements Representation, C.G.S. § 4a-81.** Pursuant to C.G.S. §§ 4a-81 the successful contracting party shall certify that it has not entered into any consulting agreements in connection with this Contract, except for the agreements listed below. "Consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information, or (C) any other similar activity related to such contracts. "Consulting agreement" does not include any agreements entered into with a consultant who is registered under the provisions of chapter 10 of the Connecticut General Statutes as of the date such contract is executed in accordance with the provisions of section 4a-81 of the Connecticut General Statutes. Such representation shall be sworn as true to the best knowledge and belief of the person signing the resulting contract and shall be subject to the penalties of false statement.
- 4. Campaign Contribution Restriction, C.G.S. § 9-612.** For all State contracts, defined in section 9-612 of the Connecticut General Statutes as having a value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts having a value of \$100,000 or more, the authorized signatory to the resulting contract must represent that they have received the State Elections Enforcement Commission's notice advising state contractors of state campaign

contribution and solicitation prohibitions, and will inform its principals of the contents of the notice, as set forth in "Notice to Executive Branch State Contractors and Prospective State Contractors of Campaign Contribution and Solicitation Limitations." Such notice is available at

[https://seec.ct.gov/Portal/data/forms/ContrForms/seec\\_form\\_11\\_notice\\_only.pdf](https://seec.ct.gov/Portal/data/forms/ContrForms/seec_form_11_notice_only.pdf)

**5. Gifts, C.G.S. § 4-252.** Pursuant to section 4-252 of the Connecticut General Statutes and Acting Governor Susan Bysiewicz's Executive Order No. 21-2, the Contractor, for itself and on behalf of all of its principals or key personnel who submitted a bid or proposal, represents:

(1) That no gifts were made by (A) the Contractor, (B) any principals and key personnel of the Contractor, who participate substantially in preparing bids, proposals or negotiating State contracts, or (C) any agent of the Contractor or principals and key personnel, who participates substantially in preparing bids, proposals or negotiating State contracts, to (i) any public official or State employee of the State agency or quasi- public agency soliciting bids or proposals for State contracts, who participates substantially in the preparation of bid solicitations or requests for proposals for State contracts or the negotiation or award of State contracts, or (ii) any public official or State employee of any other State agency, who has supervisory or appointing authority over such State agency or quasi-public agency;

(2) That no such principals and key personnel of the Contractor, or agent of the Contractor or of such principals and key personnel, knows of any action by the Contractor to circumvent such prohibition on gifts by providing for any other principals and key personnel, official, employee or agent of the Contractor to provide a gift to any such public official or State employee; and

(3) That the Contractor is submitting bids or proposals without fraud or collusion with any person.

Any bidder or proposer that does not agree to the representations required under this section shall be rejected and the State agency or quasi-public agency shall award the contract to the next highest ranked proposer or the next lowest responsible qualified bidder or seek new bids or proposals.

**6. Iran Energy Investment Certification C.G.S. § 4-252(a).** Pursuant to C.G.S. § 4-252(a), the successful contracting party shall certify the following: (a) that it has not made a direct investment of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010, and has not increased or renewed such investment on or after said date. (b) If the Contractor makes a good faith effort to determine whether it has made an investment described in subsection (a) of this section it shall not be subject to the penalties of false statement pursuant to section 4-252a of the Connecticut General Statutes. A "good faith effort" for purposes of this subsection includes a determination that the Contractor is not on the list of persons who engage in certain investment activities in Iran created by the Department of General Services of the State of California pursuant to Division 2, Chapter 2.7 of the California Public Contract Code. Nothing in this subsection shall be construed to impair the ability of the State agency or quasi-public agency to pursue a breach of contract action for any violation of the provisions of the resulting contract.

- 7. Nondiscrimination Certification, C.G.S. § 4a-60 and 4a-60a.** If a bidder is awarded an opportunity to negotiate a contract, the proposer must provide the State agency with *written representation* in the resulting contract that certifies the bidder complies with the State's nondiscrimination agreements and warranties. This nondiscrimination certification is required for all State contracts – regardless of type, term, cost, or value. Municipalities and CT State agencies are exempt from this requirement. The authorized signatory of the contract shall demonstrate his or her understanding of this obligation by either (A) initialing the nondiscrimination affirmation provision in the body of the resulting contract, or (B) providing an affirmative response in the required online bid or response to a proposal question, if applicable, which asks if the contractor understands its obligations. If a bidder or vendor refuses to agree to this representation, such bidder or vendor shall be rejected and the State agency or quasi-public agency shall award the contract to the next highest ranked vendor or the next lowest responsible qualified bidder or seek new bids or proposals.
- 8. Access to Data for State Auditors.** The Contractor shall provide to OPM access to any data, as defined in C.G.S. § 4e-1, concerning the resulting contract that are in the possession or control of the Contractor upon demand and shall provide the data to OPM in a format prescribed by OPM [or the Client Agency] and the State Auditors of Public Accounts at no additional cost.



## VI. APPENDIX

### A. ABBREVIATIONS / ACRONYMS / DEFINITIONS

BFO	Best and Final Offer
C.G.S.	Connecticut General Statutes
CHRO	Commission on Human Rights and Opportunity (CT)
CT	Connecticut
DAS	Department of Administrative Services (CT)
DCF	Department of Children and Families (CT)
DPH	Department of Public Health (CT)
DSS	Department of Social Services (CT)
FCI	Family Connects International
FOIA	Freedom of Information Act (CT)
IRS	Internal Revenue Service (US)
LOI	Letter of Intent
OAG	Office of the Attorney General
OEC	Office of Early Childhood (CT)
OPM	Office of Policy and Management (CT)
OSC	Office of the State Comptroller (CT)
PSA	Personal Service Agreement
P.A.	Public Act (CT)
RFP	Request For Proposal
SEEC	State Elections Enforcement Commission (CT)
U.S.	United States

- *contractor*: a private provider organization, CT State agency, or municipality that enters into a POS contract with the Agency as a result of this RFP.
- *proposer*: a private provider organization, CT State agency, or municipality that has submitted a proposal to the Agency in response to this RFP. This term may be used interchangeably with respondent throughout the RFP.
- *prospective proposer*: a private provider organization, CT State agency, or municipality that may submit a proposal to the Agency in response to this RFP, but has not yet done so
- *subcontractor*: an individual (other than an employee of the contractor) or business entity hired by a contractor to provide a specific service as part of a PSA with the Agency as a result of this RFP

**B. STATEMENT OF ASSURANCES**

OHS

The undersigned Respondent affirms and declares that:

**1) General**

- a. This proposal is executed and signed with full knowledge and acceptance of the RFP CONDITIONS stated in the RFP.
- b. The Respondent will deliver services to the Agency the cost proposed in the RFP and within the timeframes therein.
- c. The Respondent will seek prior approval from the Agency before making any changes to the location of services.
- d. Neither the Respondent or any official of the organization nor any subcontractor the Respondent or any official of the subcontractor organization has received any notices of debarment or suspension from contracting with the State of CT or the Federal Government.
- e. Neither the Respondent or any official of the organization nor any subcontractor to the Respondent or any official of the subcontractor's organization has received any notices of debarment or suspension from contracting with other states within the United States.

Legal Name of Organization:

\_\_\_\_\_  
Authorized Signatory

\_\_\_\_\_  
Date

## C. PROPOSAL CHECKLIST

To assist respondents in managing proposal planning and document collation processes, this document summarizes key dates and proposal requirements for this RFP. Please note that this document does not supersede what is stated in the RFP. Please refer to the Proposal Submission Overview, Required Proposal Submission Outline, and Mandatory Provisions (Sections II, III, and IV of this RFP) for more comprehensive detail. **This is a tool for proposers to use.** It is the responsibility of each respondent to ensure that all required documents, forms, and attachments are submitted in a timely manner.

### Key Dates

<b>Procurement Timetable</b>		
The Agency reserves the right to modify these dates at its sole discretion.		
Item	Action	Date
1	RFP Released	6/29/23
2	Letter of Intent	7/14/23
3	RFP Conference	7/18/23
4	Deadline for Questions	7/24/23
5	Answers Released	On a rolling basis
6	Proposals Due	8/4/23

### **Registration Link for Pre-bid Conference:**

<https://events.gcc.teams.microsoft.com/event/45ccf8ba-0f8f-459d-beec-2ccf0e277896@118b7cfa-a3dd-48b9-b026-31ff69bb738b>

### **Registration with State Contracting Portal (if not already registered):**

- Register at: <https://portal.ct.gov/DAS/CTSource/Registration>
- Submit required forms:
  - Campaign Contribution Certification (OPM Ethics Form 1): <https://portal.ct.gov/OPM/Fin-PSA/Forms/Ethics-Forms>

### **Proposal Content Checklist**

- Cover Sheet** including required information:
  - RFP Name or Number
  - Legal Name
  - FEIN
  - Street Address
  - Town/City/State/Zip
  - Contact Person
  - Title
  - Phone Number
  - E-Mail Address
  - Authorized Official
  - Title
  - Signature
- Table of Contents**
- Executive Summary:** high-level summary of proposal and cost
- Main proposal body answering all questions with relevant attachments.**

*Proposers should use their discretion to determine whether certain required information is sufficiently captured in the body of their proposal or requires additional attachments for clarification.* Additional attachments may include:

  - Staffing plan with FTE status

- Agency and program organizational chart detailing reporting structure
  - Staff resumes and applicable licensures
  - Work plan describing the organization's efforts, progress, or plans to diversify the workforce
  - Memoranda of Agreement/Understanding with service partners
  - Written financial policies and procedures
- IRS Determination Letter** (for nonprofit proposers)
- Two years of most recent annual audited financial statements; OR any financial statements prepared by a Certified Public Accountant** for proposers whose organizations have been incorporated for less than two years. *Agencies may swap in use of EARS system if applicable.*
- Proposed budget**, including budget narrative and cost schedules for planned subcontractors if applicable. \* All budgets must be submitted using the OHS RFP Budget Template which has been included as uploaded as an addendum to the RFP.
- Conflict of Interest Disclosure Statement**
- Statement of Assurances**

#### **Formatting Checklist**

- Is the proposal formatted to fit 8 ½ x 11 (letter-sized) paper?
- Is the main body of the proposal within the page limit?
- Is the proposal in 12-point, Calibri Font?
- Does the proposal format follow normal (1 inch) margins and 1 ½ line spacing?
- Does the proposer's name appear in the header of each page?
- Does the proposal include page numbers in the footer?
- Are confidential labels applied to sensitive information (if applicable)?