



2018

Community Living Connections

Request for Qualification

TABLE OF CONTENTS

GUIDELINES		PAGE NUMBER
I.	Introduction	3
II.	Timeline	4
III.	HSD’s Results-Based Accountability Framework & Theory of Change	4-6
IV.	Investment Area Background & Program Requirements	6
	A. Overview of Investment Area	7
	B. Service/Program Model	7-8
	C. Criteria for Eligible Participants	8-9
	D. Priority Population and Focus Population	9
	E. Service Descriptions	9-13
	F. Expected Service Coverage	13
	G. Description of Key Staff and Staffing Level	13-15
	H. Community Living Connections specific eligibility, data, and contracting requirements	15

APPLICATION (Instructions and Materials)		PAGE NUMBER
I.	Submission Instructions & Deadline	16
II.	Format Instructions	17
III.	Proposal Narrative & Rating Criteria	17
	Section 1: Agency Qualification	17
	A. Capacity and Experience	17
	B. Partnerships and Collaboration	18
	C. Cultural Relevancy and Responsiveness	18
	D. Finance Management and Leveraging Resources	19
	Section 2: Service Qualification	19
	Service Descriptions	19-23
IV.	Completed Application Requirements	23-24
V.	List of Attachments & Related Materials	24
	Attachment 1: Application Checklist	25-26
	Attachment 2: Application Cover Sheet	27-28
	Attachment 3: Application Cover Sheet Sample	29-30
	Attachment 4: Community Living Connections Program Model	31
	Attachment 5: Care Coordination Best Practices	32-33
	Attachment 6: Cities by Region of King County	34
	Attachment 7: Data Security Requirements	35-37
	Attachment 8: Summary of Proposed Services	38
	Attachment 9: Summary of Proposed Services Sample	39



2018
Community Living Connections
Request for Qualification

GUIDELINES

I. Introduction

The Aging and Disability Services (ADS) Division of the City of Seattle Human Services Department (HSD) is seeking applications from agencies interested in providing information, support, and supportive services for older adults, adults with disabilities, and their caregivers. This Request for Qualification (RFQ) is non-competitive and open to any legally constituted entities that meet the standard [HSD Agency Minimum Eligibility Requirements](#) and any additional requirements outlined in Section IV of the Guidelines.

The purpose of this RFQ is to identify and develop a roster of qualified providers to deliver an array of services to older adults, adults with disabilities, and their caregivers living in King County. Services include: information, assistance, and outreach; individual consultation and support; care coordination; regional coordination; and supportive services for caregivers such as counseling, support groups, and training.

No funds will be awarded as a result of this RFQ. Following the RFQ, qualified agencies will be invited to participate in a collaborative process to form a network of service providers. This process will begin in early 2019 and will culminate in contracts estimated to begin January 1, 2020. Approximately \$3,719,266.00 may be contracted as a result of this process

2020 Tentative Funding:

Program	Fund Sources	RFP Amount
Community Living Connections	HSD General Fund, SCSA, Title III-B, Title XIX	\$2,119,266.00
Services for Caregivers	Title III-E, State Family Caregiver	\$1,600,000.00
Total		\$3,719,266.00

The City of Seattle Human Services Department seeks to qualify a diverse group of providers to help ensure the result of HSD’s Community Living Connections RFQ promotes healthy aging and supports the department’s racial equity goals. HSD will not cap the number of qualified applicants as qualification does not guarantee funding. Qualified agencies may have an opportunity to access other funds as they become available.

All materials and updates to the Request for Qualification are available on [HSD's Funding Opportunities webpage](#). HSD will not provide individual notice of changes, and applicants are responsible for regularly checking the web page for any updates, clarifications, or amendments.

HSD will have no responsibility or obligation to pay any costs incurred by any applicant in preparing a response to this funding opportunity or in complying with any subsequent request by HSD for information or participation throughout the evaluation and selection process.

II. Timeline

Funding Opportunity Released	Monday, October 1, 2018
Information Session 1	Tuesday, October 9, 2018 1:30-3:30 p.m. Mercer Island Library 4400 88th Ave SE Mercer Island, WA 98040
Information Session 2	Wednesday, October 10, 2018 9:30-11:30 a.m. King County Elections – Alvine Room 919 SW Grady Way Renton, WA 98057
Help Session	Tuesday, October 23, 2018 *1:30-4:30 p.m. Delridge Library 5423 Delridge Way SW Seattle, WA 98106 *by appointment only
Last Day to Submit Questions	Monday, October 29, 2018 by 12:00 p.m. (noon)
Application Deadline	Thursday, November 8, 2018 by 12:00 p.m. (noon)
Planned Roster Notification	Wednesday, December 19, 2018

Please contact Angela Miyamoto, Community Living Connections RFQ Coordinator, via email with any questions about this RFQ, to request accommodations for the information sessions, or to make an appointment for the help session: Angela.Miyamoto@Seattle.Gov

HSD reserves the right to change any dates and overall timelines for the Community Living Connections RFQ.

III. HSD's Results-Based Accountability Framework & Theory of Change

HSD has developed a results-driven investment strategy modeled after Results Based Accountability (RBA)¹. RBA helps HSD move from ideas to action and ensures the department’s work is making a real difference in the lives of vulnerable people. This framework also helps ensure HSD is a highly functional, accountable organization leading the way towards addressing community disparities.

The RBA Framework helps HSD to:

- **DEFINE** results for the department’s investments
- **ALIGN** the department’s financial resources to the results
- **EVALUATE** result progress to ensure return on investment

HSD has developed a **Theory of Change** for funding processes to ensure data informs our investments – particularly around addressing disparities – and shows the logical link between the desired results, indicators of success, racial equity goals based on disparity data, strategies for achieving the desired results, and performance measures.

In 2018, HSD, as directed by [Ordinance 125474](#), will begin identifying gender disparity data and including gender equity goals in future funding processes. See below for the Theory of Change that informs this funding process.

All investments resulting from this funding opportunity will demonstrate alignment with HSD’s Theory of Change towards achieving the desired result of promoting healthy aging.

	Theory of Change Term	Definition & Action
Population Accountability	Population HSD Population Priority Population	<ul style="list-style-type: none"> • All 60+ older adults in King County; services are available for adults 18+ • Rural, low income, isolated, severe disabilities, dementia and related disorders, risk for institutional placement, providing care to individuals with severe disabilities, limited English proficient, limited sensory abilities.
	Desired Result	<ul style="list-style-type: none"> • All older adults experience stable health and are able to age in place
	Indicator(s) HSD Indicator(s)--REQUIRED Additional Indicator(s)--OPTIONAL	<ul style="list-style-type: none"> • % of older adults who report getting the social and emotional support needed • % of older adults reporting good or excellent health
	Racial Equity Population Accountability	Racial Disparity Indicator Data

¹ Friedman, M. (2005) Trying Hard Is Not Good Enough: How to Produce Measurable Improvements for Customers and Communities: FPSI Publishing

² Washington State Behavioral Risk Factor Surveillance System (BRFSS), 2005-2010, 2012

	Theory of Change Term	Definition & Action
		<ul style="list-style-type: none"> Asian: 62% *Percentage of older adults (60+) in Seattle reporting excellent or good health: ³ <ul style="list-style-type: none"> White: 83% Asian: 83% Black/African American: 63% Hispanic/Latino: 61% *This data is similar to King County data.
	Focus Population	<ul style="list-style-type: none"> Black/African American have high disparities in both indicators
	Population-Level Racial Equity Goal(s)	<ul style="list-style-type: none"> Percentage of Black/African American older adults who report getting social and emotional support needed. Percentage of Black/African American older adults reporting good or excellent health.
Program Accountability	Strategies	<ul style="list-style-type: none"> Access to services System enhancement Preventative and supportive services
	Activities	<ul style="list-style-type: none"> Qualified applicants will perform one or more of the following services: Information, Assistance, and Outreach; Options Counseling; Care Coordination; Regional Coordination; Information, Assistance, and Outreach for Caregivers; TCARE® Caregiver Assessment; Emergency Respite Coordination; Respite Coordination; Caregiver Counseling; Caregiver Support Groups and; Caregiver Training/Consultation.
	Performance Measure	<ul style="list-style-type: none"> Performance measures will be identified in the next phase of this funding process.
	Racial Equity Performance Measures	<ul style="list-style-type: none"> Racial equity performance measures will be identified in the next phase of this funding process.

IV. Investment Area Background & Program Requirements

The Aging and Disability Services (ADS) Division of HSD promotes quality of life, independence, and choice for older people, adults with disabilities, and their caregivers throughout Seattle and King County. ADS operates as the federal and state designated Area Agency on Aging for Seattle-King County through a partnership with the City of Seattle and King County.

³ Washington State Behavioral Risk Factor Surveillance System (BRFSS), 2005-2014

This RFQ will identify a roster of qualified agencies to provide services in King County. No funds will be allocated as a result of this RFQ; however, qualified agencies will be invited to participate in a collaborative process, beginning in 2019, to form a network of agencies to serve older adults, adults with disabilities, and their caregivers in King County. Funds will be distributed through this process, however, qualification and participation in the process is not a guarantee of funding.

A. Overview of Investment Area

Community Living Connections, Washington State's term for Aging and Disability Resource Centers, is a federal initiative to streamline access to programs and services for older adults, adults with disabilities, and their caregivers. By connecting these populations to resources, Community Living Connections enables people to live in a community-based setting of their choice and age in their homes and communities.

Unpaid caregivers, which include family, friends, and neighbors, play a significant role in helping people stay in their homes and communities, avoiding placement in nursing homes and other costly institutional settings. According to recent data estimates, 40 million caregivers in the United States provide \$470 billion in unpaid services.⁴ Caregivers help care for their loved ones by assisting with chores, cooking, shopping, and medical appointments. Caregivers may also be responsible for more physical assistance such as bathing, transferring, and dressing care recipients.

Caregivers' out-of-pocket expenses vary by race and ethnicity. Hispanic/Latino caregivers spend, on average, 44% of their income on expenses related to caregiving. For African American caregivers, this figure is 34%. White caregivers spend less of their income on out-of-pocket expenses than their Hispanic/Latino and African American counterparts; approximately 14% of their income is spent on caregiving related expenses.⁵

Although older adults, adults with disabilities, and their caregivers need information and support, they may experience barriers to accessing resources. Segments of these populations, including limited English proficient and persons with sensory disabilities, may have communication challenges that make it difficult for them to access information and get the services they need. King County adults who speak another language at home and speak English less than very well include those who speak Spanish, Chinese, Vietnamese, Korean, Russian, Tagalog, Japanese, Ukrainian, Amharic, and Somali.⁶ People with sensory disabilities also have communication challenges such as those experiencing hearing loss, deafness, blindness, and low vision. They may experience barriers including lack of awareness about needed accommodations and information presented in inaccessible formats.

B. Service/Program Model

Community Living Connections links older people, adults with disabilities, and their caregivers to services and provides a continuum of supports that enable people to live in their homes and communities. People with aging or disability issues contact Community Living Connections Central Access⁷; their advocates respond to phone and online requests for information and provide referrals to available resources. If people need extra help accessing resources, or their situation is more complex than a simple referral, Community Living Connections Central Access advocates will directly connect them to one of the network's contracted providers. These providers are able to provide hands-on assistance to help people get the services they need. This direct assistance includes: Options Counseling, which helps people make informed decisions

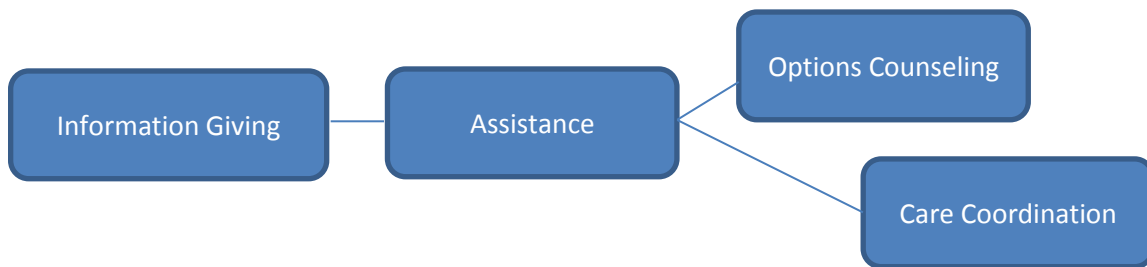
⁴ AARP. Valuing the Invaluable: 2015 Update. July 2015

⁵ AARP. Family Caregiving and Out-of-Pocket Costs: 2016 Report. November 2016. <https://doi.org/10.26419/res.00138.001>

⁶ U.S. Census Bureau, American Community Survey, Public Use Microdata Sample, 2012-2016.

⁷ Crisis Connections operates Community Living Connections Central Access

about long-term care supports; and Care Coordination, which is a short-term case management service for individuals needing extensive assistance with multiple issues.



Community Living Connections employs a “no wrong door” approach to connect people with programs and services. Participants can get the information and help they need by contacting any provider in the Community Living Connections network. If a provider does not know how to help a participant – or have the capacity to help – they will contact another provider in the network that may be able to help that participant.

Regional Coordinators play a key role in supporting this network. They are responsible for creating networking opportunities for local aging and disability service providers and other organizations that interact with older adults and people with disabilities. These networking meetings include representatives from non-contracted service providers, health care, libraries, emergency medical services, housing, and community centers. Through these meetings, agencies learn more about community resources and local organizations that serve older adults, adults with disabilities, and their caregivers. This network of agencies and organizations, both contracted and non-contracted, increases system capacity and enables people to access information and services quickly, easily, and from organizations they trust. Network agencies may not have all the answers; however, they will know who to call to help clients get the information they need.

The Community Living Connections program model includes specialized services that focus on the needs of unpaid caregivers. As every caregiver’s situation is unique, an in-depth assessment helps determine which services would be most helpful. In Washington State, Tailored Care Assessment and Referral (TCARE®) is the tool network providers use to assess the caregiver’s situation and recommend activities and specialized services to meet their needs. These specialized caregiver services include counseling, support groups, training, and consultation. A TCARE® assessment is required to access these services and the assessment will indicate which of the services will best meet the caregiver’s needs.

See Attachment 4 for the Community Living Connections Program Model.

C. Criteria for Eligible Participants

Community Living Connections:

Eligible participants are adults age 60+ and adults with disabilities (18+) living in King County. Funding is designated for adults age 60+. Agencies are required to identify other funding to support the program and to serve adults under age 60 with disabilities.

Specialized Services for Caregivers:

Eligible participants are unpaid caregivers living in King County - spouse, partner, relative, or friend (age 18 and older) who are actively providing care to an adult (age 18 and older) with a functional disability. The caregiver cannot receive financial compensation for providing care and the care receiver (person receiving

care) must not be receiving Medicaid-funded long-term care services (e.g., COPES, MPC, DDD waiver), or live in a nursing facility or adult family home.

D. Priority Population and Focus Population

Priority populations are identified as a group (or groups) comprising a specific demographic (seniors, youth, families, etc.) or having a specific issue in common (homelessness, mental health, violence involved, etc.)

Priority populations for this investment opportunity include:

- Older adults age 60+⁸:
 - Residing in rural areas
 - Greatest economic need (income at or below federal poverty guidelines)
 - Greatest social need:
 - Cultural, social, or geographic isolation, including isolation caused by racial, ethnic, and/or sexual orientation status
 - Severe disabilities
 - Dementia and related disorders
 - Risk for institutional placement
 - Providing care to individuals with severe disabilities
 - Limited English Proficiency (LEP) including: Spanish, Chinese, Vietnamese, Korean, Russian, Tagalog, Japanese, Ukrainian, Amharic, and Somali speakers
- People age 18+ with limited sensory abilities

Focus populations are identified as specific racial or ethnic groups within the priority population and for which the data shows the highest disparities in the investment area. Priority populations and focus populations for this funding are based on HSD's results-based accountability framework and ensures the department's investments are dedicated to addressing disparities in the population.

Given the data provided, **focus** population(s) for this investment opportunity are:

- Black/African American

Applicants should demonstrate a plan to address the disparities associated with the racial and ethnic **focus** populations of older adults, adults with disabilities, and their caregivers. Proposals that clearly describe a plan and a justification to address significant needs for non-focus populations will also be considered.

E. Service Descriptions

Community Living Connections provides culturally and linguistically appropriate, person-centered services throughout King County to all eligible participants. The program includes eleven service components, six of which are specifically for unpaid caregivers.

1. Information, Assistance, and Outreach

This service provides information to older adults and people with disabilities, or their representative, which enables them to access services. It also includes helping participants obtain a needed service or complete a necessary task, if they are unable to do so themselves.

Agencies will perform, at minimum, the following activities:

⁸ Aging and Long Term Service Administration. Policies and Procedures Manual, Ch. 1 pg. 15.

- Screen participants to determine which services they may be eligible for, directly refer them to the appropriate services, and then follow-up with the participant and/or service providers to see if the services were obtained.
- Identify participants in a caregiving situation and refer them to an agency providing caregiver services for further support.
- Provide assistance to participants by contacting agencies on behalf of the participant, translating documents, filling out forms, writing letters, making phone calls to set up or confirm appointments, and having staff accompany them to service providers.
- Update advocate information on the Community Living Connections website.
<https://www.communitylivingconnections.org/find-advocate/>

Services may be provided over the phone, in person, or via electronic communication. In order to leverage resources, agencies performing information and assistance may be required to perform Medicaid administrative claiming. See the following link for more information:
<http://www.agingkingcounty.org/wp-content/uploads/sites/185/2016/09/IAProgramStandardsAdminClaiming.pdf>

All agencies applying to perform information and assistance are expected to conduct outreach to identify potential participants (or their caregivers) and encourage use of services and benefits. Outreach examples may include, but are not limited to, distributing flyers and newsletters, conducting presentations and informational sessions, and participating in health fairs and other community events. Outreach activities should target: the faith-based community; under-represented, historically oppressed, or vulnerable populations (see priority population criteria in Section IV); health care providers; other social service agencies; and other groups or professional organizations.

2. Options Counseling

Options Counseling helps participants make informed choices about long-term supports and live independently in the community. This service includes conducting a personal interview, identifying available options, facilitating decision support, developing an action plan, and ongoing follow-up. The person-centered interview must be conducted in person. Follow-up and other aspects of this service may be provided over the phone, in person, or via electronic communication.

For more information on Options Counseling:

<https://www.dshs.wa.gov/sites/default/files/AL TSA/hcs/documents/AAA/PCOC%20Standards.docx>

Options Counseling staff and their supervisors are required to take Person-Centered Thinking training. Staff do not have to be trained prior to application submission, however, staff will be required to take the training within three (3) months of contract execution. Training is available in a combination of in-person and on-line formats. ADS will coordinate with the state to ensure the training is available.

3. Care Coordination

Care coordination is short-term case management for older adults and adults with disabilities who need assistance and do not have family or other resources to help them access services. Care coordination includes conducting a comprehensive assessment, creating a service plan, and following up with participants to monitor and adjust the service plan as needed. The comprehensive assessment must be conducted in person. Follow-up services may be provided over the phone, in person, or via electronic communication. See Attachment 5 for more information on best practices.

Care Coordinators will have access to flexible funds to purchase goods or services to help the participant remain in their own home. These funds are available to participants who demonstrate need and have no other resources.

4. Regional Coordination

Regional Coordinators develop and coordinate partnerships that enable the network to best serve program participants and the broader community in their respective regions: North King County and Seattle; East King County; and South King County. See Attachment 6 for a list of cities located in each geographic region. Agencies may apply to be the regional coordinator in more than one region.

Regional coordination agencies must provide, at minimum, the following activities:

- Convene at least two networking meetings per year for assigned region(s).
- Post calendar events on the Community Living Connections website.
- Promote Community Living Connections and the Family Caregiver Support Program (FCSP) at outreach events on behalf of the network.
- Present information about working with older adults, adults with disabilities, and their caregivers; and community resources that support them, as requested.
- Coordinate with ADS to make all networking events accessible to diverse participants (access, interpretation, process for organizing and communicating, etc.)

In addition, regional coordination agencies must: 1) be qualified to deliver at least one other contracted network service; and 2) have an office that is accessible to the public located in the geographic region for which they provide coordination. Services may be provided at the agency's office or at naturally occurring places where older adults and people with disabilities congregate such as community centers, libraries, senior centers, and housing developments.

The following activities are specialized supports and services for caregivers:

5. Information, Assistance, and Outreach for Caregivers

This service assists caregivers in locating, obtaining, and navigating services and resources available within their communities. Staff may follow-up with caregivers to ensure individuals receive the services or may advocate on a caregiver's behalf if the caregiver is unable to obtain the service or perform the necessary task on their own. The service may be provided over the phone, in-person, or via electronic communication.

All agencies applying to perform Information and Assistance for caregivers are expected to conduct outreach to identify potential participants and encourage use of services and benefits. Outreach activities raise general awareness of caregiving issues and/or educate individuals to self-identify as being a caregiver. Examples include group presentations, dissemination of publications, and publicity/media campaigns. Outreach activities should target: the faith-based community; under-represented, historically oppressed, or vulnerable populations (see priority population criteria in Section IV); health care providers; other social service agencies; and other groups or professional organizations.

6. TCARE® - Caregiver Assessment

Tailored Care Assessment and Referral (TCARE®) is an electronic assessment and referral tool used to tailor the support and services for unpaid caregivers. The assessment measures caregiver burden and stress and recommends supports and services to help the caregiver. The assessment process includes several distinct levels or "steps":

- o Intake: collecting basic demographic information on the caregiver and care receiver.

- Screening: screening the caregiver to identify stress and burden, and determine the need for a full assessment.
- Assessment: completing a comprehensive assessment to identify goals, strategies, and services personalized to the caregiver's needs.
- Care Plan: Developing a care plan based on assessment results. Obtaining agreement from the caregiver to be referred to the most appropriate service(s) or community resources to support them in their role.

TCARE® assessors must be certified by Tailored CARE® Enterprises, LLC. Staff do not have to be certified prior to application submission, however, staff will be required to begin training within three (3) months of contract execution. ADS will coordinate with the state to facilitate the training and certification process.

For more information about TCARE®: <https://www.dshs.wa.gov/altsa/stakeholders/caregiver-assessment-and-planning-tcare>

7. Emergency Respite Coordination

Caregivers may experience a crisis situation and need immediate help. Emergency respite services will address caregivers' immediate needs and encourage caregivers to continue with other caregiver services. Emergency Respite Coordinators will work with respite providers to authorize and arrange for respite care for caregivers in a crisis situation. Coordinators will manage the emergency respite budget and administer respite funds by authorizing services, verifying services are delivered, paying vendors, and reconciling the respite budget. Outreach to hospitals, medical clinics, rehab facilities, etc. will be performed. Caregiver demographics will be entered into TCARE® and those needing ongoing services will be screened and referred to an agency in the caregiver network for ongoing support.

8. Respite Coordination

The respite program provides support for full-time caregivers who provide a minimum of 40 hours per week of unpaid care for an adult at risk for placement in a long-term care facility. The goal of the respite program is to provide a break for the caregiver so they are able to care for their loved one. Respite is provided primarily in adult day centers and in the participant's home. A participation fee may be required as determined by the care receiver's income. See RCW 74.41 and WAC 388-106-1200 through 388-106-1230 for more information about the respite program.

Respite coordination may include, but is not limited to, the following activities:

- Review and authorize respite services as determined by the TCARE® assessment.
- Review respite budget and coordinate with ADS.
- Communicate with caregiver agency, respite agency, and caregiver or care receiver.
- Update TCARE® assessment and care plan as needed.

9. Caregiver Counseling

Caregiver counseling provides emotional support, mental health intervention, and improved coping skills for the caregiver. Counseling services are short term (up to 6 sessions) and solution-focused and may include, but are not limited to: identifying the caregiver's personal strengths and abilities, managing short- and long-term care decisions and planning, and developing strategies to better manage and cope with their caregiver role. The service is provided in person.

10. Caregiver Support Groups

Support groups rely on group process to assist caregivers in developing new competencies and coping strategies related to their caregiver experience. Support groups provide a setting for emotional support, information sharing, and/or skill development. They provide a vital opportunity to connect to the community and other caregivers. The service is provided in person or using other means that meet the needs of the caregiver.

11. Caregiver Training/Consultation

Training/consultation service is an individual or group session or series to help caregivers with coping and/or to build caregiving skills. Examples may include “Powerful Tools for Caregiving,” “A Matter of Balance,” and “Living Well with Chronic Conditions.” Caregiver training/consultation also includes education on specific disease processes, workshops, mini-series, etc. on topics that support caregivers through their caregiving experience. The service is provided in person or using other means that meet the needs of the caregiver.

F. Expected Service Coverage

Services should be available throughout King County. Agencies may indicate which region(s) of King County (Seattle, North King County, South King County, East King County) they would like to serve.

Care Coordination

This RFQ is qualifying applicants to serve the general population in East King County and focus populations throughout King County.

Respite Coordination

This RFQ is qualifying applicants to coordinate respite services for the general population in East King County and focus populations throughout King County.

G. Description of Key Staff and Staffing Level

Information and Assistance – Staff

- Bachelor’s degree in a related field and two years of paid or volunteer experience providing direct human services; or
- Two years of relevant college level courses and four years of paid or volunteer experience providing direct human services.
- Experience providing services to older people and people with disabilities is preferred.
- AIRS (Alliance of Information and Referral Systems) Certified Information and Referral Specialist in Aging (CIRS-A) credentials are encouraged.

* If an Information and Assistance advocate/specialist does not meet these minimum requirements, a waiver request in the form of a letter needs to be submitted to ALTSA (Aging and Long-Term Support Administration) via ADS.

Information and Assistance – Supervisor

- Bachelor’s degree in a relevant field (social science) and two years of paid experience providing direct human services or two years of supervisory experience.
- Experience must be paid. Experience providing services to older people is preferred.
- AIRS Certified Information and Referral Specialist in Aging (CIRS-A) credentials are encouraged.

Options Counseling – Staff

- Bachelor’s degree in human services or work experience commensurate with degree.

* If an Options Counseling advocate does not meet these minimum requirements, a waiver request in the form of a letter needs to be submitted to AL TSA via ADS.

Options Counseling – Supervisor

- Bachelor’s degree and 3-5 years of work experience (or commensurate experience). Master’s degree preferred.
- Experience or educational training related to oversight of staff development, program management, program planning, policy/procedural maintenance and program evaluation would be optimal.

Care Coordination

- Master’s degree in behavioral or health sciences and one year of paid on-the-job social service experience; or
- Bachelor’s degree in behavioral or health sciences and two years of paid on-the-job social service experience; or
- Bachelor’s degree and four years of paid on-the-job social service experience.

* If a Care Coordinator does not meet these minimum requirements, a waiver request in the form of a letter needs to be submitted to ADS

TCARE® - Caregiver Assessment

- Master’s degree in behavioral or health sciences and one year of paid on-the-job social service experience; or
- Bachelor’s degree in behavioral or health sciences and two years of paid on-the-job social service experience; or
- Bachelor’s degree and four years of paid on-the-job social service experience.

* If a Caregiver assessor does not meet these minimum requirements, a waiver in the form of a letter needs to be submitted to AL TSA FCSP via ADS

Caregiver Counseling

The service will be provided by a professional holding one of the following Washington State licensures: psychiatrists, psychologists, psychiatric advanced registered nurse practitioners (ARNPs), psychiatric mental health nurse practitioners-board certified (PMHNP-BCs), mental health counselors, independent clinical social workers, advanced social workers, marriage and family therapists.

Participant Service General Guidelines

1. Information and Assistance

- One (1) full time equivalent staff position (FTE) will serve a range of 300-800 participants per year (unduplicated), depending on the population served. Programs serving focus populations may serve participants at the lower end and programs serving mainstream participants may serve participants at the higher end.

2. Options Counseling

- Caseload guidelines are not established for this service.

3. Care Coordination

- One (1) full time equivalent staff position (FTE) has a caseload between 40-50 participants, serving 60-100 participants annually.

4. TCARE® - Caregiver Assessment

- One (1) full time equivalent staff position (FTE) serves at least 55 caregivers, conducting 36 TCARE® assessments and care plans per year.

H. Community Living Connections specific eligibility, data, and contracting requirements

In addition to the standard HSD requirements found on the [HSD Funding Opportunities Webpage](#), including agency minimum eligibility requirements, client data and program reporting requirements, and contracting requirements, applicant agencies must meet the following criteria:

- Agencies must adhere to the state-mandated Data Security Requirements, see Attachment 7
- Agencies may be required to use the state GetCare client management and reporting system.



Seattle Human Services

2018 Community Living Connections Request for Qualification

APPLICATION

Instructions and Materials

This Application Instructions and Materials packet contains information and materials for respondents applying for the 2018 Community Living Connections RFQ. The RFQ Guidelines is a separate document that provides background on HSD's guiding principles and results-based accountability framework, and an overview of the RFQ program requirements. [HSD's Funding Opportunities webpage](#) provides additional information on: agency eligibility; data collection and reporting; contracting; appeals; expectations for culturally responsive services; and the process for selecting successful applications.

I. Submission Instructions & Deadline

Completed application packets are due by 12:00 p.m. (noon) on Thursday, November 8, 2018.

Application packets must be received in person, by mail, or electronic submission. No faxed or e-mailed proposals will be accepted. Proposals must be received and date/time stamped by the 12:00 p.m. (noon) deadline on Thursday, November 8, 2018. *Late or incomplete proposals or proposals that do not meet the minimum eligibility requirements outlined in this funding opportunity will not be accepted or reviewed for funding consideration.*

Applicants must make arrangements to ensure applications are received by HSD by the deadline, regardless of the submission method selected. When using HSD's Online Submission System, it is advisable to upload application documents several hours prior to the deadline in case you encounter an issue with your internet connectivity which impacts your ability to upload documents. HSD is not responsible for ensuring applications are received by the deadline.

- Electronic Submittal: Application packets may be submitted electronically via HSD's Online Submission System at <http://web6.seattle.gov/hsd/rfi/index.aspx>.
- Hand Delivery or US Mail: The application packet can be hand-delivered or mailed to:

Seattle Human Services Department
Request for Qualification Response – Community Living Connections
Attn: Angela Miyamoto

Delivery Address
700 5th Ave., 58th Floor
Seattle, WA 98104-5017

Mailing Address
P.O. Box 34215
Seattle, WA 98124-4215

II. Format Instructions

- A. Applications will be rated only on the information requested and outlined in this funding opportunity, including any clarifying information requested by HSD. Do not include a cover letter, brochures, or letters of support. Applications that do not follow the required format may be deemed ineligible and may **not** be rated.
- B. The application should be typed or word processed on double-sided, letter-sized (8 ½ x 11-inch) sheets. Please use one-inch margins, single spacing, and minimum size 11-point font.
- C. There are 2 sections for the application – Agency Qualification and Service Qualification. The first section, Agency Qualification, may not exceed a total of 8 pages. The second section, Service Qualification, may not exceed a total of one (1) page per service.
- D. Organize your application according to the section headings that follow in Section III. For the narrative questions, please include section titles, and question numbers. You do not need to rewrite the questions for specific elements of each question.

III. Proposal Narrative & Rating Criteria

Section 1: Agency Qualification

Write a narrative response to sections A-D. Answer each section completely according to the questions. Do not exceed a total of 8 pages for section A-D combined. Sections A-D is worth a total of 100 points. To be qualified, an agency must be rated a minimum average of 75 points by the rating committee.

Section 2: Service Qualification

The second section is comprised of narrative questions for service(s) you intend to perform. Each service is worth up to 10 points and responses may not exceed one (1) page per service. Include a start-up timeline for any new service you intend to provide. The timeline will not count toward your 1-page maximum per service. To be qualified, you must be rated a minimum average of 7.5 points by the rating committee. Each service will be evaluated separately.

SECTION 1: AGENCY QUALIFICATION

A. CAPACITY AND EXPERIENCE (35 points)

1. Give a brief description of your organization, its mission, and values. Further describe your organization's success providing services to older adults, adults with disabilities, their caregivers, or services to marginalized communities. Describe the populations you intend to serve (race/ethnicity, cultural/language group, region of King County, etc.)
2. Describe your organization's ability to address changes in funding, staffing, changing needs in the community, and developing and/or maintaining board or leadership support.
3. Provide a list and brief job description for all key positions that will have a significant role in program coordination and service delivery.
4. Describe your plan for staff recruitment, training, supervision, and retention for the services you intend to deliver.
5. Describe your organization's experience with data management – collecting, storing, and analyzing participant information and program activities. What is your technical capacity for supporting the IT needs of your staff, tracking participant information, and producing reports?

Rating Criteria – A strong application meets all of the criteria listed below.

- The agency description demonstrates the applicant’s experience, commitment, and success in delivering services to older adults, adults with disabilities, and/or their caregivers. Applicant thoroughly describes the population they intend to serve including race/ethnicity, cultural/language group, region of King County, etc.)
- Applicant demonstrates successful experience adapting to changes in funds and community needs.
- Applicant’s leadership is likely to provide strong ongoing support for the service proposed.
- Applicant provides a list and brief job description for all key personnel and describes processes for recruiting and maintaining quality staff that matches the levels needed to run the program as described.
- Applicant has experience and capacity for data management and reporting. Agency has adequate staff to support IT functions.

B. PARTNERSHIPS AND COLLABORATION (30 points)

1. Describe your agency’s experience collaborating with other agencies. How was the collaboration beneficial to program participants? Please provide examples.
2. Describe the benefits and challenges of collaborating with other agencies. How do you address issues and challenges when expectations are not met? Please provide examples.
3. Describe how you will refer participants to other agencies qualified to provide services through this funding opportunity in a proactive, seamless, participant-friendly manner.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant describes experience collaborating with other agencies and provides examples of how the collaboration was beneficial to participants.
- Applicant describes benefits and challenges and how they address issues when expectations are not met. Examples are provided.
- Applicant describes how participants will be referred to other programs and agencies in a proactive, seamless, participant-friendly manner.

C. CULTURAL RELEVANCY AND RESPONSIVENESS (20 points)

1. Describe your experience providing services to diverse groups, including racial and ethnic minorities, immigrants and refugees, low-income populations, limited English proficient, and other cultural groups. If experience is limited, what steps will you take to provide culturally relevant services?
2. How does your organization demonstrate a commitment to racial equity and social justice and dismantling institutional racism? Please provide examples.
3. What challenges and successes have you experienced, or do you anticipate, in providing services to people from diverse cultural and economic backgrounds? How will you address these challenges?
4. Describe how the agency board and staff represent the cultural, linguistic, and socio-economic background of program participants.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant demonstrates understanding of cultural relevancy and describes how cultural relevancy is incorporated into the program and service delivery.
- Applicant provides examples that demonstrate their commitment to racial equity and social justice and dismantling institutional racism.
- Applicant has a proven track record of providing culturally and linguistically relevant services to diverse priority community(ies) and focus population(s). Applicant demonstrates the ability to provide

culturally relevant and inclusive services within diverse communities and shows an understanding of the challenges.

- Applicant’s staff composition reflects the cultural and linguistic characteristics of the priority community(ies) and focus population(s). Applicant’s board composition reflects the cultural and linguistic characteristics of the priority community(ies) and focus population(s).

D. FINANCE MANAGEMENT AND LEVERAGING RESOURCES (15 points)

1. Describe your organization’s financial management system. How does your agency establish and maintain general accounting principles to ensure adequate administrative and accounting procedures and internal controls necessary to safeguard all funds that may be awarded under the terms of this funding opportunity? Entities without such capabilities may wish to have an established agency act as fiscal agent.
2. Describe your agency’s ability to leverage other funding to support the participants served by this program.
3. Describe how your agency has the capability to meet program expenses in advance of reimbursement.

Rating Criteria – A strong application meets all of the criteria listed below.

- The applicant has a demonstrated capacity to ensure adequate administrative and accounting procedures and controls necessary to safeguard all funds that may be awarded by ADS in the future.
- Applicant is able to leverage other funds to support program activities.
- The applicant demonstrates the capability to meet program expenses in advance of reimbursement.

TOTAL = 100

Section 2: Service Qualification

The second section is comprised of narrative questions for service you intend to perform. Each service is worth up to 10 points may not exceed one (1) page per service. Include a start-up timeline for any new service you intend to provide. This will not count toward your 1-page maximum per service. To be qualified, you must be rated a minimum average of 7.5 points by the rating committee. Each service will be evaluated separately.

SECTION 2: SERVICE QUALIFICATION

SERVICE DESCRIPTION – (10 points)

Answer the following questions for each service you intend to provide. Note: You do not need to provide all of the 11 services listed. Each service is worth a total of 10 points. Your answer for each service cannot exceed one (1) page and you must have a separate page for each service. Complete the summary of proposed services (Attachment 8) for each service you intend to provide. The summary of proposed services will not count toward your maximum number of pages. Include a start-up timeline for any new service you intend to provide. The timeline will not count toward your maximum number of pages, or your 1-page per service.

1. Information, Assistance, and Outreach

- a. Where will you provide information and assistance in the community? Include when and where (locations, times, days of the week) and population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and adults with disabilities. Please include any other defining characteristics of your population.
- b. If the service site differs from your agency location, provide a letter of intent from the facility.
- c. Describe your experience providing information and assistance or similar service to older adults and/or adults with disabilities -including the specific demographic population(s) you serve.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly states where and when information and assistance will be provided in the community. Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Letter of intent is provided if services are delivered at a facility that differs from the agency location.
- Applicant describes experience providing information and assistance or similar service and shows a strong connection with the population they intend to serve including an understanding of their strengths, needs, and concerns.

2. Options Counseling

- Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and adults with disabilities. Please include any other defining characteristics of your population.
- Describe your experience providing options counseling or similar service to your population.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant describes experience providing options counseling or similar service and shows a strong connection with the population they intend to serve including an understanding of their strengths, needs, and concerns.

3. Care Coordination

- Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and adults with disabilities. Please include any other defining characteristics of your population.
- Describe your experience providing care coordination or similar service to your population.
- Describe the unique challenges in serving your population and how you overcome barriers to provide excellent care coordination service.
- Describe your experience tracking budgets and verifying that a good or service has been delivered.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant describes experience providing care coordination or similar service and shows a strong connection with the population they intend to serve including an understanding of their strengths, needs, and concerns.
- Applicant describes challenges in serving their population and successful ways to overcome barriers.
- Applicant describes experience with tracking budgets and verifying that a good or service has been delivered.

4. Regional Coordination

- Describe your experience convening a diverse group of stakeholders serving older adults, adults with disabilities, and their caregivers, including agencies serving different language/cultural groups, the health care industry, housing and transportation providers, or any other entities.
- Where is your office located? Please include the name of the building, address, and office hours.
- Describe your agency's experience providing services in the region in which you are applying.

- d. Describe your agency's experience providing presentations to older adults, adults with disabilities, and their caregivers about community resources.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant describes experience successfully convening a diverse group of stakeholders.
- Applicant has an office in the region in which they are applying to be the regional coordinators. Office hours are sufficient to have a strong presence in the community.
- Applicant has a history of providing services in the region in which they are applying to be the regional coordinator.
- Applicant describes experience providing presentations about community resources for older adults, adults with disabilities, and their caregivers.

Specialized Services for Caregivers:

5. Information, Assistance, and Outreach for Caregivers

- a. Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and people caring for adults with disabilities and/or specific diseases. Please include any other defining characteristics of your population.
- b. Describe your experience providing information and assistance or similar service to these caregivers.
- c. Describe the unique challenges in serving your caregiver population and how you overcome barriers to provide excellent service.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant describes experience providing information and assistance to caregivers or similar service and shows a strong connection with the population they intend to serve including an understanding of their strengths, needs, and concerns.
- Applicant describes challenges in serving their population and successful ways to overcome barriers.

6. TCARE® - Caregiver Assessment

- a. Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and people caring for adults with disabilities and/or specific diseases. Please include any other defining characteristics of your population.
- b. Describe the unique challenges, if any, administering an evidence-based tool to your focus population and how you overcome barriers to engage your caregivers. If you do not have any challenges, please describe how you maintain fidelity to evidence-based tools.
- c. Describe your staff capacity and experience providing TCARE® or similar service to your focus population. Please indicate if TCARE® is a new service for your agency.
- d. Describe your agency's technical capacity for IT support.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant clearly describes challenges and ways to overcome barriers when using an evidence-based tool. If using an evidence-based tool is not challenging, applicant clearly describes how they maintain fidelity to the tool.

- Applicant describes experience providing TCARE® or similar service and shows a strong connection with the population they intend to serve including an understanding of their strengths, needs, and concerns.
- Applicant has IT support to help troubleshoot technical issues and challenges.

7. Emergency Respite Coordination

- Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and people caring for adults with disabilities and/or specific diseases. Please include any other defining characteristics of your population.
- Describe your experience administering emergency respite or similar funds, including how you recruit participants and vendors, verify that a good or service has been delivered, and track budgets.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant clearly describes experience administering emergency respite funds or similar funds, including recruiting participants and vendors, verifying that a good or service has been delivered, and tracking budgets.

8. Respite Coordination

- Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and people caring for adults with disabilities and/or specific diseases. Please include any other defining characteristics of your population.
- Describe your experience providing respite authorization or similar service including tracking budgets, documenting and coordinating services, and communicating with agencies and participants about services.
- Describe your organizations technical capacity for IT support.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant clearly describes experience coordinating respite authorizations or similar service including tracking budgets, documenting and coordinating services, and communicating with agencies and participants about services.
- Applicant has IT support to help troubleshoot technical issues and challenges.

9. Caregiver Counseling

- Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and people caring for adults with disabilities and/or specific diseases. Please include any other defining characteristics of your population.
- Describe your experience providing counseling to these caregivers. Include specific examples of successes and challenges.
- What are the unique characteristics of this population and how is your staff equipped to serve the population?

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.

- Applicant describes experience providing caregiver counseling and includes specific examples of successes and challenges.
- Applicant describes unique characteristics of the population they intend to serve and staff experience and training to serve the population.

10. Caregiver Support Groups

- Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and people caring for adults with disabilities and/or specific diseases. Please include any other defining characteristics of your population.
- Describe your experience providing caregiver support groups including successes and challenges. Provide examples.
- Where will your support groups be held? Please include the name and address of the facility. If the facility differs from your agency location, provide a letter of intent from the facility.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant describes experience providing caregiver support groups including successes and challenges. Examples are provided.
- Applicant clearly states where the caregiver support group will be provided in the community.
- Letter of intent is provided if services are delivered at a facility that differs from the agency location.

11. Caregiver Training/Consultation

- Describe the population you intend to serve including race/ethnicity, specific language or cultural groups, region of King County, and people caring for adults with disabilities and/or specific diseases. Please include any other defining characteristics of your population.
- If you intend to provide caregiver training, list the workshops and your agency’s experience providing the workshops.
- If you intend to provide consultation, describe your agency’s experience providing consultation to caregivers.

Rating Criteria – A strong application meets all of the criteria listed below.

- Applicant clearly defines the priority population(s) and focus population(s) including other defining characteristics of the population they intend to serve.
- Applicant lists workshops and clearly describes experience providing the workshops to caregivers if applying for caregiver training.
- Applicant clearly describes experience providing consultation to caregivers if applying for caregiver consultation.

IV. Completed Application Requirements

AT APPLICATION SUBMITTAL

To be considered Complete, your application packet must include all of the following items:

1. A completed and signed Application Cover Sheet (Attachment 2).

2. A completed Narrative response for the Agency Qualification (one per agency) and Service Qualification (one page for each service provided).
3. A completed Summary of Proposed Services for each service you are applying (Attachment 8).
4. Roster of your agency's current Board of Directors.
5. Minutes from your agency's last three Board of Directors meetings.
6. Current verification of nonprofit status or evidence of incorporation or status as a legal entity. Your agency must have a federal tax identification number/employer identification number.
7. If your agency has an approved indirect rate, a copy of proof the rate is approved by an appropriate federal agency or another entity.
8. If you are proposing to provide any new (for your agency) services, attach a start-up timeline for each service.
9. If you are proposing to use another organization's facility to deliver your services, attach a signed letter of intent from that agency's Director or other authorized representative.
10. A copy of the agency's current fiscal year's financial statement reports, consisting of the Balance Sheet, Income Statement, and Statement of Cash Flows, certified by the agency's CFO, Finance Officer, or Board Treasurer.
11. A copy of the agency's most recent audit report.
12. A copy of the agency's most recent fiscal year-ending Form 990 report.
13. A current certificate of commercial liability insurance. Note: if selected to receive funding, the agency and its insurance must conform to MASA requirements at the start of the contract.

V. List of Attachments & Related Materials

- Attachment 1: Application Checklist
- Attachment 2: Application Cover Sheet
- Attachment 3: Application Cover Sheet Sample
- Attachment 4: Community Living Connections Program Model
- Attachment 5: Care Coordination Best Practices
- Attachment 6: Cities by Region of King County
- Attachment 7: Data Security Requirements
- Attachment 8: Summary of Proposed Services
- Attachment 9: Summary of Proposed Services Sample

**2018 Community Living Connections RFQ
Application Checklist**

This checklist is to help you ensure your application is complete prior to submission. Please do not submit this form with your application.

HAVE YOU....

Read, understood, and agree to the following additional documents/requirements found on the [Funding Opportunities Webpage](#)?

- HSD Agency Minimum Eligibility Requirements
- HSD Client Data and Program Reporting Requirements
- HSD Contracting Requirements
- HSD Funding Opportunity Selection Process
- HSD Appeal Process
- HSD Commitment to Funding Culturally Responsive Services
- HSD Guiding Principles

Completed, signed, and attached the Application Cover Sheet (Attachment 2)?*

Completed each section of the Narrative response?

- Section 1: Agency Qualification: must not exceed 8 pages (8 ½ x 11), single spaced, double-sided, size 11 font, with 1-inch margins (Sections A-D).
- Section 2: Service Qualification: must not exceed 1 page (8 ½ x 11), single spaced, double-sided, size 11 font, with 1-inch margins for each proposed service.
- Page count does not include the supporting documents requested in this funding opportunity.
- A completed narrative response addresses all of the following:

Section 1: Agency Qualification (8-page maximum):

- Capacity and Experience (35 points)
- Partnerships and Collaboration (30 points)
- Cultural Relevancy and Responsiveness (20 points)
- Finance Management and Leveraging Resources (15 points)

Section 2: Service Qualification (1-page maximum per service):

- Service Description (10 points each)

Completed and attached the Summary of Proposed Services (Attachment 8) for each service proposed? *

Attached the following supporting documents?*

- Roster of your current Board of Directors.
- Minutes from your agency's last three Board of Directors meetings.
- Current verification of nonprofit status or evidence of incorporation or status as a legal entity.
- If your agency has an approved indirect rate, have you attached a copy of proof that the rate is approved by an appropriate federal agency or another entity?

- A copy of the agency's current fiscal year's financial statement reports, consisting of the Balance Sheet, Income Statement, and Statement of Cash Flows, certified by the agency's CFO, Finance Officer, or Board Treasurer.
- A copy of the agency's most recent audit report.
- A copy of the agency's most recent fiscal year-ending Form 990 report.
- A current certificate of commercial liability insurance.
- If you are proposing to provide any new services (for your agency), have you attached a start-up timeline for each service?**
- If you are proposing to use another organization's facility to deliver your services, attach a signed letter of intent or collaboration from that agency's Director or other authorized representative.***

**These documents do not count against the page limit for the proposal narrative section.*

All applications are due to the City of Seattle Human Services Department by **12:00 p.m. on Thursday, November 8, 2018.** Application packets received after this deadline will not be considered. See Application Section I for submission instructions.



City of Seattle
Human Services Department

2018 Community Living Connections RFQ
Application Cover Sheet

1. Applicant Agency:			
2. Agency Executive Director:			
3. Agency Primary Contact			
Name:			Title:
Address:			
Email:			
Phone #:			
4. Organization Type			
<input type="checkbox"/> Non-Profit	<input type="checkbox"/> For Profit	<input type="checkbox"/> Public Agency	<input type="checkbox"/> Other (Specify):
5. Federal Tax ID or EIN:		6. DUNS Number:	
7. WA Business License Number:			
8. Proposed Program Name:			
9. Service:			
Focus Population:			
# of participants to be served (unduplicated):			
Region of King County:			
Priority Populations:			
Limited English (Languages):			
10. Service:			
Focus Population:			
# of participants to be served (unduplicated):			
Region of King County:			
Priority Populations:			
Limited English (Languages):			
11. Service:			
Focus Population:			

# of participants to be served (unduplicated): Region of King County: Priority Populations: Limited English (Languages):	
12. Service: Focus Population: # of participants to be served (unduplicated): Region of King County: Priority Populations: Limited English (Languages):	
13. Service: Focus Population: # of participants to be served (unduplicated): Region of King County: Priority Populations: Limited English (Languages):	
14. Service: Focus Population: # of participants to be served (unduplicated): Region of King County: Priority Populations: Limited English (Languages):	
<p>Authorized physical signature of applicant/lead organization</p> <p><i>To the best of my knowledge and belief, all information in this application is true and correct. The document has been duly authorized by the governing body of the applicant who will comply with all contractual obligations if the applicant is awarded funding.</i></p> <p>Name and Title of Authorized Representative: _____</p> <p>Signature of Authorized Representative: _____ Date: _____</p>	



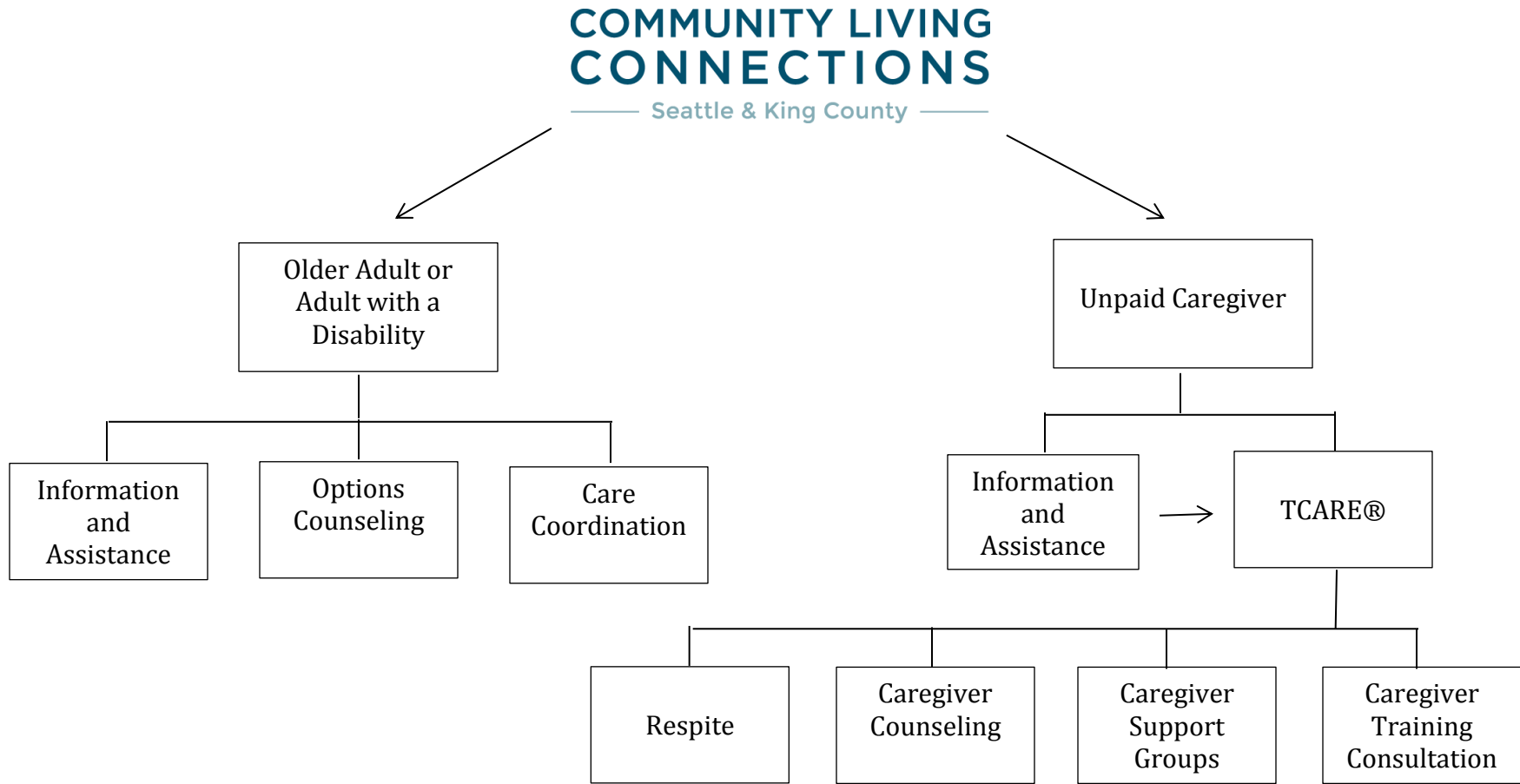
City of Seattle
Human Services Department

2018 Community Living Connections RFQ
Application Cover Sheet

1. Applicant Agency:	4 Community		
2. Agency Executive Director:	Edie D		
3. Agency Primary Contact			
Name:	Edie D	Title:	Executive Director
Address:	1000 Agency Street		
Email:	DEdie@Agency.org		
Phone #:	(111) 111-1111		
4. Organization Type	<input checked="" type="checkbox"/> Non-Profit <input type="checkbox"/> For Profit <input type="checkbox"/> Public Agency <input type="checkbox"/> Other (Specify):		
5. Federal Tax ID or EIN:	11-1111111	6. DUNS Number:	111111111
7. WA Business License Number:	111111111		
8. Proposed Program Name:	Community Living Connections		
9. Service:	Information and Assistance		
Focus Population(s):	Black/African American		
# of participants to be served (unduplicated):	500		
Region of King County:	South King County, Seattle		
Priority Populations:	Low Income, Rural		
Limited English (Languages):	Amharic, Somali, Arabic, Cantonese, Mandarin, Spanish		
10. Service:	Information, Assistance and Outreach for Caregivers		
Focus Population(s):	Black/African American		
# of participants to be served (unduplicated):	150		
Region of King County:	South King County, Seattle		
Priority Populations:	Low Income, Rural		
Limited English (Languages):	Amharic, Somali, Arabic, Cantonese, Mandarin, Spanish		

<p>11. Service:</p> <p>Focus Population(s):</p> <p># of participants to be served (unduplicated):</p> <p>Region of King County:</p> <p>Priority Populations:</p> <p>Limited English (Languages):</p>	<p>Options Counseling</p> <p>Black/African American</p> <p>100</p> <p>South King County, Seattle</p> <p>Low Income</p> <p>Amharic, Somali, Arabic, Cantonese, Mandarin, Spanish</p>
<p>Authorized physical signature of applicant/lead organization</p> <p><i>To the best of my knowledge and belief, all information in this application is true and correct. The document has been duly authorized by the governing body of the applicant who will comply with all contractual obligations if the applicant is awarded funding.</i></p> <p>Name and Title of Authorized Representative: <u>Edie D</u></p> <p>Signature of Authorized Representative: _____ Date: <u>8/22/18</u></p>	

2018 Community Living Connections RFQ
Community Living Connections Program Model



2018 Community Living Connections RFQ

Care Coordination Best Practices

Care Coordination is short term case management for older adults and adults with disabilities who need assistance and do not have help from someone else to access and obtain community-based resources. This document is a “best practice” guide for agencies providing Care Coordination in the Community Living Connections provider network in King County.

The primary goals of Care Coordination are to:

- Assist an individual to develop a person-centered service plan of care that enables them to reside in the setting of their choice.
- Help facilitate implementation of the service plan and to monitor that plan as requested and needed. Care Coordinators support an individual by providing culturally and linguistically appropriate services, decreasing barriers, and coordinating and offering assistance to access needed services.

Eligibility:

Care Coordination services are available to older adults 60+ or adults 18+ with a disability residing in King County who are:

- Not receiving Aging and Long-Term Support Administration (AL TSA) funded Long Term Core services; and
- Require multiple services and/or related activities performed on their behalf; and
- Are unable to obtain the required services and/or perform the required activities for themselves; and
- Do not have family or friends who are able and willing to provide adequate assistance; and
- Have the cognitive capacity and ability to partner with a Care Coordinator, participate in care planning, and follow-through on agreed upon responsibilities.

Priority:

Priority will be given to individuals who:

- Need assistance with at least one activity of daily living (ADL) or two instrumental activities of daily living (IADL).

Duties include:

1. Comprehensive assessment
 - a. Care Coordinator conducts a face-to-face, person-centered comprehensive assessment in the participant’s home or place of their choice. Re-assessment is conducted at least every 12 months or when there is a significant change in the participant’s condition.
2. Service plan
 - a. Care Coordinator partners with participant, and collateral contacts as appropriate, to create the service plan. The service plan identifies the participant’s needs, how those needs will be met, who will meet those needs, and clear outcomes and goals.
 - b. The service plan is clearly communicated to the participant, in a language understandable to the participant, and the participant agrees to the service plan.
 - c. The service plan includes:
 - i. Participant needs and goals
 - ii. When services are performed and by whom
 - iii. Responsibilities of the participant and/or informal support system
 - iv. Other needs and participant preferences
 - v. Follow-up indicating that participant goal has been reached or describing unmet need

3. Follow-up
 - a. Care Coordinator coordinates activities with other service agencies, links participants to community resources, and coordinates or facilitates paperwork for specific services such as public benefits (Medicaid eligibility, Supplemental Nutrition Action Program, Section 8 housing, social security, etc.).
 - b. Care Coordinator advocates and assists participants to overcome barriers that impact their ability to function independently.
 - c. Care Coordinator monitors participants at least monthly to review the plan and adjust when necessary to meet participant's needs.
 - d. Follow-up may be provided over the phone, in person, or via secure electronic communication.
4. Termination Planning
 - a. Prior to closing a case, Care Coordinator ensures there is a stable plan of care and that appropriate follow-up procedures are in place, if needed.
 - b. Date of termination and reason for termination must be included in the case record. Participants are terminated for a variety of reasons including, but not limited to:
 - i. Service plan goals are met
 - ii. Three months of no response from the participant
 - iii. Services are declined
 - iv. Moved out of the area
 - v. Placed into a care facility
 - vi. Deceased
 - vii. Placed on long term support services
5. Documentation
 - a. Care Coordinator will obtain required documents including, but not limited to: participant rights; confidentiality; consent for services; and release of information to communicate with other family members, collateral contacts, and other services providers when appropriate.
 - b. All participant contact and services provided during the assessment, care coordination, termination, and follow-up must be recoded in a participant case file.
 - c. Care Coordinator will document case/progress notes using DAP (Data, Assessment, Plan), SOAP (Subjective, Objective, Assessment, Plan), or other similar professional standard for case notes.

Examples of Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL):

ADL:	IADL:
Eating	Cooking
Toileting	Shopping
Walking	Chores
Transferring	Driving
Dressing	Heavy housework
Bathing	Phoning
Medication management	Money management

**2018 Community Living Connections RFQ
Cities by Region of King County**

Region	Cities
North Region/Seattle	<ul style="list-style-type: none"> • Bothell • Kenmore • Lake Forest Park • Seattle • Shoreline • Woodinville
East Region	<ul style="list-style-type: none"> • Bellevue • Carnation • Duvall • Issaquah • Kirkland • Mercer Island • Newcastle • North Bend • Beaux Arts • Redmond • Sammamish • Skykomish • Snoqualmie
South Region	<ul style="list-style-type: none"> • Auburn • Black Diamond • Burien • Covington • Des Moines • Enumclaw • Federal Way • Kent • Maple Valley • Normandy Park • Renton • Sea Tac • Tukwila • Vashon

2018 Community Living Connections RFQ

Data Security Requirements

1. **Data Transport.** When transporting DSHS/ADS Confidential Information electronically, including via email, the data will be protected by:
 - a. Transporting the data within the (State Governmental Network) SGN or contractor's internal network, or;
 - b. Encrypting any data that will be in transit outside the SGN or contractor's internal network. This includes transit over the public Internet.

2. **Protection of Data.** The contractor agrees to store data on one or more of the following media and protect the data as described:
 - a. **Hard disk drives.** Data stored on local workstation hard disks. Access to the data will be restricted to authorized users by requiring logon to the local workstation using a unique user ID and complex password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards.
 - b. **Network server disks.** Data stored on hard disks mounted on network servers and made available through shared folders. Access to the data will be restricted to authorized users through the use of access control lists which will grant access only after the authorized user has authenticated to the network using a unique user ID and complex password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on disks mounted to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism. For DSHS/ADS confidential data stored on these disks, deleting unneeded data is sufficient as long as the disks remain in a secured area and otherwise meets the requirements listed in the above paragraph. Destruction of the data as outlined in Section 4. Data Disposition may be deferred until the disks are retired, replaced, or otherwise taken out of the secure environment.
 - c. **Optical discs (CDs or DVDs) in local workstation optical disc drives.** Data provided by DSHS/ADS on optical discs which will be used in local workstation optical disc drives and which will not be transported out of a secure area. When not in use for the contracted purpose, such discs must be locked in a drawer, cabinet or other container to which only authorized users have the key, combination or mechanism required to access the contents of the container. Workstations which access DSHS/ADS data on optical discs must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.
 - d. **Optical discs (CDs or DVDs) in drives or jukeboxes attached to servers.** Data provided by DSHS/ADS on optical discs which will be attached to network servers and which will not be transported out of a secure area. Access to data on these discs will be restricted to authorized users through the use of access control lists which will grant access only after the authorized user has authenticated to the network using a unique user ID and complex password or other authentication mechanisms which provide equal or greater security, such as biometrics or smart cards. Data on discs attached to such servers must be located in an area which is accessible only to authorized personnel, with access controlled through use of a key, card key, combination lock, or comparable mechanism.
 - e. **Paper documents.** Any paper records must be protected by storing the records in a secure area which is only accessible to authorized personnel. When not in use, such records must be stored in a locked container, such as a file cabinet, locking drawer, or safe, to which only authorized persons have access.
 - f. **Access via remote terminal/workstation over the State Governmental Network (SGN).** Data accessed and used interactively over the SGN. Access to the data will be controlled by DSHS/ADS staff who will issue authentication credentials (e.g. a unique user ID and complex password) to authorized contractor staff. Contractor will notify DSHS/ADS staff immediately whenever an authorized person in possession of

such credentials is terminated or otherwise leaves the employ of the contractor, and whenever a user's duties change such that the user no longer requires access to perform work for this contract.

- g. **Access via remote terminal/workstation over the Internet through Secure Access Washington.** Data accessed and used interactively over the SGN. Access to the data will be controlled by DSHS/ADS staff who will issue authentication credentials (e.g. a unique user ID and complex password) to authorized contractor staff. Contractor will notify DSHS/ADS staff immediately whenever an authorized person in possession of such credentials is terminated or otherwise leaves the employ of the contractor and whenever a user's duties change such that the user no longer requires access to perform work for this contract.
- h. **Data storage on portable devices or media.**
 - (1) DSHS/ADS data shall not be stored by the Contractor on portable devices or media unless specifically authorized within the Special Terms and Conditions of the contract. If so authorized, the data shall be given the following protections:
 - (a) Encrypt the data with a key length of at least 128 bits
 - (b) Control access to devices with a unique user ID and password or stronger authentication method such as a physical token or biometrics.
 - (c) Manually lock devices whenever they are left unattended and set devices to lock automatically after a period of inactivity, if this feature is available. Maximum period of inactivity is 20 minutes.

Physically protect the portable device(s) and/or media by:

- (d) Keeping them in locked storage when not in use
- (e) Using check-in/check-out procedures when they are shared, and
- (f) Taking frequent inventories
- (2) When being transported outside of a secure area, portable devices and media with confidential DSHS/ADS data must be under the physical control of contractor staff with authorization to access the data.
- (3) Portable devices include, but are not limited to; handhelds/PDAs, Ultramobile PCs, flash memory devices (e.g. USB flash drives, personal media players), portable hard disks, and laptop/notebook computers if those computers may be transported outside of a secure area.
- (4) Portable media includes, but is not limited to; optical media (e.g. CDs, DVDs), magnetic media (e.g. floppy disks, tape, Zip or Jaz disks), or flash media (e.g. CompactFlash, SD, MMC).

3. Data Segregation.

- a. DSHS/ADS data must be segregated or otherwise distinguishable from non-DSHS/ADS data. This is to ensure that when no longer needed by the contractor, all DSHS/ADS data can be identified for return or destruction. It also aids in determining whether DSHS/ADS data has or may have been compromised in the event of a security breach.
- b. DSHS/ADS data will be kept on media (e.g. hard disk, optical disc, tape, etc.) which will contain no non-DSHS/ADS data. Or,
- c. DSHS/ADS data will be stored in a logical container on electronic media, such as a partition or folder dedicated to DSHS/ADS data. Or,
- d. DSHS/ADS data will be stored in a database which will contain no non-DSHS/ADS data. Or,
- e. DSHS/ADS data will be stored within a database and will be distinguishable from non-DSHS/ADS data by the value of a specific field or fields within database records. Or,
- f. When stored as physical paper documents, DSHS/ADS data will be physically segregated from non-DSHS/ADS data in a drawer, folder, or other container.
- g. When it is not feasible or practical to segregate DSHS/ADS data from non-DSHS/ADS data, then both the DSHS/ADS data and the non-DSHS/ADS data with which it is commingled must be protected as described in this exhibit.

- 4. Data Disposition.** When the contracted work has been completed or when no longer needed, except as noted in 2.b, data shall be returned to DSHS/ADS or destroyed in accordance with DSHS/ADS IT Security Policy. Media on which data may be stored and associated acceptable methods of destruction are as follows:

Data stored on:	Will be destroyed by:
Server or workstation hard disks	Using a “wipe” utility which will overwrite the data at least three (3) times using either random or single character data Degaussing sufficiently to ensure that the data cannot be reconstructed, or Physically destroying the disk
Paper documents with sensitive or confidential data	Recycling through a contracted firm provided the contract with the recycler assures that the confidentiality of data will be protected.
Paper documents containing confidential information requiring special handling (e.g. protected health information)	On-site shredding, pulping, or incineration.
Optical discs (e.g. CDs or DVDs)	Incineration, shredding, or completely defacing the readable surface with a course abrasive
Magnetic tape	Degaussing, incinerating or crosscut shredding
Removable media (e.g. floppies, USB flash drives, portable hard disks, Zip or similar disks)	Using a “wipe” utility which will overwrite the data at least three (3) times using either random or single character data Physically destroying the disk Degaussing magnetic media sufficiently to ensure that the data cannot be reconstructed

- 5. Notification of Compromise or Potential Compromise.** The compromise or potential compromise of DSHS/ADS shared data must be reported to the DSHS/ADS Contact designated on the contract within one (1) business day of discovery.
- 6. Data shared with Sub-contractors.** If DSHS/ADS data provided under this contract is to be shared with sub-contractor, the contract with the sub-contractor must include all of the data security provisions within this contract and within any amendments, attachments, or exhibits within this contract. If the contractor cannot protect the data as articulated within this contract, then the contract with the sub-contractor must be submitted to the DSHS/ADS Contact specified for this contract for review and approval.

**2018 Community Living Connections RFQ
Summary of Proposed Services**

Instructions: Complete the Summary of Proposed Services for each service you intend to provide. Input the service and how many individuals you intend to serve with that service (unduplicated count). Then, fill out what percent of people you intend to serve in the categories listed below and specify which region of King County they reside.				
Agency:				
Service:	Unduplicated Count:			
	Seattle	North King County	East King County	South King County
Asian				
Black/African American				
Hawaiian Native/Pacific Islander				
Hispanic/Latino				
Native American/Alaskan Native				
White				
Priority Populations:				
Residing in rural area				
Low Income (at or below federal poverty guidelines)				
LGBTQ				
Severe disabilities				
Dementia and related disorders				
Risk for institutional placement				
Providing care to individuals with severe disabilities				
Limited English Proficiency:				
Spanish				
Cantonese				
Mandarin				
Vietnamese				
Korean				
Russian				
Tagalog				
Japanese				
Ukrainian				
Amharic				
Somali				
Other Specify:				
Limited sensory abilities				
Other Specify:				

**2018 Community Living Connections RFQ
Summary of Proposed Services Sample**

Instructions: Complete the Summary of Proposed Services for each service you intend to provide. Input the service and how many individuals you intend to serve with that service (unduplicated count). Then, fill out what percent of people you intend to serve in the categories listed below and specify which region of King County they reside.

	Seattle	North King County	East King County	South King County
Agency: 4 Community				
Service: Information and Assistance	Unduplicated Count	500		
	Seattle	North King County	East King County	South King County
Asian	5%			7%
Black/African American	20%			40%
Hawaiian Native/Pacific Islander				
Hispanic/Latino	3%			5%
Native American/Alaskan Native				
White	7%			12%
Priority Populations:				
Residing in rural area				5%
Low Income (at or below federal poverty guidelines)	45%			45%
LGBTQ				
Severe disabilities				
Dementia and related disorders				
Risk for institutional placement				
Providing care to individuals with severe disabilities				
Limited English Proficiency:				
Spanish	1%			3%
Cantonese	2%			3%
Mandarin	2%			3%
Vietnamese				
Korean				
Russian				
Tagalog				
Japanese				
Ukrainian				
Amharic	5%			5%
Somali	5%			5%
Other Specify:				
Arabic	5%			5%
Limited sensory abilities				
Other Specify:				