

## ADDENDUM ONE QUESTIONS and ANSWERS

Date: May 29, 2018

To: All Bidders

From: Michelle Thompson, Buyer  
AS Materiel Purchasing

RE: Addendum for Request for Information Number Combined Services  
to be opened June 12, 2018 at 2:00 p.m. Central Time

### Questions and Answers

Following are the questions submitted and answers provided for the above mentioned Request for Information. The questions and answers are to be considered as part of the Request for Information. It is the Bidder's responsibility to check the State Purchasing Bureau website for all addenda or amendments.

<u>Question Number</u>	<u>RFI Section Reference</u>	<u>RFI Page Number</u>	<u>Question</u>	<u>State Response</u>
1.			Just to clarify, is the "opening date" also referred to as the "due date"?	Yes, the opening date is the same as the due date.
2.			How exactly does the process work from the RFI to the RFP?	DHHS will review all of the RFI responses and determine the appropriate next steps.
3.			The opening date is June 12 <sup>th</sup> ? Is that when we submit the information?	See the response to Question #1.
4.			Why type of information is requested to be submitted on June 12 <sup>th</sup> ?	The Division of Children and Family Services (DCFS) is seeking any input or feedback that would help in development of a RFP for a foster care service that includes both stabilization to biological families and education curriculum to ensure child safety and prevent recurrence of maltreatment.
5.			When does the RFI close?	See the response to Question #1.
6.			Do we have any more information that can be released in regards to the RFP?	The information gathered from this RFI will be used to develop the RFP for this combined service, or Family Resource Service.
7.	Section II, D	2	The RFI is to have a solicitation number; where is said number located?	The Solicitation Number is RFI Combined Services.
8.	Section I, A; Act.4	1	Schedule of Events, Activity 4 indicates the RFI opening is June 12, 2018 at 2p, Central Time. Can it be clarified if by RFI Opening it is meant that this is the date in	June 12, 2018 at 2:00 pm Central Time is when the RFI response is due to DHHS. RFI responses should be submitted by the RFI due date and

			which the RFI process begins; or if this is the date in which the RFI is due for review to DHHS.	time to <a href="mailto:dhhs.procurement@nebraska.gov">dhhs.procurement@nebraska.gov</a>
9.	Section III, B	4	Please provide clarification under Scope of Work that the intention of the RFI is for the agency/agencies to provide information related to Combined Services; that the intention is not to solicit specific structures for said combined services. The Scope of Work section reads: "Please provide comments or input on how DCFS can create a Foster Care service that provides both stabilization to biological families and education curriculum to ensure child safety and prevent recurrence of maltreatment". Is the intention of providing comments or input to provide knowledge and information the agency/agencies have on this subject matter or is the intention to indicate how services should be developed, implemented?	The intention of providing comments is to gather input, be that knowledge or experience, from agencies on this subject matter and/or this service can be developed and implemented effective to serve families involved with DCFS.
10.			Is the expectation of combined service to pay a flat rate per case?	Cost and pricing structures will be requested in the RFP. DCFS will determine the best reimbursement method based on responses to the RFP.
11.			Will there still be an individual rate per type of service?	See the response to Question #10.
12.			Does the RFI need to include high level of detail with documentation forms, copies of reports, etc.?	If this is part of the feedback, DCFS welcomes any input that respondents have.
13.	Section A	4	Is page 4 Section A and B all the information we have to go on for writing the RFI?	This will be a new service for DCFS to have in its service array. DCFS welcomes any innovative and creative ways to develop and implement the Resource Family Service.
14.	IA	1	Does Opening Date of June 12, 2018 - 2:00 actually mean Due Date for the RFI?	See the response to Question #1.
15.			How many contracts will be awarded per service area?	RFI's do not result in contracts.
16.			If it goes to RFP – will we get a copy of evaluation criteria ahead of time?	If this service is bid out via the RFP process, the evaluation criteria will be posted along with the RFP.
17.			Will the provider who gets the contract need to have accreditation?	No, but accreditation will be taken into consideration when evaluating the RFP.
18.			What is the department's view in terms of the rate structure? <ul style="list-style-type: none"> <li>o Will all services be bundled into one case rate? Will rates be adjustable for higher behavioral children, distance in the rural areas, etc.?</li> </ul>	See the response to Question #10.
19.			What are the expectations from the department regarding servicing a	DCFS is committed to serving every area of the State. Based on

			geographic area versus the whole state?	responses to the RFP, DCFS will determine areas of service which may include multiple contractors in one area or one contractor in multiple areas.
20.			Will agencies that don't offer foster care services be considered for the RFP? Can they start providing foster care services under a new contract?	Any agency can respond to the RFP, whether that agency currently provides foster care services or not. The agency will need to contact DCFS to determine the need for additional providers for foster care services.
21.			Will the department continue to grow the number of foster homes it manages or will these be managed by agencies?	DCFS will maintain and support the appropriate number of foster homes to meet the needs of children and families involved with DCFS.
22.			Are agencies allowed to sub-contract out services that they don't currently offer?	Yes
23.			Are foster parents expected to work with biological parents in order to help reunify the family? If so, what is the state's expectations regarding this?	Yes. DCFS expects the foster parent to take on a mentoring role in order to stabilize biological families and provide education to keep their children safe and prevent a recurrence of maltreatment.
24.			Does a provider have to respond to the RFI in order to participate in and be considered for the RFP?	No
25.			Will there be a therapy component required in line with the current Intensive Reunification pilot program?	This will be determined through response to the RFP.
26.			Will there be Evidence Based Practice requirements?	There will be requirements based on the Family First Prevention Services Act of 2017 passed by Congress. This includes requirement of the use of Promising Practice, Supported Practice, and/or Well-supported Practice model(s)
27.			Will there be a change in the collaboration of CFS workers under the new contract?	The State is unclear on the meaning of this question.
28.			Can one or more providers partner to respond to the RFI and the RFP? These would be providers that would sub-contract with one another.	Yes
29.	B. General Information	Page 2	If this RFI process does <u>not</u> lead to an RFP, will only the providers who responded to the RFI be eligible for a contract?	No
30.	F. Submission of Response	Page 3	Is there a page requirement or limit when responding to the scope of work?	No, there is no page limit.

31.	A. Current and Future Environm ent	Page 4	Will one provider be selected per service area?	See the response to Question #15.
32.	A. Current and Future Environm ent	Page 4	In seeking to create a new single service for families, will there be start-up considerations (e.g., time and costs) to allow for development of the services?	This will be determined through responses to the RFP.
33.	A. Current and Future Environm ent	Page 4	Do you envision providers partnering with one another and thus allowing for subcontracting?	Partnering or subcontracting may be an option for agencies to fulfill the obligations of the contract.
34.	B. Scope of Work	Page 4	What is the vision for kinship families – Do you want comments and input regarding kinship families as well?	See the response to Question #9.
35.	III.A	#5	Who supports state affiliated foster homes not associated with an agency? Could we submit an RFQ to provide reunification/support services for those homes if we are not already an Agency Supported Foster Care provider but do have extensive ability to provide FS, PSVS, IFP, IFR and home and office based therapy services to achieve successful reunification outcomes?	DCFS staff support state affiliated foster homes not associated with Foster Care Agency. You may submit a program description and proposal for implementing a service to the DCFS via the RFI. The State will not publish an RFQ.
36.	III.A	#5	What are the proposed rate structures? Will it be a per family rate, case rate, per service rate, hourly rate? What rate structures are available to provide services in extremely rural geographic locations to compensate for mileage and drive time for case management, family support, PSVS and therapists?	See the response to Question #10.
37.	III.A	#5	Must a provider already be providing Agency Supported Foster Care in order to submit for RFQ as this severely limits providers (only two in all of Northeast Nebraska) despite the anticipated increase in family preservation and home-based services due to the Families First Act?	See the response to Question #20. The State will not publish an RFQ.
38.	III.A	#5	It appears the goal is to replicate services currently provided by PromiseShip. Will other agencies be offered similar start up monies as they were should they be chosen to provide the RFQ?	See the response to Question #10.
39.	III.B	#6	Will there be only one RFQ proposal selected for the state, for the service area, or will there be multiple providers selected to honor the Families Choice movement	See the response to Question #19.

			within CFS?	
40.	III.B	#6	Will agencies be permitted to partner together to submit a proposal and designate a utilization manager for case/family assignment to the agency best able to meet the needs of the family?	Partnering or subcontracting may be an option for agencies to respond to the RFP. Designating a utilization manager may be proposed as a way to meet the needs of the family.
41.	IIB	2	When and how will the RFI responses be made public after the opening?	The RFI responses will be posted to the RFI webpage. All appropriately identified proprietary information will not be posted.
42.	III	4	Is there a set format and any size limit for RFI responses?	The RFI does not have a format requirement or a size limitation.
43.	IIIB	4	Should RFI responses address funding structure and reimbursement rates?	No, this will be part of the RFI.
44.	IIIB	4	Can the response include the DHHS Eastern Service Area for a statewide solution, or is this RFI exclusive of the ESA?	This RFI is for the areas of the State outside the ESA. The ESA currently has a provider for case management services and this provider determines service array.
45.	IIIB	4	Is the total amount of funding for this Foster Care service the same, less (how much), or more (how much) than is allocated and expended on the current services related to this RFI?	See the response to Question #10.
46.			Who will be supporting HHS affiliated foster homes that are currently not associated with a licensed foster care agency?	See the response to Question #35.
47.			Is HHS looking to increase the number of foster homes it manages?	See the response to Question #21.
48.			Does a vendor have to provide foster care in order to be considered as part of the RFP process?	Any agency can respond to the RFP, whether that agency currently provides foster care services or not.
49.			Can a provider subcontract with another agency as part of the RFP process?	Partnering or subcontracting may be an option for agencies to respond to the RFP.
50.			What is HHS's intent, in terms of the rate structure? Will HHS want an hourly rate for all or some services, and/or will some services be at a case rate? Would HHS consider a family rate or daily rate, or is HHS considering something else?	See the response to Question #10.
51.			How will HHS budget for these services if multiple vendors are paid differently?	See the response to Question #10.
52.			Are foster parents expected to work with biological parents in order to help reunify the family? Will they be required to participate in visits and will they be expected to travel to visits? How will this impact foster homes who have two full time working caregivers/parents?	Yes. DCFS is looking for a model that the foster parent takes on a mentoring role in order to stabilize biological families, provide education to keep their children safe, prevent a recurrence of maltreatment and help reunify the family. The impact on foster homes that have two working caregivers/parent will be determined

				by the recruitment and retention efforts of the Agency.
53.			What are the expectations from HHS regarding servicing a geographic area? Are vendors expected to serve the same area they are currently serving, or will they be required to expand in order to provide services in additional service areas/counties?	DCFS is committed to serving every area of the State. Based on responses to the RFP, DCFS will determine areas of service which may include multiple contractors in one area or one contractor in multiple areas.
54.			Will there be a rate differential based on urban vs. rural areas?	See the response to Question #10.
55.			Does a vendor have to respond to the RFI in order to participate in and be considered for the RFP?	No
56.			Can one or more vendors partner to respond to the RFI and the RFP?	Yes
57.			Will HHS require a vendor to be accredited by COA or some other accrediting organization?	See the response to Question #17.
58.	II.B.	2	Are providers only eligible to apply to the RFP after submitting an RFI?	No
59.	III.B.	6	Are tracking services and electronic monitoring to be provided in the combined services described in this contract?	No
60.	III.B.	6	Is drug testing a service to be provided in the combined services described in this contract?	No
61.	III.B.	6	Should the provider fall short of family support workers to meet the needs for the combined services contract, is the provider expected to contract family support workers from other agencies, or to hire additional support workers?	Partnering or subcontracting may be an option for agencies to fulfill the obligations of the contract.
62.	III.B.	6	Can providers bid on multiple service areas?	Yes.
63.	III.B.	6	Is it required to bid on the entirety of the combined services described in the contract?	Yes.
64.	III.B.	6	Will multiple awards be issued for each service area?	See the response to Question #19.
65.	III.B.	6	Is intensive family preservation to be a service offered through this contract?	No.
66.	III.B.	6	What service delivery models are preferred?	DCFS will be seeking models based on the Family First Prevention Services Act of 2017 passed by Congress. This includes requirement of the use of Promising Practice, Supported Practice, and/or Well-

				supported Practice model(s)
67.	III.A.	6	Have outcomes for the combined services contract been set yet? If so, what are the outcomes?	No
68.	III.A.	6	What is the established rate for services? Is this a standard, single rate or a tiered rate scale?	See the response to Question #10.
69.	Section 3.a & b	4	Recognizing the varying sizes and scopes of partnering organizations (vendors), is the State open to vendor partnerships in responding to the RFI?	Yes.
70.	Section 3.a & b	4	Is the State intending that the new single/combined service incorporate and serve the current state-supported foster homes?	No, DCFS will continue to support Essential Level Foster homes.
71.	Section 3.a & b	4	In responding to the RFI/RFP, is the State open to vendors defining and limiting their geographic areas of service provision (as per current practice), or is the State seeking to define larger geographic service areas for the vendors?	DCFS is committed to serving every area of the State. Based on responses to the RFP, DCFS will determine needs in areas of service which may go beyond State defined Service Areas.
72.	Section 3.a & b	4	In creating a single, combined service, the specific needs of the child and family vary dramatically from case to case. As a result, is the State looking for case-rate billing structure- to encompass all services provided to a particular family, or more of an hourly fee-for-service billing structure?	See the response to Question #10.
73.	Section 3.a & b	4	Can a vendor/provider that only provides one or more, but not all, of the specified component-services of the new single service enter a proposal?	Any agency can respond to the RFP, whether that agency currently provides the specified services or not.
74.			How will Combined Services be recognized as consistent with FFPSA evidence based services?	See the response to Question #66.
75.			Does the Department see Combined Services as providing more wraparound type services to the biological family or services that are of more direct support either through Foster Parents or other staff support to the biological parent? Please explain.	Yes. DCFS is looking for a model that the foster parent takes on a mentoring role in order to stabilize biological families, provide education to keep their children safe, prevent a recurrence of maltreatment and help reunify the family.
76.			Do you anticipate an increase in the Agency Supported Foster Care Rate? If so, what is your plan to ensure this change occurs to the statutory foster care reimbursement schedule?	See the response to Question #10.
77.			Will Combined Services be used with kinship placement, and if so how does the Department see Combined Services within Kinship Care looking different than use within Agency Supported Foster Care?	Yes. It should not look different. See the response to Question #75.

78.			How will Combined Services be impacted for those youth who have been placed in Foster Care yet parents have had their parental rights terminated?	If a parent's rights have been terminated, DCFS will work toward permanency for the child. DCFS case management will work with the agency to determine strategies to obtain permanency. The Agency would assist in locating a permanent home and provider supports until permanency is achieved.
79.			Please provide a national evidenced based model that is currently administering Combined Services within Foster Care. Where is this model being run and how is it being done?	This RFI has been issued to develop a model to meet the needs of families involved with DCFS in every geographic area of the State. DCFS is seeking input on how to create this model.
80.			What would be the typical case load standards for Combined Services (i.e. supervisor to staff, etc.)?	This should be indicated in the RFI response.
81.			What would occur if biological parents did not have any interest in engaging in Combined Services while their child is placed in a Foster Home?	The agency and DCFS would strategize next steps to achieve permanency for the child.
82.			How would Combined Services be delivered if there were sibling groups that were placed in different Foster Homes?	This should be indicated in the RFI response.
83.			At this point in time does the Department know the number of providers they are looking to provide Combined Services? Will these numbers be service area specific as well as be delivered statewide?	See the response to Question #19.
84.			Will subcontractors be allowed in providing Combined Services?	Yes
85.			Will it be expected that there is one worker that works with the Foster Parents and the Biological Parents or will it be possible for multiple people to be involved, including the Foster Parents in the education/support of the biological parents?	This should be indicated in the RFI response.
86.			What does the Department see the role of the Foster Parents being in Combined Services?	See the response to Question #85.
87.			What specific deliverables would the Department like to see addressed through Combined Services?	The will be determined through responses to the RFP.
88.			Will staff qualifications remain the same?	The State is unclear on the meaning of this question.
89.			What does the Department see as reporting guidelines of Combined Services?	The will be determined through responses to the RFP.
90.			What are the proposed/anticipated outcomes of Combined Services?	Outcomes will be determined through responses to the RFP.
91.			Does the Department plan to decrease the number of contracts for the combine service as compared to the current number of ASFC providers?	DCFS is committed to serving every area of the State. Based on responses to the RFP, DCFS will determine areas of service which may include multiple contractors in one area or one contractor in multiple areas.

92.			Do you anticipate any rate changes? If so, what is your plan to ensure this change occurs to the statutory foster care reimbursement schedule, specifically for foster care?	See the response to Question #10
93.			Will Combined Services be used with kinship placements?	This may be a family driven decision.
94.			Will the Department continue to sponsor their own homes? And if so will the Department be offering this same level of service to those families?	Yes, DCFS will continue to sponsor current foster homes supported by DCFS. Yes.
95.			Is there an evidenced based model that is currently administering Combined Services within Foster Care that Nebraska has been looking at?	No.
96.			Will subcontracting be allowed in providing Combined Services?	Yes
97.			What can be expected after this RFI process?	DHHS will review all of the RFI responses and determine the appropriate next steps which may result in an RFP.
98.			Will there be flexibility in the design of the payment structure for these services?	See the response to Question #10
99.			Is there a projected number of providers that will be selected? If so, what is the expected number?	No.
100.			What will the referral process for foster care placements look like? Will it utilize family choice, best match, round robin or some combination? Please describe the extent of service delivery decision making autonomy that providers will have in relation to HHS case managers.	Once a family becomes involved with DCFS through removal of a child, the family will be given a choice of providers to choose from for foster care. The assigned Case Manager will make a referral for the Resource Family Service. The service will be family driven and the family will work with the team (DCFS, agency, family, informal supports) to develop a plan to reunify the family.
101.			Does a provider have to respond to the RFI in order to participate in and be considered for the associated/subsequent RFP?	No
102.			How does DHHS intend to score, rank, or otherwise identify acceptable, successful, or preferred responses to the RFI?	RFI's are not evaluated, scored or ranked.
103.			If a vendor's response to this RFI is not chosen as a successful response, will that vendor be able to participate on an equal basis to the successful vendor in the associated/subsequent RFP?	Yes See the response to Question # 102.
104.	III A.	4	What will be the length of the new, single service contract?	The State is just requesting information through the RFI process for Combined Services.
105.	III A.	4	Will the contracts be statewide, or by	DCFS is committed to serving every area of the State. Based on

			select or agreed upon Service Areas?	responses to the RFP, DCFS will determine areas of service which may include multiple contractors in one area or one contractor in multiple areas.
106.	III A.	4	How many contracts/providers will be in each Service Area, to accommodate "family voice, family choice"?	See the response to Question #105.
107.	III A.	4	Will the contract require, "unconditional care" or "no eject, no reject", once out of home services are authorized? How might "family voice, family choice", impact this?	No, however the ability for an agency to work with a family without disruption of placement or unsuccessful termination of service will be tracked as a performance outcome.
108.	iii A.	4	How many of the single service contracts will be signed for the State of Nebraska?	See the response to Question #105
109.	III A.	4	Will contracting agencies be required to be accredited?	See the response to Question #17
110.	III A.	4	Will the new, "Combined Services" of ASFC, FSS and VS-PT, be limited to the expectations of the current HHS Service Definitions and Service Attachments? In other words, can we propose "add on" services/options as well?	The respondents to the RFP may propose new options to the service that would meet the needs of the family in order to reunify the child with the parent, as well as any Promising Practice, Supported Practice, and/or Well-supported Practice.
111.	III A.	4	Will the NCR Foster Parent daily rate levels and fees continue to be utilized by HHS to determine the rates paid to the foster parents? (But not necessarily the rates for the support for the agency?)	See the response to Question #10
112.	III A.	4	Will there be any changes to payment rates for relative/kinship foster parent(s)?	No
113.	III A.	4	Will there be any incentives built into the contract as a result of meeting or exceeding contract outcomes? If so, will they be financial, preferred provider, or permanency incentives?	This should be indicated in the RFI response.
114.	III A.	4	Are there any anticipated changes in background checks, relative-kinship home study processes, approval processes, adoptive home studies, or licensed home study processes/regulations that will impact the amount of time it takes to complete any of these processes?	DCFS will follow current and future regulations and policies in regards to background checks, approval processes and home study processes.
115.	III A.	4	Will there be any increased expectations related to training requirements for Licensed Foster Parents?	DCFS will follow current and future regulations in regards to Licensed Foster Parent training. The agency may need to consider enhanced training to meet the needs of the family.
116.	III A.	4	Will there be any increased expectations related to training requirements for the ASFC, FSS and/or VS-PT staff	See the response to Question #115

			requirements?	
117.	III A.	4	What new Federal training requirements will be expected/required and will be passed on to the contractors of these services for the staff of each of these combined services?	There are no Federal training requirements associated with this service, only the expectation that the service model follows a Promising Practice, Supported Practice, and/or Well-supported Practice model.
118.	III A.	4	Will there be a model(s) of Kinship Care identified in the contract that will specifically be required to be trained to Relative/Kinship foster parents?	No
119.	III A.	4	Will the same job qualifications for each position of the combined services be utilized, moving forward?	This will be determined by the service model proposed.
120.	III A.	4	How might "family voice, family choice" impact the out of home placement decisions related to agency selection and matching of licensed foster parents?	"Family voice, family choice" may impact out-of-home placement decisions by shifting the choice of placement to the family rather than the case manager. It may also impact how the agency's efforts to correctly match a foster home with the needs of the family.
121.	III A.	4	Will the new contract have recruiting and retention language/expectations different from the current contract language, and if so, how so?	Language of the contract will be determined on information received from the RFI and RFP.
122.	III A.	4	Will NDHHS continue to serve/retain and support relative/kinship homes once these contracts go into effect?	See the response to Question #21
123.	III A.	4	Will NDHHS continue to increase the numbers of kinship/relative foster homes that they support?	See the response to Question #21
124.	III A.	4	Do you have accurate data and/or trends in data to share in relation to the number of clients served, the number of days/hours/units, the length of service and/or the amount of service purchased, per service area/location?	Data will be shared in the RFP.
125.	III A.	4	Will there be any changes in reporting forms, submittal procedures or time frames for submittal?	Changes may occur based on responses from the RFP.
126.	III A.	4	Will there be any contractual adjustments that allow for technological advancements in the provision of services.... to manage costs.... In the rural areas (without sacrificing safety)?	This will be determined based on responses from the RFP. Any technological advancements that may be utilized in provision of services.
127.	III A.	4	Will the full "Ice Breakers" parental engagement practice and protocol, be required by the contract or just portions of it?	The State is unclear on the meaning of this question.

128.	III A.	4	Will the contract specify supervisor/staff, or staff/client ratios?	No, this will be determined by the agency.
129.	III A.	4	Are there any anticipated changes in requiring TIPS-MAPP training for licensed foster parents.... or anticipated broadening of the contract to allow for one or two other EBP training offerings?	This will be considered if part of the proposal.
130.	III A.	4	Will the contracting agency be allowed to have input and some control in regards to the services/interventions provided to families? (In other words, can referrals establish desired outcomes and within limits, the contracting agencies can determine the method of education/services and interventions utilized, in order to attain the outcome?)	The case plan should identify the day and times for services agreed to and Driven by the family. The agency will provide guidance to the family to achieve the goals of the case plan.
131.	III A.	4	The "Future Environment" language includes the language, "prevent recurrence of maltreatment". For what time period(s) will this contract be measured? For 6 months, for 12 months?	DCFS would expect that the service would prevent recurrence of maltreatment so that the family does not re-enter the Child Welfare system.  RFI's do not result in contracts.
132.	III A.	4	The "Future Environment" language in the contract includes the language, "prevent recurrence of maltreatment". Will the agency or HHS be responsible to collect this data and report it, as related to confidentiality for children and families?	DCFS will collect data and report out on recurrence of maltreatment as it relates to the agency and family served.
133.	III A.	4	How will the transition of foster homes (licensed or not), that are affiliated with a specific agency, who either chooses not to contract for ASFC, or is not awarded an Combined Services contract, occur? Will they choose, or be assigned, based on what agency or agencies are awarded contracts?	It will be the responsibility of the agency to recruit and/or retain foster parents to meet the obligations of the contract.  RFI's do not result in contracts.
134.	III B.	4	<ul style="list-style-type: none"> <li>• (a) Agencies partnering or sub-contracting with one another, takes time and trust as well as determining and developing new roles and responsibilities. Is there time to do this prior to July 1, 2019, based on the timing of the release of the RFP?</li> <li>• (b) Is HHS willing to allocate and spend money on preventative services in a proactive manner, rather than being reactive?</li> <li>• (c) Differential or Alternative Response was designed to help alleviate children coming in the "front door" of care. What has happened to AR? Is it still being piloted/developed statewide? We have not heard about it for a while. Is it working? Will it</li> </ul>	<p>(a) Yes</p> <p>(b) DCFS is currently exploring options to implement preventative services.</p> <p>(c) Yes, AR is being utilized in 92 of 93 counties statewide. AR still remains a priority for DCFS especially in light of the advent of the Families First Prevention Services Act. Please follow link to learn more about AR: <a href="http://dhhs.ne.gov/children_family_services/AlternativeResponse/Pages/Home.aspx">http://dhhs.ne.gov/children_family_services/AlternativeResponse/Pages/Home.aspx</a></p> <p>(d) The service will be family-driven. Agencies may need to work with foster parents to align foster parents with this philosophy. The focus is on</p>

			<p>continue to be developed?</p> <ul style="list-style-type: none"> <li>• (d)What about the Foster parent's voice and choice related to caring for children? How do we manage this with increased parental voice and choice? What about older children's voice and choice related to their care? Additionally, HHS has also given voice to foster parents being more involved/expected to provide services to the parent(s) of the children in their care? Again, what about the foster parent(s) voice in this? How can we manage all of these issues?</li> <li>• (e)If CPA's are not able to partner with other agencies or provide services any longer as a result of this change, what happens to placements, support and services that are being provided and how will this transition occur. This will potentially result in some trauma to children and families.</li> </ul>	<p>the family, how to help the family stabilize, reunify with their children, and prevent</p> <p>(e) CPAs may partner or subcontract to meet the obligations of the contract. DCFS will work with the agencies in the transition of services once the service is developed. Agencies that are awarded the contract will develop a planned to maintain placement while implementing support services to help the child(ren) in care reach permanency. DCFS will assist in the development of this plan for transition into the new service.</p>
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This addendum will become part of the proposal and should be acknowledged with the Request for Information.