LACKAWANNA COUNTY BOARD OF COMMISSIONERS DEPARTMENT OF HUMAN SERVICES/LACKAWANNA COUNTY AREA AGENCY on AGING REQUEST FOR QUALIFICATIONS FOR FISCAL YEARS 14/15 THRU 16/17 FOR SERVICE PROVIDERS

Issued: March 17, 2014 RFQ ID #: 0-76-14-1100-15

1. INTRODUCTION:

NOTICE IS HEREBY GIVEN that pursuant to a fair and open process, sealed submittals will be received and reviewed by the County of Lackawanna ("COUNTY") Board of Commissioners ("Board of Commissioners") for the provision of services to eligible individuals served by the Lackawanna County Area Agency on Aging / Aging Block Grant. This RFQ will be used in applying for funds to provide services for Fiscal Years 2014/2015 thru 2016/2017.

Submission Deadline:				
Respondents must submitime:	t their written S	ubmittals by	v 4:00 p.m. prevailing	April 14, 2014
Contact Person:	Colin J Holmes	Em	ail: <u>HolmesC@lackawanr</u>	nacounty.org

Submissions received will be reviewed and evaluated by the Lackawanna County Area Agency on Aging (herein after referred to as the Department), based upon such criteria as the Department, in its sole discretion, deems appropriate. The Department reserves the right to request clarification or additional information from any respondent. The Department, in its sole discretion, may accept or reject any or all submittals.

The Department reserves the opportunity to modify this Request for Qualifications (herein after referred to as RFQ) at its own discretion and without prior notice, and to waive any immaterial defect or informality in any proposal as may be permitted by law.

2. PURPOSE:

The purpose of this Request for Qualifications is to solicit submissions from qualified agencies and /or individuals to provide professional services on behalf of the County in connection with the administration of the Aging Block Grant. Service areas/definitions include:

- Adult Day Care-Older Adult Living Centers (also known as Adult Day Service Centers) provide a planned program of congregate, social, recreational, nutritional and developmental activities for persons incapable of total independent living. These services are provided within a protected non-residential environment. Meals and assistance with personal care needs are included in the cost of this service but not transportation.
- Consumer Reimbursement/Family Caregiver Support Programs-provide fiscal management services for the National Family Caregiver Support Program (Federal FCSP) and Pennsylvania Caregiver Support Program (State FCSP).

The Family Caregiver Support Programs are designed to assist family and other unpaid adult primary caregivers caring for: functionally dependent older persons (age 60 and older) and adult relatives with chronic dementia; care receivers age 18+ with chronic dementia; non-parent caregivers, age 55 and older providing care for adult relatives with disabilities, who are between 19 and 59 years of age; and caregivers age 55 and older who are caring for related children age 18 or under with priority given to those children with severe disabilities. Financial assistance is in the form of reimbursement for expenses incurred. Depending upon need, income and expenditures, caregivers may be reimbursed from \$200 to \$500 per month for services and supplies (e.g., respite care, incontinent supplies, etc.); and up to \$2000 lifetime benefit for home modifications and assistive devices.

- Environmental Modifications/CHORE program-activities of a major or minor repair and largely non-recurring nature to improve the safety, sanitation and adaptability of a consumer's home.
- **Escort Transportation**-eligible recipients are enabled to travel to or from community facilities which provide services and activities of a social, nutritional or medical nature or which otherwise promote independent living, such as transportation between a consumer's home and shopping, etc.

Specific activities involved in the provision of transportation services include:

- Purchase, maintenance, and repair of vehicles and equipment used in the provision of transportation services.
- ❖ Direct operation of vehicles and equipment required to provide travel to and from needed community services and facilities, including reimbursement for expenses of staff who, when more appropriate than other available means, transport consumers in personal vehicles.
- Acceptance of transportation service requests, providing intake and eligibility screening, scheduling transportation service requests, making vehicle and driver assignments, dispatching vehicles and general operating functions.
- ❖ Collection and tabulation of various service, operational and consumer statistics used in the management of the transportation system or required by the funding agency.
- Personnel actions and training directly related to staff needed to manage, supervise and actually provide the transportation services.

- ❖ Payment of wages, salaries, appropriate benefits and required personnel insurance of staff involved in the provision or in some cases the arrangement of transportation services.
- ❖ Payment of mileage reimbursement to persons volunteering the use of their personal vehicles in the direct provision of transportation services.
- Purchase of scrip, tickets, tokens, and prepaid fares will be converted into transportation services.
- All one-way trips should originate <u>or</u> terminate at a consumer's home or at a medical or therapy facility.
- Agencies when providing or contracting for transportation services must not duplicate or compete with existing transportation services, which are available and are appropriate for use by the elderly.
- ❖ Payment of insurance expenses related to the provision of Transportation which cover general liability claims, property damage, uninsured motorists and collision costs must be provided. Insurance coverage's must include all individuals involved in operating vehicles or assisting in the provision of Transportation such as volunteer drivers, escorts, etc.
- Escort Transportation for the Visually Impaired-provisions of transportation to the visually impaired. Service must be specifically designed to meet the needs of this special population. To be eligible for this service, a consumer must be sixty (60) years of age or older, unable to utilize public transportation and have a transportation need that cannot be met by the Coordinated Transportation System. Typically one-to-one supervision is needed in order to safely reach their destination.
- Guardianship of Estate Program-activities include the evaluation of consumers as to the
 appropriateness and type of guardianship needed, petitioning for guardianship and acting as a
 guardian when so appointed by the court.

An agency or organization must demonstrate that it is able and willing to fulfill the role of guardian in accordance with 20 Pa. Cons. Statute Section 5510 et seq., which defines incapacitated person and provides the procedure for appointment and removal of guardian of estate and the powers and duties of the guardian of estate.

Entities responding to this RFQ shall also respond to the following:

- <u>Prior Experience</u>: Identify agency staff, if available provide staff name(s) and title(s), and his/her experience in providing guardian of estate services. In an effort to identify the agency's ability to be fluid in providing the least intrusive service option, please also include the agency's ability to and if applicable, any knowledge of or experience in serving as Representative Payee or Power of Attorney for financial matters.
- <u>Personnel</u>: Outline how the agency will manage to provide guardian of estate services during and after normal business hours. Please also identify the following: how the agency will engage the use of legal counsel; if any new positions need to be created in

order for the agency to serve as guardian of estate; and how, if any, volunteers will be used to support the services to be provided.

- O Work Plan: Outline how work will be distributed among/between staff, including court appearances, visiting the older adult, consults with the older adult's family (when applicable), the LCAAA and physicians, preparing and submitting required Court and LCAAA reports. The work plan must also include how the guardian proposes to secure and protect the older adult's property, including but not limited to real estate, bank accounts, and monthly income checks.
- Collaboration with Other Community Resources and Aging Network Providers: Describe and if appropriate, identify any community and aging network providers that the agency successfully partners with in order to serve, protect, empower and advocate for older adults. Recognizing that an increasing number of individuals with intellectual disabilities and other special needs are in need of long term care services as they age in place, please be sure to describe current or planned efforts to develop partnerships with this special population.

The awarding of a Guardian of Estate contract is contingent upon approval from the Orphan's Court of Lackawanna County.

The qualified bidder will only be reimbursed for cases referred by the LCAAA. Subcontractor staff is expected to work collaboratively with the LCAAA staff on all Guardian of Estate cases.

The qualified bidder must work in accordance with applicable Pennsylvania Legislation (20 Pa. Cons. Statutes Section 5501 et seq. – Chapter 55 of the Probate, Estates and Fiduciary Code) when providing Guardian of Estate services.

The qualified bidder will manage cases in accordance with standards imposed by the LCAAA which includes an initial comprehensive financial needs assessment and periodic reassessments to be conducted at regular intervals or as the older adult's situation warrants. The older adult should be engaged as much as possible in creating a plan to manage their estate and, thereafter, documented quarterly contacts to the older adult shall be made.

The qualified bidder shall submit monthly reports to the LCAAA and at minimum and as ordered by the Court, annual reports to the Lackawanna County Orphan's Court. One copy of all reports submitted to the Court shall be submitted to the LCAAA.

 Guardianship of Person Program-activities include the evaluation of consumers as to the appropriateness and type of guardianship needed, petitioning for guardianship and acting as a guardian when so appointed by the court.

The LCAAA desires to enter into a Guardian of Persons agreement with an agency or organization that can demonstrate that it is able and willing to fulfill the role of guardian in accordance with 20 Pa. Cons. Statute Section 5510 et seq., which defines incapacitated person

and provides the procedure for appointment and removal of guardian of person and the powers and duties of the guardian of person.

Entities responding to this RFQ shall also respond to the following:

- ❖ <u>Prior Experience</u>: Identify agency staff, if available provide staff name(s) and title(s), and his/her experience in providing guardian of person services.
- ❖ <u>Personnel</u>: Outline how the agency will manage to provide guardian of person services during and after normal business hours. Please identify the following: how the agency will engage the use of legal counsel; if any new positions need to be created in order for the agency to serve as guardian of person; and how, if any, volunteers will be used to support the services to be provided.
- ❖ Work Plan: Outline how work will be distributed among/between staff, including court appearances, visiting the older adult, consults with the older adult's family (when applicable), the LCAAA and physicians, preparing and submitting required Court and LCAAA reports.
- Collaboration with Other Community Resources and Aging Network Providers: Describe and if appropriate, identify any community and aging network providers that the agency successfully partners with in order to serve, protect, empower and advocate for older adults. Recognizing that an increasing number of individuals with intellectual disabilities and other special needs are in need of long term care services as they age in place, please be sure to describe current or planned efforts to develop partnerships with this special population.

The awarding of a Guardian of Person contract is contingent upon approval from the Orphan's Court of Lackawanna County.

The qualified bidder will only be reimbursed for cases referred by the LCAAA. Subcontractor staff is expected to work collaboratively with the LCAAA staff in all Guardian of Person cases.

The qualified bidder must work in accordance with applicable Pennsylvania Legislation (20 Pa. Cons. Statutes Section 5501 et seq. – Chapter 55 of the Probate, Estates and Fiduciary Code) when providing Guardian of Person services.

The qualified bidder will manage cases in accordance with standards imposed by the LCAAA which includes an initial comprehensive needs assessment and periodic reassessments to be conducted at regular intervals or as the older adult's situation warrants. Minimal monthly visits or as needed by plan, reviewing records and attending plan of care meetings to the older adult in his/her place of residence (i.e., home, personal care home, nursing home, etc.) shall be made.

The qualified bidder shall submit monthly reports to the LCAAA and at minimum and as ordered by the Court, annual reports to the Lackawanna County Orphan's Court. One copy of all reports submitted to the Court shall be submitted to the LCAAA.

- Home Delivered Meals-this program provides meals to older Pennsylvanians who are unable to prepare their own food and who cannot rely on family members or other supports to meet their nutritional needs. The meals provided supply at least one-third of the recommended nutritional needs of older persons. The qualified bidder must comply with APD 06-03-01 Nutrition Services.
- Home Support/Housekeeping-is labor-intensive maintenance that includes basic housekeeping and home management activities necessary to ensure safe and sanitary conditions. Shopping assistance and personal laundry can be performed at the discretion of the LCAAA.
- Information and Referral/Assistance-this service provides information on available services and facilities and links the consumer with appropriate agencies or community resources that can provide the needed service.

Specific service activities for Information and Referral/Assistance after normal LCAAA business hours include:

- ❖ The qualified bidder is required to screen, complete and prioritize all Reports of Need for Protective Services on the standardized forms provided by the LCAAA. The successful bidder will immediately contact the agency's on-call Protective Services Investigator via the LCAAA pager system in order to provide him/her with the completed Report of Need and follow-up, as appropriate.
- ❖ The qualified bidder is also required to complete a standardized LCAAA Consumer Registration form when requests for LCAAA intervention or services that do not meet state established criteria for a Report of Need are received.
- ❖ Upon completing the Consumer Registration form, the qualified bidder is required to contact the agency's On-Call Protective Services worker and provide him/her with the information. The LCAAA will obtain the completed Consumer Registration form on the following business day.
- ❖ Staff participation in a minimum two (2) hours in-service training per year on Protective Services Issues and eight hours of training for all new Information and Referral staff is required.
- ❖ In addition to the above definitions and information, the following Aging Program Directive (APD) must be adhered to in its entirety to comply with contract terms: APD #85-11-01.
- Legal Services-legal assistance, counseling and representation are provided by lawyers, paralegal aides and non-lawyers to older persons to understand, secure, protect or expand their legal rights. These cases are only on non-fee generating and civil legal problems.

- Additionally, legal services may include the following activities: Legal assistance to the Lackawanna County Area Agency on Aging in its advocacy program on behalf of the elderly;
- Development of an elderly component of the local lawyer referral service;
- Provision of education and training on legal problems confronting the elderly and dissemination of information on these issues;
- Development of resources of the local bar association through coordination and referrals of elderly consumers for services on a pro bono or reduced fee basis;
- Coordination of cooperative participation by the local bar with established legal service providers;
- Use of community service advisors; and
- Assistance, where possible, with law reform or changes in administrative regulations on issues of primary concern to the elderly.
- ❖ Provision of counsel to Protective Services Consumers where a petition for involuntary intervention is filed and approved by the Court of Common Pleas.

Emergency Intervention

When clear and convincing evidence exists that an older adult is at imminent risk of death or serious harm, and consent cannot be obtained to provide necessary services, the LCAAA will Petition the Court for an "Emergency Intervention".

In the case of petitioning the Court for an emergency intervention, the older adult is informed of his or her legal rights, and is asked if he or she has legal counsel. If such counsel exists every reasonable effort is made to contact the older adult's attorney. If the identified attorney cannot be located and/or if no available counsel exists, the Lackawanna County Area Agency on Aging has contracted with the Elderly Law Project to provide legal representation to those older adults who are the subjects of an "Emergency Intervention" petition filed by the agency. In accordance with the PS Regulations, which require representation, an attorney within the Elderly Law Project will be contacted by phone and informed of the consumer's need for counsel. Notification to counsel shall include a copy of the Petition with affidavits attached. All reasonable efforts will be maintained to assure that this procedure is initiated before the Emergency Involuntary Petition is brought before the Court so that counsel can be fully apprised of the situation and to ensure that the consumer is informed of the proposed intervention. seventy-two (72) hours, if necessary, a hearing will be held in order to determine the continued need for Protective Services. Throughout this entire procedure the Elderly Law Project Attorney will act independently of the Agency in order to advocate on behalf of the best interests of the older adult and take whatever steps are necessary to protect the civil rights of the consumer. If a hearing on the Petition does take place, the Elderly Law Project is required to represent the consumer at the hearing for the Petition.

In the event that an "Emergency Involuntary Petition" must be filed after normal agency business hours and when it is determined that the consumer does not have the required legal representation, all reasonable attempts to engage the Elderly Law Project to represent the older adult will take place. Similar to the process followed during normal

business hours, every attempt to contact the Elderly Law Project will be made by the Protective Services Investigator filing the Petition prior to the actual presentation of the Petition before a Magisterial District Justice. If the Protective Services Investigator is not able to contact counsel from the Elderly Law Project, a message will be left with the Elderly Law Project Attorney's answering service detailing the Agency's intent to file the Petition, the consumer's need for counsel and the specifics of the Petition. The Elderly Law Project has been provided with the phone numbers enabling them to access the agency's Protective Services Staff on a twenty-four (24) basis, if necessary. The Elderly Law Project is required by this agency to respond on a daily basis, to messages received from the agency's Protective Services Staff after normal business hours. Counsel from the Elderly Law Project will contact the Protective Services Investigator who filed the Petition to discuss the situation. When normal business hours resume, the Elderly Law Project Attorney will receive a copy of the Petition with affidavits attached, at the beginning of the next business day. The Elderly Law Project Attorney is required to represent the consumer at the hearing for the Petition.

Special Concerns

Effective July 1, 1982, this Legal Services definition will be used by AAA's in compliance with the Older Americans Act, as amended. There are specific requirements and assurances identified in the federal regulations (45 CFR 1321.151), which must also be met.

A Community Service Advisor is a layperson <u>trained</u> as an advocate in certain public benefit programs to represent an elderly individual. They can provide legal education, interview potential consumers, conduct negotiations involving public benefits, represent consumers in administrative hearings and identify legal problems for referral of appropriate cases to attorneys or legal aides under the supervision of an attorney. Community Service Advisors can supplement an AAA's outreach or casework program and can assist with I&R but should be used with some legal assistance.

It is not sufficient in meeting the federal regulations to allocate or budget the funds and then not expend them. This is clear in the statement "An area agency must spend . . . in each category . . . (3) legal services." (45 CFR 1321.187(a)). Therefore, specific attention is required to budget and expend some Aging Block Grant Funds for Legal Services.

Unit of Service Concerns

One (1) consumer hour is an hour of direct service received by a consumer and includes time spent with or on behalf of a consumer (including assessment of the consumer's needs). This includes representation with or without the consumer's presence before a public benefit agency. It also includes <u>one hour for each hour of staff time spent</u> with an elderly group when elderly legal education is being provided. Caution must be taken that the units of service for elderly legal education are charged to Legal Services Cost Center.

Time spent on general or case-specific record keeping, staff meetings, intra-agency case discussions, transportation, and other administrative expenses supporting the legal services program shall not be included in consumer hours reported, although the costs of such activities are charged to this cost center.

In addition to the above information, the following Aging Program Directive (APD) must be adhered to in its entirety to comply with contract terms: APD #85-09-01.

Medical Equipment-includes the purchase of items that are not covered under other available
health care funding for needy older persons. Items include but not limited to durable medical
equipment, consumable supplies and adaptive devices.

- Nutrition Services / Congregate Meals-meals provided in a group setting to eligible persons and served at Senior Community Centers/Satellite Centers. All meals must comply with the Pennsylvania Department of Aging APD #06-03-01 which clearly defines requirements for menu development, sanitation standards, transportation of food requirements, and reporting standards. Foods or combinations of foods served must meet 1/3 RDA requirements as identified in APD #06-03-01, only foods meeting this eligibility can be counted as USDA reimbursable. With prior written approval from the Lackawanna County Area Agency on Aging, meals may occasionally be served at approved alternate locations such as picnics, etc. Kosher Meals must be offered as a choice at all Senior Centers. Details regarding packaging, transportation and delivery of food must be detailed to include how meals will remain Kosher throughout the process from preparation to consumption.
- Ombudsman-the Pennsylvania Long-Term Care Ombudsman Program is designed to provide an advocacy force to protect and enhance the health, safety, welfare and rights of older individuals receiving long-term care. An Ombudsman, therefore, is someone who has been trained for direct involvement in the investigation and resolution of complaints for the Pennsylvania Long-Term Care Ombudsman Program. A unit of service is determined to be a resolved complaint.

Activities, which may be charged to this cost center, include:

- ❖ Investigating and resolving complaints made by or on behalf of older individuals who are consumers of long-term care relating to action, inaction or decisions of providers or their representatives, of long-term care services, of public agencies or of social service agencies, which may adversely affect the health, safety, welfare or rights of such consumers;
- Conducting regularly scheduled routine visits to LTC facilities by the Ombudsman or qualified representatives and other outreach activities to improve visibility of the program and improve consumer awareness of the services available to them;
- Monitoring the development and implementation of federal, state and local laws, regulations and policies that relate to long-term care services in the state;
- Providing information to public agencies about the problems of older persons as consumers of long-term care services;
- Training of staff and volunteers and assisting in the development of citizen organizations to participate in the Ombudsman Program;
- Carrying out other activities consistent with the requirements of the Older Americans Act which the Commissioner of the Administration on Aging determines appropriate;
- ❖ Performing activities consistent with the requirements of PL 1244, NO. 153 that the Department of Aging determines appropriate.

• Outreach-Refers to those activities which are designed to individually seek out and identify geographically hard to reach or socially isolated eligible individuals who are in the greatest need of nutrition and/or other services and to provide them with the opportunity to participate in the needed services. Included are a variety of activities that are designed to locate the functionally disabled, low income, minority and/or isolated person who may be in severe need of service; inform the person of the nutritional and other services available; encourage the person to participate; arrange for the referral of the person found to be in need of services to the appropriate agency (e.g., the LCAAA).

Unit of Service Reporting Concerns

Consumer Contacts are the units of service for Outreach Services and includes only eligible persons who are actually contacted face-to-face by agency staff conducting outreach activities. Follow up activities are not a function of Outreach and shall not be reimbursed under this cost center. However, since Outreach contacts often identify the need for follow-up activities, the outreach worker shall arrange for follow-up by referring the individual contacted to the LCAAA or the designated community Information and Referral entity.

General public information activities, such as information booths at public functions, shall not be charged to the Outreach Cost Center.

In addition to the above information and definitions, the subcontractor must provide services in accordance with applicable PA Department of Aging regulations.

Also, entities responding to this RFQ shall also respond to the following:

- ❖ <u>Problem Statement</u>: Provide in less than 500 words a description of how the agency perceives outreach to the functionally disabled, low income, minority and/or isolated person who may be in severe need of service to be a problem.
- ❖ Work Plan: Explain how the agency will organize and execute the activities identified above in order to provide Outreach services throughout Lackawanna County.
- ❖ Collaboration with Other Community Resources and Aging Network Providers: Describe and if appropriate, identify any community and aging network providers that the agency successfully partners with in order to serve, protect, empower and advocate for older adults, and in particular the functionally disabled, low income, minority and/or isolated persons. Recognizing that an increasing number of individuals with special needs are in need of long term care services as they age in place, please be sure to describe current or planned efforts to develop partnerships with this special population.
- Personal Assistance Services-In-home personal care and other approved support activities for consumers who need assistance to accomplish daily living tasks. The consumer chooses to manage certain aspects of his/her PAS services including: Recruiting, hiring and training personal assistance workers; Defining personal assistance workers' duties and work

schedules; Supervising personal assistance workers regarding how and when specific tasks are to be completed; and disciplining and discharging personal assistance workers.

A PAS worker is someone chosen by the consumer or legally authorized surrogate to meet his or her individualized service needs. PAS workers may be friends and/or relatives of the consumer, but may <u>not</u> be spouses or minor children. All PAS workers, including friends and relatives, must meet the following qualifications: be 18 years of age or older; have the required skills to perform personal assistance services as specified in the consumer's service plan; possess basic math, reading, and writing skills; possess a valid Social Security number; and be willing to submit to and pass a criminal record check; when required by the consumer, the personal assistance worker must be able to demonstrate the capability to perform health maintenance activities specified in the consumer's service plan or be willing to receive training.

A consumer choosing this model will secure a PAS worker who meets all definitions and qualifications and will assume some or all responsibility for employee management related tasks. The payroll management and disbursement activities will be completed by a certified fiscal agent.

The primary responsibilities of a fiscal agent are payroll activities and the filing of tax forms with applicable governmental taxing agencies at all levels. Fiscal agents must be aware of and comply with any changes or additions to the reporting and filing requirements of taxing agencies. Fiscal agents may use alternative tax forms to the extent that the forms are acceptable to the taxing agency.

The payroll management and disbursement activities of a fiscal agent are to:

- Obtain an employer identification number (EIN).
- Authorize personal assistance worker timesheets and/or vouchers.
- Withhold and deposit state and federal income taxes.
- Withhold and deposit Social Security and Medicare tax (FICA) and federal and state unemployment tax (FUTA/SUTA) payments.
- Purchase benefits (e.g. worker's compensation, disability, health, life) and manage any withholding of premium payments when applicable.
- Assure that all federal and state DoL laws related to minimum wage, overtime and night personal assistance workers are complied with.
- Generate and issue paychecks.
- Issue IRS Form W-2's annually.
- Inform personal assistance workers about the Earned Income Credit provision and manage advanced EIC payments when appropriate.
- Issue bonuses and/or pay increases, when approved by the LCAAA.
- Personal Care-is the provision of "hands on" care, in a consumer's home, related to a personal hygiene or functional activity of daily living that an individual cannot meet independently. Individuals receiving this service must receive some degree or amount of personal care during each authorized consumer visit. Personal care service may also include provision of

<u>supplemental housekeeping</u> service as long as the primary service rendered is for personal care.

For all referrals, the initial and annual personal care assessment must be conducted by a RN. Subsequent supervisory visits must be completed every 90 days and may be done by an experienced staff person supervised by a RN.

Personal Emergency Response Systems (PERS)-is an electronic device which enables certain high-risk consumers to secure help in the event of an emergency. The consumer wears a portable "help" button to allow for mobility. The system is connected to a consumer's phone and programmed to signal a response center once a "help" button is activated. PERS services are limited to those individuals who live alone, or who are alone for significant parts of the day, and have no regular caretaker for extended periods of time, and who would otherwise require extensive routine supervision. By providing immediate access to assistance, PERS serves to prevent institutionalization of these individuals.

The Program will lease PERS from an emergency medical response system manufacturer. Units leased will be maintained and guaranteed by the successful bidder.

Fach PFRS shall include:

- ♦ Installation in the consumer's home, including any needed phone jack modifications and devices, must occur within five business days of receipt of the LCAAA authorization form. Upon termination, PERS units must be removed within a five business days also.
- ♦ Two-way voice communication.
- ♦ Inactivity timer.
- ♦ Average range, waterproof, portable help button, with a 5-year battery.
- ♦ Ability to self-test on-line status of all functions.

Included as a part of the monthly charge, the successful bidder will provide ongoing provision of on-line emergency response center services for each consumer authorized. This shall include response to consumer self-testing, as well as daily provider testing, self-auditing and quality control, repair, replacement, and staff training. Response to all problems with PERS units must occur within 24-hours of notification.

The successful bidder will insure 24-hour staffing, by trained operators of the emergency response center, and update the LCAAA within the next business day of any PERS units that are accessed for emergency assistance.

Prime Time Health Program-delivers health promotion/prevention services, health screenings, and health education to all senior community centers sponsored by the Lackawanna County Area Agency on Aging, as well as Senior Housing complexes, (public or private), Senior Clubs and Organizations. Prime Time Health Funds are not to be used for programs that are purely social or recreational in nature.

- Representative Payee-provides fiscal management for consumers in need of this service. All funds are to be direct deposited into an account where individual consumers can be identified. The successful bidder will assist in the inventorying of the LCAAA consumers estates/assets/personal belongings and complete a monthly reconciliation. They will secure funds to manage the consumer's finances as allowed by the Social Security Administration. The LCAAA will provide any additional funds for financial management services as the payer of last resort.
- Socialization/Recreation/Education/Health Promotion (SREHP)-activities to meet the socialization, recreational, educational and enrichment needs of older persons. A diverse offering of programs, activities and services to active older adults in communities are planned and implemented. Usually these activities take place in a senior community facility in which people age 60 years of age and over and their spouses regardless of age can meet with one another to access a wide array of services and to fulfill many of their social, physical, emotional and intellectual needs. Staff is responsible to adjust to the tastes and preferences of an increasingly diverse target population and balance the need for establishing programming for younger seniors and their older counterparts.
- Visitation Services-are provided by volunteers, stipend or paid workers to frail, elderly consumers in need of socialization, companionship, emotional support, light chores and/or advocacy. A unit of service for visitation services is a "consumer hour" of one-to-one contact. In addition to the above information and definitions, the following Aging Program Directive (APD) must be adhered to in its entirety to comply with the contract terms: APD #85-06-01 and applicable Pennsylvania Department of Aging regulations.

In addition to meeting these requirements, successful bidders are responsible for completing supplemental LCAAA reporting as required.

All successful bidders for in-home services must provide quarterly trainings for direct-care staff. Topics should relate to the care and well-being of the geriatric population.

Response time for delivery of service must coincide with the date authorization was sent to the successful bidder. No services can begin until written authorization is received. Schedules identified on written authorizations must be adhered to and LCAAA pre-approval is required for all schedule changes.

3. PROCEDURES FOR RESPONDING TO REQUEST FOR QUALIFICATIONS:

One (1) original and one (4) copies of the Submittal must be provided.

Submittals must be addressed to the Lackawanna County Chief of Staff, 200 Adams Ave 6th Fl., Scranton, Pennsylvania 18503. Submittals must be in a sealed envelope with the name of the submitting agency or individual and the RFQ number clearly marked on the outside of the envelope. The County assumes no responsibility for delays in any form of carrier, mail or delivery service causing the submission to be received after the above-referenced due date and time.

Submission by fax, telephone, or email is not permitted. The final selection will be made in the sole discretion of the Department.

4. PRE-SUBMITTAL MEETINGS:

There will be an opportunity for prospective Submitters to meet with the Lackawanna County Area Agency on Aging staff for a Question and Answer session:

Date: <u>March 25, 2014</u>

Time: <u>2:30 p.m.</u>

Location: 200 Adams Avenue, Scranton, PA 18503 – 6th floor conference room

5. QUESTIONS:

Questions can be submitted via email to HolmesC@lackawannacounty.org

- * Questions will be answered by the appropriate individual(s) and responded to within 3 business days via email, with a return reply acknowledging receipt of the email request.
- * QUESTIONS AND ANSWERS WILL BE SHARED WITH ALL SUBMITTERS through posting on the Lackawanna County website, www.lackawannacounty.org

All questions pertaining to this RFQ must be submitted on or before: March 24, 2014

6. CRITERIA FOR EVALUATION OF QUALIFICATIONS:

The Department will independently evaluate each submittal and selection will be made upon the following criteria:

- 1. Experience and reputation in the field.
- 2. Experience and reputation in the field with respect to contracting with governmental, private and public sector entities to provide services on behalf of the County.
- 3. Knowledge of applicable Aging Program Directives and the organizational structure of the Lackawanna County Area Agency on Aging.
- 4. The administrative and programmatic capacity to manage the volume of work.
- 5. Availability to accommodate any required meetings of the Department.
- 6. Ability to meet reporting requirements and timelines for completion as set forth by the Department.

7. Other factors determined to be in the best interest of the County in the Department's sole discretion.

7. SUBMISSION REQUIREMENTS:

Each Submission must be in sufficient detail to permit evaluation, at a minimum, with respect to the following issues. Submissions must include the information that is specifically requested herein as well as such additional information as a respondent deems relevant to the process. Each submitter agrees that their Submittal constitutes a firm offer to the County that cannot be withdrawn for ninety (90) days from the Submission due date.

To achieve a maximum degree of comparability, the Submissions shall be organized in the manner specified below and use corresponding lettering and/or numbering.

Title Page:

(1 page): Show name of your agency, address, name of contact, telephone number(s) and email address along with the current date. Also include the title and number of the RFQ.

Table of Contents:

All Submissions to the County must include the following:

SECTION 1 Agency Information (see Form A)

- Name, address, phone number, EIN number and email address of the agency;
- The corporate officer's name, title and signature. This person must be able to execute agreements on behalf of the agency;
- The service(s) for which the submittal has been prepared.

SECTION 2 Agency Description (see Form A)

- A brief description of your agency's history, ownership and organizational structure;
- Include as attachments an organizational chart and a copy of any licenses that pertain to services provided.

SECTION 3 Agency Services (see Form A)

 List all services provided by your agency and the address at which service delivery is provided.

SECTION 4 Scope of Services/Statement of Qualifications (see Form B)

Page 15 of 22

- Provide a description of the proposed service and your agency's qualifications and experience in providing this service; including private-pay rates for each service.
- Provide the names, experience, qualifications and applicable licenses held by the individual primarily responsible for servicing the Program and any other person(s) with specialized skills that would be assigned to service the Program.

SECTION 5 County Contracts (see Form C)

Provide a listing of all like or similar service contracts with other governmental/county agencies and private/public sectors, including Memorandums of Understanding, to provide services. Include agency name, contact person, service(s), contract dates, unit rate(s) and contract amounts. If no other contracts, please state N/A.

SECTION 6 Statement of Assurances (see Form D)

- A statement of assurance that your agency is not currently in violation of any regulatory rules and regulations set forth by the Pennsylvania Department of Public Welfare (DPW), Pennsylvania Department of Aging (PDA), or Pennsylvania Department of Health (PDH) that may have any impact on your agency's operations;
- A statement of assurance that your agency has no conflict of interest in providing service on behalf of Lackawanna County;
- A statement of assurance that your agency is not involved in any current or pending litigation involving Lackawanna County or any of its Departments or Authorities;
- A statement of the industry-related insurances currently held by your agency.

SECTION 7 Additional Information

 Include any additional information not specifically required but deemed important and relevant by the submitting agency.

SECTION 8 Subcontractors

 RESPONDENTS SHOULD NOTE THAT ANY AND ALL WORK INTENDED TO BE SUBCONTRACTED AS PART OF THIS SUBMITTAL MUST BE ACCOMPANIED BY BACKGROUND MATERIALS AND REFERENCES FOR PROPOSED SUBCONTRACTOR(S) – NO EXCEPTIONS

8. RESPONSIBILITIES:

The successful Submitter shall have primary responsibility for the following:

- * Timely and accurate electronic submission of in-home and program-funded reports to Rebecca Munley.
- * Timely and accurate submission of F-forms and nurse supervisory visit forms.
- * Timely and accurate electronic submission of Senior Center reports to Susan Miraglia.

9. CONFIDENTIALITY:

All Submissions in response to this RFQ shall be held confidential until a contract is awarded. Following the contract award, Submissions are subject to release as public information unless the Submission or specific parts of the Submission can be shown to be exempt from the Pennsylvania Public Information Act. Respondents are advised to consult with their legal counsel regarding disclosure issues and take the appropriate precautions to safeguard trade secrets or any other proprietary information. The County assumes no obligation or responsibility for asserting legal arguments on behalf of potential Respondents. If a Respondent believes that a Submission or parts of a Submission are confidential, then the Respondent shall so specify. The Respondent shall stamp in bold red letters the term "CONFIDENTIAL" on that part of the Submission, which the Respondent believes to be confidential. Vague and general claims as to confidentiality shall not be accepted. All Submission and parts of Submissions that are not marked as confidential will be automatically considered public information after the contract is awarded.

10. CONFLICT OF INTEREST:

Any agency or person considering doing business with Lackawanna County Government must disclose the agency or person's affiliation or relationship that might cause a "Conflict of Interest" with County Government entity. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest may automatically result in the disqualification of the Submitter's submittal.

11. COMMUNICATION WITH ELECTED OR APPOINTED OFFICIALS:

All communications during this process should be directed to the appropriate contact listed in this RFQ. Any agency that makes any effort to communicate with any other official of Lackawanna County, either directly or indirectly, during this process will be EXCLUDED from consideration.

12. FORMS ATTACHED

- Form A Agency Information, Description and Services
- Form B Scope of Services/Statement of Qualifications

- Form C County Contracts
- Form D Statement of Assurances

Qualification Base Selection Process

The statement of qualifications will be evaluated in accordance with the County's Qualifications Base Selection Process. Anyone submitting a statement of qualifications is advised to review that process, which is set forth on the County's website.

AGENCY SUMMARY FORM A

This form should be completed and submitted with the Request for Qualification by the submission date noted in the Annual Request for Qualification for Service Providers.

I. AGENCY INF	ORMATION			
Agency Name:				
Corporate Address:				
City:		State: Zip Code:		Zip Code:
Phone:	Email:	nail:		
Services Provided:				
EIN Number:				
*Corporate Officer's N	lame:		Title:	
Corporate Officer's S	ignature:		•	
Person authorized to	execute agreemen	ts		
by your agency.	pace below, please	_		ess of service delivery po Qualification by the subr
Instructions: In the s by your agency. This form should be o date noted in the Annu	pace below, please completed and subnual Request for Qual	nitted with the I	Request for C	Qualification by the subr
Instructions: In the soy your agency. This form should be constant.	pace below, please completed and subnual Request for Qual	nitted with the I	Request for (Qualification by the subr
Instructions: In the s by your agency. This form should be o date noted in the Annu	pace below, please completed and subnual Request for Qual	nitted with the I	Request for C	Qualification by the subr
Instructions: In the s by your agency. This form should be o date noted in the Annu	pace below, please completed and subnual Request for Qual	nitted with the I	Request for C	Qualification by the subr
Instructions: In the s by your agency. This form should be condate noted in the Annu	pace below, please completed and subnual Request for Qual	nitted with the I	Request for C	Qualification by the subr

SCOPE OF SERVICES/STATEMENT OF QUALIFICATIONS FORM B

I. SERVICE DESCRIPTION
In the space below, please provide a brief description of the proposed service and your agency's qualifications and experience in providing this service. Include Private-pay rates for each service.
II. EMPLOYEE DETAILS In the space below, please provide the names, experience, qualifications, and applicable licenses held by the individual primarily responsible for servicing the Program and any other person(s), whether as employees or subcontractors, with specialized skills that would be assigned to service the Program.

COUNTY CONTRACTS FORM C

Instructions: In the space below, please provide a listing of all like or similar service contracts with other governmental/county programs and private/public sectors, including Memorandums of Understanding, to provide services listed on Form A. If no other service contracts exist, please mark N/A in the first space.

This form should be completed and submitted with the Request for Qualification by the submission date noted in the Annual Request for Qualification for Service Providers.

OTHER S	ERVICE CONTRACTS				
Agency	Contact Person	Service	Contract Dates	Unit Rate	Contract Amount

STATEMENT OF ASSURANCES FORM D

■ I ATTEST that [TYPE NAME OF AGENCY] is not currently in violation of any regulatory rules and regulations set forth by the Pennsylvania Department of Public Welfare (DPW), Pennsylvania Department of Aging (PDA), or Pennsylvania Department of Health (PDH) that may have any impact on our agency's operations.
□ I ATTEST that there are no conflicts of interest to which [TYPE NAME OF AGENCY] would be subject if it were to provide the requested service on behalf of Lackawanna County. If unable to attest to the above statement, please explain below:
☐ I ATTEST that [TYPE NAME OF AGENCY] is not involved in any current or pending litigation with
Lackawanna County or any of its Departments or Authorities. I ATTEST that [TYPE NAME OF AGENCY] currently carries the following types of insurance coverage:
 □ Workers' Compensation Insurance □ Commercial General Liability Insurance □ Professional Liability Insurance □ Automobile Insurance