

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF DEVELOPMENTAL DISABILITIES

REQUEST FOR PROPOSAL

**NADD Competency-Based IDD/MI Dual Diagnosis Direct Support
Professional Certification Pilot**

July 22, 2024

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Division of Developmental Disabilities

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I. Purpose and Intent

The New Jersey Department of Human Services (DHS), Division of Developmental Disabilities (DDD) is issuing this Request for Proposal (RFP) for provider agencies to support a minimum of 10%, up to a maximum of 100%, of their eligible direct support professionals (DSPs) in obtaining the National Association of the Dually Diagnosed (NADD) Competency-Based IDD/MI Dual Diagnosis Direct Support Professional Certification. **(Provider agencies enrolling 90% or more of their total DSP workforce will have an extra 10 points added to their overall score.)** To facilitate a culture of learning and application of NADD competency-based skills, agencies should identify and enroll into the NADD pilot **DSP cohorts** working at program(s) and/or site(s) where they are supporting at least one individual with an intellectual and/or developmental disability and co-occurring mental health needs.

This RFP is also open to Financial Management Services (FMS) vendors administering either of the DDD self-directed service models, Agency with Choice (AwC) or Vendor Fiscal/Employer Agent (VF/EA), to support eligible self-directed employees (SDEs) in obtaining the NADD Competency-Based IDD/MI Dual Diagnosis DSP Certification.

- Because the FMS vendor for the Agency with Choice model is the employer of record, they may act as a provider agency for eligible SDEs, as outlined in the Scope of Work section.
- Because the FMS vendor for the Vendor Fiscal/Employer Agent model **is not** the employer of record, they cannot act as a provider agency. However, they may submit a proposal to support eligible SDEs through NADD Individual Membership, Learning Management System access, and Certification. In the case of a VF/EA vendor proposal approved by DDD, the DDD Office of Education on Self-Directed Services (OESDS) will assist with SDE mentoring and progress tracking.

NADD Credential Background

It is estimated that more than a million people in the US have a dual diagnosis of an intellectual and/or development disability (IDD) and mental health needs/mental illness (MI). Direct support professionals (DSPs), including Self-Directed Employees (SDEs), support individuals with IDD/MI at home, at school, at work, and in the community. In general, DSPs and SDEs spend more time with service recipients than any other professional, and their level of competence directly affects the quality of life of those they serve. DSPs support skill building and help the person engage in recommended therapies on a day-to-day basis. This work requires an advanced level of skill and knowledge to do well.

To address this need, NADD developed the NADD Competency-Based IDD/MI Dual Diagnosis Direct Support Professional (DSP) Certification Program, in association with the National

Association of State Directors of Developmental Disabilities Services (NASDDDS), to certify the competency of DSPs who support people with dual diagnosis. NADD-DSP Certification:

- Validates and provides assurance to individuals, families, and employers that a DSP has met the standards established by NADD for delivering services to individuals with IDD/MI
- Adds another level of professionalization to the DSP career path by entitling those who pass the certification exam to use “NADD-DSP” as a credential
- Enhances quality, efficacy, and consistency of service delivery for people with IDD/MI

For a more in-depth understanding of the NADD DSP Certification, we encourage you to view the short video they created, [Introduction to NADD Direct Support Professional Certification](#).

Funding

Total funding available for this RFP, contingent on State appropriations, is \$3,000,000.00 (\$3M). The State will allocate \$1,000.00 per participating employee to successful bidders. (For example, a provider agency/FMS vendor with 50 participating employees would receive \$50,000). Successful bidders may not use funds from this grant for any purpose other than NADD remittance and compensation of participating employees.

Participating provider agencies/FMS vendors must:

1. **Remit** all NADD membership, training access, and certification fees directly to NADD. Since identifying the number of participating employees is a required proposal element, DDD expects agencies/FMS vendors to submit all fees for all participating employees at one time and within 60 days of receipt of State funding. (Please see [NADD Application Requirements](#) for details about coordinating applications and payments for multiple employees at one time).
 - a. Agencies/FMS vendors may hold back the annual membership fee(s) for Year 2 of the pilot, but are required to remit membership renewal fee(s) to NADD by their specific membership renewal due date.
2. **Compensate all participating employees for the average time needed to complete all five training modules** (two hours per module, ten hours total).
 - a. Provider agencies may compensate participating employees (including agency-assigned NADD Certification Coordinator) for training time by:
 - i. Allowing them to complete some or all training modules during scheduled work hours in exchange for their regular hourly compensation; and/or
 - ii. Issuing payments equally through another mechanism (Ex. stipend, bonus, etc.) to all participating employees for the average time needed to complete some or all training modules outside of scheduled work hours. Please note that FMS vendors are required to compensate participating employees equally via stipend payment(s).

3. **Compensate all participating employees for achieving certification and/or completing all available exam re-takes** by distributing remaining funds from this RFP equally to all participating employees. This value shall be based on the difference between this RFP's per-employee allocation of \$1,000.00 and the actual per-employee cost to the agency/FMS vendor (must be able to demonstrate actual per-employee cost).

NADD Membership Costs*

Two years of NADD Organizational Membership or Individual Memberships, whichever cost is lower for the provider agency. *(Note that NADD Membership and NADD Accreditation are two distinct statuses with distinct application criteria and costs. **This RFP requires NADD Membership.**)*

Annual Membership Type	Cost Per Year	× Contract Term	= Total Cost
Individual	\$ 99.00	× 2 years	\$198.00 per DSP
Agency Annual Revenue < \$2M	\$ 500.00	× 2 years	\$1,000.00
Agency Annual Revenue \$2M to \$10M	\$1,500.00	× 2 years	\$3,000.00
Agency Annual Revenue \$10M to \$25M	\$2,500.00	× 2 years	\$5,000.00
Agency Annual Revenue > \$25M	\$3,500.00	× 2 years	\$7,000.00

NADD Training and Certification Costs†

NADD Training/Certification Requirement	Cost per DSP
NADD Learning Management System (LMS) Fee	\$50.00
NADD Certification Application Fee	\$75.00
Completion of NADD Training Modules (average time is two hours per module, or ten hours total)	Average hourly wage (as determined by agency/vendor) × 10 hours

*NADD Membership Benefits:

- The Journal of Mental Health Research in Intellectual Disabilities
- Conference Discounts
- Discounts on educational and training materials (books, CDs, webinars, DVDs)
- Networking opportunities (connect with NADD network of professionals, care providers, and families)

†NADD DSP certification is valid for two years; to maintain the credential, employees must renew their certification every two years (a sponsoring agency or individual membership is required for recertification).

Summary of Anticipated RFP Schedule:

Date	Action	Notes
July 22, 2024	Notice of Funding Availability	
August 12, 2024	Close of Question-and-Answer Period	Q&A will be posted on the NJDHS RFP/Information page.
September 4, 2024	Proposal Submission Deadline	Proposals must be submitted to DDD.RFP@DHS.NJ.GOV no later than 5:00 p.m. ET.
TBD	Preliminary Award Notification	
TBD	Appeal Deadline	Appeals must be submitted to DDD-CO.LAPO@dhs.nj.gov no later than 5:00 p.m. ET.
TBD	Final Award Notification	

II. Background and Population to Be Served

The Division of Developmental Disabilities oversees the statewide coordination and delivery of publicly funded home and community-based services in New Jersey for about 26,500 adults aged 21 and older with intellectual and developmental disabilities, as well as operations for five developmental centers where about 1,000 individuals live and receive services. A significant subset of these individuals also has co-occurring mental and/or behavioral health needs that require support that is more specialized.

While the target population for the NADD DSP Dual Diagnosis Certification pilot is this subset (people with IDD and mental health needs), the increased knowledge, competency, and skill level acquired through certification will promote positive outcomes for any family, group, program, or residence where all or most DSPs have been certified.

III. Who Can Apply?

To be eligible for consideration, bidders must satisfy the following requirements:

- The bidder must be a non-profit, for-profit, or governmental entity.
- The bidder must be a DDD/Medicaid-approved agency with a proven history of providing one-to-one, small group, or congregate setting direct support to persons with IDD, and/or must be a Financial Management Services vendor currently administering one of the DDD self-directed service models.
- A DDD/Medicaid-approved provider agency must have all outstanding Plans of Correction submitted to DDD for approval prior to submitting a proposal.
- The bidder must be fiscally viable based upon an assessment of the bidder's audited financial statements. If a bidder is determined, at DDD's sole discretion, to be insolvent or to present insolvency within the twelve (12) months after bid submission, DDD will deem the bidder ineligible for contract award.

- The bidder must not appear on the State of New Jersey [Consolidated Debarment Report](#) or be suspended or debarred by any other State or Federal entity from receiving funds.
- Pursuant to DHS Contract Policy and Information Manual Policy Circular 8.05, the bidder shall not have a conflict, or the appearance of a conflict, between the private interests and the official responsibilities of a person in a position of trust. Persons in a position of trust include Provider Agency staff members, officers and Governing Board Members. A bidder must have written Conflict of Interest policies and procedures that satisfy the requirements of P8.05, thereby ensuring that paid Board members do not participate in transactions except as expressly provided in the P8.05 circular.
- Pursuant to N.J.S.A. 52:32-44, a for-profit applicant and each proposed subcontractor must have a valid Business Registration Certificate on file with the Division of Revenue, (i.e., this statutory requirement does not apply to non-profit organizations, private colleges and universities, or state and municipal agencies).

IV. Scope of Work

DDD is seeking to increase the capacity and competency of direct support professionals, including self-directed employees, to serve people with IDD and mental health needs by facilitating specialized dual diagnosis training and certification through the NADD Dual Diagnosis DSP Certification Program.

Provider agency applicants must identify a minimum of 10%, up to a maximum of 100% of their direct support professional employees who are eligible to apply for NADD-DSP Dual Diagnosis certification. **(Provider agencies enrolling 90% or more of their total DSP workforce will have an extra 10 points added to their overall score.)** FMS vendor applicants may identify the minimum number of self-directed eligible employees they will sponsor (and may decline the award if they are unable to meet their identified minimum within sixty days of award notification). Provider agencies and FMS vendors should select employees for the pilot who will commit to completing the required training modules in the NADD Learning Management System (LMS), and preparing for and completing the NADD Dual Diagnosis DSP Certification exam.

While passing the exam is not a requirement of this pilot, employee certification is the expected outcome. NADD allows employees to re-take the exam up to three times, with a one-month waiting period between each re-take. Employees enrolled in this pilot who do not pass the certification exam on the first try are required to re-take the exam at least one additional time and preferably until they pass and are certified, up to the NADD maximum of three re-takes.

Provider Agency Requirements

1. Obtain annual NADD Organizational Membership and renew membership in the second consecutive year of the two-year pilot, or support enrolled employees in obtaining annual NADD Individual Membership and renewing membership in the second consecutive year of the two-year pilot (whichever is the lesser in aggregate cost for the bidder). *(Note that NADD Membership and NADD Accreditation are two distinct statuses with distinct application criteria and costs. **This RFP requires NADD Membership.**)*
2. Identify and enroll into the pilot eligible employees and employee cohorts.
3. Identify, enroll into the pilot, and submit to DDD a list of program(s) and/or site(s) where at least one enrolled employee or employee cohort will be working.
4. Provide pre- and post-pilot metrics reports to DDD for enrolled program(s) and/or site(s), to include:
 - a. Employee turnover/retention rate per enrolled program/site, each month of the six months preceding RFP application and each month of the six months following certification of all or a majority of employees in the enrolled program/site.
 - b. Incident report data on average number of behavior-involved 911 calls and emergency room visits per enrolled program/site, each month of the six months preceding RFP application and each month of the six months following certification of all or a majority of employees in the enrolled program/site.
5. Assign at least one supervisor or other upper-level staff person to act as the agency's lead for the NADD certification pilot (NADD Certification Coordinator), whose responsibilities are to:
 - a. Complete the NADD LMS training modules: *Assessment and Observation, Behavior Support, Crisis Intervention and Prevention, Health and Wellness, Community Collaboration and Teamwork*. (Average time to complete all trainings is 10 hours.)
 - b. Complete the certification application process and obtain certification. (Ideally, the Certification Coordinator would complete the training and certification process before other employees, since their role is to mentor and support; however, this will depend on time constraints).
 - c. Attend quarterly Coordinator Forums hosted by The Boggs Center (if unable to attend, designate an alternate to ensure agency representation each quarter).
 - d. As needed, work directly with NADD for technical assistance.
 - e. Support and mentor enrolled employees in completing the NADD training modules within the specified timeframe, and with preparation and review for the NADD Dual Diagnosis DSP Certification exam.
 - f. Address remediation needs of employees who do not pass the exam, including review and preparation for re-taking the exam a minimum of one time and up to three times, if necessary, with one month between each re-taking.
 - g. Track, at minimum, the following benchmarks for each participating employee, reported quarterly to DDD:
 - i. Submitted online NADD Certification Application
 - ii. Completed all NADD training modules
 - iii. Completed first exam

- iv. Achieved certification
- 6. For DDD incident reporting during the two-year pilot:
 - a. For incidents involving an employee who has passed the certification exam, enter *NADD-Certified DSP* in the “Medical License or Certification” field.
 - b. For incidents involving an employee enrolled in the pilot but not certified, enter *NADD-Enrolled DSP (Not Certified)* in the “Medical License or Certification” field.
- 7. Remit all NADD fees, including membership, training access, and certification fees directly to NADD at one time, for all participating employees. Please see [NADD Application Requirements](#) for details about coordinating payments for multiple employees at one time.
 - a. If an agency has multiple DSPs who will be requesting NADD-required letters of reference from the same one or two agency supervisors, either of the following two options is acceptable for submitting those letters of reference:
 - i. The agency may submit to NADD a single Excel spreadsheet that includes each employee’s name and the supervisor responses for questions 1-5 on [Attachment G](#) of this RFP, OR
 - ii. Using [Attachment G](#) as a sample template, the supervisor may complete a separate letter of reference for each employee, with responses for questions 1-5, and provide a letter to each employee for uploading at the time they submit their NADD certification application.
- 8. At the end of the two-year pilot, submit a [NADD Certification Pilot Expenditure Report](#) to DDD demonstrating how the provider agency dispersed the \$1000-per employee allocation in alignment with the RFP parameters. Submit the expenditure report by email to DDD.ProviderAttestation@dhs.nj.gov. (Expenditure report template will be posted together with this RFP). Because FMS vendors will submit quarterly payment reports to DDD, for a pilot with SDE-participants only they do not need to submit an end-of-pilot expenditure report.

FMS Vendor Requirements

- 1. Identify and enroll into the pilot eligible employees.
- 2. Assign a higher-level staff person to act as a liaison with DDD Office of Education on Self-Directed Services (OESDS) on a regular basis about employee progress, to raise any questions or concerns, and to track, at minimum (with OESDS support) the following benchmarks for each participating employee, reported quarterly to DDD:
 - a. Submitted online NADD Certification Application
 - b. Completed all NADD training modules
 - c. Completed first exam
 - d. Achieved certification
- 3. Provide DDD OESDS with a list of enrolled/participating SDEs.
- 4. Remit all NADD fees, for both initial and renewal Individual Memberships, training access, and certification directly to NADD at one time, for all participating employees, within sixty days of receipt of funding from the State. Please see [NADD Application Requirements](#) for details about coordinating payments for multiple employees at one time.

5. Track employee payments in each employee's portal, reported quarterly to DDD.

Requirements for a Bidder that is Both a Provider Agency and FMS Vendor

For all agency-hired DSPs, complete Provider Agency Requirements items 1 – 7 and for all SDEs complete FMS Vendor Requirements 1 – 6 with the following exceptions:

1. Identify the anticipated number and percentage of DSPs and DSP cohorts **separately** from the anticipated number of SDEs.
2. For the purpose of NADD membership, you may include both DSPs and SDEs under the umbrella of an Organizational Membership.
3. The agency staff assigned as the NADD Certification Coordinator (#5 in Provider Agency Requirements) can also be assigned as the DDD OESDS liaison on behalf of SDEs (#2 in FMS Vendor Requirements), or different staff can be identified for each role.

DSP/SDE Requirements

Employees enrolled in the pilot should complete all steps through completion of first certification exam within **six months** of activation in the NADD LMS.

1. NADD Certification

- a. **NADD Membership:** sponsoring agency/vendor must directly pay the organizational or individual membership fees for all participating employees with funds allocated through this RFP.
- b. **Application Fee:** sponsoring agency/vendor must directly pay the certification application fees for all participating employees through funds allocated from this RFP (\$75.00 per employee).
- c. **Work Experience:** employee must have a minimum of one year of paid or volunteer work in the developmental disability or mental health field and must have completed 1,000 hours of direct support work.
- d. **References:** employee must submit two letters of reference to NADD before application for certification will be approved: one from current or most recent supervisor, and one from a person who has received or is receiving services from the applicant, or their family member or authorized representative (see Appendix G: Letter of Reference Sample Template).
- e. **Code of Ethics:** employee must sign the National Alliance for Direct Support Professionals (NADSP) [Code of Ethics](#) and be employees in good standing with their employer.

2. NADD Training

The NADD-DSP Certification is a competency-based certification intended to validate an employee's understanding of a set of standards (or competencies) for providing services

to individuals with intellectual/developmental disabilities and mental health needs. Enrolled employees are required to complete the NADD training modules on [DSP Certification Competency Areas](#). On average, it takes 1.5 – 2 hours per module, or 10 hours total, to complete all five of the NADD competency-area training modules:

- a. Assessment and Observation
- b. Behavior Support
- c. Crisis Intervention and Prevention
- d. Health and Wellness
- e. Community Collaboration and Teamwork

3. NADD Discussion-based Review

Participation in Virtual Learning Collaboratives hosted by The Boggs Center is voluntary but strongly encouraged.

4. DSP/SDE Baseline Survey

Participating employees must complete the DSP/SDE Baseline Survey (see Attachment H) at three different intervals:

- a. Pre-training (before beginning NADD training modules)
- b. Post-exam (after employee has passed certification exam and/or exhausted all exam re-takes)
- c. At 12 months after an employee becomes certified or after they have completed retakes and have not passed the exam.

Survey responses are anonymous and employees will complete the survey online. See Attachment H for the sample survey.

V. General Contracting Information

Applicants must currently meet, or be able to meet, the terms and conditions of the DHS contracting policies and procedures as set forth in the [Standard Language Document](#), [Contract Reimbursement Manual](#), and [Contract Policy and Information Manual](#) found on the [DHS Contracting](#) webpage.

Applicants are required to comply with the Affirmative Action Requirements of Public Law 1975, c. 124 (N.J.A.C. 17:27) and the requirements of the Americans with Disabilities Act of 1991 (P.L. 101-336).

Applicants must adhere to all applicable State and Federal cost principles. Budgets should be reasonable and reflect the scope of responsibilities in order to accomplish the goals of this pilot.

DHS/DDD will notify all applicants in writing of the intent to award a contract. All proposals are public information and DHS/DDD will make them available after announcement of the contract awards and prior to final awards, as well as through the State Open Public Records Act process at the conclusion of the RFP process.

Applicants must comply with all rules and regulations for any DDD program element of service proposed by the applicant. Additionally, please take note of the [N.J.A.C 10:40 DDD Organizational Rules](#), which apply to all contracted developmental disabilities services.

Successful applicants may only use contract funds to support services that are specific to this award; applicants may not use contract funds to supplant or duplicate existing funding streams. Successful applicants must equally pass any funds in excess of the programmatic costs (\$1,000 per DSP) to enrolled DSPs and agency NADD Certification Coordinator.

VI. Required Proposal Content

To ensure consistency and fairness of evaluation, DDD requires that each bidder seeking funding through this RFP to submit a proposal that includes, at a minimum, the components listed below.

Proposals, including attachments, should not exceed 20 pages and must include responses that clearly correspond to each category as delineated below.

Funding Proposal Cover Sheet (Attachment A)

Bidder's Organization, History, and Experience (15 points)

Provide a brief written narrative of the provider agency/FMS vendor, to include the following:

1. Provide an overview of agency/vendor's history, mission, purpose, current licenses, services provided, and record of accomplishments. Explain your work with the target population (people with IDD and mental health needs).
2. Explain why the agency/vendor is qualified to implement this pilot.
3. Explain the agency/vendor's administrative and organizational capacity to carry out the pilot.
4. If you are a provider agency:
 - a. Summarize steps in place to enhance staff retention, such as adequate support and supervision, training, incentives, and competitive salary offerings.
 - b. Indicate your status as a DDD/Medicaid-approved provider of Day Habilitation, Individual Supports, Community Based Supports, and any other DSP-delivered service.
 - c. Confirm your attainment of a DDD-approved policy and procedure manual in compliance with all DDD Circulars, or a realistic timeframe for attaining this.
5. Indicate the agency/vendor's status and history relative to debarment by any State, Federal, or local government agency. If there is debarment activity, you must explain with supporting documentation as an appendix to the proposal.

6. Explain all active litigation in which the agency/vendor is involved, including pending litigation of which the agency has received notice. Failure to disclose active or pending litigation may, at DDD's sole discretion, result in the agency/vendor being ineligible for contract award.
7. Non-profit agencies/vendors must submit a resolution on Board letterhead, signed by all Board members, listing members and indicating the Board's full support and commitment.
8. For-profit agencies/vendors must submit a letter indicating full support and commitment from the President or Chief Executive Officer on agency/vendor letterhead.
9. Describe the agency/vendor's status and compliance regarding programmatic performance, level of service, and compliance with all applicable licensing standards and requirements for settings where participating employees and/or cohorts provide service.
10. Include written assurance of the agency/vendor's commitment to work cooperatively, as applicable, with DDD, NADD, and The Boggs Center.

Pilot Description: (30 points)

Provide an overview of how the provider agency/FMS vendor will implement the scope of work, to include the following:

If you are a provider agency:

1. Indicate whether you will seek NADD Organizational Membership or Individual Memberships.
2. Indicate the number of employees you will enroll in the pilot and the percentage of your total DSP workforce that represents (minimum 10%). Briefly explain the process you used/will use to select employees to participate.
NOTE: A provider agency enrolling 90% or more of their total DSP workforce will have 10 points added to their overall score.
3. Briefly explain the criteria you will use to identify the agency's NADD Certification Coordinator and how the agency will support that person in carrying out that role.

Provide the agency/vendor's timeline for these benchmarks:

1. Submission of pre-pilot metrics report to DDD (provider agencies only)
2. Enrollment of employees and/or employee cohorts into the pilot (including NADD Certification Coordinator for provider agencies)
3. Direct Payment to NADD of all fees for all participating employees, including membership, LMS access, and certification application
4. If you are a provider agency:
 - a. Completion by NADD Certification Coordinator of all training modules
 - b. Completion by NADD Certification Coordinator of initial certification exam

5. Completion by all participating employees of:
 - a. Baseline Survey #1 (completed before beginning NADD training modules)
 - b. All five NADD training modules
 - c. Certification exam
 - d. Baseline Survey #2 (after certification exam is completed, regardless of employee passing or not)
 - e. Baseline Survey #3 (12 months after employee passes exam and obtains certification (including if the exam passed is a retake), or after employee has exhausted all retakes and has not passed the exam)
6. Submission of post-pilot metrics report to DDD (provider agencies only)

Outcome(s) and Evaluation (30 points)

1. Provide a summary of expected outcomes for enrolled employees, and the individuals, families, program(s) and/or site(s) they serve.
2. In addition to comparison of pre-pilot and post-pilot metrics required by the RFP (for provider agencies), discuss how the agency/vendor will evaluate success in terms of the individuals/programs/sites served and, where applicable, families and guardians. Include any internal methods, tools, and/or outside entities that may be used.
3. Discuss any potential long-term commitment to NADD membership and/or continuance of some level of agency/vendor-supported NADD DSP Dual Diagnosis Certification.

Facilities, Equipment (10 points) – these points do not apply to FMS vendor score

If you are a provider agency, discuss how you will support the agency-assigned NADD Certification Coordinator and participating employees in completing trainings, and reviewing and preparing for the certification exam.

Budget (15 points)

Award recommendations will be based on proposal score (possible total of 100 for provider agencies, and 90 for FMS vendors), quality and appropriateness, bidder history and experience, and proposed use of budgeted funds. DDD will consider the cost efficiency of the bidder's proposed budget timeline as it relates to the scope of work.

1. Bidders should outline how they will disburse the \$1,000-per employee funding to encourage employee participation, optimize the potential for employee success, and support positive outcomes for the individuals, families, programs, and sites involved.
 - a. At the end of the two-year pilot, submit a [NADD Certification Pilot Expenditure Report](#) to DDD demonstrating how the provider agency dispersed the \$1000-per employee allocation in alignment with the RFP parameters. Submit the expenditure report by email to DDD.ProviderAttestation@dhs.nj.gov. (Expenditure report template will be posted together with this RFP). Because FMS

- vendors will submit quarterly payment reports to DDD, for a pilot with SDE-participants only they do not need to submit an end-of-pilot expenditure report.
2. Bidders must provide written assurance that if the agency/vendor receives an award pursuant to this RFP, it will use all revenue received through the award only for this purpose.
 3. Proposal must include the name and address of any other entity providing support and/or money to help fund the proposed pilot.

Appendices

The enumerated items of Required Attachments #1 through #10 and Appendices #1 through #8 must be included with the proposal. Required Attachments #7 through #9 are required unless the applicant has a current contract with DDD and these documents are current and on file with DDD.

The collective limit of Required Attachments and Appendices is 50 pages. Audits and interim financial statements (Required Attachments #8 and #9) do not count towards the appendices' 50-page limit. If appendix information exceeds 50 pages, DDD will not review it.

Required Attachments

1. Department of Human Services Statement of Assurances (RFP Attachment C)
2. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions (RFP Attachment D)
3. [Disclosure of Investment Activities in Iran¹](https://www.nj.gov/treasury/purchase/forms.shtml)
4. [Certification of Non-Involvement in Prohibited Activities in Russia or Belarus²](https://www.nj.gov/treasury/purchase/forms.shtml)
5. Statement of Agency [Ownership Disclosure³](https://www.nj.gov/treasury/purchase/forms.shtml)
6. Disclosure of Investigations and Other Actions Involving Bidder⁴
7. Pursuant to Policy Circular P. 11, a description of all pending and in-process audits identifying the requestor, the firm's name and telephone number, and the type and scope of the audit
8. Audited financial statements and Single Audits (A133), prepared for the two most recent fiscal years
9. All interim financial statements prepared since the end of the bidder's most recent fiscal year. If interim financial statements have not already been prepared, provide interim financial statements (balance sheet, income statement and cash flows) for the current fiscal year through the most recent quarter ended prior to submission of the bid

¹ <https://www.nj.gov/treasury/purchase/forms.shtml>

² <https://www.nj.gov/treasury/purchase/forms.shtml>

³ <https://www.nj.gov/treasury/purchase/forms.shtml>

⁴ <https://www.nj.gov/treasury/purchase/forms.shtml>

10. Department of Human Services Commitment to Defend and Indemnify Form (Attachment F)

Appendices

1. Copy of documentation of the agency's [charitable registration status](#)
2. Agency mission statement
3. Agency organizational chart
4. Job descriptions of key personnel
5. List of the board of directors, officers and terms
6. Original and/or copies of letters of commitment/support
7. Cultural Competency Plan
8. Any additional attachments requested in the written narrative section

VII. Submission of Proposal Requirements

Format and Submission Requirements

DDD assumes no responsibility and bears no liability for costs incurred by the bidder in the preparation and submittal of a proposal in response to this RFP.

The narrative portion of the proposal should not exceed 20 pages, be single-spaced with 1-inch margins, and no smaller than 12-point Arial, Calibri or Times New Roman font. The budget template and appendix items do not count toward the narrative page limit.

Question Submission: Bidders may submit questions to DDD at DDD.RFP@DHS.NJ.GOV no later than 5:00 p.m. ET on August 12, 2024. Questions and answers will be posted on the [NJDHS RFP/Information](#) webpage.

Proposal Submission: Bidders must submit a single PDF inclusive of all required documents, together with the proposal budget, by email to DDD.RFP@DHS.NJ.GOV no later than 5:00 p.m. ET on September 4, 2024.

Confirmation of Receipt of Proposal: Bidders submitting a proposal by the deadline will receive a Confirmation of Receipt of Proposal email from DDD within one business day of their submission. Bidders who submit a proposal by the deadline and do not receive email confirmation should reach out immediately to Diane.Fynn@dhs.nj.gov.

Confidentiality/Commitment to Defend and Indemnify

Pursuant to the New Jersey Open Public Records Act (OPRA), N.J.S.A. 47:1A-1 et seq., or the common law right to know, proposals can be released to the public in accordance with N.J.A.C. 17:12-1.2(b) and (c).

Bidder should submit a completed and signed Commitment to Defend and Indemnify Form (Attachment F) with the proposal. In the event that bidder does not submit the Commitment to Defend and Indemnify Form with the proposal, DHS reserves the right to request that the bidder submit the form after proposal submission.

After the opening of the proposals, all information submitted by a bidder in response to a Bid Solicitation is considered public information notwithstanding any disclaimers to the contrary submitted by a bidder. Proprietary, financial, security and confidential information may be exempt from public disclosure by OPRA and/or the common law when the bidder has a good faith, legal/factual basis for such assertion.

As part of its proposal, a bidder may request that portions of the proposal be exempt from public disclosure under OPRA and/or the common law. Bidder must provide a detailed statement clearly identifying those sections of the proposal that it claims are exempt from production, and the legal and factual basis that supports said exemption(s) as a matter of law. DHS will not honor any attempts by a bidder to designate its price sheet, price list/catalog, and/or the entire proposal as proprietary and/or confidential, and/or to claim copyright protection for its entire proposal. If DHS does not agree with a bidder's designation of proprietary and/or confidential information, DHS will use commercially reasonable efforts to advise the bidder. Copyright law does not prohibit access to a record which is otherwise available under OPRA.

DHS reserves the right to make the determination as to what to disclose in response to an OPRA request. Any information that DHS determines to be exempt from disclosure under OPRA will be redacted.

In the event of any challenge to the bidder's assertion of confidentiality that is contrary to the DHS' determination of confidentiality, the bidder shall be solely responsible for defending its designation, but in doing so, all costs and expenses associated therewith shall be the responsibility of the bidder. DHS assumes no such responsibility or liability.

In order not to delay consideration of the proposal or DHS' response to a request for documents, DHS requires the bidder respond to any request regarding confidentiality markings within the timeframe designated in DHS' correspondence regarding confidentiality. If no response is received by the designated date and time, DHS will be permitted to release a copy of the proposal with DHS making the determination regarding what may be proprietary or confidential.

VIII. Review of Proposals

A committee consisting of public employees will review proposals submitted by 5:00 p.m. ET on the Proposal Submission Deadline.

Provider agency bidders must obtain a minimum score of 70 points out of a total of 100 points possible, and FMS vendors must obtain a minimum of 60 points out of a total of 90 points possible for the proposal narrative and budget sections to be eligible for funding. In the event no bidder obtains the required minimum scores, DDD shall have discretion to award the contract to the highest scoring bidder(s).

In addition, if a bidder is determined, in DDD's sole discretion, to be insolvent or to present insolvency within the twelve months after bid submission, DDD will deem the proposal ineligible for contract award.

The review committee bases contract award recommendations on such factors as the proposal scope, quality and appropriateness, bidder history and experience, and budget reasonableness. The review committee will look for evidence of cultural competence in each section of the narrative. The review committee may choose to visit a bidder's existing program(s), invite a bidder for interview, and/or review any programmatic or fiscal documents in the possession of DDD. The contract award may be conditional upon final contract and budget negotiation.

DDD reserves the right to reject proposals when circumstances indicate that it is in DDD's best interests to do so. DDD's best interests in this context include but are not limited to loss of funding, inability of the bidder(s) to provide adequate services, an indication of misrepresentation of information and/or non-compliance with State and federal laws and regulations, existing DHS contracts, and procedures set forth in DHS Policy Circular P1.04.

DDD will notify all bidders of contract awards, contingent upon the satisfactory final negotiation of a contract, by the final allocation date.

IX. Appeal of Award Decisions

Only bidders who submitted a proposal for this RFP may appeal the award decision. Appeals must be made in writing and clearly state the basis for the appeal, and be received by the DDD at the mail or email address below no later than 5:00 p.m. ET on the appeal due date.

Bidders may submit appeals as follows.

By US Postal Service:

Jonathan Seifried
Assistant Commissioner
NJ DDD of Developmental Disabilities
PO Box 726
Trenton, NJ 08625-0726

By Email: DDD-CO.LAPO@dhs.nj.gov

Please note that all costs connected to an appeal of a DDD decision are unallowable costs with respect to DDD contract funding.

DDD will review all appeals and issue a final decision thereafter.

Bidders may file an appeal based on the determination to the DDD Director within seven calendar days following receipt of the notification. DDD shall only consider an appeal of the selection process if it is alleged DDD violated a statutory or regulatory provision in the awarding of the contract. DDD will not consider an appeal based on a challenge to the evaluation of a proposal.

X. Post Award Required Documentation

Upon final contract award announcement, the successful bidder(s) must be prepared to submit (if not already on file), one original signed document for those requiring a signature or copy of the following documentation (unless noted otherwise) in order to process the contract in a timely manner, as well as any other contract documents required by DHS/DDD.

1. Most recent IRS Form 990/IRS Form 1120, and Pension Form 5500 (if applicable) (submit two copies);
2. Copy of the Annual Report-Charitable Organization (link);
3. List of all current contracts and grants as well as those for which the bidder has applied from any Federal, state, local government or private agency during the contract term proposed herein, including awarding agency name, amount, period of performance, and purpose of the contract/grant, as well as a contact name for each award and the phone number;
4. Board Resolution identifying the authorized staff and signatories for contract actions on behalf of the bidder;
5. Current Agency By-laws;
6. Current Personnel Manual or Employee Handbook;
7. Copy of Lease or Mortgage;
8. Certificate of Incorporation;
9. Co-occurring policies and procedures;
10. Policies regarding the use of medications, if applicable;
11. Policies regarding Recovery Support, specifically peer support services, if applicable;
12. Conflict of Interest Policy;
13. Affirmative Action Policy;
14. Affirmative Action Certificate of Employee Information Report, newly completed AA 302 form, or a copy of Federal Letter of Approval verifying operation under a federally approved or sanctioned Affirmative Action program. (AA Certificate must be submitted within 60 days of submitting completed AA302 form to Office of Contract Compliance);
15. A copy of all applicable licenses;
16. Local Certificates of Occupancy;

17. Master lease agreements, evidence of all State (non-DDD), federal and local housing subsidies and resources.
18. Current State of New Jersey Business Registration;
19. Procurement Policy;
20. Current equipment inventory of items purchased with DHS funds (Note: the inventory shall include: a description of the item [make, model], a State identifying number or code, original date of purchase, purchase price, date of receipt, location at the Provider Agency, person(s) assigned to the equipment, etc.);
21. All subcontracts or consultant agreements, related to the DHS contract, signed and dated by both parties;
22. Business Associate Agreement (BAA) for Health Insurance Portability Accountability Act of 1996 compliance, if applicable, signed and dated;
23. Updated single audit report (A133) or certified statements, if differs from one submitted with proposal;
24. Business Registration Certificate (Agencies that have done business with the State previously can obtain a copy through [Online Business Registration Certificate Service](#); Agencies doing business with the State for the first time it may register through the Division of Revenue and Enterprise Services' [Getting Registered](#) webpage);
25. [Source Disclosure Form](#) (EO129) (www.nj.gov/treasury/purchase/forms.shtml);
26. [Chapter 51 Pay-to-Play Certification](#).

Attachment A – Proposal Cover Sheet

Date Received

Name of RFP _____

Incorporated Name of Bidder: _____

Type: ☐ Public ☐ Profit ☐ Non-Profit ☐ Hospital-Based

Federal ID Number: _____ Charities Reg. Number (if applicable) _____

Bidder Address: _____

Contact Person Name and Title: _____

Phone: _____ Email Address: _____

Total dollar amount requested: _____ Fiscal Year End: _____

Funding Period: From: _____ To: _____

Total number of consumers to be served: _____

Counties where services will be provided: _____

Brief description of services by program name and level of service bidder will provide:

Authorization

Chief Executive Officer (printed name): _____

Signature: _____ Date: _____

Attachment B – Addendum to RFP for Social Service and Training Contracts

New Jersey Department of Human Services Addendum to Request for Proposal for Social Service and Training Contracts

Executive Order No. 189 establishes the expected standard of responsibility for all parties that enter into a contract with the State of New Jersey. All such parties must meet a standard of responsibility that assures the State and its citizens that such parties will compete and perform honestly in their dealings with the State and avoid conflicts of interest.

As used in this document, "provider agency" or "provider" means any person, firm, corporation, or other entity or representative or employee thereof that offers or proposes to provide goods or services to or performs any contract for the Department of Human Services.

In compliance with Paragraph 3 of Executive Order No. 189, no provider agency shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any State officer or employee or special State officer or employee, as defined by N.J.S.A. 52:13D-13b and e, in the Department of the Treasury or any other agency with which such provider agency transacts or offers or proposes to transact business, or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13i, of any such officer or employee, or any partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13g.

The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any State officer or employee or special State officer or employee from any provider agency shall be reported in writing forthwith by the provider agency to the Attorney General and the Executive Commission on Ethical Standards.

No provider agency may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such provider agency to, any State officer or employee or special State officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to any State agency or any instrumentality thereof, or with any person, firm or entity with which he is employed or associated or in which he has an interest within the meaning of N.J.S.A. 52:13D-13g.

Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, which may grant a waiver of this restriction upon application of the State officer or employee or special State officer or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest.

No provider agency shall influence, or attempt to influence or cause to be influenced, any State officer or employee or special State officer or employee in his official capacity in any manner which might tend to impair the objectivity or independence of judgment of said officer or employee.

No provider agency shall cause or influence, or attempt to cause or influence, any State officer or employee or special State officer or employee to use, or attempt to use, his official position to secure unwarranted privileges or advantages for the provider agency or any other person.

The provisions cited above shall not be construed to prohibit a State officer or employee or special State officer or employee from receiving gifts from or contracting with provider agencies under the same terms and conditions as are offered or made available to members of the general public subject to any guidelines the Executive Commission on Ethical Standards may promulgate.

Attachment C – Statement of Assurances

New Jersey Department of Human Services Statement of Assurances

As the duly authorized Chief Executive Officer/Administrator, I am aware that submission to the Department of Human Services of the accompanying application constitutes the creation of a public document that may be made available upon request at the completion of the RFP process. This may include the application, budget, and list of applicants (bidder's list). In addition, I certify that the applicant:

- Has legal authority to apply for the funds made available under the requirements of the RFP, and has the institutional, managerial and financial capacity (including funds sufficient to pay the non-Federal/State share of pilot costs, as appropriate) to ensure proper planning, management and completion of the pilot described in this application.
- Will give the New Jersey Department of Human Services, or its authorized representatives, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with Generally Accepted Accounting Principles (GAAP). Will give proper notice to the independent auditor that DHS will rely upon the fiscal year end audit report to demonstrate compliance with the terms of the contract.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. This means that the applicant did not have any involvement in the preparation of the RFP, including development of specifications, requirements, statement of works, or the evaluation of the RFP applications/bids.
- Will comply with all federal and State statutes and regulations relating to non-discrimination. These include but are not limited to: 1) Title VI of the Civil Rights Act of 1964 (P.L. 88-352; 34 CFR Part 100) which prohibits discrimination based on race, color or national origin; 2) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794; 34 CFR Part 104), which prohibits discrimination based on handicaps and the Americans with Disabilities Act (ADA), 42 U.S.C. 12101 et seq.; 3) Age Discrimination Act of 1975, as amended (42 U.S.C. 6101 et. seq.; 45 CFR part 90), which prohibits discrimination on the basis of age; 4) P.L. 2975, Chapter 127, of the State of New Jersey (N.J.S.A. 10:5-31 et. seq.) and associated executive orders pertaining to affirmative action and non-discrimination on public contracts; 5) federal Equal Employment Opportunities Act; and 6) Affirmative Action Requirements of PL 1975 c. 127 (NJAC 17:27).
- Will comply with all applicable federal and State laws and regulations.

- Will comply with the Davis-Bacon Act, 40 U.S.C. 276a-276a-5 (29 CFR 5.5) and the New Jersey Prevailing Wage Act, N.J.S.A. 34:11-56.27 et seq. and all regulations pertaining thereto.
- Is in compliance, for all contracts in excess of \$100,000, with the Byrd Anti-Lobbying amendment, incorporated at Title 31 U.S.C. 1352. This certification extends to all lower tier subcontracts as well.
- Has included a statement of explanation regarding any and all involvement in any litigation, criminal or civil.
- Has signed the certification in compliance with federal Executive Orders 12549 and 12689 and State Executive Order 34 and is not presently debarred, proposed for debarment, declared ineligible, or voluntarily excluded. The applicant will have signed certifications on file for all subcontracted funds.
- Understands that this provider agency is an independent, private employer with all the rights and obligations of such, and is not a political subdivision of the Department of Human Services.
- Understands that unresolved monies owed the Department and/or the State of New Jersey may preclude the receipt of this award.

Applicant Organization

Signature: CEO or equivalent

Date

Typed Name and Title

6/97

Attachment D – Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

Read the attached Instructions for Certification before signing, as they are an integral part of certification.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions

1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by a Federal department or agency.
2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Name and Title of Authorized Representative

Signature

Date

This certification is required by the regulations implementing Executive order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510.

**Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions**

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of facts upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant

may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-Procurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarments.

Attachment E – Mandatory Equal Employment Opportunity Language

MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE

N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)

N.J.A.C. 17:27

GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affection-al or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, up-grading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprentice-ship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act. The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement

bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval;

Certificate of Employee Information Report; or

Employee Information Report Form AA-302 (electronically provided by the Division through the Division's website at: http://www.state.nj.us/treasury/contract_compliance).

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to N.J.A.C. 17:27-1.1 et seq.

Attachment F – Commitment to Defend and Indemnify Form

Department of Human Services Commitment to Defend and Indemnify Form

I, _____, on behalf of _____ (“Company”) agree that the Company will defend, and cooperate in the defense of, any action against the State of New Jersey (“State”) or the New Jersey Department of Human Services (“DHS”) arising from, or related to, the non-disclosure, due to the Company’s request, of documents submitted to the State of New Jersey and DHS, and relating to the Request for Proposals for NADD Competency-Based IDD/MI Dual Diagnosis Direct Support Professional Certification Pilot (“RFP”), which may become the subject of a request for government records under the New Jersey Open Public Records Act, N.J.S.A. 47:1A-1 et seq. (“OPRA”). The Company agrees to indemnify and hold harmless the State and DHS against any judgments, costs, or attorney’s fees assessed against the State of New Jersey or DHS in connection with any action arising from, or related to, the non-disclosure, due to the Company’s request, of documents submitted to the State and DHS, and relating to the RFP, which may become the subject of a request for government records under OPRA. The Company makes the foregoing agreement with the understanding that the State and DHS may immediately disclose any documents withheld without further notice if the Company ceases to cooperate in the defense of any action against the State arising from or related to the above described non-disclosure due to the Company’s request. I further certify that I am legally authorized to make this commitment and thus commit the Company to said defense.

Signature

Print Name

Title

Entity Represented

Date

Attachment G – Letter of Reference Sample Template

NADD Direct Support Professional Certification Program Letter of Reference

Instructions to the Applicant: At the time you complete the certification application, you will need to upload two letters of reference. One reference should be a person who has received services from you or their representative. The second reference should be a supervisor from your current, or most recent, employment.

The letter of reference should include the information below.

Name of Certification Applicant: _____

Reference Name: _____

Reference Address: _____

Reference Phone: _____ Email: _____

1. How long have you known the applicant?
2. How/ in what context do you know the applicant?
3. Provide a statement about the applicant's ability to work with individuals who have intellectual and/or developmental disability (IDD) and mental health needs. (This should include appraisal of applicant's knowledge, skills, and level of competency.
4. Describe any personal qualities and/or professional contributions that distinguish the applicant in providing direct support to individuals with IDD and mental health needs.
5. Indicate any concerns you may have regarding DSP certification of this applicant.

Attachment H – Baseline Survey for Participating Employees

Baseline Survey for Employees Enrolled in the NADD DSP Dual Diagnosis Certification Pilot

Please answer all questions as honestly as possible. Your responses are anonymous.

How many years, **in total**, have you been providing paid or volunteer direct support to one or more people with intellectual and developmental disabilities (IDD), with mental health needs, and/or with both IDD and mental health needs?

- ☐ 2 Years or Less ☐ 3 to 5 Years ☐ 5 to 10 Years ☐ More than 10 Years

I primarily provide direct support to people (check one):

- ☐ in a group residence ☐ in the community
☐ in their own home ☐ accessing health services
☐ at a day program ☐ other _____
☐ seeking competitive employment

1. I feel confident in my ability to support people with Dual Diagnosis (IDD and mental health needs.)

- ☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

2. I have the tools and knowledge to respond to the needs of people with Dual Diagnosis.

- ☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

3. I receive training and resources I need to do my job well.

- ☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

4. I feel supported and valued in my job role.

- ☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree

5. I have received training in the following areas (check all that apply):

- ☐ Dual Diagnosis
- ☐ Assessment and Observation
- ☐ Crisis Intervention and Prevention
- ☐ Behavior Support
- ☐ Health and Wellness
- ☐ Community Collaboration and Teamwork

6. Rate your skills in the following areas:

Assessment and Observation

- ☐ I have extensive skills
- ☐ I have some skills
- ☐ I have limited skills
- ☐ I have no skills

Crisis Intervention and Prevention

- ☐ I have extensive skills
- ☐ I have some skills
- ☐ I have limited skills
- ☐ I have no skills

Behavior Support

- ☐ I have extensive skills
- ☐ I have some skills
- ☐ I have limited skills
- ☐ I have no skills

Health and Wellness

- ☐ I have extensive skills
- ☐ I have some skills
- ☐ I have limited skills
- ☐ I have no skills

Community Collaboration and Teamwork

- ☐ I have extensive skills
- ☐ I have some skills
- ☐ I have limited skills
- ☐ I have no skills

7. I feel confident in my ability to:

Observe and assess behavior change

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Use tools to document behavior change

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Describe behavior in observable terms using objective language

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Create positive and supportive physical and social environments

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Provide strategies to support positive behavior

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Prevent a crisis

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Manage my own stress and wellbeing to prevent burnout

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Support wellness opportunities (sleep, nutrition, fitness, hobbies) in people with IDD and mental health needs

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Create and sustain positive and cooperative relationships

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Use positive and person-centered strategies to respond to behavior

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Intervene in a crisis

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Recognize signs and symptoms of IDD and mental health needs

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Support and monitor use of psychotropic medication as part of a comprehensive treatment plan

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree

Communicate with professionals across teams and systems

- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree