

# **KERN REGIONAL CENTER**

**ANNOUNCEMENT  
OF  
REQUEST FOR PROPOSAL  
FOR  
EARLY START SERVICES  
FOR  
INFANTS AND TODDLERS  
IN THE KERN, INYO AND MONO  
COUNTIES**

*August 29, 2022*

Kern Regional Center  
Request for Proposal  
August 29, 2022

**BACKGROUND INFORMATION**

Kern Regional Center (KRC) is a private non-profit social service agency under contract with the State Department of Developmental Services (DDS) to provide services to children and adults with developmental disabilities. Infants and toddlers, from birth to 36 months of age, may qualify for early intervention services through our Early Start program. Early Start is the name used in California to reference the federally-funded early intervention program. The federal law is found in the Individuals with Disabilities Education Act (IDEA), Part C, Infants and Toddlers with Disabilities (20 U.S.C., 1431 et seq.) and the applicable federal regulations (34 C.F.R., 303 et seq.). The statute for California's participation in the program is the California Early Intervention Services Act (CEISA), Government Code, Section 95000 et seq.

An infant or toddler may qualify for Early Start services if assessment and evaluation show they have a significant developmental delay in either cognitive, communication, social or emotional, adaptive or physical and motor development or have an established risk condition of known etiology, with a high probability of resulting in delayed development (California Government Code, Section 95014(a)). As part of its services, KRC may purchase early intervention services. Based on an infant or toddler's assessed developmental needs and the family's concerns and priorities as determined by an Individualized Family Service Plan (IFSP) team, early intervention services may include:

- Assistive technology
- Audiology
- Family training, counseling, and home visits
- Health services
- Medical services for diagnostic/evaluation purposes only
- Nursing services
- Nutrition services
- Occupational therapy
- Physical therapy
- Psychological services
- Service coordination (case management)
- Social work services
- Special instruction
- Speech and language services
- Transportation and related costs
- Vision services

## SUMMARY OF PROJECT

IDEA Part C requires early intervention services be provided in “Natural Environments”. The federal definition for “Natural Environments” (303.26) is: “Settings that are natural and typical for a same-aged infant or toddler without a disability, may include the home or community settings and must be consistent with the provisions of 303.126.” For further clarification the Office of Special Education Programs (OSEP) “...does not believe that a clinic, hospital or service provider’s office is a natural environment for an infant or toddler without a disability; therefore, such a setting would not be natural for an infant or toddler with a disability.”

In addition, CEISA provides the following guidance for the focus of services: “The family is the constant in the child’s life, while the service system and personnel within those systems fluctuate. Because the primary responsibilities of an infant’s or toddler’s wellbeing rests with the family, services should support and enhance the family’s capability to meet the special developmental needs of their infant or toddler with disabilities “ (CEISA, 95001.(3)).

As a result of these mandates, KRC is seeking qualified applicants to provide early intervention services for infants and toddlers ages birth to 36 months. Intervention services include services that enhance the family’s capabilities to meet the special developmental needs to their infant or toddler. These services must be provided in Kern Regional Center’s catchment area.

An increase or decrease in the number of participants, resulting from program and client population changes, will be directed by KRC and shall be deemed an ordinary part of the scope of work to be performed by the vendor.

Per IDEA, Part C, Section 303.12, Early Intervention services must be provided by qualified personnel including: audiologists, family therapists, nurses, nutritionists, occupational therapists, orientation and mobility specialists, pediatricians and other physicians, physical therapists, psychologists, social workers, special educators, and speech and language pathologists. Qualified personnel may include such personnel as vision specialists, paraprofessionals and parent-to-parent support personnel. IDEA, Part C, Section 303.22 defines qualified as a person who has met State approved or recognized certification, licensing, registration, or other comparable requirements that apply to the area in which the person is providing early intervention services.

## INSTRUCTIONS AND GENERAL CONDITIONS

### A. Schedule of Events

Issue Request for Proposals	August 29, 2022
Orientation	August 31, 2022
Proposals Due	September 21, 2022
Oral Presentations	September 28, 2022 (Presentation time TBD)
Award Letters Sent	October 5, 2022
Ready to Accept Referrals	November 7, 2022 (desired)

### B. Orientation

A meeting will be held to answer questions from applicants on August 31, 2022, at 11:00 am via zoom meeting. The link for the meeting as follows: <https://us06web.zoom.us/j/83729427594?pwd=alhON0hMVkpMVzV2eTVYaGdPM3BIZz09>

#### Submission of Proposal

Six copies of the proposal are due no later than 5 p.m. on September 21, 2022. Any proposal submitted after the closing date and time will not be considered. Proposals shall be submitted by email: Simone.Huerta@kernrc.org

Simone Huerta, Community Services Specialist  
Kern Regional Center  
3200 N. Sillect Ave.  
Bakersfield, CA 93308  
661-873-4528

### C. Proposal Selection Criteria

The selection of the applicant(s) will be based on the Scoring Criteria for Written Proposal and Scoring Criteria for Oral Presentation that are attached to this RFP.

### D. Evaluation Committee

The Committee will be composed of up to six members who have experience with and knowledge of early start services.

### E. Contract Award Process

The Evaluation Committee will:

- Review all proposals that meet the format and proposal submission requirements;
- Evaluate each proposal that meets the requirements;
- Select the successful applicant(s) based upon the specific criteria stated in this RFP.

### F. Award of the Contract

KRC reserves the right to accept or reject any or all proposals. The award of a contract, if made by the Regional Center, will be to the qualified applicant(s) whose proposal best complies with the requirements set forth in the RFP.

### G. Start Date

It is preferred that the successful applicant(s) be ready to accept referrals by November 7, 2022.

#### H. Precontractual Expenses

Any contract awarded by KRC will be only for the provision of service defined by the scope of work. There will be **no** reimbursement for any pre-contractual expenses to include, but not be limited to, the following:

- Preparation and submittal of the proposal;
- Negotiation of a contract with KRC;
- Acquisition of equipment and facilities; and
- Hiring and training of staff.

#### I. Vendor Application

The successful applicant will be required to complete a Vendor Application once the RFP has been awarded. The successful applicant will be required to acquire/have an office in KRC's catchment area. KRC requires vendors to carry a minimum of \$1,000,000 coverage in Professional Liability, General Liability, Auto Liability, Sexual Molestation and Workers Compensation. The successful applicant will be required to submit a Temporary Rate Request. All staff that has direct contact with infants/toddlers will be required to be fingerprinted. Vendorization does not guarantee utilization.

### SCOPE OF WORK

#### General Introduction:

The general role of a vendor in early intervention is to provide supports and resources to assist family members and caregivers to enhance the infant's and toddler's learning and development through everyday learning opportunities.

#### Vendors shall:

1. Develop a curriculum based on the basic principles of infant's or toddler's growth and development and include evidence-based early intervention practices. Curriculum to address the required five developmental domains. The curriculum shall include an emphasis of addressing the social/emotional development of the infant or toddler. The reason for this is because research has shown that the social/emotional development is the foundation for all other learning. The curriculum shall also include specific activities to encourage parents/caregivers participation and, in the absence of the vendor, continuity of intervention.

#### The curriculum shall be geared towards:

- a) Training parents/caregivers to recognize and respond to their infant's or toddler's unique needs through day to day activities. Training to include those parents/caregivers that work outside of the home.
- b) Providing parenting skills to support and enhance the parent's/caregiver's capability to meet the special developmental needs of an infant or toddler with delays through demonstrations, training, consultations, and accessing various developmentally appropriate equipment through play. **Parent/caregivers attendance and participation is required during the delivery of early intervention services. If the parent is not in attendance due to work, vendor to address how the parent training component will be met.**

- c) Implementing the delivery of services in the natural environment. See “Summary of Project” for a definition regarding natural environments.
  - d) Providing direct services focused towards the achievement of the outcomes contained in the Individual Family Service Plan (IFSP).
2. Staff participation in IFSP meetings shall be required. The KRC Service Coordinator (SC) shall be responsible for scheduling and facilitating the IFSP meeting, however it is expected that early intervention staff will attend and be actively involved with the process. Reviews shall be scheduled consistent with the statutes and regulations under Part C. Additionally, in preparation for the IFSP meetings, vendors shall be required to complete written progress reports, complete vision and hearing screening annually, complete a detailed summary of the infant/toddler’s developmental progress in all five developmental domains, and are responsible for writing/developing all developmental outcomes on the IFSP.

Location of Service and Service Ratio:

- 1. Consistent with the statutes and regulations under Part C, all early intervention services shall be provided in the natural environment.
- 2. It is generally expected that early intervention services will be provided 1:1. However, if there are multiple, eligible infants/toddlers in the family home, the ratio may be lower. Individual/group services to be identified on the IFSP.
- 3. Regulations allow for individual exceptions to the requirement that early intervention services be provided in a natural environment. Vendor to develop a plan to address these exceptions.

Number of Authorized Service Hours:

- 1. The Early Intervention Team and the family will decide what services will meet the unique needs of the infant or toddler.
- 2. Specific authorized hours of early intervention to be determined based on assessment results, parental concern and by all other participants of the IFSP Team. The typical range of early intervention services is 1 to 2 visits per week. The frequency and duration of early intervention services are determined on an individual basis by the IFSP Team.
- 3. One visit is equal to one hour of direct service.

Hours of Operation:

- 1. Hours of operation should be flexible in order to meet the needs of working parents and special family situations.
- 2. The Early Start program is a year round program.

**RATES AND VENDORIZATION**

KRC will be vrending successful applicants under service code 116, Early Start Specialized Therapeutic Services. This service code is used if a person provides services for clients aged birth to 36 months who require specialized services, as deemed necessary based on informed clinical opinion. These services must be identified in the IFSP.

The median rate for this service under this service code is \$102.70 per client per hour. KRC can only reimburse for services up to this amount based on projected/actual costs. This rate is for direct service only. You cannot bill for time spent writing reports, travel time or for no shows. Mileage

can be reimbursed for travel when the service provider travels out of town (after the first 25 miles). The maximum rate that KRC can reimburse for mileage is the median rate of \$.57 per mile. KRC can only reimburse for mileage up to this amount based on projected/actual costs.

### **Program Description:**

Please ensure that your proposal is consistent with Part C Federal Regulations/Early Start State Regulations and addresses the following areas:

I. Program curriculum.

A. Shall focus on the following:

1. The natural environment.
2. Services and supports that enhance the capacity of families to meet the special needs of their infants/toddlers.

B. Shall include:

1. Intervention activities which promote growth in all of the required developmental domains.
2. Activities which:
  - a. Enhance the capacity of families to meet the special needs of their infants/toddlers with developmental needs.
  - b. Increase the parents/caregivers understanding and demonstrations of developmentally appropriate activities for the infant/toddler through day-to-day activities, such as bathing, dressing, feeding and family outings.
  - c. Develop the parents/caregivers ability to recognize and respond to their infants/toddlers unique characteristics, temperament, method of communication and developmental needs.
  - d. Increase the parents/caregivers understanding and awareness of the use of playtime as a method for intervention and achieving developmental outcomes.

C. Describe the following:

1. The schedule of training activities.
2. Specific training activities.
3. Age appropriate materials and activities which you will use.
4. Specific client outcomes which are anticipated from participation in each training component.

D. Programming shall be provided in the parents/caregivers language of choice.

II. Attendance policy.

- A. Describe the attendance requirements for infants/toddlers to remain in your program.
  - B. Describe the efforts that you will make to assure attendance in your program.
  - C. Include the expected level of participation and attendance of parents/caregivers in your program. Include methods by which you will encourage parent/caregivers participation.
  - D. As previously noted, the primary goal of early intervention is to enhance the parents/caregiver's ability to more successfully meet the needs of their infant/toddler with a disability; how will you accomplish this with parents/caregivers that work full time?
- III. Qualifications.
- A. Describe your education and experience as related to direct services with infants/toddlers in the area of developmental/early intervention.
  - B. Describe all staff positions, the education requirements and the qualifications for each position.
- IV. Schedule of the direct service operating hours.
- A. Describe the hours and days of the week that your program will operate. How will you insure availability that is convenient for the parent/caregiver? Include any accommodations, if necessary, for the full time working parent/caregiver.
  - B. Indicate any days the program will be closed, such as holidays.
- V. Entrance and exit criteria. KRC reserves the right to exit infants/toddlers out of a given program.
- A. Entrance criteria, including but not limited to:
    - 1. Ages to be served.
    - 2. Do you have a preference for working with a specific delay (i.e. speech and language delay; infant/toddler with a suspected diagnosis of Autism)?
    - 3. Do you prefer to not work with certain delays (i.e. social/behavioral delay; medically fragile with subsequent delays)?
  - B. Exit criteria, including but not limited to:
    - 1. Level of skills and ability development, which would indicate that program may no longer meet the infant's/toddler's needs.
    - 2. Level of behavioral/medical needs that would preclude continued participation in the program.
    - 3. Parent request for services to end as they are no longer interested in Early Start services.



4. Child move out of KRC catchment area.
- C. Statement about your policy (if any) for excluding an infant/toddler from participating in programming.
- VI. Description of how your program will evaluate infant/toddler progress.
- A. Assessment procedure; timelines and instruments used:
1. Describe the evaluation procedures and assessment tool(s) to be used to determine progress.
  2. Describe the process of determining outcome, activities, etc., for implementing the IFSP goals for each infant/toddler.
  3. Describe the method of data collection and analysis to be done related to IFSP goals.
  4. Describe the timelines for IFSP implementation.
  5. Describe the content of your written report.

## VENDOR/APPLICANT COST STATEMENT

Applicants for this RFP are required to submit a cost statement with projected costs. Applicants may use the cost statement format that can be found and downloaded from the Kern Regional Center Website. To download:

- Go to [www.kernrc.org](http://www.kernrc.org)
- Click on "Service Providers" button
- Click on "Service Providers Resources and Information" button
- Click on "Vendor Cost Statement" button

The Vendor Cost Statement is a nine page excel file. The accountant/bookkeeper for your agency can assist on the completion of this Cost Statement. A Cost Statement is required for each program /vendor number (if you are already a vendor with KRC).

Welfare and Institutions Code Section 4629.7 requires that all regional center contracts or agreements with Service Providers in which rates are determined through negotiations between the regional center and the Service Provider expressly require that not more than 15 percent of regional center funds be spend on administrative costs. Please see the next page for a complete text of W&I Code Sec 8. Section 4629.7.

In order to ensure that Service Provider Administrative Costs do not exceed 15 percent of funds received from regional center, all negotiated rate vendors are required to submit a Vendor Cost Statement. This requirement does not apply to vendors whose rates are not negotiated, such as Usual & Customary, DDS or SMA rates. Vendor/Applicants will be required to submit an initial 12-month estimated Cost Statement for your specific proposed program/service to project all associated costs. An additional Cost Statement is required for all vendors to reflect actual costs of your first fiscal year of providing services. Contract renewals will be based on review and approval of actual costs per the statutory requirement. All vendors must submit a new Cost Statement with 30-day prior written notice of any changes or as requested by the regional center. Failure to do so may result in termination of vendorization.

## WIC

4629.7. (a) Notwithstanding any other provision of law, all regional center contracts or agreements with service providers in which rates are determined through negotiations between the regional center and the service provider shall expressly require that not more than 15 percent of regional center funds be spent on administrative costs. For purposes of this subdivision, direct service expenditures are those costs immediately associated with the services to consumers being offered by the provider. Funds spent on direct services shall not include any administrative costs. Administrative costs include, but are not limited to, any of the following:

- (1) Salaries, wages, and employee benefits for managerial personnel whose primary purpose is the administrative management of the entity, including, but not limited to, directors and chief executive officers.
- (2) Salaries, wages, and benefits of employees who perform administrative functions, including, but not limited to, payroll management, personnel functions, accounting, budgeting, and facility management.
- (3) Facility and occupancy costs, directly associated with administrative functions.
- (4) Maintenance and repair.
- (5) Data processing and computer support services.
- (6) Contract and procurement activities, except those provided by a direct service employee.
- (7) Training directly associated with administrative functions.
- (8) Travel directly associated with administrative functions.
- (9) Licenses directly associated with administrative functions.
- (10) Taxes.
- (11) Interest.
- (12) Property insurance.
- (13) Personal liability insurance directly associated with administrative functions.
- (14) Depreciation.
- (15) General expenses, including, but not limited to, communication costs and supplies directly associated with administrative functions.

(c) Consistent with subdivision (a), service providers and contractors, upon request, shall provide regional centers with access to any books, documents, papers, computerized data, source documents, consumer records, or other records pertaining to the service providers' and contractors' negotiated rates.

(Added by Stats. 2011, Ch. 9, Sec. 8. (SB 74) Effective March 24, 2011.)

**CRITERIA FOR WRITTEN PROPOSAL**  
**EARLY START SERVICES**

**Program Description:** Does the program description clearly address the population to be served; the applicant's knowledge of Early Start, early intervention techniques and practices; the schedule of training activities; and address the vendor's participation in the IFSP process? \_\_\_\_\_

**Applicant Education and Experience:** Does the program description provide evidence that the applicant possesses the education and/or experience necessary to complete a project of this scope? \_\_\_\_\_

**Assessment Tool/Outcomes:** Does the program description clearly identify the assessment tool, including the method for calculating progress and the expected outcomes as a result of program participation? \_\_\_\_\_

**Reflects a Working Knowledge of State Mandates:** Does the program description reflect a basic understanding of the program requirements according to the Federal and State regulations? \_\_\_\_\_

**Parent/Caregiver Education:** Does the program description address availability that is convenient for the parent/caregiver? Does the proposal include a component for parent/caregiver education and participation? Does the proposal describe what services/supports will be provided to increase parent capability to more successfully meet their child's needs? \_\_\_\_\_

**Budget and Finance:** Does the program description clearly display all costs associated with the program? Does the proposal include a cost statement and Financial Statement? \_\_\_\_\_

Written Proposals will be scored per the following scoring guidelines by each member of the Review Committee in each of the areas below:

- |   |  |
|---|--|
| 0 | Criteria not addressed at all.   |
| 1 | <u>Minimal Response:</u> Subject area is mentioned; however, applicant has neither included any narrative nor any supporting documentation that demonstrates understanding of this particular proposal requirement.            |
| 2 | <u>Some</u> supporting documentation and/or narrative discussion; however, the responses are not clearly articulated.  |
| 3 | <u>Good</u> supporting documentation and/or narrative discussion; responses are more clearly articulated.  |
| 4 | <u>Maximum Response:</u> Full supporting documentation and/or narrative discussion with exceptionally clear articulation making it readily apparent that applicant understands all aspects of the program development process. |

**The Written Proposal can receive a maximum score of 24 points per member.**

**CRITERIA FOR ORAL PRESENTATION**  
**EARLY START SERVICES**

**Program Description:** Does applicant clearly demonstrate a working knowledge of Early Start and outcomes related to the needs of infants and toddlers? \_\_\_\_\_

**Client Needs:** Does applicant demonstrate knowledge of the infant/toddler and the parents as related to what was in the current Request for Proposal? Does this include experience that relates to current targeted population and need? \_\_\_\_\_

**Experience:** Does applicant clearly articulate pertinent experience for themselves/agency as related to early intervention techniques and teaching methods, including experience with the proposed assessment tool and methods for calculating progress? \_\_\_\_\_

**Teaching Needs:** Does applicant demonstrate an understanding of the need for parent teaching/training as related to current proposal? \_\_\_\_\_

**Overview Summary:** Is applicant able to field questions from the team about the program in a concise and articulate manner including questions regarding proposed costs? \_\_\_\_\_

Oral Presentations will be scored per the following scoring guidelines by each member of the Review Committee in each of the areas below:

- 0 Criteria not addressed at all.
- 1 Minimal Response: Subject area is mentioned; however, applicant has neither included any narrative nor any supporting documentation that demonstrates understanding of this particular proposal requirement.
- 2 Some supporting documentation and/or narrative discussion; however, the responses are not clearly articulated.
- 3 Good supporting documentation and/or narrative discussion; responses are more clearly articulated.
- 4 Maximum Response: Full supporting documentation and/or narrative discussion with exceptionally clear articulation making it readily apparent that applicant understands all aspects of the program development process.

**The Oral Presentation can receive a maximum score of 20 points per member.**

**The written proposal and presentation can achieve a maximum score of 44 points per member. (Written proposal = 24 points. Oral presentation = 20 points.)**