



CARMEL CLAY SCHOOLS

5201 East Main Street, Carmel, Indiana 46033 • Telephone: 317.844.9961 • Fax: 317.844.9965 • www.ccs.k12.in.us

RFP: Mental Health Services Responses to Questions:

Q: Clarification on “Leasing” space as mentioned in initial RFP?

A: We will provide a private space for mental health services to take place in each building. We will not charge for this space.

Q: Clarification on the role of the mental health provider during crisis management?

A: We would expect the mental health provider to coordinate and assist in supporting students and families during a crisis. We currently utilize the Mental Health First Aid and PREPaRE model to respond to crisis and will continue to do so. We also hope to have assistance when it comes to bridging the transition from an acute care/residential setting back to the home/school.

Q: What is the district’s stance on telehealth options?

A: We are open to telehealth as a supplemental option but not as a replacement for direct services.

Q: Are vendors expected to bill Medicaid and/or private insurance for services?

A: Yes, when a child is enrolled in an insurance plan, it is expected that services which fall within “covered services” will be billed to the insurance company. It is recommended that service providers be appropriately licensed and paneled with the major/popular insurance companies as the majority of our population is enrolled in a private insurance plan.

Q: What are the expectations regarding the hours required by service providers during the work day?

A: As far as direct or “billable hours,” that should be determined by the vendor based on their business model and should be included in the proposal. CCS requests that the provider meet with students during the school day (unless they are meeting with a family in the home, etc.) and will have their office available before and after school. Although actual hours scheduled in the building may vary by caseload, we would like availability for crisis response and consultation while school is in session. Furthermore, we would also request after-hours crisis availability for our families enrolled in services.

Q: What are expectations during breaks when it comes to office space?



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A: We will continue to make office space available and work with the vendor to ensure any barriers to maintaining services are minimized. We are open to creative ideas when it comes to summer programming as well.

Q: What are the expectations when it comes to the involvement of a psychiatrist?

A: We would like for the medication provider (psychiatrist, behavioral pediatrician, or nurse practitioner) to be directly employed or affiliated with the vendor so that we can ensure continuity of care. We would like to have a relationship where the building service providers have direct and frequent communication with the medication provider, so that progress can be tracked and concerns from the school can be considered. We would also like some flexibility, within reason, when it comes to emergent needs.

Q: Will there be any moves to change the number of Social Workers or change their role into more of a mental health provider role?

A: We will continue to assess the social work ratio and continue to add as needed. However, we do not have any open positions at this time. Our vision is to maintain a School Social Work Model where our Social Workers will provide universal and tier 2 supports. Our long-term plan, is to continue to partner with a third-party to provider for more intensive behavioral health services and medication management. There are currently no plans to update the responsibility of our Social Workers to provide clinical services.

Q: When will services begin?

A: Our plan is for services, and funding, to begin in August when we begin our 2020-2021 school year. We understand that it takes time to build a caseload and hire staff, so we are open to considering plans for meeting students needs while working to build the program.

Q: How will you handle matters of parental consent and promote enrollment?

A: We will identify a “gate-keeper” from each school who will collect referrals, ensure that they are appropriate for services, and obtain parent consent prior to referring the student to the vendor. We will ensure that this individual is trained and has a clear understanding of the services provided and will be able to work with families to eliminate barriers to enrollment.



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Q: What does CCS mean when you state that services “should not interfere with school activities and operations?”

A: We fully understand that providers need dedicated time within the school day to meet with students and that this may mean that students are pulled from instruction or activities. However, we expect that the provider will work with teachers and school administration to identify the best times to see students and will communicate schedules with our building teams.

Q: What are the expectations around the marketing of services?

A: Once a proposal is approved by our school board and a contract is completed, we will begin notifying parents and students of the services available and the process of referral and enrollment. When a student is identified as someone who would benefit from services, we will actively reach out the guardian to notify them of service availability.

Q: Once you approve a vendor, will they be the only service offered and will you continue to provide parents with a choice of service providers?

A: We will always provide our parents and students with choices and options when it comes to identifying an entity to meet their needs. We will continue to provide a referral list of local and reputable options to our families. We will be clear that if the family is wanting convenient on-site services, they can utilize our partnered vendor. If a student is enrolled in services outside of our partnered vendor, we will absolutely do our best to work and collaborate with the outside entity to support our student.

Q: Who is responsible for collecting data and what initial data would you be interested in collecting?

A: Our goal is to obtain data from the vendor, which would most likely be gathered from their electronic medical record. We are looking at basic demographic information, data on diagnosis, number of risk screens, referrals, outcomes, status at discharge, number of services provided, number of referrals, and number of referrals that followed through to enrollment. Once an entity is identified, we would want to meet to discuss what information we are able to gather and how this information will be shared with CCS while being respectful of HIPAA guidelines.



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Q: Will CCS require that all services be approved before billed even if the vendor is billing an insurance agency?

A: No. However, if contract funds paid by the school are going to direct services, then we may request a statement of services provided prior to initiating payment for those services. This process would be discussed during the development of the final contract.

Q: Do you expect families to be involved in the therapeutic process?

A: We believe that direct services to a child are not beneficial when all supports are not engaged in the process. Therefore, we would expect for families to be involved in the therapeutic process, which may include: family therapy, family skill building, and case management.

Q: Will schools need to interview a therapist before they are hired?

A: Although we trust the vendor to engage in the initial recruitment and hiring of any potential candidates, we would like the right to request that our building and/or district leadership have the opportunity to meet and/or review the resume of the candidate prior to that candidate starting at a CCS building. We would also expect the right to decline a potential candidate should the building or district leader feel they are not a good fit for our school community.

Q: Will you accept the vendor's background checks for providers or will you do your own?

A: We will expect that our own background check be completed in addition to the background checks already provided by the vendor as part of the hiring process.

Q: Do you have a preference on how many days are "contract" days vs. "billable" days?

A: When it comes to the proposal, we will leave it up to each vendor and their calculations based on their business model. Of course, we will be interested in how those contract funds can be best utilized to meet the needs of those students.

Q: Is the preference to have one provider assigned to specific building or can there be a rotation of providers?



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A: We believe that our students need consistency and stability and with that comes security, trust and connection. Therefore, we would like to have providers remain consistent. Of course, we know that more than one provider may be working with a child and family at one time (example: A Skills Trainer and a Therapist). However, we would like these individuals to remain as consistent is possible.

Q: Are you looking to contract with only one vendor or are you open to multiple vendors?

A: We would be interested in contracting with one provider that is able to meet the various needs of our students and families. With that being said, we are also open to consider alternative strategies that can creatively and comprehensively meet these needs. For example, if two entities desire to work together to complete a proposal or for a partnership, we would be willing to consider this.

Q: What does CCS currently have in place to reduce stigma and support student and family willingness to accept mental health support?

A: We are fortunate to have Counselors and Social Workers that promote social-emotional wellness and early intervention. We have had several “Mental Health” panels in our high school and middle school to increase awareness and decrease stigma. We also have a mental health club at Carmel High School and our High School Counseling Department is active in promoting our Culture of Care. We continue to work with community entities and supports through our Mental Health Fair and various awareness nights so that families are aware of resources and supports.

Q: Will you have anything in place to re-evaluate the schools ongoing needs for mental health supports?

A: Our plan would be to work closely with our vendor to evaluate the growth and progress of the program at the building and district level. This will allow us to identify growing needs and any change needed in staffing, marketing, or referrals. We will also plan to utilize data points gathered by the school and vendor to determine areas of growth, need, and success.

Q: What percent of your staff are trained in Question Persuade and Respond (QPR)?

A: All certified staff who work with grades 5-12 attend a two-hour QPR certification. Many of our Social Workers, Counselors, and Psychologists are QPR Trainers. This includes the Mental Health Coordinator.



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Q: Are you open to professional development for your school staff?

A: Absolutely. Our district leaders and individual building leaders are open to training and support that continues to grow our knowledge of mental health and best practices for supporting students. We also have an interest in strategies for supporting students with symptoms of mental illness. We do ask that any professional development offered be consistent with our strategic and building-based improvement plans.

Q: Would you be willing to participate in a needs assessment to determine the needs of each school and students?

A: We recognize the benefits of needs assessments and how this can assist a service provider with understanding how to better staff and support a district and our schools. If this is something that you are interested in doing in order to provide services, we will expect this to be fully explained in the proposal with an outline of your expectations of the district and a timeline of the process. It would be important for CCS to know if this will require participation from students, staff, leadership, and what data will be collected. Surveys and screening tools will need to be approved by district leadership and may also require approval from our school board.

Q: Once the award is given, is there a timeline on when funding will end or when the contract will need to be reviewed/renewed?

A: Once services begin, CCS will review the quality and benefits of services through the use of data, observations, parent/student feedback, etc. At the end of each school year, the Mental Health Coordinator and district leaders will evaluate the benefits and quality of services provided and will determine the status of the partnership. It will be expected (and included in the agreement for services) that any concerns from either party be brought to the immediate attention of both parties and that steps be taken to resolve any concerns. Methods for obtaining information for the evaluation will be agreed upon prior to the completion of a contract. Furthermore, the service agreement may include expectations for problem resolution as well as an explicit process should either party desire to terminate services. We are seeking a long-term partnership and our hope and plan is to maintain these services for the foreseeable future.

Q: How would should data for retention be reported to you?



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A: In the proposal, we would like to see annual retention rate. If this is an identified area of growth and there has been progress made, this may be additional information that you would want to share. It will also be beneficial to share strategies related to hiring, recruitment, and retention.

Q: Can you further explain the education/degrees of your Social Workers and how the district and schools understand the role of the mental health therapist vs. the Social Worker?

A: All but three of our Social Workers have obtained their final clinical licensure. Many of our Social Workers have background in and knowledge of community mental health. Prior to beginning services, we will work with district leadership, school leadership, Social Workers, Counselors, and school staff to ensure they have a clear understanding of the role of a mental health therapist and how this differs from the role of the Social Worker. We will also train staff on how to identify students that may need services, how to make a referral, and what these services will look like. The Mental Health Coordinator will work closely with our chosen service providers to ensure that our schools are fully prepared to utilize services successfully.

Q: For references, what information will you require?

A: We would like to have the names and contact information for the references provided.

Q: To clarify, are you wanting a list of our joint ventures as an organization or something more detailed?

A: A list should suffice.

Q: Will you accept an organization hierarchy chart if it is not currently published on a website?

A: Yes, as long as the organization hierarchy is clearly listed or charted.

Q: Can you clarify the expectations of the Technical Proposal?

A: The proposal should include what services will be offered, how these services will meet the need of our students, how contract funds will be utilized and allocated, and how services will be delivered.



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Q: Will you accept an emailed electronic version of the proposal?

A: Yes, we will.

Correction to Original RFP Timeline: Our goal is to recommend a vendor or vendors on March 23rd during the regular School Board Session and not on the 27th as originally stated.