*Alabama Department of Human Resources*

## *Continuum of Care Programs*

**Q1.** Agency currently is a child placing agency and has a license for Therapeutic Foster Care. If we are applying for the full continuum (i.e.; Basic, Moderate, Mother's and Infants, Transitional and Independent Living, and Traditional Foster Care) do we have to submit application for licensure on each of these individual programs?

**R1.** **If a provider is providing full continuum services and are going to use congregate settings, the provider must have a Child Placing Agency license and a Residential License. Licenses can be for several levels or care.**

**Q2.** Please describe the manner in which a client who enters ILP will be handled within the Continuum.

At what point would they move from the Continuum into a non-Continuum ILP? At what point would their slot be considered an ILP slot, rather than a Continuum slot, for billing purposes? The area where ILP is discussed in an RFP is RFP #2007-100-08, Continuums of Care, Sections 3.6.4

**R2.** **ILP services would be provided by the continuum only as long as the permanency goal is to return to parent. Once the permanency goal is changed by the ISP team, the child should be closed to the continuum, once the child is stable in the ILP placement.**

**Q3.** Page 3 (same page number for all RFPs), Section 4.2.5 – Technical Proposal and 4.2.5 - Attachments

In the table of contents for all above listed proposals – Section 4 – PROPOSAL FORMAT AND INSTRUCTIONS – Section 4.2.5 is listed as TECHNICAL PROPSAL – then further down on the section listed as ATTACHMENTS, the section number is again 4.2.5. Is this correct? We will have duplicate tabs for this section 4.2.5 and for the subsections 4.2.5.1. – 4.2.5.4

**R3.** **This is not correct, you should not have duplicated tabs. ATTACHMENTS should read Section 4.2.5.5; Legal Status should read 4.2.5.5.1 and so on to Immigration Status Form section 4.2.5.5.5.**

**Q4.** Section 3.2, p. 18 NUMBER OF STAFF PER TREATMENT TEAM
The RFP states that the treatment teams must include at least (1) Supervisor and (6) Clinical Staff. Can it be assumed that 6 clinical staff is a maximum under 1 supervisor and a vendor would be allowed to compose treatment teams of (1) Supervisor and 4-5 Clinical Staff?

**R4.** **Yes**

**Q5.** Section 3.5, p.18 STAFF AND CASELOAD RESTRICTIONS
The RFP states that IHHS workers will accept 6-8 cases (families). Can it be assumed that this is a maximum and the IHHS workers would be able to carry caseloads of 4-6 families?

**R5. Yes**