HARRISON PETERS Superintendent



Providence Public School District
Purchasing Department
797 Westminster Street
Providence, RI 02903-4045
tel. 401.456.9264
fax 401. 456.9252
www.providenceschools.org

## REQUEST FOR QUALIFICATIONS

ITEM DESCRIPTION: Working With Community Partners to Advance Integrated Student Support Teams & Build A Multi-Tiered System of Social-Emotional, Behavioral & Mental Health Supports (MTSS-SEB)

DATE AND TIME TO BE OPENED: Thursday, March 21, 2024 at 1:00pm

PRE-BID CONFERENCE (IF APPLICABLE): NONE

**SUBJECT MATTER EXPERT (NAME): Natalie Fleming** 

SUBJECT MATTER EXPERT (EMAIL): Natalie.Fleming@ppsd.org

**QUESTION DEADLINE: Thursday, February 29, 2024** 

### Instructions

1. Bidders must submit sealed proposals in an envelope clearly labeled with the Item Description shown above on the outside of the envelope. The proposal envelope and any information relative to the proposal must be addressed to:

Purchasing Department, Suite 206 797 Westminster Street Providence, RI 02903

- 2. Bidders must include at least one original, three copies, and a digital PDF copy on a flash drive.
- 3. Proposal responses must be in ink or typewritten.
- 4. Bidders are advised that all materials submitted to Providence Public Schools for consideration in response to this Request for Proposals shall be considered to be public records as defined in R.I. General Law Section 38-2 et seq, without exception, and may be released for public inspection. All proposals submitted become the property of Providence Public Schools.
- 5. Bid proposals that are not present in the Providence Public Schools Purchasing Department at the time of opening for whatever cause will be deemed to be late and will not be considered. Postmarks shall not be considered proof of timely submission.
- 6. Questions regarding this request for proposals must be submitted to the Subject Matter Expert via email by the question deadline listed above. Questions will be answered via addendum to be posted publicly on the Providence Schools website. Bidders are responsible for checking the website for all addenda distributed in response to questions and requests for additional information.

### Notice to Vendors General Terms

- 1. Providence Public Schools reserves the right to award the contract on the basis of the lowest responsible evaluated bid proposal.
- 2. In determining the lowest responsive evaluated bid proposal, cash discounts based on preferable payment terms will not be considered.
- 3. No proposal will be accepted if it is made in collusion with any other responder.
- 4. Providence Public Schools reserves the right to award to a single vendor, to split the award between multiple vendors and to reject any and all proposals. Unless otherwise specified, Providence Public Schools reserves the right to make the award by item or items or by total as may be in its best interest.
- 5. As Providence Public Schools is exempt from the payment of Federal Excise Taxes and Rhode Island Sales Tax, prices quoted are not to include these taxes.
- 6. In case of error in the extension of prices quoted, the unit price will govern. In the event there is a discrepancy between the price written in words and written in figures, the prices written in words shall govern.
- 7. Proposals must meet the attached specifications. Any exceptions or modifications must be noted and fully explained. Bids may be submitted on an "equal in quality" basis. Providence Public Schools reserves the right to decide equality and determine whether bids are responsive. Bidders must indicate brand or make offered and submit detailed specifications if other than brand requested.
- 8. A responder who is an out of-state corporation shall qualify or register to transact business in this State, in accordance with R.I. General Law <u>Section 7-1.2-1401</u> et seq. as amended)
- 9. The contractor will not be permitted to: assign or underlet the contract; or assign either legally or equitably any monies or any claim thereto without the previous written consent of the Director of Purchasing.
- 10. Delivery dates must be shown in the bid. If no delivery dates are specified, it will be assumed that an immediate delivery from stock will be made.
- 11. Only one shipping charge will be applied in the event of partial deliveries for blanket or term contracts.

- 12. No goods should be delivered and no work should be started without a Purchase Order from Providence Public Schools.
- 13. Awards will be made within ninety (90) days of the proposal opening. All proposal prices will be considered firm, unless qualified otherwise. Requests for price increases will not be honored.
- 14. Failure to deliver within the time quoted or failure to meet specifications may result in default in accordance with the general specifications. It is agreed that deliveries and/or completion are subject to strikes, lockouts, and Acts of God.
- 15. For contracts involving construction, alteration and/or repair work, the provisions of State Labor Law concerning payment of prevailing wage rates apply (See R.I. General Law <u>Section 37-13-1</u> et seq. as amended).
- 16. All proposals will be disclosed at the opening date and time listed above. After a reasonable lapse of time, tabulation of proposals may be viewed on the Providence Public School's website (https://www.providenceschools.org/Page/215).
- 17. Prior to commencing performance under the contract, the successful bidder shall attest to compliance with provisions of R.I. General Law Section 28-29-1, et seq. If exempt from compliance, the successful bidder shall submit a sworn Affidavit by a corporate officer to that effect, which shall accompany the signed contract.
- 18. Prior to commencing performance under the contract, the successful bidder shall, submit a certificate of insurance, in a form and in an amount satisfactory to Providence Public Schools.



# **Providence Public School District**

# REQUEST FOR QUALIFICATIONS

### **RFO Title:**

Working with Community Partners to Advance Integrated Student Support Teams and Build a Multi-Tiered System of Social-Emotional, Behavioral & Mental Health Supports (MTSS-SEB)

Funding Source (Contingent on Funding & Subject to Change):

School-Based Mental Health Services Grant, Bradley Project AWARE Grant & Title Funding **RFQ TITLE:** Working with Community Partners to Advance Integrated Student Support Teams & Build a Multi-Tiered System of Social-Emotional, Behavioral & Mental Health Supports (MTSS-SEB)

**SUMMARY:** The Providence Public School Department issues this Request for Qualifications (RFQ) from qualifying organizations and community partners to support the advancement of Integrated Student Support Teams across Providence Public Schools and expand capacity within the district to effectively deliver and sustain integrated social-emotional, behavioral and mental health services to our students, families, staff, schools and communities within a Multi-Tiered System of Supports (MTSS) framework.

This request for Partners and Service Providers will result in an inventory of resources, services and qualified community organizations that demonstrate capacity to consult, coordinate and collaborate with the Department of Social-Emotional Learning and Mental Health, School-based Student Support Teams, and other partnering stakeholders to provide and sustain integrated social, emotional and mental health services across the district and school communities.

### **TABLE OF CONTENTS:**

- I. BACKGROUND
- II. SCOPE OF WORK AND KEY DELIVERABLES
- III. REQUIRED QUALIFICATIONS & SPECIFICATIONS
- IV. TIMELINE
- V. PROPOSAL REQUIREMENTS
- VI. <u>EVALUATION OF PROPOSALS & SELECTION PROC</u>EDURES
- VII. <u>LIMITATIONS</u>
- VIII. QUESTIONS

**Bid Form 1: Bidder Information** 

### **APPENDICES**

**APPENDIX A: Cover Sheet** 

**APPENDIX B: Implementation Protocol Template** 

**APPENDIX C: School-Based Mental Health Counseling Intervention** 

**Protocol & Acknowledgment** 

### I. <u>BACKGROUND</u>

PPSD's Social-Emotional Learning and Mental Health Department are eager to support the continued progression and momentum of social-emotional learning (SEL) and mental health awareness, enhanced SEL and Mental Health literacy, and student and family access to a continuum of social-emotional and mental health services established through the 2018-2023 Project AWARE grant and the 2020-2025 School-Based Mental Health Services grant agreements in partnership with the Rhode Island Department of Education (RIDE) and various community partners. A new opportunity and partnership with Bradley Hospital was established this past year as well, and we look forward to continuing to build secure relationships with partners that will greatly benefit Providence youth, families, staff and schools.

Providence Public School Department (PPSD)'s Wellness Policy expresses a commitment to

"Promoting and supporting the health and well-being of Providence Public School District ("PPSD" or "the District") students, families, and staff. A healthy learning environment is one in which good nutrition is available; students engage in regular physical activity; physical and health education are regarded as essential to the core educational program; social and emotional wellness are promoted and actively modeled throughout all schools; and students and staff learn and practice positive lifestyle behaviors. The Board believes improved health and wellness helps students achieve their academic potential, and optimizes staff effectiveness and professional development."

Additionally, PPSD has recently updated a Multi-Tiered System of Supports (MTSS) policy that outlines a MTSS framework that:

"Uses collaborative, shared leadership, family, school, and community partnerships, and a data-informed problem-solving process to ensure continuous improvement through a continuum of evidence-based instruction and intervention. We believe that by employing the organizational framework of MTSS we will ensure that all PPSD students receive equitable access to opportunities that promote their academic achievement, social-emotional growth, and positive development of their physical, mental, and behavioral health and wellness."

**Table 1** below outlines definitions, elements and purpose of tiered supports that maintain an effective Multi-Tiered System of Supports and that are outlined in the updated district MTSS Framework and policy.

Currently PPSD supports approximately 22,000 students and 2,000 educators across 37 schools, including 19 elementary schools, seven (7) middle schools, 11 high schools, and 1 public district charter school. Our student demographics are 68% Latinx, 15% Black, 6.5% white, 5.5% multiracial, 4% Asian, and 1% Native American. Beginning of the Year (BOY) results of PPSD's Universal Screener, which utilizes the Behavior Intervention Monitoring Assessment System (BIMAS), demonstrate that: 36% of the student population were indicated in the high risk or concern level overall across all areas of Social Emotional Competence (Self-awareness, Self-management, Social Awareness, Relationship Skills and Responsible Decision Making); and 37% were indicated in the high risk or concern level specifically in regards to Relationship Skills.

PPSD's Social-Emotional Learning and Mental Health Department is committed to continuing to build the infrastructure at the district and school-level that supports continuous development of social-emotional competencies across all members of the school community; as well as integration of social emotional learning (SEL) and mental health and wellness across a multi-tiered system of supports. The district and this department envisions collaboration with community partners to advance:

- The established District Student Support Team's ability to build internal capacity to coach and reinforce implementation of School-Based Student Support Teams.
- District and school-based Student Support Teams' ability to fully implement and utilize a comprehensive screening and assessment system for social, emotional and behavioral health and skills to drive team problem-solving processes and identify all strengths and needs of the student, appropriate interventions, referrals, etc.
- Individualized assessment, intervention and referrals to community partners focused on enhancing Social-Emotional Learning (SEL) skills and competencies and successful integration and access to universal supports and instruction.
- Creation of a Layered Continuum of Supports Intervention Matrix for Teams
- Ability of teams to coordinate and provide high-quality health services and evidence-based social-emotional instruction and strategies across expanded learning opportunities to support increased enrollment, attendance, and engagement in learning.

Table 1: Definitions, Elements and Purpose of Tiered Supports within the PPSD MTSS Framework

### TIER 3 TIER 1 TIER 2 Universal Practices Intensive & Individualized Interventions Targeted Interventions The entire SYSTEM, including school culture and climate, rests on the integrity of In addition to Tier 1 universal instruction and practices, <u>SOME</u> students, In addition to effective Tier 1 and Tier 2 intervention, FEW UNIVERSALLY-DESIGNED AND REINFORCED TIER 1 INSTRUCTION AND PRACTICES that proactively support the needs of <u>ALL</u> members of a given school students, approximately 5%, will require a more INTENSIVE, INDIVIDUALIZED APPROACH to close achievement gaps, approximately 15% when Tier 1 is implemented effectively, will need access to TARGETED, EVIDENCE-BASED INTERVENTIONS to accelerate progress, and ensure optimal academic and/or community. When data-informed and learner-driven Tier 1 practices are effectively make and maintain academic and/or social-emotional growth at the sam designed for <u>ALL</u> students, approximately 80% of the school community should have the rate as their peers. social-emotional skill development and growth. support they need to thrive The PURPOSE of TIER 3 is to: The PURPOSE of TIER 2 is to: ESSENTIAL ELEMENTS of TIER 1 include, but not limited to: · Identify & monitor individual students who are at Identify & monitor groups of students who are at-risk for making and maintaining growth across essential areas of Universal Screening to inform universally-designed core instruction significant risk for making and maintaining growth across social-emotional and positive behavioral supports, evidence-based practices and academic and social-emotional development essential areas of academic and social-emotional interventions, and resources. · Provide aligned evidence-based interventions that are . Effective Teaming Structures that facilitate shared leadership of a Multi-Tiered Provide more narrow-focused, individualized nented using a standard protocol to enhance targeted System of Supports and Evidence-based Practices. This includes teams explicitly interventions and supports that consider all areas of skills identified for growth. development, learning, health, and basic needs; and are supplemental to what a student is receiving as part of Tier 1 Universal Practices focused on coordinating and monitoring · Provide targeted interventions with fidelity and at the frequency and duration identified on intervention protocols school-wide, universally- provided practices. and Tier 2 supports. Advanced Tiers of Intervention focused on supporting those in a school community whose needs are not being met by Tier 1 practices via • Implement Tier 2 Interventions in a variety of settings . Document, plan and monitor individualized and intensive (appropriate to selected interventions) and coordinate scheduling data-informed, best-fit interventions. (i.e. Student Support Teams). interventions utilizing a Student Support Plan developed in collaboration with the Student Support Team. to utilize a variety of appropriately Trained Professionals/ Interventionists available. . Data Protocols & Routines that facilitate easy access to actionable data and drive a consistent process for data-based decision making across all tiers, teams & This includes, but not limited to: Classroom Teachers, Coordinate scheduling to utilize Highly-Qualified and settings; and ensures continuous growth and effective implementation of a Multi-Tiered System of Supports. Academic Interventionists and/or Specialists, School Psychologists, School Social Workers, School Counselors, appropriately Trained Professionals/Interventionists to deliver effective supports in collaboration with essential Behavior Interventionists, Related Service Providers, and staff, both general and specialized, students, families, health Community-Driven Values and Agreements that define and inspire the "ways providers, and community partners. trained Support Staff and Community Partners of being" each school wants to encourage. This ensures sustained alignment of shared vision, values, language, and experience. Implement evidence-based interventions and strategies with Consistently Progress Monitor targeted skill development and increased frequency and intensity at a duration based on progress on individualized goals across settings, targeted skill development, and rate of growth. rate of growth. Evidence-based Practices that emphasize explicit skill-development of social emotional, and behavioral (SEB) competencies and community agreements in the classroom and across school settings. This also includes leveraging · Utilize consistent decision-making protocols at Grade-level/Department Meetings and/or Student Support Teams to ensure successful outcomes, skill development, and non-adversarial, non-exclusionary, and restorative methods for co-Consistently Progress Monitor individualized goals, aligned levels of support needed based on students rate of growth and generalization of skills across settings. targeted skill development, and rate of growth behavioral miscues Utilize consistent Decision-making Protocols at Student · Recognition and Appreciation Systems that reinforce community values and Support Teams to ensure successful outcomes. skill agreements and SEB skills in action development, and aligned levels of support needed based on students rate of growth and generalization of skills across

### II. SCOPE OF WORK AND KEY DELIVERABLES

Those selected as Community Partners and Service Providers will be committed to the goals of PPSD's Turnaround Action Plan and to ensuring that every student graduates college, career, and community ready; as well as share the understanding that development and advancement of essential social-emotional skills plays a vital role. Additionally, they will be invested in building strong student support teams and infrastructure needed to meet the needs of the whole child while helping to coordinate and ensure children, youth and families receive the necessary physical, emotional and educational support needed for optimal learning.

Community Partners and Service Providers will work in close partnership with district teams, student support teams, and the school communities they serve to coordinate and implement high quality services that effectively enhance social-emotional and academic skills and the overall health and wellness of Providence's children, youth, families, and schools. Overall responsibilities include, but are not limited to, the following:

- A. Ability to consistently coordinate and collaborate with PPSD's district Student Support Team and individual school-based Student Support Teams to build and advance infrastructure, processes, leverage funding, and engage in resource mapping.
- B. Provide evidence-based practices, services and interventions that meet the identified social-emotional and mental health needs and strengthen development of social emotional competencies across PPSD's students, families, staff, and schools; including identified students who fall into the category of uninsured or under-insured.
- C. Provide completed and up-to-date service delivery and implementation protocols for each proposed evidence-based practice and/or intervention (see <u>Appendix B</u>).
- D. Management of resources needed to effectively implement evidence-based interventions and service coordination (i.e. coordinators, staff, materials, technology, etc.).
- E. Evaluation and progress monitoring of services and programs delivered.
- F. Arrangement of financing for proposed services beyond what PPSD may be able to offer, and leveraging additional grant dollars and in-kind resources for programming and coordination of services.
- G. Resource mapping and coordination of neighborhood/community supports and services.

### **Indirect Service Delivery includes the following:**

- Consistent consultation & collaboration with district and school-level student support teams.
  - Planning, review, and evaluation meetings scheduled by the PPSD SEL & Mental Health Department in coordination with consultants/partners to collaborate on implementation and continued improvement of school-based mental health services and processes.
  - Time dedicated to being a member of school-based student support teams (when applicable) to support effective and informed decision-making and individualized planning.
  - Continuous development of intervention/service inventory and resource map for Providence and individual neighborhoods and schools to guide integrated student support teams and alignment of services to need.
- Continued collaboration on developing and implementing service delivery and implementation protocols that include entrance and exit criteria for identified and proposed practices, interventions and supports.
- Consultation and collaboration on building a system for billing Medicaid for school-based health services & leverage increased funding for school-based services.
- Completion of Progress Report and Performance Metrics.
- Provide professional development and potential opportunities to provide train-the-trainer model for PPSD staff on identified and/or proposed evidence-based services and interventions.

### **Direct Service Delivery includes the following:**

- In collaboration with school-based student support teams, implement proposed evidence-based practices, services, and/or interventions that meet the identified social-emotional and mental health needs and strengthen development of social emotional competencies across PPSD's students, families, staff, and schools.
- Use of evidence-based Screener & Assessment tools to effectively identify targeted goals and appropriate intervention/service (including appropriate level of care, intensity, etc.) and monitor progress of social-emotional skill development.
- Coordination of additional and/or appropriate resources and neighborhood/community supports and services aligned to needs of student and family.
- Commitment to receiving referrals only from Student Support Teams in efforts to maintain and strengthen MTSS systems and practices and follow the developed *Request for Assistance from Student Support Team Protocol*. Through this process, Integrated Student Support Teams will determine appropriate referrals to aligned services provided by Community Partners and agency staff will complete *Community Partner Referral & Service Logs* for each school serviced.
- Coordination with school-based student support teams in ensuring:
  - Referral forms are completed and logged appropriately
  - Signed release of information for school and agencies to collaborate and share pertinent information efficiently and effectively
  - Updates to counseling/intervention logs and progress reports completed monthly, at a minimum.

### School-Based Mental Health Counseling Service Delivery includes the following:

- In collaboration with school-based student support teams, proposed assessment & services are provided to students identified as needing individualized mental health services that: strengthen social emotional competencies, increase protective factors, reduce risk factors, and address symptoms of mental health challenges that are creating barriers to their learning, health and wellness.
- Commitment to receiving referrals only from Student Support Teams in efforts to maintain and strengthen MTSS systems and practices and follow the developed Request for Assistance from Student Support Team Protocol. Through this process, Integrated Student Support Teams will determine appropriate referrals to aligned mental health services provided by Community Partners and agency staff will complete Community Partner Referral & Service Logs for each school serviced.
- Direct services in the form of school-based mental health counseling interventions and strategies must be aligned to the developed *PPSD School-Based Mental Health Counseling Intervention Protocol* (see <u>Appendix C</u>) and utilize a consistent evidence-based approach to implementing the following endorsed treatment modalities:
  - Cognitive-Behavioral Therapy (CBT)
  - Solution-focused Brief Therapy (SFBT)
  - Motivational Interviewing (MI)
  - Dialectical Behavioral Therapy (DBT)
- Use of evidence-based Mental Health Screener & Assessment tools to effectively identify targeted goals and appropriate intervention/service (including appropriate level of care, intensity, etc.) and monitor progress.
- Assessments and direct services at no cost to students and families served; including students who may fall into the category of uninsured or under-insured.
- Coordination of additional and/or appropriate resources and neighborhood/community supports and services aligned to needs of student and family.
- Collaboration and coordination with school-based teams, staff, and community to implement intervention, generalize skills, and progress monitor.
- Consistent collaboration with school staff and participation of agency based-staff in school-based Student Support Team meetings (when applicable).
- Coordination with school-based student support teams in ensuring:
  - Referral forms are completed and logged appropriately
  - Signed release of information for school and agencies to collaborate and share pertinent information efficiently and effectively
  - Updates to counseling/intervention logs and progress reports completed monthly, at a minimum.

### III. REQUIRED QUALIFICATIONS & SPECIFICATIONS

The district requires a partner to meet the following qualifications and specifications:

- Demonstrated evidence and/or research that supports proposed practices, services and/or interventions
- Demonstrated experience implementing proposed practices, services and/or interventions with diverse populations and within, or in coordination with, the school setting.
- Staff and service providers must have appropriate licensure and/or certifications and high quality training required to implement proposed services with fidelity.
- Ability and capacity to effectively manage and coordinate school-based social-emotional and mental health services and engage in consultation and collaboration with district and school-based teams.
- Must be attentive to equity and consistently apply an equity lens to decision-making and service delivery.
- Demonstrated knowledge, understanding of, and commitment to social-emotional learning standards.
- Working knowledge of a Multi-Tiered System of Supports (MTSS) Framework and processes that support social-emotional learning, positive behavioral supports, mental health, trauma-responsive practices, restorative practices, academics, physical health, and operations of the school across grade levels and programs.
- Knowledge of mental/behavioral health assessment, diagnosis and treatment
- Experience working with or within a school setting, and collaborating and communicating with school and district administrators, teachers and a diverse population of students and families.
- Knowledge and/or experience with operation and facilitation of school-based problemsolving teams (i.e. MTSS Leadership Team, Wellness Teams, Grade-Level/Department Teams, Target Teams, Student Support Teams, etc.)
- Knowledge of Google Suite, and Microsoft Outlook
- Knowledge of insurance and billing processes for delivery of health-related services; including, but not limited to Medicaid.

### **General Specifications of Partners/Providers**

**Prime Responsibility:** The selected Service Provider(s) will be required to assume full responsibility for all services and activities offered in its/their proposal, whether or not provided directly. Further, the District will consider the selected Service Provider(s) to be the sole point of contact with regard to contractual matters.

**Assurance:** The Provider must guarantee that services provided will be performed in compliance with all applicable local, state and federal laws and regulations pertinent to this Request for Qualifications.

**Community Partner Policy:** The selected Service Provider(s) will be required to adhere to PPSD's Community Partnership Policy and submit upon request any documents under this policy.

**Independent Contractor**: In performance of the work, duties and obligations assumed by the offeror, it is mutually understood and agreed that the offeror, including any and all of the offeror's officers, agents and employees, will at all times be acting and performing in an independent capacity and not as an officer, agent, servant, employee, joint venture, partner or associate of the County.

**Performance-Based:** If a Service Provider is selected for a contract and/or MOU with PPSD, the agreement and/or contract will demonstrate a clear purpose and specific requirements of the work to be performed with measurable outcomes. All contracts must include the following information: a) Targeted Outcomes or Results – Measurable results and/or outcomes for implementing the evidence-based practice, intervention and/or services. b) Performance Standards – Standards for completeness, accuracy and timeliness for proposed services.. c) Monitoring Methods – The methods and timeline used to monitor and report on performance.

**PPSD reserves the right to:** Request clarification of any submitted information; Set aside a proposal or any irregularity including but not limited to missing information; Not enter into any agreement; Not to select any applicant; Amend or cancel this process at any time; Interview applicants prior to award and request additional information during the interview; Negotiate a multi-year contract or a contract with an option to extend the duration; Award more than one contract if it is in the best interest of PPSD; and/or Issue a similar RFQ in the future. Negotiate specific terms, conditions, compensation, and provisions on any contracts that may arise from this solicitation.

### IV. <u>TIMELINE</u>

The proposed schedule of events subject to the RFQ is as follows:

RFQ Issued by PPSD	Week of February 5, 2024
<b>Last Day to Submit Questions</b>	Thursday, February 29, 2024
Last Day for District to Respond to Emailed Questions	Friday, March 7, 2024
Deadline for RFQ Submissions	Monday, March 18, 2024 at 1:00pm
Notification to Qualified Applicants	Thursday, March 28, 2024

### V. PROPOSAL REQUIREMENTS

Proposals must include the following sections and information:

- 1. Signed Bid Form 1: Bidder Information
  - \*Must be signed by an owner or agent authorized by the organization/company.
- 2. Signed Cover Sheet (see Appendix A)
  - \*Must be signed by an owner or agent authorized by the organization/company.
- 3. Table of Contents
- 4. Executive Summary
  - a. Please provide a general understanding of your organization and role as a community partner, proposed evidence-based practices and/or interventions for service delivery, outcomes your organization is striving for, your qualifications to provide proposed services.

### 5. Background & Previous Experience

- a. Please provide a summary that includes examples of your previous experience and outcomes with implementing proposed services.
- b. Describe your experience implementing proposed services in an urban school district, with multilingual learners, and with participants across various learning styles.
- c. Describe your background and experience working with school districts, schools, and/or student support teams (i.e. multi-disciplinary problem-solving teams). Include knowledge, experience and/or training in a Multi-Tiered System of Supports (MTSS) Framework, Social-Emotional Learning and the 5 CASEL Competencies, and School-Based Mental Health.

# 6. Description of Proposed Services--Implementation of Evidence-Based Practices and Interventions and Approach to Service Delivery

- a. Please provide the list of evidence-based practices and/or interventions your organization is proposing for service delivery.
- b. Please provide a completed Implementation Protocol Template (*see <u>Appendix B</u>*) for each evidence-based practice and/or intervention your organization is proposing for implementation and service delivery and/or
- c. If applicable, please acknowledge and provide an initialed copy of the PPSD-developed *School-Based Mental Health Counseling Intervention Protocol* (see *Appendix C*).
- d. Summarize your approach to implementing proposed practices and/or interventions and delivering services in coordination with student support teams.
- e. Please describe your service delivery model during the summer months, vacation weeks, before/after school hours, etc. if your organization provides extended learning opportunities and/or services outside of the typical school schedule.

- f. Describe your general approach to working with district personnel, school administrators, staff, and families.
- g. Summarize what information and resources will be needed from PPSD to effectively implement proposed services and what level and type of District involvement is required.

### 7. Capacity & Ability to Effectively Coordinate, Collaborate, and Implement Schoolbased Services

- a. Please provide an organization chart and description of your organization's capacity to:
  - i. Staff and structure key personnel and team members to effectively coordinate, manage and deliver proposed school-based services and collaborate with district and school-based teams.
  - ii. Staff qualified service providers and deliver high-quality school-based services.
  - iii. Collaborate with district and school-based teams to support planning, implementation, and evaluation.
- b. Describe the method and approach used to evaluate program effectiveness and what data points are needed for this evaluation.
- c. Describe your existing, and potential approaches to financing the cost of implementation and program coordination beyond PPSD funding (including any known or expected grant that may be available to assist in implementing this program).

### 8. Qualifications of Staff & Key Personnel

- a. Please provide a description of key personnel who will support collaboration, coordination and management of proposed programming and include their qualifications, background, interests and investment; including resumes for key personnel and team members identified.
- b. Please provide a description of the service providers who will be delivering proposed services and include their qualifications and background.
- c. If applicable, please describe your approach to utilizing and supporting college and university students, interns, etc. to implement and deliver services.

### 9. Cost of Implementation & Proposed Budget

- a. Please provide a **budget detail sheet and narrative** that includes a breakdown and description of costs associated with all aspects of effective implementation. This can be presented in any format that best fits the proposed service(s) and should include the following information:
  - i. **Total cost of implementation** for service delivery of each proposed evidence-based practice and/or intervention including:
    - 1. Materials, Training/Certification, Service Delivery/Staff, Oversight/Administrative Costs, etc.

- 2. a price per student/per hour (if applicable)
- ii. An **overall budget** for the proposed programming across all services, coordination, management, materials, resources, etc.
- iii. Total proposed costs to be covered by PPSD.
- iv. Potential cost leveraged by insurance/Medicaid billing.
- v. Potential cost leveraged by additional grant funding or in kind donations aligned to this support.
- b. Please provide a **section in the budget narrative that describes any leveraged resources provided (as applicable)** to support implementation, management and service delivery. Interested Community Partners & Service Providers are encouraged to leverage resources to increase stakeholder investment in the vision and goals outlined in this RFQ and broaden the impact of advancing school-based student support teams and access to a continuum of social-emotional and mental health supports for Providence students and families. Leveraged resources are all resources, both cash and in-kind.

\*Interested applicants should submit proposals that include required sections and information to the location listed on Page 1 of this RFQ and include the original plus three (3) copies.

### VI. EVALUATION OF PROPOSALS & SELECTION PROCEDURES

The evaluation criteria includes point values that have been assigned to the required elements of the proposal listed in the above "Proposal Requirements" section of this RFQ. A selection committee will evaluate submitted proposals based on the evaluation criteria listed below:

Criteria	Possible Points
Bid Form 1 & Cover Letter signed by authorized agent	0 Points *Required
Executive Summary	0 -10 points
Background & Previous Experience	0 -10 points
Description of Proposed ServicesImplementation of Evidence-Based Practices and Interventions and Approach to Service Delivery	0-30 points
Capacity & Ability to Effectively Coordinate, Collaborate and Implement School-based Services	0-25 points
Qualifications of Staff & Key Personnel	0-25 points
Cost of Implementation & Proposed Budget	0 Points* <i>Required</i>
Total	100 Points

### VII. <u>LIMITATIONS</u>

This Request for Qualifications (RFQ) does not commit the Providence School Department to award any contract or pay for the preparation of any proposal submitted in response to this RFQ. The Providence School Department may withdraw or amend this RFQ in its entirety or in part, at any time if it is in the best interests of the organization to do so. This award is contingent upon the receipt of funding.

### VIII. QUESTIONS

Questions regarding this Request for Qualifications should be sent to Natalie Fleming at Natalie.Fleming@ppsd.org no later than Thursday, February 29, 2024 at 4:30PM.

### **BID FORM 1: BIDDER INFORMATION**

### Agrees to Bid on:

Working with Community Partners to Advance Integrated Student Support Teams & Build a Multi-Tiered System of Social-Emotional, Behavioral & Mental Health Supports (MTSS-SEB)

DATE AND TIME TO BE OPENED: Monday, March 18, 2024 at 1:00pm

Name of Bidder (Firm or Individual):	
Business Address:	
Contact Email Address:	
Contact Phone Number:	
	Signature of Representation
	Title

### **APPENDIX A:** COVER SHEET

RFQ TITLE: Working with Community Partners to Advance Integrated Student Support Teams & Build a Multi-Tiered System of Social-Emotional, Behavioral & Mental Health Supports (MTSS-SEB)

Date:

Community Partner/Organization Information		
Name of Organization		
Contact Person		
Contact Person Title		
Email of Contact Person		
Phone Number		
Street Address, City, State, Zip		
Type of Entity	<ul><li>For-profit (please attach documentation)</li><li>Nonprofit</li></ul>	
W-9	Please attach	
Proposed Services	Please list the names of each Service and Evidence-Based Practice or Intervention that you are proposing to deliver:	
Language(s)	Please list all languages that proposed services can be provided in:	
Specific Student Populations Served	Please check all that apply:  Preschool Students of All Abilities Elementary Students of All Abilities Middle School Students of All Abilities High School Students of All Abilities Students who are English Language Learners (ELL) Parents/Caregivers who are English Language Learners Parents/Caregivers Staff Administrators Other: Other:	

### Type of Services and Level(s) of Support (please check all that apply) Consultation Universal Practices & Interventions (Tier 1) • Professional Development Targeted Group Interventions (Tier 2) • Targeted Training and Coaching Targeted Individual Interventions (Tier 2) Intensive Group Interventions (Tier 3) • Data-Based Decision-Making Intensive Individual Interventions (Tier 3) • Teaming Practices Family & Community Engagement Primary Areas of Focus (please check all that apply) Mental Health Positive Behavioral Supports Social, Emotional, Behavioral Health **Restorative Practices** • Health & Nutrition Student Engagement Mentoring • Physical Health • 5 Social Emotional Learning Standards Peer Mentoring & Competencies Youth-led Services & Supports Leadership Development Self-Awareness • Self-Management Cooperative Games Social-Awareness **Sports** • Relationship Skills Dance • Decision-Making Skills Arts & Culture Substance Abuse & Drug Prevention Family Engagement Suicide Prevention Community Engagement **Violence Prevention** Other Teaming Other Data Other Systems By signing this Cover Sheet I hereby attest: that I have read and understood all terms listed in this Request for Qualifications; that I am authorized to submit a proposal on behalf of the listed entity; and that should this proposal for qualification be accepted, I am authorized and able to secure the resources required to deliver against all terms listed within the RFQ as published by the Providence Public School Department, including any amendments or addenda thereto except as explicitly noted or revised in my submitted proposal for qualifications. **Signature of Authorized Representative** Date

### **APPENDIX B: IMPLEMENTATION PROTOCOL TEMPLATE**

Name of Evidence-Based Practice or Intervention:

<u>Standard Protocol Template: E-B Practices & Interventions</u>\*\**link to Electronic version, allows you to make a copy and update title & information of proposed service*\*\*

Providence	STANDARD PROTOCOL
	<b>EVIDENCE-BASED PRACTICES &amp; INTERVENTIONS</b>

Level of Support (	Гier):	0	Universal (Tier 1)	0	Targeted (Tier 2)	<ul><li>Intensive (Tier 3)</li></ul>
Target A	Area:					
Prior Requireme	ent(s):					
DESCRIPTION						
Brief Description	(purp	ose/out	actice/intervention) i come)with (target tion summary).			ed to of need) by providing
Goals & Objectives	•					
Student Outcomes	•	-	+ Increase in		•	Decrease in
Target Audience						
Evidence-Base						

IMPLEMENTATION REQUIREMENTS & RESOURCES		
Consent, Assent, Notifications		
Location/Setting		
	How often (weekly, bi-weekly, etc.), for how long each time, and for what duration/# of sessions before review of progress is necessary to determine effectiveness and next steps:	
Materials & Resources	Training and Implementation Materials & Resources Needed Include:	
Training	Training type, location, mode, duration, certification application, renewals, sustainability, etc.	
Required Qualifications of Service Provider		
Role(s) of Provider		
Alternative/Additional Providers (if applicable)		

IMPLEMENTATION STEPS	
Entry Criteria	
Pre-Implementation Steps	1.
Implementation (Service Delivery)	1.
Progress Monitoring & Evaluation of Effectiveness	
Exit Criteria	

ACCOUNTABILITY & SUSTAINABILITY		
Protocol Created by:		
Date of Creation:		
Review Date:		

### **APPENDIX C: SCHOOL-BASED MENTAL HEALTH COUNSELING INTERVENTION** PROTOCOL & ACKNOWLEDGMENT



Name of Evidence-Based Practice or Intervention:					
SCHOOL-BASED MI	SCHOOL-BASED MENTAL HEALTH COUNSELING				
Level of Support (Tier):	Universal (Tier 1)	✓ Targeted (Tier 2)	✓ Intensive (Tier 3)		
Target Area:	Social-Emotional Skills & Mental Health				
Prior Requirement(s):	<ul> <li>✓ Student Support Team Request for Assistance Form Submitted &amp; Initial Meeting Held</li> <li>✓ Entry Criteria Met &amp; Qualified Mental Health Service Provider Identified (i.e. district-employed or community partner)</li> <li>✓ If Applicable, Referral to Community Partner-Service Provider Completed</li> <li>✓ Parent/Guardian Notified &amp; Consent Obtained</li> </ul>				

### DESCRIPTION

**Description** School-Based Mental Health Counseling is a group or individual intervention implemented with Pre-K-12 students who have identified risk factors and are showing signs or symptoms of social, emotional and mental health challenges that are creating barriers to their learning, health and wellness. It utilizes endorsed treatment modalities to provide evidence-based direct instruction and assessment, teaching and therapeutic strategies, and progress monitoring of essential social-emotional skills, such as selfawareness and self-management, which maintain optimal mental health and engagement.

> To ensure best practices and high-quality service delivery, all district-employed Mental Health Professionals and partnering Community Clinicians/Agencies will apply a consistent, evidence-based approach to implementing the following endorsed treatment modalities:

- 1. Cognitive-Behavioral Therapy (CBT)
- 2. Solution-Focused Brief Therapy (SFBT)
- 3. Motivational Interviewing (MI)
- 4. Dialectical Behavioral Therapy (DBT)

of note, specific curriculums and additional treatment modalities beyond those listed\* should have a separate, approved implementation protocol.

### **Goals & Objectives**

- Identification and management of social, emotional and mental health challenges, stressful experiences/life challenges, and existing strengths & skills.
- Strengthen targeted social-emotional competencies and skills
- Increase engagement and overall functioning
- Enhance Protective Factors & mitigate Risk Factors

<b>Student Outcomes</b>	+ Increase in	- Decrease in	
	<ul> <li>Self-Awareness</li> <li>Self-Management Skills</li> <li>Relationship Skills</li> <li>Decision-Making Skills</li> <li>Engagement in Learning</li> <li>Protective Factors</li> </ul>	<ul> <li>Impeding Symptoms &amp; Behaviors</li> <li>Barriers to Learning &amp; Health</li> <li>Negative Affect</li> <li>Emotional Distress</li> </ul>	
Target Audience	Small groups (2-5 students) and/or individual students across all grade levels and programming (Pre-K through high school; specialized, alternative and transition programming, etc.) who are able to attend school and access school-based counseling intervention sessions consistently. Please see entry criteria below for further information.		
Evidence-Base	The endorsed treatment modalities are well supported by a large evidence-base demonstrating enhancement of social-emotional functioning, reduction of symptoms, and increased engagement within the school setting. The National Center for School Mental Health is one of many resources that can provide additional information: <a href="https://www.schoolmentalhealth.org/resources/early-intervention-and-treatment-tiers-23/">https://www.schoolmentalhealth.org/resources/early-intervention-and-treatment-tiers-23/</a>		

IMPLEMENTATION	REQUIREMENTS & RESOURCES		
	School Based Mental Health Counseling Interventions are targeted and individualized interventions that require parent/guardian notification and informed consent.		
	*Of note, this intervention should be differentiated from responsive, in-the-moment, support that School Psychologists and School Social Workers often provide under the umbrella of general school services. Consent is required if/when these initial contacts and responsive supports advance to meet identified needs that require direct targeted and/or individualized intervention.		
Location/Setting	School-Based Mental Health Counseling must be delivered in a location that:		
	<ul> <li>Is compliant with The Health Insurance Portability and Accountability Act of 1996 (HIPAA)-the federal law that requires national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge.</li> <li>Is private, free from distractions, and allows for confidentiality; regardless if delivered at the Tier 2 or 3 level of support or with individuals or groups of students.</li> <li>Has appropriate furniture to accommodate the provider's ability to provide direct instruction and for individual or groups of students to complete activities utilizing a variety of materials.</li> </ul>		
	How often (weekly, bi-weekly, etc.), for how long each time, and for what duration/# of sessions before review of progress is necessary to determine effectiveness and next steps:		
	<i>Tier 2 Level of Support</i> - School-based Mental Health Counseling should be delivered, at minimum, 1x a week for 30 minutes for a duration of 6-12 weeks determined by service provider, identified goals and Student Support Plan. Student progress should be reviewed by the Student Support Team every 6-12 weeks, at minimum, to determine student outcomes and level and type of support required.		

Tier 3 Level of Support--in addition to Tier 2 supports, the frequency and intensity of school-based mental health counseling and services will be aligned to the identified needs, individualized goals, and desired outcomes developed by the Student Support Team and documented on a Student Support Plan. Progress should be reviewed and plans updated accordingly every 6-8 weeks (or sooner as determined by the team). **Materials &** *Training and Implementation Materials & Resources Needed Include:* Resources • Qualified Mental Health Service Provider • Appropriate and confidential space and furniture that can accommodate small group and/or individual intervention sessions • Training & Implementation Manuals, Books and/or Materials connected to the endorsed treatment modalities. Examples include, but not limited to: O DBT Skills in Schools-Skills Training for Emotional Problem Solving for Adolescents (DBT STEPS-A), James J. Mazza, Elizabeth T. Dexter-Mazza, Alec L. Miller, Jill H. Rathus, and Heather E. Murphy o Cognitive Behavioral Therapy in K-12 School Settings: A Practitioner's Workbook, 2nd Edition, Diana Joyce-Beaulieu PhD NCSP, Michael L. Sulkowski PhD NCSP O Brief Counseling That Works-A Solution-Focused Therapy Approach for School Counselors and Other Mental Health Professionals, Third Edition, Gerald B. Sklare O The Power of Groups-Solution-Focused Group Counseling in Schools, Leslie Cooley **Training** Implementation of School-based Mental Health Counseling Interventions requires all service providers to be qualified Mental Health Professionals who: • Have specific training in Ethical Standards, Mental Health Counseling, and implementation of endorsed treatment modalities. • Engage in continuous professional development to maintain up-to-date treatment strategies and approaches in effectively implementing mental health counseling in the school setting. • Are trained in PPSD's Suicide Prevention Policy and Protocol. **Required** Service Provider(s) must be Licensed and/or Certified Mental Health Professional as Qualifications of demonstrated by holding a current License issued by the Department of Health and/or Service Provider/ Certification issued by the RI Department of Education, including, but not limited to, **Interventionist** LCSW, LICSW, LMHC, and a MA/CAGS or Ph.D./Psy.D. in School Psychology. If services are provided by a qualified Mental Health Professional who is not districtemployed (i.e. a community partner/clinician), there must be an active contract or MOU with the district to provide counseling services in the school setting. Role(s) of Qualified Provider roles include School Psychologists, School Social Workers, Contracted Provider Community Clinicians-Licensed Social Workers, Licensed Mental Health Counselors Alternative/ School Psychologist Interns and School Social Work Interns can facilitate this intervention under the guidance of their district-employed and school-based supervisors Additional Providers (if applicable) who are appropriately qualified as defined above.

### IMPLEMENTATION STEPS

Entry Criteria Through consistent school-wide Student Support Team & Request for Assistance processes and data routines, students who meet one or more of the following criteria will be identified as appropriate for this intervention:

- a. At-risk for making and maintaining growth across social-emotional development as identified through universal screening and assessment, student outcomes data, social-determinants of health, etc. Including, but not limited to: BIMAS-SEL, BIMAS-Negative Affect domain, Social Emotional Competence Assessment (SECA), SEL skills rubric, behavior incidents, nurse and/or school counselor visits, social-determinants of health screening, protective & risk factors assessment, etc.
- b. Experiencing emotional distress and accompanying symptoms and behaviors that are significantly impacting their overall functioning as identified through above-mentioned screening, assessment and reports as well as meeting cut off criteria for clinical significance on evidence-based mental health screeners/assessment tools.

### **Pre-Implementation Steps**

- 1. Identify groups of students with similar needs and determine intervention groups based on: type of challenge, social-emotional skill, symptoms, intensity of need and growth, developmental level/needs, etc.
- 2. Identify individual students who require a more intensive and individualized approach to counseling to reduce distress/symptoms and ensure optimal socialemotional skill development and growth.
- 3. Identify and assign Case Manager and Service Provider/Interventionist responsible for implementing group and/or individualized school-based mental health counseling intervention(s).
- 4. Notify Parent/Guardian(s) of intervention/support plan and obtain written consent.
- 5. For community partner referrals, parent/guardian and student complete intake process with agency referred to.
- 6. Complete additional evidence-based screenings and assessment as needed to support targeted approach and goal development.
- 7. Develop a Student Support Plan that includes counseling intervention goals, desired outcomes, approach and schedule, duration and frequency, and progress monitoring tool(s) based on the endorsed evidence-based treatment modalities.
- 8. Develop a schedule by collaboratively determining an appropriate location and the best time for delivery of the counseling sessions to ensure fidelity and effectiveness of the plan (i.e. rotating schedule, intervention block, lunchtime, before/after school, etc.).
- 9. Review plan and schedule with student(s), teachers, and any other appropriate team members needed to effectively implement service.

### **Implementation** (Service Delivery)

1. Utilize explicit instructional techniques (i.e. I do, we do, you do) and therapeutic strategies aligned to social-emotional competencies and the following endorsed treatment modalities to deliver school-based mental health counseling:

	<ul> <li>a. Cognitive-Behavioral Therapy (CBT)</li> <li>b. Solution-Focused Brief Therapy (SFBT)</li> <li>c. Motivational Interviewing (MI)</li> <li>d. Dialectical Behavioral Therapy (DBT)</li> </ul>
	<ol> <li>Support coordination and alignment of appropriate resources and neighborhood/community supports and services aligned to identified goals and needs of the student and their family.</li> </ol>
	3. Provide a range of useful skill variations.
	4. Provide opportunities for generalization and direct instruction across targeted educational settings (if applicable).
	<ol><li>Engage in continuous communication with teachers, applicable staff, parents/guardians, and outside providers (when applicable).</li></ol>
	6. Determine and communicate how teacher(s)/staff/caregiver(s) can encourage and reinforce use of skills and ways to participate (i.e. homework).
	7. Monitor progress and adjust strategies and supports as necessary; ensuring continuous alignment to goals and support plan.
& Evaluation of	Review Progress Monitoring of individualized goals, targeted skill development, rate of growth, symptom reduction, and overall functioning at scheduled Student Support Team Review Meetings every 6-12 weeks (or as needed). The team will utilize the listed data and information to:
	<ol> <li>Evaluate effectiveness of school-based mental health counseling</li> <li>Drive continuous decision-making and service delivery aligned to level of support and appropriate intervention(s) needed</li> </ol>
Exit Criteria	Exit Criteria that supports successful outcomes for students' social-emotional development, mental health and continuous learning and engagement includes:
	<ul> <li>a. Growth and maintenance of targeted social-emotional skills as identified on universal screeners and SEL assessment tools (i.e. BIMAS-SEL, BIMAS- Negative Affect domain, Social Emotional Competence Assessment (SECA), SEL skills rubric, etc.).</li> </ul>
	. ,
	b. Increased overall functioning and engagement, and results of evidence-based mental health screeners/assessment tools falling within the non-clinical range.

# \*RFP-Community Partner/Organization Acknowledgement of Protocol This protocol has been developed to guide consistent implementation of evidence-based mental health counseling interventions delivered in PPSD by all qualified school-based mental health professionals; including school-employed and school-based community mental health professionals. By checking this box the Community Partner/Organization acknowledges and commits to the requirements outlined here in PPSD's School-Based Mental Health Counseling Intervention Protocol Initial: Date: