



FY26 Supportive Services
Pre-Bid Meetings: Q&A
DV/SA – KRP – FCSV

5/29/25 DV/Sexual Assault Intervention

Attendees: Laura Mitchell, Trisha Sverns, Miguel Karasingh, Amber Campos, Mat Klemp (YWCA), Joel Bell (DABSJ), Brianna Figures (CCWM), Kellie VanderKlok (CCWM), Lesa Hardiman (YWCA), Hope James (Samaritas)

Q1	<p>There have been some changes to the Expected Contract Performance Outcomes, including increased percentage targets and the addition of new measures—such as outcomes related to a men’s group and one focused on power and control (see Attachment B). These changes were not discussed or intended during WMPC meetings. (Pg 4 and 31, Attachment C)</p> <p><u>Key concerns include:</u></p> <ul style="list-style-type: none">• The challenge of achieving a 90% success rate for mandated services, especially for the men’s group.• A 5% rereferral rate may be unrealistic, as it’s largely beyond the provider's control.
A1	The RFP has been revised to include outcomes consistent with the FY25 contract.
Q2	ALL RFP’s have contract term of 1 year...is this intentional?
A2	<p>Contracts are for 1 year with 2 extension years possible.</p> <p>All Supportive Services contracts align with WMPC contract with MDHHS.</p>



5/30/25 Kent Reunification Program

Recap: WMPC Bidder's Conf - Kent Reunification Program Friday, May 30

Attendees: Laura Mitchell, Trisha Sverns, Miguel Karasingh, Amber Campos, Kellie Vanderklok (CCWM), Aryn Manni (Samaritas), Rachel Sykes (Samaritas), Jeremy Rospierski (Samaritas), Leonica Erwin (Wellspring), Kimberly Sparks (Wellspring), Brianna Figures (CCWM), Anetra Bennett (Samaritas), Sarah Koon (DABSJ), Joel Bell (DABSJ), Ben Brower (DABSJ)

Q1	How many contracts will be issued for FY26?
A1	One (1) contract will be issued for KRP.
Q2	The State has begun discussions and is evaluating transitioning FFM, FTBS and FRP programs to the MiFamily Together (MFT) model in key regions for FY27, with an early start of August 2026. Have there been any discussions with the State in coordination with WMPC on transitioning to MiFamily Together in Kent County in FY27?
A2	WMPC intention to align with MFT and conversations are happening now with MDHHS. Per the MDHHS Family Preservation Program Office (FPPO), when MFT is implemented statewide in FY27, eligibility in Kent County will NOT include KRP as this service will be retained exclusively by WMPC/KRP.
Q3	The RFP states that Arizona Self Sufficiency Matrix ASSM will be used as the assessment tool.
A3	This is an oversight on our part. Wellspring currently uses the North Carolina Family Assessment Tool for General Services (NCFAS-G). WMPC will continue to use this assessment tool for KRP services in FY26.
Q4	MFT uses the Family Advocacy and Support Tool (FAST) assessment, which is tailored specifically for MFT. Not sure how feasible it will be to switch or implement ASSM.
A4	WMPC will continue to use the North Carolina Family Assessment Tool for General Services (NCFAS-G) for KRP services in FY26.
Q5	The RFP requires the Team Leader to have a master's degree, but the current state standard requires only a bachelor's degree plus 2 years' experience.
A5	The RFP has been revised to reflect this change in qualifications for the Team Leader, consistent with the state FRP contract.
Q6	The Team Leader role is also referred to as "Therapist" in some sections, which requires credentials.
A6	Team Leader is the correct title. The RFP has been revised to reflect this change.
Q7	For worker positions, the state contract requires bachelor's degree or an associate's degree or equivalent.
A7	In alignment with the state FRP contract, WMPC has revised the RFP to include this language for the Family Worker position.

	Contingent Staff requirements have been added to the RFP, in alignment with the state FRP contract.
Q8	# of cases to be served (90), that's not attainable. State Contract previously included 90 for two years, or 45 a year
A8	The estimated number of eligible clients to be served is 30 per year to align with the current FRP state contract.
Q9	FRP is rigid model – is WMPC open to express an individualized approach to families to support caregivers with placement stability
A9	<p>WMPC is very open to this. The North Carolina Family Assessment Tool for General Services (NCFAS-G) should address an individualized approach with families. WMPC is flexible with adjustments to the contract throughout the year. KRP is intended to support both reunification and Rapid Reunification Court families.</p> <p>EFC is designed to provide placement stability for caregivers.</p>
Q10	Are there specific forms for finance or budget that need to be used and uploaded in submitting budget information?
A10	<p>Bidders should use a budget format of their choosing. At a minimum the budget should include the following information:</p> <ul style="list-style-type: none"> • Total Cost • Unit Cost: Total Cost minus "Specific Assistance" and "Travel" costs • Specific Assistance • Travel • Unit Rate (Unit Cost / Total Hours) <p>Beyond the totals for the categories listed above, please provide detail for staffing plans, FTE, and salaries.</p>
Q11	<p>Is there a specific/standard staffing model that should be followed and a standard caseload size as is outlined within the FRP state contract which notes the following: <i>"A standard full team is comprised of one part-time FRP Program Manager (0.2 FTE), one part-time FRP Supervisor (0.5 FTE), one full-time FRP Team Leader (1 FTE), and two full-time FRP Family Workers (2 FTEs). It is also acceptable to staff with a part-time FRP Supervisor (0.5 FTE) and part-time FRP Team Leader (0.5 FTE).</i></p> <p>It is allowable for the part-time Supervisor and part-time Team Leader to be the same person. Each FRP Family Worker may serve up to six families at a time in single county contracts. In multi-county contracts, each FRP Family Worker may serve up to five families at a time."</p>
A11	<p>Language has been added to the RFP to indicate the Standard KRP Team and (NEW) Contingent Staff requirements (Attachment D)</p> <p>WMPC will consider a contract request for an exception to the staffing model based on program need and utilization.</p> <p>The caseload size is accurate in Question 11.</p>

Q12	Will WMPC provide report templates? Question Ki, asks for report templates to be provided; however, the RFP says to utilize KRP templates which we do not have access to.
A12	WMPC does not have a report template. Provider may create their own template or utilize the MDHHS report format.
Q13	Could the Initial Service Plan Report be due to PAFC within seven days of completion of the report period? (Following the timeframe of the Updated Service Plan and FRP state contract). The FRP state contract reads as follows: <i>“Complete the Initial Service Plan Report and provide it to the MDHHS referring worker within seven days of completion of the first thirty days of service from the family’s date of referral.”</i>
A13	Yes, this language for the Initial Prevention (IPP) Plan has been revised in the RFP. WMPC aligns with MDHHS on timeline for the IPP and UPP.
Q14	The RFP states that weekly supervision must be provided face-to-face. Can this be completed virtually?
A14	Yes, weekly supervision may be provided in person or virtually. (Preferably with camera ON)
Q15	Will any exceptions be made regarding the Master's degree requirement for the Program Manager, Supervisor and Therapist? For example, could an exception be made if an individual has a Bachelor's degree with a particular amount of experience in the field? It should also be noted that MiFamily Together has the following degree requirements: <ul style="list-style-type: none"> a. <i>Program Manager: requires a bachelor’s degree (masters preferred) in any human services field or education. Supervisory experience is required.</i> <ul style="list-style-type: none"> i. <i>Position must be no less than .20 FTE</i> b. <i>Supervisor: requires a bachelor’s degree in any human services field or education.</i> <ul style="list-style-type: none"> i. <i>No more than five direct workers per supervisor.</i> c. <i>Direct Worker: requires a bachelor’s degree in any human services field or education. If there is no suitable bachelor level candidate, the candidate may have two years’ experience working with children and/or families and an associate degree or the equivalent in human services or education and be actively working towards a bachelor’s degree in human services or education.</i> d. <i>Exceptions: Degrees other than those within the human services field or education, for any position who may work directly with families, must be approved by Family Preservation Program Office.</i>
A15	Yes, the RFP has been revised to include this updated language. Exceptions may be discussed with WMPC prior to hire.

Q16	What is the duration of a case and the frequency of visits, including the number of weekly face-to-face hours or is the hope that these things will be determined based off of our assessment? If so, what is the preferred assessment tool?
A16	Yes, this will be based on the assessment. The North Carolina Family Assessment Scale – General Services (NCFAS-G) is the preferred assessment tool.
Q17	In regard to Performance Outcomes A and B, what standardized tool is expected to be utilized?
A17	There is not a standardized tool for these outcome measures. MDHHS-FPPO will track these metrics as part of the contract management activities. The RFP has been revised. <i>A=90% of families should not have an investigation with confirmed abuse or neglect within 6 months of case closure; B=85% should have it within 12 months of closure.</i>
Q18	Is there a specific amount to be allocated for transportation and specific assistance?
A18	Specific Assistance is an average of \$300 per family. The transportation budget is determined by the bidder. The mileage rate is the agency's rate, or the Federal mileage reimbursement rate, whichever is less.
Q19	Should we reference the positions as a Therapist or a Team Leader?
A19	Team Leader is the correct title for this position.
Q20	Has there been a consideration to reduce the estimated number of clients to be served annually?
A20	Yes, in alignment with the state FRP contract, the RFP has been revised to indicate 30 families per year.
Q21	For clarification, are we able to bill for all services provided (Face-to-Face, Phone, Collateral, Travel, Other)?
A21	<u>Actual Cost items</u> are Transportation and Specific Assistance – these are separate from the Unit Rate. <u>Unit Rate Cost items</u> include all other expenses that are included in the Unit Rate. Please provide detail as for staffing plans, FTE, and salaries.
Q22	In order to expand utilization of the contract and serve more families in Kent County, would the WMP consider amending client eligibility to permit referrals for any child already in out-of-home foster care when placement stability is at risk or when the child is in a higher-cost setting such as Enhanced Foster Care (EFC), treatment foster care, or congregate care? Proposed Eligibility Language - Children in any out-of-home foster-care placement are eligible for KRP when: <ul style="list-style-type: none"> i. Reunification is scheduled within 30 days or occurred within the past 30 days, or ii. Placement stability is at imminent risk (documented caregiver requests for removal, multiple incident reports, or prior disruptions) and disruption

	would likely lead to a more restrictive or higher-cost setting, or any move that would sever existing attachments.
A22	No, EFC supports placement stability
Q23	The state no longer requires 12-month follow-ups. Will this be adjusted to align KRP with state contracts?
A23	Correct, the 12-month follow-up will not be required.
Q24	Regarding Item J, question iii: Confirming that “previous contracts” refers to those most alike in service to KRP, such as FRP? The question states “as relevant”, which seems to support this assumption.
A24	Yes, consider experience with similar services, including FRP, FFM, MFT, etc.
Q25	Is a separate reimbursement provided for or will this need to be factored into the unit rate.
A25	The Unite Rate should cover all expenses, except for Transportation and Specific Assistance – these are actual cost reimbursement items.
Q26	Do the parents the children are being returned to need to reside in Kent Co? It only states the children need to have been removed by Kent DHHS. If they can reside in surrounding counties, this can affect our mileage budget.
A26	No, parents do not need to reside in Kent County. Children need to be removed by Kent DHHS. Exceptions need to be requested to WMPC.
Q27	Can you please forward us more information on Rapid Reunification in Kent County?
A27	Refer to the explanation within the proposal document. A one-pager document is added to the email sent to those who attended the pre-bid meeting.
Q28	For RRC cases, does this mean that KRP could be working with a family for 12 months or more while they are working on reunification?
A28	It is possible but unlikely. It is likely KRP will support families longer than a typical case.
Q29	Can KRP be put in at the start of removal? If we are reading the RFP correctly, would the 30-day timeframe for return not apply to RRC cases?
A29	Yes, it is possible for Rapid Reunification Court (RRC) cases to be served earlier and for a longer period of time. Typically RRC determinations happen at adjudication. The NCFAS assessment will support the need for KRP involvement.
Q30	Can families stay open in KRP if their FC case closes? (In MFT we can stay open to provide continued support to families while they transition to no longer having a case. It’s been an issue for years in FRP that we had to close if the case did. We already see the benefit in MFT)
A30	No, WMPC is unable to fund this service after case closure. This will be considered as MFT rolls out statewide in FY27.
Q31	In the Friday bidder’s conference, mentioned was made about serving relative placements similar to MFT. This raises a few questions:

	Would the intent of referring relative placements to KRP be for placement stabilization like MFT? In that case, it wouldn't be reunification services per se and there would not be the 30 day return requirement?
A31	This was an error. EFC is the service that supports placement stability.
Q32	Could our agency propose to also be a step down from EFC for those relative placement families that needed further assistance? We could focus more on the parents/family as opposed to the child's specific behaviors.
A32	No. EFC is the service that supports placement stability for families reunifying and parents involved with Rapid Reunification Court.
Q33	Would WMPC keep a waitlist, and we would report daily openings like with state programs, or would the contractor keep a waitlist?
A33	KRP has been underutilized, so we do not anticipate the need for a waitlist. WMPC will collaborate with the provider if the need for a waitlist becomes necessary. A daily report of openings is not necessary.
Q34	<i>Interview every family member, including each child, regardless of the placement of the child(ren), within five (5) days of receiving referral information.</i> Can you provide more specifics on what the interview should entail? (Do they mean forensically interview like FC case managers do?)
A34	The interview is part of the intake assessment. It is not required to follow forensic interview protocol.
Q35	Does KRP have their own report templates, or do they utilize the Universal Prevention Plans from MDHHS?
A35	WMPC does not have a report format. Provider may create their own form or utilize the MDHHS report formats. (MDHHS-6058 and -6059)
Q36	xviii. c. <i>KRP staff are available to the family for school program assistance in crisis situations.</i> Can you please expand on examples to define this better and indicate what this entails?
A36	This will vary based on the family's need for support at school.
Q37	xx. <i>Assist referred families with transportation needs. KRP staff shall have access to Service Provider's vans or some form of adequate transportation for recreational activities to assist families in transportation. KRP staff shall also use their own vehicles to transport families to Service Provider's services as well as other important contacts in the community.</i> Is this insinuating that the provider must have a larger vehicle available for workers to utilize??
A37	No, this does not mean the provider must have a larger vehicle or van. The provider will problem-solve transportation needs for larger families.

Q38	<p>xxiii. <i>Short term alternative placements: If the KRP team, PAFC Referring Worker, and the family are not successful in finding appropriate short-term alternative placement resources within the family's social network, the Service Provider must have access to such placements for emergency purposes, for up to a maximum of five (5) days.</i></p> <p>This is something that was in state FRP contracts a long time ago. We had to show that we had respite FC homes available if needed. I think I only ever utilized this once or twice over the years and I'm not sure it's even in the state contracts anymore. Can you clarify that this is still an option?</p>
A38	<p>Language in the RFP has been revised to align with the statewide FRP contract. Short-term (five days or under) alternative placements should be determined with the family.</p>
Q39	<p>Unit definition does not define what reunification services count towards a unit.</p> <p>Is this traditional unit billing similar to legacy programs that includes admin time? Can all supervisor and PM activities be billed? I did not see any mention of office support and if that would be billable.</p>
A39	<p>The Unite Rate should cover all expenses, except for Transportation and Specific Assistance – these are Actual Cost reimbursement items.</p> <p>The provider determines what is included in Direct and Indirect billing.</p> <p>Direct billing time includes time in-person with a family, attending meetings or hearings, etc. Indirect time includes paperwork, supervision, team meetings, etc. Office support time is billable within the Unit Rate as Indirect time.</p>



5/20/25 FC Supportive Visitation

Recap: WMPC Bidder's Conf - FC Supportive Visitation Friday, May 30

Attendees: Laura Mitchell, Trisha Sverns, Miguel Karasingh, Amber Campos, Shanthais Moody (Bethany), Aryn Manni (Samaritas), Rachel Sykes (Samaritas), Jeremy Rospierski (Samaritas), Leilani Marx (Samaritas), Leonica Erwin (Wellspring), Kimberly Sparks (Wellspring), Brianna Figures (CCWM), Sarah Koon (DABSJ), Ben Brower (DABSJ), Susan Chang (Arbor Circle), Diane Marquess (F&CS)

Q1	The RFP stated only one contract will be issued for FY26. Our agency feels there is benefit in securing more than one provider to ensure availability for referrals. Analysis regarding FCSV support service referrals and utilization was completed by the Permanency Manager in January 2025. Recent Trends in referral need seem to indicate more need and opportunity for FCSV service delivery. Does the new bid take into account an increase in volume for FY26?
A1	After further consideration, WMPC has decided to maintain two (2) contracts for FCSV for FY26, each with a value of \$150,000 per year. The RFP has been revised to reflect this change in the Program Description.
Q2	The State has begun discussions and is evaluating transitioning FFM, FTBS and FRP programs to the MiFamily Together model in key regions for FY27, with an early start of August 2026. Have there been any discussions with the State in coordination with WMPC on transitioning to MiFamily Together in Kent County in FY27?
A2	Yes, WMPC is exploring this with the MDHHS.
Q3	Are there specific forms for finance or budget that need to be used and uploaded in submitting budget information?
A3	<p>The bidders should use a budget format of their choosing. At a minimum the budget should include the following information:</p> <ul style="list-style-type: none"> • Total Cost • Unit Cost: Total Cost less "Travel" • Travel • Unit Rate (Unit Cost / Total Hours) <p>Beyond the totals for the categories listed above, please provide detail as necessary for staffing plans, FTE, and salaries.</p> <p>Training for the Bavolek Nurturing Parenting Program. should be included in the Unit Rate and the cost for the Adult Adolescent Parenting Inventory (AAPI) assessment.</p>
Q4	Is there a specific amount to be allocated for transportation and specific assistance?

A4	For travel costs (including mileage, meals, and lodging) incurred related to services provided under this Agreement, the Subcontractor may bill WMPC the premium state rate, or Subcontractor's usual reimbursement rate for employees, whichever is less. State of Michigan travel rates may be found at the following website: http://www.michigan.gov/dmb/0,1607,7-150-9141_13132---,00.htm There are no Specific Assistance funds for FCSV
Q5	The FCSV state contract notes that "services will be provided in the client homes and at locations mutually agreed upon by the contractor, the referring worker and client." Is this accurate for this RFP?
A5	Yes
Q6	The Expected Contract Performance Outcomes in the Program Description (p. 13) do not match the Expected Contract Performance Outcomes in Attachment D (p.37). Can you please provide clarification as to which to follow? The outcomes in Attachment D align with the FCSV state contract outcomes.
A6	The RFP has been revised to align with the state FCSV contract for outcomes.
Q7	For clarification, are we able to bill for all services provided (Assessment, Parent Education, Travel with Client, Court/FTM, Office Work, Service Coordination, Travel without Client)?
A7	Yes, it is allowable to bill for these services.
Q8	The FCSV state contract notes the following: "Conduct biweekly team meetings involving all FCSV staff to ensure fidelity to Bavolek Nurturing Parenting Program curriculum and ensure contract compliance." Are biweekly team meetings a requirement for this RFP?
A8	Yes
Q9	Will reimbursement be provided for travel and time related to court requirements?
A9	Yes
Q10	Will reimbursement be provided for parking costs?
A10	Yes, this is an actual cost expense and can be reimbursed under Travel costs (not included in the Unit Rate)
Q11	How many contracts will be issued?
A11	Two (2) contracts will be issued at a value of \$150,000/year each.
Q12	Who provides the training?
A12	The provider will need to seek out Bavolek Nurturing Parenting training, and should include the cost in the Unit Rate. Provider will also need to budget for the cost of the Adult and Adolescent Parenting Inventory (AAPI) which has to be ordered through the website https://www.nurturingparenting.com/ This is a link to the website for specific training, although training dates are included for early August 2025 only. Additional training dates will be added. AUG NP
Q13	Budget for providing Transportation for parenting time and in-home visits?



A13	Transportation is billed as an Actual Cost item and should be included as a separate item in the budget (not included in the Unit Rate)
Q14	Referral Timeline – WMPC proposal includes calendar days , MDHHS proposals now use business days
A14	The RFP has been revised to include business days
Q15	Small differences in the outcome language <ul style="list-style-type: none"> a. AAPI is not tracking outcomes anymore (?) b. Outcome around visits- they allow for calling ahead and cancelling or rescheduling
A15	The AAPI is used to show improvement in AAPI scores from pre/post test scores in both the state contract and the WMPC RFP. The RFP does indicate parents can ...”contact the visitation coach prior to the visit time to cancel and/or reschedule the session”
Q16	What is the expected caseload size
A16	There is no expected caseload size
Q17	The state moved eligibility from 8 months to 10 months from Time in Care, they did that to increase eligibility and referrals. (we don’t have it) . It states that WMPC determines it in contract. WMPC screens and determines eligibility
A17	WMPC has revised Eligibility Criteria to include for children in care for 10 months or less, to align with the state FCSV contract.. WMPC will make sure Care Coordinators knows this too.
Q18	Hiring/Training Time to start program after award date 8/26/2025
A18	The chosen providers will have the timeframe of 8/26/25 – 9/30/25 to engage in start-up activities, including staff training. WMPC will allow for training costs to be reimbursed on or after 10/1/25 for training expenses incurred prior to 10/1/25.
Q19	How is the billing handled for FCSV?
A19	WMPC will pay providers as frequently as weekly. The Unit Rate is agreed upon in the contract and the provider sends an invoice for payment. WMPC prefers monthly invoicing.