



STATE OF ARKANSAS
OFFICE OF PROCUREMENT
ARKANSAS DEPARTMENT OF HUMAN SERVICES
700 Main Street
Little Rock, Arkansas 72203

Original

RESPONSE PACKET
710-20-0024

CAUTION TO VENDOR

Vendor's failure to submit required items and/or information as specified in the *Bid Solicitation Document* **shall** result in disqualification.

Original

SIGNATURE PAGE

Type or Print the following information.

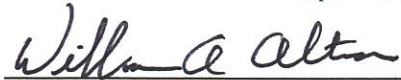
PROSPECTIVE CONTRACTOR'S INFORMATION					
Company:	United Methodist Children's Home Inc				
Address:	1600 Aldersgate Road				
City:	Little Rock	State:	AR	Zip Code:	72205
Business Designation:	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Public Service Corp		
	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input checked="" type="checkbox"/> Nonprofit		
Minority and Women-Owned Designation*:	<input checked="" type="checkbox"/> Not Applicable	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian American	<input type="checkbox"/> Service Disabled Veteran	
	<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic American	<input type="checkbox"/> Pacific Islander American	<input type="checkbox"/> Women-Owned	
	AR Certification #: _____		* See <i>Minority and Women-Owned Business Policy</i>		

PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for bid solicitation related matters.</i>			
Contact Person:	Craig Gammon	Title:	Administrator
Phone:	501-906-4904	Alternate Phone:	501-661-0720
Email:	cgammon@methodistfamily.org		

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input checked="" type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>
ILLEGAL IMMIGRANT CONFIRMATION
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.
ISRAEL BOYCOTT RESTRICTION CONFIRMATION
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract. <input checked="" type="checkbox"/> Prospective Contractor does not and will not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:


Authorized Signature:  Title: CEO
Use Ink Only.

Printed/Typed Name: William A. Altom Date: 3/04/2020

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

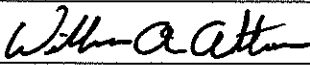
By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. **Use Ink Only**

Vendor Name:	United Methodist Children's Home Inc.	Date:	03/04/2020
Authorized Signature:		Title:	CEO
Print/Type Name:	William A. Altom		

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.


By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. **Use Ink Only**

Vendor Name:	United Methodist Children's Home Inc.	Date:	03/04/2020
Authorized Signature:		Title:	CEO
Print/Type Name:	William A. Altom		

SECTION 3,4,5 - VENDOR AGREEMENT AND COMPLIANCE

- *Exceptions to Requirements shall cause the vendor's proposal to be disqualified.*

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. *Use Ink Only*

Vendor Name:	United Methodist Children's Home Inc.	Date:	03/04/2020
Authorized Signature:		Title:	CEO
Print/Type Name:	William A. Altom		

INFORMATION FOR EVALUATION

- Provide a response to each item/question in this section. Vendor may expand the space under each item/question to provide a complete response.
- Do not include additional information if not pertinent to the itemized request.

	Maximum RAW Score Available
E.1 MINIMUM QUALIFICATIONS	
A. Contract Administrator is required to have at least a bachelor's degree. A master's degree is preferred. Please indicate your Contract Administrator's degree level. Section 2.2B	5 points
E.2 APPROACH TO SCOPE OF WORK	
A. Describe your company's processes and procedures for securing the two (2) levels of SIL Settings for clients in Level 1 and/or Level 2. Section 2.3A	5 points
B. Describe bidder's proposed setting types (e.g., apartment, shared housing, or congregate care residential setting) meeting the requirements outlined in Section 2.3A	5 points
C. Please state the physical address of the bidder's proposed dwellings. Section 2.3A	5 points
D. Submit a sample policy and procedures specific to the SIL. Section 2.3B	5 points
E. Describe how you will ensure that a caseworker will not have more than seven (7) youth on his/her Caseload. Section 2.3B.3	5 points
F. Describe how you will make available to the client the following services: training, life skills, counseling, and community resources. Section 2.3B.5.	5 points
G. Explain how you will ensure employees and volunteers will provide the proper care, treatment, safety and supervision of the clients they supervise. Section 2.3B10.	5 points
H. Explain approach to Level 1 and/or Level 2 settings as applicable. Section 2.3C	5 points
E.3 ADDITIONAL CONTRACT REQUIREMENTS AND PROVISIONS	
A. Describe your policies and procedures related to client records and record retention, including your plan to document quarterly progress evaluations and annual summary documents noting youth outcome and submit to DCFS. Section 2.4C, 4.5.	5 points
B. Describe how you plan to conduct the post-discharge surveys. Section 2.4D	5 points
E.4 STAFFING	
A. Identify key personnel (e.g., contract administrator, case managers) that will work under this contract. Provide resumes that describe and detail the credentials, experience and qualifications for each individual relating to the requirements of this RFP. Section 2.5A	5 points
B. Describe your efforts to ensure all identified personnel have the required background checks. Section 2.5	5 points

State of Arkansas
DEPARTMENT OF HUMAN SERVICES
OFFICE OF PROCUREMENT
700 South Main Street
P.O. Box 1437 / Slot W345
Little Rock, AR 72203

ADDENDUM 1

DATE: February 13, 2020
SUBJECT: 710-20-0024 Supervised Independent Living Program

The following change(s) to the above referenced Competitive Bid for DHS has been made as designated below:

- Change of specification(s)**
- Additional specification(s)
- Change of bid submission/opening date and time**
- Cancellation of bid
- Other

BID OPENING DATE AND TIME

Bid opening date and time remains the same

Adding Subcontractor Form. Please include this form in your response packet.

The specifications by virtue of this addendum become a permanent addition to the above referenced Invitation for Bid.

FAILURE TO RETURN THIS SIGNED ADDENDUM MAY RESULT IN REJECTION OF YOUR BID.

If you have questions, please contact the buyer Margurite.al-ugdah@dhs.arkansas.gov or 501-682-8743.



Vendor Signature

3/4/2020

Date

United Methodist Children's Home Inc.

Company

State of Arkansas
DEPARTMENT OF HUMAN SERVICES
OFFICE OF PROCUREMENT
700 South Main Street
P.O. Box 1437 / Slot W345
Little Rock, AR 72203

ADDENDUM 2

DATE: February 26, 2020
SUBJECT: 710-20-0024 SUPERVISED INDEPENDENT LIVING PROGRAM

The following change(s) to the above referenced Competitive Bid for DHS has been made as designated below:

- Change of specification(s)**
Additional specification(s)
 Change of bid submission/opening date and time
Cancellation of bid
 Other

BID OPENING DATE AND TIME

Bid opening date and time has changed to March 4, 2020, 10:30 am CST
Submission date and time has changed to March 4, 2020, 10:00 am CST

Adding revised Official Bid Price Sheet

Revisions to the following sections:

2.3 SCOPE OF WORK

A. Regardless of SIL setting: (page 13 of 28 of RFP)

- No firearms, dangerous weapons, or illegal substances shall be permitted in any living unit. ~~Smoking and the use of other tobacco products shall be discouraged but not prohibited unless the youth is pregnant or parenting.~~ The contractor will be required to ensure to the best of its ability that no minors, as defined in Act 580 of the 92nd Arkansas General Assembly, Regular Session, who participate in the Supervised Independent Living Program purchase, use, or possess tobacco products, vapor products, alternative nicotine products, e-liquid products and cigarette papers. Smoking cessation information and activities shall be made available to any youth who identifies as a smoker or user of other tobacco products.

C. Contractor' Case Managers shall: (page 17 of 28 of the RFP)

Level 1 Supervised Independent Living	Level 2 Supervised Independent Living
Provide a monthly summary of activities conducted with the youth, to include information about any particular successes/highlights and/or concerns during that month, to the youth's Family Service Worker (FSW), FSW Supervisor, and Transitional Youth Services (TYS) Coordinator and designated DCFS Program Management staff by the fifth eighth day of the month (or next business day if the fifth-eighth of the month falls on a weekend or holiday) following the preceding month.	Provide a monthly summary of activities conducted with the youth, to include information about any particular successes/highlights and/or concerns during that month, to the youth's Family Service Worker (FSW), FSW Supervisor, and Transitional Youth Services (TYS) Coordinator and designated DCFS Program Management staff by the fifth eighth day of the month (or next business day if the fifth eighth of the month falls on a weekend or holiday) following the preceding month.

The specifications by virtue of this addendum become a permanent addition to the above referenced Invitation for Bid.

FAILURE TO RETURN THIS SIGNED ADDENDUM MAY RESULT IN REJECTION OF YOUR BID.

If you have questions, please contact the buyer Margurite.al-uqdah@dhs.arkansas.gov or 501-682-8743.


Vendor Signature

3/4/2020
Date

United Methodist Children's Home Inc.
Company

Contract Number _____
 Attachment Number _____
 Action Number _____

CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM

Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.

SUBCONTRACTOR: _____
 SUBCONTRACTOR NAME: _____

IS THIS FOR:
 Goods? Services? Both?

TAXPAYER ID NAME: United Methodist Children's Home Inc. M.I.: _____
 YOUR LAST NAME: _____

ADDRESS: 2002 South Fillmore FIRST NAME _____

CITY: Little Rock STATE: AR ZIP CODE: 72204 COUNTRY: USA

AS A CONDITION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MUST BE DISCLOSED:

FOR INDIVIDUALS *

Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/ commission, data entry, etc.]	For How Long?		What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	Person's Name(s)	Relation
	Current	Former		From MM/YY	To MM/YY			
General Assembly								
Constitutional Officer								
State Board or Commission Member								
State Employee								

FOR AN ENTITY (BUSINESS) *

Indicate below if any of the following persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in the entity: member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.

Position Held	Mark (✓)		Name of Position of Job Held [senator, representative, name of board/commission, data entry, etc.]	For How Long?		What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?	Ownership Interest (%)	Position of Control
	Current	Former		From MM/YY	To MM/YY			
General Assembly								
Constitutional Officer								
State Board or Commission Member	✓		Child Welfare Agency Review Board	04/09	3/20	William A. Alton		CEO
State Employee								

None of the above applies

Contract Number _____
Attachment Number _____

Action Number _____

Contract and Grant Disclosure and Certification Form

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency.

As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:

1. Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM**. Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency.
2. I will include the following language as a part of any agreement with a subcontractor:

Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor.
3. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the **CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM** completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency.

I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein.

Signature  Title Administrator Date 3/4/2020

Vendor Contact Person Craig Gammon Title Administrator Phone No. (501) 906-4904

<i>Agency use only</i>			
Agency Number	0710	Agency Name	Department of Human Services
		Agency Contact Person	
		Contact Phone No.	
		Contact or Grant No.	



Equal Opportunity Employment

Equal Opportunity Employment

In accordance with Title VI and VII of the Civil Rights Acts of 1964 and their implementing regulations, Methodist Family Health is an equal opportunity employer. Our policy is to recruit, hire, promote and compensate without regard to race, age, religion, sex, national origins, creed, handicap or color. Employment opportunities are open to qualified applicants on the basis of their experience, aptitude and ability.

Original

DIVISION OF CHILDREN AND FAMILY SERVICES
SUPERVISED INDEPENDENT LIVING PROGRAM
AREAS/ COUNTIES

- Please Check each county in which you are willing to provide the service.
- **Do not** include additional information if not pertinent to the itemized request.
- Please return with your response packet.

AREA 1

- Benton
- Washington

AREA 2

- Crawford
- Sebastian

AREA 3

- Garland
- Saline

AREA 4

- Columbia
- Miller

Type text here

Area 5

- Faulkner
- Pope

Area 6

- Pulaski

Area 7

- Jefferson
- Lonoke

Area 8

- Craighead
- Greene

Area 9

- White

Area 10

- Drew

Technical Proposal

History and Experience

United Methodist Children's Home has been serving children since 1899, and continues our tradition of helping the children and families of Arkansas. We have grown from a small orphanage, to a multi-faceted treatment organization that serves clients on all levels, from outpatient care to acute psychiatric hospitalization. We have grown and adapted to meet the demands of populations that have been, and continue to be, underserved or served ineffectively. Constantly re-evaluating our performance has driven us to continually improve our array of services. This has brought us to our current status as a provider with a true continuum of care that offers treatment addressing nearly all levels of behavioral and mental health care for children and adolescents.

Our mission to serve has evolved in our over one hundred years of experience to include technological improvements, changes in the social services system and finally, ever increasing knowledge of mental health issues over time. The core of our mission, however, remains the same: to help the children of our state who are most in need of assistance and guidance.

We have developed a highly qualified staff including physicians, psychologists, social workers, teachers and direct care providers. Most importantly, we have cultivated a culture within our organization, that values caring for kids, above all else. We work hard to maintain a sense of family within our organization. We welcome all qualified persons who share our desire to help kids and do not discriminate with regard to race, sex, or ethnicity, but rather encourage diversity and cultural awareness.

We are a licensed childcare provider and as part of Methodist Family Health, we offer services in multiple cities and counties throughout the state. We are in the process of obtaining the additional license for Independent Living facilities, but will have that prior to the July 1, start date. We are technically skilled, having achieved Accreditation by the Joint Commission on Accreditation for Health Care Organizations. We are also accredited by the Teaching-Family Association as a Certified Sponsor Agency, meaning that not only are we qualified to use the Teaching-Family Model, we are qualified to teach other organizations to use it as well. We have a positive history of contracting with DCFS to provide much needed services to children whom other agencies will frequently not even consider. We welcome DCFS as a partner in serving children and continue to grow and improve our relationship with the department. UMCH has taken the approach that DCFS representatives are not only allowed at any time, but rather welcomed and invited. We have long felt that independent living services are a vitally needed and we have provided such services within the scopes of previous contracts for other programs. These have been individualized efforts as a small part of a program, Now with Independent Living Services as the main focus, we feel confident that our experience, approach to treatment, technical skills, caring staff and continuum of treatment venues, qualifies us to serve children with needs defined in the scope of service for this RFP.

Detailed Service Proposal

United Methodist Children's Home proposes to contract with DCFS for eight beds in our existing facilities in Fayetteville and Searcy with the possibility of four more beds in Little Rock (main Campus) for a total of 12 beds. These will be a mix of level one and level two placements depending the number of clients in need of placement. The program we provide will address directly or through coordinated resources, the various services, training and skill development required and described within the RFP. The specific model of care used daily in the program is the Teaching-Family Model. This model uses a proven, positive approach to teaching social, academic and independent living skills to the clients, as these areas intertwine and overlap in terms of needed experiences for the young people. The technology of this model provides for documentation of individualized treatment to meet the needs of each child and measure their progress toward short and long-term goals. We teach children to engage in problem solving based on meaningful rationales for making behavioral changes and to examine possible outcomes prior to making decisions. The approach is overwhelmingly positive and supportive. It is also trauma focused which can be very helpful in helping young adults successfully cope with the challenges of becoming independent.

The two levels will be housed within the same facility in the Fayetteville (1745 Ruppel road) and Searcy(2104 West Beebe Capps) Locations. Using the information provided by DCFS the determination of which level is appropriate for a youth will be made. The model of care used is based upon levels of achievement that are reflective of the client's skill and maturity. This would be the same with level 1 and 2, with level one indicating a higher level of independence. In this was our experience with individualized programming, will be useful. We can combine standard practices based upon level, with individual needs based upon maturity, progress and ability to manage themselves.

Plans for this will be developed by the staff doing case management for the youth. The Division of the cases will be such that no one staff designated to provide case management will have more than 7 cases and in reality probably no more than 5 at any one time.

Each youth will have identified target goals and progress toward those goals will be documented. This will involve practice exercises in public transit, money management, employment/interview skills and other skills that are already present in our curriculum, but not focused upon primarily for most of our current clients.

We will provide services to children from all areas of the state. Whenever possible, children are placed in areas nearest to the community which they are from.

The staff will consist a lead individual to provider on-site support for the clients, a back-up person to cover times when the main staff is off duty or unavailable and a supervisor who is also available 24/7 for phone support of both staff and clients. They use a specified and objective approach to, encourage improvement, while teaching skills needed by the youth from budget planning to interview skills. Problems are targeted based on observed skill deficiencies

and a youth's diagnosis where applicable. The youth's needs will be assessed, and an individual plan developed. The end goal is achieved when a youth becomes proficient in independent living skills to the point where they no longer need frequent supervision, is able to move to a truly independent living arrangement. The staff receive training and support in the use of the Teaching Family Model and specific focus on independent living skills to be taught. The staff will be on site at least the minimum number of hours required and the facilities are set up to have live-in staff quarters so that the requirement for onsite staff at the level two services will be achieved.

Our clients will attend public school when appropriate and or seek jobs, while also pursuing social and community activities that are of interest to them. Our staff interact with all external organizations and individuals to monitor progress and problems of the youth in care and thereby increase their ability to effectively reinforce appropriate behavior and teach new skills.

The home is supervised by a Program Consultant who is a former Certified Teaching Parent, Certified Alternate T-P or Certified Behavioral instructor. The Program Consultant is on call twenty-four hours a day to support the group home. They regularly observe the performance of staff interacting with clients. They also supervise the required documentation, from treatment plans to maintenance logs and are responsible for the ongoing training of all home staff. The Consultant coordinates interaction of the different aspects of treatment. They assure involvement of schools, therapists, Caseworkers and other interested parties in a client's treatment. The Consultant safeguards the proper implementation of treatment as one of their primary duties. To accomplish this, in addition to observations, they regularly interview the clients concerning staff practices and youth rights, as well as the youth's perception of progress made or not achieved.

The consultants are supervised by the Director of Residential Services who reports directly to the MCH Administrator.

United Methodist Children's Home will maintain all requirements necessary to continue as a licensed provider of services as required by the Child Welfare Licensing Board. United Methodist Children's Home will meet all requirements as presented in the performance based contracting standards included with any contract resulting from this RFP.

Staffing and Other Qualifications

As described in previous sections, each facility will have a Lead staff person, meeting specified qualifications. We have several potential staff members for this position that may wish to transfer. This will not be resolved until after MCH is aware of if a contract is awarded. The pattern expected for staffing for a level one only home, would be a single person with back-up in the form of an available supervisor to take calls from clients and fill in for the main staff member as needed. For a mixed level one and level 2 home, staff will consist of one member who lives on-site and one additional weekend staff person. Again these will be supported by a

supervisor who among other duties will be available whenever needed by phone for clients and staff. All staff members will receive extensive training in the use of the Teaching-Family Model as well as ongoing training and support.

The Program Director has a Bachelor's Degree and over 29 years of experience working with adolescents and young adults.

The MCH Administrator holds a Masters Degree in Business Administration and has nearly 30 years of experience in working with programming for children and families. He has been in administrative role for the last 15 years, operating various programs from Therapeutic Foster Care and Group Homes to Psychiatric Residential Treatment Centers.

MCH already has materials and training exercises available for clients with regard to independent living skills growth and development. We also have access to many other resource materials to update and expand this knowledge base for staff and clients.

In summary, the United Methodist Children's Home strives to provide the highest quality of care in settings that are non-restrictive, family oriented, realistic in expectations for the children in care, and effective in terms of the treatment provided. We have a highly talented, dedicated and caring staff and have a rich store of experience in treating children that spans over a century. We are not content to be satisfied with our accomplishments, however, and are always looking for new ways to meet the needs of children and families.

MCH already has policies in place regarding client records, privacy, access to records, retention time frames and authorized releases of information. We have a hybrid chart that contains some handwritten notes and or observations but also an electronic record system wherein the treatment plans are developed. As soon as is practical to do so, all hand written or separate information is scanned into the client's chart as so that there is in fact one record for that youth.

Treatment plans (as mentioned above) are reviewed on a regular basis. The minimum intervals are observed, but also should major life events or traumatic issues occur, the plans are revisited (inclusive of the mental health provider). This documentation is tracked monthly by the program facilitator (clerical staff) who reports to the Program Director any problems or delinquencies needing correction.

We are in the process of adapting policies to the needs of the independent living setting. Some policies as far as staffing ratios and dispersing funds are crucial. Others, though seemingly much more ordinary are being developed for curfew times, peer visitation, and differences between levels. Level 1 would generally get more opportunities initially, though level 2 clients could earn either the additional privileges or eventually level 1 status.

Original

MCH already facilitates some needs of the child, such as that of individual and group therapy, ILP services as well as individual work with clients.