

## SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION			
Company:	Ozark Guidance Center, Inc.		
Address:	2400 S. 48th Street		
City:	Springdale	State:	AR      Zip Code: 72762
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			
Provide contact information to be used for bid solicitation related matters.			
Contact Person:	Laura H. Tyler, PhD, LPC	Title:	CEO
Phone:	479-750-2020	Alternate Phone:	479-725-5121
Email:	laura.tyler@ozarkguidance.org		

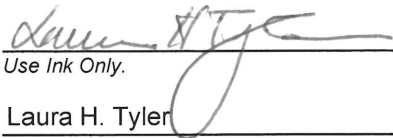
CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.  <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:

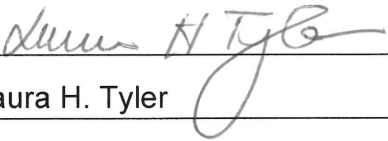
Authorized Signature:  Title: CEO  
Use Ink Only.

Printed/Typed Name: Laura H. Tyler Date: 4.3.19

## 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.

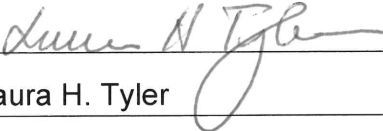
By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. **Use Ink Only**

Vendor Name:	Ozark Guidance Center, Inc.	Date:	4.3.19
Authorized Signature:		Title:	CEO
Print/Type Name:	Laura H. Tyler		

## 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.

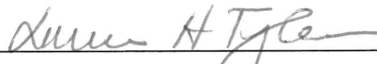
By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. **Use Ink Only**

Vendor Name:	Ozark Guidance Center, Inc.	Date:	4.3.19
Authorized Signature:		Title:	CEO
Print/Type Name:	Laura H. Tyler		

**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:	Ozark Guidance Center, Inc.	Date:	4.3.19
Authorized Signature:		Title:	CEO
Print/Type Name:	Laura H. Tyler		

## PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.


**PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.**

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP
None		

**PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

By signature below, vendor agrees to and **shall** fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

<b>Vendor Name:</b>	Ozark Guidance Center, Inc.	<b>Date:</b>	4.3.19
<b>Authorized Signature:</b>		<b>Title:</b>	CEO
<b>Print/Type Name:</b>	Laura H. Tyler		

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:** March 12, 2019  
**SUBJECT:** 710-19-1027 Therapeutic Foster Care

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 **April 8, 2019, 2:00 PM**

Revise Section 1.29 Schedule of Events:

Date and time for Opening Bids, April 8, 2019, 2:00 PM CST

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 [Margarite.al-uqdah@dhs.arkansas.gov](mailto:Margarite.al-uqdah@dhs.arkansas.gov) or 501-682-8743.

  
\_\_\_\_\_  
Vendor Signature


4.3.19  
\_\_\_\_\_  
Date

Ozark Guidance Center, Inc.  
\_\_\_\_\_  
Company

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](mailto:Margurite.al-uqdah@dhs.arkansas.gov) or 501-682-8743.

  
\_\_\_\_\_  
Vendor Signature

4.3.19  
\_\_\_\_\_  
Date

Ozark Guidance Center, 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:** March 19, 2019  
**SUBJECT:** 710-19-1027 Therapeutic Foster Care

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

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<b>CHANGES TO REQUIREMENTS</b>
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**Section 2.2B**

**Delete:** For verification of the requirements specified above (A & B), Vendor **must** submit Vendor's Therapeutic Foster Care Placement Child Welfare Agency license obtained from the Arkansas Department of Human Services (DHS), Division of Child Care and Early Childhood Education (DCCECE).

**Add:** For verification of requirements specified above (A & B), Vendor **must** submit one of the following:

- 1) Vendor's Therapeutic Foster Care Placement Child Welfare Agency License obtained from the Arkansas Department of Human Services (DHS), Division of Child Care and Early Childhood Education (DCCECE), **or**
- 2) A copy of the application for licensure.

Vendor's license **must** be approved by the DCCECE board by June 1, 2019 in order to be awarded a contract.

<b>REVISED ATTACHMENT</b>
---------------------------

Revised Attachment G



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 3**

**DATE: March 26, 2019**  
**SUBJECT: 710-19-1027 Therapeutic Foster Care**

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**

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**CHANGE SPECIFICATIONS**

**Attachment C: Performance-Based Contracting**

**B. Delivery of Services**

**5.g. Delete:** "A physician and other personnel involved in the client's case will review each plan of care at least every ninety (90) days. The plan of care must be revised to reflect results of the review conducted as required herein."

**Add:** "Contractor shall review the plan at least semi-annually and shall update the plan to reflect the child's progress."

**Insert: #9**

**Service Criteria:**

Contractor shall maintain records of the TFC internal client specific treatment plan of care. This plan may be very similar to or mirror the youth's PCSP.

Documentation shall at a minimum reflect the following:

- A. Treatment plan developed in accordance with recommendations made by a physician or other licensed professionals involved in the care of that client

B. Any revisions of the Treatment plan

**Acceptable Performance:**

Acceptable performance is defined as one hundred percent (100%) compliance with Service Criteria and Acceptable Performance Standards at all times throughout the contract term as determined by DHS.

**Damages:**

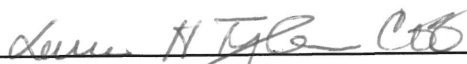
1st Incident: A Corrective Action Plan, acceptable to DHS, will be due to DHS within ten (10) business days of the request.

2nd incident: A ten percent (10%) penalty may be assessed in the following months' payments to the Vendor for each thirty (30) day period the Vendor is not in full compliance with these Service Criteria. The ten percent (10%) penalty shall be calculated from the total payment for the identified month in which the deficiency took place.

The total of all damage credits in any given month shall not exceed one hundred percent (100%) of the monthly invoice unless a third incident occurs for any of the Service Criteria.

3rd incident: DHS reserves the right to impose additional penalties including but not limited to: withholding payment on future invoices until Vendor is in full compliance, a substandard Vendor Performance Report maintained in DHS' Vendor file, and contract termination.

If you have questions, please contact the buyer [Margurite.al-uqdah@dhs.arkansas.gov](mailto:Margurite.al-uqdah@dhs.arkansas.gov) or 501-682-8743.

  
\_\_\_\_\_  
Vendor Signature

4.3.19  
\_\_\_\_\_  
Date

Ozark Guidance Center, Inc.  
\_\_\_\_\_  
Company



**Ozark Guidance**  
FOCUSED ON YOUR MENTAL HEALTH

### **EQUAL EMPLOYMENT OPPORTUNITY POLICY**

OGC is an Equal Opportunity Employer. Equal Employment Opportunity has been, and will continue to be, a fundamental principle at OGC. Employment at OGC is based upon personal capabilities and qualifications without regard to race, color, religion, sex, gender (including pregnancy, childbirth, or related medical conditions), sexual orientation, gender identity or expression, national origin, age, disability, genetic information, marital status, citizenship status, veteran status or any other protected characteristic as established by law.

This policy applies to all terms and conditions of employment, including, but not limited to, recruitment, hiring, placement, promotion, termination, layoff, compensation benefits, and all other terms and conditions of employment. It is OGC's intent to comply with all federal and state laws regarding employment practices.

The HR Department has overall responsibility for this policy and maintains reporting and monitoring procedures. Staff members' questions or concerns should be referred to the HR Department. Any staff member or applicant who believes he or she has been subjected to unlawful discrimination should report the incident immediately. Staff members, or applicants for employment, who seek assistance pursuant to this policy will not have their employment opportunities adversely affected because of such a complaint, or be subject to any other type of retaliation.

Appropriate corrective action, up to and including termination, may be taken when any staff member violates this policy.



## **INFORMATION FOR EVALUATION**

### **A. Must meet the foster care requirements outlined in *Minimum licensing Standards for Child Welfare Agencies*.**

Ozark Guidance's (OGC) Therapeutic Foster Care (TFC) program's policy and procedure manual was updated and modified to reflect the *Minimum Licensing Standards for Child Welfare Agencies*' changes in 2016. The policy and procedure manual and program have since been audited annually by Licensing; OGC has a current Therapeutic Foster Care Placement Child Welfare Agency License. See Section B.

### **B. Must be licensed as a Child Welfare Agency as set out in the *Minimum licensing Standards for Child Welfare Agencies*.**

See attached license.

### **C. Must be able to provide trauma informed mental health services for clients placed in the program.**

Ozark Guidance (OGC) is mission-driven and dedicated to providing quality and compassionate behavioral health care and services to children and families involved with the Division of Children and Family Services. OGC's Therapeutic Foster Care program includes the following team members: Director of Therapeutic Foster Care, Psychiatrist, Advanced Nurse Practitioner, Licensed Mental Health Professionals (MHP) of which one is designated the Clinical Manager, Qualified Behavioral Health Providers (QBHP) /Behavioral Intervention Specialists, support staff, and TFC Families. OGC completes evaluations annually with the TFC Families and renews signed agreements with those that meet or exceed expectations and requirements.

OGC's direct-service TFC staff (MHPs and QBHPs) are oriented for the first two weeks of employment. During the first week, a minimum of 8 hours are dedicated to presenting the agency's policies and procedures and informing new employees about the following: confidentiality and clients' rights, handling medical and non-medical emergencies, scope of practice and clinical limitations, clinical documentation, and access to general medication information.

OGC's TFC staff that provide direct services to clients and families along with our TFC Families complete a minimum of 30 hours of trauma-informed and competency- (testing involved) and skill-based curriculums and trainings. For TFC Families, the 30 hours of training is completed prior to having TFC children placed in their home. Core elements of this (pre-service) training are Attachment Theory, understanding trauma,

trauma's impact on child's growth and development, behavioral management strategies for working with traumatized children, prevention and management of crisis through crisis intervention skills training, understanding multigenerational trauma, trauma's effects on learning and communication, potential consequences associated with multiple placements of children, and medical/medication services surrounding traumatized children and families. In addition to the 30 hours of trauma-informed training, all TFC direct service staff receive CPR and First Aid training within the first 60 days of hire. TFC Families receive the CPR and First Aid training prior to TFC children being placed in their home.

OGC is also strongly motivated to equip staff with mental health techniques that are trauma-informed and evidence-based. TFC MHPs (including the Director) will be trained in Trauma-Focused Cognitive Behavioral Therapy and/or Child-Parent Psychotherapy. OGC's TFC MHPs are also trained in trauma-informed play therapy techniques. OGC's TFC MHPs will be the Case Managers of the TFC clients' cases, and they will also complete mental health assessments and treatment. Each TFC child will be assigned a TFC MHP, and TFC MHPs will not have any more than 12 TFC clients assigned to their caseload. OGC's TFC MHPs receive regular (multiple times weekly) supervision and/or consultation with the Director, Clinical Manager, or other MHPs. OGC's TFC Qualified Behavioral Health Providers will have at a minimum weekly supervision and/or consultation with a therapist (or Director) who is trained in evidence-based and trauma informed practices. OGC TFC MHPs and QBHPs will have annual minimum training requirements in topics relevant to the program's treatment of TFC children.

OGC's TFC Families meet the foster care requirements outlined in the *Minimum Licensing Standards for Child Welfare Agencies: Placement Child Welfare Agency*, as evidenced by OGC's current granted license in addition to historical and recent successes in program and TFC Family Licensing audits. The OGC TFC MHPs and QBHPs will provide regular support and technical assistance to TFC Families to give guidance for the implementation of the treatment plan and therapeutic parenting techniques. Fundamental components of such technical assistance will be the design or revision of in-home treatment strategies including pro-active goal setting and planning and the provision of ongoing child-specific skills training and problem solving in the home during home visits. Other types of support and supervision should include emotional support and relationship building, the sharing of information and general training to enhance professional development, assessment of the youth's progress, observation/assessment of family interactions and stress and assessment of safety issues.

Direct service TFC staff and TFC Families, in addition to the initial 30 hours of training, will complete a minimum of 24 hours of approved in-service training each fiscal year. They will also complete all needed CPR and First Aid hours necessary to maintain certification. The Director will approve continuing education training hours that have topics that mirror the (30 hour) pre-service training core elements.

**D. Must have the ability to provide twenty-four (24)-hour, seven (7) days a week mobile crisis intervention in the home and community setting.**

OGC's TFC staff and TFC Families will work collaboratively with the TFC

child's PASSE Care Coordinator to develop an individualized crisis plan for each client. OGC's TFC staff and TFC Families will also refer to OGC's procedures and coordinate (when necessary) care with OGC's After-Hours Crisis On Call team to comply with OGC's *Mobile and Division of Children and Family Services (DCFS) Crisis and Emergency Procedure* in order to provide face-to-face crisis interventions 24/7 to TFC clients placed in the program. Crisis interventions will be provided by therapists and aimed at assessing client's acuity of symptoms, safety planning, stabilizing the client, and facilitating the client in obtaining the least restrictive therapeutic environment that is appropriate for the client. OG will make every reasonable effort to divert foster children/TFC children from acute hospitalization. Rationale for treatment will be clearly documented for any service provided and/or recommended. The Director of TFC will also provide updated TFC client, family, and contact information to the After-Hours Crisis On Call team, so the team can also assist with emergency respite within the program during evening and nighttime hours, when necessary. Follow up will be provided to the client by the client's therapist within 24 -48 hours of the initial crisis.

See attached OGC's Crisis Services and Emergency Response Plan that contains OGC's *Mobile and Division of Children and Family Services (DCFS) Crisis and Emergency Procedure* (Attachment C).

Former Contract Managers/Current Employees who can verify experience of crisis staff:

- 1) Kristin R. Lehner, LPC

[REDACTED]

- 2) Paige Stephens, LMSW

[REDACTED]

- 3) Erica Boughfman, PhD, LPC

[REDACTED]

# The Arkansas Child Welfare Agency Review Board

in cooperation with

## Arkansas Department of Human Services

### Division of Children and Family Services

Certifies that

OZARK GUIDANCE CENTER  
2466 SOUTH 48TH ST.  
SPRINGDALE, AR 72766

is hereby issued LICENSE # 10098 effective date 02/24/98

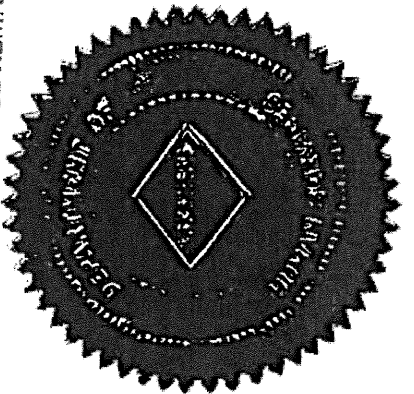
FOR THE PURPOSE OF PROVIDING RESIDENTIAL CARE/PLACEMENT SERVICES IN THE STATE OF ARKANSAS  
THE SPECIFIC SERVICES AUTHORIZED BY THIS LICENSE ARE:

- Residential Services: Capacity: \_\_\_\_\_ to \_\_\_\_\_
- Residential Facility
- Emergency Shelter
- Psychiatric Residential Treatment Facility
- Sexual Offender Program

Placement Services:

- Adoptive Placement
- Foster Care Placement
- Residential Placement
- Therapeutic Foster Care Placement

THIS IS A REGULAR LICENSE AND WILL REMAIN IN EFFECT UNTIL SUCH TIME AS IT IS CHANGED TO ANOTHER TYPE OF LICENSE OR CLOSED.

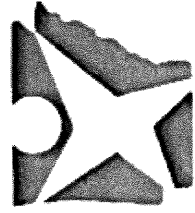


In Witness whereof, we have set our hand on this  
May 11, 1998

By Dollie Hopkins  
Chairman

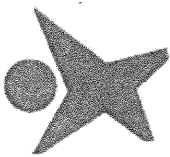
Child Welfare Agency Review Board

# THE ARKANSAS CHILD WELFARE AGENCY REVIEW BOARD



In cooperation with

The Arkansas Department of Human Services  
Division of Child Care and Early Childhood Education



Certifies that  
**Ozark Guidance Center, Inc.**

**Ozark Guidance Center**

2400 S. 48TH STREET  
SPRINGDALE, AR 727666430

Is hereby issued Child Placement license #: 222

FOR THE PURPOSE OF PROVIDING, IN THE STATE OF ARKANSAS, THE FOLLOWING SERVICES:

THERAPEUTIC FOSTER CARE  
FOSTER CARE

THIS IS A REGULAR LICENSE WITH AN EFFECTIVE DATE OF 02/28/1998 AND WILL REMAIN IN EFFECT UNLESS THERE IS A STATUS CHANGE.

In Witness whereof



*[Handwritten signature]*

Chairman, Child Welfare Agency Review Board

Date: 02/28/1998



**Ozark Guidance**

2400 S. 48<sup>th</sup> Street Springdale, AR 72762

Category: Client Care		
Subject: Crisis Services and Emergency Response Plan		Effective Date: 05/18
Authorized and Approved By: Executive Team	Regulatory Standard: BHA Certification; State Plan	Review Date:

**I. Policy:** Ozark Guidance Center (OGC) provides crisis services to children, youth, and adults experiencing psychiatric or behavioral crises. Services are provided within Ozark Guidance’s catchment area to the mobile crisis population, acute care funds population, and persons in custody of the Division of Children and Family Services (DCFS).

**II. Purpose:** To ensure adequate and appropriate care to clients in crisis and/or in need of emergency services.

**III. Definitions:** None.

**IV. Procedure:**

A. Requirements and Processes: Implement and maintain a site-specific emergency response plan as identified below:

1. Provide a 24-hour emergency number to all clients:
  - a. Ozark Guidance posts the 24-hour number on its website and all public entries to each site (1.800.234.7052 or 479.750.2020)
  - b. Ozark Guidance includes the 24-hour number on voice mail greetings
  - c. Phone lines are automatically forward to the after-hours answering service during evenings, weekends, emergencies, and holidays
  - d. Ozark Guidance includes the 24-hour number in client handbook
  - e. Mental Health Professionals (MHPs) provide the 24-hour number and review how clients can access crisis services and after hours services during the diagnostic assessment and document the discussion.

2. Identify local law enforcement and medical facilities within a 50-mile radius that may be emergency responders to client emergencies:
  - a. Contact information in emergency response plan is located at front desk
3. Face-to-Face emergency response is:
  - a. Available 24 hours a day 7 days a week
  - b. Provided telephonically by a MHP within 15 minutes of an emergency/crisis call and face to face assessment within two hours when indicated. (Please see On Site, Phone, and Mobile Crisis services procedures).
4. Response strategies are based on:
  - a. Time and place of occurrence
  - b. Individual's status (client/non-client)
  - c. Contact source (family, law enforcement, health care provider, etc.)
  - d. Safety
  - e. Clinician documents response in context of a., b., c., and d.
5. Provide emergency services training:
  - a. Ozark Guidance requires age appropriate training that complies with CARF requirements.
  - b. Ozark Guidance trains for all MHPs and Qualified Behavioral Health Professionals (QBHPs) through Essential Learning and when applicable through face-to-face crisis training
  - c. After hours, counselors on call (COC) complete emergency response team orientation prior to providing services to crisis clients.
  - d. All after hours counselors have monthly supervisory phone contact and updated schedules
  - e. Documentation of training is maintained in staff personnel file. This includes Essential Learning Training Log
6. Require clinical review by the clinical supervisor or emergency services director within 24 hours of each after hours emergency intervention:
  - a. On-site, Phone, and Mobile crisis services all have a clinical review process that is outlined in each respective procedure.
  - b. Please see On-Site, Telephonic, and Mobile Crisis services procedures for more information.
7. Documentation of all crisis calls, responses, collaborations, and outcomes is completed within two hours. When appropriate services provided as follow up to the

crisis call are documented in accordance with the Ozark Guidance Documentation Compliance Plan.

8. Emergency responses may not vary based on the client's funding source.
9. Emergency responses are made in the least restrictive environment that is safe and allows for effective care.

## **V. Attachments**

- C. Mobile and DCFS Crisis and Emergency Procedure

### **Attachment C: Mobile and Division of Children and Family Services (DCFS) Crisis and Emergency Procedure**

1. OGC professional staff will respond to face-to-face requests for emergency intervention received from a hospital or law enforcement agency or other requesting agency for a current client or non-client by making phone contact within 15 minutes of a request for crisis assessment.
2. OGC will coordinate with the hospital or law enforcement agency or other requesting agency to determine whether the face-to-face response by the MHP is needed within two hours of the request.
3. The hospital or law enforcement agency or other requesting agency in agreement with OGC may determine that the face to face by MHP is not needed, needed within two hours, or needed on a different time frame and identify the least restrictive setting to safely complete the assessment.
4. If a different time frame is proposed, the agreement and a reasonable basis for the agreement will be documented by OGC staff in EHR.
5. OGC will use appropriate forms in crisis assessment process
  - a. MHPs will use OGC screening forms clients screened for hospitalization.
  - b. MHPS will use SPOE forms for clients being screened for Arkansas State Hospital
  - c. MHPs will use DCFS SPOE forms for persons in custody of DCFS
  - d. Each type of screening above has a separate process and form that is located in the Emergency Response Plan.
6. OGC MHPs will provide services to persons in custody of the DCFS in a community setting. This may include but is not limited to a home or foster home, school, or DCFS office.
  - a. OGC MHP will complete safety checklist prior to seeing any client in a home or foster home.
  - b. OGC MHP may go to a home or foster home unless he/she determines the home or foster home is not safe.
  - c. The safety concern will be documented, and a suitable alternative will be determined.
7. For the DCFS population crisis, services will focus on stabilization of the client within the community. The stabilization process will integrate other care partners as appropriate.
8. OGC MHP will complete a risk assessment and safety plan whenever possible and indicated.
9. Follow up will be provided to the client (by the client's MHP or MHPP) within 24 to 48 hours when the client is accessible.

10. If the individual in crisis has a behavioral healthcare provider that they have been working with, OGC will whenever appropriate and possible contact that healthcare provider. OGC will provide the crisis assessment and appropriate crisis services.
11. For those individuals deemed to be in need of acute hospitalization, the screener or other identified OGC staff will begin documenting efforts to locate an acute placement immediately. Documentation should continue until placement is confirmed and takes place. This will be done in collaboration with the assigned PASSE as appropriate.
12. The MHP providing face-to-face assessment services will continue to provide crisis stabilization services until OGC MHP or other medical or behavioral health professional determines the person is stable. This determination must be documented and available for OGC MHP to scan into OGC EHR.
13. OGC mobile response team consists of the after-hours crisis on call team and during business hours the MHPs available at the time of the face to face assessment request.
14. This “team” will triage the person served into the least restrictive services including but not limited to: immediate outpatient treatment by a behavioral health professional, crisis stabilization services, referral to substance abuse detoxification, referral to an authorized crisis intervention unit if available, or admission to local acute psychiatric hospitalization.
15. The coordinator of crisis services or designee will run an EHR query for mobile assessments daily and review to determine if safety of client was addressed, crisis stabilization was provided, and whether referral to the least restrictive environment was made.