

Request for Proposal
Public Health Nursing - Bureau for Children with Medical
Handicaps
Columbiana County, Ohio

Summary

The Columbiana County General Health District (CCGHD) invites proposals to provide services and case management for the state and local funded Bureau for Children with Medical Handicaps (BCMh) program that serves children and families of Columbiana County, Ohio. The purpose of the program is to assure, through the development and support of high quality coordinated systems, that children with special health care needs and their families obtain comprehensive care and services which are family-centered, community based, and culturally competent.

Funding/Award

CCGHD, with the support of the Ohio Department of Health will provide funding for the services provided by the successful proposal applicant for the time period of May 1, 2012 - April 30, 2013. A single award of acceptable quality will be made available consistent with RFP deliverables and program details as established by the Ohio Department of Health. The award period may be extended by mutual consent of both parties.

Goals and Scope

The program serves approximately 200 clients under the age of 21 or adult clients with cystic fibrosis who need assistance applying for Medicaid disability coverage (MA-D). These clients are Ohio residents who have been approved for the BCMh diagnostic, treatment and/or team service coordination. These clients must meet medical and financial criteria to be eligible for the treatment program. Specific activities are detailed in **Attachment A**.

Family-centered services support families in their natural role as the primary caretakers of their children. This is done by involving families and professionals as equal partners in the care of children.

Community based services are essential to help families care for their children at home and maintain normal patterns of living as much as possible.

Cultural competency respectfully recognizes the diversity of individuals, families and communities

Health services management program is the segment of BCMH that focuses on:

- early identification of children with medically handicapping conditions or potentially medically handicapping conditions,
- referral to appropriate medical/ancillary health care providers,
- coordination of services at the local and team level,
- supporting and promoting the family's progress toward independence in advocating for its child

With goals to:

- improve the access to and the continuity of appropriate primary, specialty and urgent health care and related services for children with special health care needs through service coordination activities,
- review, monitor and evaluate the effectiveness of service coordination activities

Requirements for Proposal

Entities providing services must have:

- a current, valid license to practice as a registered nurse in the State of Ohio
- proof of professional and general liability insurance
- demonstration of HIPPA compliance and training

Entities providing services are preferred to have:

- two years experience in the care of children with chronic illness/disabilities
- experience working with families on a continuum rather than only in an acute care setting (may include clinics, private offices etc.)
- evidence of experience or training in regard to child/family/community assessment, child development, family dynamics, early intervention, and special needs populations
- knowledge of local resources and referral systems

Proposals shall:

- reflect the applicant's responsibility to cover all travel expenses for client services and any required CCGHD or ODH training

- address the availability of services on a daily basis to ensure the needs of clients are being met
- submit completed billing sheets as per BCMH procedure

Reporting Requirements

Successful applicants will report directly to the CCGHD Director of Nursing. Weekly activities shall be submitted to include, but not limited to client name, service provided, units of service provided, date of service, contact phone number. Weekly billing (per BCMH procedure) for unit services shall be submitted and approved by CCGHD Director of Nursing. Monthly billing shall be submitted to CCGHD for services rendered and payment to successful proposal applicant shall be based on ODH reimbursable units of service.

Proposal Format

Proposals submitted for award under this program should adhere to the outline as follows:

1. Plan and project description
2. Methods and Activities
3. Organizational profile, staff and time commitment
4. Evaluation plan for project
5. Timeline
6. Budget

Proposal Submittal

All proposals must be sent to CCGHD, Director of Nursing, 7360 State Route 45 Lisbon, Ohio, 44432. Proposals may be submitted by regular mail to the PO Box, delivery service to the street address or by email to bknee@columbiana-health.org. All proposals shall be received by March 23, 2012, 4pm for consideration with a final award being made April 18, 2012 by the Board of Health for Columbiana County General Health District.

Attachment A

The activities may include, but are not limited to:

1. Assess health status of the child
2. Assess family needs related to the identified health care needs of the child with special health care needs
3. Help the family identify, access and maximize the use of appropriate health care and related service providers for the child
4. Assist family in decision making and goal setting for their child with special health care needs
5. Develop, in conjunction with the family, a Comprehensive Service Plan which addresses the primary, specialty and urgent health care needs and related services for the child with special needs
6. Review and reinforce medical care information/instructions with the family and child
7. Make visits to the home, school, clinics, hospital and other settings as needed
8. Coordinate needed services for the child in conjunction with the family health care professionals and related service providers
9. Provide information to the family and client regarding the availability of systems and resources that address the medical, social, education, psychological, recreation, vocation and spiritual needs of the child with special health care needs
10. Serve as advocate when necessary for the family to assure available health care and related services for the child are appropriately delivered in a timely and acceptable manner
11. Evaluate the effectiveness of the intervention strategies identified on the comprehensive service plan
12. Evaluate the appropriate use of existing resources for the client outcomes
13. Counsel and support during unexpected health related events and at times of transition
14. Re-assess the health status of the child
15. Re-asses the family needs related to the identified health care needs of the child with special health care needs
16. Evaluate family and client satisfaction with the Public Health Nurse Services and Team Based Service Coordination

Reference: PHN Manual (rev 8/04) Page I-3

Section I. Program Description