

MENTAL HEALTH MENTAL RETARDATION OF TARRANT COUNTY
ECI of NORTH CENTRAL TEXAS



REQUEST FOR PROPOSALS

for

- Physical Therapy**
- Occupational Therapy**
- Speech Therapy**
- Nutrition Services**
- Nursing Services**
- Infant Mental Health Services**



The Texas Interagency Council on Early Childhood Intervention requires all Early Childhood Intervention (ECI) programs to issue an RFP to service providers in TARRANT, PARKER, PALO PINTO, ERATH, HOOD, SOMERVELL, JOHNSON, ELLIS, AND NAVARRO COUNTIES to assure best value.

The goals of ECI's network are:

1. To provide a comprehensive community treatment system; and
2. To create meaningful cooperative relationships between Early Childhood Intervention and the private health care and service providers in the local community.

This document requests participation from providers for the purpose of providing services to children less than three years of age with a developmental disability and/or developmental delay as defined by Early Childhood Intervention criteria.

Services are provided utilizing the ECI philosophy where the parent/caregiver is the primary interventionist in the community, primarily in the child's home or day care, including the parents and other caregivers. No services other than infant mental health may be provided in a clinic setting. Services are provided at the convenience of the parents/caregivers, evening visits should be considered an option.

All positions require contractors to use their education, training and clinical expertise to make decisions.

SERVICE DEFINITIONS & REQUIREMENTS

Physical Therapy

Comprehensive developmental and individual evaluations, parent coaching/training, consultation and therapy. Activities may include a variety of modalities including but not limited to: therapeutic exercises to develop strength / endurance / range of motion / flexibility, neuromuscular reeducation of movement / balance / coordination / kinesthetic sense / posture / proprioception, gait training, joint mobilization, orthotics fitting/training, myofascial release / soft tissue mobilization, prosthetic training, instruction in the use of adaptive equipment, and wheelchair management/propulsion training.

Providers for **Physical Therapy** must hold an independent practice license from the Executive Council of Physical Therapy and Occupational Therapy Examiners.

Occupational Therapy

Comprehensive developmental and individual evaluations, parent coaching/training, consultation, and therapy. Activities may include a variety of modalities including but not limited to: therapeutic exercises to develop strength / endurance / range of motion / flexibility, neuromuscular reeducation of movement / balance / coordination / kinesthetic sense / posture / proprioception, myofascial release / soft tissue mobilization, joint mobilization, orthotics fitting and training, prosthetic training, sensory integration activities, or oral skills.

Providers for **Occupational Therapy** must hold an independent practice license from the Executive Council of Physical Therapy and Occupational Therapy Examiners.

Speech Therapy

Comprehensive developmental and individual evaluations, parent coaching/training, consultation, and therapy. Activities directed at increasing an individual's speech or language, communication, auditory processing, aural status, or oral skills.

Providers for **Speech Therapy** must hold an independent practice license from the Texas State Board of Examiners for Speech-Language Pathology and Audiology and have a Certificate of Clinical Competence in Speech-Language Pathology from the American Speech-Language-Hearing Association.

Nutrition Services

Comprehensive developmental and individual evaluations, parent coaching/training, consultation, collaboration, and intervention. Activities directed at improving the

nutritional status of the child as well as providing informational, material and emotional support to the caregivers.

Providers for **Nutrition Services** must hold an RD/LD independent practice license from the Commission on Dietetic Registration (RD) and the Texas State Board of Examiners for Dietitians (LD).

Nursing Services

Comprehensive developmental and individual evaluations, parent coaching/training, and consultation as required. Administer ECI Nutrition, Hearing, Vision and Assistive Tech Screenings. Collect a medical history when indicated. Communicate with physicians/nurses in the community.

Providers for **Nursing Services** must hold an RN independent practice license from the Texas Board of Nursing Examiners.

Infant Mental Health Services

Comprehensive developmental and individual evaluations, parent coaching/training, consultation, and therapy Evaluation recommendations, consultations and interventions to address social-emotional issues within the parent-child dyad, in addition to short term counseling and community resource referrals.

Providers of **Infant Mental Health Services** must hold an independent practice license from the Texas State Board of Social Work Examiners for LMSW pursuing LCSW/LCSW; **OR** the Texas State Board of Examiners of Professional Counselors for LPC-I/LPCs;

ECI Infant Mental Health Practices

For children and families experiencing significant emotional/behavioral concerns, ECI utilizes primarily the Infant Mental Health approach (which may include other behavioral and developmental strategies as adjuncts). In that approach:

1. The focus is on the child's developmental status, the child's relationships with caregivers, and the family's functioning.
2. The primary way of providing intervention is through the child-caregiver relationships.
3. Working with child and caregiver together, wondering together about the significance of behaviors, and finding strategies together is preferred over advice-giving.
4. The approach is collaborative (with the client) and experiential - it uses the therapist's relationship with the family as a model for the kind of relationship ECI wants to see between parent and child (i.e. nurturing, supportive, capable of setting limits, encouraging growth, and respectful).

5. Understanding the context of problems (what does the problem mean and why is it occurring?) is a fundamental concern that should guide any developmental guidance and teaching of parents.
6. There is an attempt to address all contributing problems, whether they reside in parent functioning or child functioning. If lack of what is needed for daily functioning, parent psychiatric conditions, child temperament, and child medical issues all contribute to the problem, ECI attempts to address all these issues.

ECI Guidelines for Choosing IMH Interventions

1. ECI prohibits the use or teaching of caregivers to use punishment involving the intentional infliction of pain or what would typically be interpreted as painful.
2. Prior to teaching the use of a strategy (such as time out or physical guidance), ECI evaluates the caregiver's ability to appropriately carry out that strategy. When it appears that the caregiver is likely to use a strategy in a harmful way, ECI does nothing that is likely to result in harm. If the caregiver is already attempting to use a strategy and doing so in a way that may be harmful, ECI offers to assist them in doing something with less potential for harm.
3. ECI interventions are aimed at increasing the sense of security, mastery, capacity to relate to others in developmentally appropriate ways, and competence at developmental tasks. Appropriate interventions generally do not compromise these things as a means to achieving them. Any intervention that may compromise the child's or caregiver's sense of security, capacity to relate to others, etc. (through provocation, deprivation, etc.) should not be used. (Note that developmentally-typical experiences of mild frustration such as having to wait briefly or being told "no" are not relevant here.)
4. Some interventions should be reviewed in the Psychiatry or Infant Mental Health meeting prior to being used. The more an intervention meets certain criteria, the more it should first be reviewed. Those criteria include:
 - A. Departs from mainstream practice
 - B. Has the potential for unwanted side effects
 - C. Its efficacy is unproven
5. ECI mental health practitioners do not practice in areas for which they are inadequately trained. Examples include:
 - A. Offering medical conclusions or recommendations
 - B. Using a specific modality for which specialized training is generally assumed to be required (e.g. hypnosis, therapy for addictions or sexual dysfunction, etc.)

- C. Using specific assessments without first receiving training (standardized tests or other assessments with standardized procedures)
- D. Doing assessments for specific purposes (for custody evaluation, for other forensic purposes such as determination of sexual abuse, etc.)

POPULATION

The target population recipients are children age zero to 36 months with a developmental disability and/or developmental delay as defined by ECI criteria and their parents.

ECI service area covers nine (9) counties: Tarrant, Parker, Palo Pinto, Erath, Hood, Somervell, Johnson, Ellis and Navarro.

RESPONSIBILITIES

ECI Responsibilities

ECI will be responsible for developing individual family service plans for each child, authorizing services, reviewing claims and paying for appropriate, authorized services rendered by the provider. ECI is responsible for utilization management and quality assurance activities. The plan is developed and modified as circumstances dictate. All services contracted by ECI are reviewed for effectiveness and continued value to the individual. ECI is responsible for ensuring that contracted services address the needs of the children served, are provided as required by the Individualized Family Service Plan and comply with the rules and standards adopted under Section 534.052 of the Texas Health and Safety Code. ECI does not guarantee any referral volume to any Network Provider.

Provider Responsibilities

Services Delivery

The provider will be responsible for providing and documenting treatment and/or services rendered to ECI families and children. The provider will consult with the interdisciplinary team assigned to each child as needed and will participate in the arena (comprehensive developmental assessments by two different disciplines) and IFSP meetings as requested. In some instances the provider would be responsible for making recommendation within the scope and practice of ECI philosophy and after consultation with the serviced coordinator and the IFSP team.

Experience with Children

All providers must have documented training and experience in working with infants and small children.

Sub-Contracting

Provider may not subcontract responsibilities for this service. Provider must hold themselves out to the general public as being ready and able to provide services.

Supplies & Equipment

The provider is responsible for any and all equipment and supplies needed to carry out the treatment/services whether in an office, in the child's home, or in other settings; including testing tools.

ECI philosophy dictates use of the families' toys. Practitioners must not bring toys into the family's home.

Reports & Documentation

Provider will not be reimbursed for services provided if timelines for reports and documentation are not met. Timelines for reports and documentation:

- **Evaluations**
 - ✓ due the next working day by 9:00 a.m.
 - ✓ using the ECI shell form
 - ✓ may be faxed

- **Service Activity Logs**
 - ✓ due the next working day by 9:00 a.m.
 - ✓ may be faxed
 - ✓ corrections must be completed within 24 hours
 - ✓ error rates could jeopardize service provision

- **Progress Notes**
 - ✓ due the next working day by 9:00 a.m.
 - ✓ submitted with the Service Activity Log (SAL)
 - ✓ may be faxed

- **Contractor Payment Log**
 - ✓ due twice a month by the 10th & 25th of each month or sooner
 - ✓ submit with original SALs and Progress Notes

- **IFSP**
 - ✓ signature sheets must be signed within 3 working days of review

- **Parent/Caregiver Instructions/Activities**
 - ✓ performed at each therapy visit
 - ✓ a copy left with the parent/caregiver

- **Adaptive Equipment/Assistive Technology**
 - ✓ order or construction, as requested
- **Letters of Medical Necessity**
 - ✓ due **within 3 working days**
 - ✓ applies to other documentation required by Medicaid or insurance
- **Provider cancellations and rescheduling**
 - ✓ must be approved by the unit director prior to occurrence
- **IFSP Changes**
 - ✓ any requests to change frequency or duration of service must be directed to the Service Coordinator immediately
 - ✓ changes can not occur until an IFSP revision has been completed

Compliance

Provider is required to comply with all state and federal laws regarding the confidentiality of consumers' records and nondiscrimination.

Provider must comply with the rules and standards adopted under Section 534.052 of the Texas Health and Safety Code, and applicable local, state, and federal laws, rules and regulations.

Training

Provider must complete and maintain current training specified by ECI, including but not limited to:

- AIDS / HIV Disease / Infection Control
- Client Rights
- Compliance
- Confidentiality / Privacy / HIPAA
- CPR / First Aid / Seizures

TB Test

Provider must submit documentation of Tuberculosis (TB) skin test clearance.

Insurance

Provider must maintain acceptable levels of liability insurance and appropriate licenses.

PROPOSAL INSTRUCTIONS

Required Documents

Provider must submit current copies of the following in order to provide services under the proposed arrangement:

- Vita or Resume
- Texas Discipline License
- Professional Liability Insurance Face Sheet
- Texas Driver's License
- TB Test Results
- CPR Card

Submission

Proposals must be sent by U.S. mail, hand delivery, or special carrier no later than **Friday, May 29, 2009 at 5:00 p.m.** to:

**Debbie Lisher, Chief of ECI
ECI of North Central Texas
3880 Hulen Street, Suite 400
Fort Worth, TX 76107**

No faxes or electronic submissions will be accepted.

Assurances

Provider's signature on the Proposal must be an original.

False statements on this proposal by prospective providers may disqualify enrollment.

Right of Rejection

ECI reserves the right to reject any and all proposals, to waive technicalities, and to accept any advantages deemed beneficial to the ECI program and its clients.

Credentialing

Prior to providing services under the proposed contract:

New providers must complete the Credentialing Application, which is available on MHMRTC's website www.mhmrtc.org, under the "Contracted Provider Services" section.

Returning providers must be re-credentialed every three years by MHMRTC's Credentialing Department.

Each provider must complete a Medicaid Provider Enrollment Application and obtain both a Texas Provider Identifier (TPI) number and a National Provider Identifier (NPI) number.

Disclosure

Following contract award, contents of proposals may be made available upon written request. Therefore, **any information contained in the proposal that is deemed to be proprietary or confidential in nature must clearly be so designated in the proposal.** Such information may still be subject to disclosure under the Public Information Act depending on opinions from the Attorney General's office.

Respond to All Questions

All questions must be answered. If the question does not apply, simply and clearly document "N/A". Interviews may be conducted to further evaluate proposals and to credential provider.