

Southwestern Ohio Council of Governments

REQUEST FOR PROPOSALS

Southwestern Ohio Council of Governments
(SWOCOG) is requesting proposals for:

Database and Management Software

Fiscal Year 2021-2022:

November 1, 2021 to June 30, 2022

RFP Issued: September 30, 2021

Inquiry Period Begins: September 30, 2021

Inquiry Period Ends: October 15, 2021

Proposals Due: October 31, 2021

Submit proposals via email to:

Southwestern Ohio Council of Government:

Multisystem Coordination

Joan.justiniano@swocog.org

Please submit all inquiries about this RFP to joan.justiniano@swocog.org. Please refer to Part Three of this RFP, "General Instructions", for instructions on submitting inquiries. All responses to inquiries submitted by Proposers will be posted on the SWOCOG website (www.swocog.org) under the "Multisystem Coordination" tab, for viewing by all prospective Proposers.

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PART TWO: INFORMATION ON REQUESTED SERVICES

1. Mission and Guiding Principles

The mission of the Southwestern Ohio Council of Governments (SWOCOG) is to provide support and solutions to county boards of developmental disabilities through cost-effective shared services that deliver value, satisfaction, and maximization of resources.

Currently the SWOCOG serves: Butler, Clermont, Greene, Hamilton, Montgomery, and Warren counties.

2. Purpose

The SWOCOG is seeking proposals from qualified contractors to create a software tool that will include case management, a resource database, and workflow tracking capabilities. This software will allow include client profiles with details of their current services, their history, and their ongoing progress. It will also include profiles from service agencies and organizations in the region, specific services provided, and contact information for the various providers involved in their care. The purpose of this software will be to offer one centralized service to track activity across multiple systems of care, allowing for improved coordination of care and specialized recommendations based on a more complete profile of the individual in need. When counties need to elevate an individual to a more intensive level of support, the system will allow us to look at the individual's history, identify what resources are currently available, and document the financial component of this care coordination.

In addition to managing regional cases and tracking general resources, this software should allow us to hone in on a specific type of support: home modifications and home equipment. This will require a customizable process to track an individual's requested support from application to implementation. Each part of the process will need to allow data entry to track the date of completion, initials, and documentation via photos or uploaded signatures. It will also need to include reporting capabilities. This component of the software will allow SWOCOG to support not just multisystem individuals, but individuals with varying levels of developmental disability diagnoses, and as such may be run as a separate program within the software. The home modifications and equipment support component will allow SWOCOG to improve its supports for individuals in need, so that their living environments can be made safe and functional for them in a timely manner.

3. Background

Each County Board of Developmental Disabilities serves a wide population of youth and adults with a variety of developmental disabilities. Though some of these individuals have only one known disability, 33% of Ohioans with a documented

intellectual or developmental disability *also* have a mental illness diagnosis. At times this dual diagnosis can make treatment or service planning more challenging, as the individual's needs require a combination of mental health and developmental disability approaches in order to support them most appropriately. Coordinating these approaches across various systems can be difficult, especially without a fully informed understanding of all services an individual has, and the challenges or successes they have experienced through prior interventions. In addition to the inherent complications that come with multi-system needs, a disjointed response to care can also increase the intensity of trauma experienced by those in need.

Recently, five County Boards of Developmental Disabilities in Southwestern Ohio chose to design a regional approach to these complex cases. In order to best serve these individuals across varying agencies and organizations, the Southwestern Ohio Council of Governments is seeking proposals to create case management software and a living database of the resources available to clients with complex needs. With this software in place, SWOCOG will be able to securely manage the information for multi-system youth and adults to identify their services (past, present, and pending), their basic medical information, their funding sources, and their involvement in the community. We know that providing individuals with the supports they need to help them remain in their community leads to better long-term outcomes for individuals with ID/MI, and want to be able to track the individual's growth to demonstrate their improved quality of life.

In addition to the systemic factors that make it difficult to remain in the home and community, we recognize that for individuals with developmental disabilities, accessibility can also be a barrier to remaining in their homes. As such, we hope to utilize this same database to track recommended/requested home modifications or home equipment, meant to make the space more functional for those who live there, and safer for individuals with complex needs to remain in their home environment rather than being sent to a developmental center.

4. Scope of Work and Deliverables

The software developed will need to be capable of managing a variety of types of data: quantitative, qualitative, and visual. The software will need to be secure enough to handle sensitive information, with the ability to enable multifactor identification, but accessible enough that team members in the field can access components of the software without a VPN. The software will need to be cloud-based to allow for significant storage space due to documentation of complex conditions, histories, interventions, and ongoing progress in home modifications. Ideally, we would like to include some basic medical information in the software—diagnosis, medications/dosages, and hospitalizations. However, if this is not possible, we would like the software to interact with an existing EHR to allow us to easily navigate between the two databases.

See each of the programs below with identified deliverables:

- A. Multisystem Coordination
 - 1. Create client profiles with demographic information, current funding sources, and current status of needs.
 - 2. Provide a format to input history of services with details regarding interventions, locations, dates, and funding source.
 - 3. Create provider profiles with contact information, payment accepted, types of services, and current availability.
 - 4. Capabilities to link client profiles with provider profiles—to document services already being received and to search for possible compatible services based on focus, availability, and funding.
 - 5. For client profiles, provide the ability to upload documentation to the profile such as PDF's, signature pages, and past treatment information.
 - 6. Capability to input actions/communications into an activity log on client page, to allow for easy review of staff involvement in a case.
 - 7. Include functions to answer questions on a form, then assign points to answers (ex: Likert Scale) according to a predetermined chart and show a final score.
 - 8. Reporting capabilities to track length of time between hospital stays, increased or decreased treatment scores, and documented user time spent per client in a given timeframe.
 - 9. Capability to archive, search, and add new files or profiles. This capability should exist for both clients and resources.
- B. Home Modifications and Equipment
 - 1. Develop a system with multiple steps to follow a project from start to finish for two categories: home modifications and home equipment.
 - 2. Provide basic demographics information for each individual requesting/receiving a modification.
 - 3. Ensure that each step in a project has the capabilities to track dates/times, initials, signatures can be uploaded, and photos can be used to demonstrate progress.
 - 4. Capability to review new projects, assign them to individual employees, and track where they are in the process.
 - 5. Assign individual steps within the process to a specific employee, including an email reminder.
 - 6. Custom reporting capabilities such as: projects by employee, projects by county, projects by date, projects by assigned contractor.
 - 7. Provide security features allowing for safe handling of sensitive information, but also accessible components to allow users to upload new data in the field without use of a VPN.
 - 8. Provide office compatible document templates for the information staff collects to complete each step.
 - 9. Ability to search previously completed projects by contractor or item utilized

5. Minimum Qualifications of Contractor

SWOCOG is seeking a vendor who can demonstrate these minimum requirements:

- A. Experience working with Developmental Disabilities Organizations and/or Mental Health Agencies
- B. Experience with IT HIPAA Compliance
- C. Provide disaster system recovery plan and backup strategy
- D. Experience working with a variety of case management databases
- E. Two (2), or more, years of experience providing virtual cloud services (e.g. installing, maintaining, tuning, configuring)

PART THREE: GENERAL INSTRUCTIONS

The following sections provide a calendar of events, details on how to respond to this RFP and how to get more information about this RFP. All responses must be complete and in the prescribed format.

1. Calendar of Events and Online Information

The schedule for this RFP is given below and is subject to change. SWOCOG may change this schedule at any time, for any reason. If SWOCOG changes the schedule before the due date, it will be announced on the SWOCOG website area under the tab of "Multisystem Coordination". The website announcement will be followed by an addendum to this RFP, and the new version will be shared in the same area of the SWOCOG website.

It is each prospective Proposer's responsibility to check the SWOCOG website's Multisystem Coordination section for this RFP, questions and answers regarding this RFP, and any announcements or addendums regarding this RFP. Only by adhering to the RFP contact process, identified below, should any contact be made with SWOCOG regarding this RFP until a contract is announced. SWOCOG may request additional information as part of the review process outlined below.

Finally, only the Southwestern Ohio Council of Government has the authority to bind itself into a contract. The letter of intent to award is not legally binding. Due to this status, any costs incurred by a Proposer before being awarded the contract may not be recovered from SWOCOG.

Firm Dates:

RFP Issued: 9/30/2021
Inquiry Period Begins: 9/30/2021
Inquiry Period Ends: 10/15/2021
Proposal Due Date: 10/31/2021

Estimated Dates:

Contract Award Notification: 11/15/2021
Issuance of Purchase Order: 11/19/2021

2. Proposal Format

Proposals must be prepared in accordance with instructions in this section. The proposal must clearly outline how each of the deliverables of Part 2 Section 4 will be completed and within the time frames specified in that same section. To be accepted, a proposal must include a technical proposal and a cost proposal as described in this section, contain all the information specified for each of the categories listed in this section, and

meet the requirements of this section. For the Technical Proposal: A3 and A4, multimedia submissions (video or screen recording format) will be accepted in place of a written description of the proposed profiles/ capabilities.

- A. Technical Proposal: The proposal will include the following sections and information.
1. Basic background information:
 - a. Bidder identification
 - b. Name, title, address, and telephone number of the appropriate contact person to answer questions regarding the RFP
 - c. Name, title, address, telephone number, and email address of the appropriate contact person to execute a contract on behalf of the proposer.
 2. Organizational Experience including:
 - a. Information on the background of the firm or individual, including background information on any subcontractor(s)
 - b. Information on 3-5 prior experiences relevant to this RFP (including contact names and phone numbers as reference) and a list of similar projects that have been completed in the last 3 years. We will consider these additional references and may contact them for confirmation.
 - c. An explanation for why the proposer is the best fit to develop this project and how they will make it successful.
 3. Technical approach and work plan that indicates how proposer plans to address the purpose, objectives, and deliverables stated in this RFP for the case management program. Be sure to provide:
 - a. A model of a client profile with the following categories:
 - i. Demographic information including name, date of birth, county, and current residence type (origin family, foster care, group home, residential facility, correctional facility, etc). Include a location to mark current funding source and current status of needs (evaluating, crisis, stable)
 - ii. Most recent service history (last 3 months) by title, funding source, and dates of services; capability to select those titles to find out intervention details and provider names. Capability to browse a longer history with the same types of information.
 - iii. Activity log showing which staff member accessed the client profile and documented activity. Include capability to log communication (who, when, what).
 - iv. Option to complete questionnaire (Appendix A), then analyze results to identify score. Label as "Family Resilience Score", and have visible on client profile. Ensure that viewer can select that score to view the completed questionnaire.
 - b. A model of a provider profile with the following categories:
 - i. Company name (or 'independent')

- ii. Contact information
 - iii. Payment accepted (private pay, insurance, waiver)
 - iv. Types of services
 - v. Current availability
4. Technical approach and work plan that indicates how proposer plans to address the purpose, objectives, and deliverables stated for the Home Modifications and Equipment program. The following are baseline requirements and preferences. Please refer to Appendix D to see a model of flow that can be used as a starting point for this program. The program created does not have to follow this flow, but will need to include all of the information listed in the Appendix.
- a. Demographics to include: individual name, address, contact information, and county of residence
 - b. Referral entry: date of referral, county submitting referral, referring SSA/ contact information (a staff member from another agency, a list we have with contact information), span date, type of equipment (drop down list) or type of home modification (drop down).
 - c. Document upload capabilities- which can then be saved in one of the 'steps' (categories).
 - d. Multiple customizable steps. Ensure that all steps are accessible from baseline, rather than becoming available after prior step's completion.
 - i. The flow seen in Appendix D offers a model of the 'ideal' client project progression. However, in application, many projects include inconsistencies in work flow that require a variation in the order of steps. It may be more appropriate to think of the steps as categories.
 - ii. The information included in Appendix D, however, does need to be included in the final product.
 - e. After adding an entry, each user must be asked if a next step will be assigned. If they say 'no', there will be no further action required; if they say 'yes', they will have the option to select a team member to send a notification.

B. Cost Proposal

The cost proposal should indicate the cost for installing and customizing this software, including an initial training process for staff members. Any separate costs per user (monthly or annually) should also be provided to allow for accurate estimates for total budget. Include any estimated provisional costs that might be incurred if an update were needed for software capabilities.

The proposed cost amounts should be allocated based on the period that services or activities are performed, and work is completed, not when payment will be requested. The cost should include an itemized list of the services that will be included and the costs.

3. Proposal Submittal

Proposals must be submitted in the following format in order to be scored:

- **Proposals must be submitted via email no later than 10/31/21 to joan.justiniano@swocog.org.**
 - The email subject should include the subject “SWOCOG MSC Software” with any documents attached in PDF format.
 - Include a brief written description of any multimedia attachments, video or screen recordings, and the link or instructions to view said media (in the case that they are too large to attach)
 - All pages must be numbered consecutively using the format “Page [#] of [total number of pages]” (e.g., Page 3 of 20).
- A. All costs incurred in the preparation of the Proposal shall be borne by the Proposer alone, and SWOCOG shall not contribute, in any way, to the cost of the preparation of the Proposal.
- B. All information submitted by the Proposer will be considered to be public information unless the proposer specifically demonstrates, in writing, which information it considers to be proprietary. “Proprietary information” is information which, if made public, would put the proposer at a disadvantage in the marketplace and trade in which the proposer is a part. Consequently, an assertion of “proprietary” information must be clearly identified, and the basis of the assertion must be included. It is not adequate for the bidder to simply state that disclosure of the information will put it at a disadvantage in the marketplace. SWOCOG will make the final decision as to whether information is “public” or “proprietary”.
- C. The Southwestern Ohio Council of Governments (SWOCOG) has the right to accept or reject any and all proposals for this bid if it is determined in their best interest to do so. The SWOCOG maintains the right to:
- i. Modify, accept, or reject any and all proposals and/or bids if SWOCOG determines that it is in their best interests to do so.
 - ii. Rebid this RFP, requesting new Proposals from qualified firms.
 - iii. Waive or modify minor irregularities in Proposals received.
 - iv. Negotiate with Proposer(s), within the requirements of this RFP, to best serve the interests of SWOCOG
 - v. Require the submission of modifications or additions to Proposals as a condition of further participation in the selection process.
 - vi. Not make an award at the end of the evaluation process; this RFP is not to be interpreted or construed to guarantee that one or more Proposers

submitting responses will be awarded contracts.

vii. Adjust the RFP Calendar of Event dates if deemed appropriate.

viii. Contact Proposer to clarify any portion of the Proposer's submittal

- D. If, during the review process, SWOCOG determines that it is necessary to make further distinctions between certain Proposers, SWOCOG may request certain selected Proposers to interview or make a presentation to staff and reviewers. The Proposer shall bear the cost of travel to any scheduled interview.
- E. In accordance with federal and state statutes, no person shall be excluded from participation or subject to discrimination in the RFP process on the basis of race, color, age, sex, national origin, military status, religion, or disability.

4. Inquiries

The following instructions dictate the appropriate behavior of any applicant during the period of time from the issuance of the RFP until a contract is awarded to a proposer.

- A. From the issuance date of the RFP until a contract is awarded, there should be no unofficial communication regarding the RFP between SWOCOG and the relevant applying party.
- B. In order to submit official communication to SWOCOG regarding the RFP, the relevant applying party may:
 - 1. Visit www.swocog.org and navigate to the 'Multisystem Coordination' tab, upload their question or document via direct link
 - 2. Send an email directly to joan.justiniano@swocog.org, Subject Line : MSC RFP.
- C. Any official inquiries can expect a publicly posted response within 2 business days of submission. Official inquiries and their responses will be posted publicly under the Multisystem Coordination tab of the SWOCOG website.
 - 1. SWOCOG is not responsible for notifying applicants of their completed/published inquiries upon completion
 - 2. Likewise, SWOCOG is not responsible for notifying applicants of changes to the RFP details as noted in public responses to inquiries
 - 3. The applicant responding to the RFP is responsible for checking the SWOCOG website regularly for inquiries and responses, and for making any changes needed as a result of those public inquiry responses, prior to submission of the RFP.

PART FOUR: EVALUATION OF PROPOSALS

1. Evaluation Process

SWOCOG’s evaluation process of responses submitted to this request may consist of up to four distinct phases:

- a. SWOCOG’s initial review of all proposals for timely submission;
- b. An evaluation committee review of the proposals for defects and scoring;
- c. SWOCOG’s request for more information (clarifications, interviews, presentations, and/or demonstrations); this communication is permitted, though it may occur outside of the official inquiry period
- d. Negotiations or best offer requests.

At its sole discretion, SWOCOG will determine whether phases c and/or d are necessary under this RFP, reserving for itself the ability to eliminate or add phases c or d at any time during the evaluation process. SWOCOG may add or remove sub-phases to phases c through d at any time if doing so will improve the evaluation process. These changes will be shared publicly on www.swocog.org under the ‘multisystem coordination’ tab.

Proposal Evaluation Criteria

In the proposal evaluation phase, SWOCOG staff will rate the proposals submitted in response to this RFP based on the following criteria and weight assigned to these criteria. Note that several criteria are considered requirements, and therefore pass/fail. If a proposal earns a ‘fail’ on one of these standards, it will not be considered further.

Criteria	Possible Value	Score (out of 100)
Multi-factor identification for login	Pass/Fail	
Cloud-based server	Pass/Fail	
HIPAA Compliant	Pass/Fail	
Disaster Recovery Plan	Pass/Fail	
Client Profile: Demographics (1) Current Funding Sources (2) Current Needs Status (1) Service History (3) Easily uploaded/viewed documentation (4) Including Medical overview(1) Activity Log (3) Reporting Capabilities by user/client in a time frame (5)	20	
Ease of interface	10	

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Provider Profile: Name and Contact info (2) Funding Accepted (3) Focus of Service (5) Current clients and current availability (5)	15	
Capability to archive, search (by user or client), and add new files or profiles	5	
Home Mods and Equipment: Updates for users to assign/remind of duties (3) Capability to upload photos and signatures (5) Accessible features for staff in the field (3) Office-compatible document templates (4) Custom reporting capabilities (5)	20	
Ability to fill out survey and show score on profile	10	
Installation and training process	10	
Support Plan	10	
Total	100	

2. Scoring

Points for each component listed will be assigned based on how well the proposer meets the criteria outlined in Part II, Section IV: Scope of Deliverables, with points increasing to reflect closeness to the goal. As stated above, any Pass/Fail objectives with a “fail” score will not be considered further, as those are requirements. Upon reviewing the entirety of the proposal, the points will be added up. The proposal with the most points will not automatically be assigned the contract; rather, the score will be one factor among several: cost, experience, references, and any other information SWOCOG deems relevant.

PART FIVE: CONTRACT AWARD

1. Contractual Requirements

The provider whose proposal is selected will be required to agree to the terms of the Contract as will be determined upon completion of the RFP. Changes requested by the proposer and agreed upon by all parties will be added to the contract's statement of work by SWOCOG during negotiations of the final contract.

All aspects of the contract will apply equally to work performed by any and all subcontractors. The Contractor, and any subcontractor(s), will not use or disclose any information made available to them for any purpose other than to fulfill the contractual duties specified in the RFP. The Contractor, and any subcontractor(s), agrees to be bound by the same standards of confidentiality including federal and state statutory and regulatory requirements that apply to the employees of the State of Ohio.

2. Protest Procedure

Any potential, or actual, provider may file a protest on any matter relating to the process of soliciting proposals. Such a protest must comply with the following guidelines:

Protests shall be in writing and shall contain the following information:

- A. The name, address, and telephone number of the protestor;
- B. The program name of the RFP being protested;
- C. A detailed statement of the legal and factual grounds for the protest, including copies
- D. A request for a ruling by the Board;
- E. A statement as to the form of relief requested from the Board;
- F. Any other information the protestor believes to be essential to the determination of the factual and legal questions at issue in the written protest;

A protest shall be considered timely if received within the following periods:

- A. A protest based on any alleged improprieties or events about which the protestor knew or could have reasonably discovered, prior to the deadline for receipt of proposals, shall be filed no later than the deadline for receipt of proposals.
- B. If the protest relates to the interview team or SWOCOG's recommendation to award a contract or to reject any or all proposals, the protest shall be filed no later than 9 a.m. of the seventh (7th) calendar day after the issuance of the Letter of Intent to Award the contract or if applicable, after the issuance of the Letter of Intent to Reject all proposals.
- C. An untimely protest may be considered if it determines that the protest raises issues significant to SWOCOG's procurement system. An untimely protest is one received by SWOCOG after the time periods set forth Part Three of this RFP.

All protests must be filed at the following location:

Southwestern Ohio Council of Governments
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Southwestern Ohio Council of Governments
412 S East ST
Lebanon, Oh 45036

When a timely protest is filed, a contract award shall not proceed until a decision on the protest is issued or the matter is otherwise resolved, unless the Board determines that a delay will severely disadvantage the Board. The provider(s) who would have been awarded the contract shall be notified of the receipt of the protest.

Appendix A
Caretaker Profile: Resilience Score

Family Profile:

For the primary caretaker to fill out: (Likert scale to quantify)

1	2	3	4	5
Almost never	Not often	Sometimes	Often	Almost always

1. I have a positive, close relationship with the individual in question.
2. I can usually sense how (individual) is feeling even before they tell me or show me.
3. I feel like I have a good handle on (individual)'s needs, and what goals we are working towards.
4. I feel overwhelmed by the complexity of (individual)'s needs. *
5. I am unable to meet both (individual)'s needs and the needs of my other household members. *
6. I feel like meeting all of (individual)'s needs leaves no room for my own wants and needs. *
7. Sometimes I worry about how I will provide food, pay rent, and take care of our basic needs. *
8. When I am faced with an overwhelming challenge, I have at least one trusted adult, outside of our household, who I can talk to about it.
9. I feel confident that I can meet (individual)'s needs, and seek more help when I need it.
10. My household is part of a community that supports us through challenges.
11. I feel like I have to sacrifice my relationships with others to meet (individual)'s needs. *
12. I often feel like it is me against the world when trying to meet (individual)'s needs. *
13. I have been dealing with increased health problems in my own body in the last six months. *
14. I feel like our household is stable, despite challenges and occasional crises.
15. I am hopeful for (individual)'s future.

*Statements with an asterisk should be scored inversely—for example, 5 would be scored as 1, 4 as 2, etc.

For the individual in question:

1. Does the individual show signs of trust towards the caretaker (*mentor/safe adult) in their life? I.e, they seek caretaker out, choose to spend time together, seem to prefer certain people when they are upset.
2. Does the individual spend time in their community outside of mandatory activities like school or therapy?
3. Does the individual seem to have at least one peer friendship?
4. Does the individual demonstrate safe coping strategies when they experience challenges or unpleasant emotions?
5. Does the individual have the opportunity to make meaningful choices throughout their day?

Appendix B

Example of Client Profile for Multisystem Coordination

PROFILE PIC	community integration score: (value)
NAME	support score: (value)
DOB	current status: (value)
Medical	funding sources (primary): Family resilience score: (value)

- Click on Medical:
 - diagnoses (when click, takes to documentation/date, psych eval, or generic descriptions),
 - current medication (when you click takes you to dosage, notes, and most common side effects), 'past medication' takes you to outline of past meds, reason for d/c;
 - hospitalizations; timeline,
 - medical team: lists doctor's names. Click name for profile, which includes locations, email, and phone #; any documents they have submitted.
 - Communications: any interaction/email/phone call from medical team or family for medical team.
- Click on Community Integration Score
 - an outline of different community programs or activities the individual is involved in.
 - Include options for frequency, the score to include number of activities and frequency
- Click on Support Score
 - Current supports: planned respite, emergency respite, weekly hpc, therapy, support groups
 - Perhaps have a status with remaining hours or requirements for support not yet met
 - Consider additional supports, like county board and IEPs.
- Click on Current status: crisis, in evaluation, stabilizing, stable, discharged
 - Still determining how this will be scored
 - Hospitalizations, mobile crisis response, police intervention
- Click on Funding source (primary): current source;
 - then can click to see documentation via card or number
 - alternate options or breakdown of options—if they have supplemental insurance
 - waivers listed with number of hours or support, grants utilized, and if FSSP (a certain dollar amount per county per individual) has been used
- Click on Family Support Score
 - See completed Appendix A
- Communication Log
 - View date, type of communication, and person
 - Click to view details of communication
- Activity Log
 - View most recent users and input

Appendix C

List of Entry Capabilities needed for Multisystem Coordination

- Entry capabilities:
 - Communication
 - Person: Caretaker, Provider, Medical professional, County Board Representative, Other: (Input role); all allow for name to be typed
 - Category: phone call, text message, email, and fax
 - Categories: Medical
 - Diagnosis: drop down list, option to add other
 - For each diagnosis input provide option to upload documentation/psych eval
 - Provide date or year of diagnosis, doctor or institution responsible for dx
 - Allow 'unknown' or uncertain option
 - Medication: search tool, allow to add multiple
 - Have visible each med added
 - Include link to med overview (common reasons for use, side effects) and note for why it was added (or discontinued)
 - Document dosage/frequency and date of beginning/end
 - Hospital stays
 - Which hospital, dates of stay (length)
 - What type of stay (pink slip, emergency, voluntary, physical health emergency, health planned, med change, etc)
 - Cost (estimated or actual bill)
 - Category: Community Integration
 - Total score for integration based on points assigned
 - Box to input the title of the program or activity individual is involved in
 - Frequency and duration of activity
 - If this activity takes place in home or community
 - If this activity is integrated Neurotypical/Neurodiverse community
 - Category: Support Score
 - Current supports- drop down box: planned respite, emergency respite, HPC, mental health therapy, support group, OT, PT, SLP, music therapy
 - Able to click for details, then show details like provider, number of hours, schedule, dates, etc
 - Able to show status with remaining hours or support availability. For example, "in need of in-home respite 2x/week, 3-7 pm"
 - Family feels connected to peer supports: yes/no/sometimes checkbox
 - if they are connected to DD services, MHRB, IEP
 - name of SSA or rep, school district
 - document upload for support plan, IEP
 - Category: Current Status
 - Drop down with crisis, in evaluation, stabilizing, stable, discharged

Appendix C Continued

List of Entry Capabilities needed for Multisystem Coordination

- Click to view or outline goals per family
 - Click to view or outline goals per service plan
- Provide date for follow up
- Category: Provider Profile
 - Name and contact information
 - Funding accepted (check boxes: waiver, private insurance, FSSP, Medicaid)
 - Zip codes available
 - Current availability
 - Restrictions or specialties

APPENDIX D
Home Modification and Equipment Flow Model

1. Receive referral (Is it home modification or equipment?)
2. Add new project (select from drop down or something similar. Home Mod or Equipment. Depending on what you choose here, the next steps will be different.)
For this example, we will just assume it's a home modification.
3. Once entered, email notification sent to various members of team to inform of the new project.
4. Step One: Evaluation Step – Assigned to therapist (email notification to this assigned therapist)
Mini steps within this step
 - a. Scheduled Visit – y/n and date of completion. Space for notes
 - b. Home Visit – y/n and date of completion. Space for notes.
 - c. Request for Demos - y/n and date of completion. Space for notes.
 - d. Evaluation Complete – y/n and date completion. Space for notes.
 - e. Submitted – y/n and date of completion. Space for notes.
5. Step Two: County Review of Recommendations
 - a. Sent to County for Review – y/n and date of completion. Space for notes.
 - b. Follow Up with Reviewer – y/n and date of completion. Space for notes.
 - c. Received Approval – y/n and date of completion. Space for notes.
6. Step Three: Preliminary Visit – Assigned to team member (email notification to them)
 - a. Scheduled Visit - y/n and date of completion. Space for notes.
 - b. Home Visit - y/n and date of completion. Space for notes.
 - c. Re-Review with County - y/n and date of completion. Space for notes.
7. Step Four: Request for Provider (RFP) Step – Assigned to team member (email notification sent to them)
 - a. RFP Sent – y/n and date of completion. Space for notes.
(Email notification to assigned team member when RFP closes in 5 days)
 - b. RFP Closed – y/n and date of completion
8. Step Five: Bid Meeting – Assign to team member (email notification to them)
 - a. Scheduled Visit – y/n and date of completion. Space for notes
 - b. Obtain Property Authorization - y/n and date of completion. Space for notes.
 - c. Home Visit – y/n and date of completion. Space for notes.
 - d. Changes to Recommendations – y/n/ n/a
9. Step Six: Bid Review – Assign to team member
 - a. Obtain Bids from Providers - y/n and date of completion. Space for notes.
 - b. HMR Review All Bids - y/n and date of completion. Space for notes.

APPENDIX D (continued)
Home Modification and Equipment Flow Model

- c. Review Bids with Individual/Caregivers - y/n and date of completion. Space for notes.
10. Step Seven: Funding Request (will need each a-e to assign to specific team member)
- a. HMR Submit Funding to HMC - y/n and date of completion. Space for notes.
 - b. HMC Submit Funding to County - y/n and date of completion. Space for notes.
 - c. HMC Funding Follow up with County - y/n and date of completion. Space for notes.
 - d. Received Funding Confirmation from County - y/n and date of completion. Space for notes.
 - e. Confirmation of approval sent to Provider and HMR - y/n and date of completion. Space for notes.
11. Step Eight: Project Completion – (will need each a-e to assign to specific team member)
- a. Schedule Kick-off Meeting - y/n and date of completion. Space for notes.
 - b. Kick-Off Meeting Complete - y/n and date of completion. Space for notes.
 - c. Project In Process/Progress Inspections - y/n and date of completion. Space for notes.
 - d. Final Inspection - y/n and date of completion. Space for notes.
 - e. Closing Document Sign off - y/n and date of completion. Space for notes.
 - f. Submit Closing Documents to SWOCOG - y/n and date of completion. Space for notes.
 - g. Submit Closing Documents to Interested Parties - y/n and date of completion. Space for notes.