

THE SCHOOL DISTRICT OF PITTSBURGH

(Pittsburgh, Pennsylvania)

**REQUEST FOR PROPOSALS
FOR EMPLOYEE ASSISTANCE PLAN (EAP)
SERVICES**

Issuance Date: August 15, 2016

Submission Date: September 6, 2016

Introduction

The purpose of this Request for Proposals (“RFP”) is to obtain employee assistance program (EAP) services for the School District of Pittsburgh (the “School District”), effective January 1, 2017. The contract would be for a three year term of service with an option to renew for three subsequent years upon satisfactory service. The role of the EAP provider is to provide assessment and referral services, short term counseling, including crisis debriefing, education and training and supervisor consultation to the District.

Background

An EAP provider was established for the benefit of District employees and their dependents in 1988 through a collaborative process involving a broad-based committee of employee representatives. The program has been offered by an external provider since that time and has become a valued resource to the District and its employees.

Timetable/Response Submittal

The School District is requesting proposals from experienced and qualified organizations to serve as an EAP provider to the School District. Selection of the EAP provider will be made based on the proposals submitted and oral interviews, if needed. A tentative timetable for the selection process is provided below:

- August 15, 2016 Release of RFP
- September 6, 2016 Receipt of Proposals
- September 12, 2016 Interview Date (if necessary)
- September 20, 2016 Staff Recommendation for Selection of EAP Provider
- October 26, 2016 Legislative Approval by Board of School Directors

Upon the release of this RFP and during the conclusion of the selection process, there shall be no communication between any prospective respondents and/or their lobbyist, authorized/unauthorized agent(s) with any staff of the School District, or any elected or appointed official of the School District and/or their staff, except as provided for in the RFP. Any violation of this provision by any prospective firm and/or its agent shall be immediate grounds for disqualification.

All proposals for EAP provider shall be submitted to the School District as follows:

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| Office of Employee Relations School District of Pittsburgh 341 South Bellefield Avenue, Room 139 Pittsburgh, PA 15213 Tel: (412) 529-3627 Fax: (412) 622-7968 |
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One (1) original and six (6) copies of the proposal shall be prepared and submitted to the School District in such form as is set forth in this RFP by Noon on Tuesday, September 6, 2016.

Proposals, including any/all attachments, cover letter and tabs should not exceed twenty five (25) pages in length on 8 ½" X 11" paper, single spaced using a minimum font size of 10 pt.

Proposals should be submitted in accordance with the instructions detailed below. The School District reserves the right to select a proposal in its entirety or some portion(s) thereof. Furthermore, the School District reserves the right to reject any and all proposals and to waive irregularities.

Proposals which are submitted in electronic format or faxed will not be accepted.

Any questions regarding this RFP can be answered by calling (412) 529-3627.

Specific Response Requirements

Responses should address the following questions or requests for information and be organized so that the specific questions or requests for information each begin on a new page with the question repeated at the top of the page.

I. Letter of Transmittal

Each proposal should be accompanied by a letter of transmittal which summarizes key points of the proposal and which is signed by an officer of the organization who is responsible for committing the organization's resources.

II. Experience and Qualifications

- A. Please provide an overview of the organization and its qualifications. Please include the location of the organization's offices in the Commonwealth of Pennsylvania.
- B. Describe the organization's relevant EAP provider experience for the past 5 years. Of particular interest will be experience with school districts or other public sector entities. (Please provide a client list noting the contact name, telephone number, size of the organization, and scope of EAP services provided.)

III. Team Qualifications

Provide brief resumes for the following individuals who will be assigned to the School District's account, including any relevant experience for each individual. Please include only those individuals who will work on the School District's account.

- A. The coordinator who will assume the day-to-day responsibility for managing and supporting the School District's needs.

- B. Other members of the team and the specific qualifications and expertise of each.

IV. Promotional Activities

Please describe the strategies your organization will utilize to promote the EAP service to District employees in order to establish and maintain strong usage.

V. Organization Information/Equal Employment Opportunity

- A. Describe your organization's equal employment opportunity policies and programs.
- B. Has your organization or any of its employees, or anyone acting on its behalf, ever been convicted of any crime or offense arising directly or indirectly from the conduct of your firm's business or have any of your firm's officers, director or persons exercising substantial policy discretion ever been convicted of any crime or offense involving financial misconduct or fraud? If so, please describe any such convictions and surrounding circumstances in detail.
- C. Has your organization, or any of its employees, or anyone acting on its behalf, been indicated or otherwise charged in connection with any criminal matter rising directly or indirectly from the conduct of your firm's business which is still pending or have any of your organization's officers, directors or persons exercising substantial policy discretion been indicted or otherwise charged in connection with any criminal matter involving financial misconduct or fraud which is still pending? If so, please describe any such indictments and surrounding circumstances in detail.
- D. Please describe (i) any material financial relationships that your organization or any organization employee has with any persons or entities that may create a conflict of interest in acting as an EAP provider to the School District; (ii) any family relationship that any employee of your organization has with any public servant that may create a conflict of interest, or the appearance of a conflict of interest in acting as a provider of services to the School District and (iii) any other matter that your organization believes may create a conflict of interest or the appearance of a conflict of interest in acting as a service provider to the School District. Please describe any procedures your organization either has adopted, or would adopt, to assure the School District that a conflict of interest would not exist for your organization in the future.

VI. Fee Proposal

Please provide a three (3) year fee structure that your organization proposes to provide on the following scope of services:

- A. Program review, administration and consultation support

- Administrative functions, consultation regarding operating the program effectively, promotional activities, participation in wellness events, evaluation.
- B. Training and Orientation Activities
(It is suggested that a range of services and costs be provided for this item.)
- C. Assessment, Brief Treatment and Referral
- Intake and/or assessment services, appropriate referrals consistent with the District’s health care plans, and referral follow-up.
 - Brief treatment; up to 6 sessions per event.
- (It is suggested that the costs for Assessment, Brief Treatment and Referral be detailed to show estimated penetration rate, average hours of service per employee use and hourly unit cost.)
- D. Crisis Debriefing
- Any fees associated with emergency crisis debriefing
- E. Program Evaluation
- Please provide the assessment tool your organization will use to determine client satisfaction and the manner in which this information will be shared with the School District.
- F. Quarterly/Annual Usage Reports
- Please provide samples of usage reports your organization will provide on a quarterly basis to the School District (including an annual summative report).

Evaluation Criteria and Selection Process

The contract will be awarded to the qualified proposer whose proposal is most advantageous to the School District, based upon the evaluation criteria specified below. Thus, while the points in the evaluation criteria indicate their relative importance, the total scores will not necessarily be determinative of award. Rather, the total scores will guide the School District in making an award decision based upon the evaluation criteria.

The School District reserves the right to request oral presentations from those organizations determined to be in a competitive range and shall use the information derived from these oral presentations, if any, in its evaluation.

The School District anticipates selecting one EAP provider using the following criteria to determine which organization best meets the needs of the School District.

| EAP Provider | Points |
|--|---------------|
| Ability to Meet the Needs of the School District | 50 |
| Experience and Qualifications | 25 |
| Fee | 25 |