

REQUEST FOR PROPOSALS

**PSYCHIATRIC CONSULTATION SERVICES FOR UP TO 19 PROGRAMS WITH SELF-
CONTAINED CLASSES FOR SEVERELY EMOTIONALL DISTURBED STUDENTS**

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA

PROPOSAL RETURN DATE

March 25, 2003

RFP: #110-CC10

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA
BUREAU OF PROCUREMENT AND MATERIALS MANAGEMENT
1450 N.E. 2ND AVENUE, MIAMI, FLORIDA 33132

REQUEST FOR PROPOSALS #110-CC10

PSYCHIATRIC CONSULTATION SERVICES FOR UP TO 19 PROGRAMS WITH SELF-
CONTAINED CLASSES FOR SEVERELY EMOTIONALLY DISTURBED STUDENTS

Sealed proposals will be accepted in the Bureau of Procurement and Materials Management, at the above location, until **2:00 P.M.** on **March 25, 2003** and may not be withdrawn for ninety (90) days from that date.

ANTI-COLLUSION STATEMENT

THE UNDERSIGNED PROPOSER HAS NOT DIVULGED TO, DISCUSSED, OR COMPARED HIS PROPOSAL WITH OTHER PROPOSERS AND HAS NOT COLLUDED WITH ANY OTHER PROPOSER OR PARTIES TO THE PROPOSAL WHATSOEVER.

PROPOSER ACKNOWLEDGES THAT ALL INFORMATION CONTAINED HEREIN IS PART OF THE PUBLIC DOMAIN AS DEFINED BY THE STATE OF FLORIDA SUNSHINE LAW.

CERTIFICATION AND IDENTIFICATION FOR CONTRACTORS SUBMITTING PROPOSALS.

I certify that this proposal is made without prior understanding, agreement or connection with any corporation, firm or person submitting a proposal for the same service, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of these proposal specifications and I certify that I am authorized to sign this proposal.

(Please Type or Print Below)

LEGAL NAME OF AGENCY OR
CONTRACTOR SUBMITTING PROPOSAL : _____

MAILING ADDRESS : _____

CITY STATE, ZIP CODE : _____

TELEPHONE NUMBER : _____

BY: SIGNATURE : _____

BY: TYPED : _____

TITLE : _____

INSTRUCTIONS TO AGENCY/CONTRACTOR SUBMITTING PROPOSAL

I. PREPARING OF PROPOSALS

- A. THE PROPOSAL IS TO BE SUBMITTED, using 8-1/2" x 11" paper.
- B. IDENTIFICATION. Failure to indicate the contractor's EXACT legal name and an unsigned proposal may be considered non-responsive.

II. SUBMITTING OF PROPOSALS

- A. Number of Proposal:

A total (11) of the Proposal must be submitted as follows:

- * The original proposal in a sealed envelope or box marked "Original".
- ** (10) copies of the proposal in a separate sealed envelope or box marked "Copies".

The proposal number, proposal title and opening date must be clearly marked on all envelopes and boxes.

- B. Place, Date and Hour. Proposals shall be submitted to The School Board of Miami-Dade County, Florida, Bureau of Procurement and Materials Management, Room 352, 1450 N.E. 2nd Avenue, Miami, Florida, not later than 2:00 P.M., March 25, 2003.

III. CHANGE OR WITHDRAWAL OF PROPOSAL

- A. PRIOR TO PROPOSAL OPENING. Should the agency or individual contractor withdraw its proposal they shall do so in writing. This communication is to be received by the Associate Superintendent, Bureau of Procurement and Materials Management, 1450 N.E. 2nd Avenue, prior to March 25, 2003. The agency or individual contractor's name and the proposal number should appear on the envelope.
- B. AFTER PROPOSAL OPENING. After March 25, 2003, proposals may not be changed; and they may not be withdrawn for ninety (90) days from that date.

IV. PROTEST OF SPECIFICATIONS

Any notice of protest of the specifications contained in a request for proposal shall be filed in writing with the Associate Superintendent, Bureau of Procurement and Materials Management no later than 48 hours prior to the date and hour specified in page i for receipt of proposals. Failure to file a timely notice of protest shall constitute a waiver of proceedings.

V. AWARDS

RESERVATION FOR REJECTION OR AWARD. The Board reserves the right to waive irregularities or technicalities, reject any or all proposals and to request re-bids.

AWARD RECOMMENDATION. Proposer information phone lines have been established in Procurement Management. Proposers may call 995-1375 each Friday to be advised of the recommended proposers and the time it is contemplated that the recommendation will be made. This information will be provided by school system staff as available. In no case will information as to a recommended proposer be available later than the Friday preceding the week when the award is scheduled to be made by the School Board or the Superintendent.

Proposers may file letters of protest no later than 48 hours prior to the Board Meeting for which the award is scheduled to be made. These letters of protest will be reviewed by Staff. Staff will offer the protesting proposer the opportunity for a meeting to discuss the protest. If the proposer is not satisfied with the response to the protest, he/she may request to address the School Board. Alternatively, proposers may invoke the provisions of §120.569, Fla. Stat. Petitions for hearings on protests pursuant to §120.569, Fla. Stat., must be filed in accordance with School Board Rule 6Gx13-8C-1.064. Protests filed later than the date specified herein are deemed waived. This provision supersedes and governs over any conflicting provision in this document.

VI. DEFAULT

In the event of default, which may include, but is not limited to non-performance and/or poor performance, the awardee shall lose eligibility to transact new business with the Board for a period of 14 months from date of termination of award by the Board. Proposers that are determined ineligible may request a hearing pursuant to §120.569, Fla. Stat., and School Board Rule 6Gx13-8C-1.064.

VII. PUBLIC ENTITY CRIMES

Section 287.133(2)(a) Florida Statute. A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

VIII. COMPLIANCE WITH FEDERAL REGULATIONS

All contracts involving Federal funds will contain certain provisions required by applicable sections of Title 34, Section 80.36(l) and Section 85.510 Code of Federal Regulations and are included by reference herein. The vendor certifies by signing the proposal that the vendor and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in Federally funded transactions and may, in certain instances, be required to provide a separate written certification to this effect.

During the term of any contract with the Board, in the event of debarment, suspension, proposed debarment, declared ineligible or voluntarily excluded from participation in Federally funded transactions, the vendor shall immediately notify the Associate Superintendent, Bureau of Procurement and Materials Management, in writing.

Vendors will also be required to provide access to records, which are directly pertinent to the contract and retain all required records for three years after the grantee (The Board) or sub-grantee makes final payment.

For all contracts involving Federal funds, in excess of \$10,000, The Board reserves the right to terminate the contract for cause as well as for convenience by issuing a certified notice to the vendor.

REQUEST FOR PROPOSALS:

PSYCHIATRIC CONSULTATION SERVICES FOR UP TO 19 PROGRAMS WITH SELF-CONTAINED CLASSES FOR SEVERELY EMOTIONALLY DISTURBED STUDENTS

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA

I. NAME AND ADDRESS OF REQUESTOR

Miami-Dade County Public Schools
Office of Exceptional Student Education and Student/Career Services
1500 Biscayne Boulevard, Suite 407
Miami, Florida 33132

II. PURPOSE OF REQUEST FOR PROPOSALS

The purpose of this Request for Proposals (RFP) is to obtain the professional services of one or more qualified psychiatrists to provide on-site psychiatric consultation to assist in the diagnosis and programming of students assigned to self-contained time programs for the severely emotionally disturbed. The programs are presently located in five elementary and twelve secondary schools district-wide. See Attachment A - **Schools With Full-time Classes For Severely Emotionally Disturbed Students Requiring Psychiatric Consultation**. The proposer may propose to serve one or more sites. Other sites may be added.

III. INSTRUCTIONS FOR SUBMISSION OF PROPOSALS

Eleven copies of the proposal, one of which must be an original, must be received by 2:00 p.m. (Eastern Standard Time) March 25, 2003 at:

The School Board of Miami-Dade County, Florida
Bid Clerk, Division of Procurement Management
1450 N.E. Second Avenue, Room 352
Miami, Florida 33132

The proposal must be submitted in a sealed envelope marked "PROPOSAL FOR PSYCHIATRIC CONSULTATION SERVICES FOR UP TO 19 PROGRAMS WITH SELF-CONTAINED CLASSES FOR SEVERELY EMOTIONALLY DISTURBED STUDENTS." It is anticipated that the proposal(s) may be presented to The School Board of Miami-Dade County, Florida, (School Board) for acceptance on or about May 14, 2003. If accepted, notification to the successful proposer(s) will be on or after May 15, 2003. The School Board reserves the right to reject any and all proposals.

IV. OWNER PROVIDED SERVICES

Proposers are notified that the School Board hereby reserves the right to provide, in whole or in part, the services described in the RFP. In the event the School Board chooses to provide services, adjustments may be required to the proposer's contracts in order to appropriately coordinate services.

V. DESCRIPTION OF THE PROGRAM

The Office of Exceptional Student Education (ESE) and Student/Career Services has developed a plan to contract with outside psychiatrists to provide on-site services for up to 19 identified programs for full-time severely emotionally disturbed (SED) students. Each site will receive approximately three to four hours of on-site services approximately every five weeks during each school year, depending on students' needs. On-site school services are to include:

- direct interview/evaluation of students
- consultation with parents and/or staff
- case management

Psychiatric consultation is requested for five elementary school programs and twelve secondary programs serving SED students, and two additional sites as needed.

Each site has from one to four classes with two teachers and/or one teacher and a paraprofessional assigned to each classroom. There is also a full-time psychologist or clinical social worker delivering counseling support services for students and their families at each site and serving as the liaison to the region office, district office and consulting psychiatrist. A clinical art therapist is usually assigned to each program on a half-time basis.

Psychiatric consultation occurs at the school site on a rotating basis. Consultation usually takes place in the morning for approximately three hours. The consulting psychiatrist may meet with selected students/staff or family, depending on arrangements made by the site clinician who serves as liaison. Consultation issues may involve clarification of diagnosis, present functioning, as well as treatment planning. A consultation report is completed at the site. See Attachment B - **Psychiatric Consultation Report**. The consulting psychiatrist will also be required to complete a weekly log documenting hours of service for each student served. See Attachment C - **Weekly Contact Log for Psychiatric Consultation**. A monthly invoice based on services rendered must also be submitted at the end of each month.

Services are to include not less than 150 hours or more than 375 hours from July 1, 2003 through June 30, 2004, and may, by mutual agreement between the School Board and the awardee, upon final School Board approval, be renewable for two additional one-year periods.

One hourly fee is required. Do not differentiate fees for specific services.

The agency(ies) selected must identify a liaison to the school district in reference to this contract. Upon referral from the school district, the liaison will ensure coordination and maintain documentation of all services that are rendered (including a log of services to record dates, times, locations, descriptions and hours of service). In addition, the agency (ies) must provide the school district with the name(s) of staff qualified to supervise personnel assigned to deliver services to students.

The Assistant Superintendent, Office of ESE and Student/Career Services and other designated personnel in the Office of ESE and Student/Career Services have the responsibility for maintaining effective coordination between the school district and the agency(ies) relative to the provisions of the contractual agreement for psychiatric consultation services. The school district will conduct an orientation meeting for staff from ESE and agency liaisons prior to the initiation of contractual services.

VI. REQUIRED INFORMATION TO BE SUBMITTED BY PROPOSER

A. Proposers must possess the following minimum qualifications to be considered for **each** professional that will provide psychiatric consultation services:

1. M.D. degree and licensure in the State of Florida;
2. Two years experience in providing psychiatric services to children and adolescents;
3. Completion of a residency in child psychiatry; and
4. Board certification in child and adolescent psychiatry and/or general psychiatry.

B. Proposers must submit the information listed below for **each** professional that will provide psychiatric consultation services, in addition to information specified elsewhere in this RFP:

1. A brief description of the design for provision of consultation services.

2. Evidence of the highest educational degree.
3. Evidence that the proposer is licensed to practice medicine under the laws of the State of Florida.
4. Evidence of completion of a residency in psychiatry or child psychiatry.
5. Evidence of Board certification in child and adolescent psychiatry and/or general psychiatry, if applicable.
6. Documentation of two years experience in providing psychiatric services to children and adolescents and of any other relevant qualifications to provide the evaluations/consultations sought.
7. State experience for each professional providing psychiatric consultation services. Proposers may submit brief resume(s) to document the required experience, as well as documentation to confirm that references related to experience have been checked by the proposer.
8. Documentation on bilingual capability, in one or more of the following areas, if applicable: English/Spanish, English/Haitian-Creole, and/or other languages.
9. A minimum of two letters of reference written within **one year** of the date of this RFP.
10. Identification of the agency's staff member to serve as liaison for service delivery and description of this staff member's qualification and experience.
11. The proposer's hourly fee must be indicated on Attachment D - **Proposer's Fee and Certification of Hours of Services.**
12. The signature of the authorized person empowered to submit this proposal indicated in the space provided for such on Attachment D - **Proposer's Fee and Certification of Hours of Services.**

13. Evidence of security clearance. Since M-DCPS is a public agency that serves children and adolescents, all employees and contracted personnel must have a security clearance to insure that individuals with criminal records involving moral turpitude do not have contact with students. Professionals who are proposed to provide services shall comply with security clearance procedures prescribed by M-DCPS; see Attachment E - **Security Clearance Procedures for Miami-Dade County Public Schools.**

C. Insurance

At all times during the Agreement Term, the Agency shall, at its sole cost and expense, procure and maintain in full force and effect, with insurance carriers duly authorized to do business in the State of Florida, with a general Best's rating of "A-" or better and a financial size category of "IV" or better according to the A.M. Best Rating Guide and acceptable to the Board, the following types of insurance:

1. Commercial General Liability Insurance

Except as otherwise provided, the Commercial General Liability Insurance, provided by the Agency, shall conform to the requirements hereinafter set forth:

- a. The agency's insurance shall cover the Agency for those sources of liability (including but not by way of limitation, coverage for operations, Products/Completed Operations, independent contractors, and liability contractually assumed) which would be covered by the latest occurrence from edition from the standard Commercial General Liability Coverage Form (ISO Form CG 0001), as filed for use in the State of Florida by the Insurance services Office.
- b. The minimum limits to be maintained by the Agency (inclusive of any amounts provided by an umbrella or excess policy) shall be \$1 million per occurrences/\$3 million annual aggregate.
- c. Except with respect to coverage Property Damage Liability, the Commercial General Liability coverage shall apply on a first dollar basis without any application of a deductible or a self-insured retention. The coverage for Property damage Liability shall be subject to a maximum deductible of \$1,000 per occurrence.

- d. The agency shall include the School Board and its members, officers, and employees as "additional insured" on the required Commercial General Liability Insurance. The coverage afforded such Additional Insured shall be no more restrictive than that which would be afforded by the School Board as Additional Insured using the latest Additional Insured Owners, Lessees or Contractors (Form B) Endorsement (ISO Form CG 2010). The Certificate of Insurance shall be clearly marked to reflect "The School Board of Miami-Dade County, Florida, its members, officers, employees, and agents as additional insured."

2. Professional Liability Insurance

The Professional Liability Insurance provided by the Agency shall conform to the following requirements:

- a. The Agency's Professional Liability Insurance shall be on a form acceptable to the School Board and shall cover those sources of liability, typically insured by Professional Liability Insurance, arising out of the rendering or failure to render professional services in the performance of this agreement, including all provisions of indemnification which is part of this agreement.
- b. The insurance shall be subject to a maximum deductible, not to exceed \$25,000.
- c. If on a claims-made basis, the Agency shall maintain without interruption, the Professional Liability Insurance until (3) years after this agreement.
- d. The minimum limits to be maintained by the Agency (inclusive of any amounts provided by an umbrella or excess policy) shall be \$1 million per claim/ annual aggregate.

3. Worker's Compensation/Employers' Liability

The Workers' Compensation/Employers' Liability (EL) Insurance provided by the Agency shall conform to the following requirements:

- a. The Agency's insurance shall cover without restrictive endorsements the Agency (and to the extent its subcontractors and sub-subcontractors are not otherwise insured), for those

sources of liability which would be covered by the latest edition of the standard Workers' Compensation Policy, as filed for use, in Florida, by the National Council on Compensation Insurance. In addition to coverage for the Florida Workers' Compensation Act, where appropriate, coverage is to be included for the Federal Employers' Liability Act and any other applicable federal or state law.

- b. Subject to the restrictions found in the standard Workers' Compensation Policy, there shall be no maximum limit on the amount of coverage for liability, imposed by the Florida Workers' Compensation Act or on any other coverage customarily insured under Part One of the standard Workers' Compensation Policy. The minimum amount of coverage for those coverages customarily insured under Part Two of the standard Workers' Compensation Policy, shall be EL Each Accident: \$500,000; EL Disease-Policy Limit: \$500,000; EL Disease-Each Employee: \$500,000.

VII. TERMS OF CONTRACT

The purpose of this RFP is to establish a contract for services from July 1, 2003 through June 30, 2004. The contract may, by mutual agreement between the School Board and the awardee, upon final School Board approval, be renewable for two additional one-year periods, and if needed, 90 days beyond the expiration date of the final renewal period. The School Board, through the Bureau of Procurement and Materials Management, shall if considering to renew, request a letter of intent to renew, from the awardee, prior to the end of the current contract period(s). The awardee will be notified when the recommendation has been acted upon by the School Board. All prices shall be firm for the term of the contract and renewal period(s), if any. Renewal will be dependent upon funding availability and the need for services, as determined by the Office of ESE and Student/Career Services.

Payment for services will be made in monthly installments upon receipt by the Office of ESE and Student Services of a properly documented invoice and approved service log. All financial records pertinent to the provision of psychiatric consultation services will be maintained in the office of the proposer for a period of five years and will be available to the School Board or its designee for audit.

The School Board, by law, must reserve the right to cancel the contract at the end of the year of the contract term or fiscal year, as well as in the event the services rendered do not comply with the provisions of the proposal and/or the quality of service is found to be undesirable.

The proposer shall comply with all municipal, state and federal statutes prohibiting discrimination. The proposer shall, at all times, comply with local, state or national standards for the provision of psychiatric consultation services, whichever is more stringent.

It is understood that for the provision of psychiatric consultation services, all psychiatrists provided by the proposer shall be covered for the term of the contract by professional liability insurance subject to the terms outlined in Section VI. The coverage will be present and in force during the term of the contract. Required proof of coverage shall be submitted subsequent to the School Board's award of this contract and must be acknowledged and approved by the School Board's Office of Risk and Benefits Management prior to the vendor providing professional services.

If selected, the proposer shall agree to hold harmless, indemnify and defend the indemnitees (as hereinafter defined) against any claim, action, loss, damage, injury, liability, cost or expense of whatsoever kind or nature including, but not by way of limitation, attorneys' fees and court costs arising out of bodily injury or damage to tangible property arising out of or incidental to the performance of the services of this RFP, by or on behalf of the proposer, excluding only the sole negligence or culpability of the indemnitee. The following shall be deemed to be indemnitees: The School Board of Dade County, Florida, and its members, officers and employees.

VIII. EVALUATION OF PROPOSALS

A. Proposals will be evaluated by representatives of the school district in order to ascertain which proposal(s) best meets the needs of the School Board. The evaluation of proposals will be made on or about, April 7, 2003, by a committee consisting of the following members:

- a region director for ESE or designee;
- a supervisor for the Division of ESE;
- a representative from the Division of Psychological Services;
- a teacher from the programs for SED students;
- a site clinician from the programs for SED students;
- a representative from the Superintendent's District Advisory Panel for ESE;
- a representative from the Division of Business Development and Assistance;
- a representative from the Bureau of Procurement and Materials Management;
- a representative from United Teachers of Dade.

B. Evaluation consideration will include, but not be limited to, the following:

1. The responsiveness of the proposal in clearly stating an understanding of the work to be performed within the established time frames.

2. The cost may not be the dominant factor but will have some significance. It will be a particularly important factor when all other evaluation criteria are relatively equal.
3. The proposed serviced area will not be a dominant factor, but will be considered. It will be a particularly important factor when all other evaluation criteria are relatively equal.
4. The background , qualifications, experience, skills and/or expertise in the area of the provision of psychiatric consultation services for severely emotionally disturbed students, along with the type and frequency of supervision and the identification and documentation of the agency liaison staff member. Preference will be given to proposers who can provide psychiatrists who have bilingual capability in any one or more of the following areas: English/Spanish, English/Haitian Creole, English/French.
5. The school district reserves the right to reject any and all proposals submitted, or any phase thereof. When the final selection is made, a professional services agreement acceptable to the Attorney for the School Board will be entered into with the successful proposer(s). No debriefing or discussion will be held with unsuccessful proposers. The School Board retains the right to waive irregularities and to request clarifications in the proposal. The information contained in this proposal is supplied as an aid to the proposer in determining whether it will be able to supply the services which may be required by the School Board.

IX. AFFIRMATIVE ACTION REQUIREMENTS AND MINORITY/WOMEN BUSINESS ENTERPRISE (M/WBE) PARTICIPATION

A. Equal Employment Opportunity

It is the policy of the School Board that no person will be denied access, employment, training, or promotion on the basis of gender, race, color, religion, ethnic or national origin, political beliefs, marital status, age, sexual orientation, social and family background, linguistic preference, or disability and provide a detailed breakdown, by ethnicity, gender, and occupational categories of its work force. See Attachment F - **Affirmative Action Employment Breakdown.**

B. **Minority/Women Business Enterprise (M/WBE) Participation**

The School Board of Miami-Dade County, Florida, has an active Minority/Women Business Enterprise Program to increase contracting opportunities for M/WBEs. In keeping with this policy, if a minority firm, which is woman, or African American-owned and operated, is to perform a scope of work, provide documentation to substantiate the M/WBE and it's staff's experience in providing this type of service. All M/WBEs must be certified by the Division of Business Development and Assistance prior to contract award. See Attachment G - **M/WBE Certification Application**.

- C. Quarterly reports documenting efforts undertaken by the proposer to maintain the stipulated M/WBE participation will be submitted quarterly and shall include each M/WBE's name, contact persons and the payments thereto for the quarter. The reports shall be submitted to the Director, Division of Business Development and Assistance, 1450 NE Second Avenue, Room #456, Miami, Florida 33132.

X. **MEDICAID FUNDS**

The district will seek Medicaid reimbursement for the services provided. Contracted Employees will be required to complete the M-DCPS paperwork to document their services as is necessary to assist the district in this process.

XI. **IMPLEMENTATION SCHEDULE**

The planned schedule for implementation of proposals for psychiatric counseling is as follows:

Procurement Contract Review Committee	February 6, 2003
Mailing of RFP	February 18, 2003
Opening of Proposals	March 25, 2003
Evaluation Completed by Selection Committee	April 7, 2003
Contract Award	May 14, 2003

XII. ADDITIONAL INFORMATION

Any additional information regarding bidding procedures may be obtained from:

Ms. Barbara Jones, Director
Bureau of Procurement and Materials Management
Miami-Dade County Public Schools
1450 NE 2 Avenue, Room 356
Miami, Florida 33132
Telephone (305) 995-2348

Additional information concerning the proposal specifications may be obtained from:

Ms. Robin J. Morrison, Instructional Supervisor
Division of Exceptional Student Education
Miami-Dade County Public Schools
1500 Biscayne Boulevard, Suite 407 J
Miami, Florida 33132
Telephone (305) 995-1806

Summary of Request for Proposals

TITLE: Psychiatric Consultation Services for Up to 19 Programs With Self-Contained Classes for Severely Emotionally Disturbed Students

INITIATED BY: Office of Exceptional Student Education and Student/Career Services

The Office of Exceptional Student Education (ESE) and Student/ Career Services has determined the need to contract for the provision of psychiatric consultation services needed as related support services for the education of severely emotionally disturbed (SED) students for whom such services have been identified as necessary to access and benefit from school-based education. Students eligible to receive these services will have the need for services specified on their Individual Educational Plans (IEPs). Such services will be provided in schools with self-contained classes for SED students. Proposers will provide on-site psychiatric consultation to students assigned to these programs.

Agencies will be selected for the provision of services based upon proposals submitted. In addition to the provision of psychiatric consultation, agencies must designate a staff member to serve as a liaison between the agency, Office of ESE and Student/Career Services, and schools regarding the provision of these services. At a minimum, monthly supervision of services must be provided by the agency.

Agencies selected will provide not less than 150 hours or more than 400 hours from July 1, 2003 through June 30, 2004. The estimated amount of this contract will be \$49,900.

ATTACHMENT A

SCHOOLS WITH SELF-CONTAINED CLASSES FOR SEVERELY EMOTIONALLY DISTURBED STUDENTS REQUIRING PSYCHIATRIC CONSULTATION

Elementary Schools

TOPS Program
Howard Drive Elementary
7750 SW 136th Street
Miami, Florida 33156
Phone: 305 235-1412
Mail Code: 2541

Kendale Lakes Elementary
8000 SW 142nd Avenue
Miami, Florida 33183
Phone: 305 385-2575
Mail Code: 2651

South Miami Heights Elementary
12231 SW 190th Terrace
Miami, Florida 33177
Phone: 305 238-6610
Mail Code: 5281

TOPS Program
Ludlam Elementary
6639 SW 74th Street
South Miami, Florida 33143
Phone: 305 667-5551
Mail Code: 3061

Ben Sheppard Elementary
5700 W. 24th Avenue
Hialeah, Florida 33016
Phone: 305 556-2204
Mail Code: 5021

Secondary Schools

Howard Doolin Middle
6400 SW 152nd Street
Miami, Florida 33193
Phone: 305 386-6656
Mail Code: 6131

Miami Edison Middle
6101 NW 2nd Avenue
Miami, Florida 33127
Phone: 305 754-4683
Mail Code: 6481

W.R. Thomas Middle
13001 SW 26th Street
Miami, Florida 33175
Phone: 305 995-3800
Mail Code: 6901

Hialeah-Miami Lakes Senior
7977 W. 12 Avenue
Hialeah, Florida 33014
Phone: 305 823-1330
Mail Code: 7131

Homestead Senior
2351 SE 12th Avenue
Homestead, Florida 33035
Phone: 305 245-7000
Mail Code: 7151

Miami Carol City Senior
3422 NW 187th Street
Opa Locka, Florida 33056
Phone: 305 621-5681
Mail Code: 7231

Miami Central Senior
1781 NW 95th Street
Miami, Florida 33147
Phone: 305 696-4161
Mail Code: 7251

Miami Coral Park Senior
8865 SW 16th Street
Miami, Florida 33165
Phone: 305 226-6565
Mail Code: 7271

Miami Sunset Senior
13125 S. W. 72nd Street
Miami, Florida 33183
Phone: 305 385-4255
Mail Code: 7531

Miami Southridge Senior
19355 SW 114th Avenue
Miami, Florida 33157
Phone: 305 238-6110
Mail Code: 7731

Barbara Goleman Senior
14100 NW 89th Avenue
Miami, Florida 33016
Phone: 305 362-0676
Mail Code: 7751

Robert Morgan Vocational/Technical
18180 SW 122nd Avenue
Miami, Florida 33177
Phone: 305 253-9920
Mail Code: 8911

Two additional sites may be added.

ATTACHMENT B

**PSYCHIATRIC CONSULTATION SERVICES FOR UP TO 19 PROGRAMS WITH
SELF-CONTAINED CLASSES FOR SEVERELY EMOTIONALLY DISTURBED
STUDENTS**

PSYCHIATRIC CONSULTATION REPORT

Child's Name: _____ DOB: _____

School: _____ Hours: _____

Clinician: _____ Date: _____

Background Information: Reports attached? (Yes) _____ (No) _____

Permission attached? (Yes) _____ (No) _____

Home: (Family Constellation? Group Home?)

REASON FOR REFERRAL: (SPECIFIC QUESTIONS/CONCERNS)

SUMMARY OF FINDINGS: (BIOPSYCHOSOCIAL FORMULATION)

DIAGNOSTIC IMPRESSION

AXIS I

AXIS II

AXIS III

RECOMMENDATIONS:

Psychiatric Consultant

Date

Site Clinician

Date

ATTACHMENT D

ATTACHMENT D

**PSYCHIATRIC CONSULTATION SERVICES FOR UP TO 19 PROGRAMS WITH
SELF-CONTAINED CLASSES FOR SEVERELY EMOTIONALLY DISTURBED
STUDENTS**

PROPOSED HOURLY FEE FOR PSYCHIATRIC CONSULTATION

PROPOSERS FEE

Hourly Fee _____

Number of consultation contact hours preferred: _____
(not less than 150, not more than 400)

LEGAL NAME OF AGENCY OR CONTRACTOR SUBMITTING PROPOSAL:

AUTHORIZED SIGNATURE: _____

NAME TYPED: _____

POSITION: _____

DATE: _____

ATTACHMENT E

SUMMARY OF SECURITY CLEARANCE PROCEDURES FOR MIAMI-DADE COUNTY PUBLIC SCHOOLS

Pursuant to Section 231.02, Florida Statutes, it is the intent of the School Board to ensure that individuals with criminal records involving moral turpitude do not have contact with students in the district.

Applicants who will be awarded a contract must comply with the following M-DCPS procedures for security clearance, prior to conducting any evaluations. (The Restricted Personal Data form and the Affidavit of Good Moral Character will be sent to proposers selected for a contract who have not previously submitted evidence of security clearance to work with children/adolescents, as referenced above.)

1. Restricted Personal Data form [FM-3505 Rev. (02-97)]

One item on this form asks an applicant if she/he has ever been convicted, fined, imprisoned, or placed on probation in a criminal proceeding. If the applicant responds affirmatively, the date, location, penalty/disposition for each offense must be specified, and the form is sent to M-DCPS Special Investigative Unit for a local law enforcement check.

2. Affidavit of Good Moral Character

3. Fingerprint Card

- a. The M-DCPS Fingerprinting Department completes necessary information on the fingerprint card.
- b. The applicant must pay \$62 or the current fee for processing (money order for \$52.00 and \$10.00 in cash).
- c. The applicant is fingerprinted.
- d. The fingerprint card is submitted to the Florida Department of Law Enforcement (FDLE) which completes a state check for criminal activity. FDLE submits the card to the Federal Bureau of Investigation (FBI) which completes a national check for criminal activity.

If it is subsequently found that the applicant/proposer has been convicted of a crime involving moral turpitude, the contractual agreement will not be executed or, if the contractual agreement has already been initiated, it will be terminated.

Miami-Dade County Public Schools
giving our students the world

FM-4859 Rev. (02-01)



Vendor #: _____

M/WBE CERTIFICATION APPLICATION

(Please Print/Type)

[illegible]

E-Mail Address

Business street address

Business mailing address

2. **LEGAL STRUCTURE:** (Check one and indicate the date the business was established)

() Sole proprietor _____
Date

() Joint Venture _____
Date

() Partnership _____
Date

() Corporation _____
Non-profit Date

() For Profit Corporation _____
Date

3. **CERTIFICATIONS:** Indicate if this business shares common officers, owners, directors or management personnel with another business that has received, been denied, or had its certification revoked as an MBE/DBE/WBE or SBA 8(a) Certified Contractor. Indicate the name of the certifying authority, as well as the date and type of determination (certification/denial/revocation).

<u>Agency Name</u>	<u>Determination</u>	<u>Date</u>

4. **OWNERSHIP:**

- a. Identify the proprietor, each partner, or stockholder by name, as well as his/her citizenship (c) or (r) residency status, gender, ethnic group, and percentage of ownership.

<u>Name</u>	<u>Owner/ shareholder</u>	<u>Resident or U.S. Citizen</u>	<u>Gender</u>	<u>Ethnicity</u>	<u>% Owned</u>	<u>Years Owned</u>

- b. If the business is a corporation, please indicate the following:

1. The number of shares authorized: _____
2. The number shares issued: _____
3. Are there any stock option agreements? Yes _____ No _____
If yes, please provide a copy of each agreement.

5. **OPERATIONAL CONTROL:** Provide the name, title, race/ethnicity, and gender of each individual (including owners and non-owners) with the primary responsibility for the following:

	<u>Name and title</u>	<u>Race/ethnicity/ gender</u>
a. Check signing	_____	_____
	_____	_____

	<u>Name and title</u>	<u>Race/ethnicity/ gender</u>
b. Payroll signing	_____	_____
	_____	_____
c. Signing, or guaranteeing loans	_____	_____
	_____	_____
d. Acquiring lines of credit	_____	_____
	_____	_____
e. Acquiring surety bonding and insurance	_____	_____
	_____	_____
f. Purchasing major equipment/services	_____	_____
	_____	_____
g. Signing contracts/change orders/payment requisitions	_____	_____
	_____	_____
h. Estimating	_____	_____
	_____	_____
i. Qualifying the company for professional/trade license(s)	_____	_____
	_____	_____
j. Marketing/sales	_____	_____
	_____	_____
k. Hiring and firing managerial employees	_____	_____
	_____	_____
l. Hiring and firing non-management employees	_____	_____
	_____	_____
m. Supervising field/ operations	_____	_____
	_____	_____
n. Supervising office personnel	_____	_____
	_____	_____

6. **PERSONNEL:** Identify the number of individuals, including owners, that are currently employed by the business in the following areas:

Please use the following to classify women/minority persons: AM-African American male, AF-African American female, HM-Hispanic male, HF-Hispanic female, WM-Non Hispanic White male, WF-Non Hispanic White female.

	Total Number of Employees	AM	AF	HM	HF	WM	WF
a. Management	_____						
b. Administrative/clerical	_____						
c. Professional/technical	_____						
d. Craftsperson/laborers	_____						

e. Provide a copy of the business affirmative action statement, if one is available.

7. **BUSINESS RELATIONSHIPS:** Provide the requested information for each of the following:

a. Bonding Company: _____
 Address: _____
 Agent name: _____ Phone number: (____) ____ - ____
 Single Contract Limit: _____ Aggregate Limit: _____

b. Bank(s) Name(s): _____
 Branch: _____
 Contact person: _____ Phone number: (____) ____ - ____
 Credit limit: _____

c. Identify the company's/creditors including banks and the amount of money owed to:

<u>Creditor</u>	<u>Loan Guarantor(s)</u>	<u>Address & telephone</u>	<u>Loan Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

d. Insurance company: _____
 Type of insurance: _____ Insurance limits: _____

e. List the business' three largest contracts or jobs.

<u>Contract/job type</u>	<u>Contact person</u>	<u>Telephone number</u>	<u>Contract amount</u>	<u>Bonded (Yes/No)</u>
_____	_____	() - _____	_____	_____
_____	_____	() - _____	_____	_____
_____	_____	() - _____	_____	_____

8. EQUIPMENT: List the type and value of major equipment that is owned (O) or leased (L) by the business.

<u>Equipment</u>	<u>O/L</u>	<u>Value (\$ amount)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. **M/WBE JOINT VENTURE** - Joint ventures must provide a copy of the joint venture agreement.

M/WBE CERTIFICATION APPLICATION

AFFIDAVIT

STATE OF _____ :
COUNTY OF _____ :SS

I hereby declare and affirm that I am the _____ (Title)
of: _____ (Firm)

That I am duly authorized to execute the foregoing M/WBE Certification Application, and that the contents of said documents are complete, true and correct to the best of my knowledge and belief. I hereby certify that the documents include all material information necessary to identify the true and lawful owners of the subject business enterprise. Further, the undersigned is notified of their responsibility to submit an updated Minority/Woman Business Enterprise Certification Application whenever a change occurs in ownership, management or control of the company. Any M/WBE applicant, certified M/WBE principal(s) and all related parties, who misrepresents the status of any concern as an M/WBE, or is a party to such misrepresentation to obtain business or contracts with the School Board under the Business Development and Assistance Program, **will be suspended from doing business with the School Board for fourteen (14) months.**

(Corporate Seal), if appropriate

Minority/Woman Owner's Signature

On this _____ day of _____, 20 ____, personally appeared before me, the undersigned officer authorized to administer oaths: _____
known to be the person described in the foregoing affidavit, who acknowledged that he/she executed the same in the capacity stated and for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Notary Public

My Commission Expires: _____
SEAL

M/WBE
Certification Check List

Please attach copies, not originals, of all applicable items. Incomplete applications cannot be processed, and failure to submit the documents will delay or result in termination of the application process.

Please check if documents are attached:

1. ☐ M/WBE certifications from other public agencies.
2. ☐ M/WBE Certification Application Affidavit (Page 6 of Application).
3. ☐ Miami-Dade County Public Schools Vendor Application.
4. ☐ Lease/purchase agreement for the business' facilities.
5. ☐ Current professional/business license(s).
6. ☐ Proof of citizenship or permanent resident status.
7. ☐ Resumes for owners and key personnel.
8. ☐ Lease/purchase agreements for major business equipment.
9. ☐ Most current application for bonding, if applicable.
10. ☐ Management agreement(s).
11. ☐ Loan agreement(s) or promissory note(s).
12. ☐ Birth certificate, drivers license, passport or any other document which substantiates the ethnicity/race/gender of owners, officers and directors.

***If any of the aforementioned documents are not available, please provide a written notarized statement that information is not available.**

13. Sole Proprietor - Submit all of the above items, as applicable and the following:

- ☐ U.S. IRS 1040-C Schedule.
- ☐ Fictitious name affidavit, if applicable.

14. Partnerships - Submit all of the above items, and the following:

- ☐ Partnership agreement(s).
- ☐ U.S. IRS 1065, with schedules.
- ☐ Profit sharing agreements.

15. Corporations - Submit all of the above items, and the following:

- ☐ Articles of Incorporation, with amendments.
- ☐ By-Laws, with amendments.
- ☐ The most current U.S. IRS Corporate Tax Return 11 20 or 1 120s, with all schedules.
- ☐ All issued and canceled stock certificates (front & back).
- ☐ Minutes of the first shareholders' meeting.
- ☐ Minutes of the first board of directors' meeting.
- ☐ Minutes of meetings at which the current board of directors and officers were elected or appointed.
- ☐ Stock transfer ledger.
- ☐ Most current annual report filed with the Secretary of State.
- ☐ Profit sharing agreement(s).
- ☐ Agreements affecting management, control or rights of any stockholder(s).

16. ☐ Joint venture agreement(s).

17. ☐ Certificate(s) of insurance.

18. ☐ Sub-contractual agreement(s).

NOTE: If after filing this application, there is any significant change in the information submitted herein, you must inform the Division of Business Development and Assistance of the change, or the company may be denied certification.

Certified companies must inform the Division of Business Development and Assistance of any changes in the information contained herein, which formed the basis of certification. Failure to do so may result in denial , revocation or suspension of certification.

COMPLETE APPLICATION, INCLUDING VENDOR APPLICATION AND CATEGORY OF GOODS AND SERVICES LIST, SHOULD BE RETURNED TO: MIAMI-DADE COUNTY PUBLIC SCHOOLS
DIVISION OF BUSINESS DEVELOPMENT AND ASSISTANCE
1450 N.E. 2ND AVENUE, ROOM 456
MIAMI, FL 33132

DEFINITION OF MINORITY/WOMEN BUSINESS ENTERPRISES

- (1) "Minority/Women Business Enterprises" means any legal entity, which is organized to engage in commercial transactions and which is at least fifty-one (51) percent owned and controlled by a minority person or persons.
- (2) "Minority person" means a person who is a citizen or lawful permanent resident of the United States, and who is:
 - (a) An African American, a person having origins in any of the Black racial groups of Africa;
 - (b) An Hispanic, a person of Spanish or Portuguese culture including, but not limited to, persons with origins in Mexico, South America, Central America, or the Caribbean Islands, regardless of race, or
 - (c) A Woman

WARNING

- (3) IT IS UNLAWFUL FOR ANY INDIVIDUAL TO FALSELY REPRESENT ANY ENTITY, AS A MINORITY/WOMEN BUSINESS ENTERPRISE, FOR THE PURPOSES OF QUALIFYING FOR CERTIFICATION UNDER A PROGRAM WHICH, IN COMPLIANCE WITH FEDERAL LAW, IS DESIGNED TO ASSIST MINORITY/WOMEN BUSINESS ENTERPRISES IN THE RECEIPT OF CONTRACTS FOR THE PROVISION OF GOODS OR SERVICES. ANY PERSON WHO VIOLATES THIS SECTION IS GUILTY OF A FELONY OF THE SECOND DEGREE, PUNISHABLE AS PROVIDED IN S. 775.082 OR S. 775.084.

(102891)