Best Start LA
(Formerly Known as the Prenatal Through Three Focus Area)
Welcome, Baby! Program RFQ
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I. TIMELINE

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<tr>
<td>RFQ Release</td>
<td>September 12, 2008</td>
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<tr>
<td>Information Meeting</td>
<td>October 1, 2008 from 1:00 to 3:00 pm</td>
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<td>Deadline for Submitting Questions Regarding RFQ</td>
<td>October 8, 2008</td>
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<td>Statement of Qualifications Due to First 5 LA</td>
<td>October 24, 2008</td>
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<td>Interviews and/or Site Visit</td>
<td>November 10-21, 2008</td>
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<td>Notify Selected Agency of Final Decisions</td>
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<td>Contract Negotiations Begin</td>
<td>December 1, 2008</td>
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<td>Contract Signed</td>
<td>February 28, 2009</td>
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<td>Work Commences</td>
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All questions and requests for additional information regarding this RFP must be received in writing by First 5 LA on **Wednesday, October 8, 2008**. First 5 LA reserves the sole right to determine the timing and content of the responses to all questions and requests for additional information.

Questions and information requests can be submitted to:

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1 Note: While it is First 5 LA’s desire to execute the contract on, March 1, 2009, all dates are subject to change at First 5 LA’s sole discretion.
II. BACKGROUND

A. First 5 LA

In 1998, California voters passed Proposition 10, which levied a 50-cent per pack tax on all tobacco products. The resulting tax revenues were earmarked for the creation of a comprehensive system of information and services to advance early childhood development and school readiness within each county in California. In Los Angeles County, First 5 LA was formed as a public entity to develop and oversee various early childhood initiatives and to administer and manage the funding from Proposition 10 (http://www.first5la.org/).

To address the needs of underserved communities, the First 5 LA’s Commission adopted the next Five Strategic Plan (FY 2004-2009), focusing on the goals of Early Learning, Health and Safety. First 5 LA’s mission, from July 1, 2004 until June 30, 2009, is to make significant and measurable progress towards our vision by increasing the number of children from the prenatal stage through age five who are physically and emotionally Healthy, Safe and Ready to Learn.

B. Best Start LA Overview

The purpose and goal of Best Start LA is to increase the number of children who achieve appropriate social, emotional, cognitive, language, physical and motor developmental milestones to the best of their potential. Further, the First 5 LA Commission recognizes that addressing the developmental potential of young children must be done in the context of the multiple environments that affect their development: (1) Pregnancy; (2) Parent/Caretaker; (3) Family; (4) Neighborhoods and Communities.

Best Start LA is innovative in its focus on integrating family-, community- and organizational-strengthening strategies with the flexibility required to be successful in diverse communities found within Los Angeles County. Best Start LA is designed to integrate existing First 5 LA investments and to inform future investments using the best available evidence of what works as a key criterion. The long-term vision is a Best Start LA model that is sustainable and scalable for all communities in the county.

Through Best Start LA, First 5 LA is launching a broad based partnership with families, community organizations, government agencies, funders, elected public officials, civic organizations and neighborhood associations who share our commitment to create “baby and toddler friendly” neighborhoods and communities. Best Start LA communities will positively contribute to the well being of its members by emphasizing the role communities can and will play in strengthening and linking existing community, organizational, and family assets and in developing new assets to achieve Best Start LA outcomes.

First 5 LA recognizes that long-term change envisioned by Best Start LA is most commonly developed over a period of time. Members of a Best Start LA community will learn to trust each other, share ideas, and work cooperatively toward common
goals and outcomes. Trust and mutual respect will develop by identifying the existing strengths and resources of a community and collaboratively building on those assets successfully. As people pool their talent, time, and resources to address tangible issues underlying community needs, they will form and strengthen the foundation for a community partnership firmly grounded in the principle of cooperation among diverse groups and individuals. Formalizing this structural foundation through the concept of a “Best Start LA community” will provide stability, continuity and capacity for community participants and organizations to sustain their efforts over time and achieve desired results. All Best Start LA activities funded by First 5 LA will support First 5 LA’s 2004-2009 strategic plan efforts and will continue into the next strategic planning period.

**Best Start LA Outcomes**

Because Best Start LA is a comprehensive place-based investment strategy, each component must work together to positively affect child, family, and community level outcomes. The following outcomes apply to all demonstration communities selected to participate in Best Start LA and demonstrate how all three strategies of Family Engagement, Community Mobilization and Place Based Activities will collectively result in the achievement of the outcomes:

- Strengthened ability of families to understand their child’s cues and actively address their child’s health, development, needs, and uniqueness
- Increased ability and efforts of families to foster the developmental function of their children so that they are ready for school
- Strengthened attachment and bonding between members of families and children
- Strengthened personal and social relationships within and between families
- Community resources will meet the needs of the community so that their usage is increased
- Strengthened local community mobilization and advocacy
- Improvements to home and community built environments to support optimal child development
- Developed/improved policies that impact the Best Start LA population
- Increased capacity to meet the needs of families through improved workforce competencies in infant and toddler issues in three sectors (health, early care and education, mental health/social services)
- Improvement in information and technology systems that support the common use of data and information for family access and support, community planning and organizational efficiency

**Implementation and Integration of Best Start LA Components**

To realize the vision of this investment, the First 5 LA Commission is implementing a series of building blocks in five Best Start LA demonstration communities to support three major strategies:

- Family Engagement (referred to as “Welcome, Baby!)
- Community Mobilizing, and
- Place-Based Activities.
These three strategies form the foundation for all activities in the five Best Start LA demonstration communities.

The building blocks which support and enhance the development and implementation of the three strategies include: Data Infrastructure, Volunteer, Leadership and Organization Development, Sustainability: Leveraging and Partnerships, Building Public and Political Will, Workforce Development, and Training and Technical Assistance. The Commission recognizes that the opportunity to move all of its identified building blocks forward may not occur simultaneously. The building blocks pertinent to this RFQ include Workforce Development (WFD), Sustainability and Data.

Applicants to this Welcome, Baby! RFQ will be expected to coordinate with staff and strategic partners on the supporting building blocks, and coordinate with partners in the Best Start LA demonstration community that support the two other major strategies, Community Based Action Research and Place-Based Activities. The strategies and pertinent building blocks are described, as follows:

- **Best Start LA Demonstration Communities.** In order to fully develop and illustrate the Best Start LA model in diverse settings with unique assets and needs, the Commission will invest in five demonstration communities. Each community will launch with a lead facilitator or entity that will be responsible for convening and collaborating with all partners necessary to implement all strategies within the model, including the place-based and community mobilizing strategies. The first of the five demonstration communities is referred to as “the pilot.” The pilot will play a unique role in completing initial testing and refinement of the three key strategies of family engagement, community mobilizing, and place-based activities for Best Start LA and will assist First 5 LA in developing lessons learned from which the other four demonstration communities will benefit. Applicants to this statement of qualifications will be expected to coordinate with partners participating in the pilot by making sure that families are connected to the activities and supports existing in their Best Start LA demonstration community.

- **Community Based Action Research (CBAR).** First 5 LA will provide a CBAR contractor to support communities in the implementation of a community planning process that builds knowledge a community creates, owns and uses to transform everyday knowledge into social capital for social change. The CBAR process builds an “inquiry” culture that is imbedded in existing patterns of interaction. The CBAR contractor’s primary tasks will include engaging all relevant agencies, key champions, informal organizations, and community members in the CBAR process to define local issues and problems and define what CBAR participants want; develop questions relevant to the issues and visions identified; gather and analyze relevant data; and prepare recommendations for the Best Start LA Partnership. Applicants to this statement of qualifications will be expected to be available to the CBAR contractor during this process and support them in their tasks as needed.
• **Place-Based Activities.** Along with an early intervention service provider network which coordinates and links neighborhood based services and supports with families, activities for families will be identified or developed within their communities, for example places designed for playing, learning and coming together, family education and supportive services, resource centers, information and guidance on developmental screening, building social connections, and an interactive “Baby Registry”. Applicants to this statement of qualifications will be expected to connect families living in the demonstration community to these placed-based activities.

  o **Family Place Libraries (FPL).** FPL is one example of a place-based activity that First 5 LA will support through the Best Start LA process. FPL is a national program intended to transform libraries into community hubs for healthy child and family development, parent and community involvement, and lifelong learning beginning at birth. FPL aligns closely with Best Start LA’s identification of place-based strategies as well as outcomes at both the family and organization-level. FPL was identified as a scalable model and sustainable investment that has strong linkages with the goals and strategies of Best Start LA, including the development of a welcoming, non-stigmatized environment for families with infants and very young children. Libraries existing within the five demonstration communities will initially be targeted for FPL implementation. One to two libraries within each of the five Best Start LA demonstration communities may be available to select as FPL locations. An additional ten libraries in non-demonstration communities will also be selected to provide a comparison between communities with more and less intensive community networks. Applicants to this statement of qualifications will be expected to connect families living in the demonstration community to the activities supported by FPL.

Supporting building blocks include:

• **Workforce Development (WFD).** This investment will support and/or establish career pathways for the professions associated with Best Start LA demonstration community implementation, as well as increasing partnerships with and training of those professions that work with pregnant women, infants and toddlers in order to provide a foundation which supports countywide spread of the vision. WFD is a critical element in the scalability of Best Start LA countywide. As the work associated with WFD unfolds, it may be expected that applicants to this statement of qualification will participate in some of the training modules developed for professions engaging families at this critical period of time.

• **Sustainability.** In September 2007 the Board approved a Sustainability RFP, which is being released in September 2008, with the overarching goal of identifying, prioritizing and implementing strategies that will ensure long-term solutions for improving the environments in which young children and
their families live. The Best Start LA program plan assumes a shared interest by the Commission and the greater LA County community in reaching this goal by creating lasting improvements in the systems of care and support for pregnant women, very young children and their families.

Both the CBAR process and resulting community mobilization efforts will inform the discussions among First 5 LA staff, community members and the Sustainability contractor and the resulting recommended. Examples of potential long-term solutions include improving administrative and financial management systems; impacting policies around reimbursement and billing practices; changing reporting requirements for agencies funded by multiple sources; drawing down governmental funds; diversification of funding; and increasing support from policymakers, the public and other stakeholders. Additional long-term opportunities include expanding and/or building upon current First 5 LA involvement in other activities throughout the county including Prevention and Early Intervention (PEI), Mental Health Services Act (MHSA), Children’s Health Initiative (CHI), Public/Private Funders Partnership for Infants and Toddlers, and Medi-cal Administrative Activities and Targeted Case Management (MAA-TCM).

Applicants to this statement of qualifications will be expected to be available to the Sustainability contractor and assist this contractor in their work as needed.

- **Data** First 5 LA will invest in a comprehensive data system that will have the capacity to track child- and family-level data countywide, as well integrate with other large data systems, including e-health record data systems. The data collected by this system will play key roles in planning services, supports and changes to built environments for families, evaluating efforts to promote family health and well-being and assisting with portability of records for use by families. Efforts to develop this system will include a data needs assessment, a feasibility study and design of the infrastructure for the system, including a participation tracking component, child-centric reporting, system interface, and data storage and exchange environments. Building of this comprehensive data system is estimated to begin in Fall 2008.

A significant element of the data system to be developed in the pilot is a component that will be used to track family-level data collected through the Welcome, Baby! and Place-Based Activities. This component will build on existing systems being utilized by First 5 LA and its grantees. System design will directly contribute to design of the larger data system. Applicants to this statement of qualifications will be expected to utilize this data system to track families as they progress through Welcome, Baby!
**Best Start LA Geographic Area**

The first of the Best Start LA Demonstration Communities will be known as the “Pilot Community.” It will encompass portions of what are commonly referred to as Pico-Union, Korea Town, and South Los Angeles. Major street boundaries include Olympic to the North, Jefferson to the South, San Pedro to the East and Normandie to the West. This area was selected because this community has a commitment to service integration and is supported by Los Angeles County’s Centralized Case Management effort.

By building upon the existing work in this geographic area, Best Start LA can be coordinated with a safety net for those families that choose to participate in Best Start LA. The Commission will also be able to leverage the coordination, collaboration, and relationships already taking place in a community.

Best Start LA is intended to enhance informal supports within communities and transform environments where families reside. In order to engage all families and strengthen their bond to community networks and these informal supports, Best Start LA, particularly the Welcome, Baby! strategy, needs to ensure that concerns families have about their child’s health and well-being will be addressed and their questions answered. Best Start LA is a strengths-based model that relies on the capacity of communities and families. Ensuring families have a place where their emergent matters can be addressed will improve the ability of the Best Start LA’s investment to achieve its outcomes.

**C. Welcome, Baby! Pilot Program**

The Welcome, Baby! program is a universal home visitation program that includes visits with the family by a nurse and a New Parent Coach at seven key points in time; twice prenatally, once at the hospital, and four times in the home. The purpose of the Welcome, Baby! program is to provide some primary health prevention and parent education information, and to invite and welcome families into an array of services and support elements developed in their community. In that respect, it differs from some of the more nationally recognized programs such as the Nurse-Family Partnership (NFP), Parents as Teachers (PAT), Home Instruction for Parents of Preschool Youngsters (HIPPY), and Healthy Families America (HFA), which are dedicated to certain preventive outcomes and can be more intensive in duration and dosage. The Welcome, Baby! service, as envisioned by the Commission, is more similar to universal family programs such as Welcome Home Baby in San Diego County, Welcome Every Baby in Santa Barbara County, and the U.K.’s Sure Start program.

Welcome, Baby! does not focus specifically on issues such as child abuse prevention, mental health issues, or follow-up for premature births. It is intended to be offered universally i.e. to all families and not just high risk families, and it is voluntary in that families may decline to participate in the Welcome, Baby! program. While some researchers are critical of more universal home visitation programs because they are seen as directing often limited resources to children and families who are less likely
to be in need of intensive services\textsuperscript{2}, studies have shown that every child can benefit from early intervention programs that include a parental support program whose goals are to promote responsive, sensitive, and nurturing interactions between children and their care givers. In addition, First 5 LA expects that by making the services of the Welcome, Baby! program universally accessible, the stigma associated with intensive interventions will also be reduced and therefore the program's effectiveness in LA County can improve.\textsuperscript{3} It is expected that Welcome, Baby! will add to the continuum of home visitation services available in L. A. County by linking families to intensive services – such as Nurse Family Partnership – if needed.

During the visits, a member of the Welcome, Baby! staff will conduct the following activities with families:

- Work with families to ensure the health, safety, and security of the new mother and baby
- Distribute and review with families the Kit for New Parents
- Observe and evaluate feeding and provide consultation on breastfeeding
- Observe parent-infant attachment and infant behavior
- Assist families in establishing a medical home, following-up on well-child visits, and identifying health insurance coverage, if necessary
- Refer families to intensive home visitation services, if necessary
- Educate parents about the following:
  - The critical nature of this developmental period of life
  - The benefit of a loving bond between parents and a child in building confidence and success
  - The importance of parents' health and well-being in securing the well-being of the child
- Screen mothers for post-partum depression and refer them to services, if necessary
- Perform a high quality screen in partnership with parents, such as the Ages and Stages Questionnaire (ASQ), to assess child development
- Refer families to their local Best Start LA community activities

A number of considerations were made in designing the appropriate number of visits that are to occur during this approach. Prenatal visits are included in Welcome, Baby! to ensure that relationships are built early on with parents and to provide educational messages and support to parents at a time when they are more receptive and open to receiving this information. Additionally, because over 99% of mothers in LA County deliver their babies at birthing hospitals, a visit with families at the hospital following delivery was included in this service approach to ensure that the greatest number of families receive an invitation to a home visit, are exposed to


supportive resources available to them in their community, and learn that they provide the most important developmental environment for their new baby. This hospital visit will be minimally intrusive to new families as it is understood how important this time is for a mother and baby to bond and how overwhelmed with information parents already are during their short time in the hospital. Thus, the hospital visit is intended to be an opportunity to build on relationships that were built with mothers during the prenatal visits and make an invitation to the home visits. Four home visits are included to provide families with continued access to community resources with opportunities to receive on-going developmental information and referrals for other interventions when it is most beneficial.

Welcome, Baby! Outcomes
The following is a list of outcomes that are expected to occur after home visitors have engaged families through Welcome, Baby! Measuring and tracking data at each family engagement point allows direct evaluation of these outcomes. The outcomes reflect the improvements the home visitation strategy is expected to make in the lives of the families and children they serve. The outcomes include:

- Increased breastfeeding
  - Increased initiation, duration and exclusivity of breastfeeding
  - Improved parent knowledge of nutrition
- Families receive appropriate health and developmental care
  - Increased numbers of families with a medical home
  - Higher immunization rates
  - Higher rates of health insurance coverage
  - Increased number of mothers screened for post-partum depression
  - Increased numbers of parents administering high quality developmental screens
- Families experience improved connections to supports, resources, and services in their community, resulting in more referrals and increased utilization of existing resources for families with unmet basic needs; drug, alcohol, or domestic violence exposure; social isolation; post-partum depression; or risk factors for developmental delays.

Welcome, Baby! Budget
Up to $9,388,258 has been allocated to fund Welcome, Baby! over a five year period. The Welcome, Baby! lead agency funding will be provided through a competitive RFQ process. Programs submitting a statement of qualifications for funding to implement Welcome, Baby! can request up to $9,388,258 over a five year period.

III. REQUIRED PROGRAM COMPONENTS
The funded applicant must successfully implement all of the required program components listed below. The activities described are not intended to be a complete list as there may be other requirements and deliverables to be determined by First 5 LA.
A. Target Population

Welcome, Baby! is a universal home visitation program that will begin by engaging families prenatally and will also include a visit at the hospital following delivery. All families delivering at a hospital serving a significant number of families within the Best Start LA demonstration community geographic area will be eligible to receive the hospital and the four home visits regardless of economic need or geo proximity of their home. Prenatal visits will be limited to those families that receive prenatal care from a prenatal provider who serves a significant number of mothers delivering at the hospital associated with the Best Start LA pilot. It is estimated that up to 5,000 babies are born annually in this geographic area, so applicants to this RFQ must demonstrate their ability to service a population this size. The Commission’s objective is to enroll at least 80% of these families once Welcome, Baby! is fully implemented.

First 5 LA is looking for applicants that have demonstrated experience working with prenatal providers servicing families within the stated geographic area. Moreover, First 5 LA expects that applicants must have the capacity to establish working relationships with hospitals servicing the geographic area as the applicant will need to gain access to these patients in order to provide the home visits. If a hospital chooses to apply to this RFQ, then that hospital will be expected to demonstrate a capacity to work and build relationships with community-based organizations servicing the Best Start LA demonstration community geographic area.

B. Program Activities

This section provides a description of the engagement points with families and an overview of the activities that are expected to occur during the visits.

Prenatal Visit One: (20-26 weeks)
The prenatal period is an optimal time to connect with expectant parents and engage families in a receptive, calm, supportive environment. Research shows that expectant parents are highly motivated to plan and prepare for the arrival of their newborn. During this first prenatal visits, Welcome, Baby! staff will provide expectant parents with the Kit for New Parents, assess their strengths and needs, and outline areas that will support parents seeking information and community-based resources.

This prenatal visit can occur in the prenatal clinical setting. It is a time for the Welcome, Baby! staff to provide encouragement to expectant parents, recognize and build upon families’ strengths, begin to build a trusting relationship with families, and make connections that are culturally relevant.

The encounter is expected to include:

- An introduction to the Welcome, Baby! program
- An introduction of First 5 California’s Kit for New Parents
- Breastfeeding education and resources for breastfeeding classes
- An overview of the PHQ-2 questionnaire for depression screening
- Receipt of a consent for services, including:
  - Enrollment in the Welcome, Baby! program
Prenatal visits will build on services currently in place within the prenatal setting. A review of the Comprehensive Perinatal Service Program (CPSP) questionnaire in the prenatal care chart, which is completed during the first prenatal visit, can help Welcome, Baby! staff identify other intensive intervention programs families may be eligible to participate in (e.g. Nurse Family Partnership, Early Head Start, or Black Infant Health).

**Prenatal Visit Two: (32-36 weeks)**
This engagement point provides the opportunity to engage the majority of families in preparation for their newborn. For clients already enrolled, this second prenatal visit provides the opportunity to reinforce breastfeeding and child birth preparation and education, review the signs and symptoms of preterm labor, review the Kit for New Parents, screen for depression, and introduce some home safety planning. For those not enrolled during the first prenatal visit, this visit will provide parents another opportunity to enroll in Welcome, Baby! and receive the information discussed above. This visit will provide parents with the time needed to address parent questions about preparing for their newborn and enrolling their newborn for insurance. During this visit, parents will be reminded to identify and interview a pediatrician for their baby if they had not done so and will be assisted in developing an action plan for the first weeks following birth.

**Hospital Visit: (at the hospital following delivery)**
Enrollment for the majority of families to be serviced by Welcome, Baby! will occur during this engagement point. It is expected that an onsite hospital liaison trained to be part of the Welcome, Baby! program and in lactation education will provide an introduction to the Welcome, Baby! program and describe the opportunities and services. This encounter may be limited in scope due to the limited amount of time families are hospitalized for following delivery. New material is not expected to be introduced during this visit because parents are usually exhausted and overwhelmed after delivery. This encounter is expected to briefly introduce or reinforce the following:

- Resources and information in the Kit for New Parents
  - Reassurance and encouragement with lactation initiation
  - Parent-infant interaction
  - Referrals for high-risk intervention, if needed
  - Information on insurance enrollment for the newborn
  - Information on in home and provider-based post-partum follow-up for mother and infant

**Home Visit One: (within 72 hours post-hospital discharge by Nurse)**
This visit will be conducted with the family within 72 hours post-discharge and can be offered to both mothers who are discharged with their newborn as well as to mothers whose newborn is still hospitalized. This is a critical time for both mother and baby care must be provided in a compassionate, non-judgmental, culturally competent manner. The time spent with a first-time parent may be up to two hours,
While the time spent with families that have other children may be about one hour, a registered nurse is expected to complete this crucial visit with families.

During this visit, the Welcome, Baby! nurse will complete the following:

- Observe and evaluate breastfeeding, provide consultation and encouragement
- Work with the family to ensure safety and security of the new mother and infant
- Provide encouragement and reassurance to family members as they assume their new roles of parent
- Discuss infant behavioral cues, sleep position, safety, and parents concerns
- Provide a PHQ-2 screen for depression
- Assess the infant’s general health, hydration, and degree of jaundice
- Observe parent-infant interaction and infant behavior
- Observe or discuss parents’ interaction with each other since bringing baby home
- Remind parents of scheduling appointments with the baby’s pediatrician
- Remind mother of making the appointment for and the importance of her postpartum visit
- Observe maternal postpartum recovery, resumption of sexual relations, and family planning
- Provide parents with information about additional community-based resources
- If families live in the geographic area of one of Best Start LA’s demonstration communities, connect families to the community resources and supports available in that area

**Telephone Assessment: (2 weeks postpartum)**

This brief telephone assessment will be an opportunity to reconnect with parents post discharge and assess the overall well-being of baby and family. During the call, families will be asked basic questions related to fatigue, nutrition, social supports, and physical recovery. Welcome, Baby! staff will ask about the success of breastfeeding and whether or not the baby received his or her well child visit. This will also be a time when staff can answer any questions the mom may have and make or follow-up on additional referrals to community-based resources.

**Home Visit Two: (4-8 weeks postpartum)**

During this visit, the Welcome, Baby! staff will provide parents with additional information and support as they grow into their new role of parents. It is expected that the home visitation staff engaging families at this time will review the following:

- Mother-child attachment and interaction
- Breastfeeding and nutrition
- Well-child visits and immunization schedules
- Developmental milestones and how to read baby’s cues
- How to use a developmental screening tool like the Ages and Stages Questionnaire
- Home safety tips
• Postpartum depression screening
• Early learning and emerging early literacy skills
• How to access health, developmental, and behavioral resources available in the community

If the family lives in the geographic area of the Best Start LA demonstration community, then Welcome, Baby! staff will also be key in connecting families to the activities and supports available to them in the demonstration community.

**Home Visit Three: (12-16 weeks postpartum)**
This visit will continue to reinforce the messages delivered to parents in earlier meetings, especially in relation to understanding their baby's developmental milestones. It will also be an opportunity to ensure that families have been successfully linked to the services or supports provided during the previous visits.

For those families that live in the geographic area of a Best Start LA demonstration community, this visit will act as another opportunity to connect families to their community.

**Home Visit Four: (9 months postpartum)**
This visit will continue to reinforce the messages delivered to parents in earlier meetings, especially in relation to understanding their baby's developmental milestones. A thorough review of a developmental screen like Ages and Stages will be provided at this time. As was done in Home Visit Three, Welcome, Baby! staff will have an opportunity to ensure that families have been successfully linked to the services or supports provided during the previous visits.

For those families that live in the geographic area of a Best Start LA demonstration community, this visit will be the final opportunity for families to be connected to the community activities offered by Best Start LA.

**C. Welcome, Baby! Staffing**
First 5 LA expects applicants to this statement of qualifications to employ high-quality staff that have experience and are willing to be further trained in engaging and building relationships with families of young children. First 5 LA also expects that this staff will be culturally sensitive and knowledgeable of the community that will be served through Best Start LA and Welcome, Baby!

The following section outlines key personnel that will be involved in providing prenatal, hospital, and home visits to families through Welcome, Baby!. It also outlines important qualifications First 5 LA recommends be considered when employing staff to support Welcome, Baby! Ideal staff for Welcome, Baby! should already possess these skills or have the capacity and willingness to be trained in these areas. These are recommendations, and First 5 LA recognizes that the lead agency selected to implement Welcome, Baby! in the geographic area of the demonstration community will have additional suggestions about the staffing needed or the qualifications and skill-set required. Applicants to this statement of qualifications should identify the optimal staffing plan the agency believes would be
necessary to implement this program as well as the qualifications and skill-set that will be sought by the agency as it recruits Welcome, Baby! staff. First 5 LA recommended staff includes:

- **Welcome, Baby! Staff Supervisor (e.g. a registered Nurse, licensed clinical social worker, or licensed developmental psychologist).** These supervisors will be responsible for day-to-day oversight of Welcome, Baby! staff. They will make sure the team members are properly trained and that they receive reflective supervision. They will also provide overall accountability for the program.
  - Preference should be given to those nurses with special training in community health, i.e., public health nurses.
  - RNs should be either certified lactation educator (CLE) or certified lactation counselor (CLC) at a minimum, but may be certified lactation consultant (CLC) or international board certified lactation consultant (IBCLC/RLC).
  - At least five years experience working in Maternal-Child Health.
  - At least two year administrative experience as a supervisor.
  - Ability to oversee preparation of team members, through training; direct supervision; chart review; and weekly case review.
  - Experience with reflective supervision and continuous assessment of staff skills to identify areas that need special attention.
  - Knowledge of normal fetal, infant, and toddler development; prenatal and child health requirements; and early childhood education best practices.
  - Experience in making home visits to low income families.
  - Knowledgeable about local community resources and able to refer families to appropriate agencies.
  - Experience working with low-income families and families from diverse age, cultural and ethnic backgrounds.
  - Empathy, warmth, and the ability to establish trusting supportive relationships with an ethnically diverse population.
  - Ability to work collaboratively as a member of a multidisciplinary team.
  - Ability to conduct a strength-based family assessment across a broad spectrum of areas using a validated, standardized tool administered in the prescribed manner.
  - Skill in organizing and maintaining complete, accurate records and filing reports in a timely manner.
  - Skill in writing to articulate concepts and ideas in notes and reports.
  - Bilingual preferred, with the ability to communicate in the language(s) represented in the community to be served.
  - Familiarity with the effects of domestic violence and parental alcohol and/or other drug abuse on family health, parenting, and general functioning.
  - Familiarity with the effects of perinatal depression on child development, parenting, and general functioning.
  - Maintain California driver’s license and automobile insurance.
• Maintain California license as registered nurse.

• **Registered Nurses.** RN’s will be responsible for visiting families at that critical first home visit. They will exam the baby and engage with the mother by providing breastfeeding and post-partum support to her. They will also refer families to community-based supports, if needed.
  - Preference should be given to those with special training in community health, i.e., public health nurses.
  - Should be either certified lactation educator (CLE) or certified lactation counselor (CLC) at a minimum, but may be certified lactation consultant (CLC) or international board certified lactation consultant (IBCLC/RLC).
  - At least five years experience working in Maternal-Child Health.
  - Knowledge of normal fetal, infant, and toddler development; prenatal and child health requirements; and early childhood education best practices.
  - Experience in making home visits to low income families.
  - Knowledgeable about local community resources and able to refer families to appropriate agencies.
  - Experience working with low-income families and families from diverse age, cultural and ethnic backgrounds.
  - Empathy, warmth, and the ability to establish trusting supportive relationships with an ethnically diverse population.
  - Ability to work collaboratively as a member of a multidisciplinary team.
  - Ability to conduct a strength-based family assessment across a broad spectrum of areas using a validated, standardized tool administered in the prescribed manner.
  - Skill in organizing and maintaining complete, accurate records and filing reports in a timely manner.
  - Skill in writing to articulate concepts and ideas in notes and reports.
  - Bilingual preferred, with the ability to communicate in the language(s) represented in the community to be served.
  - Familiarity with the effects of domestic violence and parental alcohol and/or other drug abuse on family health, parenting, and general functioning.
  - Familiarity with the effects of perinatal depression on child development, parenting, and general functioning.
  - Maintain professional boundaries with clients.
  - Willing to meet regularly with supervisor to develop a reflective practice and continuously assess their clinical nursing skills and identify areas that need special attention.
  - Maintain California license as registered nurse.

• **Early Childhood Educators/New Parent Coaches.** These New Parent Coaches will visit families prenatally and in the home. If a hospital is selected as the lead agency for Welcome, Baby!, then New Parent Coaches
will also visit families following delivery. New Parent Coaches are responsible for supporting families and providing some primary parent education in the areas of breastfeeding and child development. They should also be able to refer families to community-based supports, if needed.

- Bachelor’s degree preferred in child development, social work, psychology, human development, or a related field.
- Child Development Associate (CDA) certification preferred.
- Should be either certified lactation educator (CLE) or certified lactation counselor (CLC) at a minimum, but may be certified lactation consultant (CLC) or international board certified lactation consultant (IBCLC/RLC).
- Ability to function as a member of an interdisciplinary team.
- Ability to promote bonding and attachment between infant-primary caregiver.
- Ability to assess families across a broad spectrum of areas, recognizing professional boundaries and the need for consultation from other disciplines.
- Experience working with low-income families and families from diverse age, cultural and ethnic backgrounds.
- Empathy, warmth, and the ability to establish ongoing supportive relationships with an ethnically diverse population.
- Knowledgeable about local community resources and able to refer families to appropriate agencies.
- Knowledge of normal fetal, infant, and toddler development; prenatal and child health requirements; and early childhood education best practices.
- Familiarity with the effects of domestic violence and parental alcohol and/or other drug abuse on family health, parenting, and general functioning.
- Familiarity with the effects of perinatal depression on child development, parenting, and general functioning.
- Experience in making home visits to low-income families.
- Skill in organizing and maintaining accurate records.
- Skill in writing to articulate concepts and ideas in notes and reports.
- Bilingual preferred, with the ability to communicate in the language(s) represented in the community to be served.

- **Care Coordinators.** Because Welcome, Baby! is not expected to include intensive case management of families, Care Coordinators would provide limited support to families and New Parent Coaches to ensure families follow through with the referrals they receive.
  - AA degree preferred.
  - Child Development Associate (CDA) certificate preferred.
  - Ability to function as a member of an interdisciplinary team.
  - Ability to promote bonding and attachment between infant-mother.
  - Experience working with low-income families and families from diverse age, cultural and ethnic backgrounds.
- Empathy, warmth, and the ability to establish trusting supportive relationships with an ethnically diverse population.
- Skill in care coordination.
- Skill in organizing and maintaining accurate records.
- Skill in writing to articulate concepts and ideas in notes and reports.
- Bilingual preferred, with the ability to communicate in the language(s) represented in the community to be served.
- Knowledgeable about local community resources and able to refer families to appropriate agencies.

**Hospital Liaisons.** Hospital Liaisons are recommended for those organizations that are interested in applying to this RFQ, but are not hospitals. These Hospital Liaisons would likely be needed to help coordinate the Welcome, Baby! visit in the hospital. They would be based in the hospital, engage families after delivery, inform families about Welcome, Baby!, and enroll these new families into the program. They will then have to inform the Welcome, Baby! lead agency of the new families information so home visits can be scheduled.

- Bachelor’s degree preferred in child development, social work, psychology, human development, or a related field.
- Should be either certified lactation educator (CLE) or certified lactation counselor (CLC) at a minimum, but may be certified lactation consultant (CLC) or international board certified lactation consultant (IBCLC/RLC).
- Child Development Associate (CDA) certification preferred.
- Ability to function as a member of an interdisciplinary team.
- Ability to promote bonding and attachment between infant-mother.
- Experience working with low-income families and families from diverse cultural and ethnic backgrounds.
- Empathy, warmth, and the ability to establish trusting supportive relationships with an ethnically diverse population.
- Knowledgeable about local community resources and able to refer families to appropriate agencies.
- Knowledge of normal fetal, infant, and toddler development; prenatal and child health requirements; and early childhood education best practices.
- Familiarity with the effects of parental alcohol and/or other drug abuse on family health, parenting, and general functioning.
- Familiarity with the effects of domestic violence and parental alcohol and/or other drug abuse on family health, parenting, and general functioning.
- Familiarity with the effects of perinatal depression on child development, parenting, and general functioning.
- Skill in organizing and maintaining accurate records.
- Skill in writing to articulate concepts and ideas in notes and reports.
- Bilingual preferred, with the ability to communicate in the language(s) represented in the community to be served.
Willingness to work a flexible dayshift schedule that includes some Saturdays, Sundays, and holidays.

IV. ELIGIBILITY & REQUIREMENTS

A. Eligibility

Applicants submitting a statement of qualifications to this request will serve as the lead agency within the defined geographic area. The most highly qualified applicants will be invited for an interview with and oral presentation to First 5 LA staff and/or Commissioners. An organization must meet the following requirements in order to be eligible to apply as a lead agency:

1. Agencies can be either non-profit or for-profit agencies, including but not limited to hospitals, neighborhood and community-based agencies or associations, collaboratives, faith-based or civic agencies.
2. Have a demonstrated record of providing services or support to women and children within the geographic area that comprises the Best Start LA demonstration community pilot.
3. Have the capacity to facilitate and manage the delivery of perinatal services as an active member of a community based collaborative.
4. Agencies must participate in one of the collaboratives supported by the First 5 LA’s Healthy Births Initiative
5. Current/Former grantees and/or contractors must be in good standing and in compliance with all aspects of their contract with First 5 LA in order to be eligible to apply for the current Request for Proposals, Request for Qualifications, BIDS and Letters of Intent. COMMISSION may deem an applicant ineligible if it finds in its reasonable discretion, that applicant has done any of the following, including but not limited to: (1) violated any significant terms or conditions of Grant Agreement/Contract; (2) committed any act or omission which negatively reflects on Applicant’s quality, fitness or capacity to perform services listed in RFP/RFQ with COMMISSION or any other public entity, or engaged in a pattern or practice which negatively reflects on the same; (3) committed an act or offense which indicates a lack of business integrity or business dishonesty; or (4) made or submitted a false claim against COMMISSION or any other public entity.
6. Have the capacity to adhere to all requirements set forth in this RFQ.

B. Requirements

1. The success of Welcome, Baby! depends on the organizational capacity of the applicant to deliver expected home visitation services and the applicant’s ability to manage the program. At a minimum, applicants must meet or possess the following requirements:
   - Ability to build upon and integrate with community, city, and County plans, resources, and systems.
   - Past or present experience in providing home visitation program(s), including the recruitment, training and reflective supervision of program staff.
• Ability to maintain program records, monitoring and reporting program progress and results, and conducting program evaluation.
• Ability to comply with the legal requirements of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), particularly as it relates to:
  o The collection of personal information
  o The use and disclosure of information about families who are program clients
  o Have written policies in place to deal with issues such as:
    o Confidentiality
• Ability to share information, particularly with regard to sharing the results of screening and assessment and referring families to other agencies.
• Possess a written policy that outlines the requirements for reporting known or suspected instances of child abuse and neglect as defined by the California Child Abuse and Neglect Reporting Act (“CANRA”, Penal Code sections 11164-11174.4).
• Possess a written policy that outlines the requirements for all health care providers who provide medical services for a physical condition to a patient whom he or she knows or reasonably suspects of suffering from injuries resulting from a firearm or assault or abusive conduct as defined by California’s Domestic Violence and Mandatory Report Law (California Penal Code 11160-11163.2).
• Demonstrate fiscal accountability and program capacity.

2. Welcome, Baby! applicants must possess an internal organizational infrastructure that can support the recruitment, training and development, and on-going supervision of home visitation staff. Additional requirements include:
• Ability to recruit and train culturally and linguistically appropriate and accessible staff for all children and families.
• Strong evidence documenting that staffing pattern and qualifications are appropriate to the services and supports provided by home visitors and to the population to be served.
• Development of a plan for ongoing, thorough assessment of staff development strengths and needs for all service providers (paid and volunteer).
• Ability to provide ongoing, high quality, relevant staff development with active staff participation; using strategies that demonstrate cultural and linguistic competence and support the inclusion of parents and/or children with disabilities.
• Ability to provide their staff with training that covers the following topics:
  • Program goals, objectives, and services
  • The roles and responsibilities of program staff
  • Program reporting and documentation
• Maintaining professional boundaries between clients and home visitors
• Promotion of bonding and attachment
• Early childhood growth and development
• Breastfeeding basics
• Perinatal depression and its impact on child development
• Family dynamics
• Child abuse and neglect and reporting requirements
• Family violence and its impact on children
• Using screening and assessment tools
• Home and infant safety
• Service planning
• Crisis intervention
• Critical elements for engaging families
• Appropriate intervention strategies
• Working with hard-to-reach families
• Accessing relevant community resources

3. Welcome, Baby! applicants must demonstrate a strong involvement and communication with prenatal and postpartum health care providers, community health workers, newborn and infant health care providers, early childhood educators, parenting educators, mental health specialists, and early intervention staff.

4. Welcome, Baby! applicants must demonstrate an ability to improve parenting knowledge and skills by providing parents with information about and referrals to community-based supports that will support parents in learning about child development, nutrition, safety, injury prevention, appropriate discipline, communication, problem solving and other skills they need to help their children reach their full potential.

5. Welcome, Baby! applicants must be able to support families in accessing a network of formal and informal services and supports available in their own communities in order to reduce social isolation and help families build their own support networks.

6. Welcome, Baby! applicants must be able to identify families who are at high risk for violence and abuse and make referrals to appropriate community agencies or programs, e.g. Nurse Family Partnership, to ensure that children are safe and protected from all forms of neglect and abuse, including physical, emotional, psychological, and sexual abuse.

7. Welcome, Baby! lead agency applicants must coordinate and collaborate with other Best Start LA partners selected to participate in the pilot demonstration community project. These partners will be funded at a later date and tasked with coordinating community place-based activities and community mobilization activities within the designated geographic area.
serviced by the Welcome, Baby! agency. Applicants must have the capacity and willingness to work with the Best Start LA pilot demonstration community partners in order to provide referrals and supports to families visited by Welcome, Baby! staff and living in the geographic area services by Best Start LA.

8. Welcome, Baby! applicants must have the capacity to develop a relationship with Los Angeles County’s Centralized Case Management System and its partners, which is also being piloted in the designated geographic area that the Welcome, Baby! agency will service.

9. Welcome, Baby! applicants must have a demonstrated capacity to work collaboratively with a prenatal provider and hospital, which will be selected at a later date, to either conduct or support the prenatal or hospital visits.

10. Welcome, Baby! applicants must agree to work in partnership with First 5 LA and the Los Angeles Best Babies Network (LABBN). Applicants will be required to complete a Memorandum of Understanding with the LABBN (see Appendix C).

11. Welcome, Baby! applicants must maintain an interactive web-based data system and consistently enter client information and data on a regular basis. As such, agencies will be required to have the following technological capabilities in order to support the data system:
   - Hardware: Pentium III processor with 256MB RAM or better
   - Operating System: Windows 2000 or later
   - Internet Connection: Broadband recommended
   - Browser: Internet Explorer 6.0 or later, Mozilla Firefox recommended, JavaScript must be enabled

Please note: whereas applicants are not expected to have the aforementioned capabilities at the time the statement of qualifications is submitted, any agency not in possession of these capabilities must plan to include related costs in their proposed budget.

V. REVIEW PROCESS, CRITERIA & TOOLS

A. Review Process and Criteria
First 5 LA staff will review each statement of qualifications to ensure that threshold criteria (please refer to Section IV: Eligibility) was met to determine if the lead agency is eligible to submit a statement of qualifications for the Welcome, Baby! program.

A review team will review each statement of qualifications to determine its fulfillment of the RFQ requirements. Each statement of qualifications will be assessed based upon the adequacy and thoroughness of the responses to the requirements set forth in this RFQ.
The review process will consist of the review of the RFQ and an interview, which will involve a brief presentation illustrating applicants’ vision and capacity for implementation of the described scope of work.

The following represents selection criteria that will be considered during the review process:

- The demonstrated capacity of agency to coordinate and manage the proposed project.
- The demonstrated experience of the agency to assume the lead role, which includes responsibility for governance, fiscal activities and reporting.
- The demonstrated capacity of the lead agency to work with prenatal, hospital, and community providers.
- The demonstrated collective history of working effectively with the population in the geographic area where the proposed work will occur.
- The demonstrated commitment to improving family and child outcomes.
- The demonstrated commitment to hiring and training quality staff.
- The collective experience of the agency in successfully providing parent education and community-based information to families.
- The collective commitment to working in partnership with First 5 LA; Best Start LA partner agencies in the pilot demonstration community; the LABBN; prenatal, hospital, and community providers servicing families in the designated geographic area; and Los Angeles County’s Centralized Case Management partners working in the geographic area.
- The collective ability and commitment to utilizing and maintaining an interactive web-based data system.
- The appropriateness of funds requested based on the project activities.
- The design of the project, including management structure.

Statements of qualifications with omissions of any required documentation are subject to disqualification.

The review team will consist of a multi-departmental team of First 5 LA staff as well as external reviewers. All decisions of First 5 LA are final. First 5 LA will provide applicants that are not selected with general feedback. An appeal process is not available.

B. Review Tools

The application review tools used by the review committee include:

- Level 1 Review Tool – A checklist noting minimum documentation submitted as required.
- Level 2 Review Tool – Statement of Qualifications Review regarding the Applicant’s Capacity and Qualifications (Experience, Knowledge and Expertise, and Skills); and the proposed activities, timeline and staffing to meet the project requirements and deliverables.
• Level 3 Review Tool – Financial Review to assess financial soundness of the agency, identify any serious financial concerns, and determine if all budgeted items requested are in compliance with F5LA policies.

VI. STATEMENT OF QUALIFICATIONS CONTENT

A. Statement of Qualifications

Statement of qualifications must contain all of the following items in order to qualify for review. Content is not to exceed ten (10) pages (excluding the cover letter, reference forms, and budget worksheets).

1. Cover Letter (two page maximum): The letter must include the organization’s name, address, telephone, fax, and e-mail address; the primary contact person’s name, title, and address, telephone, fax, e-mail address (if different from organization’s information), and a summary of the project. All members of an applicant team must list the same information for all participating agencies. The letter must be written on the agency’s letterhead, signed by the organization president, chief executive officer or director, or other authorized signatory formally designated by the agency. All participating agencies in a collaborative must have an authorized signatory’s signature on the cover letter.

2. Description of Organization’s Qualifications: Applicant must clearly illustrate experience, knowledge, and skills specified in Section IV (see Eligibility and Requirements). Include examples of relevant projects completed.

3. Key Personnel: List proposed key personnel who will actively participate in this contract and their relevant skills and experience.

4. References: Using the attached First 5 LA Client Reference Form, provide a total of three (3) letters of references from other relevant projects. Each completed reference form must not exceed two pages.

B. Description of Project

Describe the work processes (or methodology) your agency will utilize to accomplish First 5 LA’s Project Requirements and Deliverables described in this RFQ. Content of this section is not to exceed 25 pages. Provide a comprehensive detailed list of the objectives, deliverables, and sequence of tasks and/or activities to be completed in a Program timeline within Appendix E: Scope of Work. Include all activities listed in this RFQ. Describe how the agency involved in Welcome, Baby! will provide universal, voluntary prenatal, hospital, and home visitation services to all women in the designated geographic area. Describe the agency’s experience in promoting the following:

• Nurturing and responsive parent-child relationships and interactions
• Breastfeeding education and support
• Perinatal depression screening
• Medical visits for mother and baby
• Access to community resources
Give details of the strategies that will be employed to outreach to women at these various stages and how they will be integrated into an overall approach that will provide continuous service to families. Describe how the agency will identify and coordinate community-based supports for families, the referral mechanisms that will be used to link families to these supports, and the methods the agency will use to ensure that families utilize these referrals. Describe how the Welcome, Baby! staff will be hired and trained. Describe how the agency will work with and coordinate visitation services with the prenatal and hospital providers selected for this project. Describe how the agency will coordinate referrals and supports to the Best Start LA demonstration community partner. Provide an organization and coordination of services flow chart and/or other visual that demonstrates the proposed coordination.

Prepare the *Scope of Work* by fiscal years, one for each year of the five year funding cycle. Because Year One of the project overlaps two fiscal cycles, please prepare a *Scope of Work* for each of the following periods:

1. March 1 – June 30, 2009,
2. July 1, 2009 to June 30, 2010,
3. July 1, 2010 to June 30, 2011,
5. July 1, 2012 to June 30, 2013, and

Organize the *Scope of Work* to address all of the areas outlined in Section III, Required Program Components. If there are proposed objectives and activities that fall outside of the scope of the headings in this section, create an additional sub-heading for those objectives and activities. Organize the objectives and activities under each section of the *Scope of Work* based on its occurrence in the Timeline. The *Scope of Work* will be the basis of contract negotiations if the proposal is recommended for funding. The Commission expressly reserves the right to negotiate changes to the proposal’s *Scope of Work* and Budget.

**C. Budget**

Programs submitting proposals for Welcome, Baby! funding must develop budgets that are in line with common business practices to ensure the success of Welcome, Baby! Programs must complete a Detailed Budget Summary for Year 1: March 1 – June 30, 2009 and July 1, 2009 to June 30, 2010 (*See Appendix F: Detailed Budget Summary Form*). The Program must also include a Budget Narrative for the Year 1 Detailed Budget Summary Form (*See Appendix K: Sample Budget Narrative*). The Budget Request Forms may be expanded to provide additional line items or space for clarification. If applicable, use the Detailed Budget Summary Form to create a separate budget for each subcontractor.

Additionally, Programs must complete a Projected Summary Budget Form (*See Appendix J: Projected Budget Summary Form*) for each of the five years of the Program.
Please note, if selected, the Program will be required to submit a Detailed Budget Summary Form as well as budget narratives for subsequent years, in addition to the Actuals and Projected Budget Form (All Years Combined) Form.

Organizations submitting a proposal for funding to implement Welcome, Baby! can request up to $9,388,258 over a five year period.

Because of the scope and complexity of the work required, an organization considering submitting a proposal for funding may include other organizations as subcontractors who demonstrate experience, skills and knowledge in a particular target area outlined in Section III, Required Program Components.

Complete a Budget Narrative and include as Appendix K: Budget Narrative of the proposal. The Budget Narrative must include the name or description of the line item, the budgeted amount, a brief description of the purpose for the item in the Program, and a summary calculation for the line item. Also, include the Program financing and management cash flow. In the Budget Narrative also describe other resources, cash or in-kind, which have been secured or will be for this Program other than the funds requested in this proposal. Include the most recent copy of audited financial statements, including any management letters. The Budget Request Forms and Budget Narrative will not be included as part of the twenty-five (25) page proposal maximum.

Consistent with the intent of the Proposition 10: California Children and Families Act of 1998, no monies for this Program may be used to supplant Federal, state, county and/or other monies available to organizations requesting BSLA Pilot Community Partnership Lead Entity funding for any purpose. Activities funded under this statement of qualifications must be new or enhancements to existing activities.

Policy and Guidelines for Hiring Consultants

Per First 5 LA’s policy and guidelines for Hiring Consultants (section 7), the total composite rate for social service and health employees may not exceed $150 an hour. This means that the total cost of billable hours associated with a contract divided by the total number of hours billed must be equal to or less than $150. For example, for a contract totaling $150,000, a consultant may bill 500 hours for Consultant A at $200/hour, and 500 hours for Consultant B at $100/hour, with a total composite rate of $150/hour (1,000 total hours divided by $150,000 in billable hours = $150/hour).

D. Sustainability of the Project

Specifically describe plans to sustain the proposed Project and the results beyond First 5 LA funding. Describe strategies that will be utilized to maximize opportunities to leverage federal, state and private funds for project enhancement and long-term sustainability. Include the rationale for these financial strategies, as well as infrastructure-building strategies, along with each agency’s prior experiences implementing similar strategies.
E. Evaluation of the Project
First 5 LA believes that sound project evaluation is just as important as well-designed projects. First 5 LA’s evaluation activities are informed by its Revised Evaluation and Accountability Framework (http://www.first5la.org/files/Evaluation-Accountability-Framework.pdf).

Upon execution of the contract, the agency will work collectively with First 5 LA to develop an evaluation plan for the pilot period that will include milestones and indicators of achievement and accountability. In addition, the agency may be required to participate in research and evaluation efforts spearheaded by First 5 LA, First 5 California, or our other partners in this effort.

Again, the agency will be required to collect common data elements through a web-based data collection system. As such, applicants must discuss the evaluation efforts the participating agency is currently involved in as well as the types of data currently being collected. Describe each agency’s ability to maintain the interactive web-based data system, given the technical requirements set forth in this RFQ.

VII. SUBMISSION GUIDELINES
Agencies interested in submitting a statement of qualifications for the Welcome, Baby! program can attend the mandatory First 5 LA Welcome, Baby! Information Meeting. The meeting will provide information about the RFQ and the RFQ process and staff will be available to answer questions related to Welcome, Baby!

The costs of developing the statement of qualifications are entirely the responsibility of the agency submitting this statement of qualifications and cannot be charged to the Commission or included in the proposed budget. The Commission is prohibited from funding any services performed and/or paid for prior to an agreement approved by the Commission.

A. General Guidelines
Statement of Qualifications must adhere to the following guidelines in order to be considered:

- Use only 8 1/2” by 11”, white paper;
- Times New Roman font, no less than 12-point;
- Single sided only;
- No less than 1-inch margins;
- No less than 1.5 line spacing;
- Clip all copies of the statement of qualifications. All pages and page numbers, excluding appendices, must be numbered sequentially with the name of the lead agency at the top of each page;
- Provide a table of contents with page numbers for the statement of qualifications;
- The descriptive program content section of statement of qualifications content must not exceed twenty-five (25) pages total, not including appendices and required documents;
The statement of qualifications material must not be bound, although a heavy clasp or thick rubber band is acceptable. Expensive binding, colored displays, promotional materials, etc., are not necessary or desired. Do not use binders;

- **One (1) original plus eight (8) copies** of the full statement of qualifications (not including all appendices) must be submitted; and
- All original forms and appendices that require **signatures must be signed in blue ink** for the original statement of qualifications package. Signature stamps are not acceptable. The eight additional copies may include photocopied signatures.

A complete application or application package will consist of the items identified below. For an application to be eligible for review, all required attachments must be submitted.

**B. Statement of Qualifications Package**

A complete package must consist of the items identified below. For a statement of qualifications to be eligible for review, all required appendices must be submitted by the stated deadline. Complete Appendix B to confirm all the required items are included. The following documents are to be included in the order listed below:

- Appendix A: Statement of Qualifications Cover Sheet
- Appendix B: Statement of Qualifications Package Checklist
  - Table of Contents
  - Statement of Qualifications Content of the Narrative
  - Organization Chart
  - Resumes of key Project staff, subcontractor(s) and consultant(s) as well as job qualifications and descriptions for new positions
- Appendix C: Memorandum of Understanding
- Appendix D: Previous Client Form
- Appendix E: Completed Scope of Work Forms
- Appendix F: Detailed Budget Summary Form
- Appendix G: Agency Involvement in Litigation and/or Contract Compliance Difficulties
- Appendix H: Authorized Signature Form
- Appendix I: Sample Contract
- Appendix J: Projected Budget Summary Form
- Appendix K: Budget Narrative

**Additional required attachments (not counted as part of application page limits)**

- Current Audited Financials
- Management Letter
- By-Laws
- Articles of Incorporation (if applicable)
- List of Governing Body Members
Submit one (1) original and eight (8) copies of the complete statement of qualifications to:

**Evelyn V. Martinez, Executive Director**  
First 5 LA  
750 N Alameda Street, Suite 300  
Los Angeles, CA 90012  
Attention: Welcome, Baby! Lead Agency RFQ

All submissions must be received by 5:00pm October 24, 2008. No faxed or e-mailed submissions will be accepted.

**VIII. CONTRACTUAL CONSIDERATIONS**

Specific contractual considerations, including but not limited to the following, apply to RFQ/RFP submission process and project implementation and to any contracts that result from the submission and implementation of the project/proposal. The contractor will need to comply with all of the provisions in the attached sample contract (See Sample Contract).

**A. Conflict of Interest**

The selected Contractor will be required to comply with the Commission’s Conflict of Interest provisions, as outlined in the contract, and as applicable under California Law. CONTRACTOR acknowledges that he/she/it is acting as public official pursuant to the Contract and shall therefore avoid undertaking any activity or accepting any payment, employment or gift from any third party that could create a legal conflict of interest or the appearance of any such conflict. A conflict of interest exists when one has the opportunity to advance or protect one’s own interest or private interest of others, with whom one has a relationship, in a way that is detrimental to the interest, or potentially harmful for the integrity or fundamental mission of the Commission. CONTRACTOR shall maintain the confidentiality of any confidential information obtained from the COMMISSION during the Contract and shall not use such information for personal or commercial gain outside the Contract. By agreeing to the Contract and accepting financial compensation for services rendered hereunder, CONTRACTOR agrees that he/she/it will not subsequently solicit or accept employment or compensation under any program, grant or service that results from or arises out of the funded project and related initiative(s). During the term of the Contract and for one year thereafter, CONTRACTOR will not knowingly solicit or accept employment and/or compensation from any COMMISSION collaborator or CONTRACTOR without the prior written consent of the COMMISSION.

**B. Contract Information**

1. The Commission may, at its sole discretion, reject any or all submissions in response to this RFQ/ RFP. The Commission also reserves the right to cancel
this RFQ/ RFP, at its sole discretion, at any time before execution of a contract. The Commission shall not be liable for any costs incurred in connection with the preparation of any submissions in response to this RFQ/RFP. Any cover letters, résumés and/or curriculum vita, including attached materials, submitted in response to this RFQ/RFP shall become property of the Commission and subject to public disclosure.

2. The agency/organization submitting an application agrees that by submitting an application it authorizes the Commission to verify any or all information and/or references given in the application.

3. The Commission reserves the right, after contract award, to amend the resulting contract, scope of work, and any other Exhibits as needed throughout the term of the contract to best meet the needs of all parties.

4. The Commission reserves the right to request additional financial status information to verify applicants past status and current financial status. This information includes, but is not limited to: the most recent independent audit ending Calendar Year 2007 or Fiscal Year June 30, 2007 or applicant’s year end date, Cash Flow Statement, Statement of Activities (Income Statement), and Statement of Financial Position (Balance Sheet).

5. Consistent with the intent of Proposition 10: California Children and Families Act of 1998, no monies for this Project may be used to supplant Federal, state, County and/or other monies available to the organization for any purpose. Activities funded under this proposal must be new or enhancements to existing activities.

6. The award of a contract by the Commission to an individual/agency/organization that proposes to use subcontractors for the performance of work under the contract resulting from this application process shall not be interpreted to limit the Commission’s right to approve subcontractors, assemble teams and/or assign leads. Each applicant will be evaluated independently for added value to the overall team. A copy of executed subcontract(s) related to Program funding must be provided to the Commission.

7. The selected Contractor will be required to sign the contract at least two (2) weeks prior to the intended start date of the contract, as outlined in Term of Contract section of contract, to assure the timely completion of the signature process by all parties. If the contract is not signed prior to the intended start date, the commencement of any activities under the Exhibit A – Scope of Work will not begin until the contract execution date (the date all parties have signed the contract) and Contractor will not be eligible to obtain reimbursement for any costs incurred prior to the contract execution date, unless otherwise approved by the Commission. If this Contract is not signed within the thirty-day (30) period from the intended start date, the Commission has the right to withdraw the contract award. Any agreed upon changes to the intended start date must be confirmed in writing by both parties.
8. Unless otherwise submitted during the application (RFQ, RFP, etc.) process, the selected Contractor will be required to submit the required documentation listed on the Contractor Checklist, which includes, but not limited to, the following documents before the Contract can be fully executed:

- Agency Involvement in Litigation and/or Contract Compliance Difficulties Form
- By-laws (if applicable)
- Articles of Incorporation (if applicable)
- Board of Directors or List of Partners (as applicable)
- Signature Authorization Form
- Form RRF-1 (required and filed annually with the California Attorney General’s Registry of Charitable Trusts) and IRS Form 990 (if applicable)
- Annual Independent Audit for prior fiscal year or calendar year (if applicable)
- Management Letter
- Appropriate business licenses (for vendors or private organizations)
- IRS Letter of Determination (if applicable) or completed IRS Form W-9
- Memorandums of Understanding (for any sub-contractors, collaborators, and/or partners listed under Contracted Services and Evaluation sections of Exhibit B – Budget Forms)
- Certificates of Insurance for all insurance requirements outlined in the contract.

9. The sample contract and contracting requirements are attached (See Sample Contract). If successful, the Contractor will be required to meet all of the terms set out in these documents within the timeframe identified.

IX. APPENDICES

Appendix A: Statement of Qualifications Cover Sheet
Appendix B: Statement of Qualifications Package Checklist
Appendix C: Memorandum(s) of Understanding
Appendix D: Previous Client Form (limit of 3 previous clients)
Appendix E: Scope of Work
Appendix F: Detailed Budget Summary Form
Appendix G: Agency Involvement in Litigation and/or Contract Compliance Difficulties
Appendix H: Authorized Signature Form
Appendix I: Sample Contract
Appendix J: Projected Budget Summary Form
Appendix K: Budget Narrative

All Appendices are included as separate attachments.