Request for Qualifications

Providers of Drug & Alcohol, Tobacco and Gambling Prevention Services

RFQ Posting: Friday, January 18, 2019

Applicant Information Session: Friday, February 1, 2019, 1:00 – 3:00 p.m. EST

Deadline for Questions: Friday, February 15, 2019 at 3 p.m. EST

Submission Deadline: Friday, February 22, 2019 at 3 p.m. EST

Allegheny County Department of Human Services
One Smithfield Street
Pittsburgh, PA 15222

Contents

Definitions

Unless the context indicates otherwise, the following capitalized words are defined as follows for purposes of this RFQ:

1. Agreement: A contract negotiated between Allegheny County and the Qualified Applicant to provide Prevention Services. For contracts for Prevention Services, there may be a third-party beneficiary to the contract, e.g., a school or community organization.
2. Applicant: The individual, non-profit organization, or for-profit organization or business submitting a response to this RFQ in an effort to become the Qualified Applicant(s)
3. Application: A completed Response Form, with specified attachments, submitted in response to this RFQ
4. CIPS: Client Information and Payment System, a DHS system for reporting and billing
5. DDAP: [Pennsylvania] Department of Drug and Alcohol Programs
6. DHS: [Allegheny County] Department of Human Services
7. Evidence-Based/Evidence-Informed: Prevention strategies based on research-proven methodologies
8. OBH: [DHS] Office of Behavioral Health, which provides supports for services to adults, young adults and children with mental illness and/or substance use disorders
9. Prevention Services: Community services to prevent or reduce the use and abuse of alcohol, tobacco and other drugs, as well as compulsive and problem gambling, that correspond to one or more of the six prevention strategies adopted by DDAP
10. Qualified Applicant(s): The Applicants(s) qualified by the County to provide the Contract Services
11. RFQ: Request for Qualifications
12. SAP: Student Assistance Program, a program that places SAP Liaisons in school districts to help school personnel identify students with drug and alcohol and/or mental health issues that pose a barrier to student success and to help students overcome these barriers so that they may achieve, remain in school and graduate
13. Supplemental Programs: Programs and activities that do not meet the definition of evidence-based or evidence-informed
14. WITS: DDAP's Web Infrastructure for Treatment Services (data entry system)

The RFQ at a Glance

Purpose

Allegheny County, on behalf of its Department of Human Services (DHS) Office of Behavioral Health (OBH), is seeking information from Applicants to determine the Applicants' qualifications to provide Drug & Alcohol, Tobacco and Gambling Prevention Services (Prevention Services) to children and adults in one or more high-need school districts and/or communities throughout the County. In general, Prevention Services are services to prevent or reduce the use and abuse of alcohol, tobacco and other drugs, as well as compulsive and problem gambling, that correspond to one or more of the six prevention strategies adopted by DDAP (detailed in Section 2 of this RFQ). Prevention Services are directed at targeted populations not identified as in need of treatment but affected by risk factors associated with substance abuse and/or gambling. Twenty-five percent of the Prevention Services a Qualified Applicant provides must be Evidence-based and/or Evidence-informed programs; the remainder may be Supplemental Programs. Evidence-based Prevention services are those proven effective by research and included in the Department of Drug and Alcohol Programs (DDAP) directory of acceptable Prevention strategies (see Appendix A). Evidence-Informed programs are based on a theory of change that is documented in a clear logic or conceptual model or based on an established theory that has been tested and supported in multiple studies. Supplemental Programs capture programs and activities that do not meet the definition of evidence-based or evidence-informed. Expanded definitions of Evidence-informed and Supplemental Programs can also be found in Appendix A.

Currently, DHS funds Prevention Services in elementary, middle and high schools in 29 school districts in Allegheny County as well as in a wide variety of community settings such as parks and recreation areas, churches/religious facilities, community organizations, abuse shelters, private businesses, etc. More than 10,000 hours of various types of Prevention Services were provided in these settings during the 2017/2018 fiscal year.

Qualification Process

The County intends to qualify one or more Applicant(s) through this Request for Qualifications (RFQ). **Any entity currently providing Prevention Services under an Agreement with the County must submit an Application and be qualified through this RFQ process in order to continue providing DHS-funded Prevention Services in Allegheny County.** If the County qualifies an Applicant to provide Prevention Services, then the Applicant will maintain its qualified status for three years. This status may be extended for two-years at the County's discretion.

If qualified through this RFQ, Qualified Applicants will enter a pool of eligible Prevention Service Providers from which designated school districts and community organizations may select for Prevention Services. If a need for Prevention Services exists where no designated school district or community organization is identified, DHS may issue a task order to all Qualified Applicants. If selected through either process, the Qualified Applicant must enter into an Agreement with Allegheny County to provide/bill for the Prevention Service.

A Prevention Services Provider may serve more than one school district or community. Pursuant to Agreements negotiated with Qualified Applicants, DHS will reimburse Qualified Applicants for

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Prevention Services on the following *proposed* fee-for-service rates, where the codes refer to billable Prevention Services activities as defined in Appendix B:

- Combined Federal Strategy Rate: $17.40 per 15-minute unit
- Pledge Signature/Collection (ENV12) Rate: $16.28 per unit (3-hour cap/event)
- Alcohol, Tobacco and Other Drug-Free Activities (ALT01) (e.g., summer camp): $79.05/day/child
- Non-SAP Prevention Brief Risk Screening (PIR06): $100/completed screening

The above-specified rates are proposed and subject to change. Applicants will be notified of any changes occurring prior to the Application deadline on the RFQ page at http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Solicitations-(RFP/RFQ/RFI).aspx

Who Can Apply

All entities, including but not limited to education organizations, non-profit organizations, for-profit organizations, small businesses and individuals, are eligible to submit an Application in response to this RFQ. An Applicant does not need to be a current Prevention Services Provider to apply.

Current Prevention Service Providers that wish to continue providing Prevention Services, however, must submit an Application through this RFQ and be re-qualified to provide Prevention Services. Student Assistant Program (SAP) providers may apply to be qualified as a Prevention Services Provider but its Prevention Services staff must be separate from its SAP staff.

What We Don't Want

The County is changing Prevention Services from a program-funded model to one that is based on a fee-for-service. We are not interested in program-funded models of Prevention.

What's important to us

Twenty-five percent of Prevention Services must be evidence-based or evidence-informed as approved by DDAP. Details can be found in Appendix A and in the DDAP Prevention Manual at: https://www.ddap.pa.gov/Manuals/Prevention%20Manual%2018-02.pdf

Prevention Services should focus on priority issues in the highest-need communities as described in Section 2.1.

Timeline

Applications must be submitted by 3 p.m. EST on Friday, February 22, 2019.

Questions about the RFQ must be submitted by 3 p.m. EST on Friday, February 15, 2019.

There will be one Applicant Information Session from 1 to 3 p.m. on Friday, February 1 in the Liberty Conference Room at 1 Smithfield Street, Pittsburgh, PA 15222. Attendance is not required, but if you plan to attend please RSVP at https://alleghenycounty.az1.qualtrics.com/jfe/form/SV_beHgc5kM4kuZKHH.

Section 1: Why We Are Issuing this RFQ

According to a 2002 report, *Substance Abuse Prevention Dollars and Cents: A Cost-Benefit Analysis*, authored by the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention, "[i]f effective prevention programs were implemented nationwide, substance abuse initiation would decline for 1.5 million youth and be delayed for 2 years on average. It has been well established that a delay in onset reduces subsequent problems later in life (Grant & Dawson, 1997; Lynskey et al., 2003). In 2003, an estimated:
- 8 percent fewer youth ages 13 to 15 would not have engaged in binge drinking
- 11.5 percent fewer youth would not have used marijuana
- 45.8 percent fewer youth would not have used cocaine
- 10.7 percent fewer youth would not have smoked regularly

The average effective school-based program in 2002 costs $220 per pupil including materials and teacher training, and these programs could save an estimated $18 per $1 invested if implemented nationwide. Nationwide, full implementation of school-based effective programming in 2002 would have had the following fiscal impact:
- Saved State and local governments $1.3 billion, including $1.05 billion in educational costs within 2 years
- Reduced social costs of substance-abuse–related medical care, other resources, and lost productivity over a lifetime by an estimated $33.5 billion
- Preserved the quality of life over a lifetime valued at $65 billion

Although 80 percent of American youth reported participation in school-based prevention in 2005 (SAMHSA, 2004), only 20 percent were exposed to effective prevention programs (Flewelling et al., 2005). …These cost-benefit estimates show that effective school-based programs could save $18 for every $1 spent on these programs." (https://www.samhsa.gov/sites/default/files/cost-benefits-prevention.pdf)

Although this research is more than 15 years old, the fact remains that Prevention Services, when evidence-based and delivered with fidelity, save money and improve quality of life. The programmatic

effectiveness and cost-benefits of effective Prevention Services programs support DDAP's decision to require that 25 percent of Prevention Services be evidence-based and evidence-informed models.

In 2017-18, DHS funded about $2.1 million of program-funded Prevention Services. Program funding is not considered a best practice as it neither allows for appropriate fiscal and programmatic oversight nor for equitable funding across programs (i.e., a program that serves 10 individuals may be funded at the same level as a program that serves 50 individuals, and two programs providing the same service may be funded at very different levels). For these reasons, DHS is transitioning to a fee-for-service model in which Qualified Providers will be reimbursed for services at the following *proposed* rates:

- Combined Federal Strategy Rate: $17.40 per 15-minute unit
- Pledge Signature/Collection (ENV12) Rate: $16.28 per unit (3-hour cap/event)
- Alcohol, Tobacco and Other Drug-Free Activities (ALT01) (e.g., summer camp): $79.05/day/child
- Non-SAP Prevention Brief Risk Screening (PIR06): $100/completed screening

These rates are subject to change; any changes made prior to the Application submission deadline will be posted at http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Solicitations-(RFP/RFQ/RFI).aspx.

Final rates will be negotiated with Qualified Applicants.

Issuance of this RFQ provides an opportunity to implement this new reimbursement strategy while also incorporating more evidence-based and evidence-informed Prevention Services throughout the County.

Section 2: What We Are Looking For

2.1   Scope

Qualified Applicants are being sought to provide Prevention Services (25% of proposed Prevention services must be evidence-based and evidence-informed) to children and adults in communities and schools throughout Allegheny County. Prevention Services are directed at individuals not identified as in need of treatment and must be provided in a variety of settings to targeted populations who are affected by risk factors associated with substance abuse and gambling.

A.   Priority Issues

A countywide assessment is underway and will be completed in the next several months; however, based on preliminary data and past experience, the following issues continue to be a priority for Prevention Services:

- Alcohol Consumption/Binge Drinking
- Marijuana Use
- Tobacco/Vaping/E-Cigarette Use
- Gambling, specifically Poker/Other Card Games and Sporting Events

In addition, the alarming increase in opiate addiction and overdose indicates a need for Prevention Services in that area; particularly for youth who are at risk of experimentation with prescription drugs prescribed for others.

Applicants may apply to be qualified to provide Prevention Services targeting one or more priority issues in one or more schools or communities. Applicants should indicate the issue(s) they would like to be qualified to address and which communities/schools they will target. Extra consideration will be given to Applicants seeking to be qualified to provide Prevention Services to address one or more of these priority issues (additional points will be earned; see Section 3B).

B. High-Need Communities

In addition to the priority issues, extra consideration will also be given to Applicants seeking qualification to provide Prevention Services in one or more high-need communities (additional points will be earned; see Section 3B).

The Allegheny County Health Department has identified County Council Districts having higher-than-average rates of smoking and marijuana, opiates or non-prescribed painkiller use, and binge drinking or chronic alcohol use.

ISSUE	AVERAGE USE BY %	ABOVE AVERAGE DISTRICTS
Smoking	19%	All but 1, 2, 3 and 5
Marijuana Use	48%	4, 8, 10, 12 and 13
Heroin Use	3%	4, 12 and 13
Non-Prescribed Painkiller Use	9%	4, 6, 8, 10, 12 and 13
Binge Drinking	35%	4, 6,7, 8, 10, 12 and 13
Chronic Alcohol Use	5%	3, 7, 9 and 13

Details about these communities can be found in Appendix D and at https://alleghenycounty.us/uploadedFiles/Allegheny_Home/Health_Department/Resources/Data_and_Reporting/Chronic_Disease_Epidemiology/ACHS-snapshots.pdf.

Similar data are not available for gambling; Applicants seeking to address that issue should be able to justify their choice of community(ies) by providing data or other source of support.

C. Federal Prevention Strategies

Defined below are the six (6) federal prevention strategies adopted by DDAP. These six strategies comprise the overall concept of services that prevent or reduce the use and abuse of alcohol, tobacco and other drugs. DDAP also has adapted these strategies to address the prevention of compulsive and problem gambling. Prevention Services may correspond to one or more of the six acceptable strategies. Appendix B lists specific billable activities based on these strategies.

1. Information Dissemination – provides awareness and knowledge on the nature and extent of alcohol, tobacco and drug use, abuse and addiction, as well as problem gambling, and the effects on individuals, families and communities. It also provides knowledge and awareness of available prevention programs

and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two.

2. Education – involves two-way communication, which is distinguished from the Information Dissemination Category stated above by the fact that interaction between the educator/facilitator and the participants is the basis of its activities. Activities under this category are to affect critical life and social skills, including decision-making, refusal skills, critical analysis (e.g., of media messages) and systematic judgment abilities.

3. Alternative Activities – operates under the premise that constructive, healthy activity will deter individuals from the use of alcohol, tobacco and other drugs (ATOD) and participation in gambling activities. The premise is that these activities offset the attraction to, or otherwise meet the needs usually filled by, ATOD and gambling and would, therefore, minimize or eliminate use of ATOD and participation in gambling activities. Note: Alternative activities alone have not been shown to be effective at preventing substance abuse. Characteristics of effective alternative activities include programs/activities that: a) are more intensive (i.e., include many hours of involvement in the program); b) incorporate skill building; c) target higher risk youth; and d) are built into a comprehensive prevention plan.

4. Problem Identification and Referral – targets those persons who have experienced first use of illicit/age-inappropriate use of tobacco and those individuals who have indulged in the first use of illicit drugs and alcohol to assess if their behavior can be reversed through education. This strategy also targets individuals who have engaged in age-inappropriate or problem gambling activities.

Please note: Prevention Services funds must not be used for Student Assistance Programs (SAP), Employee Assistance Programs (EAP), or Driving Under the Influence (DUI) programs beyond the point of the educational component. The educational component is inclusive of providing consultation services to school district personnel, core team members and parents. Funding for level of care assessment or any other activity directly linked to the initiation of treatment must come from non-prevention funding sources.

5. Community-Based Process – aims directly at building community capacity to enhance the ability of communities to more effectively provide prevention and treatment services for substance use and problem gambling disorders. Activities include organizing, planning, enhancing efficiency and effectiveness of services, inter-agency collaboration, coalition building and networking.

6. Environmental – establishes or changes written and unwritten community standards, codes, ordinances and attitudes, thereby influencing incidence and prevalence of ATOD use/abuse and problem gambling in the population. This category is divided into two subcategories to permit distinction between activities which center on legal and regulatory initiatives and those that relate to action-oriented initiatives.

Qualified Applicants will deliver Prevention Services, as defined by DDAP, within one or more of the preceding Federal Prevention Strategies. A list of acceptable Prevention Services implementing these Federal Prevention Strategies can be found in Appendix A. More details are available in the DDAP Prevention Manual at https://www.ddap.pa.gov/Manuals/Prevention%20Manual%2018-02.pdf

In general, outcomes will be measured by the number of sessions convened, number of attendees, and other measures of participation. Applicants should describe their plan to use pre- and post-tests to monitor quality, accessibility and appropriateness of the services (standardized pre-/post-tests are included with evidence-based and evidence-informed programs). Applicants should also include a description of their plan to monitor fidelity to the evidence-based and evidence-informed Prevention models.

D. Target Population

If selected by one or more school districts, communities and/or DHS and contracted with DHS to provide Prevention Services, Qualified Applicants will target populations affected by risk factors associated with substance abuse/gambling. Target populations are categorized into three Institute of Medicine Prevention Classifications:

a. Universal: Activities targeted to the general public or a whole population group that has not been identified on the basis of individual risk

b. Selective: Activities targeted to individuals or a subgroup of the population whose risk of developing a disorder is significantly higher than average

c. Indicated: Activities targeted to individuals in high-risk environments, identified as having minimal but detectable signs or symptoms foreshadowing a disorder or having biological markers indicating predisposition for a disorder but not yet meeting diagnostic levels

E. Responsibilities of Qualified Applicants Contracted to Provide Prevention Services

Collecting and Reporting Data

If contracted to provide Prevention Services, Qualified Applicants will be responsible for tracking services and entering information into DDAP's Web Infrastructure for Treatment Services (WITS). See Appendix B for the billable Prevention services. Training on entering data into WITS and CIPS (see below) will be provided to Qualified Applicants. WITS training is available from DDAP through webinars, trainings and manuals on its website. CIPS training will be provided by DHS. Technical Assistance, when necessary, will also be offered by DHS and DDAP.

Information that Qualified Applicants must enter into WITS includes, but is not limited to:

- Service
- Date of service
- Length of service
- Demographics of those served
- Risk category of those served

In addition, if contracted to provide Prevention Services, Qualified Applicants will be required to enter claims for fee-for-service reimbursement into the Client Information and Payment System (CIPS), DHS's system for reporting and billing. In addition to standard fiscal monitoring, DHS will pay particular attention to the balance between direct and indirect costs.

Applicants must collect evidence of their activities; for most Prevention activities, Qualified Applicants must maintain group sign-in sheets and pre- and post-tests. For information dissemination activities, other evidence must be provided.

DHS encourages Qualified Applicants contracted to provide Prevention Services to conduct periodic quality assessments of their services and to have a plan in place for quality improvement. Quality assessment may include pre- and post-tests and surveying participants about their experience with Prevention services. In addition, Applicants must describe their planned mechanism(s) for ensuring fidelity to evidence-based and evidence-informed Prevention models.

F. Prevention Specialist Qualifications

Qualified Applicants should either have identified staff to serve as Prevention Services specialists or have a strong plan in place for recruiting and hiring Prevention Services specialists. Qualified Applicants should provide appropriate supervision of Prevention Services specialists by staff knowledgeable about Prevention Services. Applicants must staff programs appropriately for the program(s) they plan to implement. These staff must meet the qualifications described below.

Staff delivering Prevention Services must meet the minimum education and training (MET) requirements established by the State Civil Service Commission for one of the following classifications: Drug and Alcohol Prevention Program Specialist Trainee, Drug and Alcohol Prevention Program Specialist, or Drug and Alcohol Prevention Specialist. Those responsible for supervision of Prevention staff must meet the MET requirements established by the State Civil Service Commission for the Drug and Alcohol Prevention Program Supervisor.

- Minimum requirements for Drug and Alcohol Prevention Specialist Trainee: A bachelor's degree; or any equivalent combination of experience and training.

- Minimum requirements for Drug and Alcohol Prevention Specialist: One year as a Drug and Alcohol Prevention Specialist Trainee; or one year of experience in drug and alcohol prevention work and a bachelor's degree in health education, education, the social or behavioral sciences or related fields; or an equivalent combination of experience and training.

- Minimum requirements for Drug and Alcohol Prevention Program Specialist: One year of experience as a Drug and Alcohol Prevention Specialist; or a bachelor's degree in health education, education, or the social or behavioral sciences and two years of progressively responsible experience in drug and alcohol prevention activities; or an equivalent combination of experience and training.

- Minimum requirements for Drug and Alcohol Prevention Program Supervisor: One year as a Drug and Alcohol Prevention Specialist; or a bachelor's degree in health education, education, or the social or behavioral sciences or related fields and two years of progressively responsible experience in prevention activities; or any equivalent combination of experience and training.

Prior to providing Prevention Services, Qualified Applicants should ensure that Prevention Specialists receive training on the following:

- Prevention 101, Parts 1 & 2

- Ethics in Prevention
- Making the Connection: Prevention Program Services, Fidelity Adaptations and Minimum Data Set (MDS) Service Codes
- Addictions 101
- 12 hours of approved supplemental training each year (See Appendix C)

G. Role of DHS

DHS will contract with Qualified Applicants after a letter of agreement has been negotiated with the school district/community organization. Once a contract is in place, DHS will monitor Qualified Applicants for compliance and performance, and provide technical assistance to Qualified Applicants on specific Prevention-related issues as requested and needed; training will also be provided on data collection/entry into WITS and CIPS. DHS will participate in the conflict resolution process as warranted.

2.2   Eligibility and Expectations

Current Prevention Services Providers are not automatically pre-qualified and must submit an Application, obtain qualification through the RFQ and be selected by a school district, community organization and/or DHS in order to continue providing Prevention Services.

Section 3: Application Requirements and Evaluation Criteria

Applicants must meet the following evaluation criteria and should address their qualifications by responding to the specifically-requested items or questions in the Response Form. Applicants should download and type their responses directly into the Response Form available on the Active Solicitations webpage at www.alleghenycounty.us/dhs/solicitations. The maximum score an Application can receive is 100 points, as outlined in the following sections.

A. Organizational Experience (15 points)

- Experience in providing drug and alcohol, tobacco and/or gambling Prevention services to a variety of audiences, and knowledge of related issues (5 points)
- Experience working with school-aged children and/or adults (5 points)
- Established relationships with schools and community-based organizations in Allegheny County (5 points)

B. Service Delivery (45 points)

- A specific plan for Prevention Services that:
    a. includes a strategy to work with school districts, community-based organizations or DHS to identify and provide appropriate Prevention services (5 points)
    b. targets community(ies) where high need exists (5 points)
    c. addresses one or more of the priority issues (5 points)
    d. addresses one or more of the three target population categories (5 points)
    e. addresses one or more of the acceptable Prevention strategies (5 points)
- At least 25% of proposed Prevention services are evidence-based or evidence-informed as defined in Appendix A (5 points)

- A plan for ensuring fidelity in the delivery of evidence-based and evidence-informed Prevention services (5 points)
- Strategy for addressing the scenario described in the response form (10 points)

C. Staffing (10 points)

- A plan for recruiting and retaining qualified, committed and knowledgeable staff (5 points)
- A training plan that meets regulations (at a minimum) (5 points)

D. Data Collection and Delivery (15 points)

- A plan for tracking, entering and reporting data in a timely way (5 points)
- Regular pre- and post-test evaluations and a plan for incorporating feedback into programming – please include a sample pre-/post-test with your application (5 points)
- A plan for quality assurance (5 points)

E. Financial Management and Budget (15 points)

- A budget, based on the proposed billing rates, that reflects a realistic estimate of the costs associated with implementing Prevention services and a reasonable balance between direct and indirect costs, and a budget narrative that clearly justifies costs outlined in the budget (15 points)

Section 4: How to Submit an Application

4.1   Applicant Information Session

An Applicant Information Session for this RFQ will be held at 1 p.m. Eastern on Friday, February 1 at the downtown Human Services Building in the Liberty conference room on the lower level (1 Smithfield Street, Pittsburgh, PA 15222). Application preparation and submission requirements will be presented, and questions will be entertained from potential Applicants.

a. Applicants are not required to attend the information session.
b. Please RSVP for the information session at https://alleghenycounty.az1.qualtrics.com/jfe/form/SV_beHgc5kM4kuZKHH no later than 3 p.m. Eastern on Monday, January 28, 2019.
c. Preliminary answers will be provided orally at the conference for questions asked during the information session. These oral answers provided at the information session are preliminary and should not be relied upon by any Applicant. Final definitive answers to questions asked during the information session will be posted in writing on the DHS Solicitations webpage the following week.

Applicants may submit questions to be addressed at the Applicant Information Session in advance. Questions submitted to DHSProposals@alleghenycounty.us by at 3 p.m. Eastern on Monday, January 28, 2019 will be addressed at the Applicant Information Session.

4.2   Submission Process

    a. Applicants should take time to review and understand the RFQ in its entirety including:
- The background (see Section 1: Why We Are Issuing this RFQ)
- The narrative (see Section 2: What We Are Looking For)
- The requirements (see Section 3: Application Requirements and Evaluation Criteria)
- The evaluation process (see Section 5: How We Will Evaluate Your Application)

    b. Applicants must use the Response Form to develop your Application. Type your responses to each requested item directly into the Response Form. It is available at our Active Solicitations website with the RFQ announcement at www.alleghenycounty.us/dhs/solicitations.

    c. Applicants must submit a complete Application, which includes the following attachments that are available on our Active Solicitations website:
- Response Form
- MWDBE documents
- Allegheny County Vendor Creation Form
- Audited financial reports for the last three years
- W-9

    d. Applicants should not send any attachments other than those listed above and on the Response Form.

    e. If you do not have audited financial reports for the last three years, you may submit other financial documentation that attest to the financial health of your organization. Tax returns are the preferred alternative. Please note that providing financial documentation is a requirement of contracting through Allegheny County.

    f. Make sure to complete each section of the Response Form and to stay within any word counts or page limits that may be specified in the Response Form.

    g. Applications must be submitted electronically to DHSProposals@alleghenycounty.us no later than 3:00 p.m. Eastern Time on Friday, February 22, 2019 to be considered for review.

    h. Please make sure to get your Application in before the deadline! If your Application is late, it will be rejected and will not be presented to the evaluation committee for review and scoring as described in Section 5 below.

    i. You will receive an email when your Application is received. If you do not receive this notification within 48 hours of submitting your Application, please contact DHSProposals@alleghenycounty.us

4.3   How to Contact DHS about this RFQ

    a. All inquiries and questions must be submitted via email to DHSProposals@alleghenycounty.us

    b. All information about the RFQ, including answers to questions, changes and clarifications will be posted at our Active Solicitations website at www.alleghenycounty.us/dhs/solicitations

    c. Please be sure to check this website regularly for answers to questions, additional information or changes to the RFQ or the RFQ process.

4.4   Other Information

a. The issuance of this RFQ does not obligate the County to enter into an Agreement with any Applicants. The County reserves the right to reject any and all Applicants.
b. Any Agreement originating from this RFQ is subject to all of the Terms and Conditions specified in Section 7: Contract Requirements for Successful Applicants.
c. Applicants are responsible for all costs related to the preparation and submission of a Application.
d. Applications become the property of the County and may become part of any subsequent Agreement between the Applicant and the County.
e. Successful Application(s) will be posted online in the DHS Solicitations Archive after an Agreement has been fully executed by the County and the Successful Applicant(s).
f. Applicants also should be aware that all documents and materials submitted in response to this RFQ are subject to requests made pursuant to Pennsylvania's Right-To-Know Law and that the County may have to make submitted documents and materials available to a requestor after an award of an Agreement is made.

Section 5: How We Will Evaluate Your Application

Applications will be evaluated by an evaluation committee convened by DHS. The evaluation committee will assign scores based on the evaluation criteria in Section 3: Application Requirements and Evaluation Criteria using the scale listed in Section 5.1 b.

5.1   Evaluation Process

The evaluation process will consist of the following steps:

a. An Evaluation Committee will be formed by DHS and may consist of some or all of the following:
    * Content experts from within DHS, selected for their expertise and/or experience
    * Representatives of foundations, educational institutions, community and civic organizations, businesses and/or non-profit agencies
b. All Evaluation Committee members will individually review and score each Application. Each Evaluation Committee member will award points for each response on an Applicant's Response Form according to their expertise and best judgment of how the Application submitted by that Applicant meets the evaluation criteria in Section 3 using the following scale:
    0 – Not addressed in Application
    1 – Poor
    2 – Below expectations
    3 – Meets expectations
    4 – Exceeds expectations
    5 – Outstanding
c. The Evaluation Committee members then will meet collectively to discuss the individual scores and evaluations of each committee member.
d. DHS, on behalf of the County, shall have exclusive discretion to shortlist a reduced number of Applications for more extensive review. In this case, DHS may request that shortlisted

Applicants make a formal oral presentation to the Evaluation Committee. The Evaluation Committee will score the oral presentation using the following criteria and the scale outlined in 5.1b. The maximum score that an oral presentation can receive is 15 points:

1. Presentation demonstrates Applicant's ability to implement the proposed program effectively (5 points)
2. Applicant's answers to Evaluation Committee's questions (5 points)
3. Applicant's presentation is thoughtful and professional (5 points)

e. At any time during the review process, DHS may contact an Applicant to discuss any areas of the Application needing clarification or further explanation.

f. As part of determining Applicants' eligibility to enter into a contract with Allegheny County, all Applicants' financial audits or other documentation will be reviewed by DHS fiscal analysts to ensure Applicants' financial stability. Applicants who are determined ineligible to meet Allegheny County contracting requirements may be removed from consideration for qualification.

g. The Evaluation Committee will submit their recommendation for qualification to the Director of DHS for his approval, who in turn will submit a request to the County Manager for approval for the County to enter into an Agreement with the Successful Applicants(s).

h. The County is under no obligation to qualify any Applicants or enter into an Agreement with an Applicant as a result of this RFQ. The County reserves the right to reject any and all Applications.

i. All Applicants will be notified of their status following the final determination of which Applicant(s) will be qualified.

j. Applicants not selected for qualification who are interested in receiving feedback regarding their submission may request a phone call at DHSProposals@alleghenycounty.us.

5.2 Other Requirements

For an Application to be eligible for evaluation, it must be:

- Received by the due date/time
- Properly formatted and include responses to all requested information
- Complete with all required forms and attachments

Applications which do not meet the above requirements will be automatically rejected and will not be presented to the evaluation committee.

Section 6: What Happens after an Applicant is Qualified?

Qualification is not a guarantee of selection by a school district or community group. Neither Qualification nor selection by a school or community group is a guarantee that the County will enter into an Agreement for Prevention Services with a Qualified Applicant. A Qualified Applicant may or may not be selected for any assignments. DHS will reimburse Qualified Applicants with whom it enters into an Agreement for Prevention Services on a fee-for-service basis at the following proposed rates:

- Combined Federal Strategy Rate: $17.40 per 15-minute unit
- Pledge Signature/Collection (ENV12) Rate: $16.28 per unit (3-hour cap/event)
- Alcohol, Tobacco and Other Drug-Free Activities (ALT01) (e.g., summer camp): $79.05/day/child

- Non-SAP Prevention Brief Risk Screening (PIR06): $100/completed screening

Qualified Applicants may opt out of the pool of Qualified Applicants or an Agreement by providing 90 days notice to DHS, preferably at the end of the school year; however, this may preclude their inclusion in the pool of Qualified Applicants, should they choose to seek qualification, in the future.

Section 7: Contract Requirements for Qualified Applicants

In order to enter into an Agreement with the County, Applicants must be willing to comply with all contract requirements listed below and all standard terms and conditions contained in a County contract for provision of services to DHS and its offices. Additional details about contracting with Allegheny County are provided in the DHS Contract Specifications Manual, available at www.alleghenycounty.us/dhs/solicitations.

7.1 Minority, Women or Disadvantaged Business Enterprise (MWDBE) Requirements

Allegheny County has MWDBE goals of 13% participation for Minority Business Enterprises and 2% participation for Women Enterprises, and expects that Successful Applicants will make a "good faith effort" in assisting the County in meeting these goals.

- a. All Applications must include either of the following:
  - a. If your organization is able to meet the MWBDE contract goals, a completed MWDBE Participation Statement and MWDBE Contact Information form is required. You must also attach the MWDBE certifications of the firms you intend to use with the Participation Statement.
  - b. If your organization will request a waiver from participating in the MWDBE contract goals, a completed MWDBE Participation Statement, MWDBE Contact Information form and MWDBE Waiver Request are required.
- b. MWDBE forms and resources can be found at www.alleghenycounty.us/dhs/solicitations:
  - a. MWDBE Forms
    - o MWDBE Participation Statement
    - o MWDBE Waiver Request
    - o MWDBE Contact Information form
  - b. MWDBE Resources
    - o MWDBE Contract Specifications Manual
    - o MWDBE Response Checklist
    - o Guide for completing the MWDBE Participation Statement
    - o Sample Diversity Policy
- c. For more information about MWDBEs, visit the Allegheny County MWDBE website.

7.2 HIPAA Compliance

DHS is a covered entity under the Health Information Portability and Accountability Act (HIPAA). Therefore, a Successful Applicant must comply with all HIPAA requirements.

7.3 Cyber Security

a. Successful Applicants must meet the minimum computer specifications which begin on page 14 of the [DHS Contract Specifications Manual](#), available at [www.alleghenycounty.us/dhs/solicitations](#).
b. All electronic devices must have sufficient security software and settings to minimize the risk of an information breach.
c. Successful Applicants must also have policies in place to ensure that electronic devices are physically secure when not in use (e.g., locked in a vehicle trunk, password protected).

7.4   Equal Employment Opportunity and Non-Discrimination Requirements

By submitting an Application, an Applicant agrees to not discriminate against any employee, applicant for employment, independent contractor, client or any other person on the basis of race, color, religion, national origin or ancestry, sex, gender identity or expression, sexual orientation, disability, marital status, familial status, age (40 or over), or use of a guide or support animal because of blindness, deafness or physical disability.

7.5   New Provider Requirements

If awarded an Agreement, Successful Applicants who do not have current Allegheny County contracts will be required to complete the [DHS New Provider Application](#), available at [http://www.alleghenycounty.us/Human-Services/Resources/Doing-Business/Prospective-Providers.aspx](#). While not required as part of your Application, Applicants may wish to review the requirements of this application.

APPENDIX A: Acceptable Evidence-Based and Evidence-Informed Prevention Services

The Pennsylvania Department of Drug and Alcohol Programs (DDAP) has identified evidence-based and evidence-informed prevention services that are eligible for funding. Characteristics of <u>evidenced-based prevention services</u> include:

- Shown through research and evaluation to be effective in the prevention and/or delay of substance use/abuse or problem gambling or effective at changing a risk or protective factor that research has linked to substance use/abuse or problem gambling.
- Grounded in a clear theoretical foundation and carefully implemented
- Evaluation findings have been subjected to critical review by other researchers
- Reported (with positive effects on the primary targeted outcome) in peer reviewed journals
- Replicated and produced desired results in a variety of settings
- Included in registries of evidence-based programs (note: inclusion in a registry is necessary, but not a sufficient characteristic to merit inclusion on DDAP's list of evidence-based programs). Examples of registries include:
    - Center for the Study and Prevention of Violence Blueprints for Healthy Youth Development
      http://www.blueprintsprograms.org
    - U.S Office of Juvenile Justice and Delinquency Prevention (OJJDP) Model Programs Guide
      http://www.ojjdp.gov/mpg/
    - U.S. Department of Education Institute of Education Sciences What Works Clearinghouse
      https://ies.ed.gov/ncee/wwc

<u>Evidence-informed prevention programs and strategies</u> include the following characteristics:

- Based on a theory of change that is documented in a clear logic or conceptual model, or is based on an established theory that has been tested and supported in multiple studies
- Based on published principles of prevention, e.g., NIDA's Prevention Principles
- Supported by documentation that it has been effectively implemented in the past, and multiple times, in a manner attentive to scientific standards of evidence and with results that show a pattern of credible and positive effects
- Has an evaluation that includes, but is not limited to, a pre/post-test and/or survey
- May be similar in content and structure to evidence-based programs

<u>Supplemental Programs</u> capture programs and activities that do not meet the definition of evidence-based or evidence-informed. These programs may:

- Provide basic alcohol, tobacco, other drug or problem gambling awareness/education Prevention Manual July 2018 1.01.4
- Address identified risk and protective factors for substance use/abuse and problem gambling
- Build skills and promote resiliency, prosocial behavior, and bonding to families/schools/communities
- Build community infrastructure for prevention through development of community capacity, resources, readiness, coalitions, etc.
- Create and change environments, policies and community norms to make it easier to act in healthy ways
- Capture activities that utilize methods of best practice
- Capture activities necessary to implement or enhance evidence-based or evidence-informed programs

Approved DDAP prevention programs can be found at the following link:
[DDAP- approved evidence-based and evidence-informed prevention programs](#)

APPENDIX B: Billable Services for Prevention

SERVICE TITLE	SERVICE DESCRIPTION
Information Dissemination	
INF01 Printed Materials Development	Development of printed materials such as flyers, brochures and newsletters. Also includes the development of materials such as flyers, brochures, newsletters that will be disseminated via email.
INF02 Printed Materials Dissemination	Distribution of printed materials such as flyers, brochures and newsletters. Also includes the distribution of these printed materials via email.
INF03 Radio/TV/Print Media Development	Development of radio, TV, or print media such as magazines, newspapers and billboards.
INF04 Radio/TV/Print Media Dissemination	Distribution of radio, TV, or print media such as magazines, newspapers and billboards.
INF05 Web-based Media Development	Development of content for websites, blogs and social media.
INF06 Web-based Media Dissemination	Distribution of information via websites, blogs and social media.
INF07 Health Promotion	A wide array of services and methods for dissemination of information intended to inform individuals, schools, families and communities about specific substance abuse and health-related risks, risk reduction activities and other activities to promote positive and healthy lifestyles. An important purpose of participation in these activities is networking and building relationships with potential partners.
INF08 Speaking Engagements	A wide range of prevention activities intended to impart information about substance abuse issues to general and/or targeted audiences.
INF09 Telephone/E-mail Information Requests	Telephone and E-mail services, provided by prevention staff, intended to provide information about substance abuse prevention issues and services. This does not include telephone calls that are a normal part of day-to-day business.

SERVICE TITLE	SERVICE DESCRIPTION
Education	
EDU01 Classroom Educational Services	Prevention curricula, lessons, seminars, or workshops that are recurring and are presented primarily in a school or college classroom.
EDU02 Education Services	Structured substance abuse prevention lessons, seminars, or workshops directed to a variety of youth and/or adults, as well as, organizations.
EDU03 Parenting/Family Management Services	Structured classes and programs intended to assist parents and families in addressing substance abuse risk factors, implementing protective factors and/or learning about the effects of substance abuse on individuals and families. Topics typically include parenting skills, family communications, decision-making skills, conflict resolution, family substance abuse risk factors, family protective factors and related topics.
SERVICE TITLE	SERVICE DESCRIPTION
Alternative Activities	
ALT01 ATOD Free Activities	exclude the use of alcohol, tobacco and other drugs. Examples are: • After-prom parties • Alcohol, tobacco and other drug-free school and community events • Recreational after school or summer camp activities • Community or youth leader recognition • Activities at a teen, community, recreation, or drop-in center
ALT02 Mentoring/Leadership Development	Structured prevention services that use peers or mentors to provide guidance, support and other risk reduction activities for youth or adults. Also includes activities or events designed to assist in the development of leadership skills.
ALT03 Community Services	Functions intended to prevent substance abuse by involving youth and adults in providing a variety of community services.

SERVICE TITLE	SERVICE DESCRIPTION
Community-Based Process	
CBP01 Technical Assistance/Multi-agency Collaboration	Includes various meetings with community groups/members, coalitions or other professionals. Community meetings or coalitions may be comprised of parents, teachers, law enforcement, businesses, religious leaders, health providers and other community activists who are mobilizing at the local level to make their communities safer, healthier and drug-free. Multi-agency collaboration refers to meetings with other agencies or professionals in which the purpose of the meeting is to have a direct impact on substance abuse prevention at the community/local level. Technical assistance includes attendance by prevention staff at a meeting in order to provide services, expertise or perspective that helps strengthen or enhance activities to promote prevention.
CBP02 Training Services	Delivering structured substance abuse prevention training events intended to develop proficiency in prevention program design, development and delivery skills.
CBP03 Community/Youth/Volunteer Training Services	Structured prevention activities intended to impart information and teach organizational development skills to individuals or community groups.
CBP04 Assessing Community Needs	Implementing tasks to determine the need for prevention services, identify at-risk and high-risk populations, or determine priority prevention populations for service delivery.
CBP05 Systematic Planning	Structured services that help communities to assess existing prevention services, set priorities and allocate prevention resources systematically, based on objective needs assessments. The specific strategic plan is the product to be counted. This includes both newly created plans and plan updates.
CBP06 Program Development	Program development refers to the development of new programs or significant modification of existing programs.
CBP07 Prevention Program Marketing	The marketing of prevention programs to individuals, schools, communities, and other groups. The goal of this marketing is to encourage individuals, schools, communities, and other groups to implement or support the implementation of the program being marketed.

SERVICE TITLE	SERVICE DESCRIPTION
Problem Identification and Referral	
PIR06 Non-SAP Prevention Brief Risk Screening	Refers to those activities intended to provide a risk screening on an individual (these are not Treatment Assessments). Screening tools should be very brief. Results of the screening may lead to referral for further evaluation.

SERVICE TITLE	SERVICE DESCRIPTION
Environmental	
ENV12 Pledge/Signature Collection	Collecting pledges or signatures that indicate an agreement to change a behavior or not participate in or support a behavior.

SERVICE TITLE	SERVICE DESCRIPTION
Gambling: Information Dissemination	
GIN01 Gambling Printed Materials Development	Development of printed materials such as flyers, brochures and newsletters. Also includes the development of materials such as flyers, brochures, newsletters that will be disseminated via email.
GIN02 Gambling Printed Materials Dissemination	Distribution of printed materials such as flyers, brochures and newsletters. Also includes the distribution of these printed materials via email.
GIN03 Gambling Radio/TV/Print Media Development	Development of radio, TV, or print media such as magazines, newspapers and billboards. Program
GIN04 Gambling Radio/TV/Print Media Dissemination	Distribution of radio, TV, or print media such as magazines, newspapers and billboards.
GIN05 Gambling Web-based Media Development	Development of content for websites, blogs and social media.
GIN06 Gambling Web-based Media Dissemination	Distribution of information via websites, blogs and social media.

SERVICE TITLE	SERVICE DESCRIPTION
GIN07 Gambling Health Promotion	A wide array of services and methods for dissemination of information intended to inform individuals, schools, families and communities about youth gambling and problem gambling and health-related risks, risk reduction activities and other activities to promote positive and health lifestyles. An important purpose of participation in these activities is networking and building relationships with potential partners.
GIN08 Gambling Speaking Engagements	A wide range of prevention activities intended to impart information about youth gambling and problem gambling issues to general and/or targeted audiences.
GIN09 Gambling Telephone/E-mail Information Requests	Telephone and E-mail services, provided by prevention staff, intended to provide information about gambling/problem gambling issues and services. This does not include telephone calls that are a normal part of day-to-day business.
SERVICE TITLE **Gambling: Education**	**SERVICE DESCRIPTION**
GED01 Gambling Education Services	Structured prevention lessons, seminars, or workshops directed to a variety of youth and/or adults.
SERVICE TITLE **Gambling: Alternative Activities**	**SERVICE DESCRIPTION**
GAL01 Gambling Free Activities	Activities which exclude gambling.
GAL02 Gambling Mentoring/Leadership Development	Structured prevention services that use peers or mentors to provide guidance, support and other risk reduction activities for youth or adults. Also includes activities or events designed to assist in the development of leadership skills.
GAL03 Gambling Community Services	Functions intended to prevent gambling/problem gambling by involving youth and adults in providing a variety of community services.

SERVICE TITLE Gambling: Community-Based Process	SERVICE DESCRIPTION
GCB01 Gambling Technical Assistance/Multi-agency Collaboration	Includes various meetings with community groups/members, coalitions or other professionals. Community meetings or coalitions may be comprised of parents, teachers, law enforcement, businesses, religious leaders, health providers and other community activists who are mobilizing at the local level to make their communities safer, healthier and problem gambling-free. Multi-agency collaboration refers to meetings with other agencies or professionals in which the purpose of the meeting is to have a direct impact on problem gambling prevention at the community/local level. Technical assistance includes attendance by prevention staff at a meeting in order to provide services, expertise or perspective that helps strengthen or enhance activities to promote prevention.
GCB02 Gambling Training Services	Delivering structured substance abuse prevention training events intended to develop proficiency in prevention program design, development and delivery skills.
GCB03 Gambling Community/Youth/Volunteer Training Services	Structured prevention activities intended to impart information and teach organizational development skills to individuals or community groups.
GCB04 Gambling Assessing Community Needs	Implementing tasks to determine the need for prevention services, identify at-risk and high-risk populations, or determine priority prevention populations for service delivery.
GCB05 Gambling Systematic Planning	Structured services that help communities to assess existing prevention services, set priorities and allocate prevention resources systematically, based on objective needs assessments. The specific strategic plan is the product to be counted. This includes both newly created plans and plan updates.
GCB06 Gambling Program Development	Program Development refers to the development of new programs or significant modification of existing programs.
GCB07 Gambling Prevention Program Marketing	The marketing of prevention programs for gambling/problem gambling to individuals, schools, communities, and other groups. The goal of this marketing is to encourage individuals, schools,

	communities, and other groups to implement or support the implementation of the program being marketed.
Service Title **GAMBLING: ENVIRONMENT**	**SERVICE DESCRIPTION**
GEN01 Gambling Changing Policy	Efforts intended to change or establish environmental policies, codes, ordinances, regulations, or other laws to reduce problem gambling and prevent underage gambling.
GEN02 Gambling Changing Practices and Procedures	Efforts intended to change or establish practices or procedures that influence gambling/problem gambling.
GEN03 Gambling Social Norms Marketing Radio, TV and Print Media	Changing community norms regarding gambling through targeted media campaigns. This could be achieved by disseminating, via radio, TV or print media such as newspapers, magazines and billboards, actual prevalence statistics about a particular population behavior (social norms misperception correction). The normative message should always promote safe and healthy behaviors, correct a misperception and be a true, nonjudgmental statement of fact.
GEN04 Gambling Social Norms Marketing Printed Materials	Changing community norms regarding gambling through targeted media campaigns. This could be achieved by disseminating, via printed materials such as flyers and brochures, actual prevalence statistics about a particular population behavior (social norms misperception correction). The normative message should always promote safe and healthy behaviors, correct a misperception and be a true, nonjudgmental statement of fact.
GEN05 Gambling Town Hall Meetings	Town Hall Meetings are designed to increase understanding and awareness of key gambling/problem gambling issues and consequences associated with gambling. THMs encourage individuals, families and communities to address the problem. THMs are designed to alert and empower the community as well as generate interest from the media.
GEN06 Gambling Training/TA for Environmental Influencers	Training or technical assistance provided to those who are in a position to affect gambling/problem gambling through influencing the environment such as law enforcement, businesses, small games of chance licensees, etc.

APPENDIX C: Approved Supplemental Training

All full-time prevention staff (SCA or contracted provider) who deliver or supervise prevention services must complete 12 hours of prevention training courses each year. Courses may be completed either in a classroom setting or online and must be offered by a professional organization including, but not limited to:

- Department of Drug and Alcohol Programs (DDAP)
- Commonwealth Prevention Alliance (CPA)
- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Center for Substance Abuse Prevention (CSAP)
- Northeast Center for the Application of Prevention Technologies (NECAPT)
- FRIENDS National Resource Center for Community-Based Child Abuse Prevention (CBCAP)
- Center for School and Communities
- Pennsylvania Training and Technical Assistance Network (PaTTAN)

Exemptions to the 12-hour training requirement:

- SCA staff who have 20% or less of their time designated for prevention.
- Provider staff who work less than 20 hours a week.
- Provider staff who work more than 20 hours a week, but have 50% or less of their time designated for prevention.

Some trainings that are strongly suggested which would count toward the 12-hour requirement include:

- Basic Pharmacology
- Communication Skills
- Confidentiality
- Cultural Competency
- Current Drug Trends

Trainings that address evaluation, presentation skills, child development, theories of health behaviors, etc. may also be appropriate to count towards the 12-hour training requirement.

Training to be a facilitator or trainer for a program or curriculum (e.g. Too Good for Drugs, LifeSkills Training, Girls Circle, etc.) can count for up to (but no more than) 6 hours of the 12-hour training requirement.

Trainings related to the prevention of problem gambling can also be used to fulfill this requirement. For staff who deliver or supervise ATOD prevention, trainings on problem gambling prevention can count for up to (but no more than) 6 hours of the 12-hour training requirement. For staff who deliver or supervise only problem gambling prevention, all 12 hours can be made up of trainings related to problem gambling prevention.

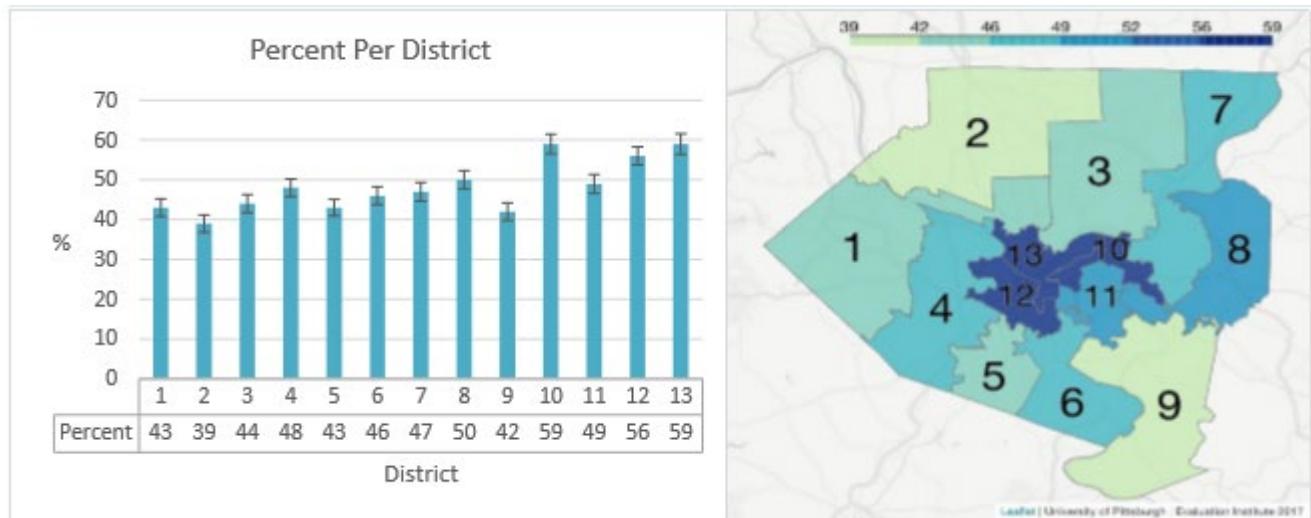Certificates of completion for the twelve (12) hours of training need to contain, at a minimum:

- the course name
- number of hours
- date
- name of the organization providing the course

APPENDIX D: Rates of Smoking, Marijuana Use, Heroin Use and Non-Prescription Painkiller Use by County Council District
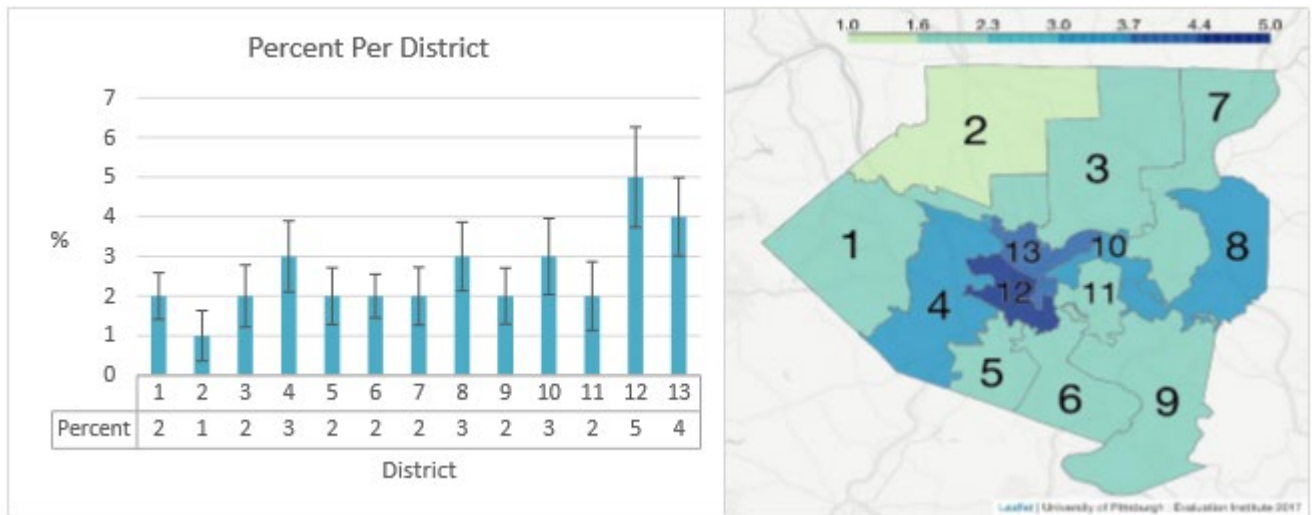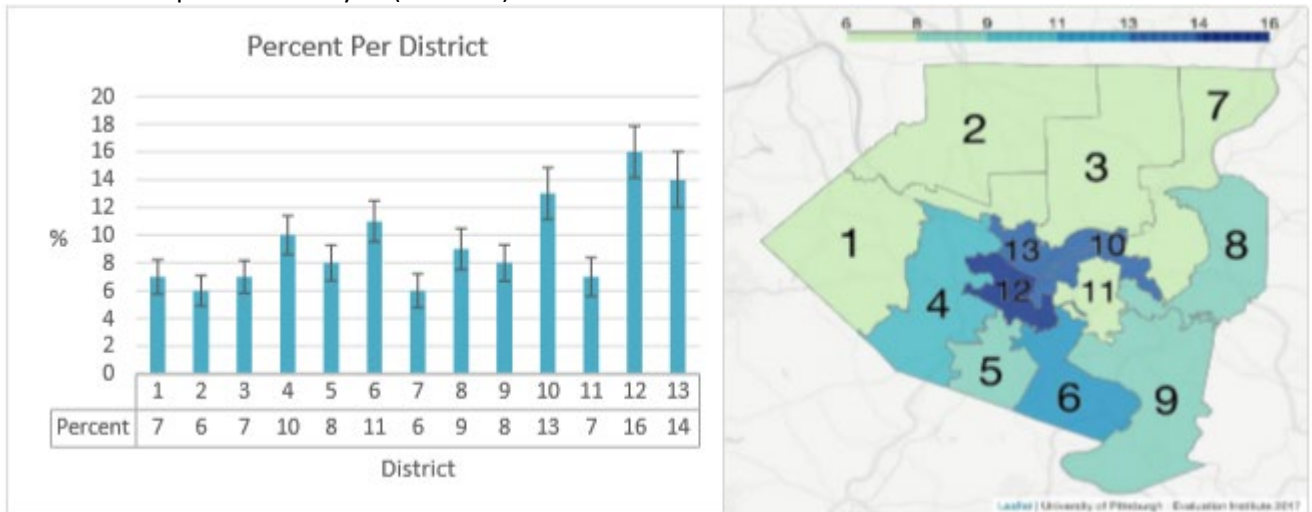
Smoking
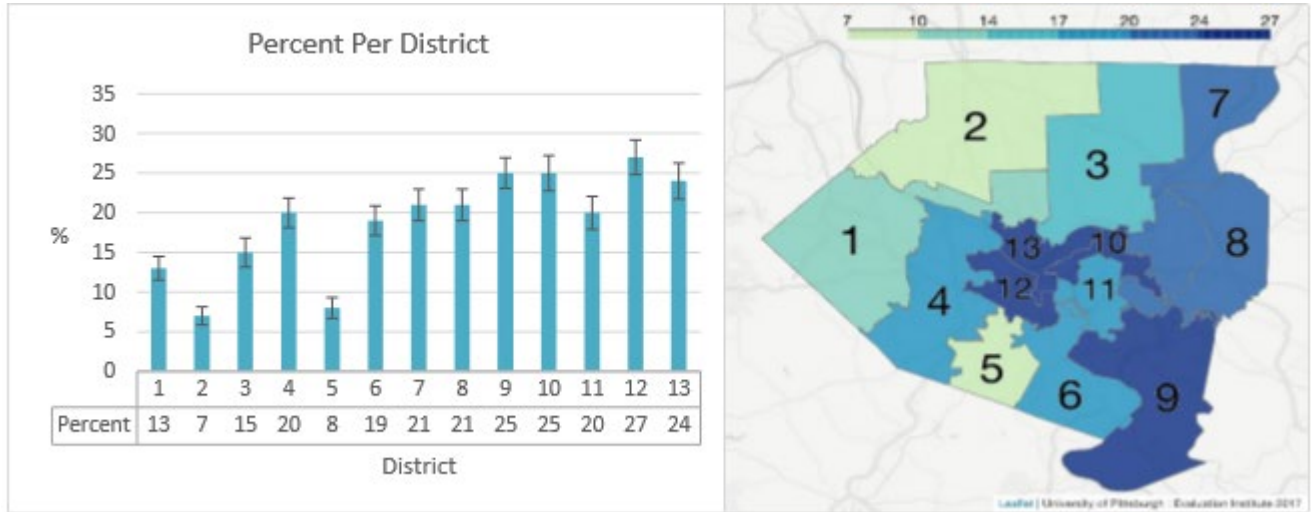
Marijuana (ever use)

Heroin (ever use)

Painkillers not prescribed to you (ever use)

Appendix E: Existing School and Community Organization Partners

Schools	Community Organizations
Carlynton School District	AFN Mental Health Expo (Downtown PGH)
Carnegie Elementary	Allegheny Housing Authority
Catholic Diocese of Pittsburgh	Allegheny Quits for Life (Manchester)
Sister Thea Bowman Academy	Allison Park Community
St. Benedict the Moor	Angels' Place (Northside)
Chartiers Valley School District	BBBS of Greater PGH
Chartiers Valley High School	Beechview Center
Chartiers Valley Intermediate School	Braddock Clean Up Day
Chartiers Valley Middle School	Braddock Community
Clairton School District	Braddock Community Day
Clairton Middle School	C.A.S.H. Club (McKees Rocks)
Clairton High School	Carnegie Community
Duquesne School District	Center North Senior Center
Duquesne Elementary	Chartiers Resource Center
Early Child Education Programs	Cheswick Community
Mount Ararat	Clairton Community
Brightside Downtown	Clairton Health Fair
Brightside East Liberty	Clairton School District Health Fair
Eastminster	Clairton School District Open House
Matilda Theiss	Commuity Days--City Housing PGH
Oakland Sunshine	Duquesne Community
Providence	East Liberty Community
Theiss Early Autism Program	Elizabeth Forward Community
East Allegheny School District	Etna Senior Center
East Allegheny High School	Father Ryan Arts Center (McKees Rocks)
Logan Elementary	Gateway School District Open House
Elizabeth Forward School District	Glenshaw Community
Elizabeth Forward High School	Greenway Profesional Development Center
Elizabeth Forward Middle School	Hayes Manor Community Center (McKees Rocks)
Fox Chapel School District	Hazelwood Senior Center
Dorseyville Middle School	Hill House
Fox Chapel High School	Homewood Community
Kerr Elementary	Homewood-Brushton YMCA
Gateway School District	"Hoop it Up" Basketball Tournament (Faison & Fulton)
Evergreen Elementary School	Hosanna House
Gateway High School	Housing Authority of PGH Community
Gateway Middle School	International Children's Village
Hampton Township School District	Jewish Community Center
Hampton Township High School	Kelly Strayhorn Theater
Hampton Township Middle School	Lawrenceville Center
Highlands School District	Lawrenceville Community
Highlands Elementary (Grandview)	Lifespan Community Program Extension
McKees Rocks School District	Lifespan Senior Center (Bethel Park)
Sto-Rox Primary Elementary	Malaika Learning Center
Sto-Rox Upper Elementary	Market House Center
McKeesport School District	McKees Rocks Community
Founders Hall Middle School	McKeesport Community

McClure Elementary School	McKeesport Good Neighbor Community Day
McKeesport Area High School	McKeesport Shelter for Boys/Girls
McKeesport Middle School	Mercy Behavioral Health
Twin Rivers Elementary	Meyers Ridge Community Center (McKees Rocks)
North Allegheny School District	Mon Valley Providers' Council
Bradford Woods Elementary	Natrona Heights Community
Carson Middle School	Northside Christian Health Center
Franklin Elementary	Office of Child Development (Homewood)
Hosack Elementary	Ohio Valley General Hospital (McKees Rocks)
Ingomar Elementary	PA Training & Technical Assistance Network
Ingomar Middle School	Penn Hills Community
Marshall Elementary	Penn Hills Senior Center
Marshall Middle School	PGH Citi Parks Art Roving Cart
McKnight Elementary	PGH Junior Achievement Career Fair--Monroeville
North Allegheny Intermediate High School	PGH Summer Dreamers Program (Arlington)
North Allegheny Sr. High School	Plan for a Healty Allegheny (Manchester)
Peebles Elementary	Plum Community
North Hills School District	Plum Senior Center
McIntyre Elementary	Project Launch (Manchester)
North Hills High School	Propel Schools
Ross Elementary	Providence Family Support Center
Penn Hills School District	"Reach Up" Union Baptist Church (Swissvale)
Linton Middle School	Riverview Community Action Corp
Penn Hills Elementary	Sacred Heart--Summer Day Camp Location
Penn Hills High School	Saltworks Theater Company (Oakland)
Pittsburgh Public School District	Shuman Detention Center
Allegheny Traditional Academy	South Allegheny School District Open House
Arlington Elementary	St. Colman's Catholic Church (Turtle Creek)
Arsenal Elementary	Steel Valley Community
Arsenal Middle School	Stephen Foster Community Center
Banksville Elementary	Swissvale Senior Center
Beechwood Elementary	Tarentum Community
Brashear High School	Tobacco Free Allegheny Coalition Meetings
Brookline Elem	Turtle Creek Senior Center
Brookline Middle School	UPMC McKeesport Hospital
Carmalt Elementary	Urban League Family Food Event--PGH Convenetion Center
Carrick High School	Veteran's Place
Colfax Elementary	West End Center
Concord Elementary	West Mifflin School District
Conroy Education Center	Wilkinsburg Community
Dilworth Elementary	Wilkinsburgh Borough (community meetings)
Faison Elementary	Woodland Hills Community
Fulton Elementary	Youth Mental Health 1st Aid (Manchester)
Grandview Pre K-5	
Greenfield Elementary	
Imani Christian Academy	
Langley Elementary	
Lincoln Elementary	
Linden Elementary	
Manchester Academic Charter School	
Manchester Elementary	
Martin Luther King Elementary	

Miller Pre K-5
Milliones 6-12
Minedeo Elementary
Oliver Citywide Academy
Perry High School
Phillips Elementary
Pioneer Elementary
Pittsburgh Classical Academy
Pittsburgh Langley Elementary
Pittsburgh Miller Elementary
Pittsburgh Montessori
Pittsburgh Morrow Elementary
Pittsburgh Morrow Intermediate
Pittsburgh Obama
Roosevelt Elementary
Schiller Middle School
Sci-Tech Academy
Sister Thea Bowman Academy
South Hills Middle School
Spring Hill Elementary
Sterett Middle School
Student Achievement Center
Sunnyside Elementary
Taylor Alderdice High School
University Prep High School
University Prep Middle School
Weil Pre K-5
West Libery Elementary
Westinghouse
Westwood Elementary
Woolslair Elementary
Plum Borough School District
Plum Senior High School
Center Elementary
Holiday Park Elementary
Pivik Elementary
Shaler School District
Shaler Elementary School
Shaler High School
Shaler Middle School
South Allegheny School District
South Allegheny Elementary School
South Allegheny High School
South Allegheny Middle School
Steel Valley School District
Barrett Elementary
Park Elementary
Steel Valley High School
Steel Valley Middle School
Wilkinsburg School District
Kelly Elementary
Woodland Hills School District

Edgewood Elementary School
Wilkins Elementary School