



Allegheny County Department of Human Services

RFQ Response Form

RFQ for Student Assistance Programs

APPLICANT INFORMATION

Applicant Name: UPMC Presbyterian Shadyside d/b/a UPMC Western Psychiatric Hospital
Herein known as UPMC Western Behavioral Health Student Assistance Program (UPMC WBH SAP).

Authorized Representative Name & Title: Paula McCommons, EdD., LPC, SAP Behavioral SAP Liaison/Supervisor and Psychological Services Manager

Telephone: [REDACTED]

Email: [REDACTED]

Website: www.upmc.com

Legal Status: For-Profit Corp. Nonprofit Corp. Sole Proprietor Partnership

Date Incorporated: 1990

Partners and/or Subcontractors included in this Application: None

How did you hear about this RFQ? *Please be specific.* As a current SAP Provider, we were aware that we would need to re-apply. The RFQ was also mentioned at our last SAP Provider meeting on October 21, 2021.

Does your organization have a telecommunications device to accommodate individuals who are deaf or hard of hearing? Yes No

REQUIRED CONTACTS

	Name	Phone	Email
Chief Executive Officer	Deborah Brodine	[REDACTED]	[REDACTED]
Contract Processing Contact	Michael Kretz	[REDACTED]	[REDACTED]
Chief Information Officer	Jeana Colella	[REDACTED]	[REDACTED]
Chief Financial Officer	David Bobrzynski	[REDACTED]	[REDACTED]
MPER Contact*	Dann Susko	[REDACTED]	[REDACTED]

* MPER is DHS's provider and contract management system. Please list an administrative contact to update and manage this system for your agency.

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BOARD INFORMATION

Provide a list of your board members as an attachment or in the space below.

Board Chairperson Name & Title: G. Nicholas Beckwith III, Chairperson

Board Chairperson Address: UPMC, 200 Lothrop Street, Pittsburgh, PA 15213-2582

Board Chairperson Telephone: [REDACTED]

Board Chairperson Email: [REDACTED]

REFERENCES

Provide the name, affiliation and contact information [include email address and telephone number] for three references who are able to address relevant experience with your organization. *Please do not use employees of the Allegheny County Department of Human Services as references.*

Elena Runco, Pittsburgh Public Schools Director of Student Support Services,
[REDACTED]

Patsy Kvortek, Riverview School District Jr./Sr. High Dean of Students and SAP Coordinator,
[REDACTED]

Tom Marquis, Upper St. Clair High School SAP Coordinator and School Counselor,
[REDACTED]

APPLICATION INFORMATION

Date Submitted 1/21/2022

Amount Requested: \$176,000.00

CERTIFICATION

Please check the following before submitting your Application, as applicable:

I have read the standard County terms and conditions for County contracts and the requirements for DHS Cyber Security, EEOC/Non-Discrimination, HIPAA and Pennsylvania's Right-to-Know Law.

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By submitting this Application, I certify and represent to the County that all submitted materials are true and accurate, and that I have not offered, conferred or agreed to confer any pecuniary benefit or other thing of value for the receipt of special treatment, advantaged information, recipient's decision, opinion, recommendation, vote or any other exercise of discretion concerning this RFQ.

Choose one:

My Application contains information that is either a trade secret or confidential proprietary information and I have included a written statement signed by an authorized representative identifying those portions or parts of my Application and providing contact information.

OR

My Application does not contain information that is either a trade secret or confidential proprietary information.

ATTACHMENTS

Please submit the following attachments with your Response Form. These can be found at <http://www.alleghenycounty.us/dhs/solicitations>.

- Allegheny County Vendor Creation Form
- Audited financial reports or other financial documentation for the last three years
- W-9

CAPACITY AND PREFERENCE

List your top three preferences for school districts that you would like to serve.

Our top three preferences for school districts to provide SAP services for would include: Riverview, Pittsburgh Public and Upper St Clair.

List your current SAP capacity, if any (e.g., how many school districts do you currently serve? How many SAP Liaisons do you currently employ?).

We currently employ two SAP Behavioral Health Liaisons who serve four school districts.

List your ideal SAP capacity (i.e., I currently serve 2 school districts, but I hope to serve 5).

Our ideal SAP capacity is currently being met with two SAP Behavioral Health Liaisons serving four school districts; however, with additional funding we may be able to serve an additional district.

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QUALIFICATIONS

Please respond to the following questions. The maximum score an application can receive is 105 points. Your response to this section should not exceed 15 pages.

Organizational Experience (25 points)

1. Describe your experience identifying children and families in need of mental health supports and connecting them to appropriate services based on your working knowledge of the mental health system in Allegheny County.

Our liaisons have more than 40 years of combined experience in identifying children and families in need of mental health supports and connecting them to appropriate services based on our working knowledge of and on-going professional development regarding the mental health system in Allegheny County. Specifically, we have decades of experience serving as mental health liaisons (now behavioral health liaisons), supervisors of SAP services, therapists in a variety of settings (school based, IBHS/formerly BHRS, residential) and school suicide prevention trainers/postvention responders reaching nearly all the school districts in Allegheny County. Currently our liaisons are contributing members of the UPMC WBH child service line.

Our liaisons have a minimum of a master's degree in a human service field and our SAP supervisor has a doctorate in Education and is an LPC. We are steadfast in securing continuing education and professional opportunities that deepen and broaden our liaisons' understanding of evidenced based practices and their working knowledge of the mental health systems in Allegheny County as they evolve. We maintain our professional membership to PASAP (PA Student Assistance Program) to keep abreast of current mental health developments and we have provided representation at the Allegheny County SAP Coordination Meetings and served with members of the OBH Children's Team.

Our liaisons also seek to identify and share with students and families support services that may be online or not directly related to the mental health system within the county such as The Trevor Project, Allegheny Family Network and NAMI. All these endeavors and activities continue to provide our liaisons with a solid foundation in the identification of mental health concerns involving youth and of the appropriate resources that are available within Allegheny County and without.

Each year our liaisons update their resource lists for families and note any changes to the continuum of care within the mental health systems in Allegheny County. Our liaisons are quick to reach out to one of the OBH School Based liaisons and/or the OBH Resource Guide for consultation. Through such collaborations, our liaisons have expanded their "tool kit" to include such specialty resources as a host family for youth returning from a DAS placement or medical wrap for youth that may have health related issues as well as behavioral health concerns. Thus, our liaisons can provide the children and families they serve with potentially more comprehensive supports in addressing mental health needs. Lastly, our liaison supervisor also has expertise in youth suicide prevention, intervention and postvention in schools through her work at STAR-Center Outreach

2. Describe your experience identifying children and families in need of drug and alcohol supports and connecting them to appropriate services based on your working knowledge of the drug and alcohol system in Allegheny County.

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Much of our liaisons' experience referenced in the previous section on mental health services overlaps with their experience in identifying youth and families who may be in need of drug and alcohol supports and/or services. Given the significant connection between substance abuse disorders and affective disorders, this is not surprising, and reflects the need for co-occurring treatment and support resources. More specifically, our liaisons' extensive experience in youth suicide prevention, intervention and postvention has heightened their awareness of, and response to, the connection between youth suicide and substance abuse, especially when the use is sudden or increased.

Over the years, our liaisons have worked with families to identify the more pressing issue between the student's drug and alcohol use and their co-occurring mental health issues. When the student has been unwilling to access D/A services, our liaisons have worked with families to initiate Act 53 proceedings. They also keep up to date on support resources such as POTADA and Bridges to Hope. In light of the challenges related to the current Pandemic, our liaisons have familiarized themselves with on-line supports (i.e., for those in recovery such as AA, or those with a loved one who has an addiction such as Nar-Anon or Nacoa), the rapid assessment centers that were identified in the county to provide level of care assessments (virtually or in person) as warranted and the newly launched service coordination specifically for transition age youth in the county with substance abuse concerns.

We also have liaisons with certifications in tobacco cessation (My Life My Quit and Tobacco Free Allegheny) and expertise in reducing/preventing vaping use among youth. As in supporting our youth and families with mental health concerns, our liaisons often provide presentations to students and parents/guardians on the identification, prevention and intervention of substance use/abuse trends.

Since our last RFQ application, our liaisons have familiarized themselves with Opioid Prevention specific resources in response to the Governor's Opioid Epidemic proclamation including promoting the "Get Help Now" warm-line to staff, students and families whenever possible and consulting more with our D/A County Representatives on behalf of students and families. Our liaisons make every effort to identify specific resources for families such as easily accessed take back medication locations.

In addition, our liaisons' knowledge of the drug and alcohol system within Allegheny County comes from their experience in working with youth who were adjudicated and were court mandated to attend treatment programs as part of the terms of their probation such as the in-home programs with Shores or residential programs affiliated with Auberle. Our liaisons also have experience with students who are referred to SAP through district drug and alcohol policy violations and required to receive an evaluation before returning to school and/or participate in a prevention group.

Throughout their SAP careers, our liaisons have collaborated with Drug and Alcohol colleagues within our own Addiction Medicine Services, other Drug and Alcohol provider agencies (i.e., TCV, Mercy, Pyramid) as well as representatives from the Allegheny County D & A Services. If given the opportunity our liaisons will continue to collaborate with all children serving systems in Allegheny County.

3. Discuss your experience working in schools or with school-aged children and their families, including school-aged children and families from diverse backgrounds.

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Our SAP Behavioral Health Liaisons have specialized in working in schools with school-aged children and families for all of their combined 40+ years of experience. In serving on more than twenty SAP Teams in Allegheny County over the years, our SAP Behavioral Health Liaisons have worked in urban and suburban school districts throughout the county, including the largest and most diverse urban district, one of the most affluent suburban school districts, and another district that is housed in one building. Within these various school settings, we have experience working with students and families who represent not only diverse socio-economic and racial backgrounds, but also those who may be refugees, immigrants, homeless and/or represent a SOGIE minority. We have used interpretation, translation and hearing services as needed to communicate more effectively with students and families. In addition to participating in annual back to school parent orientations, Open Houses and PTO/PSCC meetings to review and promote SAP services, we have also participated in activities to promote diversity and the SAP by participating in Multi-Cultural Celebrations representing SAP and presenting on SAP services to parent/guardian groups whose children have IEPs. Together our liaisons have directly worked with more than 2,500 SAP-referred students and their families and thousands more students through classroom presentations and grade level orientations on the SAP. In an effort to strengthen our service delivery to youth and families from diverse backgrounds, our liaisons participate in our UPMC Child Operations Leadership Team's Intentional Anti-Racism Workgroup.

Service Delivery (50 points)

4. Describe your plan for providing screenings within 30 days of the SAP Team's recommendation for screening. What obstacles do you foresee in completing screenings in a timely manner and how will you overcome them?
Please note that many of the responses to the questions asked hereafter are also outlined in our "UPMC WBH SAP Guidelines" which will be forwarded upon request.

Our plan for providing screenings within 30 days of the SAP Team's recommendation for a screening includes meeting with the student as close to the same day as the consent is received to introduce our liaison, the screening process and address any questions. This process is facilitated by asking our SAP Coordinators to text/email our liaisons as soon as they receive a consent. Our intention is to have the student make an initial connection with our liaison and become invested in the follow-up meeting to complete the screen. After this initial meeting, our liaison works with the student to identify their preferred time to meet for the screen. If the student is willing, the screening may happen the same day. For younger students, our liaison will often speak with teachers of the student and arrange an opportunity to observe the child in the classroom. To operate within the principles of an informed trauma care interaction, our liaison will have an adult the child is familiar with, such as the school counselor, introduce our liaison. To minimize "no shows," our liaison may call the parent ahead of time to notify them of the day the screening will occur so that the parent can make sure that the student is not absent. In addition, our liaison will let the student know that if they forget to come for their meeting their classroom teacher may be contacted to send them to the office. For all the schools our liaisons serve it is the standard procedure to call students to the main office and/or guidance office for a variety of reasons, thus privacy is maintained, and our liaison has an opportunity to still screen the student. Our liaisons remind students that the screening is voluntary, and they can choose not to participate at any time. Our liaisons also remind students that agreeing to participate provides them an opportunity to share their perspective and shows their willingness to cooperate with the process that their parent/guardian has already authorized.

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Our liaisons record when SAP consents are received and note in their calendars the date to complete the screen. Although ideally screenings would take place in the school building, the current Pandemic has necessitated the need for virtual screenings. Our liaisons will make every effort to accommodate the preferences of the student and parent regarding the location of the screening (i.e., in-person/mask-mask, virtually or by phone). In the event a screen cannot be completed within the 30 days, our liaisons will notify the SAP coordinator and the parent to trouble shoot and identify other options. Resolve services are shared with all students and parents for interim support. Any delays extending beyond 30 days will also be noted within the CANS.

To preemptively address any obstacles related to screening students within 30 days, we develop and review the Letter of Agreement with each school building/SAP Team as close to the start of each school year as possible. This meeting includes identifying when, where and how screenings will be conducted within the building and remotely if needed. We highlight the necessary paperwork needed to conduct a screen – a completed consent form for the SAP process and screening, teacher, student, parent feedback if completed, and the student profile/schedule. We also review the school calendar for holidays, testing, in-service days and the process in place for delays. Unless supporting a postvention, we make sure that all the SAP Teams we serve, are aware that our priorities are participating in SAP Team Meetings, completing screenings within 30 days and providing follow-up to students/families awaiting services once screened.

Even with these plans in place, the primary obstacle we have experienced and foresee is the attendance of the student for whatever reason (i.e., a fire drill, class cut or quarantine). One strategy that we have found particularly useful, especially when there are multiple students to potentially screen within a day, is to contact the school regarding the student's attendance for that day. Our liaisons can then quickly adjust their schedules as needed. The Pandemic has afforded us opportunity after opportunity to be flexible and anticipate changes in the way we deliver our services. We humbly and gratefully admit that in all but a handful of referred students over the decades, every student has agreed to participate in the SAP screening after parent permission was obtained.

5. Describe your plan for involving diverse families in initial SAP activities, especially your approach to engaging with parents.

Our plan for involving diverse families in initial SAP activities, especially when engaging parents/guardians is to be as culturally competent and sensitive as possible. From a practical perspective this includes making sure any language or access issues are addressed (i.e., the need for the translation of SAP brochures/consent forms and/or an interpreter to facilitate the gathering of parent/guardian information or sharing recommendations.) This may also include calling/meeting with parents/guardians at certain times of the day or not (i.e., not contacting families during the Sabbath). With the constraints of the Pandemic, we are mindful of parents/guardians who may have access issues related to physical transportation, immune compromised health issues and/or Wi-Fi limitations.

With all parents/guardians, we will seek “to meet them where they are” both in terms of how they would prefer to communicate (i.e., in person, email, virtually) and with regard to their familiarity, experience and concerns with the school, SAP and/or behavioral health services (i.e., some cultures focus on mental wellness and not mental health). With all parents/guardians we will seek to provide ample opportunity to listen to their concerns, validate their experiences and respect their

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suggestions. In particular, for parents/guardians from diverse backgrounds we seek to educate our liaisons on the challenges of racism, and equity when families from multi-cultural backgrounds seek to access services. Furthermore, the UPMC WBH Operations Leadership Team has convened an Intentional Anti-Racism Workgroup that has been active since the beginning of 2021 and actively engage all members of the team to ensure that our services are delivered through the appropriate cultural perspective.

Our approach to engaging with parents includes incorporating many of the recommendations that were highlighted at the 2016 PASAP conference on “SAP and Parent Engagement.” Our integrated approach includes: reaching out to parents at times that are convenient for them, which may include evening phone calls and/or the use of an interpreter, thanking them up front for signing the SAP consents, clarifying any questions about the SAP process, establishing common goals with the parent regarding their teen’s behavior (i.e., ultimately having their teen graduate high school), allowing time to inquire how parents are doing and acknowledging how challenging it is to parent and provide for their family, and identifying if they are in need of support or assistance in accessing services/resources.

All these conversations provide an opportunity for our liaison to connect and ally with the parent as another caring adult in their son or daughter’s life. It also gives our liaison an opportunity to acknowledge, that in spite of previous efforts there is “no one way” or “one size fits all” and that regardless of previous outcomes, we want to be part of the student’s and parent’s team in trying again. If a parent has never sought services before for their child/teen, extra time and sensitivity may be required to address the parents shock and fear. For parents who are initially not interested in recommendations or perhaps upset with recommendations, our liaison will “meet parents where they are at” and seek to at least establish a partnership with the parent so their child may be successful by revisiting options at a future date. Regardless of diverse backgrounds, offering help that is realistic and attainable is a significant protective factor, and enhances resiliency for all involved.

6. As stated in the RFP, DHS expects that Qualified Applicants will collaborate with the existing network of human service providers in Allegheny County to find service(s) and assistance that best fit the needs of the student and family even if the Qualified Applicant offers the needed service(s) and assistance themselves. Qualified Applicant’s only priority in making referrals should be the best interest of the student and family. Describe your plan for ensuring that students and families are connected to the kinds of services and supports that best meet their needs.

Our plan for ensuring that students and families are connected to the kinds of services and supports that will best meet their needs includes conducting a thorough CANS Assessment and taking time to gather parent input and history. We remind students and families that they have choices throughout the SAP process. Our liaisons will check in with both the student and parent/guardian to see if their choice is effective and offer to revisit other options as needed. In the course of our contacts with students and families we will also try to identify supportive and protective resources to enhance behavioral health services in and out of school (i.e., Boys and Girls Clubs and Manchester Craftsman’s Guild). Whenever possible, we will encourage students and families to utilize the appropriate level of service coordination to assist them in addressing their current needs and to access future behavioral health services/supports as they may arise.

In addition, we will continue to collaborate with the existing network of human service providers in Allegheny County by keeping up to date on resources and consulting with OBH School Based Liaisons

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and program supervisors such as Life Project as needed. Our liaisons will also continue to enhance their knowledge base related to evidence based and informed practice treatment approaches that have been shown to effectively impact behavioral health issues including those from diverse backgrounds. Thus, our liaisons may better guide families to appropriate services and to assist them in identifying the “right” questions to ask when seeking treatment providers (i.e., “Is the therapist familiar with cognitive behavioral therapy to address adolescent depression and suicidal behavior?”).

7. How will you incorporate student and family choice into your referral process? After you make your recommendation for treatment or other services, what is your plan for providing students and families with the information they need to make the best choice about how to proceed (e.g., which provider to use, which level of treatment to accept).
At the very onset of the SAP process our liaisons begin by reminding students and families that there is “no one answer or resource,” and that they have a choice to choose or not choose throughout the process and can change their mind. We also remind them that we are not “offended” if they come back to us and say a particular resource was not a good fit. Our liaisons do their due diligence to remove as many barriers (i.e., location) and preferences (i.e., faith based) as possible that are identified through the course of the CANS screening. We will continue to incorporate student and family choice into our referral process by offering a resource option letter that has numerous options. Our resource option letter includes treatment and support services; however, it is our understanding that per state SAP guidelines, liaisons screen to determine if a further evaluation is recommended, not to refer for treatment unless their letter of agreement states that they are conducting assessments. Thus, on our recommendations and resource sheet we indicate to the parent if a further evaluation is recommended to assess their child/teen’s behavioral health issue and then identify at least three options they might consider. In making this recommendation, our liaisons consider the family’s insurance, location, waiting lists and need for any specialty clinics such as the Center for Traumatic Stress. If commercial insurance is an option, additional private practice options may be shared based again on such factors as availability, accessibility, experience with the identified issue and demographics of the practitioner. Whenever possible, we will provide students and families with supplemental materials such as brochures and web sites to assist them in the choice process.
8. Describe your plan for supporting families after a referral has been made. How will you facilitate their connection to and support them while they receive treatment or other services. Our plan for supporting families after a referral includes checking in with students and families within two weeks after recommendations are shared and then periodically thereafter such as at the end of a quarter, the semester break and/or at the end of the year before summer vacation. Our liaisons establish the best times/means to follow up with students (i.e., which class period, via Teams chat) and parents/guardians (i.e., via phone evening phone call, secure text or email). Even before sharing recommendations with a parent, as necessary, our liaisons will attempt to trouble shoot any barriers to access by calling potential providers ahead to ascertain availability, confirm appropriateness of the potential referral and to verify the referral process. This “trouble shooting” is done without identifying details of the student or family. Given the national and local crisis due to the lack of behavioral health providers, our liaisons have increased their “trouble shooting” efforts by staying vigilant in searching for available treatment and support services (i.e., identifying virtual options in other parts of the county/state or drop-in centers like Up Street). We also remind students of our back up support until their services start and encourage them to be honest if the initial service is not “a good fit”. Currently this follow up support may be virtual and/or at school.

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We have found that this type of support and communication greatly enhances the relationship between our liaisons and referred students resulting in students being more invested in the SAP process and participating in recommendations.

We encourage parents/guardians, for those students under 14, to sign a ROI with their treatment provider to enhance in-school support after services are started. To facilitate the communication between treatment or other service providers and students who are over 14, our liaisons may arrange a conference call so the student can directly share feedback as needed and address any areas of concern regarding accessing or continuing with services. Our liaisons will check in with the student and/or parent within two - three weeks to verify that the resource is a good fit, and to review the need for any additional supports in or out of school. As with students, our liaison reminds and encourages parents to reach out to us if there are any concerns or need for additional supports. Again, part of our plan to increase the likelihood of referral follow through is for our liaison to establish a helping connection with families so they are invested in the SAP process and view our liaison as a sincere link to services now and in the future. Although our liaisons' primary focus is on accessing appropriate services for the referred student, research indicates that if caregivers, especially mothers, are not receiving appropriate services for their own behavioral health issues, then the teen is likely to relapse with their symptoms. Thus, in establishing a connection with the student's parent, our liaisons are also able to encourage the parent to access their own services or support.

With all students and families, our agency seeks to normalize help seeking behavior and to empower individuals to access services and resources across their life span. We often remind students and parents that in high school we have SAP, in college there may be Student Services and in the work world they may call it Employee Assistance. We also educate all students and families on crisis (i.e., resolve and national crisis line) and consultation resources (i.e., Allegheny Family Network and The Child Mind Institute) that are available in our county and nationally. Again, all these efforts are an attempt for our agency and liaisons to inform students and families that help is available and that the help may take many forms. We strive to be part of the student and families "team effort" in removing barriers to learning and enhancing the wellbeing of all involved.

9. Scenario 1:

Mia is a 9-year-old female Latina student attending elementary school in a suburban school district in Allegheny County. Mia was referred to the SAP program by the school social worker for poor school attendance, homelessness, rapidly declining grades and withdrawn behavior in the classroom setting. Prior to the COVID-19 pandemic, Mia had never been referred to SAP.

School staff have had several meetings with Mia's mom regarding her grades, behaviors and attendance. At the most recent Student Attendance Improvement Plan meeting, the family disclosed that they were homeless and living with a family friend in a neighboring school district.

Mia displays poor social skills and anxiety in the classroom. She has trouble focusing and recently disclosed to the school counselor that she "doesn't know why she was born." In addition, during a warm-up activity in English Language Arts, Mia described feeling extremely sad, scared for her family and not being able to understand the activity.

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Please describe in detail, referencing all four phases of the SAP process, how you would proceed with this referral from the SAP team. Please include possible referral recommendations based on concerns described.

In keeping with the SAP referral process, as outlined on the PNSAS website under “What is SAP?” of (Phase 1 – Identification & Referral, Phase 2- Team Planning, Phase 3-Interventions & Recommendations, and Phase 4- Support & Follow up), Phase 1 has already taken place with the school social worker making a referral to the SAP Team based on observable behaviors of concern. Ideally our liaison would have participated in Phase 2 by contributing to the SAP Team’s discussion (i.e., reviewing teacher behavior checklists), that would lead to the determination that a screening would be in Mia’s student plan.

As part of Phase 3 our liaison would proceed by confirming that the SAP consents were signed, that there was permission received to screen Mia and for the screening recommendations to be shared with the SAP Team and that the parent questionnaire was completed. We would also confirm that no translation or interpretation services were needed for Mia or her mom. During Phase 3, our liaison would seek to meet with Mia’s teacher and observe Mia in class. Our liaison would also see if Mia’s school counselor or social worker could make a “warm introduction” between Mia and our liaison. Our liaison would adhere to informed trauma care practices in meeting with Mia (i.e., reassuring her that she was safe and not in trouble, that her mom gave permission for them to meet, that we would be speaking with her mom, that she did not have to share anything that she did not want to and review the limits of confidentiality in age-appropriate language). We would also repeat that our job is to help students and families to get help in and out of school as needed. If possible, our liaison would provide food or drink to Mia and provide “finger toys” for Mia to use while participating in the screening process. During the course of the conversation, our liaison would assist Mia in trying to identify some of her natural supports, review some resiliency builders, identify her biggest areas of concern and review resolve services. Our liaison would use the opportunity of meeting with Mia to develop a connection as a caring adult for her, so that she might feel more inclined to follow through with the recommendations and to be receptive to Phase 4 with continued support and follow up by our liaison and/or other school supports (i.e., SAP case manager to check in with Mia). As part of Phase 3 our liaison would identify a convenient means to contact Mia’s mom to review her concerns and preferences and to share our initial recommendations. We would remind Mom that she has choice in selecting next steps and can change her mind at any time. After speaking/meeting with Mia’s mom, our liaison would provide the recommendations to her in writing per her preference (i.e., in an envelope with Mia to take home, mailed to where she is staying and/or text a picture) and establish a timeframe for the follow up in Phase 4. Also, during Phase 3 our liaison would provide an update to the SAP Team on in and out of school recommendations.

During Phase 4, our liaison would check in with Mia and her mom within one to two weeks to assess the status of the resources and supports, both those in and out of school. Our liaison would continue to monitor Mia’s quarterly and/or at semester intervals via the SAP Team meetings and/or her school counselor/ SAP coordinator. As part of the quality assurance plan, our liaison would reach out to Mia and her mom to complete a mid-year or end of the year survey on their experience with our SAP services. For younger students this may include a face-to-face meeting with our liaison for “thumbs up, in the middle, down” feedback and for parents this may include a mailed survey, email link or phone call. Our liaison would need to assess the most appropriate means to reach out to Mia and her mom at that time depending on their living situation.

Possible Referral Recommendations based on the concerns raised would include:

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- An evaluation to assess Mia’s mood (anxiety and possible depression “I don’t know why I was born”) – In making this recommendation our liaison would discuss with Mom any insurance needs and could possibly recommend Life Project; At a minimum if school-based therapy was an option we would facilitate this referral so Mia could begin to develop skills to manage her anxiety
- Considering a service coordination referral if Mom is receptive
- Confirming that a referral to the District’s Homeless Coordinator has been made
- Clarifying if a Focus on Attendance Referral was warranted
- Establishing potential in-school supports (i.e., A SAP case manager to check in with Mia, a lunch bunch to help Mia with her social skills, and/or academic intervention to strengthen her ELA skills)
- Encouraging Mom and Mia to continue to participate in the SAP
- Following up with or identifying a PCP/pediatrician for Mia – if insurance is an issue one of the Federally Funded Health Centers may be appropriate
- Exploring other resources with Mom as indicated (i.e., 211, The Latino Family Center, Allegheny Family Network, and the National Children’s Traumatic Stress Network)
- Reviewing resolve services and national crisis text line
- Confirming with Mom that she had a means to reach out to our liaison with any questions

10. Scenario 2:

Michael is a 15-year-old student attending Brown High School. Michael’s preferred pronouns are he, his and him. Michael was born female and his parents have not been accepting of his transition. They continue to use his given name, Michelle, and female pronouns, and routinely state that Michael is simply “going through a phase.” Michael was referred to SAP by his school counselor due to missing several days of school and being caught on school grounds with a vape, resulting in a suspension.

Michael reports he has only used the vape once experimentally, did not like the experience and would not do it again. Michael’s grades have suffered this year and his teachers report his behavior has been more withdrawn than in the past. His school counselor reports that Michael lost a few friends who were not accepting of his transition and has struggled to make new friendships. Michael has mentioned spending time with older individuals outside of school who he reports are more accepting. He becomes closed off when talking about these older friends or where he met them. Michael’s parents have been in communication with the school regarding his declining grades and recent suspension. The school was able to obtain signed SAP permission from parents following the suspension.

Please describe in detail, referencing all four phases of the SAP process, how you would proceed with this referral from the SAP team. Please include possible referral recommendations based on concerns described.

In keeping with the SAP referral process, as outlined on the PNSAS website under “What is SAP?” (Phase 1 – Identification & Referral, Phase 2- Team Planning, Phase 3-Interventions & Recommendations, and Phase 4- Support &Follow up), during Phase 1 Michael was initially referred by his school counselor to the SAP Team for attendance and a policy violation. Ideally our liaison would be a part of Phase 2 and the SAP team planning resulting in the consents to participate in the SAP and to participate in a screening. During Phase 2 our liaison would clarify the details of the

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referral and the expectations of Michael and his parents regarding the screen (i.e., how does Michael prefer to be addressed when others speak to his parents regarding him? and do Michael's parents think they "had to agree" to the screen because it was a policy violation?). Before proceeding with Phase 3 our liaison would clarify that Michael gave permission to share any drug and alcohol recommendations with his parents, if there were any, as well as his parents' signing permission for communications between our liaison and the SAP Team. Our liaison would review all the consents, and parent questionnaire before proceeding to Phase 3.

During Phase 3 our liaison would be mindful of the special considerations and precautions to employ when screening a student whose SOGIE (Sexual Orientation, Gender Identity and Expression) differ or are not supported by their parent/guardian. In meeting with Michael, our liaison would review the limits of confidentiality as well as their intent to support Michael in what he shares with his parents regarding his SOGIE status. As instructed during our CANS training, our liaison would discuss with Michael, especially since he is over 14, what would be "in writing" and what could be documented elsewhere regarding his SOGIE. Our liaison would role play with Michael potential ways to communicate with his parents regarding his transition and seek to identify supports for Michael as well as his parents. With regard to Michael's involvement with older individuals our liaison would try to determine if there were any reportable safety concerns. In developing support recommendations with Michael, our liaison might explore other outlets, both in and out of school, (i.e., school Allies club or Persad teen drop in center). If Michael had concerns about his parents not approving of such resources, our liaison would ask Michael how he would like these resources shared with him (i.e., take a picture of a website).

During the screening, our liaison would work with Michael to identify his natural supports, resiliency builders and to review resolve crisis prevention and intervention services. In addition, our liaison would use the opportunity of meeting with Michael to develop a connection as a caring adult for him, with the intention then that he might feel more inclined to follow through with any recommendations and be receptive to follow up and support in Phase 4 by our liaison and/or school staff.

In communicating with Michael's parents to complete the CANS and generate recommendations during Phase 3, our liaison would first identify common ground (i.e. the screening meets the requirements of the policy violation and may rule out any self-medication concerns the parents may have of their teen for now). Our liaison would make every effort to respect the pronouns and name that Michael chose for us to use in speaking with his parents. If this differed from that of his parents, then our liaison would attempt to use neutral references such as "your teen." Our liaison would attempt to validate how the parents might see their daughter's transition as a "phase," and then gently suggest resources (i.e., PFLAG) to inform them on the needs and challenges of youth who are transitioning. We might also suggest that Michael's parents have a conversation with their PCP as a starting point to discuss their assumption that Michael's transition is a phase. In addressing any mood issues that may be identified during the course of the CANS with Michael's parents, our liaison may also share salient research on the connection between depression, unsupported GLBTQI youth and suicidality. As warranted, if there are any indication by Michael or his parents that he was being abused or would be "thrown out" of his house for transitioning, then our liaison would consult with Child Line/CYF and their supervisor.

Also, during Phase 3, our liaison would share any recommendations that they were permitted to share with the SAP Team based on the permission of Michael and/or his parents. Depending on the

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school, the recommendations to the Team could be in person, via a secure email or in contacting the SAP coordinator. School interventions identified during the SAP Team meeting might include assigning a case manager for weekly check-ins with Michael and connecting him with potential activities of interest.

During Phase 4, our liaison would check in with both Michael and his parents within one to two weeks to assess the status of the recommendations and resources that were shared. Again, our liaison would be sensitive to what and how they shared follow-up information with Michael and his parents. Our liaison would also provide an update at subsequent SAP Team meetings, as permitted, and confirm the status of school supports. As part of our quality assurance plan, at some point during the school year, our liaison would reach out to Michael and/or his parents for their feedback on their experience with the SAP and our support.

Possible referral recommendations based on the described concerns might include the following:

- A “rule out” evaluation to assess any underlying mood issues; if available, consider school-based therapy as a basic level of support at school to assist Michael in navigating his friend groups in and out of school
- Considering service coordination to assist Michael in accessing behavioral health supports as needed
- Identifying resources, in and out of school, that Michael can safely explore to support him with his transition (i.e., Allies, The Trevor Project, Persad)
- If open to it, share support resources with Michael’s parents on supporting GLBTQI youth (i.e., PFLAG, The Pittsburgh Equality Center, Hugh Lane Wellness Foundation – Supporting the foundation of the LGBTQ+ and HIV communities in Western Pennsylvania)
- Encouraging both Michael and his parents to continue participating in the SAP
- Having Michael and/or his parents consult with their PCP or consider a consultation with the Children’s Hospital Gender Clinic

11. Describe why the SAP program is important and your vision for an SAP liaison’s relationship and work with school staff, students and families.

The Student Assistance Program is important not only because it is a state mandate for all public-school entities in PA, but because it is an integral component of the over-arching, comprehensive MTSS (Multi-Tiered Systems of Support). Whereas PBIS (Positive Behavioral Interventions & Support) and RTII (Response to Intervention and Instruction) address behaviors and academics respectively, SAP provides the linkages to needed behavioral health supports. The SAP provides an effective infrastructure, to promote prevention, intervention and referral for behavioral health services which ultimately impacts all Three Tiers of Support within MTSS (universal, targeted and intensive) thereby assisting in removing not only potential barriers to learning but also enhancing a student’s over all wellbeing.

Our vision for our SAP Liaisons relationship and work within a school district would include the comprehensive education and promotion of SAP services to all constituents, school staff, students, and families. As a member of the SAP team, we would strive to have all members of the school community not only be familiar with the SAP process, but to have such a positive association with SAP that, depending on their role, they would refer a student, a teen, a peer or themselves for assistance. Ultimately, we would hope that the SAP be viewed as a vital component of the overall safety net and protective web within the school community by strengthening natural supports, identifying and removing barriers to learning, and assisting students and families with accessing

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appropriate services and resources. Overall, our vision for a SAP Liaison's relationship with school staff, students and families, is for them to be viewed as an educator, collaborator, and supporter of behavioral health. Specifically with the school staff, which would include staff members beyond the SAP team, our liaison would provide consultation regarding general behavioral health issues of students and offer targeted suggestions regarding referred students as SAP consent permissions indicated. With regard to our liaison's relationship with students in general, we would envision their role as one of a caring and informed adult who would be a warm and friendly presence in the building that would educate students on the SAP. With students for whom our liaisons have permission to screen and support, we see our liaisons' relationship as "professional back up." Our liaisons would provide skilled support for referred students as they are in the process of accessing services or are already receiving services. Ideally, we would want the families to describe their relationship with our SAP liaison as one of empathy, information, empowerment and support. With all SAP constituents, (staff, students and families), our SAP liaison is to serve as a link to provide behavioral health information, to assist in the access of appropriate services, provide interim support to students/families and to increase protective factors.

12. Describe your plan for providing postvention services. How would you respond if a school district requested a postvention in the summer months?

Our plan for providing Postvention is outlined in our "UPMC WBH SAP Guidelines" and in our letters of agreement with the school districts we serve. Per the OBH County SAP requirements, we provide postvention for all buildings in the four school districts we serve including over the summer months. In addition to the five Pittsburgh Public Schools we provide SAP/Postvention services for, we also provide postvention services to three schools that do not currently have SAP services.

Our plan includes completing and submitting the Postvention Plan Flow Chart that the County School Based Liaisons distribute each school year prior to the start of the school year. This flow chart outlines the communication (identified individuals and their contact information) between the school district, agency and county. As soon as we are aware of a loss or incident requiring a postvention response from our school contact, our liaison would notify their supervisor and county contact. If the postvention response requires more than three days, we would contact the county to obtain permission to provide further assistance.

During the summer months our liaisons would respond to a postvention request by a district as they would during the course of the school year; however, if not all of our liaisons were available to assist due to vacations, we would also connect the district with resolve services and reach out to our UPMC-Mon Yough SAP colleagues for additional supports. At the end of summer, our liaisons would check in with the district to triage the appropriate follow up and monitoring of identified students who may need SAP support in the subsequent school year.

13. How will you maintain a strong relationship with the school you serve and be dynamic, flexible and responsive to their needs?

Our UPMC WBH SAP will maintain strong relationships with the schools we serve and be dynamic, flexible and responsive to their needs by continuing to meet with key personnel before the school year begins to exchange preferred contact information, review expectations and update any procedural logistics that may impact the delivery of SAP services. The majority of this process will occur during the development of the Letter of Agreement with each school district. In the past, we have found that sharing the content of the letter of agreement with not only central office personnel but also the SAP coordinator and other SAP team members of each building proves to be

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very useful in eliminating confusion around our liaison role and in enhancing the concept that we are a team. It also affords our liaisons an opportunity to connect with our SAP colleagues as individuals and not just with their job title.

Our liaisons' professional practice, (i.e., returning phone calls and emails the same day whenever possible, offering alternatives when they are not able to comply with requests to participate in events such as a panel to address bullying for a student assembly or by informing the district of new resource options to address Act 71 training needs for faculty), demonstrates their commitment to the district. Furthermore, we have also found that trying to establish relationships with the ancillary staff (i.e., office clerical staff, custodians, etc.) in the buildings we serve, greatly facilitates our liaisons' ability to maintain connections within the school and allows our liaison to trouble shoot logistical issues in a timely way (i.e., identifying the best time to contact an administrator, printing a student's new schedule or unlocking office space). Finally, one of the most powerful ways we have found to demonstrate our dynamism, flexibility and responsiveness with a school is to "be there" to provide postvention services. There can truly be a "team bonding" forged through the sharing of a traumatic experience. We model to our SAP colleagues and school community that they are not alone in their postvention response(s) and that regardless of tragedy or role, it is how we cope that makes the difference.

Staffing (10 points)

14. Describe your plan for recruiting and retaining qualified and diverse staff, including your plan for filling staff vacancies in a timely way.

Our plan for recruiting and retaining quality staff includes providing competitive compensation and adequate support, which may include additional trainings, supervision or flexible comp time. Thus far, this process has worked as evidenced by the fact that our primary liaison is still serving students and families after nearly three decades. Our expansion efforts have been dictated by our limited SAP allocation.

Our agency is committed to supporting the SAP in Allegheny County and would make every effort to uphold our commitment to fulfill our contract with school districts and to fill vacancies in a timely way. To that end, our agency strives to maintain a pool of qualified and SAP certified individuals who could provide assistance until a permanent replacement is identified. This could include partnering with our UPMC-Mon Yough SAP colleagues. Additionally, as being part of the larger UPMC system, we can always work within our child service line to explore additional qualified candidates if the need presented. As an agency, we work closely with our human resource department in the recruitment and retention of qualified staff and diverse staff. We require a minimum of a Masters Degree in a human service related field and at least five years of experience working with youth and families. UPMC adheres to their "Equal Employment and Non-Discrimination Policy". Regarding recruiting a diverse staff, we actively seek to provide interview opportunities to under-represented groups. Our agency would revisit and expand its recruitment efforts if the SAP county funded allocation could support the expansion.

15. Describe your expectations for SAP staff.

We expect our SAP staff to follow all state SAP guidelines for liaison qualifications as well as completing all on-going training mandates as required by the state, county and our agency. With regard to conduct, we expect our liaisons to perform their SAP duties in accordance with the UPMC core values (i.e., Quality & Safety, Dignity & Respect, Caring & Listening, Responsibility & Integrity and Excellence & Innovation) and adhere to all county, state, federal and professional ethics and

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standards. Our liaisons are to conduct themselves as a servant leader; making decisions based on the needs of those they serve whenever possible. We expect our SAP staff to exceed the basic requirements of liaison services by providing “Concierge SAP” to all the constituents they serve – students, families, SAP colleagues and school community. In providing “Concierge SAP” our SAP staff are expected to make meaningful contributions to their SAP Teams, serve as caring adults to the students they screen and advocate for the families they represent while linking them to appropriate services and resources.

Data Collection and Delivery (10 points)

16. Describe your plan for tracking, entering and reporting data in a timely way.

Our plan for tracking, entering and reporting data in a timely way includes the following: Identifying what data is required to be collected and developing templates and procedures to accurately gather and enter the data; Training all SAP team members to enter the various data sets but assigning unique staff to be responsible for a specific data set; Collecting and recording data as close to the time it is obtained as possible; Minimizing transcription errors by using typed demographic information or original tally sheets that are securely scanned to enter various data sets (i.e., CIPS numbers, WITS invoices, CANS and JQRS report etc.); Each SAP staff member, including the SAP supervisor, will spot check and cross reference data points (i.e., checking to see if entered CIPS numbers match the number of screens entered); Develop a timetable for daily, weekly, monthly and quarterly collection and entry of each data set.

To assist with the plan, we have each SAP staff set aside designated time for data collection and entry as part of their workflow. Admittedly, providing postvention support would be a priority in any given week and could potentially delay certain data sets. In such instances we would notify the OBH County representatives and submit the data as soon as possible.

Since switching from program funding to fee for service, to our current cost reimbursement, our SAP staff has shared in the data entry responsibility. Although our SAP staff is trained in the collection and data entry of all required information, we have identified specific staff to enter WITS, invoices, CANS and the JQRS quarterly report. The shift in responsibilities permits our liaisons to devote more time to direct service activities that will ultimately assist students and families in accessing the services and supports they need. We have also developed tally sheets so that the required information can be collected as close to the time it occurs.

Periodically, our SAP Supervisor will cross reference entered data to ensure that the information matches (i.e., make sure the number of unique CIPS entries matches the number for the monthly MPER entries.). If an error occurs, our liaisons or SAP office manager will notify the SAP supervisor and county representative in charge of reviewing WITS entries and make the necessary corrections. CANS entries will be reviewed as part of the annual monitoring process. Our liaisons will continue to modify their workflow to maximize the accurate collection, documentation, coding and entering of reportable data. As new systems of data entry are required, our SAP staff liaison and agency office manager will revise the plan as needed.

17. Describe your plan for quality assurance, including which data elements you will look at to monitor quality.

As referenced previously in the section on staffing, our plan for quality assurance begins with our liaisons performing their SAP duties in accordance with the UPMC core values and adhering to all

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county, state, federal and professional ethics and standards. In the event of any unusual incidents, our liaisons will submit any required state, county or agency reports as soon as possible after the event.

As part of our plan for quality assurance, we will look at several data elements to monitor quality. Specifically, our liaisons gather feedback regarding their SAP services via surveys (mid or end of year) from the following SAP constituents: referred students, parents and SAP colleagues. We also gather informal verbal and written feedback from SAP constituents throughout the school year and review this feedback during supervision. When following up with students and families we will also continue to gather feedback from students and parents regarding their experience with the services they select, make note of their feedback and amend our resources and recommendations sheets as needed.

During our annual joint site visit with the Allegheny County Office of Behavioral Health and the Department of Drug and Alcohol, we heed all recommendations for improvement of the SAP services we deliver. At the end of the school year, we may assist school personnel in accurately completing the PDE 4092 and in reviewing the data related to the promotion, grades, attendance and policy violations of referred/screened students. All these activities will inform our liaisons of the quality and effectiveness of their work and inform our overall SAP practices.

Budget (10 points possible) is not included in page count. You may submit the budget as an attachment [e.g., Excel file] or in the space below.

18. Provide a detailed line-item budget that reflects a realistic estimate of the costs associated with implementing and sustaining your organization's SAP at the ideal capacity you listed in the beginning of the Application.

Please refer to the attached excel file.

19. Provide a budget narrative that clearly explains and justifies all line items in the proposed line-item budget.

Please note that in response to the attachments provided for item 18 under "Budget," the UPMC WBH SAP is referred to as "SAP" within the Drug and Alcohol sections of the audits for the fiscal years 2018-2020. The costs outlined in the budget are justified, as they permit highly trained SAP professionals to be compensated both with a commensurate package of salary and health benefits, but also with the appropriate level of clerical and supervisory support. In an effort to support the growth of our SAP Program, we have hired an additional full-time employee. Since our agency first began providing SAP services more than 25 years ago, we have dedicated our resources to focus on keeping skilled personnel and kept the clerical supplies and other expenses to a minimum. We have also been fortunate to serve school districts that are very generous and accommodating with regard to supplies and support.