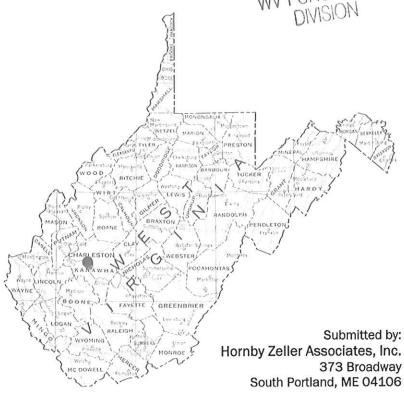
West Virginia Department of Health and Human Resources Bureau of Public Health, Office of Maternal, Child and Family Health RFQ # MCH12114

Action Research Evaluation of West Virginia's Home Visitation System

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WY PURCHASING DIVISION



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TABLE OF CONTENTS

Understanding of Request	1
How the Evaluation Will be Conducted	3
Discussion of 13 Deliverables	9
Vendor Requirements	29
MCH12114 Bid Price Sheet	
West Virginia Purchasing Division Forms	

The West Virginia Department of Health and Human Resources (DHHR), Bureau of Public Health (BPH), Office of Maternal, Child and Family Health, was awarded a federal grant with funds authorized by the Affordable Care Act to expand and enhance the infrastructure of its statewide home visitation program. The West Virginia Home Visitation Program (WVHVP) is seeking the services of an outside evaluator to determine the effectiveness of its work, and to provide periodic feedback over the course of the evaluation period so that it can improve upon areas that may need additional focus or a different direction; that is why it is requesting an "action research" evaluation.

Hornby Zeller Associates, Inc., (HZA) a research and consulting firm with expertise in early care and education and home visiting programs, proposes to serve as the evaluator of the West Virginia Home Visitation Program (WVHVP) and in doing so, to meet federal Maternal, Infant and Early Childhood Home Visiting (MIECHV) reporting requirements for infrastructure grants.

West Virginia's strategy is to improve the quality of home visiting services and the outcomes achieved for families by building key components of the state infrastructure. These include:

- 1. Establishing and monitoring program standards based on national models
- 2. Incorporating validated measurement tools into practice
- 3. Developing and implementing statewide policies encompassing requirements of various home visitation models
- 4. Expanding the state's home visitation infrastructure and training capacity
- 5. Developing and implementing a statewide continuum of evidence-based home visitation from pregnancy to five years of age
- 6. Establishing effective partnerships among West Virginia home visitation programs and identified resource agencies
- Developing an integrated surveillance and reporting system to monitor and evaluate selected home visitation performance and outcome measures required to show improvements
- Developing media campaigns to increase referrals

HZA's evaluation will focus on: 1) the extent to which the objectives are achievable and are actually achieved; 2) the effects of achieving the outcomes on program management and program effectiveness; 3) barriers that are encountered in implementing objectives; and 4) how difficulties can be overcome.

The West Virginia evaluation design will focus on both process and impact. A process evaluation is "developmental, descriptive, continuous, flexible and inductive."

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¹ Patton, M.Q. (1978, 2002). *Utilization-Focused Evaluation*. Thousand Oaks, CA: Sage Publications.

Some of the criteria for an effective process evaluation are:

- Review not only formal activities but unanticipated outcomes and their consequences
- 2. Include perceptions of people close to the program about how things are going
- 3. Obtain information from people with multiple perspectives.
- Use more than one data collection method so the results are not prejudiced by the method employed
- 5. Use trained interviewers and data collectors
- 6. Use trained data analysts2
- 7. Employ tactics for confirming findings³

The impact component will report on the changes in families following agreed-upon benchmarks such as improved prenatal, maternal, and newborn health; improved economic self-sufficiency; decreased childhood injuries, abuse and neglect, and emergency department visits; reduced crime and domestic violence; and improved school readiness.

The focus of the evaluation is consistent with federal interest in knowing what factors are associated with developing or enhancing the state's capacity to support and monitor the quality of evidence-based programs. Since the federal funders and the WVHVP are also interested in evaluation strategies that use research to help guide program planning and implementation, the action research model that is specified in the Request for Quotation will be participatory in nature.

² Ibid.

³ Miles, M. & Huberman, A. (1984). *Qualitative Data Analysis*. Thousand Oaks, CA: Sage Publications.

How the Evaluation will be Conducted

The Logic Model below presents the evaluator's perspective on the Inputs, Strategies, Outputs and Outcomes of the proposed project. Since the Logic Model will form the basis of the evaluation, it will be reviewed at the Planning Meeting (Deliverable 1). The theory of change underlying the infrastructure enhancements is:

By specifying program standards, incorporating validated measurement tools into practice, developing and implementing statewide policies encompassing requirements found in various home visiting models, expanding training capacity, implementing a continuum of services covering pregnancy to five years of age, establishing partnerships among programs and resource agencies, developing an integrated reporting system, and increasing referrals through media campaigns, the West Virginia's Home Visitation Program will improve its statewide infrastructure and ultimately provide more effective services to families as reflected in improvements in five benchmark areas.

That is essentially what the evaluation will investigate.

Evaluation Questions

For each of the eight objectives for developing the infrastructure, the following evaluation questions will be addressed:

Achievement of the Objective

- 1. To what extent was the objective achieved?
- 2. What factors facilitated the achievement of the objective?
- 3. What factors detracted from its achievement (barriers)?
- 4. What organizations or individuals were most critical in achieving the objective, and why?

Impact of Achieving the Objectives

While it will be difficult to quantify how changes in infrastructure affected changes in the benchmarks, the qualitative components of the research will help us to understand that. First we will want to know whether there were in fact changes in the benchmark measures, which for purposes of this project are considered the long-term outcomes. Then we will investigate whether the key players in the West Virginia system see one of more of the infrastructure changes as having the most significant effect on producing changes in the benchmarks.

West Virginia Logic Model for Home Visitation Development Grant

Theory of Change: By specifying program standards, developing a monitoring and CQI process, instituting a statewide database, developing accessible web-based training, and instituting a centralized intake, West Virginia's Home Visitation Program will improve its statewide infrastructure and ultimately provide more effective services to families.

INPUTS

- Oversight by WV Home Visitation Stakeholders
- Collaborative partners such as Early Childhood Advisory Council, Early Childhood Health Project, Birth to Three/ Early Intervention, Dept. of Education Office of School Readiness
- 23 Home
 Visitation
 Agencies
 collectively using
 three program
 models
- Collaboration with expert organizations to grow infrastructure

STRATEGIES

- Establish and monitor program standards
- Incorporate validated measurement tools
- Implement statewide policy requirements of home visitation models
- Expand home visitation training capacity
- Implement a statewide continuum of evidence-based HV from pregnancy to age five
- Establish effective partnerships among WV programs and resource agencies
- Develop an integrated surveillance and reporting system
- Develop media campaign to increase referrals

OUTPUTS

- Requirements of home visiting models are documented as a step to monitoring fidelity
- Validated tools are incorporated into practice
- Policy requirements are implemented across the state
- A continuum of evidence-based services is implemented covering pregnancy to age five
- Meaningful partnerships are established and used
- Statewide database is designed and implemented
- Media campaign with sufficient coverage to increase referrals is implemented

OUTC	OMES
INTERMEDIATE OUTCOMES	LONG-TERM OUTCOMES
Consistency in program standards across agencies Enrolled families are assessed with validated tools Home visiting staff are well trained in their function Families with children under five can access home visiting services Operational Statewide Home Visitation Database Increased Program Visibility, Particularly at Referral Sites	Among families served: Improved prenatal, maternal and newborn health, Improved economic self sufficiency Decreased childhood injuries, abuse and neglect and emergency room visits Reduced crime and domestic violence Improved school readiness

HZA's evaluators will be investigating questions such as:

- 1. Which benchmarks were positively affected over the course of the project?
- 2. Which of the eight infrastructure changes seemed to have this impact?
- 3. Did the changes affect some of the five benchmarks more than the others?
- 4. Why or why not?
- 5. What other changes in the infrastructure would be helpful in having a positive impact on the WVHVP?

Methods

HZA proposes to use various methods to analyze information and make recommendations to the WVHVP. This "mixed method" approach will include:

- 1. Review of activities as well as unanticipated outcomes and their consequences
- 2. Interviews and surveys of people close to the home visitation program
- 3. Collection of data from people with multiple perspectives, including those within the program and those outside of it
- 4. Use of more than one data collection method so the results are not prejudiced
- 5. Use of techniques to confirm findings

The table below shows the relationship between the strategies the project will incorporate, as reflected broadly in the Logic Model above, and the methods that will be used to assess their achievement. Each method is then described.

Relationship Between Strategies Assessed and Research Method

Key Objectives and Strategies	Partner Meetings	Product Review	Interviews	Surveys	Site Observation
Establish and monitor program standards based on national models	✓		✓	✓	✓
Incorporate validated measurement tools into practice	✓	✓	✓	✓	✓
Implement statewide policy requirements of home visitation models	✓		✓	✓	✓
Expand home visitation training capacity	✓	✓	✓	✓	
Implement a statewide continuum of evidence-based HV from pregnancy to age five	✓		✓	✓	✓
Establish effective partnerships among WV programs and resource agencies	✓	✓	✓	✓	
Develop an integrated surveillance and reporting system	✓	✓	✓	✓	✓
Develop media campaign to increase referrals	✓	✓	✓	✓	✓

Partner meetings: In keeping with the RFQ requirements, HZA will participate in planning meetings, review meetings, and quarterly Home Visitation Partner Group meetings. These will serve both to provide information that HZA is collecting from the field, and to obtain information from the respective information sources to help inform the evaluation.

Review of documents and products: HZA will collect the documents used to analyze and develop the program standards to determine first, whether such documents exist and second, whether they are reflective of the program models incorporated in West Virginia. HZA will collect the tools that the state's home visitors will use in program assessment, such as the Caldwell Home Inventory and the Ages and Stages Questionnaire®. It will also review focus group questions developed for the media campaign, and analyze the results of those focus groups.

In addition, HZA will collect both from the state administrator and from the sites the various products that are being developed or have been completed; examples of these include the training curricula and media campaigns to increase referrals. Products will be reviewed from such perspectives as: content (do they include what was planned; do the materials conform to evidence-based practices for home visitation); presentation (are they attractive and easy to use); and accessibility (are they easy to find; are they readily available to the target group). The Evaluation Team will have the opportunity to suggest other criteria.

Interviews: Interviews will be a central element of the evaluation plan. Interviews help to explain the dynamics of the process and provide clues about why a given strategy has worked to build the state infrastructure, as well as highlight what may be lacking. HZA will conduct semi-structured interviews with multiple stakeholders at the state and local levels. These will include the partners with whom the Home Visitation program is collaborating, such as the Early Childhood Health Department, the State Head Start Collaboration Project and the Department of Education Office of School Readiness. It will include members of the West Virginia Early Childhood Advisory Council and the West Virginia Home Visitation Stakeholders. It will include both administrators of Home Visitation agencies and home visitors themselves, and may also include family members, particularly in the second year, when the media campaign will be ready for assessment.

Surveys: A survey will be conducted of Home Visitation agency administrators and home visitors to learn more about the impact of infrastructure changes on their daily activities. For example, how does introduction of the Home Visitation database affect their ability to manage their caseloads? Are the administrators using reports from the database; why or why not? Are the program standards and CQI processes helping then to understand program requirements and make improvements in areas needing development? Are the new training tools helpful in mastering new content areas or program requirements? While the interviews will allow for more in-depth responses from a smaller number of people, the surveys will allow all home visitation staff and administrators weigh in on the changes.

Site observation: The evaluation will include site visits to the 23 agencies for the evaluators to gain a greater understanding of the environment within which the agency functions, the benefits of the infrastructure changes, and the concerns the staff may have. The evaluators will see whether the staff have ready access to the changes such as training materials and

media campaigns, whether they are using the resources, what impacts they perceive, and what can be done to enhance the changes, if necessary. These methods are discussed in more detail in the context of the 13 deliverables described in the next section.

DISCUSSION OF 13 DELIVERABLES

On the following pages, HZA provides a brief discussion of each of the 13 deliverables in this RFQ. For each, the timeframe in which it will be completed is mentioned together with the major activities that will be performed, the staff assigned to the project who will perform tasks related to each deliverable, and the days of effort that were used to develop the costs in the Bid Price Sheets.

Five staff people are referenced in the Activities charts associated with each deliverable. They are discussed briefly below.

Helaine Hornby, M.A., will serve as Principal Investigator. She is one of the two principals of Hornby Zeller Associates and has been a partner in the firm since 1995. Prior to that she was the Director of the Center for Child and Family Policy at the Edmund S. Muskie Institute of Public Affairs, at the University of Southern Maine. For eight years she directed one of the national child welfare resource centers.

Ms. Hornby has directed three national, federally-funded research projects: an analysis of adoption disruption (involving four states and six sites); an evaluation of risk assessment systems in child protective services (involving five states); and a policy study on kinship care (also involving five states) in which she was the co-principal investigator. These projects, sponsored by the U.S. Department of Health and Human Services, have utilized varied methodological approaches (both qualitative and quantitative) including case reading, document analysis, data analysis, interviews, focus groups and cross-site comparisons.

Ms. Hornby has served as the statewide evaluator for a number of projects in several states, including West Virginia. Ms. Hornby is an expert in qualitative data analysis, as well as organizational and policy analysis. She has published broadly in professional journals including Social Work, Child Welfare, OSERS News in Print, Children and Youth Review, Children Today and New England Journal of Human Services. She has presented papers and conducted workshops at numerous national and state conferences, both domestically and abroad. Ms. Hornby earned a Master's degree in public policy and management from the Edmund S. Muskie Institute of Public Affairs at the University of Southern Maine, where she received highest honors; she also holds a B.S. from Simmons College in Boston.

Darshana Spach, M.Ed., will serve as Project Director. Ms. Spach, a specialist in Early Childhood Education, joined Hornby Zeller Associates, Inc. over two years ago as a Research Associate. She is currently directing projects in West Virginia, Iowa and Maine, each of which deal with the subjects of home visitation, protective factors assessments and child abuse prevention.

Prior to joining the firm, Ms. Spach served as Program Coordinator and Interim Director of Catherine Morrill Day Nursery, a Portland, Maine-based, nationally accredited early childhood education and care program that promotes young children's cognitive, physical, social and emotional development, and where she supervised over 20 staff. In addition to her leadership role in this child-centered program, she is also an adjunct faculty member of the Early Childhood Education program at Southern Maine Community College. In this

capacity, Ms. Spach created a curriculum for Early Childhood Education students and collaborated with community providers in promoting program professionalism and sensitivity of the field.

Ms. Spach has also served in both direct service and supervisory roles at PROP Child and Family Services, a not-for-profit Community Action Agency serving 23 communities in Cumberland County, Maine. She has worked with at-risk populations through Early Head Start and Catherine Morrill. In her Master's program, she focused on working with both refugees and native families who have experienced trauma or other extraordinary circumstances. She obtained funding for and facilitated professional development services for early childhood professionals on the subject of multi-cultural education. She has also participated in various large-scale projects (including the Maine Quality Rating System), as well as accreditation projects for the National Association for the Education of Young Children.

Ms. Spach has presented at a number of conferences on a variety of topics, including Cognitive Development in Infants and Young Children, Working with Highly Sensitive Children, Dealing with Difficult Behaviors in Young Children, and Observing and Documenting Behaviors. She earned a Master's degree in Special Education from the University of Maine at Orono, obtained a 282 Endorsement (Teacher of Children with Disabilities) from the State of Maine Department of Education, and is also a Licensed Social Worker with supervisory experience in that field.

Jennifer Battis, M.Res., will serve as a research analyst and one of the field staff who will conduct interviews and site visits. Ms. Battis holds a Master's degree in Social Research (with Commendation) from the University of Aberdeen, Scotland. This highly competitive, international graduate program gave her a solid grounding in a variety of social research methodologies and statistical software tools (including SPSS, DataNet and NextGen), and allowed her to develop a unique skillset that has proven valuable to her role as Research Assistant at Hornby Zeller Associates, Inc.

Ms. Battis is currently active in several projects that benefit from her research methods expertise, including a variety of tasks related to West Virginia's Protective Factors Survey; specifically data entry and cleaning, data analysis, and production of reports based on findings. She gathers information at face-to-face interviews and focus groups in support of a statewide evaluation of Maine's drug courts, and she is also developing an SPSS database to track survey responses for an evaluation of the Cumberland County (Maine) drug court. She has conducted site visits for evaluations of substance abuse prevention projects, including assessing project sites of coalition partners on behalf of Maine's SPF-SIG, the Strategic Prevention Framework State Incentive Grant (a SAMHSA-funded project involving substance abuse prevention); Ms. Battis has also cleaned data for a project conducted on behalf of the Greater Waterville Prevention Coalition. She recently conducted site visits in Louisiana for HZA's evaluation of 20 parishes in a juvenile justice assessment of Disproportionate Minority Contact. Finally, Ms. Battis has been providing data management support for Moving Forward, another SAMHSA-funded project designed to address the needs of transition-aged youth and young adults with emotional disturbances, placing emphasis on youth-directed planning and the development of practical skills leading to independence.

Prior to joining HZA, Ms. Battis worked for AmeriCorps VISTA (Volunteers in Service To America), a federal public service program. Her position, with the HealthReach Community Health Centers in Waterville, Maine, involved a variety of tasks, including data analysis, research, public health information tracking and reporting. She developed tutorials and other materials for use in health centers and public health websites, and trained health care staff on proper use and tracking of the Prescription Assistance Program. In addition to these duties, she was also involved in the grant-writing process, and served as HRCHC's point person for their annual United Way campaign. Ms. Battis is also well versed in information security procedures, having worked in an administrative support role involving security clearances for the Lockheed Martin Corporation at Hanscom Air Force Base in Massachusetts.

Jaime Lugas, M.A., will serve as the second research analyst. Ms. Lugas received a Master's degree in Applied Sociology from the University of Massachusetts, Boston. The Applied Sociology program emphasized academic training in quantitative, qualitative and evaluation research methods as well as the practical application of these skills to analyze and contribute to policy, program development, and social research.

Before joining HZA she served as a teaching assistant at Northeastern University. While completing her Master's degree, she served as a graduate research assistant at the Institute for Community Inclusion (ICI) in Boston, where she conducted research exploring employment and post-secondary education outcomes for people with disabilities. She analyzed Vocational Rehabilitation Program administrative data, compiled literature reviews, and drafted and edited manuscripts. This research was supported by a grant from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Research Program, and focused on transition-age youth with autism and predictors of employment and post-secondary education. Findings were published in several ICI DataNotes and Research to Practice Briefs and most recently in the peer-reviewed journal Rehabilitation Counseling Bulletin. Also during her time at the ICI, she verified data and performed survey follow-ups for a national survey of community rehabilitation providers.

At HZA she has conducted site visits to both Alaska and Louisiana, the former to conduct interviews and focus groups for a workload study for the Office of Children Services. Her work in Louisiana entails interviews and data collection for the Disproportionate Minority Contact study being performed with funding from the Office of Juvenile Justice and Delinquency Prevention. She is also engaged in an assessment of the enforcement of underage drinking laws in Maine. Data for this assessment will be gathered from law enforcement officials and community members through an online survey and key informant interviews. She is managing a contract to help transitioning youth gain access to independent living supports (for which HZA is serving as lead agency for the State of Maine). In addition, she performed a literature review on cultural competence for a SAMHSA-funded project to build Maine's infrastructure in substance abuse prevention.

Trista Deame, M.S., will serve as a researcher to conduct interviews and site visits. Since joining Hornby Zeller Associates, Inc. in 2007, Ms. Deame has provided research support to project teams throughout the organization. She was on the site visit teams for the Louisiana

study described above, performing interviews and data collection activities at various parishes. For the lowa study (involving the transition of each youth exiting foster care), Ms. Deame scheduled and conducted phone surveys with difficult-to-contact youth to obtain baseline information about the services they were receiving. For the evaluation of Nebraska's Family Navigator program, she has been scheduling and conducting telephone interviews to collect data on why families contact these programs, the assistance they received, and their satisfaction with the program.

For a recently completed workload study conducted for the Child Welfare Division of Westchester County, New York, Ms. Deame prepared reference tools for local participants and tested web-based data collection instruments which were later used to measure the time needed to handle cases and the time workers have available for casework. During the legislatively mandated statewide performance audit of the Oklahoma Department of Human Services conducted during 2008, Ms. Deame managed a complex and comprehensive schedule of interviews, responded to stakeholder calls from across the state, and provided extensive data entry support for this large-scale audit.

Earlier in 2008, Ms. Deame was part of the field team for a case review effort performed for the Georgia Department of Human Resources. She conducted on-site case reviews to ensure eligibility determinations were correctly made and documentation was available in the case files to support the eligibility determinations made by workers as part of Georgia's Title IV-E Program Improvement Plan.

Prior to joining the firm, she served as a supervisor in the Russell Sage College office of Annual Giving, during which time she assisted in outreach to preserve alumni relations with the college. Ms. Deame received her M.S. in Forensic Mental Health from the Sage Colleges Graduate School in Troy, NY and has completed 5.5 hours of training in providing trauma-informed care to victims and the mentally ill; she also holds a B.A. in Biopsychology/Pre-Med from Russell Sage College.

Robert Junkins, A.D. will serve as a Programmer Analyst for this project. Since joining HZA as a Help Desk Specialist in 2004, Mr. Junkins has provided technical and programming support to users of Information Technologies solutions developed by the firm, and has been an integral member of the firm's application and information systems development team. His involvement ranges from navigation, integrity and regression testing of existing applications to the development and implementation of specialized tools and web-based surveys. He designed two online surveys for the workload study conducted for the Minnesota Division of Child Safety and Permanency. The first was used to measure the time caseworkers and supervisors have available to devote to casework, while the other captured information related to caseworker retention. For a random moment survey, follow-up questions appeared only if they were relevant to the initial response, increasing the integrity of the data gathered and saving caseworkers' time.

Mr. Junkins also developed a web-based survey for a statewide performance audit conducted of Oklahoma's Department of Human Services. This survey was designed to measure caseworkers' and supervisors' impressions of the agency's management and organizational structure, its adherence to policy for distributing new and changing policies,

and the use of support of staff. Mr. Junkins played a key role not only in capturing the data, but also in analyzing the data received from 4,000 agency staff members.

He also serves as the primary technical support and client liaison for ChildNet-PA, the child welfare case management application used by nearly a dozen counties in Pennsylvania, as well as the web-based case management system developed for Maine Families, Maine's Home Visiting Program. Mr. Junkins assisted in the development of the standardized reports and data conversion activities.

Prior to joining HZA, he worked as a Programmer Analyst for L.L. Bean, Inc. and Bath Iron Works, as well as Maine Savings Bank, where he also served as an Associate Programmer. In all of these positions Mr. Junkins performed systems analysis and process improvements for various batch and online systems. Mr. Junkins holds an A.A.S. in Computer Science from Andover College.

Eve Wentworth will serve as Research Administrator. Since joining HZA in 2005, Ms. Wentworth has provided administrative support and research assistance to project teams throughout the organization. Ms. Wentworth frequently works with the firm's information technology and data team to assist in the development, design and testing of web-based surveys and data collection tools, end-user interfaces, web content and related products.

Ms. Wentworth has provided technical writing and editing services for a number of complex technical reports and policy manuals; these include the child welfare policy manual for the State of New Jersey's Division of Youth and Family Services, the final reports for a series of evaluations of specialty court and Department of Corrections projects in Alaska, an assessment of services for sexually abused children for the Connecticut Department of Children and Families, and a number of reports for Maine Medical Center's Department of Vocational Services. During a statewide performance audit of the Oklahoma Department of Human Services in 2008, Ms. Wentworth provided administrative, data support and editorial services, including scheduling interviews and making follow-up calls with study personnel and survey respondents, providing extensive data entry support for this large-scale audit, conducting a literature search, and editing of the final technical report.

Ms. Wentworth routinely interviews key stakeholders in support of quarterly reporting for the Community Epidemiology Surveillance Network (CESN), a multi-agency workgroup that tracks substance abuse trends as part of the firm's SPF SIG grant evaluation. She has helped to facilitate and record feedback from focus groups for projects involving consumers with co-occurring substance abuse and mental health disorders for the Co-Occurring Collaborative Serving Maine (CCSME), youth in transition for the Maine Medical Center, and drug court participants for an ongoing evaluation of Maine's adult drug courts. Ms. Wentworth has performed case reviews and evaluations for a variety of projects, including those conducted of various specialty court projects for the Maine Judicial Branch and the child abuse hotline for New Jersey's Division of Youth and Family Services. In 2008, she was part of the field team which performed on-site case reviews to ensure eligibility determinations were correctly made for Georgia's Title IV-E Program Improvement Plan. Ms. Wentworth completed coursework in Journalism and Sociology at the University of Maine at Orono, Cultural Studies at the University of London and East London University, UK, and

business and writing at the Harvard Extension School. Prior to joining the firm, she worked as a data analyst in the health insurance industry, spent more than a decade coordinating AIDS clinical trials research at the Harvard School of Public Health, and has worked as a freelance technical writer and editor for over twenty years. She is a Notary Public for the State of Maine.

Deliverable #1: Planning Meeting

HZA will attend and participate in one two-day meeting with the WVHVP key staff in Charleston to develop a plan for the evaluation, starting with the plan laid out in this proposal; acquire background information; obtain guidance for developing tools; and for a group consisting of WVHVP staff and other home visitation partners to assist HZA throughout the project period. One of the activities of the meeting will be to review the proposed Logic Model to see if it accurately captures the assumptions behind the infrastructure changes and what the WVHVP is trying to achieve through these changes. The meeting will be attended by Ms. Hornby and Ms. Spach with time allotted for contacting partner group members.

Timeframe:

Year 1, Month 1

Activities, Staff and Days of Effort:

Deliverable 1: Planning Meeting	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Meet with state Home Visitation administrator to review evaluation plan and modify as needed 2-day meeting).	2	2					
Formulate Partner Group		1		1			

Deliverable # 2: Activity Tool Development

HZA will develop the instruments and tools it needs to conduct the evaluation activities. These include the state, local and home visitation-level interview formats; the site observation forms that will be used for visiting the agencies; and the home visitation surveys. In developing the tools the program models and standards for the models in use in West Virginia will be consulted to assure that the questions being asked and the activities being observed conform to best practices. The database that is referred to here is not the home visiting database but rather the program that will be used by the evaluators to track its own evaluation activities and the survey responses.

Timeframe:

Year 1, Months 1-2

Activities, Staff and Days of Effort:

Deliverable 2: Tool Development	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Develop data collection tools: interview formats, site observation forms and surveys.	1	2	2				
Develop databases to store information as it is received by user group and type of data and to manage evaluation.		1					10
Review tools with Home Visitation administrator and make changes as needed.		2					2

Deliverable # 3: Product Review

HZA will request and obtain copies of products already created or being developed by the WVHVP and other effective home visitation programs to review for content, conformity to evidence-based practices in the field of home visitation, and for accessibility to targeted groups. For example, are reading levels of family materials consistent with the educational backgrounds of the families, as HZA has already defined through information gathered in the Protective Factors Survey? As mentioned in the Vendor Requirements section, HZA has already performed literature reviews on the home visiting models and program standards associated with them, which will be of assistance in fulfilling this deliverable.

Timeframe:

Year 1, Months 1-2

Activities, Staff and Days of Effort:

Deliverable 3: Product Review	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Request and obtain copies of products			2	2			
Analyze for content and presentation	2	3	3				
Analyze for conformity to evidence-based practices	1	3	3				
Analyze for accessibility to target groups such as reading level and foreign language		2		3			
Write results of Deliverable 3	1	2		2			

Deliverable # 4: Review Meetings

HZA will attend and participate in four, one-day meetings with WVHVP key staff in Charleston to review progress and revise the evaluation plan as necessary. Two people, generally Ms. Hornby and Ms. Spach, will participate. In preparation for these meetings, HZA will assemble or develop various printed progress reports, presentations, and summaries for review and approval during the meetings. These materials will be prepared in a style and format that is suitable for sharing with various constituencies, stakeholders, federal project officers and other noteworthy people at the state and community levels. The deliverable cost includes travel for attending these meetings each quarter.

Timeframe:

Year 1, Months 3, 6, 9, 12

Activities, Staff and Days of Effort:

Deliverable 4: Review Meetings	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Attend 4 one-day meetings with key WVHVP staff to review progress and revise evaluation plan as necessary.	6	6					
Develop progress reports, presentations and summaries for each meeting.	4	4	4	4			

Deliverable #5:

Home Visitation Partner Group Meetings

HZA staff will attend and participate in four, one-day meetings with the home visitation partner group in Charleston. The purpose of these meetings is to review progress; provide progress reports, presentations and summaries; to collaborate with various home visitation entities, and for interpreting the results to the partners as well as eliciting their input as to the meaning on the results. These Partner Group meetings will be planned to coincide with the Review meetings if at all possible. The deliverable cost includes travel for attending these meetings each quarter; air fare will be minimized by coordinating the meeting dates however.

Timeframe:

Year 1, Months 3, 6, 9, 12

Activities, Staff and Days of Effort:

Deliverable 5: Home Visitation Partner Group Quarterly Meetings	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Attend and participate in four one-day meetings with home visitation partners, designed to coincide with WVHVP staff meetings	4	4		4			
Conduct activities to prepare for and follow-up the meetings.	4	4	4	4			

Deliverable #6: State Level Interviews

HZA will conduct telephone interviews with stakeholders at the state level. While email interviews are permitted, HZA would prefer to perform telephone interviews both because we believe richer information can be gathered through follow-up questioning and to reduce the burden on respondents, assuming it is easier to talk than to write (for most people). HZA understands that WVHVP will provide a list of agencies and potentially people to be interviewed with contact information sufficient to reach the people. A minimum of 20 interviews will be conducted at the state level. A small amount of time has been provided for Ms. Wentworth to help arrange for the interviews.

Timeframe:

Year 1, Months 3-10

Activities, Staff and Days of Effort

Deliverable 6: State Level Interviews	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Conduct 20 telephone interviews at the state level	1	2		2	2		
Analyze interview data	1	1		2			
Write state-level results	1	1		3			

Deliverable #7:

Local Level Interviews

HZA will conduct telephone interviews with stakeholders at the local level. As with the previous deliverable, the WVHVP will provide contact information that should prove sufficient to identify and locate the people who will be interviewed. As with the previous deliverable, Ms. Wentworth is allotted time to help arrange for the interviews. A minimum of 30 interviews will be conducted. The topics to be explored include partner relationships between the local entity and the home visitation program(s) in their communities, awareness they may have of media campaigns, whether they both offer and receive referrals from the agency, if applicable, and their perceptions of the quality of services provided. HZA has developed community partner surveys and interview schedules for home visitation programs in Maine which can be consulted for their relevance.

Timeframe:

Year 1, Months 3-10

Activities, Staff and Days of Effort:

Deliverable 7: Conduct Local Level Interviews	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Conduct 30 telephone interviews at the state level		3	A.	3	2		
Analyze interview data		1	3	3			
Write local-level results		1	3	3			

Deliverable #8:

Home Visitation Level Interviews

HZA will use a random selection approach developed during the initial two-day meeting (see Deliverable 1) to conduct on-site in-person interviews with every employee of the 23 home visitation agencies. Due to the size of the agencies, some will have four contacts over the course of the eight months that the interviews will be performed and some will have as many as 20 contacts. HZA staff will attempt to schedule at least a portion of these interviews in conjunction with the Review Meetings (Deliverable 4) and the Partner Meetings (Deliverable 5), in essence planning for a week-long trip to save on travel costs.

HZA is estimating that between 260 and 265 interviews will be completed at the home visitation level. The budget below allows for about five interviews to be conducted per person per day, with some time allowed for travel. Again, Ms. Wentworth has been slotted to help set up the interviews for all the staff.

Timeframe:

Year 1, Months 3-10

Activities, Staff and Days of Effort:

Deliverable 8: Conduct Home Visitation Level Interviews	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Use a random approach to select people to be interviewed at each given time							2
Contact 23 agencies to obtain addresses, contact people, telephone numbers and email addresses					10		
Conduct in-person visits to 23 agencies over 8 months (Months 3-10 inclusive) to interview 241 people		12	14	14		14	
Analyze interview data		5	5	5	5	5	
Write local-level results	5	5	5	5		5	

Deliverable #9: Surveys

HZA will conduct ten telephone surveys with West Virginia home visitation site administrators and ten home visitors to gain knowledge about the impact of infrastructure changes on their daily activities. While email surveys are permitted, HZA would prefer to conduct telephone surveys for more complete responses and to reduce burden on the respondent. The ten home visitation administrators and ten home visitors to be surveyed will be determined during the first home visitation partner group meeting. The telephone surveys will relate to the infrastructure changes that are being implemented, the local perception of those changes and the impact they are having both on home visitation staff and ultimately on the families being served.

Timeframe: Year 1, Months 3-10

Activities, Staff and Days of Effort:

Deliverable 9: Administer Surveys	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Conduct 10 telephone surveys of state administrators to gain knowledge of impact of infrastructure changes a-d below	1	2	**	1	1		
Conduct 10 telephone surveys of home visitors to gain knowledge of impact of infrastructure changes a- d below	1	2	1	1	1		
a. Program standards							
b. Continuous Quality Improvement Processes						×	
c. Training tools							
d. Other changes							
Analyze survey data		1	2	2			
Write survey results	1	1	1	1			

Deliverable #10: Site Observation

HZA will conduct on-site observations at each of the 23 home visitation agencies to gain an understanding of the environment within which the agencies function, the benefits of the infrastructure changes, and any concerns that staff are registering about the changes. Approximately one day per agency visit has been scheduled, with some time for travel between agencies. If possible, HZA staff will accompany a staff member on a home visit or include some form of family interaction with the visit. The program standards will be used to help assess the functioning of the agency since some of the questions and concerns about the infrastructure changes will already have been addressed in the individual interviews with each of the staff members (Deliverable 8). However, due to the spacing of Deliverables 8 and 10 it may be possible in many cases to see changes in attitudes and perceptions of agency staff about the infrastructure changes, with some of the visits occurring during the second quarter and others during the third quarter when more of the changes will have occurred.

Timeframe:

Year 1, Months 3-10

Activities, Staff and Days of Effort

Deliverable 10: Site Observation	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Schedule site observations which will include at least one home visit per site					5		
Conduct site observations at 23 home visitation sites		12	12	12			
Analyze results	2	3	5	5			
Write up results	2	3	5	5			

Deliverable #11: Home Visitation Evaluation System and Report

HZA will perform several types of analyses during the course of the year to assess documents and the information obtained throughout the year. For this deliverable the Logic Model above (or the model with modifications made during the Review Meetings) will be used as an anchor for the following four types of analyses.

Content analysis: Content analysis is a method used with qualitative data such as interview responses. HZA evaluators will read the responses and draw out the themes that are appearing on more than one occasion. The staff will then read all of the interviews and identify when the particular theme appears, where it appears (if there are geographic differences or differences by home visiting program type) and how often it appears. In this way HZA evaluators allow the participating subjects identify the key issues, rather than predetermining them, but have a way to determine how prevalent those issues are among the whole sample interviewed.

Time series analysis: This type of analysis is used to document change over time. Although generally used with quantitative data, this evaluation will use it with qualitative research to assess the changes made each quarter as demonstrated by the reviews of products, the telephone surveys, the site visits and the interviews. In writing up the results the evaluators will look back to the previous quarters to comment on the changes that have been made since the last quarter as well as since the project's inception.

Measurement of progress against objectives: This analysis will use the workplans in the Updated State Plan as well as the federal infrastructure proposal to determine whether the progress in the infrastructure changes are approximating the steps and the timeframes that have been laid out in these planning documents. When the progress is not what is expected, either in the specific activities or the timeframe, the evaluators will attempt to provide explanations from their field work and suggest what can be done to address the issues.

Descriptive statistics and cross tabulations: These methods will be used to analyze the staff survey responses. Descriptive statistics include mean, median and mode in closed ended responses, and the most appropriate will be used, given the questions. The cross

tabulations will be used to determine, for example, whether the responses differ by the type of home visitation model used or by the length of time a home visitor has been employed or her age. It may be, for example, that the database is better accepted by younger people who are more used to computer technology. That distinction would be important to know in trying to craft a response for improvement.

The result will be an Evaluation Report culminating the first year of effort. The report will be reviewed with state-level staff before it is finalized and revisions will be made accordingly, to improve both clarity and interpretation of results. Time is allotted for Ms. Wentworth to produce the report in an attractive, user-friendly manner.

Timeframe:

Year 1, Months 11-12

Activities, Staff and Days of Effort

Deliverable 11: Home Visitation System Evaluation and Report	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Perform content analyses	2	2	2	2			
Perform time series analyses	2	2	2	2			
Measure progress against objectives		2	2	2			
Apply descriptive statistics and cross tabulations							2
Draft final Year 1 report	3	3	3	3			
Review with WVHVP	1	1					
Make revisions and finalize	1	2	2	2			
Produce in attractive format			25		3		

Deliverable #12: Progress Review Meetings

The next two deliverables will be performed in the second year of the project if the evaluation contract is renewed. For Deliverable 12, at least two HZA staff will attend and participate in four one-day meetings to review home visitation progress and changes implemented based on the results of the first year's evaluation report. These four meetings will be held in Charleston.

Timeframe:

Year 2, Months 3, 6, 9, 12

Activities, Staff and Days of Effort:

Deliverable 12: Progress Review Meetings	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Prepare quarterly reports on progress.	4	8	4	4			
Attend and participate in four one-day meetings to review home visitation progress and changes implemented as a result of the Year 1 evaluation	6	6					

Deliverable #13: Progress Evaluation and Report

Using the established and approved MIECHV Benchmarks data along with relevant information obtained from ongoing progress review meetings, HZA will conduct an analysis of changes in outcomes to provide a final Progress Evaluation Report at the end of the second year.

There are six legislatively-mandated benchmarks and associated constructs for which state programs will collect data in order to determine progress toward short and long term outcomes for enrolled families and children. The outcome areas for West Virginia's home visitation program are organized as follows:

- 1. Improved prenatal, maternal, and newborn health;
- 2. Improved economic self-sufficiency;
- 3. Decreased childhood injuries, abuse and neglect, and emergency department visits;
- 4. Reduced crime and domestic violence; and
- 5. Improved school readiness.

HZA has worked with other states and federal representatives in identifying measurable benchmark constructs since the MIECHV funding opportunity announcement in 2010. Part of this work has included participation in webinars and conference calls with the federal MIECHV staff and the Design Options for Maternal, Infant, and Early Childhood Home Visiting Evaluation (DOHVE) Technical Assistance (TA) Team. This group, a federal contractor, provides assistance to grantees funded under the MIECHV Program on issues related to strengthening their evaluations of promising programs, developing and adapting data systems to facilitate tracking and reporting on federal benchmarks, and implementing quality improvement systems.

Following the agreed-upon timeline for the first year's deliverables, HZA will continue with progress meetings as specified in Deliverable 12 to stay current with changes and accomplishments in the statewide home visiting program. HZA will prepare for the Progress Evaluation Report by reviewing all relevant materials from each of the evidence-based and/or promising programs serving high-risk populations, including the final approved MIECHV State Plan, Benchmarks and Logic Model. Using information provided by key informants and collaborative partners to supplement the actual data collected by direct

service staff, HZA will report on each of the outcome areas listed. Examples of how HZA can address the specified outcomes are explained below. Each will be tailored to WVHVP's actual practice if alternative approaches have already been selected. If possible the particular tools will be incorporated in the database that is being planned as part of the infrastructure grant, making data collection easier to achieve and more universal in covering all families enrolled in home visitation programs.

Improved Prenatal, Maternal, and Newborn Health: All seven of the evidence-based programs approved by the MIECHV program adhere to the belief that when services and care are provided to women prenatally, children have better health outcomes. Each curriculum used in West Virginia's state home visitation program shares this goal to improve care to pregnant women and newborn babies. There are seven constructs associated with this benchmark, requiring home visitors to monitor and discuss many topics from prenatal care to postpartum depression and breastfeeding. With the program's intentions in mind, and following the measurable objectives as defined by the approved benchmarks, HZA proposes to analyze data collected with the In-Home Family Education Assessment Tools such as the Edinburgh Postpartum Depression Scale and the Healthy Lifestyles Survey for program participants who meet eligibility requirements, for each construct to be evaluated. For example, if the program seeks to increase the number of women receiving a prenatal and postpartum depression screening during the first year, HZA would look at the number of eligible women who were screened by a home visitor as a percentage of the number of eligible women enrolled.

Improved Economic Self-sufficiency: Healthy and thriving families must be able to meet their own basic needs in a secure and predictable way before they can experience optimal functioning with their infants and children. The WVHVP seeks to address the three constructs in this benchmark by starting with strong community collaboration which relies on a cohesive referral system to share resources and avoid duplicative efforts. HZA understands that HFA, MIHOW, and PAT want families to know where to go for help in times of need – each curriculum contains a component that helps caregivers address family functioning and accessing a support network, whether this network is informal as with neighbors and family members, or formal such as through Temporary Assistance to Needy Families.

Almost all (21 out of 23) of the proposed home visitation sites currently administer the Protective Factors Survey, known locally as the West Virginia Family Survey, as part of their contractual obligation with WV DHHR. As the analysts for this survey, HZA can easily incorporate results specific to In-Home Family Education programs, testing change in family functioning and resiliency as well as the concrete support domain as they relate to services accessed and supports provided by home visiting. The survey also collects pertinent demographic information, so if the program seeks to increase referrals to employment services (such as vocational education, job training, or resume writing workshops) and determine if the number of families enrolled: 1) Received a referral to or participated in this type of service; 2) Changed their employment status; or 3) Increased their household income and benefits, HZA would look at the responses on the Protective Factors Survey, comparing the responses at enrollment with the responses one year post enrollment.

Decreased Childhood Injuries, Abuse and Neglect, and Emergency Department Visits: It is the belief of each model used in West Virginia that home visitation programs prevent the incidence of child maltreatment in a number of ways, including helping caregivers understand their child's development and behaviors, resulting in parents who have reasonable expectations and provide age-appropriate environments. The WVHVP also works with caregivers on developing healthy relationships (and attachments) with their children. The constructs measured in this benchmark vary from the bigger-picture "visits to the emergency department for all causes" to the very specific count of "first-time victims of maltreatment for children in the program." Here again, direct service staff are required to track specific child and family-level data, ideally in a secure database such as those developed and maintained by HZA in another state. If the program is using a functioning statewide home visitation database, HZA would analyze data collected and entered there by direct service staff following each family visit. For example, if the program wishes to decrease the number of children with a substantiated allegation, HZA would analyze the results recorded in the database, comparing all children at the start of the program to the one year benchmark.

On the other hand, if a report from a statewide database is not feasible by the project period the program may choose to examine results of a proxy measure. For example, if WVHVP seeks to increase the information about the "Period of Purple Crying" provided to families with newborn babies, HZA would look at: 1)The number of information sessions held as reported by staff; 2) The number of caregivers that participated as documented by staff, and 3) The Protective Factors Survey responses in areas of Parent Knowledge of Child Development, as possible variables influenced by the services provided by home visitation staff relating to this benchmark.

Reduced Crime and Domestic Violence: According to the WVHVP Benchmarks described in the State Plan materials dated 5.24.2011, the state home visitation program will partner with the West Virginia Coalition Against Domestic Violence to provide statewide training for home visitation staff covering current topics related to family violence. Having concrete knowledge of domestic violence as explained by the coalition, and developing skills in identifying possibly unsafe situations, families will receive the support and resources needed if violence happens to be an issue for them. Under the long-term objective of reducing domestic violence for West Virginia families served, the WVHVP will complete screening for domestic violence with participants using an approved tool appropriate for the populations served.

To analyze this benchmark and the related constructs (related constructs are: for those who were identified as experiencing violence the number of referrals made and the number of safety plans completed), HZA would rely on staff reports of number of families screened using a recommended tool such as the *Domestic Violence Evaluation* (DOVE) or the *Behavioral Health Risk Screening Tool* (BHRST), and calculate the percentage screened based on the total number of families enrolled. Likewise, if the program is using a statewide database by the time of this benchmark measurement, HZA could create reports of each construct using programmed functions at it does with other statewide home visitation databases they have developed for the MIECHV data collection and reporting requirements.

Improved School Readiness: All seven of the evidence-based programs approved by the MIECHV program also adhere to the belief that the parent is the child's first teacher; therefore the relationship they form together is the basis for future success in school. In this benchmark there are nine constructs, requiring MEICHV-funded programs to attend to each of the five developmental domains as well as parental support and knowledge of child development, an obvious overlap with a few of the other benchmarks tracked by home visitors. To report on changes in outcomes related to child development and parent's support for their child's learning, HZA would look at results of tools used by home visitors that measure each specific domain. For example, if the program hopes to increase the number of children screened for developmental delays using an approved tool such as the Ages and Stages Questionnaire® (ASQ), HZA would conduct an analysis based on number of children enrolled who are eligible to be screened with the ASQ and the number actually receiving screening, possibly including the results as well. Here again, HZA would also be able to incorporate the results of the Protective Factors Survey used by the CBCAP-funded programs. In this case the applicable measure is in the area of Knowledge of Parenting/Child Development.

HZA is aware of the eligibility requirements for MIECHV-funded programs to prioritize services to the highest-risk population. The selected models in West Virginia focusing on prenatal and infant outcomes, school readiness, child abuse and neglect prevention and improved self-sufficiency through community referrals will need to know if their goals in these areas have been met, and to what extent within different communities. This progress evaluation report would aid in the understanding of the population served by the state home visiting program and will give programs concrete information on changes in the short or long-term outcomes. Secondary analyses of these changes by demographic information collected, such as the age and marital status of the primary caregiver will help to target the population with whom the program is most successful and those where additional work may be needed.

Timeframe:

Year 2, Month 12

Activities, Staff and Days of Effort:

Deliverable 13: Progress Evaluation and Report	Hornby	Spach	Battis	Lugas	Wentworth	Deame	Junkins
Use WVHVP benchmarks to conduct Changes in Outcomes analysis in 5 areas:							
a. improved prenatal, maternal and newborn health	2	3		3			
b. improved economic self sufficiency	2	3		3			
c. decreased childhood injuries, abuse and neglect and emergency visits	2	3		3			
d. reduced crime and domestic violence	2	3		3			
e. improved school readiness	2	3		3			12
Analyze data	2	3		3			
Write report	2	3		3			
Review and revise report	2	2		2			
Produce in attractive format					2		

VENDOR REQUIREMENTS

Hornby Zeller Associates, Inc. (HZA) is confident that it meets or exceeds the five vendor requirements described in the Request for Quotation. With more than fifteen years of experience in research and evaluation of prevention and intervention programs in the social services, including more than two years in West Virginia, HZA has a body of experience upon which to draw in meeting the requirements. Each one is described in turn.

1. Minimum of Five Years Experience in Quantitative and Qualitative Research and Evaluation, Data Collection and Analysis, and Presentation

HZA is a management consulting, research and evaluation firm which focuses on child and family services including child abuse prevention, child welfare and child and adult mental health, among other areas of service to high-risk populations. HZA was founded as Zeller Associates in 1988 by Dennis E. Zeller, Ph.D., M.S.S.W., who was Director of the Bureau of Policy Planning of the Division of Family and Children's Services at the New York State Department of Social Services. The firm became HZA in 1995 when Helaine Hornby left her post as founder and director of one of the national child welfare resource centers (University of Southern Maine, Organizational Improvement) to become a partner in the firm. Since 1995, it has received contracts in over 35 states (including West Virginia) which entail both quantitative and qualitative research methods, evaluation of program effectiveness, both original and secondary data collection and analysis, and the presentation of results to multiple audiences. The following are examples:

Quantitative and Qualitative Research and Evaluation: Nearly all of HZA's evaluation projects involve mixed methods of quantitative and qualitative research. For example, HZA is under contract to monitor all the contracts that the State of Arkansas has with vendors in the child welfare system. These include, for example, residential treatment providers, intensive family services providers and sexual abuse treatment providers. HZA assesses each vendor of these services, writing individual reports, and then aggregates them for a statewide report showing the overall effectiveness of the service. The quantitative aspects entail searching the state's child welfare database (SACWIS) to find which particular child or family was served by the provider, and then tracking that child and family over a 12 month period following service termination to see what happened; was the service effective in reuniting the family, for example, or avoiding another foster care placement. These data are quantified for each provider and for that statewide report. The qualitative aspect involves site visits to each provider agency where observations are made of the premises, the staff are interviewed, and the files are reviewed. In addition, both youth and family members who received the service participate in either interviews or focus groups. The information is combined with the quantitative data to develop a final evaluation report.

Another example is represented by HZA's work in Nebraska, where for the past two years the firm has been evaluating the state's Family Navigator program. Newly authorized by the legislature, the Nebraska Family Helpline, Family Navigator and Family Peer Support Programs are prevention efforts designed to help families having trouble managing the behaviors of their children and youth as well as navigating the mental health or other service systems designed to help them. HZA extracts data from various databases for quantitative

analysis and interviews family members who have received the services, the staff of these statewide programs and their managers to assemble quarterly and annual evaluation reports.

Data Collection and Analysis: The examples above each entail data collection and analysis. In both the Arkansas and Nebraska projects, HZA staff are dispensed to each service provision site across the state to collect data by reading case records and recording results on answer sheets which are entered into a database for analysis. Many of the firm's project analyses entail statistical tests where two groups are compared—those who have received an intervention or service, and those that have not—to determine if there is a statistical difference in the results. Sometimes regression testing is employed to determine the variables that are contributing to the results and the relative impact of each. An example is HZA's study of Alaska Natives who have been incarcerated and have been shown in the mental health system to have a history of mental illness. HZA performs regression analyses to determine which factors may predict recidivism upon release which can be averted through mental health treatment.

Another example is the Validity and Reliability Study of the Family Risk Assessment Matrix (FRAM) that HZA conducted for the state of Ohio in 2001. The purpose of this study was to determine whether the tool and the factors it encompassed were sufficiently valid and reliable to guide casework decisions. The contract was with the Ohio Department of Job and Family Services; using data from the state's case management system, HZA's analysts followed a cohort sample of reports and associated families forward in time to determine whether subsequent maltreatment occurred.

The data analysis included a content validity analysis of the FRAM items to assess the correspondence between individual items and their respective baseline scores, between the baseline scores and overall scores, and finally between individual items and the overall FRAM score. A criterion validity analysis was also undertaken to assess the extent to which the individual FRAM items and summative scores succeeded in predicting the likelihood of subsequent abuse or neglect. A correlational analysis and a regression analysis were also conducted to identify other factors (e.g., allegation type, age of child) which might have impacted the FRAM score and which items had the most predictive power of assessing future risk of harm. In addition to examining the FRAM and its components to assess its effectiveness, caseworkers were interviewed to determine the extent to which they make their decisions based on the FRAM scores and a survey was administered to both caseworkers and supervisors to obtain their overall impression of the tool's utility.

HZA found that the basic structure of Ohio's risk assessment tool was sound; however, it did not work as well after the initial assessment, largely because the policy mandated its use so frequently that caseworkers did not take the instrument seriously. In accord with the recommendations of the evaluation, the state took steps to revise the tool.

Presentations: Many of HZA's evaluation studies culminate in a presentation of results to various audiences. One example is in Oklahoma, where HZA was hired by the legislature to conduct a performance audit of the entire Department of Human Services with a focus on child welfare services. The study concluded with several presentations to legislative bodies

on the findings and recommendations. HZA's evaluation resulted in legislation encompassing 25 of the firm's recommendations.

In 2003, Maine's Office of Substance Abuse (a department within the state's Department of Health and Human Services) contracted with HZA to conduct an evaluation of a three-year prevention initiative designed to reduce binge drinking and smoking behaviors among teenagers by implementing tested prevention projects. Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the State Incentive Grant (SIG) Project was designed to provide grants to local recipients to develop alcohol and smoking prevention programs. HZA's role was to evaluate the local initiatives as well as to provide technical assistance to over twenty communities throughout the state in how to analyze community problems and evaluate programs. In its training and technical assistance role, HZA developed an Evaluation Resource Guide for the grantees to use and provided training on the Guide at state and local venues. In addition, HZA developed county-specific data packages which local people could use in identifying local need using local data.

For over five years and continuing to the present, HZA has been providing presentations to state, regional and county administrators of the Commonwealth of Pennsylvania's Office of Children, Youth and Families. To this end, HZA develops data packages for each of Pennsylvania's 67 counties based on various performance and outcome indicators. It then makes presentations to state and county staff on the interpretation of outcome data and how to use the information for program planning and improvement.

Another example is in West Virginia where HZA staff made a presentation to a statewide conference of home visitor and other providers about the results of the pilot project on implementing the Protective Factors Survey (see a fuller discussion of the project below). HZA staff have made several presentations at the Children's Mental Health Research Conference sponsored annually for the past 25 years by the University of South Florida. HZA has served as evaluator of Maine's System of Care grant for six years, and presented results at juried colloquia and poster presentations in Tampa for the past four.

2. Minimum of Five Years Experience Conducting Evaluation Research of Social Services Programs

HZA has offices in five states and a total of 40 full-time professional staff. Offices are located in New York, where HZA is incorporated, Maine, Arkansas, Florida and Pennsylvania. All of the projects that HZA undertakes involve working in social services or very closely related programs. HZA is often hired as an outside, objective resource that can inform social services and early intervention processes and outcomes for children and families. HZA is dedicated to promoting policies and practices which enhance the lives of adults, children and their families. Below is a sample of projects that highlight evaluation and research in social services. These supplement the examples given in the question above.

Evaluation of Maine's Pediatric Rapid Evaluation Program (2006-2007): In 2006, HZA was contracted by the Health Reach Network to conduct an evaluation of the Pediatric Rapid Evaluation Program (PREP). PREP represents a collaboration between the Maine General Medical Center and the Maine Department of Health and Human Services to improve the

health and mental health status of children in Maine's foster care system in targeted communities. PREP is based on many years of research which has shown that children in foster care have a high prevalence of chronic medical, dental, educational and mental health problems. The purpose of the evaluation was threefold: to determine whether PREP services had a positive impact on the children and youth who received them compared to those children in foster care who did not; to project needs for services based on the profiles of children in foster care; and to assess what additional information or processes would be needed to perform a more thorough evaluation, particularly if existing databases do not contain sufficient information to execute the evaluation plan. To perform the analyses HZA accessed several data sources, including: the PREP database; MACWIS; MaineCare; and surveys of DHHS staff, guardians ad litem, foster parents and physicians. In addition, HZA conducted 60 phone surveys of medical professionals (30 serving children in PREP and 30 serving other children in foster care).

Evaluation of AdoptOHIO: In 2004, HZA began a multi-year project to evaluate Ohio's special needs adoption program. The overall goal was to help the Department of Job and Family Services continue to increase the number of adoptions of children in public custody by providing both information and the support to understand how the program is functioning, how each initiative inter-relates and what changes are needed to make it more effective. The work was primarily quantitative in nature, involving analyses of data from the state's information system to determine the extent to which the state was achieving the federal outcomes related to adoption, which of Ohio's 88 counties were performing at desired levels and which needed to improve. Analyses were also done of client-level data which were aggregated to identify which children were getting adopted and which were not, and which kinds of families were likely to adopt and which were not. Qualitative work was used in many cases to deepen the understanding of the data and to highlight promising practices in specific counties with better performance. Both the quantitative and qualitative components led to recommendations as to what the state agency, the Department of Job and Family Services, and the county public children services agencies should do to improve their processes for finding permanent homes for children in foster care.

School Readiness Evaluation in Maine: HZA recently completed an assessment of school readiness for the Maine Department of Health and Human Services, which sponsors statewide home visiting programs designed in part to improve school readiness. HZA worked with local schools and staff from the Maine Home Visiting Program to design the study, based on performance standards established by the Maine Department of Education as articulated in a report entitled "Maine's Recommendations for Core Indicators of School Readiness." The report identified indicators in five areas: ready families; ready early care and education; ready communities; ready schools; and ready children. HZA developed a voluntary survey for families to use during school registration and asked them to complete the Ages and Stage Questionnaire®. Over 600 families participated in the project, which provided an excellent baseline measure of school readiness using the Department's indicators. This was the first such assessment conducted in Maine.

3. Minimum of Two Years Experience Working with Established West Virginia Home Visiting Programs, Protective Factors Survey, Bureau of Children and Families Affiliates, and Other State MIECHV collaborations.

Over two years ago, HZA began evaluation for West Virginia's Department of Health and Human Resources, Bureau of Children and Families Child Abuse Prevention grantees, which has since led a statewide study of protective factors in families participating in any form of prevention services offered by: Partners in Prevention, Family Leadership First, In-Home Family Education, Starting Points Centers, and Family Resource Networks. HZA provides user-friendly tools that can be easily adapted for the changing requirements related to state and federal funding sources. HZA also supports direct service and administrative staff through its staffing of a toll-free Help Desk line, quick responses to email inquiries, developing and facilitating webinars and conference calls, and conducting in-person training and technical assistance. HZA also conducts comprehensive data analysis and provides digestible results so that all involved can use the information for their unique needs. Examples of the related projects in West Virginia, as well as those demonstrating knowledge and experience with home visitation programs are described below.

Child Abuse Prevention Grantees Protective Factors Evaluation (2010-2012): HZA has worked with West Virginia's Bureau for Children and Families and Division of Early Care and Education since 2010. While employed as the evaluating team, HZA staff have formed a solid working relationship with the Bureau through the development and implementation of first the Pilot Study for the West Virginia Family Survey, and more recently the implementation, training and technical assistance for the statewide Protective Factors Survey (PFS), required for the state's CBCAP-funded agencies. In this role, HZA has worked diligently to create a tool that is appropriate for use among a diversity of prevention programs, connecting with the original developers from FRIENDS National Resource Center. As a result of this work, FRIENDS has contacted HZA and DHHR for permission to share the West Virginia Family Survey with other states as a quality example of the PFS.

Evaluation of West Virginia's Jacob's Law Implementation (2011-2012): In 2011, HZA was contracted to evaluate the effectiveness of House Bill 4164, commonly known as "Jacob's Law," and to provide related technical assistance to state staff and provider agency staff. This law establishes measures to assess children for the trauma they may already have experienced from abuse and removal and to support foster families in dealing with difficult behaviors to avoid future disruptions. HZA's evaluation examines the effectiveness of the foster program under the law based on three distinct groups of research and evaluation questions to be addressed throughout the project: those related to infrastructure and program development; those related to services received by children in the pilot; and those related to the outcomes achieved. HZA issues quarterly progress reports and an annual evaluation report.

Maine Families Statewide Home Visiting Program Data Management and Evaluation (2002-2012): HZA has been the statewide evaluator of home visitation services in Maine since 2002. For this project, HZA developed and implemented a comprehensive evaluation of the three models used in Maine: Healthy Families America, Parents as Teachers, and Parents Are Teachers, Too, which all provide home-based education and support services designed

to improve the health status and self-sufficiency of Maine's first-time families and pregnant and parenting adolescents. Rebranded as Maine Families two years ago, services are in place in every county of the state, with a priority on reaching the highest-risk populations. Maine Families receives funding from state and federal sources and, like the proposed WVHVP, must keep accurate data in order to report on mandated MIECHV benchmarks. HZA developed and manages a statewide database for home visiting, where all visit records are maintained electronically on a secure, web-based server. This server is designed for use in many locations and is supported by a toll-free live Help Desk line that provides technical support and assistance to local users of the system. This database is a critical source of information for the Federal MIECHV benchmarks. HZA has been adding programming and reports in the past year to ensure all benchmarks can be addressed.

Maine Home Visiting Statewide Needs Assessment (2010-2011): In 2010, HZA was contracted to work on the federally-required MIECHV Statewide Needs Assessment. Using a defined set of indicators and available data from numerous sources, HZA worked with epidemiologists to assess community risk factors and service capacity, by county for the State of Maine. HZA completed an inventory of all existing home visiting programs, and determined the extent to which the programs met the needs of high-risk families. The project included data analysis and reporting, conducting interviews with area experts and key informants, and facilitating focus groups with targeted populations identified as underserved. The statewide data report was presented at a public hearing, where the highest risk communities were revealed based on: at-risk indicators, community demographics, substance abuse prevalence, substance abuse and mental health services and treatment available, and gaps or duplications in early childhood home visitation services.

The next phase of the project included a deeper analysis of those communities targeted as being the highest risk; for this HZA developed a tool with set criteria to determine levels of risk in each community as well as the readiness for and potential sustainability of services to identified populations. HZA conducted research on evidence-based practices for working with high-risk populations, providing a thorough review of literature which helped the state in identifying which programs would be most effective in achieving desired outcomes and the forming of the State Plan, as required by the Federal MIECHV Program.

Prevent Child Abuse Iowa Protective Factors Survey (2011-2012): Serving as a subcontractor to Prevent Child Abuse Iowa, HZA is providing technical assistance in the continued establishment and expansion of the Iowa Child Abuse Prevention Program. HZA is responsible for identifying and evaluating evidence-based and evidence-informed practices, managing the statewide administration of the protective factors survey instrument, assisting in educating agencies in its usage and analyzing the data and writing the results emanating from the survey responses.

HZA completed a literature review that addresses the characteristics of effective, evidence-based programs designed to support families and reduce child abuse and neglect. HZA's review applied criteria developed by the National Alliance of Children's Trust and Prevention Funds to help the councils in lowa to select the most effective programs or practices in their work with families. The review included programs within the following areas:

- Parent Education and Development;
- · Outreach and Follow-up Services, including Home Visiting;
- Respite Care Services; and
- · Child Sexual Abuse Prevention.
- 4. Minimum of Two Years Experience Working with West Virginia Home Visiting and Early Childhood Systems.

The qualifications and experiences described in number three (above) are interwoven with those required for evidence of work specifically with the home visitation and early childhood system in West Virginia. Specifically, 21 of the 23 home visiting providers in West Virginia are participating in the projects that HZA is evaluating under the Child Abuse Prevention Grantee initiative. In addition, the proposed Project Director, Darshana Spach, M.Ed., who has been working with these programs for two years, has direct experience as a home visitor, and as a supervisor and coordinator of both home visiting and center-based early care and education services.

HZA worked closely with five regional home visiting programs during the Pilot Study of the West Virginia Family Survey in 2010. Input from each of these programs into the survey process was crucial to assure an effective and efficient rollout of the statewide survey. HZA participated in site visits, conducted personal interviews, and facilitated group meetings to ensure the Family Survey could be easily and readily incorporated into the existing practices. This pilot group shared its existing evaluation tools and methods with HZA, which were then considered in the actual development of appropriate home visiting survey questions. HZA contacted the MIHOW leadership, and worked with the Parents as Teachers National Center and Healthy Families America to assure that the West Virginia Family Survey would fulfill requirements for their respective parent satisfaction survey.

The proposed project team has also conducted a review of current literature and presentations in *Evidence-Based Home Visiting Practices for Working with High Risk Populations* (2010), and *Evidence-Based Practices for the Prevention of Child Abuse and Neglect* (2011), and though these deliverables were not required for the Protective Factors study, they would be available for review and the content may prove useful in the development of the WVHVP.

5. Vendor Will Not Subcontract the Work

HZA will be fully responsible for all aspects of the home visitation evaluation project if awarded. It will not subcontract any work.

	MCH12114 - BID PRIC	E SHEET		
DELIVERABLE (includes all requirements as described in specifications)	DUE DATE	ESTIMATED ANNUAL USAGE ¹	UNIT BID PRICE ¹	TOTAL BID PRICE (Estimated Annual Usage x Unit Bid Price)
Planning Meeting: Vendor will attend and participate in one, two-day meeting with WVHVP key staff at 350 Capitol Street, Charleston, West Virginia to develop a plan for the evaluation; acquire background information, obtain guidance for developing tools, and form a group consisting of WVHVP staff and other home visitation partners to assist vendor throughout the project period. Vendor will be responsible for all costs incurred for its staff attending the meeting.	Year 1, Month 1	1 two day meeting	\$6,898	\$6,898
DELIVERABLE #2 Activity Tool Development: Vendor will develop the following activity tools for WVHVP approval: 1. State, local, and home visitation level interview formats 2. Home visitation site observation forms 3. Home visitation surveys	Year 1, Months 1 - 2	1 meeting	\$11,750	\$11,750
DELIVERABLE #3 Product Review: Vendor will request and obtain copies of products already created or being developed by WVHVP and other effective home visitation programs to review for content, conformity to evidence-based practices for home visitation, presentation, and accessibility by targeted groups.	Year 1, Months 1 - 2	1 event via email or phone	\$17,500	\$17,500
DELIVERABLE #4 Review Meetings: Vendor will attend and participate in four, one-day meetings with WVHVP key staff at 350 Capitol Street, Charleston, West Virginia to review progress and revise the evaluation plan as necessary. Vendor will provide WVHVP various printed progress reports, presentations, and summaries for review and approval during the review meetings that will be shared with different constituencies, including stakeholders, federal officers, and community based agencies. Vendor will be responsible for all costs incurred for its staff attending the one-day review meetings.	Year 1, Months 3, 6, 9, and 12	4 one day meetings	\$5,875	\$23,500

DELIVERABLE #5 Home Visitation Partner Group Quarterly Meetings: Vendor will attend and participate in four, one-day meetings with the home visitation partner group at 350 Capitol Street, Charleston, West Virginia to review progress; provide progress reports, presentations, and summaries; collaborate with various home visitation entities; and interpret information based on vendor's knowledge and experience. Vendor will be responsible for all costs incurred for its staff attending the one-day meetings. DELIVERABLE #6	Year 1, Months 3, 6, 9, and 12	4 one day meetings	\$5,750	\$23,000
State Level Interviews: Vendor will conduct telephone or email interviews with stakeholders at the state level. WVHVP will provide vendor with a list of state level home visitation agencies to interview that includes addresses, contact persons, telephone numbers, and email addresses.	Year 1, Months 3 - 10	20 telephone or email contacts	\$550	\$11,000
DELIVERABLE #7 Local Level Interviews: Vendor will conduct telephone or email interviews with stakeholders at the local level. WVHVP will provide vendor with a list of local level home visitation agencies to interview that includes addresses, contact persons, telephone numbers, and email addresses.	Year 1, Months 3 - 10	30 telephone or email contacts	\$420	\$12,600
DELIVERABLE # 8 Home Visitation Level Interviews: Vendor will use a random selection approach developed during the initial two-day, Month 1 meeting with WVHVP to conduct onsite, in person interviews with every employee at the following 23 home visitation sites:	ē.		\$344	\$1,376
A.B.L.E. Families, Kermit, WV	Year 1, Months 3 - 10	4 contacts	\$344	£1 276
Brooke/Hancock Parents as Teachers, Weirton, WV	Year 1, Months 3 - 10	4 contacts		\$1,376
Brooke/Hancock Family Resource Network, Weston, WV	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
Children's Home Society of WV, Parkersburg, WV	Year 1, Months 3 - 10	20 contacts	\$344	\$6,880
Community Crossings, Inc., Welch, WV	Year 1, Months 3 - 10	9 contacts	\$344	\$3,096
Cornerstone Family Interventions, Madison, WV	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
Doddridge County Starting Points, Smithsburg, WV	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
East End Family Resource Center, Charleston, WV	Year 1, Months 3 - 10	20 contacts	\$344	\$6,880

			\$344	\$6,880
Marshall County Starting Points, McMechen, WV	Year 1, Months 3 - 10	20 contacts	\$344	\$6,880
Monongalia County Starting Points Center, Morgantown, WV	Year 1, Months 3 - 10	20 contacts	N → V = V (1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1	
Monongalia County Early Head Start, Morgantown, WV	Year 1, Months 3 - 10	20 contacts	\$344	\$6,880
Monroe County Board of Education, Union, WV	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
Morgan County Starting Points, Berkeley Springs, WV	Year 1, Months 3 - 10	5 contacts	\$344	\$1,720
New River Health Association, Fayetteville, WV	Year 1, Months 3 - 10	20 contacts	\$344	\$6,880
Northern Panhandle Head Start, Wheeling, WV	Year 1, Months 3 - 10	9 contacts	\$344	\$3,096
Partners in Community Outreach, Rush, KY	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
Preston County Caring Council, Grafton, WV	Year 1, Months 3 - 10	9 contacts	\$344	\$3,096
Rainelle Medical Center, Rainelle, WV	Year 1, Months 3 - 10	9 contacts	\$344	\$3,096
REACHH Family Resource Center, Hinton, WV	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
TEAM for WV Children, Huntington, WV	Year 1, Months 3 - 10	20 contacts	\$344	\$6,880
Tucker County Parents as Teachers, Parsons, WV	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
Upper Kanawha Valley Starting Points Center, Miami, WV	Year 1, Months 3 - 10	20 contacts	\$344	\$6,880
Wetzel County Center for Children & Families, New Martinsville, WV	Year 1, Months 3 - 10	4 contacts	\$344	\$1,376
DELIVERABLE #9 Surveys: Vendor will conduct 10 telephone or email surveys with West Virginia home visitation site administrators and 10 home visitors to gain knowledge about impact of infrastructure changes on their daily activities. The 10 home visitation administrators and 10 home visitors to be surveyed will be determined during the first home visitation partner group meeting in Month 3.	Year 1, Months 3 - 10	20 contacts	\$638	\$12,750
DELIVERABLE #10 Site Observation: Vendor will conduct an onsite observation visit at each of the following 23 home visitation sites to gain an understanding of the environment within which agencies function, benefits of infrastructure changes, and staff concerns. Vendor will work with each of the 23 home visitation sites to schedule the observations and be responsible for all costs incurred for its staff conducting the onsite visits. A.B.L.E. Families, Kermit, WV		1 meeting	\$2,174	\$2,174

	V 4 Bantho 2 40	1 meeting	\$2,174	\$2,174
Brooke/Hancock Parents as Teachers, Weirton, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Brooke/Hancock Family Resource Network, Weston, WV	Year 1, Months 3 - 10		\$2,174	\$2,174
Children's Home Society of WV, Parkersburg, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Community Crossings, Inc., Welch, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Cornerstone Family Interventions, Madison, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Doddridge County Starting Points, Smithsburg, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
East End Family Resource Center, Charleston, WV	Year 1, Months 3 - 10	1 meeting		\$2,174
Marshall County Starting Points, McMechen, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	
Monongalia County Starting Points Center, Morgantown, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Monongalia County Early Head Start, Morgantown, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Monroe County Board of Education, Union, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Morgan County Starting Points, Berkeley Springs, W	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
New River Health Association, Fayetteville, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Northern Panhandle Head Start, Wheeling, WV		1 meeting	\$2,174	\$2,174
Partners in Community Outreach, Rush, KY	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Preston County Caring Council, Grafton, WV	Year 1, Months 3 - 10		\$2,174	\$2,174
Rainelle Medical Center, Rainelle, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
REACHH Family Resource Center, Hinton, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
TEAM for WV Children, Huntington, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Tucker County Parents as Teachers, Parsons, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	\$2,174
Upper Kanawha Valley Starting Points Center, Miami, WV	Year 1, Months 3 - 10	1 meeting		\$2,174
Wetzel County Center for Children & Families, New Martinsville, WV	Year 1, Months 3 - 10	1 meeting	\$2,174	ΦΖ,174

DELIVERABLE #11 Home Visitation Evaluation System and Report: Vendor will follow the formats below to analyze documents and	Year 1, Months 11-12	1 meeting		
information obtained and developed throughout the Year 1 project period to complete the evaluation and provide WVHVP a Final Evaluation Report. Content Analysis Time Series Analysis Measurement of Project Against Objectives Descriptive Statistics and Cross Tabulations			\$29,000	\$29,000
DELIVERABLE #12 Progress Review Meetings: Vendor will attend and participate in four, one-day meetings with WVHVP to review home visitation progress and changes implemented based on the results of the Year 1 evaluation process. These four, one-day meetings will be held at the WVHVP office located at 350 Capitol Street, Charleston, West Virginia. Vendor will be responsible for all costs incurred for its staff attending the one-day meetings.	Year 2, Months 3, 6, 9, and 12	4 meetings	\$7,500	\$30,000
DELIVERABLE #13 Progress Evaluation and Report: Vendor will use WVHVP benchmarks established after the Year 1 evaluation process and data and information obtained during the progress review meetings to conduct a Changes in Outcomes analysis and provide WVHVP with a Progress Evaluation Report of the following: Improved prenatal, maternal and newborn health Improved economic self sufficiency Decreased childhood injuries, abuse and neglect and emergency visits Reduced crime and domestic violence	Year 2, Month 12	1 contact	\$39,000	\$39,000
Improved school readiness				
			TOTAL BID PRICE	\$349,904

¹Annual Usage is estimated. Bidders "Unit Bid Price" will be the final unit cost charged to WVHVP under this contract whether one or more than one is provided.

WV Birth to Three will use the Total Bid Price from the Bid Price Sheet to determine the low bid vendor and award a contract. The winning bidder will be the one that submits the lowest total bid price and meets the requirements of these specifications.

Bidders should not alter, modify, or add information to this Bid Price Sheet.

373 Broadway, South Portland, ME 04106

Bidders must complete, sign, and date the vendor section below:

Vendor Remit to Address: _

Vendor Name:	Hornby Zeller Associates, Inc.	Phone: _	(207) 773-9529
Contact Person:	Helaine Hornby	Fax:	(207) 773-9074
Contact Cison.	(Please Print)	Email:	hhornby@hornbyzeller.com
Authorized Repre	esentative: Helaine Hornby		
Authorized Repre	esentative Signature: Aclasia Haraly	Date:	April 10,2012
Vendor Order Ad	dress:373 Broadway, South Portland, ME 04106		

State of West Virginia

VENDOR PREFERENCE CERTIFICATE

Certification and application* is hereby made for Preference in accordance with West Virginia Code, §5A-3-37. (Does not apply to construction contracts). West Virginia Code, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the West Virginia Code. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

1.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or, Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or, Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
3.	Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
4.	Application is made for 5% resident vendor preference for the reason checked: Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5.	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
6.	Application is made for 3.5% resident vendor preference who is a veteran for the reason checked: Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
require agains or dedu	understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the ements for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty t such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency ucted from any unpaid balance on the contract or purchase order.
authori the red deems	emission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and izes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid juired business taxes, provided that such information does not contain the amounts of taxes paid nor any other information and by the Tax Commissioner to be confidential.
and ac	penalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true ccurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate les during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.
Bidde	Hornby Zeller Associates Signed: Yslicain Hornby HI 101 12
D-4-	Al 10/12 Title: Trincipal

Title:

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

10/12

RFQ No. MCH12114

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

Under penalty of law for false swearing (West Virginia Code §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

Vendor's Name: Date: Authorized Signature: State of __MAINE County of LUMBERLAND Taken, subscribed, and sworn to before me this 1074 2012 SEPTEMBER My Commission expires **NOTARY PUBLIC**

Notary Public, Maine

WITNESS THE FOLLOWING SIGNATURE

AFFIX SEAL HERE

EVE R. WENTWORTH My Commission Expires September 19, 2015



State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
MCH12114

PAGE 1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
ROBERTA WAGNER
304-558-0067

HEALTH AND HUMAN RESOURCES BPH - MCH WAREHOUSE

900 BULLITT STREET CHARLESTON, WV 25301 304-558-3417

RFQ COPY TYPE NAME/ADDRESS HERE

> Hornby Zeller Associates Inc. 373 Broadway South Portland, ME 04106

DATE PRII		Τ¢	ERMS OF SA	LE	SHIP VIA	F.O.B.	FREIGHT TERMS
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GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid.
- 3. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
- 4. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods this Purchase Order/Contract becomes void and of no effect after June 30.
- 5. Payment may only be made after the delivery and acceptance of goods or services.
- 6. Interest may be paid for late payment in accordance with the West Virginia Code.
- 7. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- 8. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 9. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 10. The laws of the State of West Virginia and the Legislative Rules of the Purchasing Division shall govern the purchasing process.
- 11. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- 12. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 13. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.html and is hereby made part of the agreement provided that the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
- 14. CONFIDENTIALITY: The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf.
- 15. LICENSING: Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, and the West Virginia Insurance Commission. The vendor must provide all necessary releases to obtain information to enable the director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
- 16. ANTITRUST: In submitting a bid to any agency for the State of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the State of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, or person or entity submitting a bid for the same material, supplies, equipment or services and is in all respects fair and without collusion or Fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division. Complete all sections of the quotation form.
- 2. Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as EQUAL to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- 3. Unit prices shall prevail in case of discrepancy. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- 4. All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130
- 5. Communication during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited (W.Va. C.S.R. §148-1-6.6).



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State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for

RFQ NUMBER

MCH12114

ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES

BPH - MCH WAREHOUSE

900 BULLITT STREET CHARLESTON, WV

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Purchasing Division
2019 Washington Street East
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Charleston, WV 25305-0130

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Request for Quotation

MCH12114

PAGE 4

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ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES
BPH - MCH WAREHOUSE

900 BULLITT STREET CHARLESTON, WV

25301 304-558-3417

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900 BULLITT STREET CHARLESTON, WV 25301

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900 BULLITT STREET CHARLESTON, WV 25301

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