

**AMENDED 8/31/2018**

**Title:** Solicitation of Interest # 2018-03  
Socialization Skills Services for Children Who Are Legally Blind

**Agency:** Children & Family Services, NYS Office of  
Bureau of Contract Management

**Contract Number:** TBD

**Contract Term:** Anticipated contract term is May 1, 2019 to April 30, 2024

**Date of Issue:** August 8, 2018

**Due Date/Time:** ~~September 7, 2018~~ **September 14, 2018 by 4:00 PM Eastern Time**

**Counties:** All NYS Counties

**Location:** Statewide

**Background:**

New York State Office of Children & Family Services (OCFS) announces a Solicitation of Interest (SOI) for eligible organizations that provide a wide array of socialization skills programs for children who are legally blind that will help develop and reinforce their social skills, independence, confidence, and self-esteem. These programs may take place after school, on weekends, on a year-round basis, or during school vacations; they may be residential or day programs. Programs must focus on one or more of the following: Life Skills, Career Exploration, Technology Training, and/or Social Events.

The New York State Commission for the Blind (NYSCB) is the State entity designated to provide services to New Yorkers who are legally blind. Recognizing the need for early intervention and expansion of educational and social opportunities outside of school for children who are legally blind, NYSCB sponsors Socialization Skills Services Programs to provide socialization experiences. The programs teach and reinforce rehabilitation and social skills, which ultimately teach skills that will enable youth to be successful in future employment endeavors.

Participation in social activities during the formative years has a significant and positive impact on basic health and fitness, intellectual growth, and social and emotional development for children. NYSCB Socialization Skills Services Programs provide needed services, training, and critical support to address a wide range of needs for youth who are legally blind, and helps prepare them to become well-adjusted, productive citizens and assist them in their eventual attainment of gainful employment. Participation in the programs also increases the ability of children who are legally blind to integrate and function independently in social environments.

The purpose of this SOI is to invite any eligible and interested organization who believes they can satisfy the needs of this program, to so inform OCFS by a Letter of Interest (LOI). To be considered eligible your organization must meet the criteria of the Socialization Skills Services SOI Submission Checklist (attached). To be considered responsive, your

organization's LOI must be received no later than the due date and time as instructed below.

**Activities/Work to be Performed:**

Funded organizations will provide socialization skills programs for children who are legally blind in one or more of the following program areas:

1. Life Skills – development of communications and social aptitude, appropriate dress and personal hygiene, food preparation, currency recognition and financial aptitude, use of public transportation.
2. Career Exploration – investigation of vocational options and interests, writing resumes, completing applications, developing interview and job seeking skills.
3. Technology Training – exploration of individual adaptive technology needs, keyboard skills, Internet usage, computer games.
4. Social Events – development of motor skills through dance and music, mapping skills exercises, field trips that build orientation and mobility training, etc.

The desired goals for each of the programs are to increase socialization skills, independence, confidence, and self-esteem of youth participants in social settings. Goals may vary from one program to another, but must be tailored to the individual needs of each legally blind child that is referred by OCFS/NYSCB.

**Referrals and Program Termination**

Funded organizations agree to accept all legally blind children referred from NYSCB in their program(s). If, after commencement of the program, the Contractor determines that a referred legally blind child is incapable of benefiting from the program, the Contractor may not refuse services or terminate the child's participation in the program without first contacting the NYSCB counselor who referred the child and obtaining agreement from the NYSCB counselor that termination of the child from the program would be in the best interest of the child and/or of the other participants.

**Residential Programs**

If the funded organization offers residential programs the funded organization agrees to provide all meals for each participant for the duration of the program, to provide safe and comfortable lodging, or sleeping accommodations for each participant for the duration of the program, and to provide on-site overnight supervision accessible to all participants each night of the program. All program areas must be accessible to, and accommodated for, legally blind individuals.

**Integrated Programs**

While NYSCB encourages integration of legally blind children into programs with sighted children, the funded organization must notify the NYSCB Central Office Children's Services Coordinator no later than thirty (30) days in advance of any programs in which legally blind

children are integrated with children who are sighted and are not family members.

No program will be allowed which integrates legally blind children with non-family members who are 18 years of age or older. However, children with multiple disabilities may be referred into the program up to the age of 22. These individuals may be integrated into the program as if they were under 18.

Multiple disabilities according to the Individuals with Disabilities Education Act's (IDEA), refers to "concomitant [simultaneous] impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include deaf-blindness."

### Staff Qualifications

Staff of the funded organization who are providing services must possess the following qualifications:

- capable of working with the unique needs of legally blind children;
- demonstrable knowledge and understanding of the effects of vision loss; and
- demonstrable specific skills required to deliver instruction to legally blind children in the specialized areas of the funded organization's programs.

When the funded organization experiences any change in staff during the contract period, the funded organization must submit curriculum vitae for all staff providing services under the contract to the NYSCB Central Office Children's Services Coordinator, and must obtain prior approval from NYSCB for any staff assignments.

### Confidentiality

The funded organization will safeguard the confidentiality of all information relating to all individuals who participate in programs and shall maintain the confidentiality of all such information in conformity with the provisions of applicable State and Federal laws rules and regulations. The funded organization shall not maintain any identifiable records for any program participant other than emergency contact information and Program Summary Reports.

**Minimum Qualifications/Eligibility Criteria:**

Funded organizations must:

1. have a minimum of three years' experience providing similar services to youth with disabilities and/or youth who are legally blind **AND** have key staff members who possess the following qualifications: capable of working with the unique needs of legally blind children; demonstrable knowledge and understanding of the effects of vision loss; demonstrable specific skills required to deliver instruction to legally blind children in the specialized areas of the organization's programs. This must be documented in your Letter of Interest.
  2. be registered in New York State as a Not-For-Profit entity.
  3. have a governing board (board of directors) that includes a minimum of three (3) members.
  4. propose to provide socialization skills programs for children who are legally blind in one or more of the following programs:
    - Life Skills– development of communications and social aptitude, appropriate dress and personal hygiene, food preparation, currency recognition and financial aptitude, use of public transportation;
    - Career Exploration– investigation of vocational options and interests, writing resumes, completing applications, developing interview and job seeking skills;
    - Technology Training – exploration of individual adaptive technology needs, keyboard skills, Internet usage, computer games;
    - Social Events – development of motor skills through dance and music, mapping skills exercises, skill-building field trips, etc.
- NOTE:** Explain in your Letter of Interest how each service, activity, or instructional area will actively engage the child. Thoroughly describe your plan for orientation of the child to the program site. Provide the address where the services/activities will take place. Please attach any current service pamphlet or brochure to your narrative. Additionally, provide a current organization chart that depicts the entire organization structure and indicates where the organization head or the Chief Administrative Officer and the Contract Developers, Contract Signatories and Claim Signatories appear in relation to the Board of Directors and the organization as a whole
5. propose to provide a Per-Student Evaluation at the completion of the socialization skills program and provide a sample template.
  6. be willing to accept all legally blind children referred from NYSCB for the program.
  7. agree to provide all meals for each participant for the duration of the program (*applicable only to residential programs*).

8. agree to provide safe and comfortable lodging, or sleeping accommodations, for each participant for the duration of the program (*applicable only to residential programs*). If yes, please provide a brief description of the lodging, or sleeping accommodations
9. agree to provide on-site overnight supervision accessible to all participants each night of the program (*applicable only to residential programs*). If yes, please provide a brief description of the on-site overnight supervision.
10. agree that all program areas must be accessible to, and accommodated for, legally blind individuals.
11. agree to notify the NYSCB Central Office Children's Services Coordinator no later than 30 days in advance of any programs in which legally blind children are integrated with children who are not blind and who are not family members.
12. agree that no program will be allowed which integrates legally blind children with non-family members who are 18 years of age or older. However, children with multiple disabilities may be referred into the program up to the age of 22. These individuals may be integrated into the program as if they were under 18.

**NOTE:** Multiple disabilities according to the Individuals with Disabilities Education Act's (IDEA), refers to "concomitant [simultaneous] impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include deaf-blindness."

13. agree that staff providing services will possess the following qualifications and describe how this requirement will be satisfied in the letter of interest:
  - capable of working with the unique needs of legally blind children;
  - demonstrable knowledge and understanding of the effects of vision loss;
  - demonstrable specific skills required to deliver instruction to legally blind children in the specialized areas of the Contractor's programs.
14. agree to provide program staff training and orientation that occurs prior to the arrival of the first child, includes all program staff and must specifically address:
  - Chain of command
  - Reporting illness, injury or other emergency situations
  - Fire drills and evacuation procedures (for residential programs only)
15. agree that in the event the funded organization experiences any change in staff during the contract period, the funded organization will submit curriculum vitae for all staff providing services under the contract to the NYSCB Central Office Children's Services Coordinator, and must obtain prior approval from NYSCB for any staff assignments

16. agree to safeguard the confidentiality of all information relating to all individuals who participate in programs and shall maintain the confidentiality of all such information in conformity with the provisions of applicable State and Federal laws and regulations.
17. agree to not maintain any records for any program participant other than emergency contact information and Program Summary Reports.
18. provide a cost per child to attend the proposed socialization skills program
19. specify the minimum number of referrals the funded organization will accept from NYSCB
20. specify the maximum number of referrals the funded organization will accept from NYSCB
21. be eligible to do business with New York State
22. be headquartered within the defined region or have program operations in that region where proposed activities are taking place.

**Contract/Funding Details:**

Funding for this project is contingent upon the availability of funds in the state and/or federal budgets, and the number of eligible applicants that respond to this SOI. In making awards, OCFS must verify geographic coverage of the regions proposed.

NYSCB intends to award multiple fee-based contracts throughout the State totaling approximately \$300,000 per year in response to this SOI. Referral of children to funded organizations will be based on need and availability, and the cost per child. There is no guarantee of referrals and/or revenues from any contract awarded pursuant to this SOI.

NYSCB further intends to award contracts to all applicants who meet the eligibility requirements and whose proposals pass the minimum pass/fail requirements in the Checklist. Payment for services will be according to the per child fee originally proposed and NYSCB's approval of the Service Authorization form (fee for service).

Individual contract funding levels (contract value) will be determined by a panel of experts consisting of Children's Vocational Rehabilitation Counselors who hold advanced degrees and have extensive experience in the field of working with children in vocational rehabilitation.

The panel will estimate levels of utilization for each contract and use the utilization amounts to estimate the required contract value for each funded organization. In the event the panel underestimates usage for any contract, NYSCB will reach out to the funded organization and perform the necessary contract amendment to realign values with utilization.

Please be aware that NYSCB believes in participant choice and ultimately the usage of any contract will be determined by our participants and not by this panel of counselors and



therefore all contract values should be considered estimates of potential usage only.

For contract development and administration purposes, if the applicant proposes more than one Proposed Activity and the applicant meets the eligibility requirements stipulated herein and whose proposal passes the minimum pass/fail requirements stipulated in the Checklist, NYSCB may combine the Proposed Activities under one contract with the funded organization.

#### Payment

Services provided under contracts resulting from this SOI will be used on an as-needed basis, as authorized by the NYSCB District office. Payment for these services is upon NYSCB's approval of the Service Authorization form and based upon the original per child cost proposed.

The funded organization will be paid upon submission to the NYSCB Central Office Children's Services Coordinator a completed Service Authorization form along with the required reports, approval by the NYSCB Central Office of the payment request and report, and approval and processing of the payment voucher by the New York State Office of the State Comptroller.

Upon conclusion of each program, the funded organization must submit a Program Summary Report to the NYSCB Central Office Children's Services Coordinator. The Program Summary Report shall contain, at a minimum: (1) the dates of the program; (2) a summary description of the program activities for the period; (3) the names of all participants referred by NYSCB (including family members, where appropriate); (4) the total number of participants (if the program was an integrated program).

Upon conclusion of each program, the funded organization must submit a Per-Student Report to the NYSCB District Office(s) which referred the participant(s). The Per-Student Report shall contain, at a minimum: (1) the dates of the program; (2) a summary description of the program activities for the period; (3) the goals achieved by the participant during the program.

The funded organization may not request nor accept payments from any NYSCB participant or other individual or entity for any services provided under the contracts resulting from this SOI.

**NOTE: OCFS/NYSCB does not guarantee any specific level of income or any specific level of referrals in any of the contracts resulting from this SOI.**

Contract(s) awarded in response to this SOI will be for **five (5) years**. The anticipated start date is **May 1, 2019**, and the anticipated end date is **April 30, 2024**. Funding is currently anticipated to be available for the first year of the contract, and the award of a contract does not guarantee that funding will be available for subsequent years. Contractors may not begin to provide services prior to the contract start date; OCFS has no obligation to pay for services rendered prior to the approval of the contract by the New York State Office of the State Comptroller and the Office of the Attorney General.

**How to Apply:**

Interested organizations must submit a Letter of Interest in compliance with the attached Guidelines for Preparing Letters of Interest, and completed Submission Checklist (both available under the “Documents” tab) for each proposed activity. **In addition, organizations must supply required supporting documentation described in the requirements above under Eligibility Criteria and on the Submission Checklist.** The supporting documents should, wherever possible, provide verification for OCFS that your organization meets the qualification requirements be it requirements for business structure or programming or other requirements.

**Please submit these documents via email to [RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov) no later than the deadline specified on the first page of this announcement.** Please be sure to put “**SOI # 2018-03 Socialization Services for Children Who Are Legally Blind**” in the subject line. Early submissions are encouraged as late responses cannot be accepted.

Please limit your Letter of Interest to **35** pages, size twelve font, single line spacing and one-inch margins.

An internal review by OCFS will confirm eligibility. This solicitation of interest is not a guarantee or promise of funding. Available funding to support this initiative will be limited to the amount(s) appropriated in the enacted budget for this purpose and will be awarded among those interested organizations who are deemed to meet the eligibility requirements.

OCFS may require additional information from an organization prior to deciding whether the interested organization is eligible and can supply the requested commodities or services. Additional information requested by OCFS must be provided within 5 business days.

Upon determination of eligibility, OCFS will notify eligible organizations of their status and the proposed award amount (if any) and request a work plan and budget with justifications as well as required Minority and Women-owned Business Enterprise (MWBE) and other completed documents necessary to develop contracts (if applicable). If this SOI results in a grant contract, Not-For-Profit organizations must also be registered in the NYS Grants Gateway and complete the Vendor Prequalification process prior to contract execution per [New York State Division of Budget Bulletin H-1032 Revised](#), dated July 16, 2014.

OCFS reserves the right to withdraw, amend or postpone this SOI, without notice, and without liability, to any applicant, or other party, and may exercise these rights at any time. In addition, OCFS reserves the right to

- place a monetary cap on the funding amount made in each contract award;
- change any of the schedule date stated in the SOI;
- request all bidders who submitted proposals to present supplemental information clarifying their proposals either in writing or by formal presentation;
- direct all organization who submitted LOI's to prepare modifications addressing SOI amendments;
- make funding decisions that maximize compliance with and address the outcomes identified in this SOI;



- eliminate any SOI requirements unmet by all applicants, upon notice to all parties that submitted LOI's;
- waive procedural technicalities, or modify minor irregularities, in proposals received, after notification to the applicant involved;
- correct any arithmetic errors in any proposal, or make typographical corrections to proposals, with the concurrence of the applicant;
- negotiate with the eligible applicant(s) prior to contract award;
- require that all proposals be held valid for a minimum of 180 days from the closing date for receipt of applications, unless otherwise expressly provided for in writing;
- fund any or all of the proposals received in response to this SOI. However, issuance of this SOI does not commit OCFS to fund any proposals. OCFS can reject any proposals submitted;
- use the LOI submitted in response to this SOI as part of an approved contract. At the time of contract development, awardees may be requested to provide additional budget and program information for the final contract;
- make inquiries of third parties, including but not limited to applicant's references, with regard to the applicant's experience, or other matters deemed relevant by OCFS. By submitting a LOI in response to this SOI, the applicant gives its consent to any inquiry made by OCFS;
- where applicable, require contractors to participate in a formal evaluation of the program to be developed by OCFS. Contractors may be required to collect data for these purposes. The evaluation design will maintain confidentiality of participants and recognize practical constraints of collecting this kind of information; and
- when applicable consider Statewide distribution and regional distribution within New York City, including borough distribution methodology, in evaluating proposals.

### **Questions**

Questions must be submitted via e-mail to [RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov) prior to the due date and time of this SOI. Please submit your question with adequate time for response. Be sure to put **"SOI # 2018-03 Socialization Services for Children Who Are Legally Blind"** in the subject line.

### **Contract Documents**

The applicant must review the contract terms and conditions of the contract template provided below.

The contract documents consist of the following:

1. Face Page
2. Signatory Page
3. NYS Standard Terms and Conditions (State of New York Master Contract for Grants)
4. Master Contract Attachment A-1 (Agency-Specific Terms and Conditions)
5. Master Contract Attachment A-2 (Federally Funded Grants)
6. Master Contract Attachment B: Budget and Instructions
7. Master Contract Attachment C: Work Plan
8. Master Contract Attachment D: Payment and Reporting Schedule
9. Attachment MWBE: Minority and Women-Owned Business Enterprises

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A copy of the NYS Standard Terms and Conditions (State of New York Master Contract for Grants) and a sample grant contract is available for review at the following link:

[https://grantsreform.ny.gov/sites/default/files/docs/nys\\_master\\_contract\\_for\\_grants\\_8\\_14.pdf](https://grantsreform.ny.gov/sites/default/files/docs/nys_master_contract_for_grants_8_14.pdf)

### **Contact Information**

#### **Primary contact:**

Director of Contracts  
Office of Children & Family Services  
52 Washington Street  
Room 202S – RFP Unit  
Rensselaer, NY 12144  
[RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov)  
518-486-7224

#### **Submit to contact:**

Director of Contracts  
Office of Children & Family Services  
52 Washington Street  
Room 202S – RFP Unit  
Rensselaer, NY 12144  
[RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov)  
518-486-7224

### **Attachments**

Please see the following attachments to this SOI, which are available on the NYS Contract Reporter website at <https://www.nyscr.ny.gov/login.cfm>.

Submission Checklist  
Sample Letter of Interest  
Guidelines for Preparing Letters of Interest

**Submission Checklist**

Solicitation of Interest # 2018-03

Socialization Skills Services for Children Who Are Legally Blind

Agency: \_\_\_\_\_ FEIN/TIN: \_\_\_\_\_

Please indicate whether the following statements described in the solicitation apply to your organization:

Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization meets the requirement of having a minimum of three years' experience providing similar services youth with disabilities and/or youth who are legally blind <b>AND</b> have key staff members who possess the following qualifications: capable of working with the unique needs of legally blind children; demonstrable knowledge and understanding of the effects of vision loss; demonstrable specific skills required to deliver instruction to legally blind children in the specialized areas of the organization's programs. <b>This has been documented in my letter of interest.</b>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization is registered in New York State as a Not-For-Profit entity.
Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization has a governing board (board of directors) which includes a minimum of three (3) members and have provided their names and contact information.
Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization is proposing to provide socialization programs for children who are legally blind in one or more of the following programs <b>and have described the proposed programs in my letter of interest</b> (check all that apply): <input type="checkbox"/> Life Skills; development of communications and social aptitude, appropriate dress and personal hygiene, food preparation, currency recognition and financial aptitude, use of public transportation; <input type="checkbox"/> Career Exploration; investigation of vocational options and interests, writing resumes, completing applications, developing interview and job seeking skills; <input type="checkbox"/> Technology Training – exploration of individual adaptive technology needs, keyboard skills, Internet usage, computer games; <input type="checkbox"/> Social Events – development of motor skills through dance and music, mapping skills exercises, field trips that build orientation and mobility training, etc.
Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization will provide a Per-Student Evaluation at the completion of the socialization skills program <b>and have attached a sample template.</b>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization is willing to accept all legally blind children referred from NYSCB for the program.
Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	My organization agrees to provide all meals for each participant for the duration of the program ( <i>applicable only to residential programs</i> ).
Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	My organization agrees to provide safe and comfortable lodging, or sleeping accommodations, for each participant for the duration of the program ( <i>applicable only to residential programs</i> ).
Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	My organization agrees to provide on-site overnight supervision accessible to all participants each night of the program ( <i>applicable only to residential programs</i> ).
Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization agrees that all program areas are accessible to, and accommodated for, legally blind individuals.
Yes <input type="checkbox"/>	No <input type="checkbox"/>		My organization agrees to notify the NYSCB Central Office Children's Services Coordinator no later than thirty (30) days in advance of any programs in which legally blind children are integrated with children who are not blind and who are not family members.

Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization agrees that no program will be allowed which integrates legally blind children with non-family members who are 18 years of age or older. However, children with multiple disabilities may be referred into the program up to the age of 22. These individuals may be integrated into the program as if they were under 18.</p> <p>Multiple disabilities according to the Individuals with Disabilities Education Act's (IDEA), refers to "concomitant [simultaneous] impairments (such as intellectual disability-blindness, intellectual disability-orthopedic impairment, etc.), the combination of which causes such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include deaf-blindness."</p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization agrees that key staff members providing services will possess the following qualifications: capable of working with the unique needs of legally blind children; demonstrable knowledge and understanding of the effects of vision loss; demonstrable specific skills required to deliver instruction to legally blind children in the specialized areas of the Contractor's programs <b>and have described how we will satisfy this requirement in our letter of interest.</b></p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization agrees that in the event the organization experiences any change in staff during the contract period, the organization will submit curriculum vitae for all staff providing services under the contract to the NYSCB Central Office Children's Services Coordinator, and will obtain prior approval from NYSCB for any staff assignments.</p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization agrees to safeguard the confidentiality of all information relating to all individuals who participate in programs and shall maintain the confidentiality of all such information in conformity with the provisions of applicable State and Federal laws and regulations.</p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization agrees to not maintain any identifiable records for any program participant other than emergency contact information and program summary reports.</p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization has determined a cost per child to attend the proposed socialization program and said cost is provided below:</p> <p>\$_____</p> <p><i>PLEASE NOTE: It is strongly advised to keep proposed costs per child as low as possible, as this will determine the number of referrals NYSCB will be able to extend to each program</i></p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<p>My organization has provided the <u>minimum</u> number of referrals (if any) the organization will accept yearly from NYSCB and said <u>minimum</u> number is entered below (This information is used for program feasibility only. NYSCB does not guarantee any specific level of referrals):</p> <p>_____</p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	<p>My organization has provided the <u>maximum</u> number of referrals (if any) the funded organization will accept yearly from NYSCB and said <u>maximum</u> number is entered below:</p> <p>_____</p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization is eligible to do business with New York State.</p>
Yes <input type="checkbox"/>	No <input type="checkbox"/>		<p>My organization is headquartered within the defined region or has program operations in that region where proposed activities are taking place.</p>

## SOI # 2018-03 Socialization Skills Services for Children Who Are Legally Blind

If you answered “no” to any one of the questions above, your organization is not eligible for funding.

Submit the following completed documents prior to the due date/time via email to [RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov):

- ☐ Letter of Interest
- ☐ Submission Checklist
- ☐ List of the names and contact information of the governing board (board of directors)
- ☐ Current Organization Chart that depicts the entire organization structure and indicates where the organization head or the Chief Administrative Officer and the Contract Developers, Contract Signatories and Claim Signatories appear in relation to the Board of Directors and the organization as a whole
- ☐ Attach a template of the Per-Student Evaluation
- ☐ Current service pamphlet or brochure (*optional*)

**Please use your organization's official letterhead**

**Sample Letter of Interest**

Solicitation of Interest # 2018-03  
Socialization Skills Services for Children Who Are Legally Blind

Date: \_\_\_\_\_

Director of Contracts  
Office of Children & Family Services  
52 Washington Street  
Room 202S – RFP Unit  
Rensselaer, NY 12144  
[RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov)

To whom it may concern:

On behalf of my organization, I hereby inform you of our eligibility and interest in the above referenced Solicitation of Interest (SOI).

Insert a narrative that describes how the organization meets the requirement of having a minimum of three years' experience providing similar services to youth with disabilities and/or youth who are legally blind AND have a key staff member who possess the following qualifications: capable of working with the unique needs of legally blind children; demonstrable knowledge and understanding of the effects of vision loss; demonstrable specific skills required to deliver instruction to legally blind children in the specialized areas of the organization's programs.

Insert a narrative that clearly identifies what services, activities, and/or instruction you propose to offer and provide a brief description of each, including a thorough discussion of how the program/service is accessible to children who are legally blind. Explain how each service, activity, or instructional area will actively engage the child. Thoroughly describe your plan for orientation of the child to the program site. Provide the address where the services/activities will take place.

Please attach and describe any current service pamphlet or brochure (optional).

For *residential programs* only, provide a brief description of the lodging or sleeping accommodations and a brief description of the on-site overnight supervision plan.

Insert a narrative that describes how staff possess the following qualifications: capable of working with the unique needs of legally blind children; demonstrable knowledge and understanding of the effects of vision loss; demonstrable specific skills required to deliver instruction to legally blind children in the specialized areas of the Contractor's programs. Additionally, explain how the organization will meet the requirement that staff training and orientation occurs prior to the arrival of the first child, includes all program staff and specifically addresses:



**Please use your organization's official letterhead**

- Chain of command;
- Reporting illness, injury or other emergency situations;
- Fire drills and evacuation procedures

Our organization requests all official correspondence from the Office of Children & Family Services occur via the email address provided below.

Email: \_\_\_\_\_

I hereby certify the information contained in our response to this SOI is correct and in compliance with all applicable State and Federal laws, rules and regulations, and that I am the authorized representative to submit this Letter of Interest.

Sincerely,

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Agency: \_\_\_\_\_

FEIN/TIN: \_\_\_\_\_

Charities Reg #: \_\_\_\_\_

Date: \_\_\_\_\_

## Guidelines for Preparing Letters of Interest

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Presented below are general guidelines for you/your firm to prepare a letter of interest (LOI) for submission to the NYS Office of Children and Family Services (OCFS). These guidelines will assist you with the content of your letter. Format and/or organization of your letter is up to you.

**We ask that you carefully review the New York State Contract Reporter advertisement prior to submitting the LOI.**

### General Instructions

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1. Please limit your letter of interest(s) to the number of pages, font size, line spacing and margins as stated in the Contract Reporter notice. Please insure that you are submitting the requested number of copies.
2. Please include all pertinent information in your letter of interest. information.
3. All firms listed in the LOI must be registered (and the registration must be current) with the NYS Department of State ([www.dos.ny.gov](http://www.dos.ny.gov) ) and must be able to conduct business in New York State under the names stated in the LOI. If any of the firms listed in the LOI are not registered in New York State, the LOI will not be reviewed and the firm will not be considered for selection.
4. If your team is going to submit a LOI as a joint venture, please insure that the joint venture itself is registered to practice and do business in New York State. If the joint venture is not registered in advance of the LOI submission, the LOI will not be reviewed and the team will not be considered for selection.
5. When submitting your letter of interest, please do not use binders, covers, etc. A staple in the upper left corner is sufficient.
6. Please refer to the Solicitation of Interest Number in your letter of interest.
7. Please submit your letter of interest to the individual indicated in the "Submit to" section of the Contract Reporter notice. Do not submit them to the person listed under the "Contact" section of the notice.

### Instructions on Specific Elements

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Please note that these instructions provide general guidance. If you/your firm feel as though additional information is needed based upon the Contract Reporter notice (Notice), you will not be penalized as long as the letter is no longer than what is stated in the notice. Further, the order of the sections presented below does not infer how you should organize your letter of interest. As stated earlier, format and organization of your letter is up to you.

#### 1. Firm's Understanding of the Services Required

Each firm's letter will be evaluated to determine if they have any understanding of the Services Required, including any special/unique needs of the Services Described. Please ensure that your firm addresses any special needs stated in the Notice and state why your firm is uniquely qualified to provide services for this program.

#### 2. Firm's Experience

Please provide information on recent and relevant experience providing the same of similar services as described in the Notice completed within the last five years. For each service/program provide the following:

- Brief description.
- Firm's role (prime, sub) and what specific services were provided.
- Completion date.
- Dollar value.
- Client's name.
- If sub-consultants are proposed, clearly indicate assignments the sub-consultant completed.

In addition, please address the following:

- If a sub-consultant(s) is proposed, please clearly state their role and what they will be doing. Also state the percentage of the work they will complete.
- Address any special services as stated in the Notice.
- Please address any necessary certifications, software requirements, and other technical requirements.
- Location from which office the service(s)/program(s) will be managed. Also, indicate which office will complete a majority of the service.
- If there are M/W/DBE or SDVOB goals, please name the firms and indicate what they will be doing for the program. Also indicate the percentage of work they will complete. Please note that if the firm submitting the letter of interest is a M/W/DBE, they are still required to meet the M/W/DBE goals stated in the Notice.

### 3. Proposed Key Personnel

Provide the following information for each key staff member:

- Proposed role (title) for this program
- Brief description of their recent (within the last five years) and relevant experience.
- Individual's role on each of the previous program(s).
- Completion date of the previous program(s).
- Value of program of the previous programs.
- Client's name of the programs.
- Certifications and licenses of the key staff members, if applicable.

Because some of the programs listed under individual's experience could also be listed under the firm's experience, we understand some of the detail on each program may not be restated. It is recommended that a cross reference be provided.

### 4. Staff Availability

For each of the proposed key staff members, please list the individuals' current programs that require twenty (20) percent or more of their time. If a staff member is working on fewer than two programs that meet the 20 percent threshold, the firm shall list at least two of that person's largest programs. For each of the programs, please provide the program's description, the person's role, percentage of the person's time, and completion date of the person's work on that program.

If you have any questions concerning the Contract Reporter Notice, please refer to NYS Contract Reporter Notice for a contact person.