

STATE OF ARKANSAS OFFICE OF PROCUREMENT ARKANSAS DEPARTMENT OF HUMAN SERVICES 700 Main Street Little Rock, Arkansas 72203

RESPONSE PACKET 710-19-1027

CAUTION TO VENDOR

Vendor's failure to submit required items and/or information as specified in the *Bid Solicitation Document* shall result in disqualification.

SIGNATURE PAGE

Type or Print the following information.

	PF	ROSPECTIVE CONTRA	CTOR'S IN	ORMAT	ION		
Company:	Counselin						
Address:	406 Peca		4 Cent	r; sr	20.1	-	
City:	Helena			State:	AP	Zip Code:	175 5.15
Business	Individual			otate.	AN	Zip Code:	72342
Designation:	□ Partnership	Sole Proprietorship Corporation		Public Service Corp Nonprofit			
Minority and Women-Owned Designation*:	 Not Applicable African American 	 □ American Indian □ Asian American □ Hispanic American □ Pacific Islander American 			□ Service Disabled Veteran rican □ Women-Owned		
Designation .	AR Certification #:					ned Business	

	PROSPECTIVE CONTR Provide contact information to	ACTOR CONTACT INF	ORMATION
Contact Person:	Gracic Gonner		Executive Director
Phone:	870 338 8447	Alternate Phone:	870 338 050G
Email:	990nner 0614 @ 4		210 330 0306

CONFIRMATION OF REDACTED COPY

□ YES, a redacted copy of submission documents is enclosed.

NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested.

Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.

ILLEGAL IMMIGRANT CONFIRMATION

By signing and submitting a response to this *Bid Solicitation*, a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.

ISRAEL BOYCOTT RESTRICTION CONFIRMATION

By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.

Prospective Contractor does not and will not boycott Israel.

An official authorized to bind the Prospective Contractor to a resultant contract must sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Bid Solicitation* will cause the Prospective Contractor's bid to be disqualified:

Authorized Signature: <u>Jacie Jonner</u>	Title: Executive Director
Printed/Typed Name: Gracic Gonner	Date: <u>4/4/19</u>

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are <u>NON-mandatory</u> must be declared below or as an attachment to this page. Vendor must clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements shall cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. **Use Ink Only**

Vendor Name:	Counsding & Education Center, Inc.	Date:	4/4/19
	Phacie Gonner		Executive Director
Print/Type Name:	Gracie Gonner		CECUINC DIECTIK

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are <u>NON-mandatory</u> must be declared below or as an attachment to this
 page. Vendor must clearly explain the requested exception, and should label the request to reference the specific solicitation item
 number to which the exception applies.
- Exceptions to Requirements shall cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. Use Ink Only

Vendor Name:	Counseling & Education Center, Inc.	Date:	4/4/19
Authorized Signature:	Phacie Ginner	Title:	Executive Directive
Print/Type Name:	Gracie Gonner		P PLOW - CONCOUR

SECTION 3,4,5 - VENDOR AGREEMENT AND COMPLIANCE

Exceptions to Requirements shall cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation. Use Ink Only

Vendor Name:	Counseling & Education Center, Inc.	Date:	4/4/19
Authorized Signature:	Macie Gonner	Title:	Executive Director
	Gracic Gonner		produce produce

PROPOSED SUBCONTRACTORS FORM

• Do not include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP
		only, State, ZIP

PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

By signature below, vendor agrees to and **shall** fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

Vendor Name:	Canseling & Education Center, Inc.	Date:	4/4/19
Authorized Signature:	Phacie Gonner	Title:	Executive Directore
Print/Type Name:	Gracie Gonner		

Attachment G. has the Minimum Qualification Checklist that your RESPONSE will be checked against. You must submit all information requested so that information can be verified. Failure to submit the requested information may cause your response to be disqualified. <u>Do not complete and return this form with your response</u>. It is for information only.

INFORMATION FOR EVALUATION

• Provide a response to each item/question in this section. Vendor may expand the space under each item/question to provide a complete response.

• Do not include additional information if not pertinent to the itemized request.

State of Arkansas DEPARTMENT OF HUMAN SERVICES OFFICE OF PROCUREMENT 700 South Main Street P.O. Box 1437 / Slot W345 Little Rock, AR 72203

ADDENDUM 1

DATE:March 12, 2019SUBJECT:710-19-1027 Therapeutic Foster Care

The following change(s) to the above referenced Competitive Bid for DHS has been made as designated below:

Change of specification(s)
 Additional specification(s)
 Change of bid submission/opening date and time
 Cancellation of bid
 Other

BID OPENING DATE AND TIME

Bid opening date and time has changed to April 8, 2019, 2:00 PM

Revise Section 1.29 Schedule of Events:

Date and time for Opening Bids, April 8, 2019, 2:00 PM CST

The specifications by virtue of this addendum become a permanent addition to the above referenced Invitation for Bid.

FAILURE TO RETURN THIS SIGNED ADDENDUM MAY RESULT IN REJECTION OF YOUR BID.

If you have questions, please contact the buyer <u>Margurite.al-uqdah@dhs.arkansas.gov</u> or 501-682-8743.

Vendor Signature

Date

cation Center, In. Company

State of Arkansas DEPARTMENT OF HUMAN SERVICES OFFICE OF PROCUREMENT 700 South Main Street P.O. Box 1437 / Slot W345 Little Rock, AR 72203

ADDENDUM 2

DATE:March 19, 2019SUBJECT:710-19-1027 Therapeutic Foster Care

The following change(s) to the above referenced Competitive Bid for DHS has been made as designated below:

- ____X Change of specification(s)
 - Additional specification(s)
 - Change of bid submission/opening date and time
- _____ Cancellation of bid
- ____ Other

BID OPENING DATE AND TIME

Bid opening date and time

CHANGES TO REQUIREMENTS

Section 2.2B

- Delete: For verification of the requirements specified above (A & B), Vendor **must** submit Vendor's Therapeutic Foster Care Placement Child Welfare Agency license obtained from the Arkansas Department of Human Services (DHS), Division of Child Care and Early Childhood Education (DCCECE).
- Add: For verification of requirements specified above (A & B), Vendor must submit one of the following:
 - Vendor's Therapeutic Foster Care Placement Child Welfare Agency License obtained from the Arkansas Department of Human Services (DHS), Division of Child Care and Early Childhood Education (DCCECE), or

2) A copy of the application for licensure.

Vendor's license **must** be approved by the DCCECE board by June 1, 2019 in order to be awarded a contract.

REVISED ATTACHMENT

Revised Attachment G

The specifications by virtue of this addendum become a permanent addition to the above referenced Invitation for Bid.

FAILURE TO RETURN THIS SIGNED ADDENDUM MAY RESULT IN REJECTION OF YOUR BID.

If you have questions, please contact the buyer Margurite.al-uqdah@dhs.arkansas.gov or 501-682-8743.

Vendor Signature

Date

Counseling & Education Center, Inc. Company

State of Arkansas DEPARTMENT OF HUMAN SERVICES OFFICE OF PROCUREMENT 700 South Main Street P.O. Box 1437 / Slot W345 Little Rock, AR 72203

ADDENDUM 3

DATE: March 26, 2019

SUBJECT: 710-19-1027 Therapeutic Foster Care

The following change(s) to the above referenced Competitive Bid for DHS has been made as designated below:

X	Change of specification(s)
	_ Additional specification(s)
	Change of bid submission/opening date and time
	_ Cancellation of bid
	Other

BID OPENING DATE AND TIME

CHANGE SPECIFICATIONS

Attachment C: Performance-Based Contracting

B. Delivery of Services

- **5.g: Delete:** "A physician and other personnel involved in the client's case will review each plan of care at least every ninety (90) days. The plan of care must be revised to reflect results of the review conducted as required herein."
 - Add: "Contractor shall review the plan at least semi-annually and shall update the plan to reflect the child's progress."

Insert: #9

Service Criteria:

Contractor shall maintain records of the TFC internal client specific treatment plan of care. This plan may be very similar to or mirror the youth's PCSP.

Documentation shall at a minimum reflect the following:

A. Treatment plan developed in accordance with recommendations made by a physician or other licensed professionals involved in the care of that client

B. Any revisions of the Treatment plan

Acceptable Performance:

Acceptable performance is defined as one hundred percent (100%) compliance with Service Criteria and Acceptable Performance Standards at all times throughout the contract term as determined by DHS.

Damages:

1st Incident: A Corrective Action Plan, acceptable to DHS, will be due to DHS within ten (10) business days of the request.

2nd incident: A ten percent (10%) penalty may be assessed in the following months' payments to the Vendor for each thirty (30) day period the Vendor is not in full compliance with these Service Criteria. The ten percent (10%) penalty shall be calculated from the total payment for the identified month in which the deficiency took place.

The total of all damage credits in any given month shall not exceed one hundred percent (100%) of the monthly invoice unless a third incident occurs for any of the Service Criteria.

3rd incident: DHS reserves the right to impose additional penalties including but not limited to: withholding payment on future invoices until Vendor is in full compliance, a substandard Vendor Performance Report maintained in DHS' Vendor file, and contract termination.

If you have questions, please contact the buyer <u>Margurite.al-uqdah@dhs.arkansas.gov</u> or 501-682-8743.

Vendor Signature

ucation Center, Inc.

0 0	Yolanda Burton	12/95	01/95	FSW	*	0	State Employee
0	Gracie Giles Gonner	04/19	01/03	Commissioner. Ar Commissid 01/03		*	State Board or Commission Member
							Constitutional Officer
							General Assembly
Ownership	Person's Name(s)	To MM/YY	From	board/commission, data entry, etc.]	Former	Current	
of ov	What is the person(s) name and what is his/her % of ownership interest and/or what is his/her position of control?	For How Long?	For H	Name of Position of Job Held	Mark (V)	Ma	Position Held
of th	Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Member, or State Employee. The spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee. Position of control means the power to direct the purchasing policies or influence the management of the entity.	iold any owner irent, or child c ies or influenc	ntrol or h sister, pa sing polic	lowing persons, current or former, hold any position of control or hold any ownership interest of 10% or greater in ission Member, State Employee, or the spouse, brother, sister, parent, or child of a member of the General Asse Position of control means the power to direct the purchasing policies or influence the management of the entity.	ons, currer ber, State I control me	ng perso on Memb ition of c	Member, or State Employee. Posi
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							State Employee
							State Board or Commission Member
							Constitutional Officer
							General Assembly
	Person's Name(s)	MM/YY	From	board/ commission, data entry, etc.]	Former	Current	
they rublic, J	What is the person(s) name and how are they related to you? [i.e., Jane Q. Public, spouse, John Q. Public, Jr., child, etc.]	For How Long?	For	Name of Position of Job Held [senator, representative, name of	Mark (v)	M	Position Held
ional	Indicate below if: you, your spouse or the brother, sister, parent, or child of you or your spouse is a current or former: member of the General Assembly, Constitutional Officer, State Board or Commission Member, or State Employee:	is a current o	Ir spouse	sister, parent, or child of you or you	e brother,	ise or th	Indicate below if: you, your spou Member, or State Employee:
	DUALS*	DIVID	IND	FOR			
AGRI	DR RENEWING A CONTRACT, LEASE, PURCHASE AGREEMENT, THE FOLLOWING INFORMATION MUST BE DISCLOSED:	FOLLOW	Y, THE	AS A CUMULTION OF OBTAINING, EXTENDING, AMENDING, OR RENEWING A CONTRACT, LEASE, OR GRANT AWARD WITH ANY ARKANSAS STATE AGENCY, THE FOLLOWING INFORMATION MU	NY ARI	ITH A	OR GRANT AWARD W
COUNTRY: USA	ZIP CODE: 72342	ZIP CO		STATE: AR			CITY: Helena
							ADDRESS: 406 Pecan Street
	M.I.:			FIRST NAME:			YOUR LAST NAME:
	¥ Services? ☐ Both?	S ¥	s?	Counseling & Education Center, Inc. Goods?	Educatio	eling &	TAXPAYER ID NAME: COUNSE
							Ves KNo
e Agen	Failure to complete all of the following information may result in a delay in obtaining a contract, lease, purchase agreement, or grant award with any Arkansas State Agency.	, lease, purcha	contract	may result in a delay in obtaining a	support of the second s	lowing in	Failure to complete all of the follo subcontractor:
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<u>Agency use only</u> Agency Agenc Number Name	Lertify under penalty that Lagree to the sub Signature Macu Vendor Contact Person	Failure to m pursuant to th violates any r No later than ten copy of the CONT amount of the sul		<u>illure to make any</u> at Order, shall be sclosure or who vi an additional co
Agency Name	<u>I certify under penalty of perjury, to the best of my knowledge and b</u> <u>that I agree to the subcontractor disclosure conditions stated herein.</u> Signature Macie Bonner Title Execut Vendor Contact Person Gracie Gonner Title Execut	 Failure to make any disclosure required by Governor's Executive Order 98-04, or any pursuant to that Order, shall be a material breach of the terms of this subcontract. The poviolates any rule, regulation, or policy shall be subject to all legal remedies available to the No later than ten (10) days after entering into any agreement with a subcontractor, whether copy of the CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM completed by the amount of the subcontract to the state agency. 	Prior to entering into any agreement with any subcontractor, prior or subsequent to th CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM. Subcontractor shall i whereby I assign or otherwise delegate to the person or entity, for consideration, all, or of my contract with the state agency. I will include the following language as a part of any agreement with a subcontractor:	<u>Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation o</u> <u>that Order, shall be a material breach of the terms of this contract. Any contractor, whether an</u> <u>disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies avail</u> <u>As an additional condition of obtaining, extending, amending, or renewing a contract with a sta</u>
Agency Contact Person	best of my knowledge ire conditions stated h Title	t by Governor's Executive al breach of the terms of th ill be subject to all legal ren o any agreement with a su JRE AND CERTIFICATION FC 3Y.	y subcontractor, prior or su RTIFICATION FORM. Subcc e person or entity, for consi t of any agreement with a	<u>ernor's Executive Order 9</u> rms of this contract. <u>Any</u> pr policy shall be subject to ling, amending, or renewi
Contact Phone No.	and belief, all of the above info erein. Executive Director/Owner Executive Director/Owner	Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of an pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor. later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subseq y of the CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM completed by the subcontractor a subcontract to the state agency.	bsequent to the contract date, I will re ontractor shall mean any person or er ideration, all, or any part, of the perforr subcontractor:	Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or poly that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who faid disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency. As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:
Contract or Grant No	I certify under penalty of perjury, to the best of my knowledge and belief, all of the above information is true and correct and that I agree to the subcontractor disclosure conditions stated herein. Signature Macie Bowner Title Executive Director/Owner Date 04/04/2019 Vendor Contact Person Gracie Gonner Title Executive Director/Owner Date 870-338-8447	 Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this subcontract. The party who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the contractor. No later than ten (10) days after entering into any agreement with a subcontractor, whether prior or subsequent to the contract date, I will mail a copy of the Contract and GRANT DISCLOSURE AND CERTIFICATION FORM completed by the subcontractor and a statement containing the dollar amount of the subcontract to the state agency. 	Prior to entering into any agreement with any subcontractor, prior or subsequent to the contract date, I will require the subcontractor to complete a CONTRACT AND GRANT DISCLOSURE AND CERTIFICATION FORM . Subcontractor shall mean any person or entity with whom I enter an agreement whereby I assign or otherwise delegate to the person or entity, for consideration, all, or any part, of the performance required of me under the terms of my contract with the state agency. I will include the following language as a part of any agreement with a subcontractor:	<u>Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that Order, shall be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy shall be subject to all legal remedies available to the agency. As an additional condition of obtaining, extending, amending, or renewing a contract with a state agency I agree as follows:</u>

Contract and Grant Disclosure and Certification Form

4600034246 NEW Attachment 9 Page 1 of 3

Counseling and Education Center, Inc. EQUAL EMPLOYMENT OPPORTUNITY POLICY 406 Pecan Street Helena, AR 72342 November 2000

EQUAL EMPLOYMENT POLICY

It is the policy of Counseling and Education Center, Inc. to ensure equal employment opportunity for all employees and applicants for employment. This policy includes a commitment to promote and afford equal treatment to all applicants and employees and to assure equal employment opportunity based on ability and fitness to all persons regardless of race, religion, color, creed, national origin, gender, marital status, sexual orientation, age, veteran status, or the presence of any disability unless such disability prevents the performance of the essential functions required of the position.

The goals of this policy are to:

1. Ensure fair treatment and nondiscrimination in hiring and employment.

2. Ensure compliance with State and Federal equal opportunity requirements and regulations.

This policy applies to every aspect of employment including, but not limited to, recruiting, hiring, training, promoting, retention, and the terms and conditions of service of all permanent, part-time and full-time employees. Personnel actions such as compensation, benefits and privileges of employment, transfers, layoffs and return from layoff, training, educational programs, leaves, tuition assistance, opportunities for advancement including upgrades and promotions, discipline, and termination of employment shall be made in accordance with state and federal law without regard to race, color, religion, sex, sexual orientation, national origin, age, disability, or veterans status.

NOTIFICATION

It is the policy of Counseling and Education Center, Inc. to actively promote its commitment to nondiscrimination and equal opportunity. The words "Equal Employment Opportunity" and "Affirmative Action Employer" will be included on employment applications and recruitment materials. These materials are available in alternative format.

EQUAL OPPORTUNITY FOR PERSONS WITH DISABILITIES

4600034246 NEW Attachment 9 Page 2 of 3

> It is the policy of Counseling and Education Center, Inc. to guarantee equal opportunity to employees with disabilities and to allow disabled employees a bias-free work environment. Counseling and Education Center, Inc. is committed to providing equal opportunity for persons with disabilities seeking employment with Counseling and Education Center, Inc.

> Every reasonable effort will be made to create an accessible hiring or selection process and a working environment that will allow a person with a disability to participate at the same level as a person without a disability.

REASONABLE ACCOMMODATION

It is the policy of Counseling and Education Center, Inc. to make reasonable accommodation, upon request, for the known physical and mental limitations of otherwise qualified applicants and employees. Reasonable accommodation may include removing architectural barriers, restructuring jobs, modifying work schedules, providing assistive devices, modifying examinations, training materials or policies, and providing qualified readers, writers or interpreters including interpretive services for applicants with limited English speaking skills. It is the responsibility of the person with the disability to disclose the existence of the disability if reasonable accommodation is to be requested.

If the agency declines to make an accommodation because it would require a fundamental change in the nature of its service, or cause an undue financial or administrative hardship, it will forward its decision and justification to the Director of Human Resources where the decision will be studied. If the review confirms that accommodation is not feasible, the requesting party will be advised in writing of the reasons. Counseling and Education Center, Inc. will document its efforts to make accommodation and justify its reasons for not doing so.

SEXUAL HARASSMENT

It is the policy of Counseling and Education Center, Inc. to maintain a work environment free of sexual harassment. Sexual harassment negatively effects morale, motivation, and job performance. It results in increased absenteeism, turnover, inefficiency and loss of productivity. It is inappropriate, offensive and illegal and it will not be tolerated in the agency.

Sexual harassment is a form of sex discrimination. It occurs through unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct or a sexual nature when:

* Submission to such conduct is part of a manager's or supervisor's decision to hire or fire;

* Submission to or rejection of such conduct is the basis of employment decisions regarding pay, promotion, or job assignments;

4600034246 NEW Attachment 9 Page 3 of 3

* Such conduct unreasonably interferes with the employee's work performance or creates an intimidating, hostile or offensive working environment.

Conduct of a sexual nature includes verbal or electronic behavior such as unwanted sexual comments, suggestions, jokes or pressure for sexual favors; non-verbal behavior such as suggestive looks and leering; and physical behavior such as kissing, pats or squeezes, or repeatedly brushing against someone's body.

Counseling and Education Center, Inc. is committed to eliminating sexual harassment in the work place. The agency will respond quickly to reported or observed behaviors that are unwanted and sexual in nature. Employees found to be in violation of this policy shall be subject to disciplinary action.

Supervisors and managers who have knowledge of sexual harassment and who fail to take action to eliminate the behavior shall also be subject to disciplinary action. It is the responsibility of all employees to bring instances of inappropriate behavior to the attention of management. This includes employees who think they are the recipient of sexual harassment as well as those who believe they have witnessed another employee being harassed. Employees may not be retaliated against in any way for reporting or complaining of harassment.

If you believe you are being sexually harassed, take action immediately:

* Identify the offensive behavior to the harasser and request that it be stopped; and/or

* Discuss your concern with your supervisor or manager, or the Director of Human Resources, or the EEO/Affirmative Action Officer at 338-8447.

When a supervisor, manager or department head suspects or has reason to believe that sexual harassment has occurred, he or she shall immediately notify the Human Resources Department and report the incident. A thorough independent investigation of the facts will be conducted by the Human Resources Department. If it is determined that sexual harassment has occurred, immediate action will be taken. All efforts will be taken to protect all parties involved and confidentiality will be maintained to the extent permitted by law.

COMPLAINTS

An employee may file a written complaint within thirty (30) days of the alleged violation with the agency. Employees are encouraged to exhaust administrative remedies outlined in this policy before outside agencies are consulted. Employees do have the right to seek redress through the Equal Employment Opportunity Commission, or through a court of law. Questions or concerns regarding this policy may be discussed with a supervisor or the Director of Human Resources.

Counseling and Education Center, Inc. Request for Qualification

Vendor Qualitifications

A.Copy of Therapeutic Foster Care Placement Child Welfare Agency License Counseling & Education Center, Inc. meets the foster care requirements and has been a licensed since April 22, 2008. This is included as an attachment.

B.Copy of Therapeutic Foster Care Placement Child Welfare Agency License Counseling & Education Center, Inc. has been licensed as a Child Welfare Agency since April 22, 2008. This is included as an attachment.

C. Counseling and Education Center, Inc. Therapeutic Foster Care is designed to serve children in the custody of the Arkansas Department of Human Services who suffer the effects of severe trauma, physical and/or sexual abuse, and/or have significant attachment issues due to the trauma or early history of maltreatment. Counseling and Education Center, Inc. has a Licensed Mental Health Therapist who is TF-CBT trained since 2011 and receives annual training. The therapist is also trained in Child Parent Psychotherapy (CPP). Services are available 24 hours a day 7 days a week in the home, office and in the community.

D. Counseling & Education Center, Inc. provides Child/Foster Parent accessibility to Staff 24 hours/7 days per week for trauma informed emergency services and crisis intervention services. Services are provided in the home, office and in the community. A Licensed Mental Health Professional is available on call 24 hours a day 7 days a week.

Down

Gracie Gonner Executive Director/Owner

