



## DEPARTMENT of CHILDREN and FAMILIES

*Making a Difference for Children, Families and Communities*



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Commissioner

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### Quality Parenting Centers RFP #210405001 Questions & Answers

1. Will DCF be covering start-up costs for renovations of a program/facility to accommodate need for a QPC and/or vehicle purchases? Are these costs acceptable?

Please refer to page 24 of the RFP (Budget Requirements). All startup costs must be clearly identified as one-line item in the budget.

Yes, these are acceptable startup costs.

2. What type of facility does the Department envision? A number of vehicles will be required as well as multiple visits occurring at one time? Is a house appropriate to fulfill the expectations of the program? Does the program require a bigger building?

Please refer to Section III of the RFP for a summary of the Department's vision for these programs. The Department understands that Therapeutic Group Homes are homes but believes that these homes are acceptable sites for establishment of a QPC. Scheduling and planning within the program will be necessary to accommodate multiple visits occurring at the same time.

3. Would DCF consider proposals from not existing Group Home as an option? Can you speak to Zoning requirements?

Zoning is specific to the municipality the program is located in. It is incumbent on each applicant to follow up directly with their town to determine the zoning requirements. The Department recognizes this may be a challenge for some and has built into the RFP an allowance to identify an alternative site for operation of the QPC, while identifying which existing program would be closed.

4. I understand the Department intends to replace TGH contracts. Will this be a Grant Funded contract?

Yes, it is a grant funded contract. In addition to TGH programs, S-FITS are also eligible to respond to the RFP.

5. Who does the assessment that leads to referral to the program?

Assessments are completed by the DCF Social Worker assigned to the case, in consultation with their Supervisor, to identify appropriate families who require this level of care and supervision.

6. What is the vision of interface between QPCs and RTFT?

RTFT targets families with reunification as the child's permanency goal. The TFT component is often used for children who have permanency goals other than reunification. As such, it is not envisioned that the population referred to QPC's will interface with RTFT.

7. What is the thinking around not having clinical staff included in the staffing model? Clinical interface with other providers?

The QPCs will not be clinical programs. The purpose and intent of the program is securing a safe space for parents to interact with their children with a coaching component to allow parents to practice and learn new skills. Any concerns around these interactions should be communicated to the Department to ensure these concerns are addressed by DCF, and other service providers/individuals involved with the family/child.

8. Has the requirement for notarized forms been waived for this procurement?

Yes, it has been waived.

**9. What are the anticipated # of visits per region? Floor and ceiling amounts per grant award?**

The amount of the award will not exceed the current funding for the program that is being proposed to close, but may be less than the current funding, based on applicant's submitted RFP budget proposals.

See Question 11 for # of visits per region.

**10. The due date is Memorial Day, was that realized when released?**

Due date for submission of proposals has been changed, through formal amendment to the RFP, to 6/1/21.

**11. Please speak to 48,000 visits per year. How did DCF arrive at that #? Is there anticipated volume per region expectation?**

The sites that are eligible to respond to this RFP are different, both in size and capacity. Within the RFP we indicated a range of awards (6-9) could be offered to meet the proposed capacity. Sites are not equally distributed throughout the state, so we are not looking at this by Region. We are looking to have locations identified throughout the state that could provide coverage to the 6 DCF regions.

To determine annual capacity, the Department considered duration and frequency of visits, available site hours, and the number of proposed visits occurring simultaneously at a given site.

**12. How does the Department envision the role of foster parent in visitation and providing transportation? Does this include children placed in Therapeutic Foster Homes? Is the vision to potentially offer overnights for low risk?**

The foster parent role in parent/child visitation and supporting the child's permanency plan is extremely important. We would expect caregivers to play in an instrumental role. This is an area of consideration in proposal response and applicants should articulate how the child's caregiver would be involved in the QPCs.

Yes, children placed in Therapeutic Foster Homes could be referred to the QPCs. If children were having overnight visits with their parents, they would no longer be involved with the QPC. Once the family transitions to unsupervised contact, they would likely be discharged from the program. Please reference the chart on page 18 of the RFP around intensity levels.

**13. The # of sites will impact the budget. The fewer # will increase costs with regard to transportation. Will the Department negotiate on capacity based on # of sites chosen?**

While the Department is anticipating a level of negotiation post-award, due to the fact that this is a new service, the Department maintains within its control, the provision of Supervised Visitation by its own staff and use of Credentialed providers for provision of Supervised Visitation, and anticipates balancing the budget needs of this service type within that continuum.

**14. Is it acceptable for site to be ADA compliant on 1<sup>st</sup> floor only or does the whole site meet all ADA compliant?**

The extent to which a site is ADA compliant would be evaluated during the review process, but full ADA compliance is not a requirement.

**15. The RFP indicates that birth parents could access public transportation, who is responsible for transporting the children to and from the QPC?**

The QPC will be responsible for transporting children to/from visits unless the foster parent/caregiver are available to assist with transportation. These costs should be detailed in the proposal budget.

**16. What are the required credentials for actual staff supervising family visits?**

There are no specified educational requirements for staff supervising visits. Proposals should delineate the qualifications that the applicant believes to be necessary for performance of these duties.

**17. What is the future of SFITS? If SFIT not awarded, what is the plan for SFIT providers moving forward?**

The Department continues to review longitudinal utilization data for all of its congregate programs, while balancing the need for these services within a Families First prevention-based framework.

**18. Will one individual be required per family visit or more than one?**

Each site will need to ensure there is sufficient staff available to supervise multiple children within a visit and be able to respond to the specialized needs of the children. The families being referred to the program will require close supervision and the site will need to accommodate that requirement.

**19. Do we propose the area of region we will be providing coverage for or is it the expectation that the site will provide coverage to the entire region?**

The proposal must delineate the Area Offices that the applicant will be providing coverage to. There is no expectation that the applicant will serve all Area Offices within the region.

**20. Can the Department speak to the timing of this award and the announcement of QRTP programs?**

The timeline for operationalization of the QPC is established in the RFP. The execution of the contracts will be in July, with an anticipated go live date on 10/1/21. No timeframe has been established for announcement of the QRTP.

**21. Do you have a minimum # of visits at a time?**

Proposals should delineate the # of visits that each provider can accommodate at any given time. This will be evaluated as part of the overall scoring for each proposal.

**22. Can you talk about the timeline - referrals for up to 6 months, how does that work with reunification? Full 6 months and the going to RTFT?**

The QPC program provides a safe space for parents to visit with their children and receive coaching. Although visitation is a critical component to promote permanency, it is not designed to be a permanency service. Children with all permanency goals are eligible for the QPC program. Whether or not the family is transitioned to RTFT after completion of QPC visitation will be based on the family's unique needs and circumstances.

**23. As the QPCs will be implementing the Visit Coaching model, will the Department provide training?**

Yes.

**24. Will the Department be accepting bids that do not include closures of SFIT or group home?**

No.

**25. The Department will not announce the closure of SFITs or Group Homes until after this procurement is completed?**

The Department does not anticipate closure of any congregate programs until after this procurement is completed.

**26. If a Supervised Visitation Credentialed provider already offers Visit Coaching in a home like environment, will referrals to that program stop?**

No, that is not the Department's intent. The Department anticipates a continued need for Credentialed Supervised Visitation providers.

**27. How many visits occur per Region now?**

Please refer to Question #29.

**28. Can you speak to the model focusing on clinical goals but the staffing not requiring clinical staff?**

The QPC is not a clinical model. If there are issues of a clinical nature that arise during the visit, this will need to be communicated with DCF staff.

**29. Is it possible for the Department to give number of children in foster homes by town/zip code for budgeting purposes?**

The Department's expectation for QPC's awarded as a result of this RFP is approximately 48,000 annually. The Department has not established a minimum number of visits either Regionally or by Area Office. Please see Attachment #1 for a breakdown of all children in placement by Area Office/Region. This should be used as a reference only.

**30. Can proposals be submitted to include therapeutic visits & clinical staff?**

No. The Department will not accept proposals for therapeutic visits. Budgets and proposals should be submitted for the services requested in the RFP.

If the applicant chooses to utilize existing clinical staff as part of their staffing model, this is acceptable, understanding that proposals will be scored through the lens of how many visits can be performed by the QPC.

**31. Will the Department provide data on % of cases we may need to testify in court for?**

The Department does not have this data available at this time.

**32. Can the Department provide data on the racial breakdown of children in placement?**

Please see Attachment #2. This should be used as a reference only as the QPC's will not be the singular providers of Supervised Visitation for the Department. Additionally, please note that this data is inclusive of all children in care, not just children 0-12 years old (as is the target population for the QPC service).

**33. What is the % of families for which a sibling group visitation will need to occur?**

Please see Attachment #3.

**34. Transportation is a large part of this program, notice the Department is not allowing subcontracting, is it okay to arrange transport by credentialled providers or car services? Birth parents may access public transportation, can the QPC support these costs?**

The use of subcontractors is not allowable in performance of QPC services (see page 16(C.2) of the RFP). It is the Department's expectation that transportation be provided by the awardee, although use of public transportation for birth parents is allowable.

**35. "Total requested funding amount cannot exceed...." can you give background as to why because requirements of this type of program do not match SFIT or group home?**

This is the budget model that DCF and OPM agreed to, based on the Department's proposed budget deficit mitigation model.

**36. Referenced scope of work attached page 23, not attached was it supposed to be?**

The Department was hopeful to be able to provide a finalized Scope of Services prior to proposal submission, but given that this is a new service type, the Scope will be finalized after proposal award.

**37. Who is the client of this service- parent or child?**

The client is the family.

**38. Are the trainings listed on page 23 of the RFP covered by DCF or do we need to budget for trainings?**

The Department will support the trainings listed in the RFP, including those conducted by DCF as well as the Visit Coaching Model. Additional trainings that are not offered by DCF would need to be supported by the Contractor.

**39. Transportation if we are expected to pick kids up from school will we need service bus registered vehicle?**

No. DCF has confirmed that no special licensure is needed if transporting children under the auspices of this program.

**40. Will referrals be made for sibling groups as well?**

No. This service is strictly for parent/child visitation. Siblings of children referred to the program beyond the age range could be included in the visits, but no referrals will be made solely for sibling visitation.

**41. If DCF is responsible for referral and visit planning are they also responsible for safety and risk assessment?**

The Department will have completed Safety and Risk Assessments on the families being referred to the program. The assigned Social Worker should be aware of safety concerns and presenting risk factors and will communicate these concerns to the Provider. If there are safety concerns that arise during the visit, QPC staff should be communicating concerns to the assigned DCF Social Worker.

**42. Please clarify timeline due date/selection/notification.**

The due date for submission of proposals has been changed to 6/1/21. The selection process begins on that date with an anticipated decision date and contract negotiations by June 7<sup>th</sup> with the month of June to prepare for July 1<sup>st</sup> execution. Please note that all timeframes delineated with an "\*" in the RFP are anticipated only.

**43. Are there any circumstances where transportation would be provided by the Department to assist with transportation for multiple children spread outside of catchment area?**

No. The Department will not arrange, assist with or pay outside of the established contract pricing, for transportation.

**44. Part III, Section 3.C(3) (page 23 of the RFP) indicates that preference will be given to applicants with a history of ability to maintain staffing levels. Does that mean that organizations that are full capacity would be given extra points?**

No. This is referencing staff recruitment and retention, not at capacity or utilization.

**45. In the Data and Technology Requirements section on p. 23, section (a) Outcome Achievements reads: *Proposals must describe the agency's success in achieving positive outcomes related to the outcomes listed in the attached Scope of Service.* I do not see a Scope of Service within the RFP, attached, or included as a document available for download from the bid portal. Will you please clarify for me what Scope of Services that section refers to?**

See Question 36. The Scope was not included in the RFP. Base your response on the goals of the program.

**46. The RFP states that the selected QPCs will 'cumulatively perform 48,000 supervised visits annually'. What is the average length of each visitation? Is there data on how many visits have transpired (and how long they are)?**

The duration of parent/child visitation is outlined in the DCF's Visitation Plan for that family. On average, these may occur twice a week for 60-90 minutes per visit.

**47. Is it required to operate the QPC 365 days a year? Or – can the provider choose to close for major holidays?**

Applicants must detail in their proposals any standard days in which they will be closed. In an effort to maintain qualitative visitation time between parents and their children, preference will be given to proposals indicating availability of visitation on major holidays.

**48. What is Family Time?**

Family Time is another term for parent/child visitation.

**49. Regarding transportation, please clarify: if the child is in a kin-setting or foster care setting, it is still the responsibility for the QPC to provide transportation? Does DCF expect a child in kin/foster care would be transported alone, that is, the adult caregiver would not attend the visitation? Is the QPC responsible for transporting the child only OR also the parent(s). What data does DCF have around current/past transportation of children to visitation? Can you clarify the requirements for picking foster care children up from school (someone mentioned a 'service bus')**

It is the responsibility of the QPC to provide transportation to the family to and from the center. Exceptions to this would include whether the child's caregiver would be able to assist with transportation and/or whether the birth parents would be able to access public transportation. The child's caregiver would not be expected to participate in the visit unless there are special circumstances or in the child's best interest that they do so.

See Question 39.

**50. Can you explain how the breakdown how many expected visits a year would be expected for each site?**

The number of visits that would occur annually will be dependent on the size of the building and the number of visits that can occur simultaneously. Applicants must propose the number of visits they believe can be reasonably accommodated based on the physical layout of the proposed site.

**51. Can visitations occur at other approved DCF visitation sites other than QPC?**

No. It is the expectation of DCF that families referred to the QPC be served at the QPC location.

**52. Will zoning and fire approvals be needed at the time of submission of the RFP or at the time of opening as most of these are conversions from residential to office use may involve modifications to the facilities and fire detection systems?**

Yes. See Question 3.

**53. Will we be asked to pickup children at school as we may then need Student Transportation Vehicles with Public Passenger V Endorsements?**

There will be circumstances in which QPC staff may need to pick up children at school.

See Question 39.

**54. Are there expectations of sites being able to limit travel during inclement weather and can the visits be allowed to continue virtually?**

In circumstances of inclement weather, virtual visits may be offered when necessary and with approval of the DCF Social Worker, but it is the Department's expectation that these visits occur face-to-face.

**55. In the Cost Proposal Component Budget Requirements, it states the following: "Applicants are free to propose a budget total at their discretion, although the total requested DCF funding must not exceed the current DCF funding for the congregate program the applicant is proposing to close". Does this limitation apply to start-up costs?**

Yes.

**56. Can the start up cost include capital items such as furniture and vehicles?**

Yes.

**57. When submitting our proposal, do we need to email an electronic copy to the official contact AND hand-deliver the proposal?**

No, only an electronic copy of the proposal is required.

**58. How will we receive verification that the proposal was received?**

Please put a read received receipt on the email. Additionally, our system will be temporarily set to provide an auto response to your submission.

**59. Can a Security Guard be considered as part of our staffing?**

Yes, that would be part of your staffing model.

**60. There may be times when families will have to cross paths with one another, in terms of confidentiality, will this be an issue?**

The proposal should address how the QPC will handle transitions between visits. As long as there was no communication or information shared, it would not be a confidentiality issue.

**61. Regarding ongoing training for staff, how will we be expected to manage the visitation schedule and ensure our staff are fully trained?**

The training schedule will need to be coordinated with the hiring of staff. It may be necessary to offer multiple training opportunities to ensure staff have access and receive training.

**62. The RFP is clear that, "The Department will not accept proposals from any applicant for Regions for which a Letter of Intent was not submitted." The zoning process can be long and complicated as well as costly. If a provider submits an LOI based on a plan to convert their TGH or S-FIT location to a QPC and zoning ends up being impossible can they pursue a site different than the address on the LOI?**

Possibly. The Department will entertain this request but reserves the right to terminate negotiations and move to the next highest ranking RFP applicant based on operational need.

**63. Section E, 4 and 5 are missing on the Proposal Outline on page 25. Please confirm if this an error or these sections are missing and if the later please confirm content.**

This is a formatting issue within the RFP. The Proposal Outline should be:

- #3 Staffing
- #4 Workplan/Implementation
- #5 DCF & Family Partnerships
- #6 Data/Technology

**64. The Style Requirements are 10 sheets of paper printed on both sides. Is it correct to assume that since this is an electronic submission that the page limit will be 20 pages printed on one side?**

Yes.

**65. Are legal fees associated with a zoning change considered an allowable expense in the startup costs?**

Yes.

**66. If the organization has an additional site to offer playgroups, or parent education opportunities can they be integrated into the proposal to provide a holistic approach?**

Yes, as long as it falls within the budget.

**67. Who will training staff in the Visit Coaching Model? Is a fee associated with the training? If yes, will this be an allowable expense in the startup budget?**

The model developer will be conducting the training which will be supported by the Department.

**68. With regards to the 48,000 visits estimated annually, is that the total number of visits by individual child or by family? That is, if two children in the same family attend a visit at the same time, does that count as two visits or one?**

Visits are counted by family.

**69. Please provide the anticipated average number of children who will be visiting with each parent participating in the QPC program.**

See Attachment #3.

**70. Our SFIT program has a larger capacity with two separate site locations. It is larger than other SFIT and Group Home programs eligible for this RFP. Will you accept a proposal that eliminates 1 SFIT program, replacing it with a Quality Parenting Center, but also allows us to maintain our 2nd SFIT location with a smaller capacity, provided that the combined budget for both of these programs does not exceed the contract amount? If not, what is the allowable range of contract values for the 6-9 Quality Parenting Centers under this RFP?**

Yes. In this scenario, closing one SFIT and allowing the other to remain open is acceptable.

**71. Are there any specific driver's license endorsements or credentialing requirements needed to transport DCF involved youth related to this RFP?**

A valid CT Drivers License. See Question 39.

**72. Is the use of an ABH credentialed transportation service or school transportation service, funded by the contractor, allowable for the transportation of youth under this contract?**

No.

**73. Can you estimate the number of visits per day/week/month/year that each area office will need under this contract?**

No. While referrals will come from specific Area Offices, the Department is not currently defining the minimum number of visits that must occur through the QPC by Area Office. Applicants must propose the capacities that they believe can be accommodated by the space they are proposing to utilize.

74. **Can the Department provide an estimate of the percentage of the annual number of visits that need transportation?**  
No. This data is not available given the current nature of how supervised visitation occurs.

75. **Will the Department fund the purchase of vehicles (for transportation under this contract) as part of start-up costs?**  
Yes.

76. **Must applicants apply for an entire DCF Region or may we apply to serve specific Area Offices or geographical area?**  
Applicants may apply to a specific Area Office(s) or geographical area(s).

77. **Will programs be expected to provide transportation outside their catchment area?**  
Yes.

78. **Will the Department fund ongoing model training after initial startup? Is there a train-the-trainer options so that providers can be trained to train their own staff ongoingly?**  
The model does offer train the trainer options. The Department would support the initial costs of the training but cannot commit to supporting training on the model in the future.

79. **What are the outcome measures for this program?**  
Specific outcome measures have not yet been identified. It is the Department's intent to utilize its Service Outcome Advisory Committee to collaboratively develop Performance Outcome Measures for this service type with awarded applicants.

80. **Are copies of the audit letters requested on page 24 of the RFP (under section D, Cost Proposal Component 1. Financial Requirements) meant to be included in Appendix 9 - Financial Profile?**  
Yes.

81. **Can anticipated unemployment costs for self-funded employers be included as part of the start-up for staff that are unlikely to be able to transition?**  
No. These costs would be negotiated separately as part of closeout of a program that is terminating.

82. **If an agency is awarded a Quality Parenting Center and prior to the contract being executed the Department requests applications for the QRTP's, could said agency submit an application for the QRTP (or follow the process that the Department determines for QRTP selection)?**  
Yes.

83. **If an agency is awarded a Quality Parenting Center and the contract is executed however the group home to be closed is still in operation pending placement of current residents, could said agency submit an application for the QRTP (or follow the process that the Department determines for the QRTP selection)?**  
No. The Department would not entertain this option if the contract for the QPC has already been awarded and executed.

84. **Since the QPC will be replacing a TGH or S-Fit and these programs have qualified multicultural Masters level, clinical staff with deep experience in working with families we would like to transfer those staff to the QPC. The model does not require a clinical component, but a clinical presence would only enhance the level of care in the QPC. Would a proposal be penalized for a staffing model that includes Masters level clinical staff?**  
No, it would not be penalized as long as the staffing model falls within the budgeted amount for that site and supports a level of supervision necessary to ensure safety of children.

85. **The RFP is for 1-3 years at the discretion of the department. Does DCF envision additional funds for potential Y2-3?**  
DCF does not anticipate funding beyond what is detailed in the RFP for this service. DCF does anticipate continuation of this service type beyond 3 years.

**86. Will applying for or being awarded a QPC have any influence on the DCF's decision to grant a group home QRTP status?**

No.

**87. What are the criteria you are using to determine which TGH's or S-FIT programs are prioritized for transition and or closure? Is there a plan to retain a minimum # of programs per region?**

The Department is not identifying or prioritizing SFITS or TGH's for transition or closure. Decisions around the awards will be made based on the merits of the proposal. Once the QPCs are selected, the Department will evaluate need/utilization to ensure all regions have access to higher levels of care for children when needed.

**88. If you do not receive enough QPC proposals will you work with selected TGH or S-FITS to transition them individually or will you RFP it again to a larger base?**

If the minimum # of viable proposals are not received through this process, the Department will reissue the RFP, open to all eligible private provider organizations and will separately identify the congregate programs that will need to be closed to match utilization and need.

**89. What is the plan on transitioning youth residing in these congregate care settings if they are chosen to be repurposed?**

Once providers are notified, communication will go out to the Area Offices to begin developing transition plans for impacted youth. This will be a collaborative process between DCF and the provider and child, with continuity of care being the primary focus of the transition.

**90. In the proposed state budget it references a current DCF limit on transportation services based on miles to the identified visit placement. Will the same transport/mileage format be used for such transportation services in the QPC system?**

No.

**91. Will QPC providers need to plan for overnight visitations?**

No.

**92. Will providers be expected to provide services to out of region children?**

As part of the proposal, applicants must identify the specific locations/areas they intend to provide services to. QPC staff may be expected to provide transportation to children placed out of region, based on the Area Office they are overseen by.

**93. Will QPC providers need to provide visitations for all types of out of home placements (i.e. TFC, FCT, relative and or kin) in addition to regular foster care?**

Yes.

**94. On page six, section 10, it states ...“faxed or email proposals will not be evaluated”..., however a bullet on page six states “The proposal must be emailed to the official agency contact”. What forms of submission are allowed?**

In deference to the restrictions due to the pandemic, the Department will only accept an emailed proposal to the Agency Official Contact.

**95. If an agency proposes to use multiple buildings on one campus site, are separate RFP responses submissions required?**

No. Separate proposals must be submitted if an applicant is intending to respond to more than one location/geographical area.

**96. What is the length of training for Family Time; Coaching Model and the QPC initiative?**

The length of service for the QPC is up to 6 months. Information around the training on the Visit Coaching Model will be provided once notification of the award has been completed.

**97. Will consideration be given to allow QPC providers to be part of the visitation planning meeting?**

Typically, the Visitation Plan is initially created at time of the child's removal. Once the QPC is involved, the plans will be evaluated every 30 days to assess whether modifications to the plan are necessary. The observations and feedback provided by the QPC is critical to this assessment, as well as the input from all the service providers connected to the family.

**98. Will providers be trained in the Quality Parenting Initiative?**

An overview of the QPI will be provided to awarded Contractors.

**99. Have the quality "excellent" parenting standards been defined by DCF and/or its stakeholders? If "yes" have policy and procedures been developed, or amended?**

As part of the roll out of this program, the Department is reviewing and will be refining practice standards related to parent/child interactions.

**100. Will QPC providers have to provide reports to the involved attorney's, specifically child's Attorney or Guardian ad Litem regarding the visitations?**

Possibly. Summary assessments of parent/child interactions will be provided to DCF who may be required to disclose such to Attorneys.

**101. Will QPC providers be precluded from providing other clinical services (Outpatient/EDT) to children being served by their QPC program?**

No, but the QPC program cannot be utilized as a referral source for such programs.

**102. Will QPC be licensed under the child caring regulations or emergency shelter regulations?**

No.

**103. If a family moves to a lower level supervision, will the QPC provider remain involved and for how long?**

Once the family successfully transitions to the low intensity level, the QPC will continue to remain involved for a period of 3 weeks to ensure consistency both in frequency and quality are maintained.

**104. Will the expectation be that visits be videotaped?**

No.

**105. What are the expectations for security in the QPC? (Staff secured/security guards) Will there be specific security requirements?**

No security requirements were identified in the RFP. Sites should ensure the safety of children and families who receive services throughout the duration of family's involvement. This should be an area discussed within the proposal.

**106. Will DCF staff ever be part of the visitations?**

It is not anticipated that DCF staff will routinely be part of visitations performed by the QPC.

**107. What are the documentation requirements for the visitations?**

Please refer to page 22 of the RFP.

**108. How will QPC providers be expected to collaborate with Reunification (RTFT) and Supervised Visitation Providers?**

It is likely that many families referred to the QPC are involved with other service providers in the community. It will be incumbent of the QPC to ensure regular and ongoing communication with the DCF assigned SW. The DCF SW will communicate pertinent information to other providers as necessary as it relates to permanency planning. The QPC may be invited to participate in family team meetings.

**109. Is there a limit on the startup costs?**

No.

**110. Will DCF training also include car seat training?**

Yes.

**111. Does the Visit Coaching model in New York's ACS use bachelor's level staff or clinicians or a combination?**

There is flexibility in the credentials of staff who deliver the Visit Coaching Model. It does not require a clinician.

**112. Can you provide a current list of the agency's that have SFIT Programs and Therapeutic Group Homes as well as their locations as the list on the DCF website is not an updated one?**

See Attachment #4.

**113. It was stated that applicants are limited to the grant amount that funds the group home? Would you entertain a budget that covers real costs for the program implementation?**

Proposal budgets will be entertained for an amount not to exceed current funding of the program proposed for closure.

**114. Will children be placed in foster care settings near the QPC or is it possible that transportation of children is coming from well outside the DCF area office? Is there any potential collaboration with DCF around transportation for children placed in other regions?**

Children may be placed outside the region. QPC staff are expected to provide transportation to and from the center unless transportation arrangements can be made through the child's foster parent. The Department will not assist with arranging or financially supporting visitation.

**115. How does future COVID risk play into the department's plan for supervised visits? Are visits allowed to occur via telehealth?**

It is anticipated that, by the time of implementation, the Department will be fully transitioned back to in-person visitation, consistent with the State's reopening plan. Future risks will be evaluated and handled in accordance with any state public health guidelines set forth by the Governor.

**116. What is the breakdown of children in placement by placement type?**

Please see Attachment #5. Please note that this data is inclusive of all children in care, not just children 0-12 years old (as is the target population for the QPC service).

**117. What is the breakdown of children in placement by Town?**

Please see Attachment #6. Please note that this data is inclusive of all children in care, not just children 0-12 years old (as is the target population for the QPC service).

**ATTACHMENT #1****Total # Children Ages 0-12 in Placement by Region/Area Office**

#/% OF CHILDREN-IN-PLACEMENT (CIP) ON 4/28/21 BY AGE GROUP, DCF REGION AND DCF OFFICE

Area Office	Age Range (on 4/28/21)		
	0 - 2	3 - 5	6 - 12
<u>#CIP on 4/28/21</u>			
Region 1	98	63	109
Bridgeport	67	37	67
Norwalk	31	26	42
Region 2	162	100	148
Milford	71	46	76
New Haven	91	54	72
Region 3	216	123	184
Middleton	30	16	18
Norwich	105	61	95
Willimantic	81	46	71
Region 4	170	95	172
Hartford	93	63	95
Manchester	77	32	77
Region 5	158	139	221
Danbury	40	37	51
Torrington	26	20	32
Waterbury	92	82	138
Region 6	122	71	146
Meriden	20	14	27
New Britain	102	57	119
<u>Total #CIP on 4/28/</u>	926	591	980

**ATTACHMENT #2****Total # Children in Placement by Race/Ethnicity**

#/% OF CHILDREN-IN-PLACEMENT (CIP) ON 4/28/21 BY RACE/ETHNICITY, DCF REGION AND DCF OFFICE

AGE2	(Multiple Items)				
Area Office #CIP on 4/28/21	Race/Ethnicity				Grand Total
	BLACK	HISPANIC	OTHER	WHITE	
Region 1	109	108	12	41	270
Bridgeport	77	67	6	21	171
Norwalk	32	41	6	20	99
Region 2	188	84	38	100	410
Milford	58	38	23	74	193
New Haven	130	46	15	26	217
Region 3	51	121	61	290	523
Middleton	2	6	10	46	64
Norwich	43	57	39	122	261
Willimantic	6	58	12	122	198
Region 4	115	172	37	113	437
Hartford	95	119	15	22	251
Manchester	20	53	22	91	186
Region 5	75	177	54	212	518
Danbury	13	47	14	54	128
Torrington	1	8	10	59	78
Waterbury	61	122	30	99	312
Region 6	37	125	46	131	339
Meriden	3	24	14	20	61
New Britain	34	101	32	111	278

**ATTACHMENT #3****Average # of Children in Placement per Family**

AVERAGE NUMBER OF CHILDREN IN PLACEMENT PER CASE/FAMILY BY AREA OFFICE, FOR CIP ON 4/28/21

OFFICE	AVG #CIP/CASE
Bridgeport	1.4
Norwalk	1.3
Milford	1.3
New Haven	1.3
Middletown	1.2
Norwich	1.3
Willimantic	1.4
Hartford	1.3
Manchester	1.2
Danbury	2.7
Waterbury	1.3
Torrington	1.2
Meriden	1.3
New Britain	1.3
<b>Statewide</b>	<b>1.3</b>

**Currently Contracted Therapeutic Group Homes and SFITS**

Provider	Program Name	Service Type	# of Beds	Address	City	Zip Code
Adelbrook Community Services	Esther House	Therapeutic Group Home	5	83 Bradley Street	North Haven	06473
Adelbrook Community Services	Isaiah House	Therapeutic Group Home	5	59 Flynn Road	Middletown	06457
Adelbrook Community Services	Potter House	Therapeutic Group Home	5	80 Hicksville Road	Cromwell	06416
Bridge Family Center	Eleanor House	Therapeutic Group Home	6	367 Fairfield Avenue	Hartford	06114
Children's Center of Hamden		SFIT	12	1400 Whitney Avenue	Hamden	06517
Community Health Resources	Brook House	Therapeutic Group Home	6	41 Broad Brook Road	Enfield	06082
Community Health Resources	Grant House	Therapeutic Group Home	6	821 Dunn Road	Coventry	06238
Community Health Resources	Mills House	Therapeutic Group Home	5	184 Deerfield Road	Windsor	06095
CT Junior Republic Association	Winchester House	Therapeutic Group Home	5	131 Ashley Road	Winchester	06098
Family & Children's Aid		SFIT	8	75 West Street	Danbury	06810
Family & Children's Aid	Boys	Therapeutic Group Home	6	75 West Street	Danbury	06810
Family & Children's Aid	Girls	Therapeutic Group Home	6	75 West Street	Danbury	06810
Focus Center for Autism		Therapeutic Group Home	5	18 Shannon Drive	Barkhamsted	06063
Gilead Community Services	Anchorage Home	Therapeutic Group Home	5	7 Anchorage Drive	Old Saybrook	06475
Key Human Services	Loveland	Therapeutic Group Home	5	70 Loveland Road	Hebron	06248
Klingberg Comprehensive Family Services	Nia Sage House	Therapeutic Group Home	5	623 Highland Street	Wethersfield	06109
Klingberg Comprehensive Family Services	Phoenix House	Therapeutic Group Home	5	84 Dorothy Lane	Terryville	06786
NAFI CT, Inc.	Corbin House	Therapeutic Group Home	4	45 Dover Road	New Britain	06052
NAFI CT, Inc.	Thomaston Group Home	Therapeutic Group Home	5	273 Prospect Street	Thomaston	06787
NAFI CT, Inc.	Tress Road	Therapeutic Group Home	4	58 Tress Road	Prospect	06712
Noank Group Homes & Support Services		Therapeutic Group Home	5	10 Gray Farm Road	Ledyard	06339
Village for Families & Children		SFIT	12	1680 Albany Avenue	Hartford	06105
Village for Families & Children	Allision Gil	Therapeutic Group Home	6	1680 Albany Avenue	Hartford	06105
Waterbury Youth Services		SFIT	9	160 Grandview Avenue	Waterbury	06702
Waterford Country School		SFIT	20	313 North Windham Road 78 Hunts Brook Road	North Windham Quaker Hill	06256 06375
Wellmore	Valiant House	Therapeutic Group Home	5	24 Spindle Hill Road	Wolcott	06716
Wheeler Clinic		SFIT	9	91 Northwest Drive	Plainville	06062

Wheeler Clinic	Farm Hill	Therapeutic Group Home	5	1 Farm Hill Drive	Plainville	06062
Wheeler Clinic	Light House	Therapeutic Group Home	5	651 Jerome Avenue	Bristol	06010
Wheeler Clinic	Sage House	Therapeutic Group Home	5	81 Edward Street	Newington	06111
Youth Continuum	Bradley Street	Therapeutic Group Home	5	300 Bradley Street	East Haven	06512
Youth Continuum	Helen's House	Therapeutic Group Home	6	3 Potter Road	North Haven	06473

**ATTACHMENT #5**
**Total # of Children in Placement by Placement Type**

#/% OF CHILDREN-IN-PLACEMENT (CIP) ON 4/28/21 BY PLACEMENT TYPE, DCF REGION AND DCF OFFICE

AGE2	(Multiple Items)				
Area Office	Age Range (on 4/28/21)		CONGREGATE CARE	TRIAL HOME VISIT	Grand Total
#CIP on 4/28/21	FOSTER CARE	KINSHIP CARE			
Region 1	131	126	1	12	270
Bridgeport	84	83		4	171
Norwalk	47	43	1	8	99
Region 2	164	235	4	7	410
Milford	74	109	3	7	193
New Haven	90	126	1		217
Region 3	289	228	5	1	523
Middleton	31	32	1		64
Norwich	154	105	1	1	261
Willimantic	104	91	3		198
Region 4	176	247	4	10	437
Hartford	94	150	2	5	251
Manchester	82	97	2	5	186
Region 5	277	232	2	7	518
Danbury	74	53		1	128
Torrington	52	24	1	1	78
Waterbury	151	155	1	5	312
Region 6	165	164	6	4	339
Meriden	32	27	2		61
New Britain	133	137	4	4	278
%CIP on 4/28/21					
Region 1	48.5%	46.7%	0.4%	4.4%	100.0%
Bridgeport	49.1%	48.5%	0.0%	2.3%	100.0%
Norwalk	47.5%	43.4%	1.0%	8.1%	100.0%
Region 2	40.0%	57.3%	1.0%	1.7%	100.0%
Milford	38.3%	56.5%	1.6%	3.6%	100.0%
New Haven	41.5%	58.1%	0.5%	0.0%	100.0%
Region 3	55.3%	43.6%	1.0%	0.2%	100.0%
Middleton	48.4%	50.0%	1.6%	0.0%	100.0%
Norwich	59.0%	40.2%	0.4%	0.4%	100.0%
Willimantic	52.5%	46.0%	1.5%	0.0%	100.0%
Region 4	40.3%	56.5%	0.9%	2.3%	100.0%
Hartford	37.5%	59.8%	0.8%	2.0%	100.0%
Manchester	44.1%	52.2%	1.1%	2.7%	100.0%
Region 5	53.5%	44.8%	0.4%	1.4%	100.0%
Danbury	57.8%	41.4%	0.0%	0.8%	100.0%
Torrington	66.7%	30.8%	1.3%	1.3%	100.0%
Waterbury	48.4%	49.7%	0.3%	1.6%	100.0%
Region 6	48.7%	48.4%	1.8%	1.2%	100.0%
Meriden	52.5%	44.3%	3.3%	0.0%	100.0%
New Britain	47.8%	49.3%	1.4%	1.4%	100.0%
Total #CIP on 4/28/	1202	1232	22	41	2497
Total %CIP on 4/28/	48.1%	49.3%	0.9%	1.6%	100.0%

**ATTACHMENT #6****Total # of Children in Placement by Placement Town**

#/% OF CHILDREN-IN-PLACEMENT (CIP) ON 4/28/21 BY PLACEMENT TYPE, DCF REGION, DCF OFFICE AND TOWN

AGE2	(Multiple Items)				
DCF Region/Area Office/Town	PLACEMENT TYPE				
	FOSTER CARE	KINSHIP CARE	CONGREGATE CARE	TRIAL HOME VISIT	Grand Total
#CIP on 4/28/21					
OUT-OF-STAT	57	6	4		67
OUT-OF-ST	57	6	4		67
OUT-O	57	6	4		67
REGION 1	147	147			294
BRIDGEPO	121	104			225
BRIDGE	64	74			138
EASTO	2	2			4
FAIRFI	10	7			17
MONR	3	2			5
STRATF	30	16			46
TRUME	12	3			15
NORWALK	26	43			69
GREEN	1				1
NEW C	1	1			2
NORW	11	27			38
STAMF	12	13			25
WESTON		1			1
WESTP	1	1			2
REGION 2	188	220	2		410
MILFORD	132	137	1		270
ANSON	6	9			15
BETHANY		4			4
BRANF	3	9			12
DERBY	3	11			14
EAST H	18	11			29
HAMD	40	36	1		77
MILFO	12	8			20
NORTH	5	2			7
NORTH	5	7			12
ORANC	2	1			3
SEYMC	4	6			10
SHELTC	6	4			10
WEST H	26	29			55
WOOD	2				2
NEW HAVE	56	83	1		140
NEW H	56	83	1		140
REGION 3	250	220	3		473
MIDDLETC	38	39	1		78
CHESTI	3	2			5
CLINTON		3			3
CROMWELL		1	1		2
DEEP RIVER		2			2
DURHA	2				2
EAST H	2	1			3
EAST H	7	5			12
GUILFC	2	4			6
HADDA	2				2
KILLIN	1	1			2
LYME	2				2
MADIS	2				2
MIDL	2				2
MIDL	12	19			31
OLD SA	1		1		1
PORTLAND					1

NORWICH	125	105	1	231
BOZRA	2	3		5
COLCH	12	3		15
EAST L'	5	2		7
FRANKLIN		3		3
GRISW	6	7		13
GROTC	21	5		26
LEBAN	1	2		3
LEDYAI	10	10		20
LISBON	5	2		7
MONT	15	3		18
NEW L	7	12		19
NORTH	2	2		4
NORW	17	36		53
PRESTC	8	5		13
SALEM	1			1
SPRAGUE		2		2
STONI	5	2		7
VOLUN	1	1		2
WATEF	7	5	1	13
WILLIMAN	87	76	1	164
ASHFO	1			1
BROOK	9	9		18
CANTE	11			11
COLUN	3	1		4
COVEN	4	6		10
HAMPTON		3		3
KILLIN	8	14		22
MANSI	7	2		9
PLAINF	8	11		19
POMFRET		4		4
PUTNA	2	10		12
STERLI	3	2		5
THOMI	5	1	1	7
WILLIN	3			3
WINDI	17	12		29
WOOD	6	1		7
REGION 4	219	257	8	484
HARTFORC	103	114	7	224
BLOON	9	9		18
HARTF	50	77	6	133
WEST I	18	12	1	31
WINDS	26	16		42
MANCHES	116	143	1	260
BOLTO	2	4		6
EAST G	6			6
EAST H	19	36		55
EAST WINDSOR		4	1	5
ELLING	2	3		5
ENFIEL	9	21		30
GLASTC	4	1		5
GRANE	4	2		6
HEBRON		1		1
MANCI	25	36		61
MARLE	1			1
SOMEF	3	3		6
SOUTH	11	10		21
STAFFC	9	2		11
SUFFIELD		1		1
TOLLAI	7	1		8
VERNC	10	12		22
WINDS	4	6		10
REGION 5	222	206		428
DANBURY	55	47		102
BETHEI	13	3		16
BROOK	5	3		8
DANBL	8	27		35
NEW F	3	1		4
NEW M	16	9		25
NEWTC	6	4		10
RIDGEF	4			4

TORRINGTON	46	34		80
BARKHAMSTED	2	2		4
BETHLEHEM	1	1		2
CANAAN		1		1
COLEBROOK	1	3		4
CORNWALL	2			2
GOSHEM	2			2
HARTLAND	1			1
LITCHFIELD	2	1		3
MORRISTOWN	1	1		2
NEW HAVEN	1			1
NORFOLK	1			1
THOMASTON	1	3		4
TORRINGTON	18	10		28
WASHINGTON		1		1
WATERFORD	7	6		13
WINCHESTER	6	5		11
WATERBURY	121	125		246
BEACONFIELD	1	5		6
MIDDLEBURY		4		4
NAUGATUCK	20	12		32
OXFORD	3	1		4
PROSPERITY	3	3		6
SOUTH	1	7		8
WATERBURY	84	84		168
WOLCOTT	8	7		15
WOODBURY	1	2		3
REGION 6	119	176	5	300
MERIDEN	37	35		72
CHESHIRE	7	3		10
MERIDIAN	23	25		48
WALLINGFORD	7	7		14
NEW BRITAIN	82	141	5	228
AVON	6	1		7
BERLIN	5	4		9
BRISTOL	9	30		39
BURLINGTON	4			4
CANTON	2	3		5
FARMINGTON	3		1	4
NEW BRUNSWICK	22	64	3	89
NEWINGTON	6	9		15
PLAINFIELD	4	4		8
PLYMOUTH	6	2		8
ROCKY HILL	1	1		2
SIMS BROWN	4	2		6
SOUTH BRUNSWICK	3	11	1	15
WE THE PEOPLE	7	10		17
UNKNOWN				41
UNKNOWN				41
UNKNOWN				41
%CIP on 4/28/21				
OUT-OF-STATE	85.1%	9.0%	6.0%	0.0%
OUT-OF-STATE	85.1%	9.0%	6.0%	0.0%
OUT-OF-STATE	85.1%	9.0%	6.0%	0.0%
REGION 1	50.0%	50.0%	0.0%	0.0%
BRIDGEPORT	53.8%	46.2%	0.0%	0.0%
BRIDGEPORT	46.4%	53.6%	0.0%	0.0%
EASTON	50.0%	50.0%	0.0%	0.0%
FAIRFIELD	58.8%	41.2%	0.0%	0.0%
MIDDLEBURY	60.0%	40.0%	0.0%	0.0%
STRATFORD	65.2%	34.8%	0.0%	0.0%
TRUMAN	80.0%	20.0%	0.0%	0.0%
NORWALK	37.7%	62.3%	0.0%	0.0%
GREENWICH	100.0%	0.0%	0.0%	0.0%
NEW HAVEN	50.0%	50.0%	0.0%	0.0%
NORWICH	28.9%	71.1%	0.0%	0.0%
STAMFORD	48.0%	52.0%	0.0%	0.0%
WESTFIELD	0.0%	100.0%	0.0%	0.0%
WESTPORT	50.0%	50.0%	0.0%	0.0%

REGION 2	45.9%	53.7%	0.5%	0.0%	100.0%
MILFORD	48.9%	50.7%	0.4%	0.0%	100.0%
ANSON	40.0%	60.0%	0.0%	0.0%	100.0%
BETHA	0.0%	100.0%	0.0%	0.0%	100.0%
BRANF	25.0%	75.0%	0.0%	0.0%	100.0%
DERBY	21.4%	78.6%	0.0%	0.0%	100.0%
EAST H	62.1%	37.9%	0.0%	0.0%	100.0%
HAMD	51.9%	46.8%	1.3%	0.0%	100.0%
MILFO	60.0%	40.0%	0.0%	0.0%	100.0%
NORTH	71.4%	28.6%	0.0%	0.0%	100.0%
NORTH	41.7%	58.3%	0.0%	0.0%	100.0%
ORANC	66.7%	33.3%	0.0%	0.0%	100.0%
SEYMC	40.0%	60.0%	0.0%	0.0%	100.0%
SHELTC	60.0%	40.0%	0.0%	0.0%	100.0%
WEST I	47.3%	52.7%	0.0%	0.0%	100.0%
WOOD	100.0%	0.0%	0.0%	0.0%	100.0%
NEW HAVI	40.0%	59.3%	0.7%	0.0%	100.0%
NEW H	40.0%	59.3%	0.7%	0.0%	100.0%
REGION 3	52.9%	46.5%	0.6%	0.0%	100.0%
MIDDLETC	48.7%	50.0%	1.3%	0.0%	100.0%
CHESTI	60.0%	40.0%	0.0%	0.0%	100.0%
CLINTC	0.0%	100.0%	0.0%	0.0%	100.0%
CROMI	0.0%	50.0%	50.0%	0.0%	100.0%
DEEP R	0.0%	100.0%	0.0%	0.0%	100.0%
DURHAI	100.0%	0.0%	0.0%	0.0%	100.0%
EAST H	66.7%	33.3%	0.0%	0.0%	100.0%
EAST H	58.3%	41.7%	0.0%	0.0%	100.0%
GUILFC	33.3%	66.7%	0.0%	0.0%	100.0%
HADDI	100.0%	0.0%	0.0%	0.0%	100.0%
KILLIN	50.0%	50.0%	0.0%	0.0%	100.0%
LYME	100.0%	0.0%	0.0%	0.0%	100.0%
MADIS	100.0%	0.0%	0.0%	0.0%	100.0%
MIDL	100.0%	0.0%	0.0%	0.0%	100.0%
MIDL	38.7%	61.3%	0.0%	0.0%	100.0%
OLD SA	100.0%	0.0%	0.0%	0.0%	100.0%
PORTL	0.0%	100.0%	0.0%	0.0%	100.0%
NORWICH	54.1%	45.5%	0.4%	0.0%	100.0%
BOZRA	40.0%	60.0%	0.0%	0.0%	100.0%
COLCH	80.0%	20.0%	0.0%	0.0%	100.0%
EAST L'	71.4%	28.6%	0.0%	0.0%	100.0%
FRANK	0.0%	100.0%	0.0%	0.0%	100.0%
GRISW	46.2%	53.8%	0.0%	0.0%	100.0%
GROTC	80.8%	19.2%	0.0%	0.0%	100.0%
LEBAN	33.3%	66.7%	0.0%	0.0%	100.0%
LEDYAI	50.0%	50.0%	0.0%	0.0%	100.0%
LISBON	71.4%	28.6%	0.0%	0.0%	100.0%
MONT	83.3%	16.7%	0.0%	0.0%	100.0%
NEW LI	36.8%	63.2%	0.0%	0.0%	100.0%
NORTH	50.0%	50.0%	0.0%	0.0%	100.0%
NORW	32.1%	67.9%	0.0%	0.0%	100.0%
PRESTC	61.5%	38.5%	0.0%	0.0%	100.0%
SALEM	100.0%	0.0%	0.0%	0.0%	100.0%
SPRAG	0.0%	100.0%	0.0%	0.0%	100.0%
STONII	71.4%	28.6%	0.0%	0.0%	100.0%
VOLUN	50.0%	50.0%	0.0%	0.0%	100.0%
WATEF	53.8%	38.5%	7.7%	0.0%	100.0%
WILLIMAN	53.0%	46.3%	0.6%	0.0%	100.0%
ASHFO	100.0%	0.0%	0.0%	0.0%	100.0%
BROOK	50.0%	50.0%	0.0%	0.0%	100.0%
CANTE	100.0%	0.0%	0.0%	0.0%	100.0%
COLUN	75.0%	25.0%	0.0%	0.0%	100.0%
COVEN	40.0%	60.0%	0.0%	0.0%	100.0%
HAMP	0.0%	100.0%	0.0%	0.0%	100.0%
KILLIN	36.4%	63.6%	0.0%	0.0%	100.0%
MANSI	77.8%	22.2%	0.0%	0.0%	100.0%
PLAINF	42.1%	57.9%	0.0%	0.0%	100.0%
POMFF	0.0%	100.0%	0.0%	0.0%	100.0%
PUTNA	16.7%	83.3%	0.0%	0.0%	100.0%
STERLI	60.0%	40.0%	0.0%	0.0%	100.0%
THOMI	71.4%	14.3%	14.3%	0.0%	100.0%
WILLIN	100.0%	0.0%	0.0%	0.0%	100.0%
WINDH	58.6%	41.4%	0.0%	0.0%	100.0%
WOOD	85.7%	14.3%	0.0%	0.0%	100.0%

REGION 4	45.2%	53.1%	1.7%	0.0%	100.0%
HARTFORC	46.0%	50.9%	3.1%	0.0%	100.0%
BLOON	50.0%	50.0%	0.0%	0.0%	100.0%
HARTF	37.6%	57.9%	4.5%	0.0%	100.0%
WEST I	58.1%	38.7%	3.2%	0.0%	100.0%
WINDS	61.9%	38.1%	0.0%	0.0%	100.0%
MANCHES	44.6%	55.0%	0.4%	0.0%	100.0%
BOLTO	33.3%	66.7%	0.0%	0.0%	100.0%
EAST G	100.0%	0.0%	0.0%	0.0%	100.0%
EAST H	34.5%	65.5%	0.0%	0.0%	100.0%
EAST V	0.0%	80.0%	20.0%	0.0%	100.0%
ELLING	40.0%	60.0%	0.0%	0.0%	100.0%
ENFIEL	30.0%	70.0%	0.0%	0.0%	100.0%
GLAST	80.0%	20.0%	0.0%	0.0%	100.0%
GRANE	66.7%	33.3%	0.0%	0.0%	100.0%
HEBRO	0.0%	100.0%	0.0%	0.0%	100.0%
MANCI	41.0%	59.0%	0.0%	0.0%	100.0%
MARLE	100.0%	0.0%	0.0%	0.0%	100.0%
SOMEF	50.0%	50.0%	0.0%	0.0%	100.0%
SOUTH	52.4%	47.6%	0.0%	0.0%	100.0%
STAFFC	81.8%	18.2%	0.0%	0.0%	100.0%
SUFFIE	0.0%	100.0%	0.0%	0.0%	100.0%
TOLLAI	87.5%	12.5%	0.0%	0.0%	100.0%
VERNC	45.5%	54.5%	0.0%	0.0%	100.0%
WINDS	40.0%	60.0%	0.0%	0.0%	100.0%
REGION 5	51.9%	48.1%	0.0%	0.0%	100.0%
DANBURY	53.9%	46.1%	0.0%	0.0%	100.0%
BETHEI	81.3%	18.8%	0.0%	0.0%	100.0%
BROOK	62.5%	37.5%	0.0%	0.0%	100.0%
DANBL	22.9%	77.1%	0.0%	0.0%	100.0%
NEW F.	75.0%	25.0%	0.0%	0.0%	100.0%
NEW N	64.0%	36.0%	0.0%	0.0%	100.0%
NEWTC	60.0%	40.0%	0.0%	0.0%	100.0%
RIDGEF	100.0%	0.0%	0.0%	0.0%	100.0%
TORRINGT	57.5%	42.5%	0.0%	0.0%	100.0%
BARKH	50.0%	50.0%	0.0%	0.0%	100.0%
BETHLI	50.0%	50.0%	0.0%	0.0%	100.0%
CANAA	0.0%	100.0%	0.0%	0.0%	100.0%
COLEBI	25.0%	75.0%	0.0%	0.0%	100.0%
CORNV	100.0%	0.0%	0.0%	0.0%	100.0%
GOSHE	100.0%	0.0%	0.0%	0.0%	100.0%
HARTL	100.0%	0.0%	0.0%	0.0%	100.0%
LITCHF	66.7%	33.3%	0.0%	0.0%	100.0%
MORRI	50.0%	50.0%	0.0%	0.0%	100.0%
NEW H	100.0%	0.0%	0.0%	0.0%	100.0%
NORFC	100.0%	0.0%	0.0%	0.0%	100.0%
THOM.	25.0%	75.0%	0.0%	0.0%	100.0%
TORRIN	64.3%	35.7%	0.0%	0.0%	100.0%
WASHI	0.0%	100.0%	0.0%	0.0%	100.0%
WATEF	53.8%	46.2%	0.0%	0.0%	100.0%
WINCI	54.5%	45.5%	0.0%	0.0%	100.0%
WATERBU	49.2%	50.8%	0.0%	0.0%	100.0%
BEACO	16.7%	83.3%	0.0%	0.0%	100.0%
MIDL	0.0%	100.0%	0.0%	0.0%	100.0%
NAUGA	62.5%	37.5%	0.0%	0.0%	100.0%
OXFOR	75.0%	25.0%	0.0%	0.0%	100.0%
PROSP	50.0%	50.0%	0.0%	0.0%	100.0%
SOUTH	12.5%	87.5%	0.0%	0.0%	100.0%
WATEF	50.0%	50.0%	0.0%	0.0%	100.0%
WOLC	53.3%	46.7%	0.0%	0.0%	100.0%
WOOD	33.3%	66.7%	0.0%	0.0%	100.0%

REGION 6	39.7%	58.7%	1.7%	0.0%	100.0%
MERIDEN	51.4%	48.6%	0.0%	0.0%	100.0%
CHESH	70.0%	30.0%	0.0%	0.0%	100.0%
MERID	47.9%	52.1%	0.0%	0.0%	100.0%
WALLII	50.0%	50.0%	0.0%	0.0%	100.0%
NEW BRIT/	36.0%	61.8%	2.2%	0.0%	100.0%
AVON	85.7%	14.3%	0.0%	0.0%	100.0%
BERLIN	55.6%	44.4%	0.0%	0.0%	100.0%
BRISTC	23.1%	76.9%	0.0%	0.0%	100.0%
BURLIN	100.0%	0.0%	0.0%	0.0%	100.0%
CANTC	40.0%	60.0%	0.0%	0.0%	100.0%
FARMI	75.0%	0.0%	25.0%	0.0%	100.0%
NEW B	24.7%	71.9%	3.4%	0.0%	100.0%
NEWIN	40.0%	60.0%	0.0%	0.0%	100.0%
PLAIN\	50.0%	50.0%	0.0%	0.0%	100.0%
PLYMC	75.0%	25.0%	0.0%	0.0%	100.0%
ROCKY	50.0%	50.0%	0.0%	0.0%	100.0%
SIMSBII	66.7%	33.3%	0.0%	0.0%	100.0%
SOUTH	20.0%	73.3%	6.7%	0.0%	100.0%
WETHE	41.2%	58.8%	0.0%	0.0%	100.0%
UNKNOWN	0.0%	0.0%	0.0%	100.0%	100.0%
UNKNOWI	0.0%	0.0%	0.0%	100.0%	100.0%
UNKNC	0.0%	0.0%	0.0%	100.0%	100.0%
<b>Total #CIP on 4/28/</b>	<b>1202</b>	<b>1232</b>	<b>22</b>	<b>41</b>	<b>2497</b>
<b>Total %CIP on 4/28/</b>	<b>48.1%</b>	<b>49.3%</b>	<b>0.9%</b>	<b>1.6%</b>	<b>100.0%</b>