

**CONNECTICUT STATE DEPARTMENT OF EDUCATION**  
**Connecticut Technical Education and Career System**

**RFP for the Provision of Athletic Trainer Services**

**RFP # 19SDE0001**

Connecticut State Department of Education

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**DR. DIANNA R. WENTZELL  
COMMISSIONER OF EDUCATION**

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# Contents

<b>Part I. General Information</b> .....	<b>1</b>
Purpose.....	1
Background.....	1
Schools Subject to this RFP.....	2
Abbreviations/Acronyms/Definitions.....	3
Official Contact.....	3
<b>Part II: CTECS Overview</b> .....	<b>4</b>
<b>Part III: High School Athletic Trainer Services Overview</b> .....	<b>4</b>
Description.....	4
Athletic Offerings.....	4
Population Served.....	5
Services: Duties of Athletic Trainers.....	5
Collaborations.....	6
<b>Part IV: Eligibility Requirements</b> .....	<b>6</b>
Eligible Proposers.....	6
<b>Part V: Proposal Information</b> .....	<b>7</b>
Inquiry Procedures.....	7
RFP Conference.....	7
Procurement Schedule.....	7
Proposal Due Date and Time.....	7
Declaration of Confidential Information.....	8
Conflict of Interest Disclosure Statement.....	8
<b>Part VI: Proposal Format</b> .....	<b>9</b>
Proposal/Application Format.....	9
Cover Sheet.....	9
Table of Contents.....	9
Style Requirements.....	9
Attachments.....	9
Pagination.....	9
Packaging and Labeling Requirements.....	9
Executive Summary.....	9
Applicant Organizational Requirements and Profile.....	10
Service Requirements Scope of Service.....	10
Implementation Plan.....	11
Quality Assurance Plan.....	11
Fee Schedule.....	11
Medicaid and Insurance.....	11
<b>Part VII: Evaluation of Proposals</b> .....	<b>11</b>
Screening Committee.....	11
Evaluation Criteria and Weights.....	11
Proposer Selection.....	12
Debriefing.....	12
Contract Execution.....	12
Contract Contingent on Adequate Funding.....	12
<b>Review Rubric</b> .....	<b>13</b>

Criteria-A ..... 13

**Appendix A Cover Pages..... 15**

Cover Page (A) .....15

Cover Page (B) ..... 15

**Appendix B: Affirmative Action Plan ..... 19**

## Part I: General Information

### Purpose

The Connecticut Technical Education and Career System (CTECS) Athletics program is designed to complement the High School experience offered in our schools. The program strives to meet high standards of sportsmanship, responsibility, dedication and devotion to the sport, school, family and community. Teamwork, leadership and skill development are stressed. The CTECS is committed to promoting the health and safety of our student athletes.

The CTECS is seeking proposals to provide athletic trainer services to students attending the seventeen regional technical high schools located throughout the State. The intent is to insure the health and safety of our approximately 3200 student athletes.

### Background

According to Centers for Disease Control and Prevention (CDC), U.S. emergency departments (EDs) treat an estimated 173,285 sports and recreation related concussions and other brain injuries among children and adolescents, from birth to 19 years annually<sup>1</sup>. The overall incidence of sports-related concussions is estimated at 1.6 million to 3.8 million per year in the U.S.; however, this number is likely higher as concussions frequently go unrecognized and untreated.<sup>2</sup> Repeat concussion, without recovery between, increases likelihood of long-term impairment.<sup>3</sup>

In response to the growing recognition of the danger of concussion, the Connecticut General Assembly passed several pieces of legislation pertaining to school athletics. Public Act 10-62, An Act Concerning Student Athletes and Concussions, requires coaches to participate in training on the recognition of the symptoms concussion, the means of obtaining proper medical treatment for suspected concussion, the nature and risk of concussion, including the danger of continuing to play after sustaining a concussion and planning for return-to-play. Following this initial training, an annual refresher course is required in order to maintain coaching certification. In addition, coaches are required to immediately remove a student athlete from participating in intramural or interscholastic athletic activities who exhibits signs, symptoms or behaviors consistent with a concussion following an observed or suspected blow to the head or body, or is diagnosed with a concussion, regardless of when such concussion may have occurred. Written clearance from a licensed health care professional trained in the evaluation and management of concussions is required for the student to return-to-play<sup>4</sup>.

In 2014, additional concussion prevention and management provisions were passed. Public Act 14-66, An Act Concerning Youth Athletics and Concussions, requires schools to collect and report data to the State Board of Education on all occurrences of concussions, including

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<sup>1</sup> Centers for Disease Control and Prevention (2011) <http://www.cdc.gov/concussion/sports/facts.html>

<sup>2</sup> Langolis J, Rutland-Brown W, Wald M. The epidemiology and impact of traumatic brain injury: A brief overview. *J Head Trauma Rehabil* 2006;21:375-378

<sup>3</sup> Centers for Disease Control and Prevention (2012) Injury Prevention & Control: Traumatic Brain Injury. <http://www.cdc.gov/concussion/sports/response.html>

<sup>4</sup> CGS Public Act 10-62 <http://www.cga.ct.gov/2010/ACT/PA/2010PA-00062-R00SB-00456-PA.htm>

concussions sustained outside of school activities. In addition, this Public Act requires schools to implement a concussion education plan for student athletes and their parents. Parents and guardians of student athletes must sign an informed consent pertaining to concussions prior to their child participating in any intermural or athletic offering involving physical activity<sup>5</sup>.

Finally, Public Act 14-93, An Act Concerning Sudden Cardiac Arrest Prevention requires coaches to be trained in the warning signs and symptoms associated with a sudden cardiac arrest, the risks associated with continuing to engage in physical activity after exhibiting such warning signs and symptoms, the means of obtaining proper medical treatment for a person suspected of experiencing a sudden cardiac arrest, and the proper method of allowing a student who has experienced a sudden cardiac arrest to return to athletic activities. Following the initial training, an annual refresher course is required to maintain coaching certification. Public Act 14-93 requires parents and guardians of student athletes to sign an informed consent pertaining to sudden cardiac arrest prior to their child participating in any intermural or athletic offering involving physical activity<sup>6</sup>.

Athletic training services are an important component in the prevention and management of many types of sport-related injury including head injury, as well as, the prevention and management of conditions that might lead to sudden cardiac arrest. Baseline and post-concussion assessment and cognitive testing are useful tools in the diagnosis and management of concussions.

## **Schools Subject to this RFP**

The CSDE is seeking proposals for athletic training services for the following schools:

- Abbott Technical High School (THS), Danbury
- Bullard-Havens THS, Bridgeport
- Cheney THS, Manchester
- Ellis THS, Danielson
- Goodwin THS, New Britain
- Grasso THS, Groton
- Kaynor THS, Waterbury
- Norwich THS, Norwich
- O'Brien THS, Ansonia
- Platt THS, Milford
- Prince THS, Hartford
- Vinal THS, Middletown
- Whitney THS, Hamden
- Wilcox THS, Meriden
- Windham THS, Willimantic
- Wolcott THS, Torrington
- Wright THS, Stamford

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<sup>5</sup>CGS Public Act 14-66 <http://www.cga.ct.gov/2014/act/pa/pdf/2014PA-00066-R00HB-05113-PA.pdf>

<sup>6</sup>CGS Public Act 14-93 <http://www.cga.ct.gov/2014/act/pa/2014PA-00093-R00SB-00229-PA.htm>

## Abbreviations/Acronyms/Definitions

CAT	Certified Athletic Trainer
CDC	Centers for Disease Control and Prevention
CGS	Connecticut General Statutes
CHRO	Commission on Human Rights and Opportunities
CTECS	Connecticut Technical Education and Career System
CSBE	Connecticut State Board of Education
CSDE	Connecticut State Department of Education
DAS	Department of Administrative Services
DPH	Department of Public Health
FERPA	Family Educational Rights and Privacy Act
HIPAA	The Health Insurance Portability and Accountability Act of 1996 (HIPAA)
PSA	Personal Service Agreement
RFP	Request for Proposal
SEEC	State Elections Enforcement Commission
THS	Technical High School

- Authorized Official: the individual empowered to submit a binding offer on behalf of the proposer to provide services in accordance with the terms and provisions in this RFP and any amendments or attachments hereto.
- Contractor: the provider organization that enters into a PSA contract with the CSBE as a result of this RFP.
- Contact Person: the individual who can provide additional information about the proposal or who has immediate responsibility for the proposal.
- Legal Name: the name of the provider organization.
- Proposer: a provider organization that has submitted a proposal to the CSDE in response to this RFP.
- Subcontractor: an individual (other than an employee of the contractor) of business entity hired by a contractor to provide a specific health or human service as part of a PSA contact with the CSDE as a result of this RFP.
- The Department: The CSDE.

## Official Contact for the CTECS

**Name:**

Darlene Kirychuk

**Title:**

Supervising Nurse Consultant

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## Part II: CTECS Overview

The CSDE operates the CTECS which is comprised of seventeen technical high schools, one technical education center and two aviation maintenance technician training facilities for adults and serves over 10,500 students from communities across the state.

The mission of the CTECS is to provide a unique and rigorous high-school-learning environment that:

- ensures both student academic success, and trade/technology mastery and instills a zest for lifelong learning
- prepares students for post-secondary education, including apprenticeships and immediate productive employment
- responds to employers' and industries' current, emerging and changing global workforce needs and expectations through business/school partnerships

The athletic program focuses on teamwork, leadership and skill development and is consistent with the mission of the CSDE.

## Part III: High School Athletic Trainer Services Overview

### Description

The Certified Athletic Trainer (CAT) is an allied health professional who has a bachelor's degree from an accredited college or university and has fulfilled the requirements established by the National Athletic Trainers' Board of Certification (NATABOC). The CAT works under the direction of a physician to provide healthcare to student athletes and is trained in the prevention, recognition, rehabilitation, treatment and management of injuries as well as in nutritional and psychological counseling<sup>7</sup>.

### Athletic Offerings:

Individual CSDE schools may offer any combination of boys' and girls' sports teams at a variety of levels (levels vary by school) including, but not limited to:

- Cross Country
- Basketball
- Baseball
- Cheerleading
- Volleyball
- Golf
- Wrestling
- Softball
- Soccer
- Dance Team

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<sup>7</sup> National Athletic Trainers' Association (2002) Position Proposal Guide for Certified Athletic Trainers in Secondary School Athletics Programs <http://www.nata.org/sites/default/files/position-proposal-guide-for-certified-athletic-trainers-in-secondary-school-athletics-programs.pdf>

- Track and Field
- Lacrosse
- Football

For more information on athletic offerings at a particular school please visit the school’s website or email the official contact.

## Population Served

The CTECS schools are regional schools (grade 9-12), each drawing from the surrounding communities.

Approximate number of student athletes per school is shown in the table below. Unique athletes are students who play only one sport. Total athletes are the total number of students participating in sports at school.

School	Location	Unique Athletes	Total Athletes
Abbott THS	Danbury	175	216
Bullard-Havens THS	Bridgeport	156	155
Cheney THS	Manchester	221	237*
Ellis THS	Danielson	188*	237*
Goodwin THS	New Britain	188*	237*
Grasso THS	Groton	177	245
Kaynor THS	Waterbury	170	235
Norwich THS	Norwich	195	255
O’Brien THS	Ansonia	112	124
Platt THS	Milford	275	399
Prince THS	Hartford	325	435
Vinal THS	Middletown	129	151
Whitney THS	Hamden	101	120
Wilcox THS	Meriden	262	320
Windham THS	Willimantic	164	221
Wolcott THS	Torrington	172	214
Wright THS	Stamford	TBD	TBD
<b>Total</b>	<b>Districtwide</b>	<b>3010</b>	<b>3801</b>

\*estimated

For more information on student demographics please email the official contact.

## Services: Part A: Duties of Athletic Trainers<sup>8</sup>

- Provide “athletic training services” and “athlete centered care” to student athletes under the direction of the contractor’s physician and in accordance with the State Athletic Training Practice Act.
- Maintain appropriate general treatment orders to be reviewed annually and approved by the contractor’s physician.
- Develop and implement a comprehensive emergency action plan.
- Collaborate with the district supervising nurse and the district medical advisor on safe return-to-practice and play in accordance with state statutes and district policy; implementing the return-to-play process.

<sup>8</sup> Inter-Association Consensus Statement on Best Practices for Sports Medicine Management for secondary Schools and Colleges. Journal of Athletic Training 2014;49(1):128–137. doi: 10.4085/1062-6050-49.1.06; and the National Athletic Trainers’ Association, Inc. [www.natajournals.org](http://www.natajournals.org). <http://www.nata.org/sites/default/files/SportsMedicineManagement.pdf>

- Provide guidance on the selection, fit, function and maintenance of all athletic equipment to the school athletic director and district nursing supervisor as needed.
- Maintain accurate records on athletes with injury or illness in accordance with HIPAA and FERPA requirements.
- Review the design and implementation of strength and conditioning programs for safety and appropriateness.
- Communicate with coaches and the school nurse regarding ill or injured players and return-to-play plans in accordance with HIPAA and FERPA and district policy.
- Communicate with parents and guardians as appropriate about an ill or injured student's status.
- Educate coaches, students and parents on injury prevention and management, including, but not limited to, concussion and sudden cardiac arrest.
- Prevent, recognize, refer, treat, facilitate and monitor the rehabilitation of injuries.
- Follow district policy for incident reporting.
- Provide athletic training coverage for home competitions for the following sports at all levels (girls' and boys' freshman, junior varsity and varsity teams):
  - Football
  - Soccer
  - Basketball
  - Baseball
  - Wrestling
  - Soccer
  - Track and Field
  - Lacrosse
- Provide consultative services to coaches and student athletes participants

### **Collaborations**

The CAT will work collaboratively with school athletic directors, coaches, principals, school nurses and families to address the needs of students, the team and the athletic program.

## **Part IV: Eligibility Requirements**

### **Eligible Proposers**

An eligible proposer is a provider organization who has a presence in one or more of the communities serviced by the CTECS in which the proposer is intending to provide services. Proposers must also agree to conduct a background check on all program personnel who will work with students. It is the proposer's responsibility to comply with all applicable state and federal regulations and licensing requirements and meet OSHA, FERPA and HIPAA standards.

All proposers must demonstrate sufficient resources to meet the needs of the schools they intend to serve.

## Part V: Proposal Information

### Inquiry Procedures:

All questions regarding this RFP or a CTECS must be submitted in writing by e-mail to the official contact before the deadline specified in the procurement schedule. Questions submitted by e-mail must indicate in the subject line: RFP #19SDE0001. Phone inquiries will not be accepted.

### RFP Conference

An RFP conference will not be held.

### Procurement Schedule

The schedule for the RFP is as follows:

- August 31, 2018 - RFP Released
- September 7, 2018 - Deadline for Questions
- September 10, 2018 - Answers Released
- September 13, 2018 by 4:00 p.m. - Proposals Due
- September 19, 2018 - Anticipated Proposer Selection
- October 1, 2018 – Anticipated Start of Contract

### Proposal Due Date and Time

The Official Contact is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be received by the Official Contact on or before the due date and time.

Faxed or e-mailed proposals will not be evaluated. If hand-delivering proposals by courier, or in person, please allow extra time to enter the building due to security procedures. The Department will not accept a postmark date as the basis for meeting submission due date and time. Proposals received after the due date and time may be accepted by the CSDE as a clerical function, but late proposals will not be evaluated.

An acceptable submission must include the following:

- One (1) original unbound proposal (marked as original);
- Three (3) conforming unbound copies (marked as copy) of the original proposal and,
- One (1) conforming electronic copy of the original proposal.

**The original proposal must carry original signatures and be clearly marked on the cover as “Original”. Unsigned proposals will not be evaluated.** The original proposal and each conforming copy of the proposal must be complete, properly formatted and outlined and ready for evaluation by the Screening Committee.

The electronic copy of the proposal must be compatible with **Microsoft Office Word 2010**. For the electronic copy, required forms and appendices may be scanned and submitted in Portable Document Format (PDF) or similar file format.

### **Declaration of Confidential Information**

Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), CGS Section 1-200 et seq., and all rules, regulations and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL.

In section VII of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of: (a) the prospective harm to the competitive position of the proposer that would result if the identified information were released; and, (b) the reasons why the information is legally exempt from release pursuant to CGS Section 1-210(b).

### **Conflict of Interest Disclosure Statement:**

Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by CGS Section 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including elected official) or state employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Department will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State.

**In absence of a conflict of interest, a proposer must affirm such in the disclosure statement. Example: “[name of proposer] has no current business relationship (within the last three [3] years] that poses a conflict of interest, as defined by CGS Section 1-85”).**

## Part VI: Proposal Format

### Proposal/Application Format:

THE FOLLOWING FORMAT IS REQUIRED FOR ALL PROPOSALS. **All proposals must follow the required outline. For each school the proposer seeks to provide services for, the proposer must include within their proposal a separate section for each school that defines what services and rates apply to each school.**

#### 1. Cover Sheet

The format for the cover sheet appears on page 19 of this document. The cover sheet must be signed by an authorized official of the agency.

#### 2. Table of Contents

All proposals must contain a table of contents.

#### 3. Style Requirements

Submitted proposals must conform to the following specifications:

- Binding type: Unbound, but fastened with binder clips
- Dividers: None specified
- Paper size: 8.5" x 11"
- Page Limit: see below
- Print style: 2-sided
- Font size: 12-point type
- Font Type: Times New Roman, Arial, Veranda or Calibri
- Margins: 0.5" top, bottom, left and right margins
- Line Spacing: 1.5 line spacing

#### 4. Attachments

Attachments other than the required Appendices or required Forms are not permitted and will not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance or replace any component required of the RFP. Failure to abide by these instructions will result in disqualification.

#### 5. Pagination

The proposer's name (e.g., agency or organization name) must be displayed in the header of each page. All pages excluding the Appendices and Forms must be clearly and consecutively numbered at the bottom center of each page.

#### 6. Packaging and Labeling Requirements

All proposals must be submitted in sealed envelopes or packages and addressed to the Official Contact. The legal name and address of the proposer must appear in the upper left corner of the envelope or package. The RFP Name and Number must be clearly displayed on the envelope or package.

Any received proposal that does not conform to these packaging or labeling instructions will be opened as general mail. Such a proposal may be accepted by the agency as a clerical function, but it will not be evaluated.

#### 7. Executive Summary (two-page limit)

Proposals must include a high-level executive summary of the main proposal.  
Declaration of Confidential Information (if applicable).

**8. Applicant Organizational Requirements and Profile** (Two-page limit for each part submitted).

**Part A**

In a narrative format, describe your organization's ability and experience in the following areas (one-page limit):

- Providing “athletic training services” and “athlete centered care” to student athletes under the direction of the contractor’s physician and in accordance with the State Athletic Training Practice Act for multiple locations.
- Managing and supervising staff in multiple locations.
- Providing professional development and monitoring credentialing to the Athletic Training staff.
- Developing return-to-play plans.
- Providing guidance on the selection, fit, function and maintenance of athletic equipment.
- Maintaining accurate records on student athletes.
- Evaluating the design and implementation of strength and conditioning program.
- Educating coaches, students and parents on injury prevention and management.
- Preventing, recognizing, treating, facilitating and monitoring the rehabilitation of injuries.

**9. Service Requirements—Scope of Service** (three-page limit )

- Provide an overview of services to be provided.
- Describe how services to be provided align with National Athletic Trainers’ Association recommendations, CIAC recommendations and best practices.
- Describe your plan for providing CAT coverage to multiple schools for home games.
- Describe your plan for providing office hours available to all student athletes.
- Describe your plan for providing substitute CAT coverage if the assigned trainer is unavailable.
- Describe your plan for providing service to home games running concurrently in the same school.
- Identify the medical director overseeing athletic training services; include the medical director’s credentials.
- Describe how you will communicate/collaborate with key stakeholders (students, parents, administrators, coaches, athletic director, school nurse, and other health care providers).
- Describe your procedure for documenting injuries/concerns and your procedure for communicating the information to school staff with a need to know.
- Describe how you will facilitate care of injured students outside of school hours.

**10. Implementation Plan** (one-page maximum each part submitted)

Describe the timeline implementation of services.

- Identify timeline for implementation of services.
- Plan for staff training and maintaining clinical and cultural competencies.

**11. Quality Assurance Plan** (two-page maximum each part submitted)

- Identify a plan to measure and improve quality that addresses the outcomes of services to be provided.
- Identify a plan to measure student and parental satisfaction.
- Identify a plan to identify opportunities for improvement.
- Identify actions that will be taken to resolve identified problems and improve quality of care to be provided.

**12. Fee Schedule** (two-page maximum for each part submitted)

Provide a fee schedule for:

- all services to be provided,
- office hours,
- covering concurrent home games,
- covering back-to-back games home (i.e. Junior Varsity and Varsity basketball games), and
- other related service

**13. Medicaid and Insurance** (one-page maximum for each part submitted):

Describe your plan for participation in Medicaid and contracting with insurance providers.

## **Part VII: Evaluation of Proposals**

It is the intent of the Department to conduct a comprehensive, fair and impartial evaluation of proposals received in response to this RFP.

**1. Screening Committee:**

The Department will designate a Screening Committee to evaluate proposals submitted in response to this RFP. The contents of all submitted proposals including any confidential information will be shared with the Screening Committee. Attempts by any proposer (or representative of any proposer) to contact or influence any member of the Screening Committee may result in disqualification of the proposer.

**2. Evaluation Criteria and Weights**

- Organizational Requirements and Profile (20)
- Service Requirements—Scope of Service (20)
- Implementation Plan—(10)

- Quality Assurance Plan (10)
- Fee Schedule (20)
- Medicaid and Insurance (10)
- Schools to be serviced, 1 point for each school (17)

Note: As part of its evaluation of the Staffing Plan, the Screening Committee will consider the proposer's demonstrated commitment to affirmative action, as required by Regulations of Connecticut State Agencies 46A-68j-30(10).

### **3. Proposer Selection**

Upon completing its evaluation of proposals the Screening Committee will submit the rankings of all proposals to the Superintendent. The final selection of a successful proposer is at the discretion of the Superintendent. Any proposer selected will be so notified and awarded an opportunity to negotiate a contract with the Department. Such negotiations may, but will not automatically, result in a PSA contract. Pursuant to Governor M. Jodi Rell's Executive Order No. 3, any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at the Department's discretion, about the outcome of the evaluation and proposer selection process.

### **4. Debriefing**

Within ten (10) days of receiving notification from the Department, unsuccessful proposers may contact the Official Contact and request information about the evaluation and the proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days.

### **5. Contract Execution**

Any PSA contract developed and executed as a result of this RFP is subject to the Department's contracting procedures, which includes approval by the Office of the Attorney General.

### **6. Contract Contingent on Adequate Funding**

Any PSA contract developed and the execution of a PSA contract is contingent on adequate funding.

**Review Rubric RFP #19SDE0001**

**Criteria**

Proposer:

	Possible Points	Points Scored
<p><b>Organizational Profile</b> - The extent to which the proposer has <u>demonstrated experience and ability</u> in the following areas:</p> <ul style="list-style-type: none"> <li>• Providing “athletic training services” and “athlete centered care” to student athletes under the direction of the contractor’s physician and in accordance with the state athletic training practice act for multiple locations</li> <li>• Managing and supervising staff in multiple locations Providing professional development to and monitoring credentialing of Athletic Training staff</li> <li>• Developing return-to-play plans</li> <li>• Providing guidance on the selection, fit, function and maintenance of athletic equipment</li> <li>• Maintaining accurate records on student athletes</li> <li>• Evaluating the design and implementation of strength and conditioning programs</li> <li>• Educating coaches, students and parents on injury prevention and management</li> <li>• Preventing, recognizing, treating, facilitating and monitoring the rehabilitation of injuries</li> </ul>	20	
<p><b>Services Requirements - Scope of Service</b> - The extent to which the proposer has provided and/or demonstrated:</p> <ul style="list-style-type: none"> <li>• An overview of services to be provided</li> <li>• How services to be provided align with National Athletic Trainers’ Association recommendations, CIAC recommendations and best practices</li> <li>• A plan for providing CAT coverage to multiple schools for home games</li> <li>• A plan for providing office hours available to all student athletes</li> <li>• A plan for providing substitute CAT coverage if the assigned trainer is unavailable</li> <li>• A plan for providing service to home games running concurrently in the same school</li> <li>• The name of the medical director overseeing athletic training services; including the medical director’s credentials</li> <li>• A plan for communicating/collaborating with key stakeholders (students, parents, administrators, coaches, athletic director, school nurse, and other health care providers)</li> <li>• A procedure for documenting injuries/concerns and your procedure for communicating the information to school staff with a need to know</li> <li>• A plan for facilitating care of injured students outside of regular school hours</li> </ul>	20	
<p><b>Implementation Plan</b> - The extent to which the applicant has demonstrated:</p> <ul style="list-style-type: none"> <li>• The timeline implementation of services</li> <li>• Plan for staff training and maintaining clinical and cultural competencies</li> </ul>	10	
<p><b>Quality Assurance</b> - The extent to which the applicant has demonstrated:</p> <ul style="list-style-type: none"> <li>• A plan to measure and improve quality that addresses the outcomes of services to be provided</li> <li>• A plan to measure student and parent satisfaction</li> <li>• A plan to identify opportunities for improvement</li> <li>• Actions that will be taken to resolve identified problems and improve quality of care to be provided</li> </ul>	10	
<p><b>Fee Schedule</b> - The proposer has provided a fee schedule <u>that is comparable or better than that of other providers</u> for the following services:</p>	20	

<p>All services to be provided including:</p> <ul style="list-style-type: none"> <li>• Office hours</li> <li>• Covering concurrent home games in the same school</li> <li>• Covering back-to-back home games (i.e. Junior Varsity and Varsity basketball games) in the same school</li> <li>• Other related services</li> </ul>		
<p><b>Medicaid and Insurance</b> - The extent to which the proposer has provided and/or demonstrated: Plan for participation in Medicaid and contracting with insurance providers.</p>	10	
<p><b>Printed Name of Reviewer:</b> <b>Date:</b></p>	<p>Total Possible: <b>110</b></p>	<p>Points Earned</p>

Signature of Reviewer: \_\_\_\_\_

## Appendix A: Cover Pages

### Connecticut State Department of Education Connecticut Technical Education and Career System

RFP #19SDE0001

#### COVER PAGE A

This proposal is to provide services to the following schools :

- Abbott Technical High School (THS), Danbury
- Bullard-Havens THS, Bridgeport
- Cheney THS, Manchester
- Ellis THS, Danielson
- Goodwin THS, New Britain
- Grasso THS, Groton
- Kaynor THS, Waterbury
- Norwich THS, Norwich
- O'Brien THS, Ansonia
- Platt THS, Milford
- Prince THS, Hartford
- Vinal THS, Middletown
- Whitney THS, Hamden
- Wilcox THS, Meriden
- Windham THS, Willimantic
- Wolcott THS, Torrington
- Wright THS, Stamford

Name of Proposer (Program)

Program Address

Contact Name

Contact Address

Contact E-mail Address

Contact Phone

List all sites (and site addresses) that the proposer currently provides services in (may attach a separate sheet immediately following this cover page).

Separate sheet attached

1. School or Facility Name  
Town
2. School or Facility Name  
Town
3. School or Facility Name  
Town
4. School or Facility Name  
Town
5. School or Facility Name  
Town
6. School or Facility Name  
Town
7. School or Facility Name  
Town
8. School or Facility Name  
Town
9. School or Facility Name  
Town
10. School or Facility Name  
Town

(Please include school districts you currently provide services to, in addition to any sports medicine facilities with which you are affiliated.)

Proposer:

**I hereby certify that the information contained in this application is true and accurate to the best of my knowledge and belief.**

---

**Signature of Authorized Official**

---

**Date**

Name Authorized Official:

Title:

**Connecticut State Department of Education  
Connecticut Technical Education and Career System  
RFP #19SDE0001**

**COVER PAGE B**

<p>This proposal is to provide services to the following schools:</p>	<input type="checkbox"/> Abbott Technical High School (THS), Danbury <input type="checkbox"/> Bullard-Havens THS, Bridgeport <input type="checkbox"/> Cheney THS, Manchester <input type="checkbox"/> Ellis THS, Danielson <input type="checkbox"/> Goodwin THS, New Britain <input type="checkbox"/> Grasso THS, Groton <input type="checkbox"/> Kaynor THS, Waterbury <input type="checkbox"/> Norwich THS, Norwich <input type="checkbox"/> O'Brien THS, Ansonia <input type="checkbox"/> Platt THS, Milford <input type="checkbox"/> Prince THS, Hartford <input type="checkbox"/> Vinal THS, Middletown <input type="checkbox"/> Whitney THS, Hamden <input type="checkbox"/> Wilcox THS, Meriden <input type="checkbox"/> Windham THS, Willimantic <input type="checkbox"/> Wolcott THS, Torrington <input type="checkbox"/> Wright THS, Stamford
Name of Proposer (Program)	
Program Address	
Contact Name	
Contact Address	
Contact E-mail Address	
Contact Phone	

List all sites (and site addresses) that the proposer currently provides services in (may attach a separate sheet immediately following this cover page).

Separate sheet attached

1. School or Facility Name  
Town
2. School or Facility Name  
Town
3. School or Facility Name  
Town
4. School or Facility Name  
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Town
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Town
7. School or Facility Name  
Town
8. School or Facility Name  
Town
9. School or Facility Name  
Town
10. School or Facility Name  
Town

(Please include school districts you currently provide services to, in addition to any sports medicine facilities with which you are affiliated).

Proposer:

**I hereby certify that the information contained in this application is true and accurate to the best of my knowledge and belief.**

---

**Signature of Authorized Official**

---

**Date**

Name Authorized Official:

Title:

**Appendix B: Affirmative Action Plan**

**CERTIFICATION THAT A CURRENT  
AFFIRMATIVE ACTION PLAN IS ON FILE**

I, the undersigned authorized official; hereby certify that the current Affirmative Action Plan of the applying organization/agency is on file with the Connecticut State Department of Education. The Affirmative Action Plan is, by reference, part of this application.

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Signature of Authorized Official

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Date

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Print Name of Authorized Official: