

**U.S. Department of Homeland Security  
Office of Health Security**

**Request For Information 70RWMD23RFI00000009  
DHS Child Well-Being Program**

## **1.0 GENERAL**

THIS IS A REQUEST FOR INFORMATION ONLY. This Request for Information (RFI) notice is issued solely for the purpose of conducting market research in accordance with Federal Acquisition Regulation (FAR) Part 10 and does not constitute an Invitation for Bids, Request for Proposal, or Request for Quotations. No solicitation is being issued at this time and the Government makes no assertion that a solicitation will be issued. In accordance with FAR 15.201(e), responses to this notice are not offers and cannot be accepted by the Government to form a binding contract, nor do they affect a potential offeror's ability to respond to any future synopsis/solicitation, which may or may not follow or restrict the U.S. Government's eventual acquisition approach. This RFI does not constitute a commitment, implied or otherwise, that the U.S. Department of Homeland Security – Office of Health Security will take procurement action in this matter. Further, the Government will not be responsible for any cost incurred in furnishing this information.

## **2.0 BACKGROUND**

The U.S. Department of Homeland Security (DHS) Office of Health Security (OHS) is the principal medical, workforce health and safety and public health authority for DHS. The OHS is responsible for promoting a healthier and safer workforce, ensuring a robust health security posture, and providing appropriate and timely oversight and operational support related to the medical care for those in the care of the Department. The OHS Healthcare Systems and Oversight Directorate implements programs that train, unify, integrate, and standardize quality healthcare for those in DHS care while ensuring appropriate oversight.

## **3.0 SCOPE OF WORK**

The DHS OHS intends to complete one contractual award to provide the resources and personnel to support execution of the DHS Child Well-Being Program (CWP). The CWP provides trained child well-being professionals to strengthen the care and protection of children in custody of the DHS between the time of encounter and transfer to a long-term care facility (generally the first 72 hours post-encounter). The program will augment existing resources and current services by providing structured programmatic support, clinical services, and technical guidance with the sole focus of ensuring the well-being of children in custody. The program will be implemented by oversight and contractual management provided by OHS, and operationally integrated with U.S. Customs and Border Protection (CBP) personnel and facilities.

The professionals supporting the CWP will be complementary to U.S. Border Patrol (USBP) Agents, Processing Coordinators, Caregivers, and medical staff with the sole focus of child well-being. The Child Well-Being Professionals will regularly engage with children, provide coordination of care and escalation of issues related to well-being, and have the flexibility to provide interventions when required in surge or crisis state. In addition, the Child Well-Being

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Professionals will be integrated into daily operations with a daily presence in facilities, support tactical and operational execution of processes, and serve as the child well-being resource to staff in the field.

The Contractor shall furnish the necessary personnel, equipment, and materials to provide support for the task areas detailed in section 4.0 below.

#### **4.0 REQUIREMENTS**

The Contractor shall provide a Program Manager, Supervisory Child Well-Being Professionals and Field Child Well-Being Professionals. These staff will be responsible for the following tasks:

##### **4.1 Steady State Operations for Child Wellbeing**

The contractor shall provide 24/7 frontline personnel who, under the direction of the Department of Homeland Security, provide the necessary support, advisement, and direct engagement to ensure the well-being of children in DHS custody. The Child Well-Being Professionals are distinct but complementary to the USBP Agents, Processing Coordinators, Caregivers, and medical staff with the sole focus of child well-being.

The contractor shall provide at least two individuals per location, per shift, to engage with children, provide coordination of care and escalation of issues related to well-being, and have the flexibility to provide interventions when required in surge or crisis state including the following tasks:

- The Contractor shall be on call in each facility to provide support through professional opinions, technical expertise, and technical assistance regarding child wellbeing and trauma informed care to DHS staff.
- The Contractor shall work across stakeholder groups to ensure once trauma-informed care and activities are appropriately implemented they are sustained and modified if needed, to promote integration with the operational mission.
- The Contractor shall engage with children to support their well-being including identification of children in distress, conducting psychiatric triage, when needed.
- The Contractor shall coordinate seamless referral of children to community behavioral or physical health providers, if necessary.
- The Contractor shall assist in the coordination of care for children at the request of CBP facilities leadership, including direct support to Supervisors, Agents, Medical Staff, and Caregivers in handling children who have special needs or ongoing physical, mental, or behavioral health concerns.
- The Contractor shall serve as a daily resource to DHS staff through escalating a child's identified psychosocial needs and providing direct care to children in crisis.
- The Contractor shall facilitate connection across all the existing services within the facility to support the well-being of children.
- The Contractor shall assist in the documentation and information transfer for individual cases, upon request from Sector and Facility leadership, due to the

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complex requirements for special placements with HHS and other downstream partners.

- The Contractor shall provide regular information regarding child wellbeing during musters or other regular staff meetings at the facility level.
- The Contractor shall conduct environmental scans of the facilities to recommend and implement appropriate and operationally feasible measures are taken to create a child friendly environment.

#### 4.2 Training Development and Deployment

The Contractor shall provide education for their own deployed Child Well-Being Professionals on a continuous basis to increase staff awareness of priorities, processes, protocols, and frameworks that underpin their role.

The Contractor shall design, deliver, and continuously evaluate training programs including: (1) short roll call or on-demand instruction on recognizing psychological distress (2) ensuring a safe and productive environment for children (3) standardize caregiver training that embodies trauma-informed principles (4) screening for behavioral health issues for CBP law enforcement, federal or contracted medical providers and other personnel.

The Contractor shall have dedicated staff on site to provides on-going formal, informal, and ad hoc child well-being trainings and educational information to relevant staff.

#### 4.3 Technical Expertise and Continuous Process Improvement in Children's Well-Being and Trauma Informed Care

The Contractor shall provide the necessary programmatic and technical expertise to support OHS and CBP in the development of plans, policies, protocols, and standards as part of child well-being program implementation.

The Contractor shall periodically review current plans, policies, protocols, and standards to promote the implementation of best practices in the trauma informed engagement of children, including application of recent guidance from child wellbeing organizations and medical societies such as the American Academy of Pediatrics.

The Contractor shall serve as the main point of contact for facility staff for all matters related to child well-being.

The Contractor shall identify opportunities for continuous improvement based on quantitative data collection of process metrics as well as qualitative input and feedback from facility staff

The contractor shall assess development of protocols and processes and ensure no increase to time in custody and present them to DHS leadership for consideration and approval prior to implementation.

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The Contractor shall implement child trauma reducing interventions once approval has been received from DHS leadership.

#### 4.4 Surge Response Capability for Acute Mass Migration Events

The Contractor shall provide surge personnel who can be deployed within 48 hours of notification to the U.S. Southern Border for either an acute mass migration event or to augment the steady-state tasks described in section 4.1. The contractor shall work collaboratively to assist in the development and operational execution of processes.

This surge capacity capability shall be based on the volumes of migrants, but all staff must meet the following requirements listed below in Section 5.0.

The surge capacity capability should be prepared to be self-sufficient (including ability to rapidly secure lodging and transportation) upon activation and sufficiently trained to immediately begin child well-being-focused operations in coordination with OHS and CBP and upon arrival at the designated locations.

#### 4.5 Translation Services

While all deployed staff to accomplish tasks above must be bilingual. The Contractor shall also provide 24/7 access to on-demand and immediate translation services through telephonic or other virtual means for use by child well-being program, OHS, CBP, or other personnel in the course of duties.

#### 4.6 Program Management and Reporting

The contractor shall provide a single program manager to be responsible for the overall administration and management of the Contractor's activities and serve as the primary point of contact for all administrative, financial, and logistical items concerning the contract.

The contractor shall coordinate closely to ensure that operational requirements, gaps, lessons learned, and other considerations are integrated across the entire child well-being program infrastructure.

The contractor shall provide regular guidance to deployed professionals, in addition to directly engaging sector and facility leadership to ensure continuity in care, elimination of duplication of effort, and synchronization of activities across the entire child well-being program operational footprint.

The contractor shall attend all relevant facility staff meetings and provide reports out necessary child well-being information.

The contractor shall report on all activities across deployed staff on a regular basis.

The contractor shall report on the number and utilization of deployed staff on a regular basis.

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The contractor shall provide routine reports of process and outcome metrics to support monitoring and evaluating program success

## **5.0 QUALIFICATIONS REQUIRED**

All staff must meet the eligibility requirements for DHS and CBP suitability determinations.

5.1 The Program Manager should possess the following qualifications:

- A Master's degree in Health Management or equivalent degree program (MPH, MPP, MBA)
- PMP
- 5+ years of experience managing complex and diverse teams
- Experience in managing resources in a health or immigration setting

5.2 The Supervisory Well-being Professionals should possess the following qualifications:

- State licensed and/or certified in one or more of the following specializations:
  - Social Worker (LCSW or LICSW)
  - Counseling, Family Therapy or Counseling Psychology (LPC or those with MS or MA in a directly related field)
- 5+ years working experience post full licensure in child development, culturally competent and trauma-centered care, and performing evaluations in direct engagement with children and their families, with work experience in a clinical or immigration setting strongly preferred
- Bilingual, with Spanish and creole/French strongly preferred due to the language barriers in communicating sensitive topics with minors
- 2+ years management experience leading and supervising staff

5.3 The Field Child Well-Being Professionals should possess the following qualifications:

- Possess a masters or doctoral degree in behavioral health;
- Hold a full, current, and unrestricted license in one of the following or equivalent:
  - Social Worker (LCSW or LICSW)
  - Licensed Marriage and Family Therapist (LMFT)
  - Licensed Professional Counselor (LPC)
  - Doctor level prepared psychologists (LP)
- 2+ years' work experience post-full licensure including work experience in child development, culturally competent and trauma-centered care, and performing evaluations in direct engagement with children and their families, with experience in a clinical or immigration setting strongly preferred
- Bilingual, with Spanish and creole/French strongly preferred due to the language barriers in communicating sensitive topics with minors
- Have experience working in a multidisciplinary team-based environment

## **6.0 PERIOD OF PERFORMANCE**

The contract is intended to be awarded as a base year plus four (4) option years through a time-and-materials (T&M) or hybrid (firm-fixed-price and time-and-materials) structure.

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## **7.0 PLACE OF PERFORMANCE**

The Contractor shall perform the work at domestic locations across the contiguous United States including the U.S. Southern Border and National Capital Region. These locations may include U.S. Government facilities such as those operated by OHS, CBP or other Departments and Agencies engaged in migrant health operations. Additionally, work may be performed at the Contractor's facilities. Along the U.S. Southwest Border, these locations will include facilities and places within the following nine CBP Sectors:

- San Diego
- El Centro
- Yuma
- Tucson
- El Paso
- Big Bend
- Del Rio
- Laredo
- Rio Grande Valley

While individual personnel may be assigned to a designated area of responsibility during steady-state operations, a surge in migration or incident may necessitate deployment of personnel to other areas of responsibility to augment existing resources.

## **8.0 SUBMISSION INSTRUCTIONS**

Sources that have the ability to provide the necessary services in a highly complex and dynamic federal environment are asked to respond to this notice with a capability statement that encompasses both general background information and the technical requirements as outlined in section 4.0 of this RFI. The response will include a cover sheet that includes:

- Company name and address;
- Points of contact including phone numbers and e-mail addresses;
- Company DUNS;
- If your company plans to propose a teaming arrangement, please describe how the arrangement will be structured to include how the work will be divided between your company and the partner company;
- Business Size and Size Standard/ Classification relative to North American Industry Classification System (NAICS) code. If applicable, include whether or not you are a small business; HUBZone small business; service-disabled, veteran-owned small businesses; 8(a) small business; women-owned small business; or small disadvantaged business in order to assist the government in determining the appropriate acquisition method, including whether a set-aside is possible;
- Relevant contract vehicles you currently have, and the contract numbers associated with those vehicles (ex: GSA Schedule 874 GS-00X-1234Z).

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This capability statement shall be a maximum of 5 pages, not including the cover sheet.

Information submitted in response to this notice must be submitted electronically (via email) to the Office for Procurement Operations (OPO) following by following by Friday, March 10, 2023; 2:00 p.m. Eastern Standard Time.

TBD.

CONTACT NAME: Benjamin Simmons

CONTACT EMAIL: benjamin.simmons@hq.dhs.gov

All responses shall be in Adobe Portable Document Format (PDF) and submitted in writing using the following format for the subject of the email (**Response to RFI-NUMBER 70RWMD23RFI00000009**) to the POC email address above. The text font shall be Times New Roman, text size no less than 12- point proportional and single- spaced. When printed, page size shall be 8.5 by 11.0 inches. Use at least 1-inch margins from the page edge to the main text on the top and bottom and ¾ inch side margins.

Telephonic and mail/courier responses will not be accepted. Proprietary information should not be included in the response. Your response to this notice will not be returned.