PROCUREMENT

DATE: October 5, 2016

HSS-16-047

Pilot Sensory Technology Program

for

Division of Services for Aging & Adults with Physical Disabilities

Date Due: **December 8, 2016**
By **11:00AM Local Time**

ADDENDUM # 3 – Questions & Answers

PLEASE NOTE:

THE ATTACHED SHEETS HEREBY BECOME A PART OF THE ABOVE MENTIONED RFP.

1. **What is your expectation for the number of patient participants? Will you be looking to do this pilot with real patient(s) or a non-patient(s)?**
   Because the Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) does not know how much the technologies chosen will cost, we cannot determine the exact number of participants. Once a vendor is chosen, DSAAPD will work with them to determine how many clients will participate in the program. Currently, $150,000 is budgeted towards the program and we expect no more funds will be used for it. The pilot will be for clients of DSAAPD.

2. **Is it your expectation that personal home(s) will be used for the pilot OR do you anticipate the pilot will be conducted in a State facility?**
   Personal home will only be used in the pilot.

3. **If it is personal home(s):**
   a. **How are you planning on choosing the participants?** DSAAPD case managers will determine client eligibility, based on recommendations from the vendor for who is appropriate to use the technology offered.
   b. **If a personal home, what access and use rights will be granted during the pilot?** The vendor will have whatever access to the home that is needed to install the technology offered and remove it when it is no longer needed by the participant or when the pilot program ends. Through the contacting process, use rights and access will be discussed.
   c. **If personal home(s), how many homes will be a part of the pilot?** Again, as discussed in question 1, it is hard to determine the amount of homes because DSAAPD does not know how much the technologies choses will cost. Once a vendor is chosen, DSAAPD will work with them to determine how many clients will participate in the program.

4. **If it is a state facility, do you have one in mind? Where is it? What is its name? How many rooms does it have and how many patients does it support?**
   This question is not applicable to the pilot program.

5. **When you mention the word "alarm," are you thinking of an audible alarm or are you thinking of an email/text (some form of communication) to a caregiver/patient, or both?**
   DSAAPD thinks that both could be a good option for our clients. Audible alarms could work in the home, while an email/text would be appropriate for caregivers that are not in the home.

6. **What is the expected duration of the pilot program?**
   The program will run through the end of August 2018.

7. **As there may be multiple locations in the pilot, is it required to install sensors for all use cases in each location?**
   Locations will be in the clients home, so yes, multiple sensors will be needed.

8. **Who will be the users of the Dashboard / UI (i.e. State of Delaware administrators, doctors, caregiver, family, etc…)?**
The State of Delaware, DSAAPD, will be the user of the Dashboard and depending on the technology, caregivers.

9. **Can you prioritize, in order of importance to you, the 10 use cases listed in the RFP Appendix B under "Automated Prompts and Reminders" and "Safety"? Prioritize them as one grouping**.
   - Devices to monitor daily activity - These are unobtrusive movement sensors that can oversee a person's activity in their home over a period of time. They can sometimes help relatives or community services get a better idea of a person's activity during the day and night. This can allay fears that the person with dementia is not coping well, and may help others to step back and not become too closely involved. Alternatively, it may show that the person needs more assistance and can be used to start discussions about the type of support that may help. An alert can easily be set to tell the person monitoring if something unexpected happens, such as a visitor at an odd time or the person leaving their home in the middle of the night
   - An alarm system - This provides an alert when someone has moved outside a set boundary (e.g. the front lawn).
   - Tracking devices or location monitoring services - These use satellite or mobile phone technology to locate and track the person. The types of devices include watch-based devices, smartphone apps, key rings and pendants. These are generally used when there is a particular risk of the person getting lost or going missing.
   - Telecare systems - Telecare usually refers to a system or devices that remotely monitor people living in their own home, enabling them to access support or response services when necessary. The various pieces of technology are connected via a telephone line or over the internet. Telecare systems can include community alarms, sensors and movement detectors, and video conferencing.
   - Based on a motion sensory, a pre-recorded voice prompts when there is movement nearby. For example, a sensory placed near the front door could remind someone to lock the door, or one in the kitchen could remind someone to turn the oven off.
   - Automatic lights that come on when the person is moving around. They can help to prevent trips and falls.
   - Automated shut-off devices that can stop the gas supply if the gas has been left on, or turn off a cooker if it has been left on.
   - Water isolation devices that can turn off a tap if it is left running, preventing flooding.
   - Set for a certain time, a reminder message is played. For example, someone may record a message reminding them to take their medication or telling them that they have an appointment.
   - Special plugs that allow users to choose a certain water depth in a sink or bath. If the water goes above that level, the plug opens and the water drains. They can also include a heat sensor that changes the color of the plug when it reaches a certain temperature. This can help prevent floods and scalds.

10. Will internet access needed for the technology be provided by the patient or the facility? It is our assumption that internet access is not a part of this RFP, can you please confirm this assumption.

In some cases, clients will have internet access in the homes, in others they will not. DSAAPD, as part of the pilot will pay for internet access if needed for the appropriate technology. Please include this cost in the budget breakdown you are providing.

11. If internet access is not available, will the State of Delaware provide the internet service for the patient?

Please refer to the above answer.

12. Is there a desire from the State to use/incorporate existing patient smartphones into the pilot?

Yes, this is something DSAAPD is looking into. Not all clients and their caregivers will have smartphones, so please include other technologies as well.

13. Would you want a minimum number served in each county?

This has not been determined yet because DSAAPD does not know the amount of clients total that will be served.

14. What is considered a success?

Keeping clients in their homes longer and more safely is the primary goal for this pilot program.

15. If there is a monitoring fee, would it be included?

Yes, please include this in your budget breakdown.

16. What is the vendor responsibility for monitoring costs after the end of the contract?

Once the pilot ends, clients can choose to maintain the technology at their own expense. If the clients cannot maintain the technology or do not wish to maintain it, the technology can be removed and a DSAAPD case manager will work with them on locating other appropriate resources.

17. Will there be a Divisional case manager involved with the client, and will feedback/surveys be needed?

Yes, DSAAPD case managers are involved with the client. As part of the pilot, DSAAPD is also working with an evaluator to create instruments to provide feedback on the program. Once a vendor is chosen, the evaluator will work with them to develop the instrument.

18. Will the Division be planning to refer multiple options/client needs?

Yes, DSAAPD is looking for different technologies so that we can best meet the needs of our clients. However, we are specifically looking for technologies to help people with dementia, not another disorder or disability.

19. Will the Division prioritize the client cases?

Yes, DSAAPD case managers will do this based on the technology needed.

20. Would the State make this a payable service?

After the contract expires, DSAAPD case managers can refer clients to any payable services that are available.

21. What would be the ramp up process over the 18 months?

DSAAPD expects services to begin within six months after the contract starts.

22. What does the Division feel the current clients respond to well?

DSAAPD feels voice versus audible alarms could be preferable for clients, though it depends on the client. The vendor could provide multiple options to meet the needs of the client.

23. What is the concern that clients will not wear technology?

While this is always a concern, most clients will be early or mid-stage in the dementia diagnosis. Providing multiple options of technologies will help if wearable technology is not appropriate.

24. Does the Division feel that client interaction is beneficial?

Interaction is always good for quality of life, but it will not prolong the effects of dementia. It is not necessary for this pilot.

25. Will the provider know what "stage of the disease" that the client is in?

The vendor will know that the client has dementia and which technology the client will be using.

26. Could a provider bid an amount less than the allocated $150K?

Yes.

27. Could a provider bid an amount for a certain section of potential clients?

Yes, for example, if a technology would only be good for people with internet access or if a caregiver needs to live with the client, include that in the proposal.

28. Will the Division have a meeting with the caregiver prior to a client potentially receiving service?

DSAAPD case managers currently already meet with caregivers of potential clients, so this practice will remain during the pilot program.

29. When do you expect to start?

DSAAPD anticipates that the contract will start March 2017.