



Delaware County Board of Developmental Disabilities

To inspire, empower, and support people to achieve their full potential.

August 5, 2024

RE: *DCBDD Behavior Specialist Services*

Dear Providers:

Delaware County Board of Developmental Disabilities (DCBDD) is now accepting informal Requests of Interest (ROI) for behavior specialist services.

In order to be considered for this service, applicants must:

- Be one of the following:
 - State-licensed psychologist
 - State-licensed professional counselor or clinical counselor (LPC/LPCC)
 - State-licensed independent social worker (LISW)
 - State-licensed Social Worker or Registered Behavior Technician working under the direct supervision of a licensed Independent Social Worker or Board-Certified Behavior Analyst.
- Have experience with:
 - Completing risk assessments
 - Functional behavior assessments
 - Implementing positive behavior strategies
 - Implementing restrictions that are temporary in nature
 - Working under the rules of the Ohio Department of Developmental Disabilities (DODD)
- Successfully complete, prior to the provision of services, unusual incident/major unusual (UI/MUI) training as required annually for service providers by OAC Rule 5123-17-02;
- Be able and willing to implement program requirements in accordance with the terms and conditions of the contract, Ohio Individual Service Plan (OhioISP), applicable policy, and applicable law;
- Provide documentation of LLC, Agency with Choice, or Agency status (pending DCBDD Board approval).;
- Carry insurance limits, as applicable, in accordance with contract requirements for general liability, professional liability, employer liability, automobile, and worker's compensation coverage.

Interested applicants are asked to submit the following:

- Organizational information or resume
- Proof of licensure/certification
- Hourly rate
- Completed questionnaire (attached).

Please send all required documentation to Mike.Dancho@dcbdd.org **no later than 4:30pm August 19, 2024.**

Thank you for your interest in supporting people in Delaware County!



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Behavior Specialist Services Questionnaire

Applicant Name:

Agency/Organization:

1. Describe what experience you have in implementing positive behavior restrictions that are temporary in nature.
2. Explain your experience with risk assessments and functional behavioral analysis.
3. Describe your understanding, experience, and implementation of Ohio Admin Code 5123-2-06 in a county board setting.
4. Describe your relationship with DCBDD. Provide examples of how you intend to further our mission and vision through this partnership?

Signature:

Date: