

Requests For Proposals

Adolescent Dual Diagnosis Residential
and Day Treatment Services

County of Santa Cruz
Health Services Agency
BIDDERS CONFERENCE
MAY 24, 1999
2:30 p.m.
1400 Emeline Ave., Room 207
Santa Cruz CA

**COUNTY OF SANTA CRUZ HEALTH SERVICES AGENCY
MENTAL HEALTH AND SUBSTANCE ABUSE DIVISION**

205

REQUEST FOR PROPOSALS

**ADOLESCENT DUAL DIAGNOSIS RESIDENTIAL
AND DAY TREATMENT SERVICES**

TABLE OF CONTENTS

I.	Introduction	1
II.	Background	2
III.	Funding	2
IV.	Services Solicited	2
V.	Service Area and Target Population	4
VI.	Proposal Content	4
VII.	Selection Process and Scoring Instrument	10
VIII.	Instructions for Submitting Proposals	12
IX.	Contract Responsibility and Requirements	13
X.	Proposer's Conference and Submission Deadline	14

Attachment A	Letter of Announcement
Attachment B	Latino Affairs Commission
	Standards of Accessibility for Latino Services
Attachment C	Daily Schedule of Activities
Attachment D	Staffing Chart
Attachment E	Budget Forms
Attachment F	RF P Scoring Instrument

I. INTRODUCTION

The Santa Cruz county Health Services Agency (HSA) Mental Health and Substance Abuse Program is requesting proposals for the provision of residential and day treatment services for adolescents with co-occurring substance abuse and mental health

problems. HSA issued a letter of announcement to contract for these services on May 19, 1999. The purpose of this request for proposals (RFP) is to outline requirements and conditions for submitting proposals for the services referred to in that notice.

Notwithstanding any other provision of this RFP, proposers are hereby advised that this RFP is an informal solicitation of proposals only. This RFP is not part of any formal competitive bidding process pursuant to any statute, ordinance, rule, or regulation. Thus Santa Cruz County reserves the unqualified right to reject any or all proposals.

II. BACKGROUND

Alcohol and drug use among teens has long been a serious problem in Santa Cruz County, and has escalated in recent years with the marked increase in the use of heroin and methamphetamines by adolescents. Many of these adolescents also have co-occurring mental health problems.

In response to this crisis, on February 23, 1999, the Board of Supervisors accepted the recommendations of a County task force to develop treatment services for adolescents, including residential and day treatment services for drug abusing youth that are not involved in the criminal justice system. On May 18, 1999, the Board approved the release of an RFP for the services described below.

III. FUNDING

The annual County allocation for the services requested in this RFP is \$880,333, including \$167,000 of County funds, \$275,000 of Short Doyle Mental Health Medi-Cal, and \$438,000 of Aid to Families with Dependent Children (AFDC)-Foster Care funds. Providers are at-risk to generate the Medi-Cal and AFDC-Foster Care funds.

Residential Treatment Program Revenues			
	County	Other	Total
Residential AFDC-FC *	\$132,000	\$438,333	\$570,333
Day Treatment	\$ 35,000	\$275,000	\$310,000
	\$167,000	\$713,333	\$880,333

Providers must become State-certified as a Short Doyle Medi-Cal provider, and must obtain a Level 10 State Department of Social Services Community Care Facility group home license in order to generate AFDC-Foster Care revenue. * **This rate is based on State AFDC-FC Level 10 approved rates.**

HSA intends that the proposed contract take effect on August 18, 1999, but placement and clinical services will begin no sooner than December 1, 1999. At this time, HSA plans that the funding for this program be ongoing. However, owing to uncertainties in the State and Federal budgets, the amount of funding available in future years may be subject to change.

IV. SERVICES SOLICITED

Services available through the adolescent residential and day treatment program should include the following:

as 25%). The positions and full-time equivalents should reconcile to the positions shown in the budget. Do not include any volunteers in the chart.

B.5. Facility (10 points)

The facility must accommodate at least 10 beds, plus additional space for a day treatment classroom, group counseling and education, private interviewing, recreational activities, cooking, personal hygiene, and program administration. The County Office of Education recommends a minimum of 1,000 square feet for a 1 O-student classroom. The facility must be licensable as a group home, and must meet Fire Marshall requirements and Americans with Disabilities Act requirements for wheelchair accessibility.

If the proposer already has a facility, describe the facility in relation to the requirements above; indicate the facility address and approximate number of square feet; and attach a floor plan and documents showing that the facility is in compliance with all applicable fire, safety, zoning, and licensure requirements.

If the proposer does not have a facility, provide as much information as possible regarding facility options and search plans.

The Health Services Agency reserves the right to review and approve the proposed facility prior to recommending award of the contract, or prior to the successful proposer signing a lease.

B.6. Cultural Competence (10 points)

All program services must be culturally competent and accessible to monolingual Spanish speakers. Describe how the screening, assessment, treatment planning, residential, day treatment and educational services, and staffing and facility will meet the **Latino** Affairs Commission's Standards of Accessibility for **Latino** Services (see Attachment B).

8.7. Record Keeping and Reporting (5 points)

The program will be required to keep client and program records consistent with Department of Social Services group home licensure requirements, AFDC-Foster Care certification requirements, and Short Doyle **Medi-Cal** certification requirements and Children's System of Care performance outcome measures. Other required reports will include monthly billings and claims, quarterly reports to the County Mental Health and Substance Abuse Program, and an annual report to the Alcohol and Drug Abuse Commission.

Describe your policies and procedures for record keeping and data reporting, including paper flow, quality assurance/utilization review, **and** confidentiality.

B.8. Implementation **Timeline** (5 points)

List key activities in implementing the program and a timeframes for implementing them, including acquisition and licensure of a facility; recruitment,

- Day treatment services are to include a full range of individual, group, family, collateral, psycho-educational, and crisis counseling.

The day treatment program must provide programming and services that are culturally sensitive and relevant, integrating mental health and substance abuse curriculum and counseling, linking families of residents to services that may be billed separately outside of the Day Treatment Program time period.

Educational Classroom: The educational classroom component of the program will be provided through arrangement with the County Office of Education for at least the 10 clients participating in the residential component of the program. The academic component will function for at least four hours per day, and will be oriented toward basic academics and life skills. In addition to basic literacy and math, the curriculum should include interviewing skills and job search techniques, Latino history and cultural awareness, and HIV and other STD awareness and prevention. Academic classroom services may be provided on a year-round basis, or with a four-week or six-week summer schedule. HSA will work with the successful proposer and the County Office of Education to implement the educational classroom component of the program. The County Office of Education will be able to fully or partially support the personnel, equipment and furnishings needed to operate the educational classroom component.

Cultural Competence. All services must be culturally competent and accessible to monolingual Spanish-speaking Latinos. All services must meet the Latino Affairs Commission Standards of Accessibility for Latino Services (see Attachment B).

V. SERVICE AREA AND TARGET POPULATION

The primary service area for the program is Santa Cruz County, including County residents and homeless or transient youth whose primary nighttime residence is within the County.

The primary target population is boys and girls age 14 to 17 years that have concurrent problems with alcohol and drug abuse, and mental illness. It is anticipated that a significant proportion of program participants will be Latino, and the program must provide services that are culturally competent and accessible to monolingual Spanish speakers.

Youth who are on Probation will not be admitted to the program. Families of the youth admitted to the program must be willing to enroll their children as voluntary placements in the AFDC-Foster Care program or be able to pay for the full cost of the residential program.

VI. PROPOSAL CONTENT

Proposals must adhere to the structure outlined in this RFP. Proposal parts must be labeled in the same way as the section of the RFP to which they respond. Proposals that do not adhere to the structure may be disqualified from review.

Proposals shall consist of the following parts: A) Cover Letter, B) Description of Proposed Program, C) Organizational Capability, D) Program Budget, E) Investigation Statement, and may include F) Supportive Information. All proposals should be arranged

in the order shown above. A response to Sections A through E is mandatory. A response to Section F is optional.

A point system will be used to score all proposals using a pre-established scoring instrument. Section VII of this RFP, "Selection Process and Scoring Instrument," provides further information on this matter. Each section of the proposal will be given a designated weight in the scoring process. The point values of each section are listed next to each section of the proposal shown below.

The County reserves the right to evaluate other merit-related factors, whether or not these factors are included in the following outline.

A. Cover Letter (no points)

Address the cover letter to Rama Khalsa, Ph.D., Director, County Mental Health and Substance Abuse Administration. In the cover letter, include the following:

- The name, address, telephone number and contact person for the agency submitting the proposal;
- State that you have read the RFP and are prepared to comply with all proposal conditions, contractual requirements, contract monitoring requirements, and program evaluation requests of agencies providing funding, licensure or certification for the program;
- State the total number of residential beds and day treatment slots to be provided, the gross cost of the program, the amount of funding requested from the County, and how much Short Doyle Medi-Cal and AFDC-Foster Care funding the program anticipates generating; and
- State any additional explanatory information you believe will be necessary or helpful to the County.

B. Description of Proposed Program (100 points total)

This section of the proposal should present a comprehensive statement of the program you intend to develop, and how you will go about implementing it.

B.1. Screening, Assessment and Treatment Planning (5 points)

Describe screening procedures for the program and criteria for admission.

Describe the assessment process, including assessment of assets and deficits related to alcohol and drug use, mental health, family and living situation, domestic violence and sexual abuse, physical health, educational status and learning disabilities, vocational needs, legal and gang issues, and friends and use of leisure time. Indicate whether any standardized assessment tools will be used, and how information will be collected from other agencies and individuals that may be involved with the youth and their family. Describe the staff that will be conducting the assessment, including their level of training and licensure or certification.

Describe any benefits screening or benefits advocacy that will be conducted by the program to ensure that clients have AFDC-Foster Care, Short Doyle Medi-Cal or other payor sources.

Describe the process for developing an individualized treatment plan for each client with time-limited measurable objectives. The treatment plan must be consistent with Department of Social Services licensure and Short Doyle Medi-Cal certification requirements. The description of the treatment planning process should include the staff involved in developing the plan; how the client and their family will be involved in the treatment planning process; how the treatment plan will be linked to the assessment; the content of treatment plan; and timelines and milestones for updating the treatment plan. Indicate whether a single treatment plan will be used for both the residential and day treatment components of the program.

B.2. Residential Program Services (20 points)

In this section, please describe the following:

- Quantified annual residential program objectives, including the number of beds, number of clients served, and number of bed days. If there are any program objectives related to services provided to specific target populations (e.g., Latinos), state them here.
- The involvement of residents in self-help groups, including how residents will be oriented to self-help groups, how frequently residents will attend self-help meetings, and whether the groups will be on-site or off-site.
- Social and recreational activities, including the types and amount of activities, who will facilitate the activities, and how residents will be involved in planning activities.
- A weekly schedule of self-help, social/recreational and other program activities using the format provided in Attachment C.
- Linkages with other needed services, including who will case manage the linkages and how transportation needs will be addressed.
- Evening and weekend crisis coverage, including how it will be staffed and who will staff it.
- Transition and aftercare planning, including development of plans for return home or obtaining other housing, meeting subsistence needs, continuing treatment and recovery activities, education and/or employment, and development of a clean and sober supportive social network.
- How residents will be involved in meal planning, shopping, cooking, cleaning and basic facility maintenance.

- Program rules related to maintaining a clean and sober environment; keeping order and decorum in the house; ensuring participation in program activities and household tasks; home visits and passes; dress; money; and use of prescribed medications. Include a discussion of drug and alcohol testing, any system of graduated privileges or sanctions, and the roles of residents and staff in making reviewing and enforcing house rules.

B.3. Day Treatment Services (20 points)

In this section, please describe the following:

- Quantified annual day treatment program objectives, including the number of billable Day Treatment days (an all-inclusive billable unit, which includes all individual, group, family, crisis etc. services provided). If there are any program objectives related to services provided to specific target populations (e.g., Latinos), state them here.
- The treatment services to be provided, including the process and content of educational and counseling activities; the frequency and duration of individual, group and family sessions; who will provide the services; and any program phases, levels or point systems. In particular, highlight drug and alcohol-related curriculum and programming.
- How the residential staff and day treatment staff will link and support each other. Include a detailed description of their separate roles to ensure a clear audit trail of staff assigned to the residential component paid for by AFDC-FC funds, and treatment staff paid for by Medi-Cal treatment funds. Include number of positions, titles, qualifications, and roles.
- Describe how the required full day Day Treatment staffing ratios and staff qualifications will be met, including procedures for documenting that staffing requirements are being met.

B.4. Staffing (10 points)

Residential program staffing must meet at least Level 10 group home licensure requirements, and day treatment program staffing must meet Short Doyle Medi-Cal requirements for Short Doyle Medi-Cal full day Day Treatment certification. Staff should be representative of the cultural and ethnic groups the program plans to serve.

Describe the personal, professional, linguistic, and cultural characteristics of staff who will be involved in the program. Discuss the minimum education and experience qualifications for each staff position in relation to its duties, including any licenses or certifications required.

Include the resumes of any key staff already selected. Describe any special efforts to recruit bilingual/bicultural staff.

Include a staffing chart using the format shown in Attachment D. In each cell of the chart, show the percentage of time each staff member will spend in each component of the program. Use percentages of a full-time employee's time (e.g., if a half-time employee spends half of his/her time on an activity, show it

as 25%). The positions and full-time equivalents should reconcile to the positions shown in the budget. Do not include any volunteers in the chart.

B.5. Facility (10 points)

The facility must accommodate at least 10 beds, plus additional space for a day treatment classroom, group counseling and education, private interviewing, recreational activities, cooking, personal hygiene, and program administration. The County **Office** of Education recommends a minimum of 1,000 square feet for a **10-student** classroom. The facility must be licensable as a group home, and must meet Fire Marshall requirements and Americans with Disabilities Act requirements for wheelchair accessibility.

If the proposer already has a facility, describe the facility in relation to the requirements above; indicate the facility address and approximate number of square feet; and attach a floor plan and documents showing that the facility is in compliance **with** all applicable fire, safety, zoning, and licensure requirements.

If the proposer does not have a facility, provide as much information as possible regarding facility options and search plans.

The Health Services Agency reserves the right to review and approve the proposed facility prior to recommending award of the contract, or prior to the successful proposer signing a lease.

B.6. Cultural Competence (10 points)

All program services must be culturally competent and accessible to monolingual Spanish speakers. Describe how the screening, assessment, treatment planning, residential, day treatment and educational services, and **staffing** and facility will meet the **Latino** Affairs Commission's Standards of Accessibility for Latino Services (see Attachment B).

B.7. Record Keeping and Reporting (5 points)

The program will be required to keep client and program records consistent with Department of Social Services group home licensure requirements, **AFDC-**Foster Care certification requirements, and Short Doyle **Medi-Cal** certification requirements and Children's System of Care performance outcome measures. Other required reports will include monthly billings and claims, quarterly reports to the County Mental Health and Substance Abuse Program, and an annual report to the Alcohol and Drug Abuse Commission.

Describe your policies and procedures for record keeping and data reporting, including **paper** flow, quality assurance/utilization review, and confidentiality.

B.8. Implementation Timeline (5 points)

List key activities in implementing the program and a timeframes for implementing them, including acquisition and licensure of a facility; recruitment,

hiring and training of staff; obtaining Short Doyle Medi-Cal certification and a AFDC-Foster Care rate level; concluding agreements with the provider of educational services; and admission of the first resident.

C. Organizational Capability (5 points)

Only non-profit (501.c3) organizations may apply for funding under this RFP. Please indicate your organization's status as a non-profit corporation, and include a list of the agency's Board of Directors as an appendix to your proposal.

Describe prior agency experience and organizational capability in the following areas:

- Provision of alcohol and drug treatment services.
- Provision of mental health treatment services.
- Provision of services to adolescents and their families.
- Provision of culturally competent services.
- Working in collaboration with the schools.
- Working in collaboration with other non-profit and County agencies.
- Administration of Short Doyle Medi-Cal funds.
- Administration of AFDC-Foster Care funds.
- Obtaining and maintaining Department of Social Services group home licensure.

This section must also include an organizational chart showing how the proposed program will fit into the existing organization.

D. Program Budget (10 points)

Using the format provided in Attachment E, provide an annual budget for the overall program, and separate annual budgets for the residential and day treatment components of the program. If program start-up involves significant one-time costs for equipment, personnel or other expenses, provide a start-up budget for the entire program. Each budget should detail projected costs for salaries and employee benefits; transportation; equipment, materials and supplies; operating expenses; special expense; and administrative costs using the definitions provided in Attachment E. The amount and source of all program revenues must be described.

Provide a budget narrative with sufficient detail for reviewers to determine the nature and reasonableness of each expense. The budget narrative for revenues must state in detail the assumptions and calculations for projecting revenues, including the AFDC-Foster Care rate level and monthly amount, vacancy factors, the percentage of clients who will not qualify for AFDC-Foster Care or Short Doyle Medi-Cal, the number of Short Doyle Medi-Cal full day Day Treatment units of service and private pay units of service provided, projected Medi-Cal disallowance's, and other critical factors that may affect revenues.

E. Investigation Statement (Required, no points)

Include the following information in the proposal.

- A statement of whether the proponent agency, the proposed administrative staff, or member of the proponent agency Board of Directors is now or has been the subject of a public or private audit or special investigation due to potential or alleged financial, management, or program improprieties or other irregularities.
- A statement providing information regarding all contracts for public funds which have been cancelled, terminated, or not renewed within the last five years; including the funding agency's name, address, and telephone number.
- A statement providing information on all past or pending litigation involving the proponent agency and any of its partners, principals, directors or employees.

These statements should describe the program audited, cancelled, or sued; who audited, cancelled, or sued the program; the date of the audit, cancellation, or suit; **and** the purpose and outcome of the audit or suit. If the response to this section reveals a serious problem or pattern of problems, the proposal may be disqualified.

F. Supportive Information (optional, no points)

Include in this section any additional information supportive of the agency or the proposal, including:

- Letters of support;
- Brochures or promotional materials; and
- Newspaper clippings, etc.

VII. SELECTION PROCESS AND SCORING INSTRUMENT

A. Selection Process

1. **Preliminary Review.** Mental Health and Substance Abuse Program staff will determine whether the response conforms to the structure outlined in the RFP and include all mandatory elements. Proposals must adhere to the structure outlined in the RFP. If a response to a section of the RFP appears outside of the appropriately labeled section of the proposal, this response element may not be scored. Incomplete proposals may be eliminated before committee review.
2. **Proposal Review Committee.** The Mental Health and Substance Abuse Program will establish a proposal review committee to assist in the evaluation of all proposals. The committee will consist of persons experienced in the administration of health services, drug and alcohol recovery services, mental health services, social services, members of the Alcoholism and Drug Abuse Commission, Local Mental Health Board or other individuals the County deems capable and appropriate for the selection of potential providers.

The committee shall not include potential contractors or persons affiliated with potential contractors. No one on the committee may apply or assist others in applying for this contract.

The committee will score and rank each proposal using a standardized scoring instrument. The committee will discuss proposal scores and make recommendations identifying the most qualified proposer.

3. Recommendation to Contract. The Mental Health and Substance Abuse Program Director will review the committee's recommendations and make a recommendation to the Health Services Agency Administrator.

Before making a recommendation to contract, the Mental Health and Substance Abuse Program Director may inspect the proposed services site and request additional information necessary to determine the proposer's management capability, financial stability, ability to perform on schedule, and willingness to incorporate additional features in their proposal.

Once a selection has been made, the successful proponent will be invited to negotiate an agreement for services. At the conclusion of negotiations, the service agreement will be presented to the Board of Supervisors for approval. Award of the contract will be made by the Board of Supervisors.

B. Scoring Instrument

The review committee will read and score proposals using the RFP and the scoring instrument shown in Attachment F as the principal guidelines for determining the adequacy of the response and the qualifications of the proposers.

The scoring instrument reflects the requirements of the RFP and the point values associated with each section of the RFP. Scoring will be applied to the following areas.

- The proposer's experience in providing alcohol, drug and mental health services;
- The proposer's experience providing services to adolescents;
- The proposer's experience in providing residential and day treatment services;
- The proposer's experience in operating Short Doyle and AFDC-Foster Care funded services;
- The ability of the proposer to work effectively with the health, social services and educational systems and with other community resources:

- Plans for providing the screening, assessment, treatment planning residential and day treatment services requested in this RFP;
- Plans for record keeping and data reporting;
- Evidence of enough program staff of sufficient qualifications to carry out the proposed activities;
- The facilities for accommodating the proposed program activities;
- The cultural competence of the proposed program;
- The cost of the proposed services in relation to the quantity and quality;
- The ability of the proposer to implement the requested services in a timely manner; and
- Compliance with the basic terms and conditions of this RFP.

In an effort to reach a decision concerning the most qualified proposer, the County reserves the right to evaluate all merit-related factors it deems appropriate, whether or not such factors have been stated above.

VIII. INSTRUCTIONS FOR SUBMITTING PROPOSALS

A. General Instructions

1. Proposer is to submit five (5) copies of the proposal.
2. Prior to the final submission date, proposers may retrieve their proposals in order to make additions or alterations. No correction or resubmission shall be accepted after the proposal submission deadline, except for correction of clerical errors, which may be permitted by the County at its sole discretion. Such retrieval, however, shall not extend the final submission date. Proposals subject to conditions or limitations specified by the provider may be deemed irregular and rejected by the County. Once submitted, proposals are considered firm offers at the County's discretion until the intended effective date of the contract as found in Section III.
3. The County reserves the right to interpret or change any provision of this RFP. Interpretations of, or changes in, this RFP will be made by a written addendum issued to each person who has received from the County an RFP. The addendum will become part of the RFP. The County will not be responsible for any other interpretations of this RFP.

B. Proposal Conditions

1. A recommendation either to reject all proposals or to select a proposal or proposals for this project will be made to the Board of Supervisors, as previously described in this document. However, such recommendation shall in no manner bind the Board of Supervisors, which, by law, must exercise its independent judgment and discretion concerning the selection of proposals and the terms of any resultant contract.
2. The County reserves the exclusive right **to evaluate** the proposals submitted in response to this RFP, and to select or not select any proposal for this project. The evaluation of proposals and the decision to select or not select any proposal for this project by the County is final and not subject to appeal.
3. Misrepresentation of information in the proposal or non-adherence to the format herein described shall be sufficient reason to reject any proposal.
4. All proposals in response to this RFP shall become the exclusive property of the County of Santa Cruz. At such time as the County Administrator Officer recommends a vendor to the Board of Supervisors and the letter, with any recommended contract, appears on the Board of Supervisors' agenda, all proposals shall become a matter of public record, and shall be regarded as public records, with the exception of those parts of each proposal which are defined by the proposer as business or trade secrets, and plainly marked as "trade secrets" "confidential" or "proprietary." The County shall not in any way be liable or responsible for the disclosure of any such records, or any parts thereof, if disclosure is required or permitted under the California Public Records Act or otherwise by law.
5. Any contract, which may be awarded as a result of this RFP, will be a contract consistent with all applicable law.
6. The County is in no way responsible for the costs of preparation of proposals submitted in response to this RFP.
7. Your submission of a proposal shall constitute your acknowledgement and acceptance of all of the terms and conditions contained in this RFP, unless otherwise specified in your proposal.

IX. CONTRACT RESPONSIBILITY AND REQUIREMENTS

A. Work Included

Proposers should highlight innovative approaches to service delivery. Proposers should be aware, however, that such intents may become contractual requirements. Proposers should also be aware that the County expects the proposer to implement all commitments made in the proposal. Failure to implement all commitments made in the proposal will be considered sufficient grounds for contract actions against the program, including a reduction of the contract allocation or termination of the contract.

The selected agency will be required to agree that work not specifically identified in this RFP which may be reasonably assumed by the County as necessary to meet the objectives of work specified shall be performed without delay by the contractor upon receipt of written notice from the County.

The selected agency shall also be required to agree that should work be performed beyond the intent of this RFP, without prior written approval of the County, it shall be deemed to be a gratuitous effort on the part of the contractor. The contractor shall have no claim against the County on account of such work.

B. Law and Limitations

The selected agency shall be required to comply with all applicable Federal, State and Local laws, ordinances, and regulations.

X. PROPOSERS' CONFERENCE AND DEADLINE FOR SUBMISSION OF PROPOSALS

A. Proposers' Conference

A proposers' conference will be held to answer any questions regarding the RFP or the services requested. THIS IS THE ONLY OPPORTUNITY FOR POTENTIAL PROPOSERS TO REQUEST CLARIFICATION OF THE SPECIFICATIONS APPEARING HEREIN. Highly specific and technical questions (e.g., how to fill out the budget forms) may be answered after the proposers' conference at the County's discretion.

All proposers are encouraged to attend. The proposers' conference is scheduled for the following time and place:

Date: Monday, May 24, 1999

Time: 2:30 p.m.

**Place: Room 206, 1400 Emeline Avenue, Bldg. K
Santa Cruz, CA (Information phone: 831-454-4518)**

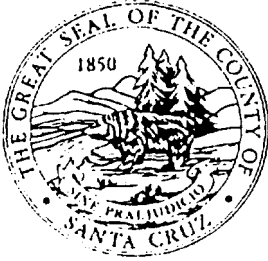
B. Deadline for Submission of Proposals

Date: June 30, 1999

Time: 5:00 p.m.

**To: Rama Khalsa, Ph.D.
Mental Health & Substance Abuse Director
1400 Emeline Avenue
Room 208
Santa Cruz, CA 95060**

Proposals received after 5:00 p.m. on the day of submission will be logged in, but will not be accepted for consideration.



County of Santa Cruz²¹⁹

HEALTH SERVICES AGENCY

POST OFFICE BOX 962, 1060 EMELINE AVENUE SANTA CRUZ, CA 95061-0962

(831) 454-4050 FAX: (831) 454-4747 TDD: (831) 454-4748

MENTAL HEALTH AND SUBSTANCE ABUSE DIVISION

May 19, 1999

To: Interested Persons

From: Rama Khalsa, Ph.D., Director
Mental Health and Substance Abuse Program

Subject: Request for Proposals for Adolescent Residential and Day
Treatment Services

The Santa Cruz County Health Services Agency (I-ISA) Mental Health and Substance Abuse Program is pleased to announce that it will issue a request for proposals (RFP) for residential and day treatment services for adolescents with co-occurring substance abuse and mental health problems who are not involved in the criminal justice system.

The annual County allocation for the services requested in this RFP is \$880,333, including \$167,000 of County funds, \$275,000 of Short Doyle MediCal funds and \$438,333 of Aid to Families with Dependent Children-Foster Care funds. Proposers may be able to generate additional Short Doyle MediCal and AFDC-Foster Care funds depending on client eligibility, program structure and staffing. Proposers will be expected to provide a minimum of 10 residential beds and 10 day treatment slots.

The RFP will be released on May 19, 1999. Interested parties may pick up the RFP at the offices of:

Santa Cruz County Health Services Agency
Mental Health and Substance Abuse Program
1400 Emeline Avenue
Santa Cruz, CA 95060
(831) 454-4518

A bidders conference will be held on May 24, 1999 at 2:30 p.m. at the same address.

The deadline for submission of proposal's is June 30, 1999 at 5:00 p.m.

If you need additional information, please contact Bill Manov, Alcohol and Drug Program Administrator at (831) 454-4050.

STANDARDS OF ACCESSIBILITY FOR LATINO SERVICES

- A. All materials are available in Spanish and are culturally sensitive and appropriate.
- B. Services are actively marketed to the Latino community.
- C. All services - and the entry points to services (reception, information and referral, etc.) - have bilingual capability with equal levels and quality of service.
- D. Services are located in areas readily accessible to the Latino community.
- E. Services are culturally competent¹.
- F. Agency leadership is culturally competent, aware of special needs of the Latino community, and effective in empowering the Latino community.
- G. The Latino community is adequately represented on agency policy and advisory boards.
- H. Services are evaluated annually, in part, according to these standards of accessibility. It is assumed that if services are accessible and appropriate, the client population will reflect the needs in the Latino community.
- I. Client demographics are representative of the agency's service and geographic areas.
- J. HRA's monitoring of agencies will include compliance with these standards and conformance in service provision with the demographic characteristics of the geographic area in which they are located.

¹ The concept of "cultural competence" is drawn from a model which has been used in the provision of mental health and social services to indicate a set of behaviors, attitudes, and policies enabling an agency to work effectively in cross-cultural situations.

State of California
WEEKLY ACTIVITIES SCHEDULE
ADP 5085 A-6

Department of Alcohol and Drug Programs

Weekly Activities Schedule

Please report only program activities

Date: _____

TIME:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
6-7 a.m.							
7-8 a.m.							
8-9 a.m.							
9-10 a.m.							
10-11 a.m.							
11-12 a.m.							
12- 1 p.m.							
1-2 p.m.							
2-3 p.m.							
3-4 p.m.							
4-5 p.m.							
5-6 p.m.							
6-7 p.m.							
7-8 p.m.							

Comments:

Activity	Staff Position				
	Program Director (1 . 0) FTE)	Admin. Asst. (. 5 0 FTE)	Counselor (1 . 0 FTE)	Counselor (0 . 5 FTE)	Total
Administration & Community Relations	35%	35%			70%
Data Reporting & Client Records	5%	15%			20%
Jail Outreach				35%	35%
Education and Recovery Groups	25%		100%	15%	140%
Supervision	35%				35%
Total	100%	50%	100%	50%	300%

MULTI-MODALITY SUMMARY PAGE

CONTRACTOR _____

SUBMISSION DATE _____

		PERIOD: Begin/End:		
		FY 99/00 Proposed Total Contract Budget	Other Funds	County Funds
Modality				
1. Day Treatment				
2. Residential				
3.				
4.				
5.				
6.				
8.				
9.				
10.				
Total				

MULTI-MODALITY SUMMARY

224

INSTRUCTIONS for Completing Page 1

This page must be completed for all contracts which involve two or more service modalities (i.e. distinct programs). Youth residential proposers should show totals for residential and day treatment components.

Contractors must prepare a separate budget for each service modality. The totals from the BUDGET SUMMARY (page 3) for each modality are recorded on this page.

BUDGET SUMMARY

CONTRACTOR_____

SUBMISSION DATE_____

PROGRAM COMPONENT_____

MODALITY OF SERVICE_____

		FY 99/00 Proposed Total Contract Budget	Other Funds* (enter source below)	County Funds
	1. PERSONNEL SERVICES			
	2. TRANSPORTATION			
	3. EQUIPMENT, MATERIALS, SUPPLIES			
	4. OPERATING EXPENSES			
	5. SPECIAL EXPENSE			
	SUBTOTAL DIRECT COSTS			
	6. ADMINISTRATIVE COSTS			
	TOTAL (Enter totals on page 1)			

*SOURCE OF OTHER FUNDS	FY 99/00 Proposed Amount
Client Fees	
AFDC-Foster Care	
MediCal Federal Share	
Fundraising	
Gifts	
Other (Describe)	
Total	

COUNTY OF SANTA CRUZ
Health Services Agency
OADPA

BUDGET SUMMARY

INSTRUCTIONS for Completing Page 3

Contractor: Name of agency, government unit, individual, etc.,

Program Component: Name of separate division or unit of Contractor, if applicable. For Example: Alpha House, JFK School, Women's Program

Modality of Service: Choose at least one of the following modalities

Residential Care

Day Treatment Intensive

Administration

FY 99/00 Proposed Total Contract Budget: Transfer line item sub-totals from the LINE ITEM BUDGET (pages 5 and 7) for total cost of program. "Other Funds" and "County I-SA Funds" must equal the "Budget Total Amount."

Other Funds: Transfer line item subtotals from the LINE ITEM BUDGET (pages 5 and 7) for other funds that support the program (Federal MediCal, AI-DC-Foster Care, grants, fees, etc).

County Funds: Transfer line item subtotals from the LINE ITEM BUDGET (pages 5 and 7) for the County funds from the I-SA Division of Mental Health and Substance Abuse Programs that support the program.

Source of Other Funds: All funds committed or anticipated to be received to support the services contracted for this modality (which are in the modality's cost center) must be shown. Break down total in the "Other Funds" column of the above budget into sources listed. Total must match "Other Funds" above.

LINE ITEM BUDGET

Contractor			Modality			
Detailed Budget For This Period	Monthly Salary Range in F.T.E.	% time FTE	FY 99/00 Proposed Budget Total Amount (4 + 5) (3)	Source of Funds		Cost alloc code (6)
				Other (4)	County (5)	
1. PERSONNEL SERVICES (List by Position Title)	(1)	(2)				
	Subtotal					
Fringe Benefits	(Rate _____%)					
TOTAL Salaries and Benefits						
2. TRANSPORTATION						
Subtotal						
3. EQUIPMENT, MATERIALS, SUPPLIES						
Subtotal						

COUNTY OF SANTA CRUZ
Health Services Agency
DADPA

LINE ITEM BUDGET

INSTRUCTIONS for Completing Pages 5 and 7

1. **Personnel Services:** List personnel by position, and include name if someone is designated for the position.

- Column (1) Show monthly salary range based on a "Full Time Equivalent" (FTE) position of 2080 hours annually, including vacation, holidays, sick leave, and other leave. If position is for contract personnel (i.e. not salaried), write "contract" in this column.
- Column (2) Show percent of FTE position committed to this modality. FTE equivalent must be shown for contract personnel. Estimate FTE if necessary.

Fringe Benefits - Show as a separate line item in the Personnel Service Category. Show fringe benefit rate.

Other Budget Categories:

- Column (3) Total amount budgeted to this modality.
- Column (4) Funds for position/line item other than front County contract.
- Column (5) Funds for position/line item from County contract.
- Column (6) See instructions for "Cost Allocation Plan" (page 9)

2. **Transportation:** Itemized transportation costs for both client and staff travel. This may include vehicle lease, insurance, maintenance, gas charges, etc.

3. **Equipment, Material, Supplies:** Tangible goods, such as office equipment, office supplies, food, copying, client supplies, linen. Items with a purchase price in excess of \$1,500 are deemed to be fixed assets and require prior approval of County and State if purchased with public funds, even if contract reimbursement is on a fee-for-service basis. See instructions on FIXED ASSET PURCHASE REQUEST (page 11). Contractors may not avoid fixed asset approval requirement by breaking down purchases into units of less than \$1,500.

4. **Operating Expense:** Itemize non-tangible items such as rent, utilities, insurance, accounting, legal services, maintenance, etc.

5. **Special Expenses:** This category is reserved for special expenses which do not apply to other categories such as, building renovation, litigation, payment of audit exception, etc. Use of public funds under this category may require prior approval of County.

6. **Administrative Costs:** Programs which use a separate cost center for administrative services and distribute these costs to each modality through an indirect rate must show the amount being charged to this modality. Note: the rate must also be shown. In the Budget Narrative, explain how the rate was determined and who approved the rate. Programs which charge administrative services as a direct cost must clearly identify and explain all personnel and other administrative costs in the other budget categories. Programs which have operations in other locations, must provide a cost allocation plan which shows and explains how administrative costs are divided between programs and other contracts. Please attach supporting documentation of the administration budget, methodology, and allocation formulas.

LINE ITEM BUDGET (Continued)

Contractor	Modality			
Detailed Budget For This Period (Continued)	FY 99/00 Proposed Budget	Source of Funds		Cost Alloc Code
	Total Amount (4 + 5) (3)	Other Funds (4)	County (5)	(6)
OPERATING EXPENSES				
Subtotal				
5. SPECIAL EXPENSE				
Subtotal				
6. ADMINISTRATIVE (List only if this is budgeted as indirect rate)				
Administrative Cost Rate: _____ %				
Subtotal				

SANTA CRUZ COUNTY
Health Services Agency
DADPA

Notes

--

Contractor			
Cost Allocation Code	Describe Cost Allocation Method (see Instructions)	Category	Line Item
	(2)	(3)	(4)

COST ALLOCATION PLAN

INSTRUCTIONS for Completing Page 9

The "Cost Allocation Plan" will describe the method(s) used to allocate program costs which cannot be identified with a single modality such as administrative staff time, rent, utilities, equipment lease, etc. Cost allocation methods may vary. For example: staff hours based on 3 time study over a designated period of time, square footage of building/office, program activity study over designated period of time, client ratios, etc. As a general rule, costs allocated according to gross program cost are not acceptable to auditors. State auditors require that the method chosen be justifiable and that it be applied fairly and consistently.

Column 1 : Cost Allocation Code: Identify each cost allocation method by a letter - A, B, C, etc. This letter will appear in column (6) of the LINE ITEM BUDGET whenever a given line item is a cost allocated expense.

Column 2: Describe Cost Allocation Method: Describe, in detail, the cost allocation method used. Indicate the percentage of personnel hours and fixed costs charged to each program modality.

Columns 3 & 4: Category/Line Item: Identify the budget category or categories where this method is used. (i.e. Personnel Services, Operating Expense, etc.) and the specific line items within that category.

FIXED ASSET PURCHASE REQUEST

Contractor		
Description of Item	Modality	Cost

SANTA CRUZ COUNTY
Health Services Agency
DADPA

FIXED ASSET PURCHASE REQUEST**. INSTRUCTIONS for Completing Page 11**

Items with a purchase price in excess of \$1,500 are deemed to be fixed assets and require prior approval of County and State if purchased with funds from County, even if services are reimbursed on a fee-for-service basis. Contractors may not avoid fixed asset approval requirement by breaking down purchases into units of less than \$1,500.

Describe item(s) being purchased, cost and the modality where it will be used. Show total cost of item, not just portion of cost from County funds. Any fixed asset which is purchased in whole, or in part, with public funds is subject to State/Federal regulation regarding purchase of fixed assets.

Attachment F

00235

SCORING FOR PROPOSALS

Provider:

Total Points	Points/Proposal	Aspect/Component of Proposal
5		Screening, Assessment, Trt Planning
20		Residential Program Services
20		Day Treatment Services
10		Staffing
10		Facilities
10		Cultural Competence
5		Record Keeping, Reporting
5		Implementation Timeline
5		Organizational Capacity
10		Budget

		TOTAL
--	--	--------------

Rater: _____ Date: _____



County of Santa Cruz

236

BOARD OF SUPERVISORS

701 OCEAN STREET, SUITE 500, SANTA CRUZ, CA 95060-4069
(831) 454-2200 FAX: (831) 454-3262 TDD: (831) 454-2123

JANET K. BEAUTZ
FIRST DISTRICT

WALTER J. SYMONS
SECOND DISTRICT

MARDI WORMHOUDT
THIRD DISTRICT

TONY CAMPOS
FOURTH DISTRICT

JEFF ALMQUIST
FIFTH DISTRICT

April 14, 1999

Thomas Sprague, Foreperson
Santa Cruz County Grand Jury
701 Ocean Street
Santa Cruz, CA 95060

Dear Tom:

As you may be aware, the Board's agenda of April 13, 1999, contained two separate items related to the development of a residential treatment program in South County and a report on the development of Requests for Proposals for drug and alcohol treatment services for adolescents. Copies of both of these items are attached for your review. While the item relative to the RFP (Item 42) has a scheduled date of May 18 for further Board consideration, the Board also asked that Item 41 be returned on that date so that discussion could take place prior to budget hearings. Accordingly, both matters will return to the Board on May 18, 1999.

As part of the Board's discussion, I reiterated the Grand Jury's concerns in these areas and requested that the Board also schedule May 18, 1999, as a time for the Grand Jury and others to make reports or comments regarding adolescent drug problems and to otherwise elaborate on your very valuable report. This schedule will provide an opportunity for a full discussion of these related topics. Please feel free to forward a letter, no later than May 4, 1999, to be included with the May 18 agenda materials providing any written comments you may have.

I look forward to the opportunity to hear further from you and other members of the Grand Jury on these issues.

Sincerely,

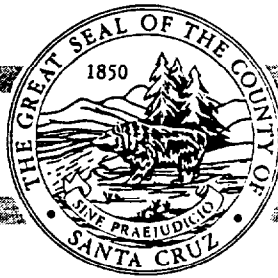

JEFF ALMQUIST, Chairperson
Board of Supervisors

JA:ted
Attachments

cc: County Administrative Officer

1408A6

GRAND JURY



COUNTY OF SANTA CRUZ

GOVERNMENTAL CENTER

P.O. BOX 542 701 OCEAN STREET
SANTA CRUZ, CALIFORNIA 95061

(408) 454-2099

AGENDA: May 18, 1999

April 28, 1999

BOARD OF SUPERVISORS

County of Santa Cruz

710 Ocean Street

Santa Cruz, CA 95060

SUBJECT: **CIVIL GRAND JURY CONCERNS ON YOUTH AND DRUGS**

Dear Board Members:

Since the publication and release of the Civil Grand Jury Report on "Youth and Substance Abuse" in January, we have received a great amount of feedback - most of it favorable and in agreement with our findings and recommendations. It is generally regarded as a beginning, and seems to have opened many eyes to issues that have been well known, for a long time, to health service providers throughout the county. A residential treatment facility for youth is one of those major needs.

It is encouraging that in-county residential treatment facilities will soon be available for probation youth. We hope that comparable facilities will be forthcoming for non-system youth. To that end, we wish to extend Civil Grand Jury support to the Health Services Agency and their request for proposal which is to be discussed at the May 18th meeting.

The Civil Grand Jury is generally pleased with the attention being given to the above and several other youth drug related items, but disappointed in the Board of Corrections decision to deny the grant to renovate Juvenile Hall. As long as Santa Cruz County must have Juvenile Hall, it should be the best facility possible. We believe that is impossible to achieve under present conditions.

There are other items that have not yet received needed attention. The Civil Grand Jury will continue to identify youth drug related issues and to recommend steps toward potential solutions to the Board of Supervisors, and, as appropriate, County and City, agencies and departments. We thank the Board of Supervisors for inviting the Civil Grand Jury to participate in the discussion of these most important youth issues.

Sincerely yours,

Tom Sprague, Foreperson
Santa Cruz County Civil Grand Jury

cc: CAO, HSA