LOS ANGELES COUNTY
DEPARTMENT OF MENTAL HEALTH

REQUEST FOR STATEMENT OF QUALIFICATIONS (RFSQ)

FOR
MENTAL HEALTH SERVICES ACT SERVICES (MHSA) MASTER AGREEMENT

November 2005
Revised August 2010

PREAMBLE

For over a decade, the County has collaborated with its community partners to enhance the capacity of the health and human services system to improve the lives of children and families. These efforts require, as a fundamental expectation, that the County's contracting partners share the County and community's commitment to provide health and human services that support achievement of the County's vision, goals, values, and adopted outcomes. Key to these efforts is the integration of service delivery systems and the adoption of the Customer Service and Satisfaction Standards.

The County of Los Angeles' Vision is to improve the quality of life in the County by providing responsive, efficient, and high quality public services that promote the self-sufficiency, well-being and prosperity of individuals, families, businesses and communities. This philosophy of teamwork and collaboration is anchored in the shared values of:

- Responsiveness
- Professionalism
- Accountability
- Compassion
- Integrity
- Commitment
- A Can-Do Attitude
- Respect for Diversity

These shared values are encompassed in the County Mission to enrich lives through effective and caring service and the County Strategic Plan's eight goals: 1) Service Excellence; 2) Workforce Excellence; 3) Organizational Effectiveness; 4) Fiscal Responsibility; 5) Children and Families' Well-Being; 6) Community Services; 7) Health and Mental Health; and 8) Public Safety. Improving the well-being of children and families requires coordination, collaboration, and integration of services across functional and jurisdictional boundaries, by and between County departments/agencies, and community and contracting partners.

The basic conditions that represent the well-being we seek for all children and families in Los Angeles County are delineated in the following five outcomes, adopted by the Board of Supervisors in January 1993.

- Good Health;
- Economic Well-Being;
- Safety and Survival;
- Emotional and Social Well-Being; and
- Education and Workforce Readiness.

Recognizing no single strategy - in isolation - can achieve the County's outcomes of well-being for children and families, consensus has emerged among County and community leaders that making substantial improvements in integrating the County's health and human

services system is necessary to significantly move toward achieving these outcomes. The County has also established the following values and goals for guiding this effort to integrate the health and human services delivery system:

- ✔ Families are treated with respect in every encounter they have with the health, educational, and social services systems.
- ✔ Families can easily access a broad range of services to address their needs, build on their strengths, and achieve their goals.
- ✔ There is no "wrong door": wherever a family enters the system is the right place.
- ✔ Families receive services tailored to their unique situations and needs.
- ✔ Service providers and advocates involve families in the process of determining service plans, and proactively provide families with coordinated and comprehensive information, services, and resources.
- ✔ The County service system is flexible, able to respond to service demands for both the Countywide population and specific population groups.
- ✔ The County service system acts to strengthen communities, recognizing that just as individuals live in families, families live in communities.
- ✔ In supporting families and communities, County agencies work seamlessly with public and private service providers, community-based organizations, and other community partners.
- ✔ County agencies and their partners work together seamlessly to demonstrate substantial progress towards making the system more strength-based, family-focused, culturally-competent, accessible, user-friendly, responsive, cohesive, efficient, professional, and accountable.
- ✔ County agencies and their partners focus on administrative and operational enhancements to optimize the sharing of information, resources, and best practices while also protecting the privacy rights of families.
- ✔ County agencies and their partners pursue multi-disciplinary service delivery, a single service plan, staff development opportunities, infrastructure enhancements, customer service and satisfaction evaluation, and revenue maximization.
- ✔ County agencies and their partners create incentives to reinforce the direction toward service integration and a seamless service delivery system.
- ✔ The County human service system embraces a commitment to the disciplined pursuit of results accountability across systems. Specifically, any strategy designed

to improve the County human services system for children and families should ultimately be judged by whether it helps achieve the County's five outcomes for children and families: good health, economic well-being, safety and survival, emotional and social well-being, and education and workforce readiness.

The County, its clients, contracting partners, and the community will continue to work together to develop ways to make County services more accessible, customer friendly, better integrated, and outcome-focused. Several departments have identified shared themes in their strategic plans for achieving these goals including: making an effort to become more consumer/client-focused; valuing community partnerships and collaborations; emphasizing values and integrity; and using a strengths-based and multi-disciplinary team approach. County departments are also working to provide the Board of Supervisors and the community with a better understanding of how resources are being utilized, how well services are being provided, and what are the results of the services: is anyone better off?

The County of Los Angeles health and human service departments and their partners are working together to achieve the following *Customer Service And Satisfaction Standards* in support of improving outcomes for children and families.

Personal Service Delivery

The service delivery team – staff and volunteers – will treat customers and each other with courtesy, dignity, and respect.

- Introduce themselves by name
- Listen carefully and patiently to customers
- Be responsive to cultural and linguistic needs
- Explain procedures clearly
- Build on the strengths of families and communities

Service Access

Service providers will work proactively to facilitate customer access to services.

- Provide services as promptly as possible
- Provide clear directions and service information
- Outreach to the community and promote available services
- Involve families in service plan development
- Follow-up to ensure appropriate delivery of services

Service Environment

Service providers will deliver services in a clean, safe, and welcoming environment, which supports the effective delivery of services.

- Ensure a safe environment
- Ensure a professional atmosphere

- Display vision, mission, and values statements
- Provide a clean and comfortable waiting area
- Ensure privacy
- Post complaint and appeals procedures

The basis for all County health and human services contracts is the provision of the highest level of quality services that support improved outcomes for children and families. The County and its contracting partners must work together and share a commitment to achieve a common vision, goals, outcomes, and standards for providing services.

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REQUEST FOR STATEMENT OF QUALIFICATIONS (RFSQ)
MENTAL HEALTH SERVICES ACT SERVICES
TABLE OF CONTENTS

PART PAGE

1.0 GENERAL INFORMATION

1.1 Scope of Work 1
1.2 Overview of Solicitation Document 14
1.3 Proposer's Minimum Qualifications 15
1.4 New Firm Eligibility 22
1.5 MHSA Master Agreement Process 23
1.6 MHSA Master Agreement Term 24
1.7 County Rights & Responsibilities 24
1.8 Contact with County Personnel 24
1.9 Mandatory Requirement to Register on County's WebVen 24
1.10 Department Option to Reject SOQs 25
1.11 Protest Process 25
1.12 Notice to Proposer's Regarding Public Records Act 25
1.13 Indemnification and Insurance 26
1.14 SPARTA Program 26
1.15 Injury & Illness Prevention Program (IIPP) 26
1.16 Background and Security Investigations 26
1.17 Employee Acknowledgement and Confidentiality Agreement 27
1.18 Conflict of Interest 27
1.19 Determination of Proposer Responsibility 27
1.20 Proposer Debarment 29
1.21 Proposer's Adherence to County Child Support Compliance Program 31
1.22 Gratuities 31
1.23 Notice to Proposers Regarding the County Lobbyist Ordinance 31
1.24 Federal Earned Income Credit 32
1.25 Consideration of GAIN/GROW Participants for Employment 32

PART PAGE

1.26 County's Performance Standards and Outcome Measures 33
1.27 Recycled Bond Paper 34
1.28 Safely Surrendered Baby Law 34
1.29 County Policy on Doing Business with Small Business 34
1.30 Jury Service Program 35
1.31 Local Small Business Enterprise Preference Program 36
1.32 Contractor's Obligations Under the Federal Health Insurance Portability and Accountability Act (HIPAA) 37
1.33 Subcontracting 37
1.34 Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions (45 C.F.R. Part 76) 37
1.35 Contractor's Exclusion from Participation in a Federally Funded 38
1.36 Proposer's Charitable Contributions Compliance 39
1.37 Transitional Job Opportunities Preference Program 40
1.38 Notification to County of Pending Acquisitions/Mergers by Proposer 40
1.39 Defaulted Property Tax Reduction Program 41

2.0 INSTRUCTIONS TO PROPOSERS

2.1 County Responsibility 42
2.2 Truth and Accuracy of Representations 42
2.3 RFSQ Timetable 42
2.4 Solicitation Requirements Review 43
2.5 Proposers' Questions 43
2.6 Preparation and Format of the Statement of Qualifications (SOQ) 44
2.7 SOQ Submission 48
2.8 Acceptance of Terms and Conditions of Master Agreement 49
2.9 SOQ Withdrawals 49

3.0 SOQ REVIEW/SELECTION/QUALIFICATION PROCESS

3.1 Review Process 50
3.2 Disqualification Review 51
3.3 Selection/Qualification Process 52
3.4 Master Agreement Award 52

APPENDICES:

APPENDIX A: Required Forms

Exhibit 1 Contractor's Organization Questionnaire

Exhibit 2 Certification of No Conflict of Interest

Exhibit 3 Vendor's EEO Certification

Exhibit 4 LA County Community Business Enterprise Program – Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

Exhibit 5 Familiarity with the County Lobbyist Ordinance Certification

Exhibit 6 Prospective Contractor List of Contracts

Exhibit 7 Prospective Contractor References

Exhibit 8 Attestation of Willingness to Consider GAIN/GROW Participants

Exhibit 9 Los Angeles County Contractor Employee Jury Service Program – Certification Form & Application for Exception

Exhibit 10 Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tiered Covered Transactions (45 C.F.R. Part 76)

Exhibit 11 Charitable Contributions Certification

Exhibit 12 Certification of Compliance with the County's Defaulted Property Tax Reduction Program

APPENDIX B: Transmittal Form to Request a Solicitation Requirements Review

APPENDIX C: Los Angeles Policy On Doing Business With Small Business

APPENDIX D: Jury Service Ordinance

APPENDIX E: Listing of Contractors Debarred in Los Angeles County

APPENDIX F: IRS Notice 1015

APPENDIX G: Safely Surrendered Baby Law

APPENDIX H-A: MHSA Master Agreement/Amendment

APPENDIX H-1: MHSA Master Amendment Attachment 1 - Definitions

APPENDIX I: Statement of Qualifications (Short Form)

APPENDIX J: Transitional Job Opportunities Preference Program

APPENDIX K: Defaulted Property Tax Reduction Program

1.0 GENERAL INFORMATION

1.1 Scope of Work

The County of Los Angeles, Department of Mental Health (DMH) hereby issues to Proposers this revised Request for Statement of Qualifications (RFSQ) that now incorporates the original RFSQ and previously issued Addenda One (1) through ten (10), the deletion of any reference to Safe Haven and Family Crisis Services/Respite Care services, and the addition of an evaluation component to the Innovations (INN) Plan, to solicit Statements of Qualifications (SOQ) responses that will be used to qualify multiple contractors to enter into a Master Agreement with the County to provide mental health services in accordance with the Mental Health Services Act (MHSA).

The MHSA, adopted by the California electorate on November 2, 2004, created a new permanent revenue source, administered by the State Department of Mental Health (SDMH), for the transformation and expanded delivery of mental health services provided by State and county agencies and requires the development of integrated plans for prevention, innovation, and system of care services. Funding provided through the MHSA has been used to transform the current mental health system from one that focuses primarily on clinical services into one in which DMH can partner with clients, their families and their communities to provide, under client and family direction, whatever it takes to enable people to attain their goals toward recovery.

The MHSA requires that each county mental health program prepare and submit a three-year plan for approval by the SDMH after review and comment by the State's Oversight and Accountability Commission. The DMH Community Services and Supports (CSS) Plan was the first of (5) five distinct substantive plans that was developed and submitted to SDMH on October 12, 2005, and approved on February 14, 2006, allowing the access to available MHSA funding beginning in Fiscal Year 2005-06 and continuing onward. Three (3) other plans – the Workforce Education and Training (WET) Plan, the Prevention and Early Intervention (PEI) Plan, and the INN Plan - were approved by SDMH on April 8, 2009, August 27, 2009, and February 2, 2010, respectively. As services continue to be developed under the CSS, WET, PEI, INN, and/or other plans, the scope of work and minimum requirements of this RFSQ will be revised accordingly through addenda to this RFSQ.

1.1.1 Community Services and Supports (CSS) Plan:

The CSS Plan focuses on children and families, transition age youth (TAY), adults, and older adults who have the most severe and persistent mental illnesses or serious emotional disturbances including those who are at risk of homelessness, jail, or being put or kept in other institutions because of their mental illness. It is founded on several fundamental commitments that include: (1) promoting recovery for all who struggle with mental health issues; (2) achieving positive outcomes for all who receive mental health services; (3) delivering services in culturally appropriate ways, honoring the difference within communities; and (4) insuring that services are delivered in ways that address disparities in access to services, particularly disparities affecting ethnic and cultural communities.

The CSS Plan is intended to provide services to people in our communities who are most severely challenged by mental health issues, including adults and older adults with severe and persistent mental illnesses, and children and youth suffering from severe emotional disturbances. The following are identified as priority focal age groups to receive services:

1. **Children (0 to 15)** with severe emotional disturbances and their families who:
   - Have been or are at risk of being removed from their homes by the County;
   - Are in families affected by substance abuse issues;
   - Are experiencing extreme behaviors at school; or
   - Are involved with Probation.
2. **TAY (16-25)** suffering from severe mental health issues, who are:
   - Struggling with substance abuse disorders;
   - Homeless or at-risk of becoming homeless;
   - Aging out of the children's mental health, child welfare, or juvenile justice system;
   - Leaving long-term institutional care; or
   - Experiencing their first psychotic break.
3. **Adults (26-59)** who have severe and persistent mental illness and who:
   - Are suffering from substance abuse or other co-occurring disorders, and/or who have suffered trauma;
   - Are homeless;

- Are in jail;
- Are frequent users of hospitals and emergency rooms;
- Are cycling through different institutional and involuntary settings; or
- Are being cared for by families outside of any institutional setting.

4. **Older Adults (60 years+)** who have severe and persistent mental illness and who are:
   - Not currently being served and have reduced functioning;
   - Homeless or at risk of being homeless;
   - Institutionalized, or at risk of being institutionalized; or
   - In nursing homes, or receiving hospital or emergency room services.

The CSS Plan must also provide help to ethnic and racial communities and other communities having difficulty getting the help they need for themselves or their families when they have serious mental health issues.

The CSS Plan must provide the following categories of services designed to promote recovery and wellness for adults and older adults with severe mental illness and resiliency for children and youth with serious emotional disorders and their families:

1. **Full Service Partnerships (FSP)** in which people create their own plans for recovery with support from professionals and peers, and receive traditional mental health services as well as a wide array of other services – e.g., housing services, employment services, peer support services, substance abuse treatment services, recreational or other therapeutic services and 24/7 support to make their plan a reality.

   As a component of Enhanced Specialized Foster Care mental health services, the FSP category of service shall be expanded for children ages 0-15, and transition-age youth (TAY) ages 16-25 in Service Areas One (1), Six (6), and Seven (7) to include intensive in-home services to children in out-of-home care that are seriously emotionally disturbed (SED). The primary targets for intensive in-home services are SED children and TAY in congregate care or D-rate foster homes. Intensive in-home services represent a set of clinical interventions that minimally include: family teams, comprehensive strength-based assessments, 24/7 crisis services, intensive case management, supportive services and integrated treatment for co-occurring mental health and substance abuse disorders.

Enhanced Specialized Foster Care mental health services are based on a system of care model that assures mental health screening and assessment, as well as individualized, specialized, and evidence-based mental health services, including intensive in-home services that are tailored to the unique needs of Department of Children and Family Services (DCFS) identified and involved children/youth to enable them to remain with their families or return more quickly to a permanent family home. Examples of intensive in-home services include a combination of evidence-based practices, such as multi-dimensional treatment foster care, multi-systemic therapy, and intensive case management.

Enhanced Specialized Foster Care mental health services have the following goals: 1) improve coordination between child welfare and mental health efforts on behalf of dependent children/youth/ 2) improve identification of need and access to mental health service for children/youth in the child welfare system; 3) expand the availability of specialized and intensive in-home mental health services for DCFS-involved children/youth; 4) reduce reliance on out-of-home and congregate care settings for children'/youth with emotional and behavioral problems; 5) reduce timelines to permanency for children/youth identified as in need of mental health services; 6) reduce placement disruptions as a result of emotional and behavioral problems; and 7) improve day-to-day functioning of children/youth in essential life domains, (e.g. emotional/behavioral well-being, support relationships, safety and stability, placement stability, etc.)

2. **Housing and residential services**, including temporary, supportive and permanent housing.
3. **Peer support, peer counseling, and peer mentoring**.
4. **Counseling, assessment, and other traditional mental health services**.
5. **Alternative crisis services** to help people stay out of emergency rooms or other institutions and involuntary settings.
6. **Bridging and support services** to help people find supports they need in their communities.
7. **Outreach and engagement services.**
8. **IMD Step-Down program services** that provide on-site mental health and supportive services in Adult Residential Facilities (ARF), assisted living, congregate housing, or other independent living situations for adults, age 18 or above who are

ready for discharge from Institutions for Mental Disease (IMD) and higher levels of care.

9. **Drop-In Centers** are intended as entry points to the mental health system for TAY who are living on the street or in unstable living situations. Drop-In Centers provide "low-demand, high-tolerance" environments in which youth can find temporary safety and basic supports (e.g. showers, meals, clothing, referrals, vouchers, etc). TAY accessing Drop-In Centers have an opportunity to build trusting relationships with staff persons who can, as the youth is ready and willing, connect them to the services and supports they need in order to work toward stability/recovery.

   Drop-In Centers are currently operated during normal business hours. However, MHSA dollars are designated for the primary purpose of extending hours of operation and thus increasing access to basic supports through Outreach and Engagement activities.

10. **Housing – Emergency Vouchers and Project-based Subsidies** provide a fundamental level of stability which is essential to TAY who are Seriously Emotionally Disturbed (SED) and/or Severely and Persistently Mentally Ill (SPMI) achieving their goals of wellness and recovery. The current lack of safe and affordable housing options which includes short-term, long-term, and permanent housing has been a profound barrier for these youth reaching and maintaining an independent and self-sufficient lifestyle.

    A. Vouchers for Emergency Housing will provide safe emergency shelter for TAY up to a maximum stay of 20 nights. DMH will serve as gatekeeper and issue vouchers for shelter services through its TAY system navigators, housing specialists, and other approved staff.

    B. Project-based subsidies linked to housing units involve contractors interested in developing, renovating, and designating long-term permanent housing for SED and SPMI TAY. These long-term investments are leveraged with other public and private funds to develop permanent housing sites. Ideally, supportive mental health and other services are made available on-site to high-risk (e.g. youth transitioning out of long-term institutional settings) and moderately high-risk youth.

11. **Integrated Services for Co-occurring Mental Health and Substance Abuse Disorders** (COD) is a program intended to provide a developmentally appropriate, coordinated and integrated approach to treating children/youth and/or their caregivers with COD. The program will offer a full continuum of services to meet treatment needs and establish other service linkages to help maintain and sustain the child's/youth's recovery. Fully integrated COD models and modules will address both children/youth and/or caregivers with CODs, as well as children without CODs that have a caregiver with COD.

    DMH seeks a qualified contractor to develop for FSP providers and for non-FSP providers a coordinated and integrated approach to treating children/youth 0-15 and/or their caregivers with COD. The contractor will also develop and implement a comprehensive COD curriculum that includes intensive training for mental health and substance abuse treatment personnel on best practices in preventing and treating persons with COD.

    In addition, the contractor will maintain COD treatment competence system-wide by providing intensive ongoing trainings that include practicum experiences and supervision by experts in the field. Trainers from organizations that are within and outside the DMH system and who have knowledge and experience working with persons with COD, specifically with ethnic and racial minority populations that do not access DMH services will be utilized.

12. **Probation Camp Services** for TAY in the Los Angeles County Juvenile Probation Camps are critical to assisting this portion of the TAY population (generally 14 -18 years old) with mental health needs who may be seriously emotionally disturbed (SED). Some youth, at first glance, do not seem to have mental health difficulties; however often upon or shortly after sentencing to the Camps these youth begin to display an array of mental health along with/without co-occurring substance abuse problems.

    DMH will create multi-disciplinary treatment intervention teams inclusive of parent advocates, probation staff, clinicians, substance abuse counselors, psychiatrists, and aftercare specialists. These teams will be comprised of directly-operated and contract agency staff. These teams will deliver an array of services based on the individualized needs of incarcerated youth. Services will include screening, assessment for mental illness and co-occurring substance

abuse, treatment planning, clinical interventions including gender-specific interventions, parent support/education, and linkage back to community and family resources.

Probation Camps operate seven (7) days a week, therefore proposers must be able to deliver services beyond the normal business hours on weekdays and weekends.

13. **Wellness Center/Client-Run Centers** are two distinct treatment and support options for clients at higher stages of recovery who require less professional care and greater degrees of self-directed, peer support services geared toward community reintegration and an eventual exit from the formal mental health system. Activities, services and supports focus on relapse prevention, healthy living, maintaining or obtaining independent living and employment and wellness recovery action planning.
14. **Professional Development and Consultation Program for Integrated Services for Co-occurring Mental and Substance Abuse Disorders (COD) and Human Immunodeficienty Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS for priority focal age groups – children (0-15), TAY (16-25), adults (26-59), and older adults (60+)** will have the following goals: 1) transform the existing mental health service delivery system to meet the needs of these priority age groups on an ongoing basis; and 2) ensure that existing staff of directly-operated and contracted programs develop core competence skills in the identification, treatment, and recovery of COD and HIV/AIDS clients across all priority focal age groups.
15. **The Older Adult Certificate Training Program** is intended to increase the capacity of the public mental health system to deliver the most effective mental health service that promote recovery and wellness to the older adult population, ages sixty (60) and above. It will address the unique development, physical, social, and emotional needs of the older adult population and will provide 100 hours of training resulting in a university granted certificate of completion.
16. **Under-Represented Ethnic Populations (UREP)**: One of the cornerstones of the MHSA is to empower and expand services to include culturally and linguistically competent approaches to ethnic communities that have been historically marginalized by the mental health system and to give them a voice in the stakeholder process. Such UREP includes the following five (5) populations:

African American/African Immigrant, American Indian, Asian Pacific Islander, Eastern European/Middle Eastern, and Latino.

Therefore, the UREP program seeks to expand outreach and increase participation in the MHSA planning to each of the UREP communities thereby drawing on the collective wisdom and experience of community members to determine the greatest needs and priorities in their communities in order to reduce disparities and improve access to mental health care for under-represented ethnic communities.

From February 2006, the date DMH began receiving CSS funds following the State's review of the CSS Plan, through June 2008, the timeframe for this first CSS Plan, DMH estimated that these services reached:

- 9,550 children and their families;
- 11,431 TAY and their families;
- 24,180 adults; and
- 7,296 older adults.

Additionally, DMH projected that:

- 59,323 adults, TAY and their families, older adults, and children and their families would receive alternative crisis services;
- 18,710 children and their families, TAY and their families, adults, and older adults would receive help finding the community based supports and services they need; and

45,000 children and their families, TAY and their families, adults, and older adults would learn more about mental health issues, the MHSA, and how to get involved.

1.1.2 Workforce Education and Training (WET) Plan:

The WET Plan addresses the serious shortage of mental health service providers in Los Angeles County. It also addresses the education, training, recruitment, and retention needs of the present and future public mental health workforce. The Plan's objective is to increase the current mental health workforce with qualified individuals as well as support employment of consumers, family members and parent advocates in the mental health system. These objectives are intended to augment the delivery of services under DMH's implemented MHSA Community Services and Supports CSS Plan and other services being developed under the MHSA PEI Plan.

The WET Plan carries forth the vision of the MHSA to create a transformed, culturally-competent system that promotes wellness and recovery for adults and older adults with severe mental illness, and resiliency for children and youth with serious emotional disorders and their families. The WET Plan provides the means for developing and maintaining a culturally competent workforce, which is capable of providing client and family-driven services and lead to measurable, values-driven outcomes.

Furthermore, the objectives presented in this WET Plan are intended to develop a mental health workforce trained to provide services to an ethnically and linguistically diverse population across the lifespan that can respond to the unique needs of children and youth, transition aged youth, adults and especially those older adults, who comprise an increasing percentage of the overall population.

Regional Partnership (as part of WET):

The Regional Partnership is intended to identify, develop, and facilitate collaborative relationships between the academic research community and the public mental health system in Los Angeles County. Broad goals include: 1) to facilitate the adoption and adaptation of Evidence-Based Practices (EBPs) developed in the academic community into mainstream public mental health care, and 2) to gain the support and participation of the academic research community in conducting research and evaluation activities on topics of particular interest to the Department. Academic and community partnership activities may include, but are not limited to evaluating the education, training, implementation, and impact of cognitive behavioral treatments, EBPs, and MHSA related interventions and initiatives as related to mental health recovery and resilience.

1.1.3 The Prevention and Early Intervention (PEI) Plan:

The PEI Plan is intended to engage persons prior to the development of serious mental illness or serious emotional disturbance or, in the case of early intervention, alleviate the need for additional mental health treatment and/or transition to extended mental health treatment.

The priority populations are underserved cultural populations, individuals experiencing onset of serious psychiatric illness, children and youth in stressed families, trauma-exposed individuals, children and youth at risk for school failure, and children and youth at risk of or experiencing juvenile justice involvement.

Key community mental health needs that will be addressed are disparities in access to services; psycho-social impact of trauma; at-risk children, youth, and young adults; stigma and discrimination; and suicide risk.

Prevention in mental health involves reducing risk factors or stressors, building protective factors and skills, and increasing support. Prevention promotes positive cognitive, social and emotional development and encourages a state of well-being that allows that individual to function well in the face of changing and sometimes challenging circumstances.

Early Intervention is directed toward individuals and families for whom a short duration (usually less than one year) and relatively low-intensity intervention is appropriate to measurably improve a mental health problem or concern very early in its manifestation, thereby avoiding the need for more extensive mental health treatment or services or preventing a mental health problem from getting worse.

1.1.4 Innovations (INN) Plan

The MHSA INN Plan is the final MHSA plan to be implemented in Los Angeles County. The plan is focused on identifying new practices for the primary goal of learning and increasing the array of creative and effective approaches that can be applied to mental health services for specified populations. Given that the primary focus of INN funding is improving practice through learning, INN funded projects should seek to further develop: (1) novel, creative and/or ingenious mental health practices and approaches that contribute to learning; (2) mental health practices and approaches through a community informed process that are representative of the communities to be served, especially unserved, underserved and inappropriately served communities; and (3) new mental health practices and approaches that can be replicated and adapted to other populations and other counties if proven successful with specific populations. DMH and its stakeholders developed four models of integration based on an extensive community participation process that generated learning goals and innovative strategies that are salient to the communities and providers in Los Angeles County. The four (4) Integrations models are: **1) Integrated Clinic Model; 2) Integrated Mobile Health Team Model; 3) Community-Designed Integrated Service Management Model; and 4) Integrated Peer-Run Model**. These four (4) proposed models will enable DMH to increase the quality of services and improve outcomes for consumers, promote community collaboration, integrate health, mental health and substance abuse services

while healing system fragmentation which is a major impediment to service quality and good outcomes.

As a component of the INN Plan, DMH seeks a qualified contractor to evaluate the four (4) Integration models and to determine the success of the models. The evaluation of these four (4) models will involve the development of a methodology for the collection of common data elements across the four (4) models as well as model-specific data elements, the development of a data reporting structure allowing each contract provider to enter and transmit outcome measures at intervals specified by DMH, and the analysis and report generation of the outcome measures submitted in a format specified by DMH.

1.2 Overview of Solicitation Document

This RFSQ is composed of the following parts:

- **GENERAL INFORMATION:** Including the Proposer's minimum qualifications, information regarding some of the requirements of the MHSA Master Agreement, and an explanation of the solicitation process.
- **INSTRUCTIONS TO PROPOSERS:** Contains instructions in how a Proposer should prepare and submit a SOQ.
- **SOQ REVIEW/SELECTION/QUALIFICATION PROCESS:** Contains information on how the SOQ will be reviewed, selected and qualified.
- **APPENDICES:**
  - **A REQUIRED FORMS:** Forms 1 through 12 contained in this Section must be completed and included in the SOQ.
  - **B TRANSMITTAL FORM TO REQUEST A SOLICITATION REQUIREMENTS REVIEW**
  - **C COUNTY OF LOS ANGELES POLICY OF DOING BUSINESS WITH SMALL BUSINESS**
  - **D JURY SERVICE ORDINANCE**
  - **E LISTING OF CONTRACTORS DEBARRED IN LOS ANGELES COUNTY**
  - **F IRS NOTICE 1015:** Provides information on Federal Earned Income Credit
  - **G SAFELY SURRENDERED BABY LAW**
  - **H-A MHSA MASTER AGREEMENT**

- **I SOQ (Shortened Form, if applicable)**
- **J Transitional Job Opportunities Preference Program**
- **K Defaulted Property Tax**

1.3 Proposer's Minimum Qualifications for the RFSQ:

1.3.1 Proposers must have recent experience providing culturally and linguistically appropriate mental health services to children and/or adults as detailed in this Section's Paragraph 1.1 (Scope of Work), categories of services. Proposers with experience in FSP programs services must submit as part of its SOQ, a program narrative not exceeding two (2) pages demonstrating that Proposer meets the following requirements by focal age groups (Children, TAY, Adults, and/or Older Adults):

1. **Full Service Partnerships (FSP)** that are culturally competent and shall include individualized client/family driven mental health services (traditional mental health services as well as a wide array of other services) and supports plans, which offer integrated service experiences for clients and families. As a component of Enhanced Specialized Foster Care mental health services, FSPs in Service Areas One (1), Six (6), and Seven (7) are expanded to include intensive in-home services for SED children and TAY in congregate care or D-Rate foster homes.
   A. Proposers must demonstrate that they have experience in the delivery of FSP types of programs with successful outcomes; **or**
   B. Proposers must demonstrate that they have significant recent experience in the delivery of FSP type programs with one or more of the identified focal age groups, but have not had sufficient time to demonstrate successful outcomes; **or**
   C. Proposers must demonstrate they have experience in the delivery of services to children pre-natal to 5, to TAY, and/or to older adults. Such services may not have involved FSP type programs, but Proposers demonstrate a readiness to immediately implement a FSP program; **or**
   D. Proposers must demonstrate they have experience in the delivery of specialized integrated interventions – for example, for individuals and families with co-occurring mental health and substance abuse disorders. Such Proposers have current experience working with the County Mental

Health system and demonstrate a readiness to immediately implement a FSP program.

2. **IMD Step-Down** programs provide on-site mental health and supportive services in Adult Residential Facilities (ARF), assisted living, congregate housing or other independent living situations for adults, age 18 or above, who are ready for discharge from IMDs and higher levels of care.
   A. Proposers must have demonstrated experience in the delivery of services for individuals residing in IMDs or IMD Step-Down types of programs, **and**
   B. Proposers must have the ability to provide on-site mental health and supportive services in a community setting that promotes recovery and wellness, and augments the utilization of community resources and programs, **and**
   C. Proposers must be able to provide a safe and pleasant living environment that meets community licensing requirements and standards when applicable.
3. **Drop-In Centers** are entry points to the mental health system for TAY who are living on the street or in unstable living situations. Proposers must have the following experience:
   A. Proposers must have a minimum three (3) years of recent experience providing services to homeless TAY, **and**
   B. Proposers must demonstrate an ability to deliver an array of basic support services to the TAY population in "low-demand, high tolerance" environments, **and**
   C. Proposers must demonstrated an ability to provide secure and supervised setting for youth for extended hours including nights, weekends, and holidays, **and**
   D. Proposers must demonstrate an ability to partner with other community-based agencies that provide a continuum of human services for the TAY population.
4. **Housing for TAY includes Emergency Vouchers and Project-based Subsidies** linked to housing units. Proposers must have the following experience for Vouchers for Emergency Housing:

A. Proposers must demonstrate an ability to provide a clean, safe, and secured shelter setting to homeless and/or at risk of homeless youth/young adults who are otherwise capable of living independently in a community setting, **and**

B. Proposers must have a minimum 1 year experience providing housing and/or basic support services to TAY, **and**

C. Proposers must have the ability to provide 24-hour access to an on-site facility manager or staff knowledgeable about the TAY population.

Proposers must have the following experience for **Project-based Subsidies** linked to housing units:

A. Proposers must demonstrate an ability and successful track record e.g. having completed at least one project, similar to the project being proposed, in partnership and/or collaboration with public-private funding sources designated for long-term permanent housing for individuals with mental and/or other disabilities. Proposers with less than this threshold can partner with other development entities who have completed at least one project which meets these criteria, **and**

B. Proposers must demonstrate an ability to provide or arrange for an array of supportive mental health and other services on-site for high-risk and/or moderately high-risk youth, **and**

C. Proposers must demonstrate an ability to develop the housing with minimal County staff support, **and**

D. Proposers must not have a record of violation of affordability, regulatory agreements, or discrimination with the County of Los Angeles, other public agencies, or other housing agencies.

5. **Integrated Services for Mental Health and Substance Abuse Disorders,** a program intended to provide a developmentally appropriate, coordinated and integrated approach to treating children/youth and/or their caregivers with COD. The program will offer a full continuum of services to meet treatment needs and establish other service linkages to help maintain and sustain the child's/youth's recovery. Fully integrated COD models and modules will address both children/youth and/or caregivers with CODs, as

well as children without CODs that have a caregiver with COD. Proposers must have the following experience:

A. Successfully researched, developed and implemented a comprehensive training program for mental health service providers for the integration of substance abuse and mental health treatment with children/youth 0-15 and/or their caregivers with COD **or** a similar training program in subject matter and scope, **and**

B. Successfully identified and utilized trainers from organizations that are within and outside the DMH system who have knowledge and experience working with persons with COD, specifically with ethnic and racial minority populations that do not access DMH services.

6. **Probation Camp Services** in the Los Angeles County Juvenile Probation Camps are critical to assist this portion of the TAY population with mental health needs who may be SED. Proposers must have the following experience:

A. Proposers must have a minimum three (3) years of recent experience providing mental health assessment and treatment services to youth involved in the Juvenile Justice systems either in Probation Camps, Juvenile Halls, or in the community, **and**

B. Proposers must have a minimum two (2) years of recent experience providing substance abuse assessment and treatment services to the TAY population ages 16 – 21, **and**

C. Proposers must be able to demonstrate knowledge of multidisciplinary team collaboration and ability to provide skilled, trained, licensed/licensed eligible staff to serve as integrated members of multidisciplinary teams, **and**

D. Proposers must demonstrate knowledge and experience in the application of recovery principles when providing mental health services, **and**

E. Proposers must demonstrate capacity to conduct Department of Justice (DOJ) background checks, **and**

F. Proposers must demonstrate ability to engage family and peer support in the provision of services for mental health and co-occurring substance abuse.

7. **Professional Development and Consultation Program for Integrated Services for COD and HIV/AIDS for all priority focal age groups:**

   A. Proposers must provide evidence of current status as a public or private organization in good standing with the County of Los Angeles, the State of California, and the Federal government; **and**

   B. Proposers must document five (5) current consecutive years of experience in providing an ongoing consultation and professional development program for the integration of COD and HIV/AIDS services for Federal, State of California, and/or County agencies. Proposers must also document a sufficient administrative infrastructure in place to conduct ongoing, multiple consultation and professional development sessions concurrently in Los Angeles Count; **and**

   C. Proposers must document five (5) concurrent consecutive years of experience in the development, provision, and monitoring of an in-house consultation and professional development program that addresses: pharmacotherapy; behavioral and psychotherapy techniques, combinations of medications and psychotherapy methods; medical knowledge relevant to COD and HIV/AIDs; delivery of appropriate wraparound social and other recovery support services. This program will address issues related to persons with or at risk for developing COD, HIV/AIDS, Hepatitis C, and other infectious diseases, who are homeless, who have been extensively involved in the criminal justice system, who may be impacted by trauma, who have a history of psychiatric inpatient treatment, and who are difficult to treat.

8. **Older Adult Certified Training Program** will include two components: (a) development of a comprehensive training curriculum that will enable clinicians to appropriately evaluate, assess, diagnose and treat the serious mental health disorders commonly found in older adults, age sixty (60) and

above; and (b) delivery of a one hundred (100) hour training program, based upon the curriculum above, that will provide continuing education units (CEUs) applicable to the California Boards of Nursing, Behavioral Sciences and Psychology, and for which successful completion results in a university granted certificate of completion. Proposers must meet the following minimum requirements:

A. Proposers must have all applicable licenses, permits, registrations, accreditations and certificates as required by all Federal, State, and local ordinances, rules, regulations, manuals, guidelines, and directives which are applicable to services referenced in the Request for Services, **and**

B. Proposers must have experience in curriculum development and teaching of college or university classes substantially similar to the scope of courses required in the Statement of Work, **and**

C. Proposers must have the ability to offer continuing education units (CEUs) that are approved by each of the following:

- California Board of Registered Nursing
- California Board of Behavioral Sciences
- California Board of Psychology

9. **Innovation Plan (INN) Evaluation Component services** will involve the development of a methodology for the collection of common data elements will be critical in evaluating the success of the analyzing the 4 INN models.

Proposers must have the following experience:

A. Proposers must have a minimum of three (3) years experience in working with public mental health system(s), and

B. Proposers must have a minimum of five (5) years recent and extensive experience, including the completion of at least one (1) project, in the evaluation of multi-site projects in the health and/or mental health system, involving 1) the selection of measures and 2) the development and implementation of data collection methodology, data analysis, and reporting.

C. Proposers must demonstrate they have recent and extensive experience by submitting as part of their SOQ, a summary of an evaluation of a multi-site project involving a health and/or mental health system, including a description of the project goals, evaluation tool used, and a summary of the project findings/outcomes.

1.3.2 Proposers must provide at least five (5) references (Appendix A-7) relating to the same or similar scope of services provided within the last three (3) years. It is desirable that one reference be from a public entity.

1.3.3 Proposers must comply with the SOQ format and requirements, be properly organized regarding content and sequence, and contain all forms contained in Appendix A and as required in Section 2 (Instructions to Proposers), Paragraph 2.6 (Preparation and Format of the SOQ,) and Paragraph 2.7 (SOQ Submission), of this RFSQ.

1.3.4 Proposers must respond positively to a willingness to hire GAIN/GROW participants. (Section 1 (General Information), Paragraph 1.25 (Consideration of GAIN/GROW Participants for Employment).

1.3.5 Proposers must comply with the County's Child Support Compliance Program. (Section 1 (General Information), Paragraph 1.21 (Proposer's Adherence to County Child Support Compliance Program).

1.3.6 Proposers must certify intent to comply with the County's Jury Service Program. (Section 1 (General Information) Paragraph 1.30 (Jury Service Program).

1.3.7 Proposers must have the ability to comply with all insurance provisions as set forth in Section 8.2 (General Provisions for all Insurance Coverage), and Section 8.3 (Insurance Coverage), of the MHSA Master Agreement in Appendix H-A of this RFSQ.

1.3.8 Proposers must be financially viable, proof of which is determined by the review of the most current and prior two (2) fiscal years financial statement, including a profit and loss/revenue and expenditure statements and balance sheet as prepared by a third party Certified Public Accountant that must be submitted as part of the SOQ. Proposers with average Annual Operating Revenues based on the following parameters shall submit either compiled, reviewed, or audited financial statements:

- o Compiled financial statements for Proposers with annual operating revenues averaging up to $49,999,
- o Reviewed financial statements for Proposers with annual operating revenues averaging from $50,000 - $499,999,
- o Audited financial statements for Proposers with annual operating revenues averaging $500,000 or more.

Proposers may be exempt from submitting financial statements based on DMH's revised policy on Prospective Contractors waived from Financial Responsibility Requirements. The list of exceptions when a contractor is not required to submit financial statements when responding to a DMH solicitation include, but are not limited to the following:

- Prospective contractors who are not engaged in rendering any direct mental health client care, such that they demonstrate all of the following:
  1. Do not have the Legal Entity Agreement contract format; and
  2. Will be paid in arrears; and
  3. In the event a contract is awarded and then subsequently disrupted or terminated, such disruption or termination would not have a detrimental impact to DMH's service delivery system or its client populations; or
- School Districts.

1.3.9 Proposers with existing contracts in effect with DMH shall be considered to have met and satisfied financial viability and are not required to include financial statements identified in this Section of their SOQ submission package.

1.3.10 Even if a proposer currently has a Settlement Agreement with DMH, the proposer will be eligible to submit a SOQ and can be selected to be on the Master Agreement list; however, there will be a moratorium on expansion and/or implementation of any new programs for proposers with Settlement Agreements during the repayment period. Any exemption from this penalty will require justification that this restriction will negatively impact planned program services.

1.4 New Firm Eligibility

If a Proposer organization has been independently in business and has not yet completed, in its current entity, sufficient qualifying experience to meet the minimum requirements, the Proposer may substitute recent engagements which otherwise satisfy all professional and experiential requirements, which have been performed by, at most,

two of the Proposer's principals, partners, or officers while in other organizations. If doing so, the Proposer must explicitly state that it has been in business as a separate entity and that its submissions are intended to qualify it under "Provisions for New Firms".

1.5 MHSA Master Agreement Process

The objective of this RFSQ process is to secure one or more qualified Proposers to provide mental health services as detailed in DMH's CSS Plan in accordance with the MHSA. Specific tasks, deliverables, etc. will be determined at the time DMH requests MHSA Statement of Work (SOW) bids through a Request for Services (RFS) process.

1.5.1 MHSA Master Agreement for new contractors or Master Agreement Amendments for existing DMH contractors will be executed with all Proposers determined to be qualified for various categories, including service categories, focal age groups, and service areas.

1.5.2 Upon DMH's execution of the MHSA Master Agreement or Master Agreement Amendment, qualified Proposers will become County MHSA Contractors. Thereafter MHSA Contractors, depending on demonstrated qualifications, in one or more areas that include Service Categories, Service Area(s), and Focal Age Groups, will from time to time be solicited under competitive conditions of a RFS to provide as needed mental health services in accordance specific MHSA SOW under Master Agreement amendments to be issued by DMH. The only compensation made to eligible Contractors under the MHSA Master Agreement or Master Agreement Amendments will be through satisfactory work performed as defined in the MHSA SOWs.

1.5.3 Amendments shall include an SOW Exhibit which shall describe in detail the particular project and the work required for the performance thereof. Payment for all work shall be described in the SOW and be on an actual cost, unit of service, or fixed price per deliverable basis, and subject to the Total Maximum Amount specified on each individual SOW Exhibit. The execution of a MHSA Master Agreement or Master Agreement Amendment does not guarantee a Contractor any minimum amount of business.

1.5.4 RFS solicitations for work defined in MHSA SOWs may be available through a variety of sources including, but not limited to, mail, internet or telephone or facsimile (fax). Access will be conditioned on the service categories, focal age

group(s), and/or service area(s) for which each eligible MHSA Contractor has satisfactorily demonstrated its qualifications, pursuant to the rules of this RFSQ. The Department's release of RFS solicitations will be at the County's sole discretion.

1.6 MHSA Master Agreement Term

The term of MHSA Master Agreements awarded under this RFSQ shall be in accordance with Appendix H-A, MHSA Master Agreement, Section 4.0 Term of Master Agreement. The original Agreement was effective through June 30, 2006, with two (2) – one (1) year renewal option(s). A Renewal option extended the term of the Master Agreement for up to three (3) years to June 30, 2011; additional renewal options will be at DMH's discretion. Contractors added to this MHSA Master Agreement will have the same contract term.

1.7 County Rights & Responsibilities

The County has the right to amend the RFSQ by written addendum. The County is responsible only for that which is expressly stated in the RFSQ document and any authorized written addenda thereto. Such addendum shall be made available to each person or organization which County records indicate has received this RFSQ. Should such addendum require additional information not previously requested, failure to address the requirements of such addendum may result in the SOQ not being considered, as determined in the sole discretion of the County. The County is not responsible for and shall not be bound by any representations otherwise made by any individual acting or purporting to act on its behalf.

1.8 Contact with County Personnel

Any contact regarding this RFSQ or any matter relating thereto must be in writing and may be mailed, e-mailed or faxed as follows:

Richard Kushi
Director of Contracts Development and Administration Division
Los Angeles County – Department of Mental Health
550 South Vermont Avenue, 5th floor
Los Angeles, CA 90020
rkushi@dmh.lacounty.gov
fax #: (213) 381-7092

1.9 Mandatory Requirement to Register on County's WebVen

Prior to executing a Master Agreement, all potential Contractors must register in the County's WebVen. The WebVen contains the Proposer's business profile and identifies the goods/services the business provides. Registration can be accomplished online via the Internet by accessing the County's home page at http://lacounty.info/doing_business/main_db.htm. *There are underscores in the address between the words 'doing business' and 'main db'.*

1.10 Department Option To Reject SOQs

The Director of DMH, at his/her sole discretion, may reject any or all SOQs submitted in response to this solicitation. DMH shall not be liable for any cost incurred by a Proposer in connection with preparation and submittal of any SOQ.

1.11 Protest Process

Any actual or prospective Proposer may file a protest in connection with the solicitation or award of a Board-approved service contract. It is generally accepted that the Proposer challenging the decision of a County department bears the burden of proof in its claim that the department committed a sufficiently material error in the solicitation process to justify invalidation of a proposed award.

Throughout the review process, the County has no obligation to delay or otherwise postpone an award of contract based on a Proposer protest. In all cases, the County reserves the right to make an award when it is determined to be in the best interest of the County of Los Angeles to do so.

1.11.1 Grounds for Review

Unless state or federal statutes or regulations otherwise provide, the grounds for review of any departmental determination or action should be limited to a Solicitation Requirements Review (refer to Section 2 (Instructions To Proposers), Paragraph 2.4 (Solicitation Requirements Review).

1.12 Notice to Proposer's Regarding Public Records Act

1.12.1 SOQ responses to this RFSQ shall become the exclusive property of the County. At such time as when the County executes a MHSA Master Agreement with qualified Proposer(s), all such SOQs submitted in response to this RFSQ, become a matter of public record, with the exception of those parts of each SOQ which are defined and identified by the Contractor as business or trade secrets, and plainly marked as "Trade Secret," "Confidential," or "Proprietary."

1.12.2 The County shall not, in any way, be liable or responsible for the disclosure of any such record or any parts thereof, if disclosure is required or permitted under the California Public Records Act or otherwise by law. **A blanket statement of confidentiality or the marking of each page of the SOQ as confidential shall not be deemed sufficient notice of exception and may subject the entire SOQ to disclosure. The Proposer must specifically label only those provisions of the SOQ which are "Trade Secrets," "Confidential," or "Proprietary" in nature.**

1.13 Indemnification and Insurance

Proposer shall be required to comply with the Indemnification provisions contained in *Appendix H-A, MHSA Master Agreement, Paragraph 8 (Indemnification and Insurance).* Proposer shall procure, maintain, and provide to the County proof of insurance coverage for all the programs of insurance along with associated amounts specified in *Appendix H-A, MHSA Master Agreement, Paragraph 8 (Indemnification and Insurance).*

1.14 SPARTA Program

A County program, known as 'SPARTA' (Service Providers, Artisan and Tradesman Activities) may be able to assist potential Contractors in obtaining affordable liability insurance. The SPARTA Program is administered by the County's insurance broker, Municipality Insurance Services, Inc.

For additional information, a Proposer may call (800) 420-0555 or contact them through their web-address: www.2sparta.com

1.15 Injury & Illness Prevention Program (IIPP)

Proposer shall be required to comply with the State of California's Cal OSHA's regulations. Section 3203 of title 8 in the California Code of Regulations requires all California employers to have a written, effective Injury and Illness Prevention Program (IIPP) that addresses hazards pertaining to the particular workplace covered by the program.

1.16 Background and Security Investigations

Background and security investigations of Proposer's staff may be required at the discretion of the County as a condition of beginning and continuing work under any resulting agreement. The cost of background checks is the responsibility of the Proposer.

1.17 Employee Acknowledgement and Confidentiality Agreement

Proposer shall be required to comply with the Confidentiality provisions contained in *Paragraph 39 (Contractor's Obligation as a "business Associate" under the Health Insurance Portability and Accountability Act of 1996)* and the Independent Contractor Status provision contained in P*aragraph 23 (Independent Contractor Status) – MHSA Master Agreement*. Contractor shall ensure that it obtains and submits to the County, a signed "*Contractor Acknowledgement and Confidentiality Agreement*" and *"Contractor Employee Acknowledgement and Confidentiality Agreement"* as specified in *Appendix H-A, MHSA Master Agreement, Exhibits C and D respectively,* for each employee and independent contractor performing services under the MHSA Master Agreement, for each RFS-issued SOW before work begins.

1.18 Conflict of Interest

1.18.1 By submission of a SOQ, Proposer certifies that Proposer is aware of, and has read, Section 2.180.010 of the Los Angeles County Code and that an execution of a Master Agreement with Proposer will not violate such section.

1.18.2 No County employee whose position in the County enables him/her to influence the selection of a Contractor for this RFSQ, or any competing RFSQ, nor any spouse of economic dependent of such employees, shall be employed in any capacity by a Proposer or have any other direct or indirect financial interest in the selection of a Contractor. Proposer shall certify that he/she is aware of and has read Section 2.180.010 of the Los Angeles County Code as stated in *Appendix A - Required Forms Exhibit 2, Certification of No Conflict of Interest.*

1.18.3 Proposer shall comply with all conflict of interest laws, ordinances, and regulations now in effect or hereafter enacted during the term of this MHSA Master Agreement. Proposer warrants that Proposer is not now aware of any facts which created a conflict of interest. If Proposer hereafter becomes aware of any facts which might reasonably be expected to create a conflict of interest, Proposer shall immediately make full written disclosure of such facts to County. Full written disclosure shall include, without limitation, identification of all persons implicated, and complete description of all relevant circumstances.

1.19 Determination of Proposer Responsibility

1.19.1 A responsible Proposer is a Proposer who has demonstrated the attribute of trustworthiness, as well as quality, fitness, capacity and experience to

satisfactorily perform the contract. It is the County's policy to conduct business only with responsible contractors.

1.19.2 Proposers are hereby notified that, in accordance with Chapter 2.202 of the County Code, the County may determine whether the Proposer is responsible based on a review of the Proposer's performance on any contracts, including but not limited to County contracts. Particular attention will be given to violations of labor laws related to employee compensation and benefits, and evidence of false claims made by the Proposer against public entities. Labor law violations which are the fault of the subcontractors and of which the Proposer had no knowledge shall not be the basis of a determination that the Proposer is not responsible.

1.19.3 The County may declare a Proposer to be non-responsible for purposes of this contract if the Board of Supervisors, in its discretion, finds that the Proposer had done any of the following: (1) violated a term of a contract with the County or a nonprofit corporation created by the County; (2) committed an act or omission which negatively reflects on the Proposer's quality, fitness or capacity to perform this contract with the County, any other public entity, or a nonprofit corporation created by the County, or engaged in a pattern or practice which negatively reflects on same; (3) committed an act or omission, which indicates a lack of business integrity or business honesty; or (4) made or submitted a false claim against the County or any other public entity.

1.19.4 If there is evidence that the highest ranked Proposer may not be responsible, the Department shall notify the Proposer in writing of the evidence relating to the Proposer's responsibility, and its intention to recommend to the Board of Supervisors that the Proposer be found not responsible. The Department shall provide the Proposer and/or the Proposer's representative with an opportunity to present evidence as to why the Proposer should be found to be responsible and to rebut evidence, which is the basis for the Department's recommendation.

1.19.5 If the Proposer presents evidence in rebuttal to the Department, the Department shall evaluate the merits of such evidence, and based on that evaluation, make a recommendation to the Board of Supervisors. The final decision concerning the responsibility of the Proposer shall reside with the Board of Supervisors.

1.19.6 These terms shall also apply to proposed subcontractors of Proposers on County contracts.

1.20 Proposer Debarment

1.20.1 The Proposer is hereby notified that, in accordance with Chapter 2.202 of the County Code, the County may debar the Proposer from bidding on, or being awarded, and/or performing work on other County contracts for a specified period of time, which generally will not exceed five (5) years but may exceed five years or be permanent if warranted by the circumstances, and the County may terminate any or all of the Proposer's existing contracts with County, if the Board of Supervisors finds, in its discretion, that the Proposer has done any of the following: (1) violated a term of a contract with the County or a nonprofit corporation created by the County, (2) committed an act or omission which negatively reflects on the Proposer's quality, fitness or capacity to perform a contract with the County or any other public entity, or nonprofit corporation created by the County, or engaged in a pattern or practice which negatively reflects on same, (3) committed an act or offense which indicates a lack of business integrity or business honesty; or (4) made or submitted a false claim against the County or any other public entity.

1.20.2 If there is evidence that the highest ranked Proposer may be subject to debarment, the Department shall notify the Proposer in writing of the evidence which is the basis for the proposed debarment, and shall advise the Proposer of the scheduled date for a debarment hearing before the Contractor Hearing Board.

1.20.3 The Contractor Hearing Board shall conduct a hearing where evidence on the proposed debarment is presented. The Proposer and/or Proposer's representative shall be given an opportunity to submit evidence at that hearing. After the hearing, the Contractor Hearing Board shall prepare a tentative proposed decision, which shall contain a recommendation regarding whether the Proposer should be debarred, and, if so, the appropriate length of time of the debarment. The Proposer and the Department shall be provided an opportunity to object to the tentative proposed decision prior to its presentation to the Board of Supervisors.

1.20.4 After consideration of any objections, or if no objections are received, a record of the hearing, the proposed decision and any other recommendation of the Contractor Hearing Board shall be presented to the Board of Supervisors. The

Board of Supervisors shall have the right to modify, deny or adopt the proposed decision and recommendation of the Contractor Hearing Board.

1.20.5 If a Proposer has been debarred for a period longer than five years, that Proposer may, after the debarment has been in effect for at least five years, submit a written request for review of the debarment determination to reduce the period of debarment or terminate the debarment. The County may, in its discretion, reduce the period of debarment or terminate the debarment if it finds that the Proposer has adequately demonstrated one or more of the following: (1) elimination of the grounds for which the debarment was imposed; (2) a bona fide change in ownership or management; (3) material evidence discovered after debarment was imposed; or (4) any other reason that is in the best interests of the County.

1.20.6 The Contractor Hearing Board will consider requests for review of a debarment determination only where (1) the Bidder has been debarred for a period longer than five years; (2) the debarment has been in effect for at least five years; and (3) the request is in writing, states one or more of the grounds for reduction of the debarment period or termination of the debarment, and includes supporting documentation. Upon receiving an appropriate request, the Contractor Hearing Board will provide notice of the hearing on the request. At the hearing, Contractor Hearing Board shall conduct a hearing where evidence on the proposed reduction of debarment period or termination of debarment is presented. This hearing shall be conducted and the request for review decided by the Contractor Hearing Board pursuant to the same procedures as for a debarment hearing.

1.20.7 The Contractor Hearing Board's proposed decision shall contain a recommendation on the request to reduce the period of debarment or terminate the debarment. The <u>Contractor Hearing Board shall present its proposed decision and recommendation to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny, or adopt the proposed decision and recommendation of the Contractor Hearing Board</u>.

1.20.8 These terms shall also apply to proposed subcontractors of Proposers on County contracts.

1.20.9 Debarment List

Appendix E provides a link to the County's website where there is a listing of Contractors that are currently on the Debarment List for Los Angeles County.

1.21 Proposer's Adherence to County Child Support Compliance Program

Contractors shall 1) fully comply with all applicable State and Federal reporting requirements relating to employment reporting for its employees; and 2) comply with all lawfully served Wage and Earnings Assignment Orders and Notice of Assignment and continue to maintain compliance during the term of any contract that may be awarded pursuant to this solicitation. Failure to comply may be cause for termination of a Master Agreement or initiation of debarment proceedings against the non-compliant Contractor (County Code Chapter 2.202).

1.22 Gratuities

1.22.1 Attempt to Secure Favorable Treatment

It is improper for any County officer, employee or agent to solicit consideration, in any form, from a Proposer with the implication, suggestion or statement that the Proposer's provision of the consideration may secure more favorable treatment for the Proposer in the award of a Master Agreement or that the Proposer's failure to provide such consideration may negatively affect the County's consideration of the Proposer's submission. A Proposer shall not offer or give either directly or through an intermediary, consideration, in any form, to a County officer, employee or agent for the purpose of securing favorable treatment with respect to the award of a Master Agreement.

1.22.2 Proposer Notification to County

A Proposer shall immediately report any attempt by a County officer, employee or agent to solicit such improper consideration. The report shall be made either to the County manager charged with the supervision of the employee or to the County Auditor-Controller's Employee Fraud Hotline at (800) 544-6861. Failure to report such a solicitation may result in the Proposer's submission being eliminated from consideration.

1.22.3 Form of Improper Consideration

Among other items, such improper consideration may take the form of cash, discounts, services, the provision of travel or entertainment, or tangible gifts.

1.23 Notice to Proposers Regarding the County Lobbyist Ordinance

The Board of Supervisors of the County of Los Angeles has enacted an ordinance regulating the activities of persons who lobby County officials. This ordinance, referred to as the "Lobbyist Ordinance", defines a County Lobbyist and imposes certain registration requirements upon individuals meeting the definition. The complete text of the ordinance can be found in County Code Chapter 2.160. In effect, each person, corporation or other entity that seeks a County permit, license, franchise or contract must certify compliance with the ordinance. As part of this solicitation process, it will be the responsibility of each Proposer to review the ordinance independently as the text of said ordinance is not contained within this RFSQ. Thereafter, each person, corporation or other entity submitting a response to this solicitation, must certify that each County Lobbyist, as defined by Los Angeles County Code Section 2.160.010, retained by the Proposer is in full compliance with Chapter 2.160 of the Los Angeles County Code by completing and submitting the *Familiarity with the County Lobbyist Ordinance Certification,* as set forth in *Appendix A - Required Forms Exhibit 5,* as part of their SOQ.

1.24 Federal Earned Income Credit

The Contractor shall notify its employees, and shall require each subcontractor to notify its employees, that they may be eligible for the Federal Earned Income Credit under the federal income tax laws. Such notice shall be provided in accordance with the requirements set forth in the Internal Revenue Service Notice No. 1015. Reference *Appendix F.*

1.25 Consideration of GAIN/GROW Participants for Employment

Should contractor require additional or replacement personnel after the effective date of this agreement, contractor shall give consideration for any such employment openings to participants in the County's Department of Public Social Services' Greater Avenues for Independence (GAIN) Program or General Relief Opportunities for Work (GROW) Program who meet contractor's minimum qualifications for the open position. If contractor decides to pursue consideration of GAIN/GROW participants for hiring, Contractor shall provide information regarding job openings and job requirements to Department of Public Social Services GAIN/GROW staff at GAINGROW@dpss.lacounty.gov. County will refer GAIN/GROW participants, by job category, to contractor.

Note: In the event that both laid-off County employees and GAIN/GROW participants are available for hiring, County employees shall be given first priority.

As a threshold requirement for consideration for contract award, bidders/proposers shall demonstrate a proven record of hiring GAIN/GROW participants or shall attest to a willingness to consider GAIN/GROW participants for any future employment opening if they meet the minimum qualifications for that opening. Additionally, bidders/proposers shall attest to a willingness to provide employed GAIN/GROW participants access to the bidders'/proposers' employee mentoring program, if available, to assist these individuals in obtaining permanent employment and/or promotional opportunities. Bidders/proposers who are unable to meet this requirement shall not be considered for the award.

Bidders/proposers shall complete and return the form, "Attestation of Willingness to Consider GAIN/GROW Participants," Attachment Appendix A, Exhibit 8-A, hereunder, with their proposal.

1.26 County's Performance Standards and Outcome Measures

1.26.1 After award of a Master Agreement and subsequent amendments based on RFS-issued SOWs, the County or its agent will evaluate the Contractor's performance under the Master Agreement and amendments on an annual basis. Such evaluation will include assessing Contractor's compliance with all terms in the Master Agreement and performance standards identified in the amendments. Contractor's deficiencies which the County determines are severe or continuing and that may place the performance of this Master Agreement and subsequent amendments in jeopardy if not corrected, may be reported to the County's Board of Supervisors. The report will include improvement/corrective action measures taken by the County and Contractor. If improvement does not occur consistent with the corrective action measures, the County may terminate the Master Agreement and/or any amendments in whole or in part, or impose other penalties as specified in the Master Agreement.

1.26.2 The Contractor shall comply with all applicable Federal, State, and County policies and procedures relating to performance standards and outcome measures. This is applicable whenever specific Federal or State funding, which has policies or procedures for performance standards and/or outcome measures has been included as part of the Contractor's contract and shall apply for all

County policies, procedures, or departmental bulletins approved by the Director or his designee for performance standards and/or outcome measures. County will notify Contractor whenever County policies or procedures are to apply to this Master Agreement at least, where feasible, 30 calendar days prior to implementation. These Federal, State or County performance standards and/or outcome measures will be used as part of the determination of the effectiveness of the services delivered by the Contractor.

1.27 Recycled Bond Paper

Proposer shall be required to comply with the County's policy on recycled bond paper as specified in *Appendix H-A, MHSA Master Agreement, Paragraph 35 (Use of Recycled-content Paper Products.*

1.28 Safely Surrendered Baby Law

The Contractor shall notify and provide to its employees, and shall require each subcontractor to notify and provide to its employees, a fact sheet regarding the Safely Surrendered Baby Law, its implementation in Los Angeles County, and where and how to safely surrender a baby. The fact sheet is set forth in *Appendix G* of this solicitation document and is also available on the Internet at www.babysafela.org for printing purposes.

1.29 County Policy on Doing Business with Small Business

The County has multiple programs that address Small Businesses. The Board of Supervisors encourages small business participation in the County's contracting process by constantly streamlining and simplifying our selection process and expanding opportunities for small businesses to compete for our business.

One program, the Local Small Business Enterprise Preference Program, requires the Company to complete a certification process. This program and how to obtain certification are further explained in Sub-paragraph 1.31 of this Section.

The Jury Service Program provides exceptions to the Program if a company qualifies as a Small Business. It is important to note that each Program has a different definition for Small Business. You may qualify as a Small Business in one Program but not the other.

Further explanation of the Jury Service Program is provided in Sub-paragraph 1.30 of this Section.

The County also has a Policy on Doing Business with Small Business that is stated in *Appendix C*.

1.30 Jury Service Program

1.30.1 The Master Agreement is subject to the requirements of the County's Contractor Employee Jury Service Ordinance ("Jury Service Program") (Los Angeles County Code, Chapter 2.203). Proposers should carefully read the *Jury Service Program, Appendix D,* and the pertinent jury service provisions of the *Appendix H-A, MHSA Master Agreement, Paragraph 40 (Compliance with Jury Service),* both of which are incorporated by reference into and made a part of this RFSQ. The Jury Service Program applies to both Contractors and their Subcontractors. SOQs that fail to comply with the requirements of the Jury Service Program will be considered non-responsive and excluded from further consideration.

1.30.2 The Jury Service Program requires Contractors and their Subcontractors to have and adhere to a written policy that provides that its employees shall receive from the Contractor, on an annual basis, no less than five days of regular pay for actual jury service. The policy may provide that employees deposit any fees received for such jury service with the Contractor or that the Contractor deduct from the employee's regular pay the fees received for jury service. For purposes of the Jury Service Program, "employee" means any California resident who is a full-time employee of a Contractor and "full-time" means 40 hours or more worked per week, or a lesser number of hours if: 1) the lesser number is a recognized industry standard as determined by the County, or 2) the Contractor has a long-standing practice that defines the lesser number of hours as full-time. Therefore, the Jury Service Program applies to all of a Contractor's full-time California employees, even those not working specifically on the County project. Full-time employees providing short-term, temporary services of 90 days or less within a 12-month period are not considered full-time for purposes of the Jury Service Program.

1.30.3 There are two ways in which a Contractor might not be subject to the Jury Service Program. The first is if the Contractor does not fall within the Jury Service Program's definition of "Contractor". The Jury Service Program defines "Contractor" to mean a person, partnership, corporation of other entity which has a contract with the County or a Subcontract with a County Contractor and has

received or will receive an aggregate sum of $50,000 or more in any 12-month period under one or more County contracts or subcontracts. The second is if the Contractor meets one of the two exceptions to the Jury Service Program. The first exception concerns small businesses and applies to Contractors that have 1) ten or fewer employees; and, 2) annual gross revenues in the preceding twelve months which, if added to the annual amount of this contract is less than $500,000, and, 3) is not an "affiliate or subsidiary of a business dominant in its field of operation". The second exception applies to Contractors that possess a collective bargaining agreement that expressly supersedes the provisions of the Jury Service Program. The Contractor is subject to any provision of the Jury Service Program not expressly superseded by the collective bargaining agreement.

1.30.4 If a Contractor does not fall within the Jury Service Program's definition of "Contractor" or if it meets any of the exceptions to the Jury Service Program, then the Contractor must so indicate in the *Contractor Employee Jury Service Program Certification Form and Application for Exception,* as set forth in *Appendix A - Required Forms Exhibit 9,* and include with its submission all necessary documentation to support the claim such as tax returns or a collective bargaining agreement, if applicable. Upon reviewing the Contractor's application, the County will determine, in its sole discretion, whether the Contractor falls within the definition of Contractor or meets any of the exceptions to the Jury Service Program. The County's decision will be final.

1.31 Local Small Business Enterprise Preference Program

1.31.1 The County will give Local SBE preference during the solicitation process to businesses that meet the definition of a Local Small Business Enterprise (Local SBE), consistent with Chapter 2.204.030C.1 of the Los Angeles County Code. A Local SBE is defined as: 1) A business certified by the State of California as a small business and 2) has had its principle office located in Los Angeles County for at least one year. The business must be certified by the Office of Affirmative Action Compliance as meeting the requirements set forth in 1 and 2 above prior to requesting the Local SBE Preference in a solicitation.

1.31.2 To apply for certification as a Local SBE, business may register at the Office of Affirmative Action Compliance's website at:

http://oaac.co.la.ca.us/

1.31.3 Certified Local SBEs must request the SBE Preference in their solicitation responses and may not request the preference unless the certification process has been completed and certification affirmed. Businesses must attach the Local SBE Certification Letter to the Required Form – Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form – Exhibit 4 in Appendix A – Required Forms with their proposal. Sanctions and financial penalties may apply to a business that knowingly, and with intent to defraud, seeks to obtain or maintain certification as a certified Local SBE.

1.31.4 Information about the State's small business enterprise certification regulations is in the California Code of Regulations, Title 2, Subchapter 8, Section 1896 et seq., and is also available on the California Department of General Services Office of Small Business Certification and Resources Web site at http://www.pd.dgs.ca.gov/smbus/default.

1.32 Contractor's Obligations Under the Federal Health Insurance Portability and Accountability Act (HIPAA)

Contractor shall be required to comply with the Administrative Simplification requirements of the federal Health Insurance Portability and Accountability Act (HIPAA) of 1996 as contained in *Appendix H-A, MHSA Master Agreement, Paragraph 39 (Contractor's Obligation as a "Business Associate" under the Health Insurance Portability and Accountability Act of 1996).*

1.33 Subcontracting

Contractor may subcontract to the extent permitted in *Appendix H-A, MHSA Master Agreement*, Paragraph 16 (Subcontracting). Any other attempt by Contractor to subcontract performance of any terms of the Master Agreement not expressed therein, in whole or in part, without consent of the DMH Director shall be null and void and shall constitute a breach of the terms of the MHSA Master Agreement.

1.34 Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions (45 C.F.R. Part 76):

1.34.1 Pursuant to federal law, the County is prohibited from contracting with parties that are suspended, debarred, ineligible, or excluded or whose principals are suspended, debarred or excluded from securing federally funded contracts. At the time of proposal submission, Proposer must submit a certification, as set forth in

Appendix A, Exhibit 10, attesting that neither it, as an organization, nor any of its owners, officers, partners, directors, or other principals is currently suspended, debarred, ineligible, or excluded from securing federally funded contracts. Should the proposal identify prospective subcontractors, or should Proposer intend to use subcontractors in the provision of services under any subsequent agreement, Proposer must submit a certification, completed by each subcontractor, attesting that neither the subcontractor, as an organization, nor any of its owners, officer, partners, director, or other principals is currently suspended, debarred, ineligible, or excluded from securing federally funded contracts.

1.34.2 Failure to provide the required certification may eliminate the proposal from consideration.

1.34.3 In the event that Proposer and/or its subcontractor(s) is or are unable to provide the required certification, Proposer instead shall provide a written explanation concerning its and/or its subcontractor's inability to provide the certification. Proposer's written explanation shall describe the specific circumstances concerning the inability to certify. It further shall identify any owner, officer, partner, director, or other principal of the Proposer and/or subcontractor who is currently suspended, debarred, ineligible, or excluded from securing federally funded contracts. Finally, the written explanation shall provide that person's or those persons' job description(s) and function(s) as they relate to the agreement which is being solicited by this RFSQ.

1.34.4 The written explanation shall be examined by the County to determine, in its full discretion, whether further consideration of the proposal is appropriate under the federal law.

1.35 Contractor's Exclusion From Participation In A Federally Funded Program

Contractor hereby warrants that neither it nor any of its staff members is restricted or excluded from providing services under any health care program funded by the Federal government, directly or indirectly, in whole or in part, and that Contractor will notify Director within 30 calendar days in writing of: (1) any event that would require Contractor or a staff member's mandatory exclusion from participation in a Federally funded health care program; and (2) any exclusionary action taken by any agency of the Federal government against Contractor or one or more staff members barring it or the

staff members from participation in a Federally funded health care program, whether such bar is direct or indirect, or whether such bar is in whole or in part.

Contractor shall indemnify and hold County harmless against any and all loss or damage County may suffer arising from any Federal exclusion of Contractor or its staff members from such participation in a Federally funded health care program. Contractor shall provide the certification set forth in Appendix H-A (MHSA Master Agreement).

Failure by Contractor to meet the requirements of this Paragraph shall constitute a material breach of the Master Agreement upon which County may immediately terminate or suspend this Master Agreement.

1.36 Proposer's Charitable Contributions Compliance

California's "Supervision of Trustees and Fundraisers for Charitable Purposes Act" regulates receiving and raising charitable contributions. Among other requirements, those subject to the Charitable Purposes Act must register. The 2004 Nonprofit Integrity Act (SB 1262, Chapter 919) increased Charitable Purposes Act requirements. New rules cover California public benefit corporations, unincorporated associations, and trustee entities and may include similar foreign corporations doing business or holding property in California. Key Nonprofit Integrity Act requirements affect executive compensation, fund-raising practices and documentation. Charities with over $2 million of revenues (excluding funds that must be accounted for to a governmental entity) have new audit requirements.

All prospective contractors must determine if they receive or raise charitable contributions which subject them to the Charitable Purposes Act and complete the certification form attached as Appendix A, Exhibit 11. A completed Appendix A, Exhibit 11 is a required part of any agreement with the County.

In Appendix A, Exhibit 11, prospective contractors certify either that:

They have determined that they do not now receive or raise charitable contributions regulated under the California Charitable Purposes Act, (including the Nonprofit Integrity Act) but will comply if they become subject to coverage of those laws during the term of a County agreement, or:

They are currently complying with their obligations under the Charitable Purposes Act, attaching a copy of their most recent filing with the Registry of Charitable Trusts.

Prospective County contractors that do not complete Exhibit 11, as part of the solicitation process may, in the County's sole discretion, be disqualified from contract award. A County contractor that fails to comply with its obligations under the Charitable Purposes Act is subject to either contract termination or debarment proceedings or both. (County Code Chapter 2.202)

1.37 Transitional Job Opportunities Preference Program

1.37.1 Transitional Job Opportunities Preference Program – in reviewing Work Order Bids, the County will give preference to businesses that are certified by the County as Transitional Job Opportunity vendors, consistent with Chapter 2.205 of the Los Angeles County Code. A Certified Transitional Job Opportunity vendor is, and has been such for three (3) years, an entity: 1) that is a non-profit organization recognized as tax exempt pursuant to section 501 (c) (3) of the Internal Revenue Services Code; set forth, under penalty of perjury, such information as requested by the County on either electronic or hard copy forms, along with their application form and three most recent annual tax returns to the department with their proposal response to the contracting solicitation for which they are competing; 2) has been in operation for at least one year providing transitional job and the related supportive services to program participants; and 3) provide a profile of their program with a description of their program components designed to assist program participants, number of past program participants, and any other information requested by a contracting department.

1.37.2 Transitional Job Opportunities vendors must request the preference in each of their Work Order Bid responses and may not receive the preference until their certification has been affirmed by the applicable department. County must verify the Transitional Job Opportunity vendor certification prior to applying the preference. Sanctions and financial penalties may apply to a Bidder that knowingly and with intent to defraud seeks to obtain for maintain certification as a Transitional Job Opportunities vendor.

1.38 Notification to County of Pending Acquisitions/Mergers by Proposer

Proposer shall notify the County of any pending acquisitions/mergers of their company. This information shall be provided by the Vendor on Appendix A, Required Forms - Exhibit 1 - Vendor's Organization Questionnaire/Affidavit. Failure of the Vendor to provide this information may eliminate its SOQ from any further consideration.

1.39 Defaulted Property Tax Reduction Program

1.39.1 The prospective contract is subject to the requirements of the County's Defaulted Property Tax Reduction Program ("Defaulted Tax Program") (Los Angeles County Code, Chapter 2.206). Prospective Contractors should carefully read the Defaulted Tax Program Ordinance, Appendix K and the pertinent provisions of the Sample Contract, Appendix H-A, Paragraph 51, both of which are incorporated by reference into and made a part of this solicitation. The Defaulted Tax Program applies to both Contractors and their Subcontractors.

1.39.2 Proposers shall be required to certify that they are in full compliance with the provisions of the Defaulted Tax Program and shall maintain compliance during the term of any contract that may be awarded pursuant to this solicitation or shall certify that they are exempt from the Defaulted Tax Program by completing Certification of Compliance with the County's Defaulted Property Tax Reduction Program, Exhibit 12 – Required Forms. Failure to maintain compliance, or to timely cure defects, may be cause for termination of a contract or initiation of debarment proceedings against the non-compliant contractor (Los Angeles County Code, Chapter 2.202).

1.39.3 Proposals that fail to comply with the certification requirements of the Defaulted Tax Program will be considered non-responsive and excluded from further consideration.

2.0 INSTRUCTIONS TO PROPOSERS

This Section contains instructions to Proposers in how to prepare and submit their Statement of Qualifications (SOQ).

2.1 County Responsibility

The County is not responsible for representations made by any of its officers or employees prior to the execution of the MHSA Master Agreement unless such understanding or representation is included in the MHSA Master Agreement.

2.2 Truth and Accuracy of Representations

False, misleading, incomplete, or deceptively unresponsive statements in connection with an SOQ shall be sufficient cause for rejection of the SOQ. The evaluation and determination in this area shall be at the Director's sole judgment and his/her judgment shall be final.

2.3 RFSQ Timetable

The following timetable for this revised RFSQ is based on Board approval and a renewal effective date of July 1, 2008 (any delays/changes in the RFSQ timetable will be posted through RFSQ addendums):

- Release of original RFSQ ..... November 16, 2005
- Release revised of RFSQ .....August 12, 2010
- Request for a Solicitation Requirements Review Due .....August 26, 2010
  (10 business days after the release of the revised RFSQ)
- **SOQ due continues to be open-ended .....through June 30, 2011.**

As authorized by the Board of Supervisors, County began accepting SOQs during the original term of the MHSA Master Agreement on a continuous basis on November 16, 2005, whereby SOQs were evaluated and Proposers were notified of results within 90 days of receipt of the SOQs. Only during the initial phase of this RFSQ, SOQs that were received within 30 business days after the release of the RFSQ or by Friday, December 30, 2005 at 5:00 p.m. were reviewed between December 2005 and January 2006 to determine if they met the qualifications listed in the RFSQ. The MHSA Master Agreement/Amendment will become effective upon the date of its execution by DMH's Director.

Since SOQs may be submitted on a continuous basis, it is acceptable for Proposers to resubmit or submit revised/amended SOQs at any time.

2.4 Solicitation Requirements Review

A person or entity may seek a Solicitation Requirements Review of the revised RFSQ by submitting *Appendix B - Transmittal Form to Request a RFSQ Solicitation Requirements Review* along with supporting documentation. A Solicitation Requirements Review shall only be granted under the following circumstances:

1. The request for a Solicitation Requirements Review is received by the department by August 26, 2010 and ten (10) business days after the issuance date of any addendums to the RFSQ as detailed in the addendums.
2. The request for a Solicitation Requirements Review includes documentation, which demonstrates the underlying ability of the person or entity to submit a bid;
3. The request for a Solicitation Requirements Review itemizes in appropriate detail, each matter contested and factual reasons for the requested review; and
4. The request for a Solicitation Requirements Review asserts either that:
   - application of the minimum requirements, review criteria and/or business requirements unfairly disadvantage the Proposer; or,
   - due to unclear instructions, the process may result in the County not receiving the best possible responses from the Proposers.

The Solicitation Requirements Review shall be completed and the department's determination shall be provided to the Proposer, in writing, within a reasonable time prior to the SOQ due date.

All Requests for Review should be submitted to:

Richard Kushi
Director of Contracts Development and Administration Division
Los Angeles County – Department of Mental Health
550 S. Vermont Avenue, 5th floor
Los Angeles, CA 90020

2.5 Proposers' Questions:

Proposers may submit written questions regarding this RFSQ by mail, fax or e-mail to the Contracts Analyst identified below. All questions, without identifying the submitting firm, will be compiled with the appropriate answers and issued as an addendum to the RFSQ. The addendum will be mailed to all Proposers that received the RFSQ, in addition to being posted on the County of Los Angeles' web site. To ensure receipt of any addenda,

Proposers should include correct mailing address, fax number or e-mail address, whichever is appropriate. Questions should be addressed to:

Richard Kushi
Director of Contracts Development and Administration Division
Los Angeles County – Department of Mental Health
550 S. Vermont Avenue, 5th floor
Los Angeles, CA 90020
Phone: (213) 738-4684 Fax #: (213) 381-7092
rkushi@dmh.lacounty.gov

2.6 Preparation and Format of the SOQ

Proposers who currently have a mental health contract with DMH may submit the short SOQ form (Appendix I). For other Proposers, including those filing under the eligibility of a new firm, SOQs must be typewritten, double spaced, securely bound, and identified by the RFSQ title. Any SOQ that deviates from this format may be rejected without review at the County's sole discretion.

The content and sequence of the SOQ must be as follows:

- Transmittal Letter
- Table of Contents
- Proposer's Qualifications (Section A)
- Financial Capability (Section B)
- Required Forms (Section C)
- Proof of Insurability (Section D)

2.6.1 Transmittal Letter

The transmittal letter must be a maximum of one (1) page, transmitting the SOQ on the Proposer's stationery. The transmittal letter must include: (1) if applicable, statement that Proposer is seeking to qualify under the Section 1 (General Information) Paragraph 1.4, (New Firm Eligibility); 2) Proposer's legal business name and legal business status (i.e., partnership corporation, etc); 3) address, telephone and facsimile numbers of the person or persons to be used for contact; and 4) the names and original signatures of the person(s) authorized to represent the Proposer. **The transmittal letter must bear the signature of the person authorized to sign on behalf of the Proposer and to bind the applicant in a Master Agreement.**

2.6.2 Table of Contents

The Table of Contents must be a comprehensive listing of material included in the SOQ. This section must include a clear definition of the material, identified by sequential page numbers and by section reference numbers.

2.6.3 Proposer's Qualifications (Section A)

Proposers must provide a summary of relevant background information to demonstrate that they meet the minimum qualifications stated in Section 1 (General Information), Paragraph 1.3 (Proposer's Minimum Requirements), and have the capability to perform the required services as a corporation or other entity. Proposers should clearly identify which service(s) and which focal age group(s) they have recent experience providing services (refer to Section I (General Information), Paragraph 1.1 (Scope of Work) for categories of services under the CSS Plan).

Proposers are to include a program narrative that does not exceed two (2) pages per the FSP category of service as listed in Section 1 (General Information) Paragraph 1.3 (Proposer's Minimum Requirements) demonstrating that the Proposer meets the requirements.

Identify by name, case and court jurisdiction any pending litigation in which Proposer is involved, or judgments against Proposer in the past five (5) years. Provide a statement describing the size and scope of any pending or threatening litigation against the Proposer or principals of the Proposer. Include any labor disputes and/or alleged unfair hiring practices in the past five (5) years. If none, include a statement to that effect.

In addition to the summary information, the Proposer must complete and include *Appendix A - Required Forms, Exhibits 1,6 and 7*. All forms are provided in *Appendix A*.

a. *Contractor's Organization Questionnaire, Exhibit 1.*

b. *Proposer List of Contracts, Exhibit 6.*

The listing must include all contracts with public entities for the last three (3) years.

c. *Proposer List of References, Exhibit 7.*

Proposers must provide five (5) references for which Proposer has provided mental health or mental health related services within the last

three (3) years. *(Indicate categories of service, dollar amount of services provided, location, contracting agency, (including name and phone number of the contracting agency's contract person for the contract) or other criteria for providing appropriate references.)* It is the Proposer's sole responsibility to ensure that the firm's name, and point of contact's name, title and phone number for each reference is accurate. County may disqualify a Proposer if:

- References fail to substantiate Proposer's description of the services provided; or
- References fail to support that Proposer has a continuing pattern of providing capable, productive and skilled personnel, or
- DMH is unable to reach the point of contact with reasonable effort. It is the Proposer's responsibility to inform the point of contact of normal working hours.

d. Contracts terminated within the past three (3) years must also be listed separately with a reason for termination.

2.6.4 Financial Capability (Section B)

Provide copies of the company's most current and prior two (2) fiscal years (for example 2009, 2008 and 2007) financial statements. Statements should include the company's assets, liabilities and net worth. At a minimum, include the Balance Sheet (Statement of Financial Positions), Income Statement (Statement of Operations), and the Retained Earnings Statement as prepared by a third party Certified Public Accountant. Do not submit Income Tax Returns to meet this requirement. Financial statements will be kept confidential if so stamped on each page.

Please refer to Section 1 (General Information), Paragraph 1.3 (Proposer's Minimum Requirements), Sub-paragraph 1.3.8 to determine whether compiled, reviewed, or audited financial statements are required, or whether a Proposer may be exempt from submitting financial statements based on DMH's revised policy. Proposers who have an existing contract with DMH are considered to have met and satisfied financial capability requirements and are not required to submit financial statements identified in this Section.

2.6.5 Required Forms (Section C)

Proposers must complete and submit the following *Required Forms.* All forms are provided in *Appendix A*.

Exhibit 2 *Certification of No Conflict of Interest*

Proposers must certify that no employee who prepared or participated in the preparation of this SOQ, is within the purview of County Code Section 2.180.010.

Exhibit 3 *Proposer's Equal Employment Opportunity (EEO) Certification*

Proposer must comply with EEO laws, regulations and policies.

Exhibit 4 *Los Angeles County Community Business Enterprise (CBE) Program - Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form*

Proposer to complete and submit with the SOQ and each subsequent RFS-issued SOW Bid.

Note: Proposers must already be certified as a Local SBE <u>prior</u> to submission of a Work Order Bid to be eligible to request the Work Order Bid be considered for the Local SBE Preference.

Exhibit 5 *Familiarity with the County Lobbyist Ordinance Certification*

Proposers must certify that they are familiar with the requirements of the County Lobbyist Ordinance and that all persons acting on behalf of the Proposer have and will comply with the ordinance during the RFSQ process.

Exhibit 8 *Attestation of Willingness to Consider GAIN/GROW Participants*

Proposer to complete and submit with the SOQ.

Exhibit 9 *County of Los Angeles Contractor Employee Jury Service Program Certification Form and Application for Exception*

Proposer to complete and submit with the SOQ. If Proposer is requesting an exception to this program, submit all necessary documents to support the request.

Exhibit 10 *Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tiered Covered Transactions (45 C.F.R. Part 76)*

Exhibit 11 *Charitable Contributions Certification*

Proposers to complete and submit with the SOQ

Exhibit 12 *Certification of Compliance with the County's Defaulted Property Tax Reduction Program*

Proposer to complete and submit with the SOQ.

2.6.6 Proof of Insurability (Section D)

Proposers must provide proof of insurability that meets all insurance requirements set forth in the *Appendix H-A, MHSA Master Agreement, Sub-paragraphs 8.2 and 8.3.* If a Proposer does not currently have the required coverage, a letter from a qualified insurance carrier indicating a willingness to provide the required coverage should the Proposer be selected to receive a MHSA Master Agreement award may be submitted with the SOQ.

2.7 SOQ Submission

The original SOQ and three (3) copies shall be enclosed in a sealed envelope, plainly marked in the upper left-hand corner with the name and address of the Proposer and bear the words: **"SOQ FOR _____ SERVICES"**

The SOQ and any related information shall be delivered or mailed to the address shown in Section 2 (Instructions to Proposers), Paragraph 2.5 (Proposer's Questions). The submittal of SOQs will be open-ended; Proposers will be notified of results within 90 days of receipt of the SOQs Only during the initial phase, those SOQs that were received within 30 business days after the release of the RFSQ or by Friday, December 30, 2005 at 5:00 p.m. were reviewed between December 2005 and January 2006, to determine if they met the qualifications listed in the RFSQ. Those SOQs received after December 31, 2005 were reviewed initially between January and June 2006, to determine if they meet the qualifications listed in the RFSQ. Normally, SOQs will be reviewed bi-annually. SOQs received between January 1st and June 30th of each fiscal year will be reviewed between July and December of each fiscal year; SOQs received between July 1st and December 31st of each fiscal year will be reviewed between January and June of each fiscal year.

It is the sole responsibility of the submitting Proposer to ensure that its SOQ is received by DMH. Submitting Proposers shall bear all risks associated with delays in delivery by any person or entity, including the U.S. Mail. No facsimile (fax) or electronic mail (e-mail) copies will be accepted.

All SOQs will be thoroughly reviewed for compliance with the content and format rules provided in this Section 2.0 (Instructions to Proposers). SOQs determined to be

substantially nonconforming with Section 2.0 (Instructions to Proposers) are subject to disqualification. Minor discrepancies and/or omission in supplying required information will, in the first instance, not be cause for disqualification; but, when any discrepancies/omissions are brought to the Proposer's attention, the Proposer may be disqualified if the discrepancies are not promptly rectified. Since SOQs may be submitted on a continuous basis, it is acceptable for Proposers to resubmit or submit revised/amended SOQs at any time.

2.8 Acceptance of Terms and Conditions of MHSA Master Agreement

Proposers understand and agree that submission of the SOQ and the signed signature page of the MHSA Master Agreement constitutes acknowledgement and acceptance of, and a willingness to comply with, all terms and conditions of the *Appendix H-A, MHSA Master Agreement.*

Signature by the authorized agent of the Proposer on the signature page of the MHSA Master Agreement constitutes acceptance by the Proposer of all the terms and conditions of the MHSA Master Agreement.

2.9 SOQ Withdrawals

The Proposer may withdraw its SOQ at any time prior to the date and time which is set forth herein as the deadline for acceptance of SOQs, upon written request to DMH contact as listed in Section 1 (General Information), Paragraph 1.8 (Contact with County Personnel).

3.0 SOQ REVIEW/SELECTION/QUALIFICATION PROCESS

3.1 Review Process

An Evaluation Committee that will include representatives from DMH and may also include representatives from other County Departments will evaluate SOQs. The County may utilize the services of appropriate experts to assist in the evaluation process. The Evaluation Committee, in its sole discretion, may delegate certain functions to one or more subcommittees of the Evaluation Committee. The review process will include the following steps:

3.1.1 Adherence to Minimum Qualifications

An SOQ must adhere to the minimum qualifications outlined in Section 1 (General Information), Paragraph 1.3, (Proposer's Minimum Qualifications). There will be a thorough review of Proposer's qualifications as provided in **Section A** of the SOQ to determine if the Proposer meets the Minimum Qualifications. The review will include verification of references submitted, a review of the County's Contract Database reflecting past performance history on County contracts, a review of terminated contracts, and a review to determine the magnitude of any pending litigation or judgments against the Proposer. Proposers can qualify for specific service categories and focal age group(s) as described in Section 1 (General Information), Paragraph 1.1 (Scope of Work) to meet the Minimum Qualifications; in other words, it is not necessary for Proposers to qualify for all service categories and focal age group(s) to meet minimum qualifications.

An initial review of Proposer's specific qualifications as described in the FSP service category program narrative will include the following criteria:

FSP: 1) demonstrated experience in the delivery of FSP types of programs with successful outcomes; 2) demonstrated recent experience in the delivery of FSP types of programs even though the Proposer has not had sufficient time to demonstrate successful outcomes; 3) demonstrated experience providing services to children, TAY, and/or older adults and can demonstrate a readiness to immediately implement a FSP program; or 4) demonstrated experience providing specialized interventions , who have current experience working the DMH, and who can demonstrate a readiness to immediately implement a FSP.

3.1.2 Financial Capability

An analysis of the financial information submitted in **Section B** of the SOQ will be made to determine the financial capability of the firm.

3.1.3 Required Forms

All forms listed in Section 2 (Instructions to Proposers), Paragraph 2.6 (Preparation and Format of the SOQ), Sub-paragraph 2.6.5 must be included in **Section C** of the SOQ.

3.1.4 Proof of Insurability

Review the proof of insurability provided in **Section D** of the SOQ.

3.1.5 Proposer Changes

A SOQ, which contains conditions or limitations established by the Proposer, may be deemed irregular and be rejected by the County, in its sole discretion.

3.2 Disqualification Review

An SOQ may be disqualified from consideration because the County determined it was a non-responsive SOQ at any time during the review process. If the County determines that an SOQ is disqualified due to non-responsiveness, the County shall notify the Proposer in writing.

Upon receipt of the written determination of non-responsiveness, the Proposer may submit a written request for a Disqualification Review by the date specified. Requests for a Disqualification Review not timely submitted will be denied.

A Disqualification Review shall only be granted under the following circumstances:

1. The firm/person requesting a Disqualification Review is a Proposer;
2. The request for a Disqualification Review is submitted timely; and,
3. The request for a Disqualification Review asserts that the department's determination of disqualification due to SOQ non-responsiveness was erroneous (e.g. factual errors, etc.) and provides factual support on each ground asserted as well as copies of all documents and other material that support the assertions.

The Disqualification Review shall be completed and the department's determination shall be provided to the Proposer, in writing, prior to the conclusion of the review process.

3.3 Selection/Qualification Process

DMH will generally select Proposers that have experience in providing a broad range of mental health services. However, in order to insure DMH has at its disposal a varied pool of qualified Contractors, DMH may offer MHSA Master Agreements to Proposers that offer a narrow scope of services as defined by its categories of services.

3.4 MHSA Master Agreement Award

Proposers who are notified by DMH that they appear to have the necessary qualifications and experience (i.e., they are qualified) may still not be recommended for a MHSA Master Agreement if other requirements necessary for award have not been met. Other requirements may include items such as complete agreement with the terms and conditions of the MHSA Master Agreement, and/or satisfactory documentation that required insurance will be in force. Only when all such matters have been demonstrated to the Department's satisfaction can a Proposer, which is otherwise deemed qualified, be regarded as "selected" for recommendation of a MHSA Master Agreement.

DMH will execute Board of Supervisors-authorized MHSA Master Agreements with each selected Proposer. All Proposers will be informed of the final selections.