



REQUEST FOR STATEMENT OF QUALIFICATIONS

NO. 952-5424

COUNTY OF FRESNO

Adult Residential/ Adult Residential Perinatal Services

Issuance Date: January 14, 2016

Closing Date: February 25, 2016 at 2:00 P.M.

Submittals: Two (2) paper copies of the Statement of Qualifications

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Mark Envelope: "RFSQ – Adult Residential/ Adult Residential Perinatal Services"

**STATEMENT OF QUALIFICATIONS (SOQ) PACKAGES RECEIVED AFTER THE TIME AND DATE
STATED ABOVE WILL BE RETURNED UNOPENED TO THE VENDOR.**

Inquiries and Updates: Requests for clarification regarding this Request for Statement of Qualifications (RFSQ) must be submitted in writing via email to **Debbie Scharnick**, Purchasing Technician, at dscharnick@co.fresno.ca.us, and received by the County no later than **10:00 A.M., February 9, 2016**. Such information as is reasonably available and will facilitate preparation of responses hereto, requests for clarification and associated responses, and any addenda to this RFSQ will be posted at: <https://www2.co.fresno.ca.us/0440/Bids/BidsHome.aspx> and will not otherwise be distributed.

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INTRODUCTION

The County of Fresno, Department of Behavioral Health (DBH), Contracts Division – Substance Use Disorder (SUD) Services is requesting Applications for residential treatment services for adult males and females and residential perinatal treatment services for females. These services will likely be partially funded by Drug Medi-Cal (DMC) when the County opts into the DMC Organized Delivery System (ODS) Pilot program. This Request for Statement of Qualifications (RFSQ) includes long-term residential SUD services for adult males and females (60 days with up to a 30-day extension when clinically appropriate based on American Society of Addiction Medicine Patient Placement Criteria, revised second edition [ASAM PPC 2R]), and perinatal residential SUD services offering gender-specific treatment for pregnant and parenting women and their children (180 days with up to a 90-day extension when clinically appropriate based on ASAM criteria). Agencies must provide a detailed budget and separately identify room and board costs and associated non-treatment service costs on the budget forms included (**Attachment A**).

The agency providing residential/ residential perinatal treatment services shall be a non-profit agency in conformance with all local, state and federal laws in addition to California Code of Regulations (CCR) Title 9 and eventually Title 22 regulations. The agency must be operational and able to provide services upon contract execution. The County will strive to have contracts in place as early as April 2016.

The County of Fresno is in the process of developing a broad continuum of services at different levels of care. Residential treatment services are one element of that continuum; therefore, agencies must be willing to be flexible with partnering and coordinating with other providers and services which are part of that continuum.

Fresno County is one of many counties likely to opt in to the DMC-ODS Pilot program. Once implementation begins, the County's expectation is that all residential treatment providers will move towards DMC certification. In addition, the Pilot program requires that treatment providers model their continuum of care after the ASAM. The County will eventually require all providers to utilize ASAM criteria.

Residential treatment is a non-institutional, 24-hour non-medical, long-term residential program that provides rehabilitation services to clients with a substance use disorder diagnosis. Residential services are provided to non-perinatal and perinatal clients. These services are intended to be individualized to treat the functional deficits identified in the ASAM Criteria. In the residential treatment environment, an individual's functional cognitive deficits may require treatment that is primarily slower paced, more concrete and repetitive in nature. The daily regimen and structured patterns of activities are intended to restore cognitive functioning and build behavioral patterns within a community. Each beneficiary shall live on the premises and shall be supported in their efforts to restore, maintain and apply interpersonal and independent living skills and access community support systems. Providers and residents work collaboratively to define barriers, set priorities, establish goals, create treatment plans, and solve problems. Goals include sustaining abstinence, preparing for relapse triggers, improving personal health and social functioning, and engaging in continuing care.

Residential services are provided in Department of Health Care Services licensed residential facilities. Residential services can be provided in facilities with no bed capacity limit. The length of residential services is up to sixty (60) days with a ninety (90) day maximum for adults if County staff authorizes a one-time extension of up to 30 days due to medical necessity. The length of residential perinatal services is up to one hundred eighty days (180) with a two hundred seventy (270) day maximum if County staff authorizes a one-time extension of up to ninety (90) days due to medical necessity.

The components of Residential Treatment Services are:

- Intake
- Individual/Group/Family Counseling
- Patient Education
- Family Therapy
- Safeguarding Medications: Facilities will store all resident medication and facility staff members may assist with resident's self-administration of medication

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- Collateral Services
- Crisis Intervention Services
- Treatment Planning
- Transportation Services: Provision of or arrangement for transportation to and from medically necessary treatment
- Discharge Services

There are additional components related to residential perinatal treatment services described in Section II below.

TARGET POPULATION

Sections 1 and 2: Long-term residential for adult males and females:

- Men and women who are diagnosed with a substance use disorder;
- Underserved populations such as the disabled and low-income individuals;
- Men and women who have co-occurring substance use disorders and mental health disorders;
- Residents of Fresno County.

Section 3: Residential perinatal for adult females:

- Women who are pregnant or parenting and substance using, with children ages birth through 12;
- Women who are attempting to regain custody of a child/children;
- Residents of Fresno County.

SERVICES TO BE PROVIDED BY CONTRACTOR

A residential SUD treatment applicant must be ready to begin providing services upon contract execution, as early as April 2016. The successful applicant(s) will provide residential and/or residential perinatal treatment services in compliance with: (1) all local zoning and occupancy ordinances; (2) the County Agreement, which includes County policies; (3) State of California Alcohol and/or Other Drug (AOD) Program Certification Standards; (4) Office of Management and Budget (OMB) Circular A-87 "*Cost Principles for State, Local and Indian Tribal Governments*"; and (5) OMB Circular A-122 "*Cost Principles for Non-Profit Organizations*"; and (6) National Culturally and Linguistically Appropriate Services (CLAS) standards. Additionally, providers shall obtain a fire clearance and/or have a current fire clearance to operate a residential facility and shall comply with all occupancy ordinances and procedures.

The program shall maintain a complete daily census of all participants served and all statistical information required by Fresno County, including but not limited to date participant entered treatment, date residential program was completed, date of County-approved residential extensions and date of residential exit. The census will be submitted monthly with the program's invoice. In addition, the program shall maintain complete records of services and provide all the data necessary for reporting to the State of California, referral sources and the County, including interim services for those who must wait to be placed in treatment; and waiting list information, which must include the number of days clients have been waiting for admission to treatment.

The provider shall fully describe its existing procedure for continuous quality improvement with supporting documentation (see Copies section).

The application shall include a cost per daily bed slot with a separate room and board cost. Annual reimbursement of services will not be paid in excess of the cost per daily bed slot established in the executed agreement. The provider shall be reimbursed for actual bed days utilized. Applicants have the option to receive an annual cost of living increase of no more than 1.5% of the previous year's room and board cost. To receive the increase, applicants must request and justify it in their budget narrative.

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The Director of the Fresno County Department of Behavioral Health or designee reserves the authority to negotiate rates and bed allocations as deemed appropriate. The Director or designee also reserves the authority to add or delete providers at any time during the term of the agreement based on funding availability and/or performance.

General Requirements for All Programs

- Incorporate evidence-based, outcome-informed treatment methods.
- Demonstrate experience and/or knowledge of working with relevant statewide, municipal and community based agencies that interface with the target population.
- Demonstrate an ability to work in cooperation with other agencies to provide linkages to individual and family supportive services.
- The ability to be flexible in meeting unique participant needs by including equal access to those with disabilities, gender-specific services, and culturally sensitive services that adhere to the National Standards on Culturally and Linguistically Appropriate Services (CLAS). A CLAS plan stating how providers will address the 15 national CLAS standards shall be submitted to the County within 30 days of contract execution. URL: <http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>
- All agencies providing substance use disorder services must have current State of California Alcohol and Other Drug Programs Certification and abide by the Certification Standards, March 2004. URL: http://www.dhcs.ca.gov/provgovpart/Documents/AOD_Certification_Standards.pdf
- Staff shall meet all requirements for certification for individuals providing counseling services in alcohol and other drug (AOD) recovery and treatment programs per the California Code of Regulations (CCR), Title 9, Division 4, Chapter 8. Upon implementation of the DMC Waiver, the provider will also need to adhere to Title 22 requirements for residential services.
- Minimum duration and intensity: Per AOD Certification Standards, a minimum of 20 hours per week of individual or group sessions and/or structured activities shall be provided for each participant. Structured activities shall be designed to meet treatment goals and objectives for increased social responsibility, self-motivation, and integration into the larger community. Such activities may include work, school, or volunteer hours outside the facility which are required as part of the residential program
- Conduct Live-Scan criminal background checks for all counselors and staff having contact with children.
- Provide a monthly waiting list for long-term residential and/or weekly waiting list for perinatal services.
- Provide interim substance use disorder services until an individual is admitted into a treatment program. Interim services must be documented.
- Upon adoption of the DMC Waiver in Fresno County, providers must work toward and obtain DMC certification.
- Programs with bed availability must complete intakes within 24 hours of request.
- For clients referred to a program from jail or Drug Court, the program shall provide transportation to the treatment facility immediately upon request.
- Must have at least one diagnosis from the Diagnostic and Statistical Manual of Mental Disorders (DSM) III or IV for Substance-Related and Addictive Disorders with the exception of Tobacco-Related Disorders and Non-Substance-Related Disorders; or be assessed to be at risk for developing substance use disorder (for youth under 21).
- Must meet the ASAM Criteria definition of medical necessity for services based on the ASAM Criteria.

In addition to the requirements listed above, there will be criteria to determine medical necessity and Medi-Cal eligibility once the DMC-ODS Pilot program has been implemented.

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The sections identified below summarize the services being requested through this RFSQ. For each section the applicant responds to, it is required that a separate application be submitted.

Section 1: Residential services for adult males

Section 2: Residential services for adult females

Section 3: Residential perinatal services for adult females

Section 1: Residential services for adult males

Fresno County has experienced a need for additional residential services to meet the needs of males requiring residential services. These services, when used in conjunction with day care or outpatient services after discharge, have been found to be effective for participants in longer-term residential care.

Section 2: Residential services for adult females

Addicted women frequently have poor family and social support networks, have few positive relationships with other women, and often are dependent on unreliable, abusive partners, thereby increasing their vulnerability to physical and/or sexual abuse. In turn, children of substance-abusing women are at greater risk for neglect and sexual, physical, and psychological harm. These difficulties are magnified in children living in abusive households, because their mothers frequently lack the social and economic supports that could help alleviate some of the social isolation as well as the biological impact of prenatal drug exposure.

Significant psychiatric problems, such as a personality disorder or depression, are not uncommon in women who use drugs or abuse alcohol. These factors almost invariably hinder parenting capabilities further and lessen the chance for a normal developmental course for the child. Even in depressed women who do not use drugs or alcohol, there is less involvement with their children, poor communication among family members, increased friction, lack of affection, and an increase in guilt and resentment toward the child.

The applicant shall be well-versed in and practice gender-specific SUD treatment as detailed in Gender-Specific Substance Abuse Treatment, at website www.stephaniecovington.com. **The Department of Behavioral Health, Contracts Division – Substance Use Disorder Services is requiring utilization of the *Treatment Standards for Women with Substance Use Disorders*.** These standards are an important part of a long-term effort targeting this population with comprehensive and integrated services; please follow link below. http://www.nasadad.org/resource.php?base_id=1482.

Section 3: Residential perinatal services for adult females

Alcohol and other drug treatment providers need to understand and address the specific problems pregnant and parenting substance-using women face in accessing and participating in treatment. Treatment programs may lack linkages to medical services, especially prenatal care.

Specific Requirements for Residential Perinatal Treatment Services

Services shall be provided in accordance with the following:

- Perinatal Services Network (PSN) Guidelines (2014) for non-Drug Medi-Cal perinatal programs (URL: http://www.adp.cahwnet.gov/perinatal/pdf/guidelines_09.pdf)
- Title 9, Division 4, Department of Alcohol and Drug Programs, Subchapter 5, Licensing Requirements for Alcohol and Drug Abuse Recovery or Treatment Facilities; and Models for Developing Trauma-Informed Behavioral Health Systems and Trauma-Specific Services: (URL: <http://www.theannainstitute.org/MDT.pdf>; updated 2008: <http://www.ct.gov/dmhas/lib/dmhas/trauma/TraumaModels.pdf>)
- Upon implementation of the DMC Waiver, the provider must adhere to Title 22 requirements for residential services
- Provide licensed child care that is affordable and appropriate for the safety and well-being of the child(ren), or have a co-op system in place for supervision of children.
- Provide home management and parenting training

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- Provide linkages to legal services for issues such as domestic violence, child custody, adoption, and divorce
- Provide services related to psychological, financial, physical, and social survival of participants and children once they are released from the treatment program

In addition, treatment programs serving pregnant and parenting substance-using women must include the following services, or support active outreach to and linkage with appropriate service resources already available in the community:

- Comprehensive medical services;
- Services must respond to women's needs regarding reproductive health, sexuality, relationships, and all forms of victimization. Services should be offered in a nonjudgmental manner and in a supportive environment;
- Alcohol and other drug treatment will be provided in gender-specific, trauma informed, recovery oriented programs that are ethnically and culturally sensitive whenever possible. The Center for Gender and Justice Institute for Relational Development has available gender specific treatment curricula at www.stephaniecovington.com;
- Transportation services, including cab vouchers, bus tokens, and alternatives for women who live in communities where public transportation is unavailable, unreliable, unsafe, or cumbersome;
- Child care, baby-sitting, and therapeutic day care services for children that encourage and support mother-child bonding and attachment;
- Counseling services, including individual, group, dyadic and family therapy;
- Vocational and educational services leading to training for meaningful employment, the General Equivalency Diploma (GED), and higher education;
- Drug-free, safe housing;
- Financial support services;
- Case management services; and
- Pediatric follow-up and early intervention services.

LENGTH OF TREATMENT

The minimum length of residential treatment shall be up to sixty (60) days and the maximum length shall not exceed one thirty (30) day extension upon County approval, up to ninety (90) total days.

The minimum length of residential perinatal treatment shall be up to one hundred eighty (180) days and the maximum length shall not exceed one ninety (90) day extension upon County approval, up to two hundred seventy (270) total days.

The residential treatment provider shall obtain approval from DBH Contracts Division – SUD Services to extend a client's residency beyond the 60 day residential program or the 180 day residential perinatal program in writing at least fifteen (15) days prior to the client's expected completion of the Residential Treatment program. Extensions may be requested via email at: SAS@co.fresno.ca.us.

MANAGEMENT PLAN

Submit an organizational plan and management structure adequate and appropriate for overseeing the proposed services (see Attachments).

SOQ SUBMITTAL REQUIREMENTS

The submittal will enable the Selection Committee to appraise the general competence and qualifications of the appraisal firms. Please provide the listed information in the following sequence:

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- A. Firm name, address and phone number
- B. Type of organization (sole-proprietorship, partnership, or corporation)
- C. Firm principals who will be responsible for the project, and their educational background, credentials, training and experience
- D. Key personnel (including proposed sub-contractors, if applicable) who will work on the project with their educational background, credentials, training and experience on comparable projects
- E. List of current staff, including job classification
- F. Firm qualifications
- G. Firm organization chart
- H. List current projects or commitments for similar services in your office
- I. List the name and phone number of at least five relevant client references
- J. Current AOD certification
- K. Current DHCS residential facility license
- L. Completed budget forms (**Attachment A**)
- M. Completed Administrative Policy No. 5 Compliance form (**Attachment B**) to determine whether this County policy applies to your agency
- N. Current Certificates of Insurance for the following:
 - 1. Commercial General Liability with limits of not less than One Million Dollars (\$1,000,000) per occurrence and an annual aggregate of Two Million Dollars (\$2,000,000). This policy shall be issued on a per occurrence basis.
 - 2. Automobile Liability with limits for bodily injury of not less than Two Hundred Fifty Thousand Dollars (\$250,000) per person, Five hundred Thousand Dollars (\$500,000) per accident and for property damages of not less than Fifty Thousand Dollars (\$50,000), or such coverage with a combined single limit of Five Hundred Thousand Dollars (\$500,000). Coverage should include owned and non-owned vehicles used in connection with provided services.
 - 3. If a provider employs licensed professional staff (e.g. Ph.D., R.N., L.C.S.W., M.F.T.) in providing services, Professional Liability Insurance of not less than One Million Dollars (\$1,000,000) per occurrence, Three Million Dollars (\$3,000,000) annual aggregate.
 - 4. A policy of Worker's Compensation insurance as may be required by the California Labor Code.
- O. Copy of most recent Fire Clearance
- P. Brief description (1-2 pages) of your continuous quality improvement (CQI) process
- Q. A brief organizational plan
- R. A brief description of your experience and knowledge of residential SUD treatment services

RIGHT TO REJECT REQUEST FOR QUALIFICATIONS

The County DBH Contracts Division – SUD Services reserves the right to reject any and all RFSQs and to waive informalities or irregularities in the RFSQ.

PROCEDURE FOR REQUEST FOR QUALIFICATIONS

The Fresno County Alcohol and Drug Program Administrator or designee will implement the following process by which County staff will solicit and accept new applications from prospective residential program providers:

Each year, prior to July 1, DBH – SUD Services will review applications and program activity to determine whether a need exists for additional funding and/or providers for residential services. As demand increases the DBH Director will have the discretion to increase beds and/or add new providers to the extent that funding is available.

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TERM

The initial agreement shall be for a three-year term with two (2) additional twelve (12) month periods upon mutual consent of the Director or his/her designee and the Contractors. The agreement shall be effective upon execution. Existing contracts with residential providers that extend beyond the County 2015-16 fiscal year will be superseded under a new master agreement. The new master agreement will include the combined total of current beds/funding and any additional beds/funding awarded through this RFSQ.

TERMINATION

This agreement may be terminated by the County at any time upon a thirty (30) day written notice

AWARD CRITERIA

Capability and Qualifications

- A. The County will contract with all applicants that are capable of providing client services as described within this RFSQ for a combined total of approximately seventy-five (75) residential/residential perinatal bed slots. Applicants must possess qualifications as required by Federal, State, and local governments to provide this service(s). The County will conduct site reviews of all qualified applicants prior to awarding contracts to ensure that facilities meet necessary standards and regulations as well as contract requirements. The County has discretion to allocate funding to each section as the County deems appropriate. Additional beds may be funded as funds become available. The allocation for each agency will be determined based on the following:
 1. Applicant is AOD certified and is compliant with AOD Certification Standards:
http://www.dhcs.ca.gov/provgovpart/Pages/Facility_Certification.aspx
 2. Applicant possesses current Department of Health Care Services license to operate a residential facility.
- B. The County reserves the right to negotiate rates/bed allocation as deemed appropriate. The County reserves the right, at its sole discretion, to terminate this RFSQ process or negotiations with a selected Contractor and either perform the work with its staff or begin a new RFSQ process. Nothing herein, or in the process, shall be construed as having obligated the County to pay for any expenses incurred by respondents to this RFSQ, or to the selected Contractor(s) prior to Board of Supervisors' approval of a Contractor services agreement.

APPEALS

Appeals must be submitted in writing within seven (7) working days after notification of proposed recommendations for award. A "Notice of Award" is not an indication of County's acceptance of an offer made in response to this RFSQ. Appeals should be submitted to County of Fresno Purchasing, 4525 E. Hamilton Avenue, Fresno, California 93702-4599 and in Word format to gcornuelle@co.fresno.ca.us. Appeals should address only areas regarding RFSQ contradictions, procurement errors, selection discrepancies, legality of procurement context, conflict of interest, and inappropriate or unfair competitive procurement grievance regarding the RFSQ process.

Purchasing will provide a written response to the complainant within seven (7) working days unless the complainant is notified more time is required.

If the protesting bidder is not satisfied with the decision of Purchasing, he/she shall have the right to appeal to the Purchasing Agent/CAO within seven (7) working days after Purchasing's notification; except if, notified to appeal directly to the Board of Supervisors at the scheduled date and time.

If the protesting bidder is not satisfied with Purchasing Agent/CAO's decision, the final appeal is with the Board of Supervisors.