

**ALAMEDA COUNTY BEHAVIORAL HEALTH DEPARTMENT (ACBHD)
REQUEST FOR PROPOSAL (RFP) 26-04
SPECIFICATIONS, TERMS & CONDITIONS
FOR
JUVENILE FACILITIES MEDICAL SERVICES**

INFORMATIONAL MEETING/ BIDDERS' CONFERENCES

Date	Time	Location
October 28, 2026	10:00 – 11:30am	Teams invitation information in Calendar of Events
October 29, 2026	2:00 – 3:30pm	

PROPOSALS DUE
by 2:00 pm on December 1, 2026
to
[County of Alameda OpenGov](#)

Proposals received after this date/time will NOT be accepted

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I. STATEMENT OF WORK

A. INTENT

It is the intent of these specifications, terms, and conditions for Alameda County Behavioral Health Department (hereafter ACBHD or County) to seek proposals to provide comprehensive medical care services for justice-involved youth¹ at the Alameda County Juvenile Facilities (Juvenile Facilities).

ACBHD intends to award one contract to the Bidder selected as the most responsible bidder whose response conforms to the Request for Proposal (RFP) and meets the County requirements. At this time, ACBHD has allocated \$8,815,323 per contract year for this ongoing program through various funding sources.

Any contract that results from this RFP process may be prorated for the first fiscal year at the contract start date and may be reimbursed based on actual costs. There will be a start-up period equivalent to a three-month allocation, which will be based on actual costs.

Proposals shall form the basis for any subsequent awarded contract. Staffing levels and operating costs must accurately reflect the Bidder's costs for the program. ACBHD reserves the right to dissolve a contract if/when awarded Contractor materially alters staff, budgets, deliverables and outcomes any time after the contract award.

The County is not obligated to award any contract as a result of this RFP process and may continue these services under the current provider. The County may, but is not obligated to, renew any awarded contract. Any renewal of an awarded contract shall be contingent on the availability of funds, awarded Contractor's performance, and continued prioritization of the activities and priority populations as defined and determined by ACBHD.

ACBHD does not discriminate against Bidders that serve high-risk populations or specialize in conditions that require costly treatment. Further, the County does not discriminate in the selection, reimbursement, or indemnification of any provider who is acting within the scope of his or her license or certification under applicable state law, solely on the basis of that license or certification.²

¹ Throughout this RFP, the term 'youth' is inclusive of youth, young adults and transition-age youth.

² In compliance with 42 CFR § 438.214 as a Prepaid Inpatient Health Plan (PIHP).

B. BACKGROUND

The Juvenile Facilities include Juvenile Hall, a 24-hour secure detention facility capable of housing 358 boys/young men and girls/young women 12 years old through age 25, and Camp Wilmont Sweeney (Camp Sweeney), a 50-bed minimum security residential program for adolescent males ranging from 15 through 25 years of age. The Juvenile Facilities operate in accordance with the regulations set forth in the California Minimum Standards for Juvenile Facilities, Title 15. Services include but are not limited to:

- Academic programming,
- Medical and behavioral health care,
- Organized recreation,
- Religious and volunteer services, and
- Programming facilitated by a complement of community-based organizations.

Juvenile Hall, located on County property in San Leandro, CA, is a temporary holding facility for youth awaiting court and a detention facility for youth found to have committed serious offenses and ordered by the Courts to secure treatment.

Camp Sweeney functions as a local transitional detention facility for the Juvenile Court and is administrated by Alameda County Probation Department (ACPD). Youth can be detained at Camp Sweeney for up to nine months. During their detention, youth can be granted opportunities to leave the facility for school/employment and weekend passes to stay at home. Youth in need of medical services are typically transported from Camp Sweeney to the Juvenile Hall by ACPD staff, but medical services are occasionally required to be provided at Camp Sweeney.

Medical services are provided in the following areas of the Juvenile Facilities:

- Juvenile Hall Main Clinic: Medical services include examinations, laboratory testing, specialty consultation, and medication dispensing. In addition, the Main Clinic includes recovery/observation/isolation rooms, dental operatory, telemedicine, and staff offices.
- Juvenile Hall Living Unit Examination Rooms: Medical services are also provided in the living units, where up to 30 youth can be detained. Each unit has an exam room with an exam table, a sink, and mounted otoscope, and ophthalmoscope.
- Camp Sweeney: Most services are provided to youth in the Main Clinic at the Juvenile Hall. However, a medication pass documenting prescriptions is provided to youth directly at Camp Sweeney and occasional individual services may be provided to youth at Camp Sweeney as needed.

C. SCOPE/PURPOSE

ACBHD seeks a qualified provider to deliver medical services to youth detained in the Juvenile Facilities. The awarded Contractor will be responsible for medically clearing youth to be booked into the Juvenile Facilities (fitness for detention), providing and coordinating ongoing medical care and services for detained youth, and coordinating/ensuring continuity of care for youth discharged from the Juvenile Facilities. Specifically, this program is designed to ensure:

- All youth entering the Juvenile Facilities receive complete health screenings to determine fitness for detention.
- All youth detained in the Juvenile Facilities for at least 96 hours receive a health appraisal exam and any indicated follow-up care such as required immunizations, lab work, etc.
- All youth who have been identified as having complex health needs have a comprehensive care plan that outlines specific medical supports (which may include input from ACBHD and ACPD staff).
- All youth who have been determined to need medication assisted treatment (MAT) for substance use receive treatment and ongoing care during their detention from a physician.
- All youth detained in the Juvenile Facilities receive ongoing care for acute and chronic conditions and urgent care as necessary, to improve their health and wellbeing. This includes prescribing and monitoring medication, dental exams/treatment, and coordinating offsite specialty consultation/care as needed.
- All youth upon release, receive coordination to ongoing medical care in the community to ensure continuity of care.

Interagency collaboration is critical in ensuring detained youth receive appropriate care in a timely manner. The awarded Contractor shall work directly with ACBHD, ACPD, Alameda County Public Health Department (ACPHD), and other health care providers to coordinate all health care services inside the Juvenile Facilities as well as in the community. The selected Bidder shall:

- Maintain regular communication with each partner agency/department.
- Provide regular updates and reports on services,
- Participate in multidisciplinary team meetings to coordinate care for youth, and
- Actively participate in standing interagency/department meetings.

The awarded Contractor shall provide medical services 24 hours a day, 365 days a year. The number of youth detained in Juvenile Hall fluctuates between 50-65 youth daily, while the number of youth detained at Camp Sweeney fluctuates between 10-15 young men. However, the awarded Contractor should be prepared to serve additional youth as needed.

D. BIDDER MINIMUM QUALIFICATIONS

To be eligible to participate in this RFP, Bidders must successfully demonstrate in their proposal how they meet the following Bidder Minimum Qualifications:

- Have at least three years of experience providing comprehensive medical services to youth within the last five years; and
- Have at least three years of experience providing substance use services including medication assisted treatment (MAT).

Bidders are eligible to participate in the RFP process if they meet the Bidder Minimum Qualifications. Please note, ACBHD will disqualify proposals that:

- Do not clearly demonstrate that Bidder meets each of the specified Bidder Minimum Qualifications
- Are unreasonable and/or unrealistic in terms of budget, as solely determined by ACBHD
- Exceed the maximum page limit as defined in the Bid Response Template

Disqualified proposals will not be evaluated by the Evaluation Panel and will not be eligible for contract award under this RFP. ACBHD has the right to accept all or part of the proposed program model at its discretion.

E. SPECIFIC REQUIREMENTS

The scope of work for awarded contracts from this RFP will include conformance with all of the following throughout the program period, as needed:

- Provide medical services including but not limited to:
 - Health screening, assessment, and appraisal
 - Comprehensive primary care and medical treatment
 - Substance use treatment
 - Health education
 - Medication administration (including psychotropic medication and medication assisted treatment for substance use)
 - Dental and vision care
 - Sick call/triage visits
 - First aid
 - Medical clearance
 - Infection control
 - Mental health care
 - Involuntary psychiatric holds
 - On call services

- Record clearance
 - Medical discharge
 - Disaster care
 - Transportation
 - Coordination of off-site ancillary and specialty care services, and transportation
- Plan for and implement continuous training and quality improvement, in areas including but not limited to cultural and linguistic responsiveness;
- Promote cultural responsiveness and multi-culturalism using Culturally and Linguistically Appropriate Services (CLAS),³ which includes tracking and reporting to ACBHD trainings and/or activities that meet the CLAS requirements;
- Complete trainings required to access and input data and conduct data entry in a timely manner into the County's electronic information management and claiming system, as applicable; and
- Complete other trainings as required or requested by the County.

F. BIDDER EXPERIENCE, ABILITY AND PLAN

1. *Understanding of and Experience with Priority Population*

ACBHD seeks proposals that demonstrate a strong understanding of and experience with the priority population: justice involved youth. Successful bidders will demonstrate knowledge and understanding of the needs, issues, and challenges faced by the priority population. Bidders should identify strategies to help clients address barriers to engagement in treatment services and demonstrate experience in supporting the priority population. Bidders must demonstrate experience in providing comprehensive and effective medical services that are culturally affirming and responsive to the individuals in the priority populations, and a cultural understanding of the landscape in which they will be working.

Clients at the Juvenile Facilities may be at risk of recidivism, violence, lack of access to primary care and mental health services, substance use, childhood trauma, removal from their home/family, exploitation (sexual, criminal, etc.).

Bidders should also describe their experience in providing primary health care services to similar populations, including individuals who may be reluctant to engage in treatment.

2. *Service Delivery Approach*

³ <https://www.thinkculturalhealth.hhs.gov/pdfs/EnhancedNationalCLASStandards.pdf>

The awarded Contractor will provide the following medical services. Some of these services could happen at various and/or multiple steps, the specific set of services at each level is not fixed.

Health Screening

Contractor will perform an initial communicable diseases and fitness-for-detention screening exam on every youth immediately (within 45 minutes from time of arrival to completion of screening) upon their arrival and prior to their formal admission to the Juvenile Facilities. The screening must be performed by a licensed health care professional and use current and updated screening assessment forms approved by ACPD and ACBHD. At a minimum, the Health Screening shall satisfy California Code Regs. tit. 15, § 1430 and include the following:

- Inquiry into current symptoms of communicable diseases.
- Assessment for possible current drug and/or alcohol intoxication and regular substance use.
- Brief initial evaluation of condition of skin, including trauma markings, bruises, lesions, jaundice, rashes, infestations, needle marks or other indications of drug abuse.
- Brief initial evaluation of body deformities and ease of movement.
- Assessment of any past history of illness and health problems including mental, dental, and communicable diseases.
- Screening for depression and current/active and past suicidal ideation (use of Patient Health Questionnaire-9).
- Screening for immediate and serious risk for potential harm to self or others due to mental health presentation.
- Relevant selected screening tests, e.g., urine pregnancy testing for females, urine NAAT for chlamydia/gonorrhea.
- Assessment of need for emergency contraception (EC) for females who may have had unprotected sex within the previous five days and offering of EC to patients, when appropriate.
- Initial brief assessment of sexual orientation and gender identity/expression for the purpose of making a housing recommendation to ACPD staff.

Nursing Intake Assessment:

Contractor shall perform a nursing intake visit with every youth, within four hours of a youth being detained in the Juvenile Facilities. Contractor shall ensure that a qualified nurse conducts the health screening. At a minimum, the nursing intake shall include:

- Initial search of immunization history in CAIR2 and determination of need for any vaccines.
- Relevant selected screening tests, e.g., urine pregnancy testing for females, testing for sexually transmitted infections, etc.

- Assessment of need for EC for females who may have had unprotected sex within the previous 5 days and offering of EC to patients, when appropriate.

Health Appraisals

Contractor will complete a full health appraisal and physical examination (“Health Appraisal”) by a qualified health care professional for every youth detained in the Facilities within 96 hours of their admission. The Health Appraisal shall satisfy Cal. Code Regs. tit. 15, § 1432 and include the following:

- Collection and review of prior health records and identification of immediate past medical providers.
- Review of the Health Screening.
- Complete health history and physical examination.
- Psycho-social evaluation (e.g., HEADSS (home, education, activities/employment, drugs, suicidality, and sex) assessment).
- Dental screen.
- Vision and hearing screen.
- Thorough substance use screening
- Sexual and reproductive health assessment, including counseling about initiation or continuation of contraception method of youth’s choice.
- Laboratory and diagnostic testing to detect communicable diseases youth may have been exposed to either prior to or during detention (including HIV, STIs, tuberculosis, viral “cold” syndromes, etc.).
- Immunizations to get youth up to date on all vaccinations for children and adolescents based on recommendations from the Advisory Committee on Immunization Practices (including documentation of any administered vaccines in the CAIR2 system).
- Relevant health education, counseling, and health behavior change-related motivational interviewing.
- Referral for behavioral health services, forensic medical services, urgent/emergency medical care services, specialty care for acute or chronic diseases (including California Children’s Services eligible conditions), and hospitalization, as needed
- Other tests and examinations as appropriate.

Health Appraisal for females will also include:

- Inquiry about menstrual cycle abnormalities, past and current and future contraceptive preferences and needs, and possibility of current pregnancy.
- Gynecologic and breast examinations when necessary and in accordance with guidelines from the American Academy of Pediatrics.
- Initiation of and referral for prenatal care, as needed.
- Referral for specialty services, e.g., ultrasounds, as needed.

Primary Care

Contractor will act as the primary care provider for all youth detained in the Juvenile Facilities. Primary Care will include health screenings and physicals; triage; first aid; preventive care; reproductive health care; management of chronic conditions; assessment and treatment of minor infections and injuries; health education; medication management and distribution; availability to address acute conditions as they present; and referral for subspecialty services. Contractor will provide youth with urgent care as necessary and ongoing care for acute and chronic conditions to improve their health and wellbeing.

Special Needs of Pregnant and Postpartum Girls/Women

Care for the special needs of pregnant and postpartum girls/women will include, but not be limited to:

- Screening and testing for pregnancy at the time of booking into the Juvenile Facilities.
- Providing counseling, prenatal education, and/or care to pregnant girls/women detained in the Juvenile Facilities.
- Coordinating medical services related to pregnancy including termination, labor, and delivery.
- Postpartum care and support including necessary medical equipment (e.g., breast pumps), and arranging delivery of breast milk to child, when appropriate.
- Developing and implementing a joint protocol with ACPD around the safe storage and delivery of breast milk.

Substance Use Treatment

Contractor will prescribe and administer MAT for youth with a substance use disorder as medically appropriate. Contractor will medically monitor youth on MAT, provide ongoing individual education, and refer youth to substance use services available at the Juvenile Facilities. Contractor will ensure youth on MAT are connected to a community-based provider prior to release to ensure continuity of care.

Health Education

Contractor will provide individual health education to youth in the Juvenile Facilities. When needed, and as funding permits, Contractor will assist in the design and delivery of group health education for the Juvenile Facilities and will collaborate on group health education with ACPHD, ACPD, and Alameda County Office of Education (ACOE).

Medications/Pharmaceuticals

Contractor will be responsible for the ordering, secure storage, and proper distribution of all physical, psychotropic medication, and MAT including the provision of medication to youth upon release. While psychotropic medication will primarily be prescribed by ACBHD

psychiatrists, Contractor will be responsible for prescribing bridge medications after hours and on weekends. Contractor will be responsible for the expense of all pharmaceuticals within its formulary and be responsible for the expense of second-generation antipsychotics and psychostimulants not in the Contractor formulary; however, these must be approved on a case-by-case basis with ACBHD and authorized by the ACBHD Medical Director.

Contractor will bill insurance for prescribed medication for all youth detained in the Juvenile Hall who are under a Placement Order from the juvenile courts.

Psychotropic medication utilization review will occur monthly to determine, amount of use and cost of psychotropic pharmaceuticals. If any particular issues arise related to use or cost of psychotropic pharmaceuticals, Alameda County Health (AC Health), ACBHD, and Contractor will meet to discuss said issues.

Dental Services

In addition to initial dental screen, Contractor will provide timely access to necessary dental treatment to all detained youth. Treatment will include preventive care, response to acute conditions, and extractions when necessary. Contractor will initiate services for youth who fail a dental screen within two weeks and initiate services for youth with dental emergencies within 48 hours. For youth detained for longer periods of time, Contractor will provide annual preventive dental care and exams. The County will identify funding options around cases that require advanced and complex dental care. Advanced and complex dental care provided outside of the Juvenile Justice Center dental office will not be covered under this contract.

Vision Examinations/Glasses

Contractor shall only provide initial vision screening for all youth detained at the Juvenile Facilities. Comprehensive eye exams, prescriptions, and eyeglasses will be funded by ACPD. Contractor is responsible for managing the referral process and communication with Optometry provider funded by ACPD. Contractor shall also be responsible for acquisition of appropriate consents and arranging specialty care follow-up.

Sick Call/Triage

Contractor will provide non-urgent care to any youth requesting medical services on a daily basis. Contractor will provide sick call/triage services in the Juvenile Facilities' living units or within the medical clinic, as appropriate.

Urgent Care and First Aid

Contractor will respond to all requests for urgent care and first aid for youth detained in the Juvenile Facilities and collaborate with ACBHD staff for urgent mental health care needs.

Medical Clearance

Contractor will collaborate with ACPD staff to provide medical clearance for youth detained in the Juvenile Facilities after instances including: use of force, use of pepper spray, and use of physical restraints. Contractor will adhere to all Title 15 requirements regarding medical clearance and document assessments in a section of the medical record (paper or electronic) that is for institutional use only and will not be released through routine “release of information” requests.

Infection Control

Contractor will maintain updated infection control plans for communicable diseases (e.g., COVID-19, flu, TB, etc.) for the Juvenile Facilities. Contractor will work with ACPHD and ACPD to update and implement infection control plans as needed.

Integrated Primary/Mental Health Care

Mental health care for detained youth is provided by ACBHD. However, integrated care is important for individuals with complex health needs. Contractor will participate in multidisciplinary team meetings to collaborate with ACBHD to ensure all youth with complex health needs have specific care plans while they are detained.

Involuntary Psychiatric Holds

Contractor will provide medical clearance to all youth requiring an involuntary psychiatric hold. However, initiation and execution of such holds will be the sole responsibility of ACBHD staff. Contractor will collaborate with ACBHD staff, ACPD, and staff from John George Psychiatric Hospital (John George) or Willow Rock Center (Willow Rock) to ensure youth are safely transferred to the appropriate psychiatric health facility.

On-Call Services

Contractor will make provisions for on-call medical and dental care services, whenever coverage is not available on-site. These services are in addition to the on-site staff requirements.

Record Clearance

Contractor will conduct a review of the medical record of a youth ordered to serve at Camp Sweeney prior to their departure to camp and within five days of receiving a request from ACPD’s Placement Unit of a youth’s impending transfer to placement in a group home.

Medical Discharge

Contractor will work with ACBHD, ACPD, ACPHD, and other health care providers to ensure continuity of care for every youth released from the Juvenile Facilities. Contractor will complete a medical discharge for every youth leaving the Juvenile Facilities. Medical discharge will consist of a review of medical records and necessary follow-up care,

scheduling of medical appointments, and any appropriate medical documentation including immunization record, medication list, and any necessary prescriptions.

Disaster Care

Contractor will provide triage, aid, urgent medical care services, and referral out to appropriate facility for a higher level of care to youth detained in the Juvenile Facilities during a natural disaster.

Ancillary Services

Contractor will be responsible for coordination for all off-site services such as all laboratory, x-ray, and other ancillary services for all non-hospitalized youth while they are in custody. Costs for hospitalized youth are described below.

Consulting Services and Medical Equipment

Contractor will make arrangements and payments for all consulting medical specialty services (e.g., orthopedics, cardiology, emergency room services) and special medical equipment (e.g., crutches, commode chairs, etc.). Specialty medical equipment must 1) withstand repeated use, 2) primarily and customarily be used to serve a medical purpose, 3) generally not be useful to a person in the absence of illness or injury, and 4) be appropriate for use in the Juvenile Facilities' living units. The use of any medical specialty equipment within the Juvenile Facilities will be approved by ACPD.

Contractor is responsible for the purchasing and security of all supplies and equipment use. The cost of medical equipment and supplies shall be within the terms of this agreement.

Utilization review will occur monthly to determine, amount of use and cost of equipment and supplies. If any issues arise related to use or cost of equipment and supplies, ACPHD, ACBHD, and Contractor will meet to discuss said issues.

Contractor shall immediately report to ACPD staff any accidents or loss of any medical equipment and supplies. Contractor shall make counts of all medical equipment and supplies when directed by ACPD for security and inventory purposes. A record of these counts shall be maintained by Contractor and shall be subject to inspection by ACPD.

Other Off-Site Hospital and Specialty Services

Contractor shall provide or coordinate the provision of off-site health services for youth detained in the Juvenile Facilities, as needed and in collaboration with ACPD for transportation. Contractor will make every effort to ensure youth are connected to their primary care provider, if one exists, for any off-site hospital and specialty services.

Costs or payments associated with off-site hospitals and specialty services will be covered by the provider/hospital providing said care. In cases where a youth must be hospitalized for more than 24 hours, the cost associated with care can be recouped by the hospital providing said care through the Medi-Cal Inmate Program.

Contractor will coordinate with ACPD regarding the transportation of any youth requiring services off-site. Off-site health services may include but are not limited to:

- Emergency Room Services: Youth with emergency medical conditions that are beyond the scope of on-site medical, will be transported to the appropriate Emergency Department for assessment and treatment.
- Forensic medical examinations: Contractor will provide access to forensic medical examinations. Exams necessary during the course of routine care of youth will be the responsibility of Contractor (e.g., Females who have disclosed sexual assault within 72 hours prior to admission to the Juvenile Facilities and youth physically assaulted/abused prior to admission or while in custody). In accordance with preexisting policies and procedures, youth under the age of 14 who require forensic examinations will be transported to the Emergency Department; youth 14 years of age and older who require forensic medical examinations will be transported to Highland Hospital. Contractor will contact the appropriate hospital to consult on any case with any questions prior to sending an infant, child, adolescent or developmentally delayed adult for an exam including for events that happened more than 72 hours prior to admission to the Juvenile Facilities.
- Forensic exams required by the Court or Probation specifically for purpose of legal determinations or proceedings (e.g. mandatory drug or toxicology screening) will NOT be performed by any medical staff providing or who may provide ongoing health care to the youth. Contractor shall refer to and coordinate forensic examinations with an appropriate facility for care, but it shall not be the responsibility of Contractor to perform such exams. Contractor will develop Memoranda of Understanding with local hospitals or other health care providers in order to provide such forensic exams.
- Specialty services: Contractor will arrange for access to specialty services including but not limited to orthopedics, cardiology, emergency room services, endocrinology, neurology, optometry, pulmonology, radiology, rheumatology, and surgery for youth detained in the Juvenile Facilities that are within the terms of this agreement. Contractor will make every effort to ensure youth are connected to their primary care provider for specialty services. Utilization review will occur monthly to determine, amount of use and cost of specialty services.
- Hospitalization: Contractor will establish partnerships with local hospitals to serve youth detained at the Juvenile Facilities who require hospitalization. When appropriate, the Contractor will make every effort to ensure youth are hospitalized at their primary care provider, e.g., UCSF Benioff Children's Hospital, Kaiser

Permanente, etc. Contractor will not be financially responsible for any in-patient medical services for youth rendered outside of the Juvenile Facilities.

Transportation

In the majority of cases, ACPD is responsible for transporting all youth detained at the Juvenile Facilities to all off-site medical and mental health services. Contractor shall communicate with ACPD when any youth require off-site services. Contractor shall collaborate with ACPD to prioritize timely access to off-site care and with minimal impact on ACPD staffing levels. In emergency situations when transport by ambulance is required, Contractor shall immediately notify ACPD and work collaboratively to safely and securely coordinate transport. Ambulance costs will be covered by ACPD.

3. Planned Staffing and Organizational Capacity

Bidders shall include a staffing structure that is well matched to program services and goals. The minimum staffing requirements are as follows:

	FTE
Registered Nurse (RN) Manager	1.0
Charge RN/Assistant Nurse Manager	0.1
RN	6.1
Overnight RN	1.5
LVN	5.0
Physician Coverage such as Physician Assistant or Nurse Practitioner*	1.0
Clinic Manager	1.0
Dentist	0.5
Discharge Support Specialist	1.0
Patient Navigator	1.0
Admin Support	1.0
Pharmacy Tech	0.5
Dental Hygienist	0.5
Total	20.2

** Must include dedicated time from a Medical Doctor to serve as Medical Director*

Bidders may propose additional program staff, as appropriate, to provide program services, account for potential gaps in staffing, and to support and/or supervise program staff.

All medical, nursing, clinical and administrative personnel must be certified and licensed by the appropriate certification and/or licensing board, as required by the State of California,

obtain background checks and security clearances, and be approved by ACPD to provide services in the Juvenile Facilities.

Staffing structure shall provide for the following provisions:

- Provide adequate on-site staffing including: Advance Practice Providers, physicians, and nursing staff; staffing able to provide medical care 24 hours a day, 365 days a year; on-call support overnight, on weekends, and as needed to ensure coverage.
- Promptly respond to and accommodate the consistently changing population in the Juvenile Facilities, ensuring enough staffing to provide quality care.
- Maintain designated full-time equivalents (FTEs) at all times, i.e., full staff coverage for staff vacations, illness, etc.
- Provide ACPD and Juvenile Justice Health Services Director written notification regarding staff coverage throughout the term of the contract.
- Coordinate closely with Alameda County Health (AC Health), ACBHD, ACPD, ACPHD and the juvenile facilities through regular meetings and other communications.
- Deliver services in the designated facilities.
- Conduct ongoing monitoring to ensure that staff who are providing clinical services have a valid license and have no restrictions.
- Plan for and implement continuous training and quality improvement, including but not limited to cultural and linguistic responsiveness.

ACBHD requires staffing and organizational components that meet these requirements:

- Cultural and language consideration for the priority population to be served; and
- A multidisciplinary team that includes appropriately trained and licensed staff

Bidders shall include in their proposal a plan for maintaining appropriate infrastructure, staffing and hiring, which should include:

- Plan for hiring, training, and supporting program staff
- Plan for providing appropriate and regular clinical supervision to program staff
- Organizational capacity to support clients in meeting their medical health needs
- Organizational capacity to track and report data following guidelines

4. *Forming Partnerships and Collaboration*

In order to meet the needs of the priority population, the awarded Contractor must leverage connections across services and programs through ACBHD and its contracted providers. The awarded Contractor shall also collaborate with the following entities and any of their contracted providers:

- ACPD
- ACPHD
- ACOE

- Other service providers that may be part of the client's care
- Bidders should demonstrate experience transitioning clients to other service providers and working with other agencies to support clients in linking with necessary services including post release connections.

5. Ability to Track Data

Contractor shall input data into an electronic data collection and claiming system approved by ACBHD and ACPD. Contractor shall provide services toward achieving the following quality and/or impact measures:

- Continuity of care for youth discharged from the Juvenile Facilities, which may include number of follow-up appointments with other community health care providers, meetings with families, etc.
- Quality of services provided, e.g., history of access to care, baseline health data on youth at time of screening and any change, timeliness of treatment, etc.

Claims data may be used to bill for services under the California Advancing and Innovating Medi-Cal (CalAIM) Justice Involved Initiative. Contractor shall work with ACBHD to submit claims data directly for reimbursement or via a third-party billing provider.

Monthly Reporting deliverables include, but are not limited to:

- Number of health screenings (fitness for detention)
- Number of history and physical visits
- Number of health appraisals
- Number of youth/TAY who were screen using Patient Health Questionnaire (PHQ-9) to diagnose and monitor the severity of depression
- Number of forensic exams
- Number of visits by visit type (primary care, dental, optometry, etc.)
- Number of vaccines delivered
- Number of youth with chronic conditions (hypertension, diabetes, etc.)
- Number of youth treated for communicable disease
- Number of youth treated for sexually transmitted infections
- Number of youth medically cleared after use of force
- Number of youth medically cleared after use of restraints
- Number of youth placed under medical observation
- Number of youth who received care off-site (specialty care, hospitalizations, etc.)
- Number of youth discharged by medical staff
- Number of post discharge referrals

The awarded Contractor shall comply with any reporting and evaluation standards and agreements as set forth by ACBHD and ACPD. At a minimum, Contractor shall provide monthly, quarterly and annual reports to ACBHD, the Deputy Chief Probation Officer of Juvenile Facilities, the Superintendents of the Juvenile Facilities, and the Juvenile Justice

Health Services Director. Monthly reports shall include the measures specified above. Quarterly reports shall include quality outcomes of youth served by the medical clinic as well as a written assessment of the quality and adequacy of health care services. The annual written report shall summarize the quarterly reports and shall include recommendations for improvements to services for the following contract year.

Bidders may propose additional benchmarks for outcomes and provide rationale for additional benchmarks. ACBHD reserves the right to determine and evaluate program measures and outcomes and to work with the awarded Contractor to refine or alter their program and outcome measures in subsequent years. ACBHD may support the awarded Contractor in tracking the outcomes data, however the awarded Contractor is expected to meet the above process and quality measures. Bidders will be evaluated based on their plan for meeting these measures as well as their ability to track client progress.

II. INSTRUCTIONS TO BIDDERS

A. COUNTY CONTACTS

All contact during the RFP process shall be through the RFP contact, only: ACBHD Procurement at procurement@acgov.org.

The official notification and posting places for this RFP and any Addenda are:

- The ACBHD website <https://ACBHDproviders.acgov.org/providers/network/rfp.htm> and
- The General Services Agency (GSA) website <https://gsa.acgov.org/do-business-with-us/contracting-opportunities/>

The evaluation phase of the competitive process shall begin upon receipt of proposals until contract award. Bidders shall not contact or lobby County Selection Committee (CSC)/Evaluation Panelists during the evaluation process. Attempts by Bidders to contact CSC/Evaluation Panelists may result in disqualification of the Bidder's proposal.

All questions regarding these specifications, terms, and conditions shall be submitted in writing, preferably via e-mail, as specified in the Calendar of Events, to:

ACBHD Procurement
1900 Embarcadero Cove, Suite 205
Oakland, CA 94606
Email: procurement@acgov.org

B. CALENDAR OF EVENTS

Event	Date/Location	
Request for Proposals (RFP) Issued	October 9, 2026	
Bidder's Written Questions Due	By 5:00 pm on the day of 2 nd Bidders' Conference – ACBHD strongly encourages Bidders to submit written questions earlier.	
1 st Bidders' Conference	Wednesday, October 28, 2026, 10-11:30	Join via Teams Teams Link Meeting ID: 279 323 719 498 144 Passcode: hM6Ye7rG Join via phone 1 (415) 915-3950 1 (888) 715-8170 Phone conference ID: 304 928 212
2 nd Bidders' Conference	Thursday, October 29, 2026, 2-3:30pm	Join via Teams Teams Link Meeting ID: 262 498 737 546 935 Passcode: G5Pd6mS6 Join via phone 1 (415) 915-3950 1 (888) 715-8170 Phone conference ID: 651 810 752#
Addendum Issued	Thursday, November 12, 2026	
Proposals Due	Tuesday, December 1, 2026	
Review/Evaluation Period	December 1, 2026 -January 14, 2027	
Oral Interviews (as needed)	January 14, 2027	
Award Recommendation Letters Issued	January 26, 2027	
Board Consideration Award Date	May 2027	
Contract Start Date	July 1, 2027	

Note: Award Recommendation, Board Agenda and Contract Start dates are approximate. Other dates are subject to change. Bidders will be notified of any changes via email. It is the responsibility of each Bidder to be familiar with all of the specifications, terms and conditions. By submission of a proposal, Bidder certifies that if awarded a contract Bidder shall make no claim against the County based upon ignorance of conditions or misunderstanding of the specifications.

C. SMALL LOCAL EMERGING BUSINESS (SLEB) PREFERENCE POINTS

The County is vitally interested in promoting the growth of small and emerging local businesses by means of increasing the participation of these businesses in the County's purchase of goods and services.

As a result of the County's commitment to advance the economic opportunities of these businesses, Bidders must meet the County's SLEB requirements, at the time of bid submission to be considered for the contract award⁴. Bidders must be SLEB-certified or Local-certified at the time of bid submission in order to receive SLEB and/or Local preference points. These requirements can be found online at:

<http://acgov.org/auditor/sleb/overview.htm>

A small business is defined by the [United States Small Business Administration](#) (SBA) as having no more than the number of employees or average annual gross receipts over the last three (3) years required per SBA standards based on the small business's appropriate NAICS code.

An emerging business is defined by the County as having either annual gross receipts of less than one-half (1/2) that of a small business OR having less than one-half (1/2) the number of employees AND that has been in business less than five (5) years.

For purposes of this procurement, applicable industries include, but are not limited to, the following North American Industry Classification System (NAICS) Code(s): 621330, 621420, and 624190

If a Bidder is certified by the County as either a small and local or an emerging and local business (SLEB), the County will provide up to 5% bid preference for procurements over \$25,000.

If a Bidder is located within Alameda County, the County may provide a 5% local bid preference.

⁴ Bidders who do not meet SLEB requirements may request a waiver.

The County also encourages participation by minority and women-owned businesses, although preference points are not awarded for these types of businesses.

D. BIDDERS' CONFERENCES

ACBHD strongly recommends that Bidders thoroughly read the RFP and submit any initial questions in writing to the specified RFP contact, prior to attending any Bidders' Conferences.

ACBHD shall hold two Bidders' Conferences. Bidders' Conferences will be held to:

- Provide an opportunity for Bidders to ask specific questions about the program and request RFP clarification; and
- Provide the County with an opportunity to receive feedback regarding the program and RFP.

ACBHD shall respond to written questions submitted prior to the Bidders' Conferences and verbal or written questions received at the Bidders' Conferences, in accordance with the Calendar of Events, and whenever possible at the Bidders' Conferences. ACBHD shall address all questions and include the list of Bidders' Conferences attendees in an Addendum following the Bidders Conferences in accordance with the Calendar of Events section of this RFP.

Bidders are not required to attend the Bidders' Conferences. However, attendance to at least one Bidders' Conference is strongly encouraged in order to receive information to assist Bidders in formulating proposals.

Failure to participate in a Bidders' Conference shall in no way relieve the Bidder from furnishing program and services requirements in accordance with these specifications, terms and conditions and those released in any Addenda.

E. SUBMITTAL OF PROPOSALS/BIDS

1. All proposals must be received electronically by ACBHD **no later than 2:00 pm on the due date specified on the RFP cover and Calendar of Events in this RFP.** ACBHD cannot accept late proposals. Any proposals received after stated time and/or date or at an email address other than the stated address cannot be considered and shall be returned to the Bidder unread/unopened.

All proposals must be received and time stamped at the stated delivery address prior to the time designated. ACBHD's timestamp shall be considered the official timepiece for the purpose of establishing the actual receipt of bids.

2. Bidders must submit proposals which clearly state Bidder and RFP name. Proposals shall include:

- a. A single PDF copy of the proposal. Proposal is to be clearly marked on the cover, and
- b. An Excel copy of the completed Budget Worksheet.

Bidders shall ensure that proposals are:

- Single spaced
 - 1-inch margins
 - 11-point Arial font
 - Conform to the maximum page limits
3. Bidder agrees and acknowledges all RFP specifications, terms and conditions and indicates ability to perform by submission of proposal.
 4. Submitted proposals shall be valid for a minimum period of eighteen months.
 5. All costs required for the preparation and submission of a proposal shall be borne by Bidder.
 6. Proprietary or Confidential Information: No part of any proposal response is to be marked as confidential or proprietary. County may refuse to consider any bid response or part thereof so marked. Bid responses submitted in response to this RFP may be subject to public disclosure. County shall not be liable in any way for disclosure of any such records. Additionally, all proposals shall become the property of County. County reserves the right to make use of any information or ideas contained in submitted proposals. This provision is not intended to require the disclosure of records that are exempt from disclosure under the California Public Records Act (Government Code Section 6250, et seq.) or of “trade secrets” protected by the Uniform Trade Secrets Act (Civil Code Section 3426, et seq.).
 7. All other information regarding proposals shall be held as confidential until such time as the CSC/Evaluation Panel has completed their evaluation, notification of recommended award has been made and the contract has been fully negotiated with the recommended awardees named in the intent to award/non-award notification. The submitted proposals shall be made available upon request no later than five calendar days before approval of the award and contract is scheduled to be heard by the Board of Supervisors. All parties submitting proposals, either qualified or unqualified, shall receive emailed intent to award/non-award notification, which shall include the name of the Bidder(s) recommended for award of this service. In addition, recommended award information will be posted on the ACBHD website.
 8. Each proposal received, with the name of the Bidder, shall be entered on a record, and each record with the successful proposal indicated thereon shall, after the negotiations and award of the order or contract, be open to public inspection.

9. California Government Code Section 4552: In submitting a bid to a public purchasing body, the Bidder offers and agrees that if the bid is accepted, it will assign to the purchasing body all rights, title, and interest in and to all causes of action it may have under Section 4 of the Clayton Act (15 U.S.C. Sec. 15) or under the Cartwright Act (Chapter 2, commencing with Section 16700, of Part 2 of Division 7 of the Business and Professions Code), arising from purchases of goods, materials, or services by the Bidder for sale to the purchasing body pursuant to the bid. Such assignment shall be made and become effective at the time the purchasing body tenders final payment to the Bidder.
10. Bidder expressly acknowledges that it is aware that if a false claim is knowingly submitted (as the terms “claim” and “knowingly” are defined in the California False Claims Act, Cal. Gov. Code, §12650 et seq.), County will be entitled to civil remedies set forth in the California False Claim Act. It may also be considered fraud and the Contractor may be subject to criminal prosecution.
11. As applicable, the undersigned Bidder certifies that it is, at the time of bidding, and shall be throughout the period of the contract, licensed by the State of California to do the type of work required under the terms of the Contract Documents. Bidder further certifies that it is regularly engaged in the general class and type of work called for in the Bid Documents.
12. The undersigned Bidder certifies that it is not, at the time of bidding, on the California Department of General Services (DGS) list of persons determined to be engaged in investment activities in Iran or otherwise in violation of the Iran Contracting Act of 2010 (Public Contract Code Section 2200-2208).
13. It is understood that County reserves the right to reject this bid and that the bid shall remain open to acceptance and is irrevocable for a period of 180 days, unless otherwise specified in the Bid Documents.

F. RESPONSE FORMAT/PROPOSAL RESPONSES

Bidders may use the provided Bid Response Template to address and complete their proposals, and must submit all signed statements contained within the Bid Response Packet. The person(s) administering the competitive process will review each proposal for completeness against the RFP requirements and ensure that responses conform to a **total page maximum of 18 pages** not including exhibits and attachments. Bidders may not submit non-material documents after the proposal due date, in order to complete their proposal. Proposals with any missing items of submittals as outlined in the RFP and any Addenda shall be deemed incomplete and may be rejected.

Proposals shall be complete, substantiated, concise and specific to the information requested. Any superfluous and unrequested material submitted with the bid will be removed and will not be viewed by the Evaluation Panel. Any material deviation from the requirements may be cause for rejection of the proposal, as determined at ACBHD's sole discretion.

G. EVALUATION CRITERIA/SELECTION COMMITTEE

All proposals that pass the initial Evaluation Criteria which are determined on a pass/fail basis (Bidder Minimum Qualifications, Completeness of Response, Conformance to Page Limitations, and Debarment and Suspension) shall be evaluated by the CSC/Evaluation Panel. The CSC/Evaluation Panel may be composed of County staff and other individuals who may have expertise or experience in the RFP content. The CSC/Evaluation Panel shall score and recommend a Contractor in accordance with the evaluation criteria set forth in this RFP. The evaluation of the proposals for recommendation shall be within the sole judgment and discretion of the CSC/Evaluation Panel.

All contact during the evaluation phase shall be through the ACBHD contact person only. Bidders shall neither contact nor lobby evaluators during the evaluation process. Attempts by Bidder to contact and/or influence members of the CSC/Evaluation Panel may result in disqualification of Bidder.

The CSC will evaluate each proposal meeting the minimum qualifications and requirements set forth in this RFP. Bidders should bear in mind that any proposal that is unrealistic in terms of the technical or schedule commitments, or unrealistically high or low in cost, shall be deemed reflective of an inherent lack of technical competence or indicative of a failure to comprehend the complexity and risk of the County's requirements as set forth in this RFP.

As a result of this RFP, the County intends to award up to one (1) contract to the responsible Bidder whose response conforms to the RFP and whose proposal presents the greatest value to the County, all evaluation criteria considered. The combined weight of the evaluation criteria is greater in importance than cost in determining the greatest value to the County. The goal is to award a contract to the Bidder that demonstrates the best quality as determined by the combined weight of the evaluation criteria. The County may award a contract of higher qualitative competence over the lowest priced proposal.

The basic information that each proposal section should contain is specified in section II. F. These specifications should be considered as requirements. Much of the material needed to present a comprehensive proposal can be placed into one of the sections listed in I. F. However, other criteria may be added to further support the evaluation process whenever such additional criteria are deemed appropriate in considering the nature of the services being solicited.

Each of the Evaluation Criteria below shall be used in ranking and determining the quality of proposals. Proposals shall be evaluated according to each Evaluation Criteria and scored on a zero to five-point scale shown in Table 1. The scores for all the Evaluation Criteria shall be added according to their assigned weight, as shown in Table 2, to arrive at a weighted score for each

proposal. A proposal with a high-weight total shall be deemed of higher quality than a proposal with a lesser-weighted total. The final maximum score for any program is five hundred fifty (550) points including the possible fifty (50) points for local and small, local and emerging, or local preference points (maximum 10% of final score).

The evaluation process may include a two-stage approach including an initial evaluation of the written proposal and preliminary scoring to develop a short list of Bidders that will continue to the final stage of oral interview and reference checks. The preliminary score will be based on the total points, excluding points allocated to references.

If the two-stage approach is used, the three Bidders that receive the highest preliminary scores and with at least 200 points shall be invited to participate in an oral interview. Only the Bidders meeting the short list criteria shall proceed to the next stage. All other Bidders shall be deemed eliminated from the process. All Bidders shall be notified of the short list participants; however, the preliminary scores at that time shall not be communicated to Bidders.

The zero to five-point scale range is defined in Table 1.

Table 1

Score	Label	Description
0	Not Acceptable	Non-responsive, fails to meet RFP specifications. The approach has no probability of success. If a mandatory requirement this score shall result in disqualification of proposal.
1	Poor	Below average, falls short of expectations, is substandard to that which is the average or expected norm, has a low probability of success in achieving objectives per RFP.
2	Fair	Has a reasonable probability of success, however, some objectives may not be met.
3	Average	Acceptable, achieves all objectives in a reasonable fashion per RFP specification. This shall be the baseline score for each item with adjustments based on interpretation of proposal by Evaluation Committee members.
4	Above Average/ Good	Very good probability of success, better than that which is average or expected as the norm. Achieves all objectives per RFP requirements and expectations.
5	Excellent/ Exceptional	Exceeds expectations, very innovative, clearly superior to that which is average or expected as the norm. Excellent probability of success in achieving all objectives and meeting RFP specification.

The evaluation criteria and respective weights for this RFP are contained in Table 2.

Table 2

RFP SECTION AND EVALUATION CRITERIA	WEIGHT
1. TITLE AND TABLE OF CONTENTS 2. SIGNED STATEMENTS: - Exhibit A: Bidder Information and Acceptance - SLEB Partnering Sheet - OIG Attestation - Exhibit B: Exceptions, Clarifications and Amendments	Pass/Fail
3. ORGANIZATIONAL CAPACITY AND REFERENCES	
a. Debarment and Suspension To be considered for contract award, the Bidder and its principal may not be identified on the list of Federally debarred, suspended or other excluded parties located in the following databases: https://www.sam.gov/portal/SAM/#1 https://exclusions.oig.hhs.gov/ https://files.medical.ca.gov/pubsdoco/SandIlanding.aspx https://dmf.ntis.gov/ https://npiregistry.cms.hhs.gov/	Pass/Fail
b. References How do the Bidder's references respond to the following: - Bidder's capacity to perform the services as stated; - Areas in which Bidder did well and areas in which bidder could have improved (if applicable); - Communication and responsiveness, reporting and invoicing, training, customer service, compliance with program, legal, and/or funding requirements, documentation and reliability on a scale of one to five; - Whether the project was completed on time and on budget; - Capacity and ability to meet program or contract deliverables; - Understanding of the project and need; - References' overall satisfaction with Bidder; - References' comfort with recommending the Bidder to Alameda County; - Whether Bidder would be used again by Reference; and - Any other information that would assist in Alameda County's' work with the Bidder.	5
4. LETTER OF TRANSMITTAL/ EXECUTIVE SUMMARY	
Complete and submit a synopsis of the highlights and benefits of each proposal.	

RFP SECTION AND EVALUATION CRITERIA	WEIGHT
5. BIDDER MINIMUM QUALIFICATIONS	
- Have at least three years of experience providing comprehensive medical services to youth/TAY within the last five years; and - Have at least three years of experience providing substance use services including MAT.	Pass/Fail
6. BIDDER EXPERIENCE, ABILITY AND PLAN	
a. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to following questions which will become the total score under the <i>Understanding of and Experience with the Priority Population.</i>	
i. Understanding of Priority Population How well does Bidder demonstrate understanding of the priority population including: - The needs, risk factors, strengths, and challenges with engaging justice-involved youth and/or who may have co-occurring medical and behavioral health challenges. - Addressing barriers to and promoting/maintaining engagement with services. - Adopting a trauma-informed approach to delivery of health care services.	9
ii. Experience with Priority Population How well does Bidder demonstrate experience working with the priority population including: - Justice-impacted youth - Years of experience providing health care services - Providing services that are culturally affirming and responsive	10
b. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response is to following questions which will become the total score under the <i>Service Delivery Approach.</i>	
i. Service Delivery to Clients How well-matched is Bidder's plan to provide services, including: - Comprehensive medical care services within a detention facility. - Pharmacy services including ordering, storing, and dispensing medication. - Coordination of care for specialty services. - Ability to manage communicable diseases. - Specific evidence-based, trauma-informed techniques to engage highly resistant youth. - Example of what a successful warm hand-off to subsequent treatment providers looks like. - Experience and plan to transition clients to other supportive services.	14

RFP SECTION AND EVALUATION CRITERIA	WEIGHT
- Plan to provide bridge medications, physical prescriptions, or pharmacy coordination to ensure no lapse in critical therapies upon release. - Plan for managing acute healthcare crises, or situationally challenging occurrences without compromising clinical safety. - Clinical triggers and triage protocols established by the Bidder to determine when a youth's needs exceed facility capabilities.	
c. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to following questions which will become the total score under the <i>Planned Staffing and Organizational Capacity</i> .	
i. Planned Staffing Structure How well-matched is Bidder's staffing plan, including: - How effectively does the bidder's clinical staffing model scale to cover all required primary, medical, and dental services. - How appropriate is proposed plan for program staffing including staff positions, staff education and/or experience, language capacity, roles, responsibilities, and supervision structure. - How well does Bidder describe how tasks will be assigned to staff - How well matched is Bidder's plan for hiring, training, supervising, and retaining staff. - How well do staff reflect the priority population and language profiles. - How appropriate is Bidder's plan for supervision and oversight of proposed program components.	10
ii. Capacity and Organizational Infrastructure How well does Bidder describe its organizational infrastructure, and how well-matched to the proposed services is this infrastructure, including: - How well does Bidder describe how program services will be integrated into Bidder's existing organizational structure and services. - Organizational capacity to track and report data following County requirements.	9
d. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to following questions which will become the total score under <i>Forming Partnerships and Collaboration</i> .	
How well does Bidder describe its experience and plan to create new partnerships, build on existing partnerships, and establish new relationships to support clients in meeting their needs, including collaboration with ACPD, ACOE, ACBHD and detention staff.	8
e. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to following questions which will become the total score under <i>Tracking Data and Outcomes</i> .	

RFP SECTION AND EVALUATION CRITERIA	WEIGHT
i. Track Data and Outcomes - How appropriate is Bidder's plan for tracking process and quality measures, and client level data. - How well does Bidder demonstrate experience with data collection and electronic data and/or tracking systems.	8
7. IMPLEMENTATION SCHEDULE AND PLAN	
a. The Evaluation Panel will read and assign a score based on how detailed and specific the Bidder's response to following questions which will become the total score under Implementation Plan and Schedule .	
i. Implementation Plan - How detailed and specific is Bidder's response. - How realistic does Bidder account for timeline to complete each specified milestone, including: - Hiring and team formation, including obtaining background checks, security clearance, and ACPD approval for staff to operate in the Juvenile Facilities - Establishing and/or building relationships with collaborative entities - Reaching the measure of 100% of clients entering detention facility are assessed for medical, dental and mental health status, and receive clinically indicated follow-up care	10
ii. Identification and Strategies for Mitigation of Risks and Barriers - How thorough, thoughtful, and realistic is Bidder's identification of challenges and barrier mitigation strategies. - How well does Bidder assess barriers. - How creative, solution-oriented, and feasible are Bidder's strategies for addressing barriers.	6
8. COST	
a. The Evaluation Panel will review the Budget Workbook and the Budget Narrative and assign a score based on how Bidder's proposed program budget aligns with the requirements of the RFP which will become the total score under the Cost. The Cost-Coefficient is scored by applying the standard County formula.	
Cost Co-Efficient Low bid divided by low bid x 5 x weight = points <u>For example:</u> $\$100,000 / \$100,000 = 1 \times 5 \times 5 = 25 \text{ points}$	2

RFP SECTION AND EVALUATION CRITERIA	WEIGHT
i. Budget ii. Budget Narrative • How well-matched is Bidder's budget to the proposed program • How well does the budget capture all activities and staff proposed in the Budget • How well does Bidder allocate staff and resources • How appropriate are the staffing and other costs • How much value does the proposal add considering the cost of the program, expected outcomes and the number of clients served • How well does the narrative detail how Bidder arrived at particular calculations • How well does Bidder "show the work"	9
ORAL INTERVIEW, IF APPLICABLE Criteria are created with the CSC/Evaluation Panel.	Pass/Fail
PREFERENCE POINTS, IF APPLICABLE	
Local (not SLEB certified)	5%
SLEB certified	An additional 5%

H. CONTRACT EVALUATION AND ASSESSMENT

During the initial sixty (60) day period of any contract, which may be awarded to a successful Bidder ("Contractor"), the CSC and/or other persons designated by the County may meet with Contractor to evaluate the performance and to identify any issues or potential problems.

The County reserves the right to determine, in its sole discretion, (a) whether Contractor has complied with all terms of this RFP and (b) whether any problems or potential problems are evidenced which make it unlikely (even with possible modifications) that the proposed program and services will meet the County requirements. If, as a result of such determination the County concludes that it is not satisfied with Contractor, Contractors' performance under any awarded contract as contracted for therein, Contractor shall be notified of contract termination effective forty-five (45) days following notice. The County shall have the right to invite the next highest ranked Bidder to enter into a contract.

The County also reserves the right to re-bid these programs if it is determined to be in its best interest to do so.

I. AWARD

1. Proposals evaluated by the CSC/Evaluation Panel shall be ranked in accordance with the RFP section II.G. of this RFP.
2. The CSC shall recommend award of a contract to the Bidder who, in its opinion, has submitted the proposal that best conforms to the RFP and best serves the overall interests of the County and attains the highest overall point score. Award may not necessarily be recommended or made to the Bidder with the lowest price.
3. The County reserves the right to reject any or all proposals that materially differ from any terms contained in this RFP or from any Exhibits attached hereto, to waive informalities and minor irregularities in responses received, and to provide an opportunity for Bidders to correct minor and immaterial errors contained in their submissions. The decision as to what constitutes a minor irregularity shall be made solely at the discretion of the County.
4. Any proposal that contains false or misleading information may be disqualified by the County.
5. The County reserves the right to award to a single or multiple Contractors.
6. The County has the right to decline to award a contract in whole or any part thereof for any reason.

7. BOS approval to award a contract is required.
8. A contract must be negotiated by the intended awardee prior to BOS approval.
9. Final terms and conditions shall be negotiated with the Bidder recommended for award. The successful Bidder may request a copy of the Master Agreement template from the ACBHD RFP contact. The template contains the agreement boilerplate language only.
10. The RFP specifications, terms, conditions, Exhibits, Addenda and Bidder's proposal, may be incorporated into and made a part of any contract that may be awarded as a result of this RFP.

J. PRICING

Federal, State, and municipal minimum wage laws apply. The County has no requirements for living wages. The County is not imposing any additional requirements regarding wages.

K. INVOICING

1. Contractor shall invoice the requesting department, unless otherwise advised, upon satisfactory receipt of product and/or performance of services.
2. Payment will be made within thirty days following receipt of invoice and upon complete satisfactory receipt of product and performance of services.
3. County shall notify Contractor of any adjustments required to invoice.
4. Invoices shall contain County purchase order (PO) number, invoice number, remit to address and itemized products and/or services description and price as quoted and shall be accompanied by acceptable proof of delivery.
5. Contractor shall utilize standardized invoice upon request.
6. Invoices shall only be issued by the Contractor who is awarded a contract.
7. Payments will be issued to and invoices must be received from the same Contractor whose name is specified on the POs.

L. NOTICE OF INTENT TO AWARD

At the conclusion of the proposal evaluation process (“Evaluation Process”), all Bidders will be notified in writing by e-mail, fax, or US Postal Services mail of the contract award recommendation, if any, by ACBHD. The document providing this notification is the Notice of Intent to Award.

The Notice of Intent to Award shall provide the following information:

- The name of the Bidder being recommended for contract award; and
- The names of all other Bidders that submitted proposals.

At the conclusion of the RFP response evaluation process and negotiations, debriefings for unsuccessful Bidders will be scheduled and provided upon written request and will be restricted to discussion of the unsuccessful Bidder’s proposal.

- Under no circumstances shall any discussion be conducted with regard to contract negotiations with the recommended /successful Bidder.
- Debriefing may include review of the recommended/ successful Bidder’s proposal/s with redactions as appropriate.

All submitted proposals shall be made available upon request no later than five (5) calendar days before approval of the award and contract is scheduled to be heard by the Board of Supervisors.

M. TERM/TERMINATION/RENEWAL

The term of the contract, which may be awarded pursuant to this RFP, will be one year, or a pro-rated portion of that Fiscal Year, and may be renewed thereafter, contingent on the availability of funds, Contractor’s performance, continued prioritization of the activities and priority populations, as defined and determined by ACBHD.

III. APPENDICES

A. GLOSSARY & ACRONYM LIST

Agreement	The formal contract between ACBHD and Contractor.
ACBHD	Alameda County Behavioral Health Department, a department of the Alameda County Health.
Bid	A Bidders' response to this Request; used interchangeably with proposal.
Bidder	The specific person or entity responding to this RFP.
Board	Shall refer to the County of Alameda Board of Supervisors.
Client	The recipient of services; used interchangeably with member, participant, and consumer.
Community-Based Organization (CBO)	A non-governmental organization that provides direct services to clients.
Contractor	When capitalized, shall refer to selected Bidder that is awarded a contract.
County	When capitalized, shall refer to the County of Alameda.
Federal	Refers to United States Federal Government, its departments and/or agencies.
Full Time Equivalent (FTE)	A budgetary term used to describe the number of total hours worked divided by the maximum number of compensable hours in a full-time schedule as defined by law.
Health Appraisal	Comprehensive evaluation that combines questionnaires, physical data and lifestyle history to create an overall health picture
Health Screening	Test used to check for unrecognized diseases or risk factors
Licensed Practitioner of the Healing Arts (LPHA)	Licensed clinical staff (MD, PhD, MFT, LCSW) and staff who are registered with the California Board of Behavioral Sciences, usually registered MFT/ASW interns; psychologists who are waived by the State to provide services; and Master's level clinical nurse specialists who have national or state license to practice independently.
Mental Health Services	Individual, family, or group services or interventions that are designed to provide information on mental health issues, reduction of mental disability, and/or improvement or maintenance of functioning.
Outcomes	The extent of change in attitudes, values, behaviors, or conditions between baseline measurement and subsequent points of measurement. Depending on the nature of the intervention and the theory of change guiding it, changes can be short, intermediate, and longer-term outcomes.
Proposal	Shall mean Bidder's response to this RFP; used interchangeably with bid.

Qualified	Competent by training and experience to be in compliance with specified requirements.
Request for Proposal (RFP)	Shall mean this document, which is the County of Alameda's request for proposal to provide the services being solicited herein; also referred herein as RFP.
Response	Shall refer to Bidder's proposal submitted in reply to RFP.
Sick Call	Sick call is the formal, routine process for inmates to request medical attention for non-emergency illnesses or injuries
SLEB	Small Local Emerging Business
State	Refers to State of California, its departments and/or agencies.

B. BID RESPONSE PACKET

C. INSURANCE REQUIREMENTS

Insurance certificates are not required at the time of bid submission; however, by signing Exhibit A – Bidder Information and Acceptance, the Bidder agrees to meet the minimum insurance requirements stated in the RFP, prior to award. This documentation must be provided to the County, and shall include insurance certificate and additional insured certificate, naming County of Alameda, which meets the minimum insurance requirements, as stated in the RFP.

The following page contains the minimum insurance limits, required by the County of Alameda, to be held by the Contractor performing on this RFP:

*****SEE NEXT PAGE FOR COUNTY OF ALAMEDA MINIMUM INSURANCE REQUIREMENTS*****

EXHIBIT C

COUNTY OF ALAMEDA MINIMUM INSURANCE REQUIREMENTS

Without limiting any other obligation or liability under this Agreement, the Contractor, at its sole cost and expense, shall secure and keep in force during the entire term of the Agreement or longer, as may be specified below, the following insurance coverage, limits and endorsements:

TYPE OF INSURANCE COVERAGES		MINIMUM LIMITS
A	Commercial General Liability Premises Liability; Products and Completed Operations; Contractual Liability; Personal Injury and Advertising Liability	\$1,000,000 per occurrence (CSL) Bodily Injury and Property Damage
B	Commercial or Business Automobile Liability All owned vehicles, hired or leased vehicles, non-owned, borrowed and permissive uses. Personal Automobile Liability is acceptable for individual contractors with no transportation or hauling related activities	\$1,000,000 per occurrence (CSL) Any Auto Bodily Injury and Property Damage
C	Workers' Compensation (WC) and Employers Liability (EL) Required for all contractors with employees	WC: Statutory Limits EL: \$100,000 per accident for bodily injury or disease
D	Professional Liability/Errors and Omissions Includes endorsements of contractual liability and defense and indemnification of the County	\$1,000,000 per occurrence \$2,000,000 project aggregate

E	<u>Endorsements and Conditions:</u> ADDITIONAL INSURED: All insurance required above with the exception of Professional Liability, Commercial or Business Automobile Liability, Workers' Compensation and Employers Liability, shall be endorsed to name as additional insured. County of Alameda, its Board of Supervisors, the individual members thereof, and all County officers, agents, employees, volunteers, and representatives. The Additional-Insured endorsement shall be at least as broad as ISO Form Number CG 20 38 04 13. DURATION OF COVERAGE: All required insurance shall be maintained during the entire term of the Agreement. In addition, Insurance policies and coverage(s) written on a claims-made basis shall be maintained during the entire term of the Agreement and until 3 years following the later of termination of the Agreement and acceptance of all work provided under the Agreement, with the retroactive date of said insurance (as may be applicable) concurrent with the commencement of activities pursuant to this Agreement. REDUCTION OR LIMIT OF OBLIGATION: All insurance policies, including excess and umbrella insurance policies, shall include an endorsement and be primary and non-contributory and will not seek contribution from any other insurance (or self-insurance) available to the County. The primary and non-contributory endorsement shall be at least as broad as ISO Form 20 01 04 13. Pursuant to the provisions of this Agreement insurance effected or procured by the Contractor shall not reduce or limit Contractor's contractual obligation to indemnify and defend the Indemnified Parties. INSURER FINANCIAL RATING: Insurance shall be maintained through an insurer with a A.M. Best Rating of no less than A:VII or equivalent, shall be admitted to the State of California unless otherwise waived by Risk Management, and with deductible amounts acceptable to the County. Acceptance of Contractor's insurance by County shall not relieve or decrease the liability of Contractor hereunder. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of the Contractor. SUBCONTRACTORS: Contractor shall include all subcontractors as an insured (covered party) under its policies or shall verify that the subcontractor, under its own policies and endorsements, has complied with the insurance requirements in this Agreement, including this Exhibit. The additional Insured endorsement shall be at least as broad as ISO Form Number CG 20 38 04 13. JOINT VENTURES: If Contractor is an association, partnership or other joint business venture, required insurance shall be provided by any one of the following methods: - Separate insurance policies issued for each individual entity, with each entity included as a "Named Insured" (covered party), or at minimum named as an "Additional Insured" on the other's policies. Coverage shall be at least as broad as in the ISO Forms named above. - Joint insurance program with the association, partnership or other joint business venture included as a "Named Insured." CANCELLATION OF INSURANCE: All insurance shall be required to provide thirty (30) days advance written notice to the County of cancellation. CERTIFICATE OF INSURANCE: Before commencing operations under this Agreement, Contractor shall provide Certificate(s) of Insurance and applicable insurance endorsements, in form and satisfactory to County, evidencing that all required insurance coverage is in effect. The County reserves the rights to require the Contractor to provide complete, certified copies of all required insurance policies. The required certificate(s) and endorsements must be sent as set forth in the Notices provision.
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Certificate C-2

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