



## Request for Proposal

**Juvenile Detention Medical and Mental Health Services**

**RFP # 645**

Direct all replies to:

Bethany Tangerstrom  
Contract Compliance Monitor  
1717 Taylor Avenue  
Racine WI 53403  
262.638.6671

**SEALED PROPOSALS MUST BE RECEIVED NO LATER THAN:**

**Friday, August 30, 2019 at 4 pm**

At the Racine County Human Services Department  
1717 Taylor Avenue – One North Receptionist  
Racine WI 53403

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Racine County Human Services  
Request for Proposal: Juvenile Detention Medical and Mental Health Services  
Program #645

**Section I. Specifications**

**1. Introduction and Objectives:**

**1.1** The Provider will provide medical and mental health services for youth in the Racine County Juvenile Detention Center located at 1717 Taylor Ave, Racine, Wisconsin.

**2. Program Description:**

**2.1** Racine County Juvenile Detention is a secure, 121 bed facility located at 1717 Taylor Avenue in Racine. Services are provided to incarcerated youth from Racine, Kenosha and Southeastern Wisconsin. While at the center:

**2.1.1** We are responsible for your child's care and well-being. We provide clean clothing, three meals a day, hygiene/personal care products, reading and writing materials, chaplaincy services, medical care, recreation and psychological care.

**2.1.2** Youth are required to attend school daily. In partnership with the local school district, Racine Unified School District (RUSD), full-time, licensed teachers are onsite to provide educational support and schoolwork in accordance with the education plan of the school your child previously attended. This allows your child to keep up with their work during the school year and summer.

**2.1.3** Parental involvement is encouraged through visitation and telephone calls.

**2.2** Population Demographics:

**2.2.1** In 2018, the average daily population of Detention was 35 juvenile inmates.

**2.2.2** In 2018, Detention processed 459 juvenile inmates with a total of 10,706 incarcerated days.

**3. Scope of Services**

**3.1 Staffing:**

**3.1.1** Juvenile Detention on-site registered nursing coverage for forty (40) hours per week and licensed practical nursing for forty (40) hours per week on a schedule approved by the Superintendent. When approved in writing by the Superintendent or designee, hours worked in excess of the contracted amount will be billed monthly to the County at the prevailing wage and benefit rate of the Provider's employee. For hours of absence due to holidays, paid time off, or sick time, Provider endeavors to provide replacement coverage, and if it is unable to do so, Provider will credit the County for those hours or Provider's Director of Medical Operations for the facility and the Superintendent or designee may negotiate a mutually agreeable alternative remedy. For all other absences, Provider endeavors to provide replacement coverage, and if it is unable to do so, Provider will credit the County for those hours or Provider's Director of Medical Operations for

the facility and the Superintendent or designee may negotiate a mutually agreeable alternative remedy.

- 3.1.2 Juvenile Detention on-site Qualified Mental Health Professional for forty-eight (48) hours per week on a schedule approved by the Superintendent. When approved in writing by the Superintendent or designee, hours worked in excess of the contracted amount will be billed monthly to the County at the prevailing wage and benefit rate of the Provider's employee. For hours of absence due to holidays, paid time off, or sick time, the hours will not be replaced or credited. For other absences, Provider endeavors to provide replacement coverage, and if it is unable to do so, Provider's Director of Mental Health Services and the Superintendent or designee will negotiate a mutually agreeable remedy.
- 3.1.3 Juvenile Detention Physician and/or Mid-Level Practitioner will visit the facility weekly or as otherwise agreed by the Superintendent and will stay until all work is completed. A Mid-Level Practitioner will only be used with the approval of the Superintendent. The Physician and/or Mid-Level Practitioner will be available by telephone to the facility and medical staff on an on-call basis, seven (7) days per week, twenty-four (24) hours per day. For scheduled visits that fall on corporate holidays, the Physician and/or Mid-Level Practitioner will still be available by telephone, and the visit will be moved to another day. The Physician and/or Mid-Level Practitioner will be licensed to proscribe under Medicare.
- 3.1.4 There shall be no health care staff changes without prior written notice to the Superintendent.

**3.2 Ancillary Services:**

- 3.2.1 Vendor is also required to provide the following medical services:
  - 3.2.1.1 Review all initial health screenings within 24 hours of a juvenile's admission if non-urgent concerns are identified.
  - 3.2.1.2 Complete health transfer sheets for juveniles being transferred to other facilities.
  - 3.2.1.3 Check daily status of in-custody juveniles admitted to the hospital.
  - 3.2.1.4 Pharmacy Services to include the cost of all prescription and non-prescription over-the-counter medications prescribed by a duly licensed prescriber. Prescribing, dispensing, and administering of medication shall comply with all State and Federal laws and regulations.
  - 3.2.1.5 Qualified staff shall order and reorder medications in a timely manner.
  - 3.2.1.6 Drug screening services— including UA supplies.
  - 3.2.1.7 Pathology/radiology services.
  - 3.2.1.8 On-site emergency medical treatment to juveniles, visitors, and Detention staff as needed and appropriate.
  - 3.2.1.9 Healthcare services to juveniles during pregnancy only.
  - 3.2.1.10 Arrange off-site services.
  - 3.2.1.11 Emergency ambulance services.

- 3.2.1.12 Crisis intervention services.
- 3.2.1.13 Ordering special diets and other medical needs.
- 3.2.1.14 Other general health care services such as sick calls and emergency dental.
- 3.2.1.15 Hospitalization and medical supplies.
- 3.2.1.16 Biomedical waste disposal.
- 3.2.1.17 TB testing and assessments directed by the Superintendent.
- 3.2.1.18 Doctor's orders in writing, including standing orders, and included in the medical records.

**4. Successful Proposal Requirements:**

- 4.1** Demonstrate competence in the industry and provide any experience serving similar populations
- 4.2** Provide an agency description to include:
  - 4.2.1 Years in operation, agency growth, and historical milestones
  - 4.2.2 Primary headquarters and areas served
  - 4.2.3 Mission and vision statements
  - 4.2.4 Areas of specialty
  - 4.2.5 Organizational chart
  - 4.2.6 Employee screening, recruitment and training process
  - 4.2.7 Scheduling process and guarantee of coverage
  - 4.2.8 Any other pertinent agency specifics that would provide the evaluation committee with a sense how your company operates
- 4.3** Complete the required appendices (A-E)
- 4.4** Complete the budget sheet provided (appendix G) and submit 4 copies in a separate envelope.

**5. Evaluation Outcomes:**

- 5.1** Provider will submit a comprehensive Strategic Plan; Peer Review; CQI; and a Risk Management program specific to the FACILITY's medical operations.
- 5.2** Provider will submit statistical Health reports to the SUPERINTENDENT monthly.

**6. Contract Period:**

Contract will commence January 1, 2020, upon acceptance of the terms described and execution of the contract by both parties. The initial contract period shall continue in effect for three (3) years. Thereafter, it may renew for two (2) additional one-year periods at Purchaser's discretion based on Provider performance and funding availability. Resulting in a potential contract term of five (5) years.

**7. Cost:**

Cost listed by proposer must be complete and inclusive of all charges at the time of submission. Proposer certifies that prices, terms and conditions in the proposal will be firm for acceptance for a period of ninety (90) days from the date of opening unless otherwise stated by Racine County. Proposal may not be withdrawn before the expiration of ninety (90) days. Prices shall be firm with no escalator clauses unless specified by Racine County. Proposals may be withdrawn after ninety (90) days only upon written notification to Racine County.

**8. Contract:**

The contract for this project will consist of this Request for Proposals document, the specification documents and any associated exhibits or documents, the proposer’s response with all required forms, addenda, any negotiated terms and conditions and a standard Racine County contract.

**9. Calendar of Events:**

This calendar is subject to change at the sole discretion of Racine County. All attempts will be made to adhere to this calendar; however, circumstances may require modification of dates and/or times.

| <b>Event</b>                                                                  | <b>Date</b>                                                               |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| RFP issued, posted on website                                                 | 7/15/19 by noon.                                                          |
| Written questions/requests for clarification due to Racine County             | 7/31/19 by 4 pm. <b>Questions submitted later will not be considered.</b> |
| Racine County written responses to questions/clarifications posted on website | 8/5/19                                                                    |
| Proposals due at Racine County, and dropped off at the One North Receptionist | 8/30/19 by 4 pm. <b>Late proposals will not be accepted</b>               |
| Public Opening of Sealed Proposals                                            | 9/3/19 at 3 pm Three North Conference Room                                |
| Proposal Evaluations Completed by...                                          | 9/18/19                                                                   |
| Face-to-Face interviews scheduled, if needed                                  | TBD, but no later than 9/18/19                                            |
| Contract Awarded                                                              | TBD, but no later than 9/24/19                                            |
| Contract Start Date                                                           | 1/1/20                                                                    |

**10. Right of Rejection:**

Racine County, through its duly authorized agents, reserves the right to reject any or all proposals, any portion of a proposal, waive all technicalities, and to accept the proposal considered most advantageous to Racine County following final negotiations, evaluations and reviews. Racine County does not warrant or guarantee that a contract will be awarded as a result of this Request for Proposals.

**11. Instructions to Proposers:**

- 11.1** Thoroughly examine the scope of work, schedule, instructions and all other solicitation documents and make all investigations necessary to be familiar with conditions that affect the proposal. No pleas of ignorance by the proposer as a result of failure to investigate or examine conditions or failure to fulfill details of the contractual documents will be accepted as a basis for varying the requirements of the County or changing the compensation due.
- 11.2** Racine County contracts are subject to all legal requirements of Racine County, State of Wisconsin or Federal statutes and regulations, as applicable. Laws of the State of Wisconsin apply.
- 11.3** Provide all required information on the forms furnished in this document. Print or type your name and that of your agency on the Proposal Cover Sheet. **Do not include your name or the name of your agency in the body of the proposal!** If you obtained this solicitation electronically, you may complete your responses on the electronic forms; however, a hardcopy of the proposal must be submitted with your signature on the Proposal Cover Sheet. Do not alter the solicitation documents when completing the forms. Submission of the proposal affirms that you did not alter the original documents beyond filling in the required information.
- 11.4** Note that there are two separate packets of documents to complete. One will contain an original plus four (4) copies of your proposal and the other your original plus four (4) copies of your budget information. When submitting your hardcopy proposals, seal each packet in a separate envelope.
- 11.5** All proposals must be current and final at the time of opening to be considered responsive. No proposal will be accepted for consideration, and no award will be made if, at the time of opening, anything contained therein is contingent upon or subject to any outstanding review, certification or approval by any party that has not been received.
- 11.6** The following chart illustrates the required proposal documents and specifies the minimum content of the proposal sections. Proposals should be organized in tabbed sections following this chart and each point listed below should be addressed in your proposal.

| Appendix | Title                  | Contents                                                                                                                                                                                                                                                                                                                                                                                                                        |
|----------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A        | Proposal Cover Sheet   | Complete this form for each packet of the proposal...the program and the budget documents                                                                                                                                                                                                                                                                                                                                       |
| B        | Vendor Acceptance Form | Complete this form and attach it to the proposal.                                                                                                                                                                                                                                                                                                                                                                               |
| C        | Reference List         | On the form included in this packet, list three (3) references who are familiar with your work and your ability to fulfill the requirements of this proposal. Racine County may also consider reference responses from agencies or individuals not listed in your proposal.<br><br>All information provided must be current and correct. Racine County will not attempt to search for current information that is not provided. |
| D        | Agency Narrative       | Describe your agency and how your mission relates to the need listed in the RFP.                                                                                                                                                                                                                                                                                                                                                |
| E        | Proposal Criteria      | Provide detailed information in response to each specific criterion listed.                                                                                                                                                                                                                                                                                                                                                     |
| F        | Past Performance       | Provide any past experience you have with Racine County.                                                                                                                                                                                                                                                                                                                                                                        |
|          |                        | <b>In a separate sealed envelope:</b>                                                                                                                                                                                                                                                                                                                                                                                           |
| G        | Budget Worksheet       | Provide a written description of the costs requested.                                                                                                                                                                                                                                                                                                                                                                           |

**12. Submission of Proposals:**

**Submit one original master copy (so marked) and five photocopies (so marked) of your proposal. Also include a digital copy on a USB drive.** On the front of the envelope containing your proposal and copies, indicate the following:

Name & Address of Bidder

Due Date of Bid

Proposal Number & Title

All proposals must be manually signed by an authorized official of the agency.



Telegraphic, fax, email and on-line responses WILL NOT BE ACCEPTED. The original, signed proposal must be delivered to the address indicated below:

Bethany Tangerstrom  
Contract Compliance Monitor  
Racine County Human Services Department  
1717 Taylor Avenue  
Racine WI 53403  
[Bethany.Tangerstrom@racinecounty.com](mailto:Bethany.Tangerstrom@racinecounty.com)

Proposals can also be dropped off at the ONE NORTH Receptionist at the Racine County Human Services Department between 9 am and 4 pm Monday through Friday. Late proposals will not be accepted and will be returned unopened.

**13. Contact Person:**

- 13.1** The Racine County Human Services Contract and Compliance Monitor will act as the County representative in the issuance and administration of this RFP and contract, and shall issue and receive all documents, notices and correspondence pertaining to this RFP. Such documents, notices, and correspondence not issued by or received by the Contract Compliance Monitor shall be null and void.
- 13.2** Questions related to this Request for Proposal shall be delivered in writing (email, postal delivery or hand delivered) to the Contract Compliance Monitor. **Final date for questions is listed in the Calendar of Events.** No questions will be accepted over the phone and no other Racine County representative is authorized to interpret any portion of this RFP.
- 13.3** All questions received by the Contract and Compliance Monitor will be researched and responded to on the date listed in the Calendar of Events and posted on the Racine County Human Services website which can be accessed by the following links:

<http://racinecounty.com/government/human-services/contracts-and-budget>

<https://racinecounty.com/government/finance/purchasing-rfps-and-bids>

No verbal or written information, which is obtained other than through this Request for Proposals or its addenda, shall be binding upon Racine County. Proposers are expected to raise any questions, exceptions or additions they have concerning this document as soon as possible during the RFP process.

**14. Confidentiality/Non-Disclosure:**

- 14.1** It is the intent of the County that all proposals received will remain sealed and confidential until reviewed by the Proposal Evaluating Committee.
- 14.2** Once the process is complete, no information submitted as part of this RFP process shall be considered proprietary or confidential.
- 14.3** By submitting a proposal, vendors acknowledge that the County may be required under the law to make its records available for public inspection at any time during this RFP process. All vendors acknowledge and agree that the County will have no obligation or any liability to the vendor if the County must disclose these materials.

**15. Errors or Omissions:**

- 15.1** If a vendor discovers any significant ambiguity, error, conflict, discrepancy, omission or other deficiency in this bid, the vendor should immediately notify the above-named individual of such error and request modification or clarification of the RFP document.
- 15.2** Racine County reserves the right to permit cure of, or waive as an informality, any irregularities or technicalities contained in any proposal submitted, at the sole discretion of Racine County provided such waiver does not substantially change the offer or provide a competitive advantage to any other vendor. Contracts will be awarded in the best interests of Racine County.

**16. Addenda:**

Changes to this RFP will be made only by formal, written addendum issued by Racine County's Contract Compliance Monitor and posted on the Racine County Human Services Website. All addenda issued as part of this RFP shall become part of the specifications of this RFP and will be made part of the contract. It is the vendor's responsibility to check and assure receipt of all addenda.

**17. RFP Evaluation Process:**

- 17.1** Racine County will receive proposals from interested vendors having relevant experience, resources and qualifications in the proposed scope of work. Proposals for this project must contain evidence of the vendor's experience and abilities in the applicable field.
- 17.2** All proposals received will be evaluated by a selection team that consists of Racine County representatives. The team will review and evaluate all detailed proposals submitted and may conduct in-person interviews with proposers if deemed necessary. The selection team will have only the response to this solicitation to review for selection of a finalist. It is therefore important that proposers emphasize specific information considered pertinent to the services provided. Racine County reserves the right to request clarification of any portion of any submittal.

**17.3** Racine County will be under no requirement to complete the evaluation by any specific date and reserves the right to suspend or postpone the evaluation process should the need arise due to budget constraints, time constraints or other factors as directed by the County. It is anticipated, however, that the review/evaluation process will be completed in a timely manner.

**17.4** A Proposal Evaluation Committee will be established to review and evaluate all proposals submitted in response to this RFP. The Contract Compliance Monitor will be a non-voting member and, as such, will prepare the proposals for the committee so that no vendor identifying information will be available to the evaluators. The Committee will conduct a preliminary evaluation of all proposals based upon the information provided and other evaluation criteria as set forth in this RFP. The contract will be awarded to the most qualified contractor per the evaluation criteria listed below.

| EVALUATION CRITERIA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | WEIGHT            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Agency Experience and Competency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 35%               |
| Proposal Criteria                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 25%               |
| Overall Cost to the County                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 40%               |
| Total                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 100%              |
| <p>Past Performance</p> <ul style="list-style-type: none"> <li>• There is no weight for this category. It allows vendors with a past experience with Racine County the opportunity to be recognized for their contributions.</li> <li>• For those vendors with no prior experience, this category will not be calculated in their scoring and therefore will not impact their overall rating in any way.</li> <li>• This section represents scores obtained from three officials within Racine County who are not part of the evaluation committee. Supporting evidence will be attached to the final scoring sheet.</li> </ul> | 15 points maximum |

**17.5** Refer to the accompanying “Proposal Criteria” document (Appendix E) for specific information to include in your proposal.

**18. Interviews:**

If requested, proposers may be required to participate in an interview at the site of the proposed program or in the offices of the Racine County Human Services Department. Proposers should be prepared to discuss and substantiate any of the areas of the proposal submitted, as well as its qualifications to furnish the specified program. The interviews will be scored by the Evaluation Committee.

**19. RFP Preparation Expense**

Racine County shall not be liable for any expense incurred in replying to any request for proposal or invitation to bid.

**20. County RFP Notice of Rights:**

Racine County reserves the following rights to:

- 20.1** Conduct pre-award discussion and/or pre-award/contract negotiations with any or all responsive and responsible proposers who submit proposals determined to be reasonably acceptable of being selected for award; conduct personal interviews or require presentations of any or all proposers prior to selection; and make investigations of the qualifications of proposers as it deems appropriate, including but not limited to a background investigation conducted by the County or its agents.
- 20.2** Request that proposer(s) modify its proposal to more fully meet the needs of the County or to furnish additional information as the County may reasonably require.
- 20.3** Accord fair and equal treatment with respect to any opportunity for discussions and revisions of proposals. Such revisions may be permitted after submission of proposals and prior to award.
- 20.4** Process the selection of the successful proposer without further discussion.
- 20.5** Request Best and Final Offers from any or all proposers at the sole discretion of the County.

**21. Indemnity and Insurance Requirements:**

- 21.1** Upon execution of a contract, contractor agrees to indemnify, hold harmless and defend Racine County, its officers, agents and employees from all liability including claims, demands, losses, costs, damages and expenses of every kind and description or damage to persons or property arising out of or in connection with or occurring during the course of this agreement where such liability is founded upon or occurring out of the acts or omissions of the contractor, its agents or employees.
- 21.2** Contractor agrees to protect itself and Racine County under the Indemnity Agreement set forth in the above paragraph. Contractor will at all times during the term of this contract keep in force and effect commercial general liability, professional liability, automobile liability, worker's compensation insurance policies issued by a company or companies rated A-VII or better by AM Best and authorized to do business in the State of Wisconsin with the following minimum limits of coverage:
  - 21.3** General Liability
    - 21.3.1 \$1,000,000 each occurrence
    - 21.3.2 \$1,000,000 personal and advertising injury
    - 21.3.3 \$1,000,000 general aggregate
    - 21.3.4 \$1,000,000 products and completed operations
    - 21.3.5 There shall be no exclusion for abuse or molestation

**21.4 Auto Liability Insurance**

21.4.1 \$1,000,000 Combined Single Limit

**21.5 Umbrella Liability Insurance on a following form basis**

21.5.1 \$4,000,000 each occurrence

21.5.2 \$4,000,000 aggregate

21.5.2.1 Any combination of underlying coverage and umbrella equaling \$5,000,000 shall be acceptable

21.5.2.2 There shall be no exclusion for abuse or molestation

**21.6 Workers Compensation Statutory Limits plus:**

21.6.1 \$100,000 E.L. Each Accident

21.6.2 \$100,000 E.L. Disease Each Employee

21.6.3 \$500,000 E.L. Disease Policy Limit

**21.7 Professional Liability**

21.7.1 \$1,000,000 each occurrence

21.7.2 \$3,000,000 aggregate

**21.8** Purchaser, acting at its sole option, may waive any and all insurance requirements. Waiver is not effective unless in writing. Such waiver may include or be limited to a reduction in the amount of coverage required above. The extent of waiver shall be determined solely by Purchaser's risk manager taking into account the nature of the work and other factors relevant to Purchaser's exposure, if any, under this agreement.

**21.9** Upon execution of a contract and at any other time if requested by Racine County, contractor shall furnish Racine County with written verification of the existence of such insurance.

**22. Background Checks:**

Upon execution of a contract, contractor will conduct criminal, caregiver background, and driver's license checks through the State of Wisconsin and drug screens on all employees who will provide these services. No employee may serve under this contract without a successful caregiver background check. Documentation of these background checks must be maintained and made available to Racine County Human Services upon request. For existing agency staff, background checks must be current within 90 days. All current and new employees' background checks must be approved by the Superintendent.

**23. Audit Requirements:**

Unless waived by Racine County, contractors must submit an annual audit to Racine County if the total amount of annual funding provided by Racine County (from any and all of its Divisions taken collectively) for all contracts is \$100,000 or more.

**24. Racine County Standard Terms and Conditions:**

Proposer must agree to comply with the following terms and conditions:

**24.1** Standard contract language

**24.2** Certification standards where applicable

**24.3** Fiscal and program reporting criteria

- 24.4** Allowable Cost Policy
- 24.5** Audit criteria
- 24.6** Policies and procedures as defined in Racine County Human Services Department Contract Administration Manual
- 24.7** Maintain adequate liability coverage
- 24.8** Civil Rights/Affirmative Action Policies
- 24.9** Criminal and caregiver background checks for staff
- 24.10** Drug screening, driver's license checks and reference checks
- 24.11** Fair Labor Standards Act
- 24.12** Recognize that authorization for services is approved by Racine County Human Services Department.
- 24.13** All informational materials (program descriptions, brochures, posters, etc.) must identify it as a RCHSD program through the use of a standardized RCHSD format provided by Racine County.
- 24.14** The program must be identified as a RCHSD program in all public presentations and media contacts/interviews.

**END OF PROPOSAL INSTRUCTIONS—  
PROCEED TO APPENDICES TO COMPLETE  
THE PROPOSAL**

**APPENDIX A**

Proposal Code Letter: \_\_\_\_\_

(for Racine County use only)

# Racine County Human Services

## Request for Proposal Cover Sheet

### Juvenile Detention Medical and Mental Health Services

RFP #645

Company Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

|                     |                  |
|---------------------|------------------|
| Authorized          | Date             |
| Printed Name: _____ | Submitted: _____ |

**NOTE: Complete one Cover Sheet for your proposal and a separate Cover Sheet for your Budget Worksheet.**

Documents Included (check all you are attaching):

\_\_\_\_\_ Vendor Acceptance Form (Appendix B)

\_\_\_\_\_ Reference List (Appendix C)

\_\_\_\_\_ Agency Narrative (Appendix D)

\_\_\_\_\_ Proposal Criteria (Appendix E)

\_\_\_\_\_ Past Performance (Appendix F)

\_\_\_\_\_ Budget Worksheet (Appendix G)

|                                                             |
|-------------------------------------------------------------|
| Proposal Code Letter: _____<br>(for Racine County use only) |
|-------------------------------------------------------------|

**Vendor Acceptance Form**

Program Name: Juvenile Detention Medical and Mental Health Services

RFP #: 645 Date of Issue: July 15, 2019

By signing and submitting this Proposal, I \_\_\_\_\_ hereby  
(Print Name)

certify and swear that I am a duly authorized agent of this company, I have examined and carefully prepared this proposal from the written specifications and information of Racine County and have checked the same in detail before submitting said proposal to Racine County. I have full authority to make such statements and submit this proposal, and all statements submitted are true and correct.

I FURTHER CERTIFY that no agreement has been entered into to prevent competition for said work. I have carefully examined all materials related to this proposal.

I FURTHER CERTIFY that any data sheets and descriptive literature attached hereto are true and correct and are intended to be made part of this bid/proposal response.

I FURTHER CERTIFY that neither this company nor any of its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any Federal, State, County, Municipal or any other department or agency thereof. I certify that this company/agency will provide immediate written notice to the County if, at any time, it is learned that this certification was erroneous when submitted or has become erroneous by reason of changed circumstance.

I acknowledge that Racine County reserves the right to reject any and all bids and to select the vendor considered by Racine County to be most advantageous, at the sole discretion of Racine County.

In compliance with this Request for Proposals and subject to all the terms and conditions thereof, the undersigned offers and agrees, if this proposal is accepted, to furnish any or all of the items, deliverables or services herein at the prices, terms and delivery stated.

All signatures **MUST** be original. No facsimile, stamped or copied signature will be accepted and is cause for rejection of the proposal. **By signing this form, I affirm that the original Request for Proposals documents have not been altered in any way.**

Authorized Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Business: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_ City/State Zip: \_\_\_\_\_



**APPENDIX C**

Proposal Code Letter: \_\_\_\_\_

(for Racine County use only)

# Racine County Human Services

## Request for Proposal Reference List

### Juvenile Detention Medical and Mental Health Services

#### RFP # 645

It is important to provide accurate contact information for each reference listed. Racine County will not attempt to locate incomplete or inaccurate information in names, location or phone numbers. Prior experience on previous Racine County projects may be considered by the County, even if not listed here as a reference.

1. Project/Program Name: \_\_\_\_\_

Individual to be contacted at this site: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

2. Project/Program Name: \_\_\_\_\_

Individual to be contacted at this site: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

3. Project/Program Name: \_\_\_\_\_

Individual to be contacted at this site: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

# Racine County Human Services

## Request for Agency Narrative Sheet

### Juvenile Detention Medical & Mental Health Services

#### Program # 645

Present a clear and concise description of your agency. Points you may want to address include:

1. What is the location of your primary headquarters and what areas do you serve?
2. What are your agency's mission and vision statements? How do they relate to this RFP?
3. What is your organizational structure? You may choose to provide your organizational chart.
4. If your agency currently operates any medical and/or mental health services, please describe them.
5. What other pertinent agency specifics would provide the evaluation committee with a sense of how your company operates?

**APPENDIX E**

# Racine County Human Services

## Request for Proposal Criteria Sheet

### Juvenile Detention Medical and Mental Health Services

#### Program # 645

All proposals must address each of the following criteria. **You must clearly identify which question each of your answers pertains to** by labeling it with the number of the specific question. **Failure to include all the criteria listed will disqualify the entire proposal.**

**1. Employees**

- a) How many employees do you have on staff?
- b) What are your recruitment, screening, and hiring practices?
- c) What experience and qualifications will be required of the employees working under this contract?
- d) How are new employees trained? Provide a copy of your training program.
- e) What is your employee retention rate?

**2. Scheduling**

- a) What is your scheduling process?
- b) How will you ensure shifts are covered in the event an employee is absent?
- c) How will you address a continual shortage of staff? At what point will there be a penalty enforced? (There should be separate penalty clauses for the different positions.)
- d) How much notice will you require for extended hours outside of the core hours?

**3. Transition and Implementation Plan**

(The quality, breadth and depth of this plan are critical to the success of the contract start-up and the conversion from current provider. This plan must address key aspects that are critical to the success of the transition and must be approved by Racine County.)

- a) Describe your activities during the thirty (30) days prior to the initiation of on-site services in preparation of the start-up.
- b) Describe your activities during the first sixty (60) days of the contract implementation to ensure uninterrupted service delivery and continuity of care.

**4. Additional Information**

- a) What challenges you foresee and how will you address those challenges?
- b) Why do you believe your agency is better able to operate this program than others?
- c) Any additional information that will help evaluators understand your proposal.

# Racine County Human Services

## Request for Proposal Past Performance

### Juvenile Detention Medical and Mental Health Services

#### RFP #645

What previous experience have you had with Racine County Human Services?

***\*Please note, this section must be answered on a separate document.***

- There is no weight for this category. It allows vendors with a past experience with Racine County the opportunity to be recognized for their contributions.
- For those vendors with no prior experience, this category will not be calculated in their scoring and therefore will not impact their overall rating in any way.
- To maintain the blind evaluation process, this section represents scores obtained from other officials within Racine County, who are not part of the evaluation committee. Supporting evidence will be attached to the final scoring sheet.

# Racine County Human Services

## Request for Proposal Budget Sheet

### **Juvenile Detention Medical and Mental Health Services**

#### RFP #645

All proposals must address each of the following criteria. **This information must be submitted in a separate envelope.**

1. Provide a detail listing of costs to include:
  - a. Annual cost broken down into an hourly rate for services within core hours
  - b. Hourly cost for extended service hours outside of core hours
  
2. List any "Value Added" services that your agency may include at no additional charge.