COUNTY OF ALAMEDA

REQUEST FOR PROPOSAL NO. MHSA OESD-2

SPECIFICATIONS, TERMS & CONDITIONS
for
MENTAL HEALTH SERVICES ACT (MHSA)
FAMILY EDUCATION AND RESOURCE CENTER

INFORMATIONAL MEETING / BIDDERS CONFERENCE
At
10:30AM on Friday, May 2, 2008
At
Alameda County Behavioral Health Care Services
2000 Embarcadero Cove, Ste. 400
Oakland, CA

RESPONSES DUE
No later than
12:00 Noon on Friday, May 23, 2008
To
Attn: OESD-2 FERC
Julie Mills
2000 Embarcadero Cove, Suite 400
Oakland, CA 94606
(510) 639-1325
COUNTY OF ALAMEDA

SPECIFICATIONS, TERMS & CONDITIONS
for the
Family Education and Resource Center

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I. ACRONYM AND TERM GLOSSARIES

Unless otherwise noted, the terms below may be upper or lower case. Acronyms will always be uppercase.

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<tr>
<th>Acronym</th>
<th>Definition</th>
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<tr>
<td>24/7</td>
<td>Twenty four hours per day, seven days per week</td>
</tr>
<tr>
<td>5150</td>
<td>5150 is a designated California Welfare and Institutions Code which allows a professional person designated by the County to transport individuals to a psychiatric facility for involuntary 72-hour treatment and evaluation</td>
</tr>
<tr>
<td>AB2034</td>
<td>AB 2034 is a &quot;whatever-it-takes&quot; program to end homelessness, incarceration and psychiatric hospitalization for adults with severe mental illness, and to support consumers in recovery and self-sufficiency. The hallmark of this program is that it is supported by non-Medi-Cal flexible funding. This flexible funding sustains formerly homeless people in housing by providing housing subsidies, rental assistance, a range of comprehensive integrated services and the intensive staff support. Peer support services are offered by consumers who are well into their recovery and have been in the public mental health system. AB 2034 programs were funded to support the &quot;cultural shift&quot; that must take place for real cultural change to occur on the individual, program and system levels. These programs were identified as a national model for delivering services to homeless people with severe mental illness in the report by the President's New Freedom Commission on Mental Health. The MHSA’s Full Service Partnership model was based on the AB2034 program.</td>
</tr>
<tr>
<td>ACBHCS or BHCS</td>
<td>Alameda County Behavioral Health Care Services</td>
</tr>
<tr>
<td>ACBHCS Quality Improvement Program</td>
<td>A specific Alameda County Behavioral Health Care Services program designed to improve quality.</td>
</tr>
<tr>
<td>ACT</td>
<td>Assertive Community Treatment</td>
</tr>
<tr>
<td>Accessible Services</td>
<td>Services that are affordable, available and sensitive to individual needs and cultural values.</td>
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<tr>
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<tr>
<td>Acute Psychiatric Inpatient Hospital Services</td>
<td>Services provided in general acute care hospitals, acute psychiatric hospitals, and psychiatric health facilities. These facilities provide service 24/7. Services include routine hospital services, all hospital-based ancillary services, and professional services. Routine hospital services include but are not limited to all medical, nursing and other support services usually provided to an inpatient by a psychiatric inpatient hospital. Included are psychotherapy, consultation, case conference, case management, occupational therapy, pharmacy, medication management, school/education/tutoring, translation/language support, and financial counseling.</td>
</tr>
<tr>
<td>Adolescent</td>
<td>Youth between the ages of 12 and 17.</td>
</tr>
<tr>
<td>Adult</td>
<td>Individuals between the ages of 18 and 59.</td>
</tr>
<tr>
<td>Agreement</td>
<td>The formal contract between ACBHCS and the Contractor</td>
</tr>
<tr>
<td>Assessment</td>
<td>A service that is based on a method of interview, observation, and testing. This service may include a clinical analysis of the history and current status of a client or patient’s mental, emotional, or behavior disorder, relevant cultural issues and history, diagnosis, and the use of testing procedures.</td>
</tr>
<tr>
<td>Best Practice</td>
<td>A body of knowledge that may include scientific, practical or anecdotal elements and that is perceived as an effective method of treatment.</td>
</tr>
<tr>
<td>BHCS</td>
<td>Behavioral Health Care Services. This department is part of the Alameda County Health Care Services Agency. Also known as Alameda County Behavioral Health Care Services (ACBHCS)</td>
</tr>
<tr>
<td>BHCS Monitor</td>
<td>Staff person or persons designated by BHCS to observe and critique contract compliance as necessary and/or on a predetermined schedule.</td>
</tr>
<tr>
<td>Bid</td>
<td>Shall mean the bidder’s/contractor’s response to this Request</td>
</tr>
<tr>
<td>Bidder</td>
<td>Shall mean the specific person or entity responding to this RFP</td>
</tr>
<tr>
<td>Board</td>
<td>Shall refer to the County of Alameda Board of Supervisors</td>
</tr>
<tr>
<td>Case Management</td>
<td>The total provision of services to a consumer that addresses the needs of the client to function at his or her best level in the community, often arranging for appropriate services and support. A case manager coordinates mental health, social work, educational, health care, vocational, housing, transportation, advocacy, respite care, and recreational services, as needed. The case manager makes sure that the changing needs of the consumer and family are met. (This definition does not apply to managed care). See also definition of Personal Care Coordinator in Full Service Partnership section of the glossary.</td>
</tr>
<tr>
<td>COLA</td>
<td>Cost Of Living Allowance</td>
</tr>
<tr>
<td>Community Collaboration</td>
<td>The process by which various stakeholders (which may include consumers, families, citizens, agencies, organizations, and businesses) work together to share information and resources in order to accomplish a shared vision. Collaboration allows for shared leadership, decisions, ownership, vision, and responsibility.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>Community Services And Supports</td>
<td>A general reference to community-based mental health services and support programs, which includes a variety of services, a wide range of intensities and purpose. This term often refers to a continuous system of care” model able to respond to a variety of user needs. See “Integrated Services” and “System of Care”, below.</td>
</tr>
<tr>
<td>Consumer/Client</td>
<td>Any individual who does or could receive mental health, alcohol, drug and other care services to improve the quality of his or her life.</td>
</tr>
<tr>
<td>Consumer-Driven</td>
<td>A client-centered system of mental health care tailored to an individual’s needs, preferences, and timetables that views providers and family as partners, not controlling partners.</td>
</tr>
<tr>
<td>Contractor</td>
<td>When capitalized, shall refer to selected bidder that is awarded a contract.</td>
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<tr>
<td>County</td>
<td>When capitalized, shall refer to the County of Alameda</td>
</tr>
<tr>
<td>CSC</td>
<td>Shall refer to County Selection Committee</td>
</tr>
<tr>
<td>Cultural Competence/Multi-Culturalism</td>
<td>The practice of continuous self-assessment and community awareness on the part of service providers to assure a focus on the cultural, linguistic, socio-economic, educational and spiritual experiences of consumers and their families/support systems relative to their care.</td>
</tr>
<tr>
<td>Developmentally Delayed</td>
<td>This refers to health conditions associated with established growth or maturation processes and may include both physical and mental functions</td>
</tr>
<tr>
<td>Disabling Condition</td>
<td>Under the HUD definition applicable to the Shelter Plus Care Certificates, a diagnosable substance use disorder, severe mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrences of two or more of these conditions.</td>
</tr>
<tr>
<td>DSM-IV</td>
<td>Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition</td>
</tr>
<tr>
<td>Early Intervention</td>
<td>Usually joined in phrase with the term Prevention, it means providing services or treatment early on at the onset of an illness with the goal of reducing the duration of the disorder.</td>
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<tr>
<td>EBT</td>
<td>Evidence Based Treatment</td>
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<tr>
<td>Environmentally Preferable Products</td>
<td>Products manufactured in a manner such that the impact on the environment is minimized throughout the entire lifecycle of the product by implementing sustainable practices during material sourcing, manufacturing, transportation, and by providing products that can be used and disposed of in an environmentally sound manner</td>
</tr>
<tr>
<td>EPA</td>
<td>United States Environmental Protection Agency</td>
</tr>
<tr>
<td>Evidence-Based Practice</td>
<td>An approach to managing mental health services that uses data which shows consistent evidence of improved outcomes to support decision-making.</td>
</tr>
<tr>
<td>Family, Family Partner, Parent Partners, Significant Other, Significant Support Person</td>
<td>The persons (biologically related or not) responsible for the consumer in question.</td>
</tr>
<tr>
<td>Family-Driven</td>
<td>A system of care that involves the family of a youth/consumer in the process of assessment, identifying treatment options and developing a treatment plan that is based on and adapted to the youth/consumer’s individual needs.</td>
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<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td>Family Member</td>
<td>An individual who is now or was in the past, either the primary caregiver or a concerned and involved person who provides a significant level of support to a person who is living with a mental illness.</td>
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<tr>
<td>FSP</td>
<td>Full Service Partnership</td>
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<tr>
<td>GSA</td>
<td>The General Services Agency of the County of Alameda. The GSA is responsible for, among other things, building maintenance.</td>
</tr>
<tr>
<td>IDDT</td>
<td>Integrated Dual Diagnosis Treatment</td>
</tr>
<tr>
<td>Integrated Services</td>
<td>The range of community and supportive services available to a consumer that are coordinated, integrated and reflect common values and focus on the delivery of services.</td>
</tr>
<tr>
<td>Involuntary</td>
<td>Actions taken without regard to the willingness, or in opposition to the intentions of the client and/or his parent/guardians</td>
</tr>
<tr>
<td>Labor Code</td>
<td>Refers to the California Labor Code</td>
</tr>
<tr>
<td>Major Mental Disorder</td>
<td>ACBHCS defines a major mental disorder or illness to be a condition associated with a diagnosis within the DSM-IV-TR that meets the medical necessity criteria as specified in the California Code of Regulations, Title 9, Chapter 11, Sections 1820.205(a)(1) for Psychiatric Inpatient Hospital Services and 1830.205(b)(1) for Specialty Mental Health Services. Same definition as Severe Mental Illness.</td>
</tr>
<tr>
<td>Managed Care</td>
<td>A system requiring that a single individual in the provider organization is responsible for arranging and approving all services needed under the contract. Embraced by employers, mental health authorities, and insurance companies, managed care helps to ensure that individuals receive appropriate and reasonable health care services.</td>
</tr>
<tr>
<td>Medical Services</td>
<td>Health care services other than mental health services</td>
</tr>
<tr>
<td>Medication Support</td>
<td>Services which include the prescribing, administering, dispensing and monitoring of psychiatric medications or biologicals which are necessary to alleviate the symptoms of mental illness. Medication support may include evaluation of the need for medication, evaluation of its clinical effectiveness and side effects, obtaining informed consent, medication education, and plan development related to the delivery of the service and/or assessment of the client/patient.</td>
</tr>
<tr>
<td>MHP</td>
<td>Mental Health Plan</td>
</tr>
<tr>
<td>MHS</td>
<td>Mental Health Services</td>
</tr>
<tr>
<td>MHSA</td>
<td>Mental Health Services Act</td>
</tr>
<tr>
<td>Organization</td>
<td>The awarded vendor or contractor may be an entity that is part of a larger administrative and functional association provided all County requirements are met</td>
</tr>
<tr>
<td>OSHA</td>
<td>Refers to California Occupational Safety and Health Administrations</td>
</tr>
<tr>
<td>Outpatient Mental Health Services</td>
<td>All mental health services except those services that are provided within a psychiatric hospital inpatient service</td>
</tr>
<tr>
<td>Outreach and Engagement</td>
<td>The act of extending services or assistance to those in the community who may benefit from care but who have not, or have not been able to, come forth to seek it.</td>
</tr>
<tr>
<td>Peer Counselor</td>
<td>Partners in the multidisciplinary team who have experience as consumers in the public mental health system and whose duties include a peer support role, contributing significantly to the recovery culture and client orientation of the team.</td>
</tr>
<tr>
<td><strong>Term</strong></td>
<td><strong>Definition</strong></td>
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<tr>
<td>PO</td>
<td>Shall refer to Purchase Order(s)</td>
</tr>
<tr>
<td>Proposal</td>
<td>Shall mean bidder/contractor response to this RFP</td>
</tr>
<tr>
<td>PHF</td>
<td>Psychiatric Health Facility: A facility, licensed by the State Department of Mental Health, that provides 24 hour acute inpatient care on an either voluntary or involuntary basis to mentally ill persons. This care shall include, but not be limited to, the following basic services: psychiatry, clinical psychology, psychiatric nursing, social work, rehabilitation, drug administration, and appropriate food services for those persons whose physical health needs can be met in an affiliated hospital or in outpatient settings.</td>
</tr>
<tr>
<td>Qualified</td>
<td>Competent by training and experience to be in compliance with specified requirements</td>
</tr>
<tr>
<td>Recovery</td>
<td>A process where mental health clients learn how to self-direct their lives and mental health, regain hope and optimism and reclaim positive social experiences beyond the mental health system.</td>
</tr>
<tr>
<td>Request For Proposal (RFP)</td>
<td>Shall mean this document, which is the County of Alameda’s request for contractor’s/bidder’s proposal to provide the goods and/or services being solicited herein. Also referred herein as RFP.</td>
</tr>
<tr>
<td>Resilience</td>
<td>The enduring ability of someone to recover from assaults to their person, whether physical, mental or emotional and, in the midst of that, maintain a sense of spirit and hope used in reference to children and youth.</td>
</tr>
<tr>
<td>Response</td>
<td>Shall refer to bidder’s proposal or quotation submitted in reply to RFP</td>
</tr>
<tr>
<td>SEIU</td>
<td>Service Employees International Union, AFL-CIO</td>
</tr>
<tr>
<td>Self-Refer</td>
<td>A client, or prospective client, seeking assessment or treatment services at their own initiation</td>
</tr>
<tr>
<td>Service Provider</td>
<td>Individuals, groups, and organizations, including County-operated programs, that deliver services to clients and patients under an agreement or contract with ACBHCS</td>
</tr>
<tr>
<td>Severe Mental Illness (SMI)</td>
<td>ACBHCS defines a Severe Mental Illness to be a condition associated with a diagnosis within the DSM-IV-TR that meets the medical necessity criteria as specified in the California Code of Regulations, Title 9, Chapter 11, Sections 1820.205(a)(1) for Psychiatric Inpatient Hospital Services and 1830.205(b)(1) for Specialty Mental Health Services. Same definition as Major Mental Disorder.</td>
</tr>
<tr>
<td>SLEB</td>
<td>Small Local Emerging Business</td>
</tr>
<tr>
<td>SOC</td>
<td>System Of Care: In a system of care, mental health, education, child welfare, juvenile justice, and other agencies work together to ensure that children with mental, emotional, and behavioral problems and their families have access to the services and supports they need to succeed.</td>
</tr>
<tr>
<td>Source Reduction</td>
<td>Refers to products that result in a net reduction in the generation of waste compared to their previous or alternate version and includes durable, reusable and remanufactured products; products with no, or reduced, toxic constituents; and products marketed with no, or reduced, packaging.</td>
</tr>
<tr>
<td>Specialty Mental Health Services</td>
<td>Rehabilitative services which include mental health services, medication support services, intensive day treatment, day rehabilitation, crisis intervention, crisis stabilization, adult residential treatment services, crisis residential services, and psychiatric health facility services.</td>
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</tr>
<tr>
<td>SSI</td>
<td>Social Security Insurance</td>
</tr>
<tr>
<td>Stakeholder</td>
<td>(a) A person or group of people who impacts or is impacted by mental health services; (b) A person who represents others’ interests relative to mental health services.</td>
</tr>
<tr>
<td>State</td>
<td>Refers to State of California, its departments and/or agencies</td>
</tr>
<tr>
<td>System Of Care</td>
<td>A multi-disciplinary, multi-agency delivery system of services that supports a consumer through a continuum of care and that uses a &quot;person first&quot; approach to build on the strengths of the person being served and his or her support system.</td>
</tr>
<tr>
<td>The Department</td>
<td>Alameda County Behavioral Health Care Services.</td>
</tr>
<tr>
<td>Transition Age Youth</td>
<td>Young adults between the ages of 16 and 25 years who would benefit from mental health community services and support to maximize their life skills and independence.</td>
</tr>
<tr>
<td>Treatment</td>
<td>Specified mental health, medical and appropriate ancillary services to be assessed, prescribed, implemented, and monitored for clients by the contractor or BHCS designees.</td>
</tr>
<tr>
<td>Unserved or Underserved Populations</td>
<td>Individuals that have received no services or are receiving inadequate services to meet their needs.</td>
</tr>
<tr>
<td>Utilization Review</td>
<td>Evaluation of the need, appropriateness, and efficiency of the use of health care services, procedures, and facilities. Utilization review usually includes review of the medical record. It may include review of the appropriateness of admissions, services ordered and provided, the length of stay, and discharge practices, and may be performed on a prospective, concurrent and/or retrospective basis. Utilization review can be done by a peer review group or an external agency.</td>
</tr>
<tr>
<td>Voluntary</td>
<td>To receive services by request and/or consent. In the case of a minor, refers to the request and/or consent of a parent, guardian, or other responsible agent unless the minor may give consent.</td>
</tr>
</tbody>
</table>
II. STATEMENT OF WORK

II.A. INTENT

The intent of this Request For Proposals (RFP) is to solicit proposals and select a provider to implement the Family Education and Resource Center program. Alameda County Behavioral Health Care Services (BHCS) is a division of the Alameda County Health Care Services Agency.

II.B. SCOPE

The Family Education and Resource Center plays a critical role in helping families support individuals with mental illness who are children, adolescents, adults or older adults. Funding for these services is available for Fiscal Year 2008/2009. The annualized net BHCS funding available to the Family Education and Resource Center is $988,768 with an additional $87,250 of one-time funds. Additional outside revenue that the bidder would propose to fully support operations must be estimated in Exhibit B Bid Form: Budget Worksheets. BIDS THAT EXCEED THE SPECIFIED MHSA FUND AMOUNTS BELOW WILL NOT BE ACCEPTED.

Summary of Available Annualized MHSA OE/SD-2 Funds

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Operation Costs</td>
<td>$988,768</td>
</tr>
<tr>
<td>(excluding any offsetting revenue)</td>
<td></td>
</tr>
<tr>
<td>Total Available Annualized MHSA Funds</td>
<td>$988,768</td>
</tr>
<tr>
<td>One Time Expenditures</td>
<td>$87,250</td>
</tr>
</tbody>
</table>

II.C. BACKGROUND

The Vision and Values of the Mental Health Services Act (MHSA)

All programs described in the Community Services & Supports Plan are designed to fulfill the vision of the Mental Health Services Act. This vision includes funding programs that will make significant changes in the mental health delivery system such as:

- Increase the level of participation of clients and families in all aspects of the public mental health system;
- Increase the number of client and family operated services;
- Increase outreach to and expansion of services to client populations to eliminate ethnic disparities and more adequately reflect prevalence estimates; and
- Increase the array of community service options for individuals diagnosed with severe mental illness and serious emotional disturbance (and their families) to avoid unnecessary institutionalization and out of home placements.

This vision requires that MHSA programs increase opportunities for client recovery, resilience and wellness by funding services and supports that encourage:

- Meaningful use of time and capabilities, including things such as employment, vocational training, education, and social and community activities;
- Safe and adequate housing, including safe living environments with families for children and youth; reduction in homelessness;
- A network of supportive relationships;
- Timely access to needed help, including in times of crisis;
- Reduction in incarceration in jails and juvenile halls;
- Reduction in involuntary services, reduction in institutionalization, and reduction in out-of-home placements.
MHSA services are designed to help adults and older adults with severe mental illness (SMI), children (and their families) with serious emotional disturbance (SED), and transition age youth who either have SMI or SED. MHSA services are oriented towards clients who are currently unserved and underserved by mental health systems. (The pertinent sections of the Act that add or amend significant portions of the Welfare and Institutions Codes defining program requirements are Sections 5, 7, 10 and 15.)

The Family Education and Resource Center (FERC) was approved as part of Alameda County Behavioral Health Care Services’ CS&S Plan approved by the state in 2006. The center (called the Family Education Center in the proposal to the state) was developed by the Family Coalition, a representative group of Alameda County families who have relatives in the mental health system with psychiatric disorders. The proposal was designed in response to the following concerns of ACBHCS families:

- A need for the orientation of families into the BHCS, public education and other relevant service systems, particularly around the crisis of initial onset of the symptoms of mental illness;
- A need for the encouragement and support of family partnership, participation and involvement; and education of families whether the consumer family member lives in Alameda County or not (including information about resources, housing, interventions, coping, mental illness, medications, etc.); and
- A need to provide consultation for staff of BHCS funded programs regarding family issues and a resource for clients and family members of BHCS programs.

**Role of the Family Education and Resource Center**

The FERC will provide outreach, education and support to the families of people with mental illness. This family-centered program will provide support services to those caring for a child, adolescent, adult or older adult with mental illness. The FERC will also provide feedback to decision makers at all levels of ACBHCS about the important role of families in supporting their loved one. The aim is to provide input into system level planning and to the county quality improvement system, with the goal of creating a more family and consumer driven system of care. The vision of the FERC includes strengthening educational, peer, and information and referral services. Under this vision, the center would substantially increase the county-wide family support group network available to BHCS programs. The center would work closely with county and contract agencies to promote a family perspective and to position itself as a resource in the community. The FERC will collaborate with ACBHCS to maximize its role as a transformative agent for the entire mental health system.

The CS&S plan to the State outlined seven programmatic components to address family needs, which were used to inform the design of the FERC. They included: a warm line, education and training to family members, a resource center, assistance with AB1424, promotion of the FERC, support for the development of family leadership, and collaboration with MHSA funded programs.

**History of the Family Movement**

The Family Education and Resource Center is the result of many years of hard-fought efforts by family members of individuals with psychiatric disorders in Alameda County. The need for a center that provided support, information and referral, and education to family members became a reality during the planning for the Mental Health Services Act Community Services and Supports plan in Alameda County. A group of family members and mental health advocacy organizations, including the NAMI affiliates, United Advocates for Children and Families and the Mental Health Association came together as the Alameda County Family Coalition and developed a proposal to develop the first Family Education and Resource Center in California. The plan was approved by the California Department of Mental Health in 2006.

*The Family Movement in Alameda County*

The family movement is dedicated to reducing stigma through education about the causes of mental illness, advocating for appropriate care and resources for individuals with mental illnesses, providing education and support to family members and promoting family driven systems of care that recognize the important role that family members play in the lives of individuals with psychiatric disorders and SED.
The family movement emerged as a result of the marginalized role of parents and family members in the treatment and care of their loved ones, as well as major changes in federal and state legislation in the ‘60s, ‘70s and ‘80s. Family members were often blamed for their loved ones’ psychiatric disorders and had little say in the treatment of their loved ones. The expansion of the Aid to Disabled Act to include mental illness provided financial support to those living with this disability. The Lanterman-Petris-Short act, which envisioned an end to the institutionalization of the mentally ill and the advent of community-based mental health care was enacted into law in 1969. The lack of funding and appropriate planning with the release of individuals from mental health institutions created widespread homelessness and eventually involvement in the criminal justice system for many individuals living with psychiatric disorders. Family members found themselves caring and providing for their loved ones because of the gaps in the system of community based care. Out of this new reality, were born the family and consumer movements.1

National Alliance on Mental Illness
The National Alliance on Mental Illness and its affiliates has been at the forefront of advocating for consumer and family voices since the ‘70s. The local NAMI organization was formed in Oakland in 1977 after a group of parent groups came together and developed the alliance. NAMI set out to educate the country about mental illness, advocate for the rights of individuals with mental illness, and shift the system of care towards one that is consumer and family-driven. Today, NAMI has over 1200 local affiliates across the country, including three in Alameda County. They include:
- NAMI Alameda County
- NAMI East Bay
- NAMI Tri-Valley

The NAMI affiliates have been instrumental in providing support to family members, advocacy at the system level, and education to reduce stigma and increase awareness throughout the community. As a pioneer in the field and an organization with a long history in Alameda County, the NAMI affiliates will serve as essential partners in the operation of the FERC. The FERC will work with the NAMI to publicize its events, garner its expertise to train FERC staff, offer its programs at FERC satellites, and share space at no cost to NAMI.

Mental Health Association of Alameda County
The Mental Health Association of Alameda County provides patient rights advocacy, education and support to family members, and advocacy to improve the lives of individuals with mental illnesses. The organization currently sponsors NAMI Alameda County. The FERC will establish a collaborative relationship with MHAAC.

United Advocates for Children and Families
United Advocates for Children and Families is dedicated to improving the quality of life for children and youth with mental, emotional and behavioral challenges. UACF also sees the support to families as full partners as integral to achieving this goal. UACF provides advocacy, technical assistance to family organizations, family support groups and education series in Alameda County. The organization was birthed in the 1990s. The FERC will work with UACF to develop programs and services that are responsive to the needs of family members of children and youth accessing the mental health system.

The FERC will work with the aforementioned agencies to further the shared goal of creating a program that is responsive to family concerns and needs and to advocate for system change within the mental health system. Through these collaborative efforts, the systems of care in Alameda County will become more family-driven.

Characteristics of Family-Driven Care

Family-driven care is described as:

1. Family experiences, their visions and goals, their perceptions of strengths and needs, and their guidance about what will make them comfortable steer decision making about all aspects of service and system design, operation, and evaluation.

2. Family-run organizations receive resources and funds to support and sustain the infrastructure that is essential to insure an independent family voice in their communities, states, tribes, territories, and the nation.

3. Meetings and service provision happen in culturally and linguistically competent environments where family voices are heard and valued, everyone is respected and trusted, and it is safe for everyone to speak honestly.

4. Administrators and staff actively demonstrate their partnerships with all families by sharing power, resources, authority, responsibility, and control with them.

5. Families have access to useful, usable, and understandable information and data, as well as sound professional expertise so they have good information to make decisions.

6. Funding mechanisms allow families to have choices.

7. All children, youth, and families have a biological, adoptive, foster, or surrogate family voice advocating on their behalf.2

II.D. PROGRAM REQUIREMENTS – FAMILY EDUCATION AND RESOURCE CENTER

The Family Education and Resource Center is a MHSA System Development proposal. The FERC will collaborate with the BHCS to maximize its role as a transformative agent for the entire mental health system of care. It will play a major role in disseminating information to Alameda County families about mental health and about how to navigate BHCS Systems of Care. The FERC will also provide information, referral and resources to consumers, providers and the community at large.

The FERC advances the MHSA goal of promoting a client/family driven system. The program will be transgenerational (serving the needs of families with infants through older adults). The center will be sensitive to meeting the needs of all families, including those that don’t fit traditional family definitions. Staffing will reflect the needs of the community and will include family members. The FERC will provide input and feedback to ACBHCS decision makers at all levels to express the experience of families. The FERC will provide resources and training which will be available to all BHCS programs to enhance their knowledge base and understanding of the important role the family can play in improving the quality of care for mental health consumers. The center will meet the confidentiality needs of both the family members and the mental health consumer.

To address all of the required program components, it is possible that a partnership will be required among a number of agencies collaborating together. Please note, according to California Department of Mental Health regulations, if the bidder proposes that clinical services are provided through the FERC, these services MAY NOT be subcontracted to an organizational provider that is subject to Medi-Cal settlement requirements.

2 “Family Driven Care: Are We There Yet?” University of South Florida. May, 2007. This is a commonly promoted definition shared and disseminated by SAMHSA and other mental health research and advocacy organizations.
Goals, Needs and Target Population of the FERC

Goals
Family members play an important role in supporting wellness and recovery among individuals with psychiatric disorders, often serving as key supports and advocates in the community and within the mental health system. Recognizing the range of contributions provided by family members, as well as their advocacy role within the system, the FERC was designed to address both support to family members and transformation of the mental health system to better integrate a family perspective. The Community Services and Supports (CS&S) plan to the State Department of Mental Health outlines the primary objectives of the FERC, which include:

1) To provide supports to families of clients who are in BHCS funded programs;
2) To develop a resource center that supports families in their understanding of mental illness, to increase their capacity to support their family members who are in the public mental health system and to increase their ability to help other family members;
3) To promote county-wide involvement, leadership and linkage at all levels of BHCS; and,
4) To train BHCS funded programs in how to work collaboratively with families.

Statement of Need
The FERC was developed to respond to several needs identified during the MHSA planning process. Additional needs were identified during the community input phase of the FERC planning process. The major needs identified during both these processes include:

Navigating the System: The need for the orientation of families into the BHCS, public education and other relevant service systems was identified as an important need, especially around the crisis of initial onset of the symptoms of mental illness. Family members called for better integration and coordination between mental health, criminal justice, Child Protective Services, and Public Education systems and wanted up-to-date information about how to navigate these systems and advocate for their loved one.

A Range of Family Support Services: The need for education, peer and social support and information and referral was identified as an important priority. The lack of family support was identified as a major gap for family members, often resulting in isolation and stress. The community input phase identified the need for a range of social supports for family members, including peer support that addressed issues relevant to the age of their loved ones, severity of mental illness, language and culture. Education, referral, and light case management were identified as needs by family members.

Supporting a Family Perspective within the Mental Health System: The need for training and technical assistance to providers around supporting a family perspective was identified during the MHSA planning process. During the community input phase of the FERC, providers, consumers and family members concurred on the need for integrating more of a family perspective within the public mental health system. Provider organizations were eager to collaborate with the FERC to develop more family support services within their own institutions and receive technical assistance from the FERC.

Meeting the Needs of Family Members throughout Alameda County: The need to provide family support services and advocacy to respond to the needs of family members was identified during the planning process, particularly in regard to region, language, and cultural backgrounds. The geographic location of services means that some family members are unable to access services for themselves or their loved one. Cultural and linguistic barriers prevent other groups from accessing family support services. The need to offer a range of services that respond to the priorities of culturally and linguistically diverse populations, as well as low-income communities was also identified.

The CS&S plan to the State outlined seven programmatic components to respond to these needs, which were used to inform the design of the FERC. The seven components are a warm line, education and training to family members, a resource center, assistance with AB1424, promotion of the FERC, assistance to
families in leadership positions, and technical assistance to MHSA programs. These services are described in more detail under the required program components section on pages 25-26.

**Target Population**
The FERC will be transgenerational, serving family members of persons of all ages with SMI or SED. In addition, the FERC strives to serve family members of diverse cultural and linguistic backgrounds, as well as family members residing in the diverse regions of the County. The FERC will work with BHCS programs and provider organizations throughout the County to support the strengthening of a family perspective throughout the Mental Health system in Alameda County. The FERC will serve as a resource to family members, consumers, providers, advocates, and community members.

*A Broad Definition of Family:* The FERC is designed to serve family members of individuals with psychiatric disorders, with family defined in the broadest sense, including non-traditional definitions of “family.” Family members may include siblings, parents, children, significant others, extended family and others who may play an important role in the lives of the individual with a psychiatric disorder.³

**MHSA Funded Programs:** As an MHSA funded program, the FERC will comply with the guidelines set forth by Prop. 63. MHSA services are designed to help adults and older adults with severe mental illness (SMI), children (and their families) with serious emotional disturbance (SED), and transition age youth who either have SMI or SED. MHSA services are oriented towards clients who are currently un-served and underserved by mental health systems. (The pertinent sections of the Act that add or amend significant portions of the Welfare and Institutions Codes defining program requirements are Sections 5, 7, 10 and 15.)

**Main Center Operations**
The main center will be located in the North County, preferably in Oakland, given the high number of BHCS clients and un-served/underserved/inappropriately served populations residing in Oakland. The main center will house a resource center serving communities in the North County (Oakland, Alameda and Berkeley), as well as the administrative offices for the FERC.

**Site Specifications:**
The location of the site should meet the following specifications:
- Accessible by public transportation
- Located near other services that family members and under-served populations access on a regular basis (i.e. mental health services, primary care, other resource centers, multi-service/one-stop centers, community-based organizations, or public libraries etc.)
- Welcoming and physically appealing to family members
- Sufficient office space to accommodate administrative offices, meeting rooms, resource center and library.⁴

**Hours of Operation:** The administrative offices will operate from 9:00am to 5:00pm Monday through Friday. The resource center will operate from 10:00am to 7:00pm, with occasional Saturday and additional evening hours as needed.

**Staffing:** The main center will be staffed by the following positions:
- Program Director
- Training Coordinator

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³ The FERC uses the term family member, rather than caregiver to encourage the participation of family members who may fill a variety of roles in relation to the individual with a psychiatric disorder. However, the FERC also recognizes the important caregiver role that many family members play and will incorporate services and supports that address the needs of family caregivers.

⁴ Please see facility checklist for additional information on site specifications.

- Lead Family Advocate
- Family Advocate (2)
- Warm line Operator
- Administrative Assistant

**Satellite Operations**
The satellite centers will be located in the following regions:
- Central County
- South County
- Tri-Valley

*Central County:* The Central County satellite will be responsible for providing services to family members, consumers, providers, and community members in Hayward, San Leandro and Castro Valley.

*South County:* The South County satellite will be responsible for providing services to family members, consumers, providers, and community members in the Fremont, Newark and Union City area. The satellite will preferably be located in the Fremont area.

*Tri-Valley Area:* The Tri-Valley satellite will be responsible for providing services to family members, consumers, providers, and community members in the Livermore/Pleasanton area. The satellite will preferably be located in the city of Livermore.

**Satellite Site Specifications:**
The satellite sites will meet the following specifications:
- Accessible by public transportation
- Located near other services that family members and under-served populations access on a regular basis (i.e. mental health services, primary care, other resource centers, multi-service/one-stop centers, community-based organizations, or public libraries etc.)
- Welcoming and physically appealing to family members
- Sufficient office space to accommodate a staff member and a volunteer, as well as a meeting room to accommodate up to 10 people.

**Satellite Hours of Operation:** The satellite centers will house the family advocates, who will work from 10:00am to 7:00pm Monday through Friday, with occasional weekend and additional evening hours. Hours may be modified, but should include evening and morning hours. The satellite centers will be open for drop-in hours and one-on-one appointments at least fifteen (15) hours per week. The satellites may be open to the public for additional hours, depending on community needs, funding and/or staffing levels (i.e. volunteers).

**Staffing:** Each satellite will be staffed by a family advocate. The lead family advocate will provide support to the FERC across the County.

**Strategy and Approach of the Family Education and Resource Center**
The FERC is designed to provide culturally and linguistically accessible resources and supports to family members of individuals with psychiatric disorders. It is also designed to be an agent of change within the mental health system, advocating for wellness and recovery approaches, as well as a family perspective. The FERC will implement this mission through the following strategies:
- Community-based resources, services and supports
- Advocacy for system change
COMMUNITY-BASED RESOURCES, SERVICES AND SUPPORTS

The FERC will provide community-based resources through resource centers housed at the main center and the satellites located in the North County, Central County, South County and Tri-Valley Area. The resource centers will offer a number of services and supports to family members, consumers, providers and community members, including the following:

- Education and Training to Family Members
- Peer and Social Support
- Information and Referral

All services will be informed by the values of the Mental Health Services Act and the principles of wellness and recovery. The FERC will strive to provide services and supports that are responsive to family member-identified needs and priorities and will take a “meeting the client where they are at” approach. The FERC will collaborate with family-run organizations and mental health organizations like the local chapters of National Alliance on Mental Illness (NAMI), United Advocates for Children and Families (UACF) and other community based organizations to strengthen and expand the delivery of family support, education and advocacy efforts. The role of the FERC is not intended to supplant NAMI, UACF or other existing groups. FERC will nurture and be supportive of these groups.

Education and Training to Family Members

The FERC will offer a variety of education and training programs to family members designed to meet a range of needs and interests. Education programs should be offered in a variety of formats and lengths, including the traditional 12-week programs, evening informational sessions, and/or shortened 2-hour workshops to respond to the needs, interests and availability of a variety of family members. The Education and Training programs will be responsive to local and community needs and the Family Advocate will work closely with the Training Coordinator and other stakeholders to ensure that a range of education programs are offered. In addition to general family education, training programs will include modules for provider education, consumer education and modules specifically targeted for families of young children. Programs will be offered in multiple languages. Existing modules will be modified and new education workshops will be designed to ensure that education offerings are culturally responsive to family members of diverse backgrounds.

Goals of Education and Training

The purpose of the education and training component is to provide information and education about psychiatric disorders. The goals are as follows:

- To teach family members and friends of individuals with a mental illness about the symptoms and course of mental illness.
- To afford family members the opportunity to ask questions about psychiatric disorders and treatment options (medications, therapies, etc.).
- To reduce the stigma of mental illness by providing a forum in which to discuss concerns and obtain support from peers.
- To publicize the availability of mental health services through Alameda County Behavioral Health Care Services.
- To link family members with opportunities for support through the FERC and with community resources.
- To provide family members with information about AB1424, confidentiality laws and other pertinent legal information.

Service Delivery of Education and Training Programs

The education and training programs to family members will be delivered in a range of settings. Classes and workshops will be offered at the main center and the satellites, in addition to community settings, such as public libraries, schools, recreation centers, senior centers, community-based organizations, and/or those
organizations that serve underserved cultural and ethnic groups. By providing education within the
community, the FERC builds on existing community resources and better engages un-served and
underserved populations that may not seek out services at the center. The education programs will be
delivered by family advocates, with support from the training coordinator, trained family volunteers,
interpreters, and/or staff from community-based partners. The FERC will collaborate with community-
based organizations that are currently delivering family support services, as well as those organizations with
well-established relationships with underserved communities.

Engaging a Range of Family Members in Education Activities
In order to reach the needs of the diverse family members in Alameda County, the FERC will both modify
existing education programs to ensure that they are linguistically and culturally responsive and develop new
programs and workshops that respond to community needs. The 12 week series will be translated to reflect
the cultural and linguistic backgrounds of diverse clients. The FERC will also develop or secure education
curricula that are responsive to a variety of audiences, including those with limited education, low literacy
levels and/or limited English proficiency. The training coordinator and lead family advocate will be
responsible for securing and developing education programs that are culturally responsive to groups which
may have non-Western concepts of health and mental illness through collaboration with community-based
organizations. The education programs should address the following needs:

- Schedule of working families may not permit attendance to a twelve-week program; workshops or
  shorter information sessions will also be offered;
- Individuals with limited literacy levels and/or proficiency in English should be provided with an
  education course appropriate to their education level and in their primary language. Education
  programs will be provided in the primary language of the participants, especially in those regions
  with large numbers of limited English Proficient residents;
- Few education programs address the issue of Post Traumatic Stress Disorder. The education
  programs may need to be modified to incorporate this diagnosis;
- When provided to cultural and linguistic minority groups, groups should be co-facilitated by a
  person of similar cultural and linguistic background, with knowledge of the western medical system,
  as well as culturally-specific concepts of health and mental illness; and,
- Education programs may be integrated with peer support groups.

12-Week Education Series for Family Members
The education and training programs will include modules like NAMI’s Family-to-Family Education series,
United Advocates for Children and Families of California’s Educate, Equip and Support: Building Hope
series, and other locally designed programs and workshops.

NAMI Family-to-Family Training
The NAMI Family-to-Family Education Program is a free, 12-week course for family caregivers of
individuals with severe mental illness. The course is taught by trained family members, instruction and
course materials are free to class participants and over 100,000 family members have graduated from this
national program. The course offers the following:

- Current information about schizophrenia, major depression, bipolar disorder (manic depression),
  panic disorder, obsessive-compulsive disorder, borderline personality disorder, and co-occurring
  brain disorders and addictive disorders
- Up-to-date information about medications, side effects, and strategies for medication adherence
- Current research related to the biology of brain disorders and the evidence-based, most effective
  treatments to promote recovery
- Gaining empathy by understanding the subjective, lived experience of a person with mental illness
- Learning in special workshops for problem solving, listening, and communication techniques
- Acquiring strategies for handling crises and relapse
- Focusing on care for the caregiver: coping with worry, stress, and emotional overload
- Guidance on locating appropriate supports and services within the community
United Advocates for Children and Families Trainings

Educate, Equip and Support: Building Hope (EES) was developed as a 12-week, parent-to-parent education program. The purpose of the course is to: (1) provide parents with education about symptoms of children's mental health disorders, (2) equip them with information about treatment options, accessing mental health treatment, and local resources available to help address their children's mental health needs, (3) educate them about accessing entitlement programs and the role of child welfare, education, and juvenile justice in the lives of children with serious emotional disturbances and (4) promote the building of natural supports between parents in local communities.

The curriculum is founded on scientifically based diagnosis and treatment information from the National Institute of Mental Health (NIMH). In addition to diagnostic information, EES includes information on stigma related to children's mental health disturbance, grief and loss associated with having a child with a serious emotional disorder, brain development, evaluation and assessment of mental health disorders, and the effect of environmental factors on children's emotional and intellectual growth. Parents are also aided and supported by gaining information about local resources they can access in their communities, such as treatment services available, support organizations, mentoring organizations, advocacy organizations and special education information.

Education Lecture Series, Workshops and Presentations

The FERC will sponsor lecture series, evening workshops and a variety of other presentations to family members and the general public to address a variety of educational needs. The FERC will develop partnerships with mental health advocacy and family organizations, provider organizations, ethnic serving organizations and other community efforts within the region to sponsor education sessions designed to address different topics that may be of interest to family members, including: benefits information, medication, wellness and recovery, navigating the criminal justice system, navigating the mental health system, caregiver self-care, siblings and children with SED, AB1424, navigating the public education system and other topics of interest generated by family members. Lecture series will also address different family issues related specifically to children, transition age youth, adults or older adults with psychiatric disorders. The FERC will secure interpreters and speakers from a wide range of backgrounds so that educational components are available to a wide range of audiences.

Education in the Community: Collaboration with Libraries and Other Community Based Organizations

The FERC will work with community-based organizations to expand the availability of educational workshops and materials. The Family Advocate in each regional satellite will be responsible for developing partnerships with local libraries to enhance the educational activities and materials related to mental illness. The start-up budget includes funds for each satellite to develop local public library and FERC resource center collections of books, DVDs and other materials that address mental illness, family issues, and wellness and recovery in multiple languages. The goal is for the collection to be highlighted during mental health month and supplemented by an education session hosted at the local library. Additional partnerships may be developed at primary care and community clinics, schools, resource centers, and other locations where residents naturally gather and will depend on community need and interest.

Peer and Social Support Services

The FERC will offer a variety of peer and social support services to family members designed to meet the diverse needs of families. In terms of services that would make an impact in their lives, social support was identified as a high priority among family members across age, ethnic and socioeconomic backgrounds. Peer and social support services include free information, empowerment, and support to family members and

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5 Source: http://www.nami.org/template.cfm?section=Education_Training_and_Peer_Support_Center
6 Source: United Advocates for Children and Families http://www.uacc4families.org/training/educate.cfm
They will be offered one-on-one and in group settings. Support groups provide a forum for family members to obtain emotional support, develop positive coping strategies, learn about community resources, and share experiences. They can be an important strategy for reducing stress and isolation among family members and increasing positive coping. One-on-one peer support will be offered during drop-in hours and by appointment. During one-on-one consultation, family members may receive assistance resolving a particular issue, question or need or may receive information and referral services. Peer and Social Support Services will be provided by the family advocates and trained family members who are serving in a volunteer capacity. The FERC will collaborate with existing family-serving organizations within the community such as NAMI, UACF and Mental Health Association to support the expansion of the Peer and Social Support Services currently offered by those organizations.

**Goals of Peer and Social Support Services**

Peer and Social Support Services are designed to achieve the following goals:

- Reduce isolation among family members of individuals with SMI/SED
- Improve positive coping among family members, especially caregivers
- Reduce stress among caregivers
- Connect family members with resources and supports
- Empower family members as advocates for wellness and recovery

**Delivery of Peer and Social Support Services**

Peer and Social Support Services will be provided primarily by the family advocates at the main center and at the satellite centers, in addition to the community settings outlined in the education section. The family advocates will be responsible for developing relationships with existing community-based organizations, especially those that serve un-served and underserved cultural and linguistic populations. Trained community partners, family volunteers and interpreters will co-facilitate peer support groups and individual peer support consultations as needed. By developing a culturally and linguistically diverse team of family advocates, the FERC will be able to deliver services to the diverse communities in the County.

The FERC will provide peer support groups at the satellites, the main center and at community-based organizations to respond to community needs in each region. Peer and Social Support Services will build on existing resources (i.e. the NAMI Family-to-Family Program, United Advocates for Children and Families and Caregiver Alliance) and include groups that respond to regional or community needs, as well as the needs of individual family members. During the community input process, family members emphasized their desire for support groups where they could share experiences with their peers over those groups that addressed education topics. The topic areas covered may include: stress reduction, sharing of experiences, crisis management, life transitions, caregiver self-care, and other topics that emerge from participant interests and experiences. The groups should be responsive to the interests and needs of family members and have the flexibility to adjust the format accordingly. A range of peer supports will be provided, including the following:

1. **Peer Support Groups Focused on Social Support:** Family members surveyed requested groups that allowed them to share experiences and build relationships with individuals in an open format without a prescribed agenda or education component. Family members were particularly concerned with connecting with other family members in a similar phase of life. Groups will be facilitated by the family advocates and may address topic areas generated by the group or those described above.

2. **Peer Support Groups Responsive to Age Group Concerns:** Peer support groups that address the specific needs of family members of children, transition age youth, adults and older adults will be offered by the FERC at satellite locations and/or at community-based organizations as needed. The Community Input phase found that family members longed for peer support with individuals who were at a similar phase of life in regards to their loved one.

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7 Volunteers will be recruited, trained and supervised by the family advocates and training coordinator.
3. **Linguistically Competent Peer Support Groups:** Peer support groups will be provided in the language of the target audience, especially to Asian, Pacific Islander and Latino populations. Groups may be co-facilitated by the family advocate, an interpreter, or a trained community partner fluent in the language of the target audience. Facilitators will be trained in cultural concepts of mental illness, health and wellness.

4. **One-on-One Peer Support:** Peer support will be provided through one-on-one consultation with the family advocate through appointments made in advance and during drop-in hours. As the FERC develops a cadre of family volunteers, they will be trained in providing one-on-one peer support and will be available to provide individual consultations. One-on-one peer support will respond to the needs, concerns and interests of individual family members.

5. **Integration with Education Programs:** Many existing family education programs include a peer support component. Peer support will continue to be provided within these programs, as an important and integral strategy.

**Information and Referral Services**

An important goal of the FERC is to serve as a beacon to family members, consumers and community members seeking up-to-date and accurate information and referral so that they may help connect with appropriate services and supports. The information and referral program is designed to provide connection with needed resources that support the wellness and recovery of the consumer, as well as strengthen the family. The information and referral program will provide information and referral to housing resources, mental health services, primary care, benefits information, navigating the criminal justice and mental health systems, literacy, employment services, social and recreational opportunities, crisis services, information and assistance with AB1424, referral to legal services, and other resources as needed. All staff providing referral services will aim to connect family members to the resources that they feel would make a difference in their lives and their ability to support their loved one. Designed to respond to the often fragmented and hard-to-penetrate system of care, the information and referral program will implement several strategies to improve access to resources, services and community supports, including resource centers with drop-in hours, multi-media libraries, the warm-line, a website with up-to-date resources, and collaboration with community-based organizations.

**Goals of Information and Referral Services**

1. To provide up-to-date and accurate information about services, supports and resources
2. To assist families and consumers with navigating the mental health, criminal justice, and educational systems
3. To improve access to supports and services among underserved and un-served populations
4. To reduce stigma as a barrier to care in Alameda County by providing educational materials and resources in natural community settings.

**Resource Centers**

The main center and satellites will each operate a resource center, which will include a multi-media library, drop-in hours, on-line resources and in-person consultation with the family advocate. The Resource Center will provide a family-friendly environment that includes couches and chairs for family members to gather and socialize informally. The Resource Center will also include a child-play area if space permits.

1. **The multi-media library** will include educational materials related to different diagnoses and age group concerns, books on family issues and dynamics, DVDs in multiple languages, tapes and other materials of interest to family members, consumers and community members. The main center will have a more extensive library, while the satellite centers will house smaller collections. The family advocates located at satellite centers will be able to borrow materials from the main center.

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8 Regardless of space allocations, the resource center should include books, blocks, a small table or chairs that create a family friendly environment.
9 List of suggested materials for the multi-media library will be provided to the winning bidder.
2. **Drop-in Hours:** Each satellite will maintain drop-in hours fifteen hours a week, with afternoon and evening scheduling options. The main center will be open from 10:00am to 7:00pm daily. Modifications in schedule are acceptable, as long as evening and morning hours are maintained. The resource library and materials will be available for viewing at the centers. Family advocates will be available to provide information and referral during drop-in hours at the satellites. The warm-line operator will also be available at the main center.

3. **One-on-One Consultation:** Family members may make one-on-one appointments during business and drop-in hours with the family advocates to obtain assistance with accessing services, navigating the system or other information and referral needs.

**Warm Line**
The warm line will be staffed by a trained family member or individual with extensive experience working with consumers and family members in the mental health system and knowledge of Alameda County systems of care, social services, and community resources and supports. The purpose of the warm line is to provide information, referral and support over the phone to family members. Unlike a hotline, the warm line is not designed to provide crisis intervention, but will provide referrals to crisis support in Alameda County.\(^\text{10}\) The warm line will operate Tuesday through Friday from 12:00pm to 7pm and Saturdays from 9:00am to 12:00pm.\(^\text{11}\) The warm-line will be housed at the Main Center in Oakland. However, each satellite center will also have a telephone line that community members can call. During drop-in hours, the family advocates at each satellite will provide additional telephone support. A call-forwarding system will be set up so that incoming warm line calls to the satellites are forwarded to the main center during all other hours.

**FERC Website**
The FERC website will not only provide up-to-date information about FERC programs, resources, services and classes, but will also publicize other community resources, classes and information that may be of interest to family members and other community members. The website will include a referral page with important phone numbers, including contact information for the warm-line and the satellite centers. Schedules of drop-in hours will also be posted on the website. The website will serve as an important strategy for providing information and referral, in addition to promoting the FERC throughout the County.

**Collaboration with Community-Based Organizations**
In addition to providing information and referral at the FERC locations, over the web and through telephone support, the FERC will provide outreach, engagement and service delivery within the communities it serves. The Family Advocates will build relationships with existing community-based organizations to support the delivery of information and referral services to un-served and underserved communities and to reduce duplication of services. Through these partnerships, the FERC will determine and implement effective strategies that go beyond providing just a flyer or a brochure (i.e. providing training and information to community outreach workers, case managers and other staff) to successfully reach those individuals that may not access services through the center. Collaboration with mental health advocacy, family-serving and community-based organizations will also ensure that the FERC is positioned as a community resource for information and referral throughout Alameda County.

**Providing Linguistically Accessible Services:** The FERC will deliver linguistically accessible services to meet the needs of limited English proficient family members in the County. Specific practices include:

- Translation of written materials will be conducted by a professional translator with expertise in developing materials that are both culturally appropriate and responsive to the literacy level of the target audience. They will also be visually stimulating and accessible with digestible amounts of text and images. They will be reviewed by a native speaker before being distributed to family members.

\(^{10}\) The FERC will collaborate with Alameda Crisis Support Services at http://crisissupport.org/index1.html

\(^{11}\) Warm line hours may be modified to meet community needs.
Interpreter services will be accessed through relationships with community based organizations, ethnic-serving institutions, and contracts with interpreter and translation services firms. Interpreters must be identified and/or trained who understand issues pertinent to mental health care and have the appropriate vocabulary to communicate about these issues in the languages needed.

Recruitment of a linguistically diverse staff will ensure that services are delivered in the primary language of the client.

**ADVOCATING FOR SYSTEM CHANGE**

In addition to expanding the level of services and supports available to family members, the FERC is also dedicated to serving as an agent of change within the system, advancing both a family perspective, as well as the principles of wellness and recovery more broadly. The FERC will achieve this goal through several strategies, including:

- Promoting the FERC as a resource to both the community and the mental health system
- Advocacy training and leadership development for family members
- Provider training and technical assistance
- Promote the development of additional family support services, including respite care.

**Promoting the FERC**

The FERC will create a network of services throughout the County and will promote itself as a resource to the community and to the mental health system. A key strategy outlined throughout this plan is collaboration with community-based organizations. The FERC will work with existing mental health advocacy and provider organizations to provide family support services throughout the community and to publicize the FERC services and resources. In addition, the FERC will collaborate with community-based organizations that serve cultural and linguistic minorities to implement marketing, outreach and engagement strategies. The Program Director will be responsible for securing partnerships with existing organizations and ensuring that the FERC services and supports are publicized in places where family members of BHCS clients frequent. The Training Coordinator and Program Director will work with BHCS funded programs, the BHCS Training Department and the BHCS Family Liaison to promote the FERC.

**Developing a Marketing Plan**

During the start-up phase, the Program Director will work with a marketing consultant to develop a marketing plan for the FERC. The marketing plan will include the following components:

- Developing and maintaining a website that is regularly updated by FERC staff
- Local and regional print media (low cost options)
- Radio and television
- Strategies to reach Limited English Proficient clients
- Strategies to reach un-served/underserved clients, including “non-traditional” strategies.

**Promoting the FERC within the Regions**

At the regional level, the family advocates will be responsible for developing additional partnerships and engagement strategies, including:

- Promoting the FERC at community events, including health expos, information fairs, PTA meetings, and other venues where community members may gather
- Representing the FERC on local task forces, committees or other planning bodies
- Developing partnerships with community stakeholders to maximize the impact of current resources (i.e. identifying opportunities to provide information, referral and education to a broader audience, delivering culturally and linguistically appropriate services)
- Including FERC updates in NAMI, UACF, and other relevant newsletters and print.

**Advocacy Training and Leadership Development**

The FERC will serve as an agent of change within the system by recruiting, training and supporting family members in advocacy and leadership development. Information about the role of advocacy, upcoming
opportunities, and relevant local and state legislation will be incorporated into education programs offered by the FERC and presented on the FERC website. The Training Coordinator will be responsible for identifying existing opportunities for family leadership to be seated on decision-making bodies and staying abreast of any vacancies or unmet mandates in regards to family representation.

Recruitment
The Family Advocates will be responsible for recruiting family leaders at education workshops, peer support groups, and at community events. They will also work with schools, churches, and other community-based organizations serving cultural and linguistic minorities to expand the pool of family leaders within Alameda County. By recruiting family members of individuals with SMI or SED of different age groups, the FERC will ensure that their interests, needs and priorities are addressed in advocacy efforts.

Training and Leadership Development
The Training Coordinator will work with FERC Family Advocates to develop a training and leadership development program designed to prepare family leaders as advocates within the mental health system and on other decision-making bodies. The training will address principles of effective advocacy, leadership development skills, information on wellness and recovery approaches, talking points for promoting a family perspective, overview of FERC services, review of relevant legislation and decision-making bodies, ongoing peer support and other relevant information. The training will use existing mental health advocacy resources, including those developed by NAMI and UACF, as well as capacity building strategies. A supportive framework of regularly scheduled meetings for family caregivers/advocates will be provided.

Support
The training coordinator and FERC Family Advocates will be available on an as-needed basis to support family advocacy and leadership efforts. In advance of important meetings, the FERC will provide technical support to family leaders. Depending upon need, the training coordinator and lead family advocate may sponsor quarterly advocacy meetings to provide ongoing support and information to family leaders.

Provider Training and Technical Assistance
An important strategy for transforming the system is the provision of training and technical assistance to MHSA funded programs, BHCS programs, and provider organizations around integrating and supporting a family perspective. During the community input phase, providers and family members concurred on the need to promote a family perspective within the mental health system. Many providers surveyed were eager to receive training from the FERC on integrating a family perspective, AB1424, and strategies for involving families in treatment planning. The training programs will focus on the aforementioned areas and will also address provider concerns around confidentiality laws, as well as situations that may limit family involvement. The Training Coordinator will be responsible for developing a training plan and modules, collaborating with the Training Department at BHCS, establishing and maintaining partnerships with the BHCS and MHSA funded programs, responding to provider requests for trainings, and meeting measurable outcomes in relation to this strategy. A priority will be to offer trainings to providers for MHSA funded programs, followed by other mental health provider organizations and institutions.

Education and Training to Other Systems and Points of Referral: In addition to working with provider organizations, the FERC will provide educational workshops to staff from other systems to improve their knowledge of mental illness, enhance referral systems, and educate them about working effectively with consumers and family members (including orientation to AB1424). Working with mental health advocacy organizations, the FERC will target schools in each of the regions, local police departments, primary care clinics, child protective services, and the criminal justice system to deliver 1-2 hour workshops in each region of the County. By engaging the systems with whom family members interact, the FERC will not only promote itself as a resource in the community, but will also foster consumer and family-friendly

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12 See Appendix C for a list of training and outreach priorities by region.
METHODS FOR ENGAGING & SERVING UNDERSERVED POPULATIONS

The FERC aims to deliver programs that are transgenerational, culturally and linguistically responsive and available to family members throughout the County. In order to achieve this vision on a limited budget, the FERC must be both innovative and strategic in its delivery. The FERC will use the following strategies:

1. Partner with mental health advocacy, family-serving, provider and community-based organizations with expertise related to age group, cultural and linguistic, and regional concerns.
2. Recruitment and retention of culturally and linguistically diverse staff, especially among family advocates. The FERC will prioritize hiring and retaining staff that mirror the ethnic and linguistic backgrounds of the communities served.
3. Professional development that emphasizes building staff’s ability to deliver services that are responsive to the diverse needs of the communities in Alameda County.
4. An organizational commitment to the principles of wellness and recovery, cultural and linguistic competence and a “meeting the client where they are at” approach.

The FERC’s approach to addressing age group, cultural and linguistic and regional concerns is outlined below.

Diverse age groups
The FERC will meet the needs of diverse age groups by providing education, training and Peer and Social Support Services that target family members of children, transition age youth, adults or older adults with psychiatric disorders or SED. Childcare will be provided at peer support groups and education workshops. By collaborating with schools, community-based organizations, and other settings where families naturally gather, as well as provider organizations that serve different age groups, the FERC will achieve its vision of being a transgenerational program. Staff will be trained to work with school personnel, institutions related to foster care, officials in the juvenile justice system and agencies dedicated to the specialized health and resource needs of older adults. FERC Family Advocates and warm line staff will receive training on family issues related to different age groups. Family members will be recruited to achieve representation across age groups among family leadership.

Regions of the County
The satellite centers and collaboration with community-based organizations in each of those regions will ensure that services are delivered in each region of the County. Family members from the diverse regions will be recruited to achieve adequate representation among family leadership.

Underserved Cultural and Linguistic groups
An important goal of the FERC and all MHSA funded programs is to deliver culturally and linguistically competent services and supports. The FERC will accomplish this through collaboration with ethnic-serving institutions and cultural intermediary organizations, providing appropriate translation and interpreter services at events serving Limited English Proficient populations, and recruitment of staff that reflect the diversity of Alameda County and BHCS consumers. Community partnerships will ensure that services are provided in the community and respond to the needs of the target population. In addition, the FERC will work with a marketing consultant to effectively promote the FERC to underserved cultural and linguistic groups. Finally, the FERC will provide cultural competency training to all its staff and volunteers.

REQUIRED PROGRAM COMPONENTS INCLUDE:

Management and Oversight
The FERC will be managed by a single lead agency, either one selected through an RFP process or by the County. In either case, it’s likely this lead agency will sub-contract a variety of services as the likelihood of
a single organization having the expertise and relationships to operate the entire program is remote.

The FERC implementation will include an Advisory Committee comprised of ten members selected by the lead agency after consultation with organized family groups and approval by the County. The Advisory Committee will include a minimum of three family members, two providers, and two consumers, with representation from each of the four regions of the county. The Advisory Committee will meet four times annually to provide feedback to program leadership. The Advisory Committee will be charged with providing input and feedback into how the project is being implemented. The County will be responsible for ensuring that the contract with the lead agency is being fulfilled, that sub-contractors are meeting their benchmarks, and that funds are being expended according to the contract.

**Self Assessment**

The FERC will be committed to continuous improvement as an agency and will aim to create a community amongst its staff and stakeholders where data informs program design. In addition to ongoing professional development within the monthly operations of the FERC, the FERC will conduct an annual self-assessment to determine the extent to which the program is achieving its goals and objectives. The self-assessment will be conducted by FERC staff and reviewed with its advisory committee, the lead agency director, and BHCS staff. The recommended assessment is the University of South Florida’s Self-Assessment for Family Run Organizations in Systems of Care.\(^\text{13}\) The FERC will use the results to inform modifications in programming and operations.

The lead agency will hire a full-time Program Director responsible for monitoring subcontract operations, recruiting, selecting, training (or ensuring that training is delivered), supervising all project staff, overseeing all purchases, monitoring data collection, preparing progress reports to the county, and managing the operations of all FERC facilities. During the start-up process, BHCS and the lead agency Program Director will work together with a consultant to develop tools and protocols for collecting and reporting data. This will ensure that the FERC, BHCS and stakeholders are equipped with data to track the FERC’s progress towards meeting its goals and to help inform ongoing program improvement efforts.

A lead family advocate will supervise a team of five family advocates. They will meet twice monthly to share resources and experiences, identify programmatic and training needs, and problem solving around addressing community needs in their region.

**Specific services offered by the Family Education and Resource Center:**

1) Telephone information line would be operated during hours when working families would be most likely to use a phone information line. This phone line would be considered a "warm line", rather than a crisis line, and would respond to questions about resources, education, support groups, etc. This warm line might be considered an ongoing advice and referral resource for those families who don't have access to such BHCS services. It would be staffed by individuals with training in warm line work.

2) Educational training programs, along the lines of the comprehensive NAMI existing educational model and classes offered by United Advocates for Children – California. These classes would be designed to be accessible to a broad range of families in terms of length of class and content. Funds to pay for room rental and material copying would be included in the budget. Volunteers would continue to teach some of the courses, as appropriate. The FERC will conduct trainings in various areas of the County (east, south, central and north) for family caregivers; training would include locally designed courses, designed to meet the specific needs of Alameda County’s caregivers.

3) Resource center (along the lines of a one-stop shop) to contain wide range of informational materials. The center would include a library with a wide range of informational materials, including pamphlets and books as well as audio and videotapes. Information about legislation and regulations affecting families will be made available (e.g. AB3632 and IDEA – Individualized Disabilities Education Act). The FERC will produce guides to facilitate access to these materials, such as annotated bibliographies. The FERC will develop new educational materials specific to Alameda County services to help families orient themselves and learn how to navigate through the system of care. One example includes a website integrated with the “Network of Care.”

4) Assistance to families in their role as caretakers in providing pertinent historical information (AB 1424) about their ill family member to mental health care providers.

5) Use of staff and family member volunteers to promote FERC services, provide a regular presence at BHCS programs and public school sites, and participate in FERC program maintenance and outreach. Since the FERC is a new initiative, BHCS will ask all of its providers to display information about the program where family caregivers are likely to see it.

6) Assist family members who are advising or seated on ACBHCS decision making bodies.

7) Collaboration with BHCS Programs. FERC staff and volunteers will work with BHCS on staff training:

- The FERC is staffed to support the needs of family caregivers of persons with SMI or SED who are being served by BHCS funded programs. The FERC will assign staff members to be a liaison to the MHSA Full Service Partnership and Outreach/Engagement and System Development programs. The staff liaison will be charged with becoming knowledgeable about services offered by these programs and about its clients. The liaison will inform MHSA program members about services and support available from the FERC for family caregivers.

- The FERC also plans to work with consumer leaders within the Wellness Recovery Resource Hub, the Creating Homes Program and with the MHSA Office of Training on the content of provider training, community outreach and education, giving feedback to the MHSA/BHCS system.

**Recovery and Resiliency:** A central MHSA objective is to ensure that recovery, resilience and cultural competence values are integrated into each program culture. FERC bidders must show how their organizational knowledge and resources concerning recovery will be brought into the FERC program. Additionally, each Alameda County MHSA program will receive organizational consultation, technical assistance and collaborative training to support their capacity to promote and sustain these values. MHSA programs will become part of a “learning community,” where successful strategies in implementing recovery, resilience and cultural competence will be shared between programs.

Recovery values will be promoted and continually reinforced within this program in the following ways:

- The Wellness Recovery Resource Hub and MHSA Training staff will cosponsor staff training and organizational consultations on the “resiliency/recovery process” for the FERC.
- The FERC will be required to meet wellness and recovery performance standards and accountability practices. This will include ensuring that recovery concepts and techniques are key components of education/training and information/referral activities of the FERC.
- A “recovery self assessment” will be developed for the FERC that provides specific suggestions about how its organizational environment and staff/family member interactions support recovery.
Cultural, Linguistic & Gender Responsiveness: The FERC will be transgenerational, culturally competent, and linguistically accessible.

The FERC will meet the needs of its ethnic minorities, especially the needs of underserved African Americans and un-served Asians and Latinos. Written materials will be translated into threshold languages. The FERC will strive to be culturally competent and linguistically accessible, by hiring staff who reflect the service population’s ethnic diversity and by collaborating with agencies and programs that specialize in serving individuals from diverse cultural and linguistic backgrounds.

In addition, the FERC will provide staff training in sexual orientation and gender sensitivity. Written program materials will reflect appropriate use of terms referring to sexual orientation and gender. The FERC will link with regional and national leadership groups to ensure that up-to-date information is provided through Center services.

Family Services and Supports: The FERC should prioritize peer and social supports in its programming and offer a range of structures for clients to access services, including peer support groups delivered in the primary language of participants in community settings, one-on-one consultations, collaboration with existing support group providers, and groups related to specific diagnosis, age group, and cultural concerns. FERC staff and volunteers should be trained in the family perspective, cultural models of mental illness, institutional racism, the consumer movement (including principles of wellness and recovery), and age group concerns in order to adequately address the needs of the diverse family members. The FERC should include a flex fund to remove barriers that might prevent family members from accessing services to cover childcare and transportation barriers. The FERC should also explore models and strategies for financing respite, as this was identified as a high priority need. Information and referral should be offered in multiple formats, including a web-site, warm line, resource centers, in the community and in person. Interpreters and bilingual staff should be used to provide services to limited English proficient clients.

Family Engagement in the Mental Health System: The FERC should work towards developing a more family friendly system through provider training and technical assistance to BHCS programs and provider organizations and collaboration with BHCS. The FERC should provide education and training to staff from other systems with which family members interact, such as the school system, criminal justice, child protective services, and law enforcement to increase awareness of mental illness and the family role in caring for their loved one. The FERC should work to recruit family members of diverse cultural and linguistic, as well as regional backgrounds to serve in leadership roles on decision making bodies and provide adequate training and support to retain them. The FERC should build partnerships with community based organizations and mental health advocacy organizations that have built strong relationships with underserved communities and family members.

Program Accessibility: Services provided through the FERC must be accessible by public transportation. Physical or architectural accessibility to the Center’s services must also be made available. The FERC must post and maintain a policy on reasonable accommodation in accord with applicable state and federal laws. The FERC should develop a comprehensive marketing plan and develop relationships with ethnic-serving institutions, community based organizations and community stakeholders to ensure that family members of diverse cultural and linguistic backgrounds access its programs. A range of marketing strategies, including non-traditional strategies, should be incorporated. Services and supports should be delivered in the community. In order to deliver culturally and linguistically responsive services, the FERC should recruit bilingual and bicultural staff and provide professional development on cultural and linguistic competence. In order to meet the needs of geographically isolated areas, the FERC should operate satellite clinics in the diverse regions of the County. While the FERC represents an important step in expanding services and supports to family members of individuals with psychiatric disorders, the FERC should continue to leverage MHSA funds to obtain additional funds.
Safety & Security: The FERC program must implement strategies to protect the safety and security of staff, volunteers, and clients.

Staffing
The staffing structure for the FERC is outlined below. The FERC will be primarily operated by paid staff, with an additional volunteer component. Wherever possible, the FERC will be staffed by family members and/or individuals with extensive training and experience advancing a family perspective in the mental health system. The FERC will also prioritize the hiring of staff that reflects the cultural and linguistic backgrounds of the communities served. The FERC will be staffed by the following positions:

Program Director: 1.0 FTE (1 position)
The Program Director oversees all operations and serves as the primary contact with BHCS. The Program Director recruits and supervises all FERC personnel, manages sub-contracts and the contract with BHCS, manages the budget, and secures and manages facilities. This position is responsible for FERC organizational development, including recruitment of appropriate staff and grant development and fundraising. The Program Director will establish partnerships with community-based organizations, develop and implement a marketing plan and ensure that appropriate data collection systems are in place. The Program Director will be responsible for preparing reports documenting progress towards benchmarks and developing plans to modify programming and operations as necessary. The Program Director will be responsible for ensuring that the program complies with MHSA guidelines and regulations, is responsive to the diverse cultural and linguistic backgrounds of County residents and promotes the principles of wellness and recovery.

Desired Qualifications: The Program Director should have at least ten years experience working in the mental health system, be well versed in family issues and have experience leading a program or division of similar size and budget. Masters level licensure (in Social Work or Family Therapy) is desired. Successful candidate must be well versed in the family perspective, cultural and linguistic competence and the principles of wellness and recovery. Family members, as well as those individuals with knowledge of Alameda County systems of care and/or bilingual and bicultural backgrounds will be encouraged to apply.

Training Coordinator: 1.0 FTE (1 position)
The Training Coordinator will develop a training plan and ensure that benchmarks are met for each area of responsibility, including the professional development of FERC staff and provision of training the public mental health system. In addition, this position will also be responsible for identifying experts and outside training resources for family support services, securing needed training resources from the BHCS training department and responding to provider and community requests for trainings. The Training Coordinator will develop a plan to modify education curriculum to meet the needs of diverse family members and will work with family advocates and community partners to implement it. The Training Coordinator will also be responsible for training family volunteers and community partners on peer and social support, information and referral and cultural competency. Finally, the Training Coordinator will share responsibility with the Lead Family Advocate for developing information and referral materials, including binder and web-content, multi-media library collections, and other related activities.

Desired Qualifications: The Training Coordinator should have at least five years experience providing professional development services, preferably in a mental health organization. The Training Coordinator must be well versed in the family perspective, wellness and recovery principles, adult learning theories, and cultural and linguistic competence. The Training Coordinator must be able to design training modules for a variety of audiences, as well as lead professional development sessions. Family members, as well as individuals with experience collaborating across organizations will be encouraged to apply.

Family Advocates: 5.0 FTE (5 positions)
Two family advocates will be located in the North County and one will be located in each of the following

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locations: Tri-Valley, South County, and Central County. The Family Advocates will be responsible for providing services and supports to family members, including education and training sessions, peer and social support services, and information and referral. They will also be responsible for over-seeing services provided at their respective locations, establishing partnerships with community-based organizations and promoting the FERC within their region. In addition, they will provide education and social support services in community settings, including libraries, schools, community events and other locations as needed within their region. The family advocate will collaborate with other advocates, the training coordinator, warm line coordinator, family members, consumers and providers. The family advocate will be responsible for representing the FERC in public meetings, task forces, and relevant events, in addition to recruiting family leaders from their region. Family advocates will be trained in a variety of modules to deliver appropriate services to families. In collaboration with the program director, they will be responsible for meeting FERC benchmarks for their region and documenting progress.

**Qualifications:**

The family advocate must have at least three years experience working as an advocate or case manager within the mental health system and must possess familiarity with Alameda County, wellness and recovery principles and a family perspective. Family members will be strongly encouraged to apply. The family advocate should also be familiar with the region in which they are located and preferably reside there. Additional preferred qualifications include bilingual/bicultural background, group facilitation skills, case management experience, experience working independently and in a team, an understanding of family issues specific to different age groups, and experience building partnerships with other organizations. The FERC will prioritize the recruitment of a culturally and linguistically diverse team of family advocates, especially those who speak Spanish, Cantonese, or Farsi.

**Lead Family Advocate: 1.0 FTE (1 Position)**

One Lead Family Advocate will be housed in the North County administrative offices, but will provide leadership, coordination and additional support to the satellites located throughout the County. The Lead Family Advocate will work with the Program Director and Training Coordinator to develop a professional development plan, as well as to identify organizational needs for the FERC. The lead will be responsible for ensuring that the family advocates receive requested training, either by providing it themselves or securing outside resources through the training coordinator. The lead may also support the training coordinator in responding to outside requests for technical assistance around family issues. The lead family advocate will also provide peer and social support services, education, and information referral on an as needed basis, though their primary responsibility is to ensure that the family advocates have the support, training and materials they need to meet organizational outcomes. The lead family advocate will develop the resource libraries, assist with developing content for the web, and provide leadership and supervision to the warm line operator in developing information and referral resources.

**Qualifications:**

The lead family advocate must have at least five years experience working as an advocate or case manager within the mental health system and must possess familiarity with the mental health system, wellness and recovery principles and a family perspective. Degree in Social Work, Counseling or related field is desired. Family members will be strongly encouraged to apply. Additional preferred qualifications include: bilingual/bicultural background, group facilitation skills, case management experience, experience leading or supervising a team, an understanding of family issues specific to different age groups, and experience building partnerships with other organizations. The lead family advocate should possess experience delivering professional development, facilitating organizational development and the ability to manage multiple relationships and priorities. Cultural and linguistic competency training and/or bilingual/bicultural background is also highly desirable.

**Warm Line Operator: 1.0 FTE (1 position)**

The warm line operator is responsible for staffing and managing the warm-line. The purpose of the warm line is to provide information and referral to family members and other residents during the hours that families will most likely use this service. The warm line operator will be housed in the resource center at
the North County, but will provide information and referral county wide. The operator will work with the training coordinator and lead family advocate to develop binders, web-content and other resources that include up to date information on mental health services, primary care, benefits, housing, employment, education, crisis support and a range of other issues. The warm line operator will also work with family advocates in each of the regions to update and track region-specific resources. The warm line operator will collect data on warm line calls, update resources, and respond to requests for information. The warm line operator will be trained on community resources, family issues, systems of care in Alameda County and other areas identified by the training coordinator.

**Qualifications:** The warm line operator should have at least two years experience providing telephone support to family members, consumers, and/or community members. The operator should be familiar with family issues, Alameda County resources and systems of care, and the systems with which different age groups interact. The warm line operator should have experience developing resource materials, including web-based content and informational binders and using a variety of databases. The operator should have excellent attention to detail, an ability to think quickly, and experience providing a range of supports to individuals in need, including information, referral and support. Family members, as well as bilingual/bicultural (Spanish) applicants will be strongly encouraged to apply.

**Administrative Assistant: 1.0 FTE (1 position)**
The administrative assistant will provide administrative support to the FERC and will be housed in the administrative offices. The administrative assistant is responsible for answering phones (main line, not warm line), supporting the Program Director, scheduling meetings and trainings, and providing general coordination and communication support. The administrative assistant will also be responsible for developing web and print content to promote the FERC, in addition to providing support around data collection and report preparation.

**Qualifications:** The administrative assistant should have a least three years experience in a similar position. The administrative assistant must have excellent people and administrative skills, with excellent attention to detail, experience using databases, and the ability to multi-task. Desk top publishing and/or marketing skills are highly desired. Family members, those with knowledge of the mental health system and family issues, and bilingual/bicultural candidates will be strongly encouraged to apply.

**Professional Development:** The FERC training coordinator and program director will be responsible for developing a professional development plan in order to develop a team that is prepared to implement the vision of the FERC. This plan will incorporate staff identified needs, as well as the following areas:

1. Cultural and linguistic competency
2. Cultural models of mental illness, health and wellness
3. Wellness and recovery
4. Family perspective, rights, and engagement in the mental health system
5. Training in the NAMI and UACF family education modules
6. Mental Health Services Act mandates and requirements
7. Group facilitation
8. Case management, peer support and information and referral with family members
9. Family issues and needs related to children, transition age youth, adults and older adults.
10. Data collection and evaluation

The training coordinator will be responsible for facilitating training sessions, securing outside contractors to deliver trainings and workshops, and providing ongoing professional development to the team. Monthly staff meetings will incorporate professional growth activities.

**Individual Professional Development:** The training coordinator and program director will work with each staff person to develop individualized professional development plans, which identify staff competencies
II.E. REPORTING

The service provider will be expected to actively participate in BHCS activities including, but not limited to BHCS committees, agency committees, studies, resource development, planning groups and activities, public education and other mandated activities and functions required to manage this system of care and to pursue grants and other funds.

All contractors must comply with data management requirements using provided or approved systems, must participate in the BHCS Quality Improvement and Compliance Programs, and must adhere to all BHCS performance requirements.

Data Collection
The lead agency will be required to submit monthly progress reports outlining:

1. The number of staff hired;
2. The number by region of family education groups delivered and the number of caregivers attending;
3. The number by region of caregiver support groups delivered and the number of caregivers attending;
4. The number and type of outreach and engagement activities conducted by region;
5. The number of warm-line contacts made;
6. The number of agency trainings conducted and the number of staff who received these trainings;
7. The number of drop-in visits to the main center and each satellite broken down by the purpose of the visit;
8. The number of volunteers recruited and the number of volunteer hours delivered;
9. The number of AB 1424 consultations conducted;
10. A summary of advocacy activities;
11. The number of caregivers trained and the kind of training delivered;
12. The number of caregivers performing leadership functions within various County committees, task forces and commissions.

On a quarterly basis, the lead agency will report upon:

1. Expenditures and revenues;
2. Analysis of satisfaction survey data from staff training, center/satellite drop-ins, family support and family education activities;
3. Summary outlining deliverables completed versus benchmarks;
4. Revised schedule of deliverables for the next quarter.

Implementation and Startup
The FERC will collect data on an ongoing basis to verify achievement of a specific set of benchmarks delineated below. These initial benchmarks were developed with an understanding that adjustments will be required to reflect the FERC’s need to respond to community needs. The benchmarks below are designed to provide a starting point for an accountability system that is both a tool for project staff to monitor activities, while also serving as the basis of County and Advisory Committee oversight of the project. See Exhibit O to view the logic model depicting the FERC strategies, goals, and desired outcomes.

Year I Outreach and Engagement Benchmarks
During the first year, the FERC will:

- Develop collaborative relationships with the NAMI affiliates in each region;
Identify, recruit and train six family leaders to serve in leadership roles that represent the diverse ethnic, age and regional interests of family members in Alameda County;

Develop a marketing plan to promote the FERC throughout the County;

Each month, each satellite will:

- Initiate 10 monthly phone contacts to agencies, schools, faith-based agencies, cultural organizations, libraries, hospitals, clinics, and other community organizations;
- Conduct 3 monthly site visits to organizations contacted by phone with the purpose of establishing ongoing communication and to facilitate collaboration, co-location of support services, referral of families who are underserved or to otherwise promote FERC activities;
- Establish collaborative working relationships with two organizations visited as part of the outreach and engagement activities;
- Establish caregiver research and resource displays in at least one public venue (church, library, health clinic, hospital).

**Year I Services and Supports Benchmarks**

Each satellite will:

- Deliver family education series at one community-based agency, faith-based venue or other public venue.
- Deliver peer and social support groups at a minimum of two community-based agencies, faith-based venues or other public venues.
- Each satellite and the FERC collectively will increase the number of family/caregivers attending support/education activities by 10% each month during the first full year of operation.
- The FERC will increase the number of warm line contacts by 10% each month during its first full year of operation.
- Offer monthly drop-in services a minimum of 15 hours per week

**Year I Training Benchmarks**

The FERC will:

- Provide at least one training to family leaders on advocacy, leadership skills and promoting a family perspective within the mental health system;
- Develop a continuum of provider trainings initially focusing upon: Engaging family members in the treatment plan; Culturally competent family engagement; Confidentiality procedures; addressing AB 1424 requirements; Expanding support systems beyond family members, family issues and resources.
- Deliver a continuum of trainings for a minimum of 8 mental health providers including all MHSA providers;
- Meet with every BHCS-contracted agency operating in their region to identify future training needs.
- Develop or sub-contract to deliver a minimum of two other training sessions to BHCS agencies on topics identified from meetings with those agencies.
- Using a satisfaction survey developed during start-up, 75% of BHCS agency participants will indicate that they agree or strongly agree that the training will: 1) help them work more effectively with families; 2) influence their clinical practice; and 3) improve outcomes for their clients and other outcomes determined by training coordinator.

FERC collaborations will impact the following individual outcomes:

- Improve client/family/provider interactions in the mental health system.

FERC collaborations will impact the following system-level outcomes:

- Promoting a client/family driven mental health system;
- Developing a common language of wellness/recovery that would inform the family/provider relationship and our organizational culture (this is a critical first step in creating the kind of dialogue necessary for wellness/recovery system transformation);
- Increasing family collaborations with county and contract organizations that have taken on leadership roles in the provision of wellness recovery services;
- Having the role of families reflected in county and CBO business practices that incorporate wellness/recovery in language and policy;
- Building a leadership core that includes families and can collaboratively define wellness and recovery principles and how they might be implemented in the mental health system. This leadership core often takes the form of a task force that reports to the mental health director.

**Facility Needs**

**Main Center**
The FERC will operate from one central location with three satellite locations. The specific locations of these facilities will depend upon the selected lead agency as most potential applicants will have facilities in some regions and will develop new satellites in other regions.

The main facility will contain:
- A reception area for caregivers and others (250 sf)
- Six small private offices for the Program Director, Administrative Assistant, Training Coordinator, the Lead Family Advocate and two other Family Advocates (900 sf)
- A larger office area to house the warm line and its coordinator; (250 sf)
- A larger training room for delivering training to groups of up to 12-15 people and to provide a venue for support and/or education groups for caregivers; (500 sf)
- A resource library with 3-4 computer terminals available for caregiver use to view DVDs, explore the web, or access resources. (500 sf)
- A storage area to store supplies, printed materials, research, and promotional materials (150 sf)
- A small kitchen to store snacks and beverages for meetings, support and educational groups and trainings. (150 sf)
- Plus hall and passageways.

The Main Center will require between 2700 and 3500 sf. The budget assumes a rental rate of $1.75 and uses the highest estimate of square footage. The main center will effectively serve as the satellite for the North County.

**Satellite Centers**
In addition to the central FERC Site located in Oakland (north county), satellite centers will operate in each of the other three regions of the county: Tri-Valley, south county, and central county. While to a significant degree, these satellites will differ according to availability of facilities at the time that the project begins implementation, at minimum each site will have:

- An office that can house one caregiver service advocate where files, supplies, and promotional materials can be stored, where research and resource materials can be displayed for caregivers;
- Access to a meeting room for small and large groups for support groups, education groups, and provider training;
- Access to shared technology (copier, fax, scanner, and other media) or space within the private office for this equipment (the budget has funds for each satellite to be fully equipped);

Ideally the satellite center will be housed in an existing multi-service center, family center, community center, health clinic, hospital, cultural center or other public center that has already established itself as a
place where the community turns for services and/or supports. The physical environment will be welcoming and visually stimulating, with art and colors that create a warm environment.\textsuperscript{14}

II.F. **DEBARMENT/SUSPENSION POLICY:**

In order to prohibit the procurement of any goods or services ultimately funded by Federal awards from debarred, suspended or otherwise excluded parties, each bidder will be screened at the time of RFP/RFQ response to ensure bidder, its principal and their named subcontractors are not debarred, suspended or otherwise excluded by the United States Government in compliance with the requirements of 7 Code of Federal Regulations (CFR) 3016.35, 28 CFR 66.35, 29 CFR 97.35, 34 CFR 80.35, 45 CFR 92.35 and Executive Order 12549.

- The County will verify bidder, its principal and their named subcontractors are not on the Federal debarred, suspended or otherwise excluded list of vendors located at [www.epis.gov](http://www.epis.gov); and
- Bidders are to complete a Debarment and Suspension Certification form, Exhibit N attached, certifying bidder, its principal and their named subcontractors are not debarred, suspended or otherwise excluded by the United States Government.

III. **INSTRUCTIONS TO BIDDERS**

III.A. **COUNTY CONTACTS**

Julie Mills will manage the competitive process for this project on behalf of the County. All contact during the competitive process is to be through Julie Mills only.

The Behavioral Health Care Services website will be the official notification and posting place for this Request for Proposal, and any Addenda. Go to [http://www.acbhses.org/MHSA/MHSA_default.htm](http://www.acbhses.org/MHSA/MHSA_default.htm) to view current information.

III.B. **CALENDAR OF EVENTS**

<table>
<thead>
<tr>
<th>Event</th>
<th>Date/Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>RFP Responses Due</td>
<td>No later than 12:00 noon on Friday, May 23, 2008 to Attn: OESD-2 FERC</td>
</tr>
<tr>
<td></td>
<td>Julie Mills</td>
</tr>
<tr>
<td></td>
<td>2000 Embarcadero Cove, Suite 400</td>
</tr>
<tr>
<td></td>
<td>Oakland, CA 94606</td>
</tr>
<tr>
<td></td>
<td>(510) 639-1325</td>
</tr>
<tr>
<td>Questions regarding any specifications, terms</td>
<td>Submit in writing by 12:00 noon on April 29, 2008 to Attn: OESD-2 FERC</td>
</tr>
<tr>
<td>and conditions in this Request</td>
<td>Julie Mills</td>
</tr>
<tr>
<td></td>
<td>2000 Embarcadero Cove, Suite 400</td>
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<tr>
<td></td>
<td>Oakland, CA 94606</td>
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<tr>
<td></td>
<td>(510) 639-1325</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:Jmills@achbcs.org">Jmills@achbcs.org</a></td>
</tr>
<tr>
<td>Informational Meeting/Bidders Conference</td>
<td>10:30 AM on Friday, May 2, 2008 at Alameda County Behavioral Healthcare Services</td>
</tr>
<tr>
<td></td>
<td>2000 Embarcadero Cove, Ste 400</td>
</tr>
<tr>
<td></td>
<td>Oakland, CA 94606</td>
</tr>
<tr>
<td>RFP Addendum Issued</td>
<td>Monday, May 5, 2008</td>
</tr>
</tbody>
</table>

\textsuperscript{14} The main center and satellites will offer space to NAMI groups in each region, as schedules permit.
<table>
<thead>
<tr>
<th>Evaluation Period</th>
<th>Tuesday, May 27, 2008 – June 12, 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bidder Interviews</td>
<td>If necessary, Thursday, June 12, 2008, 9-12 noon</td>
</tr>
<tr>
<td>Notification of Award/Board Letter Issued</td>
<td>Friday, June 13, 2008</td>
</tr>
<tr>
<td>Bid Protest Due</td>
<td>Friday, June 27, 2008</td>
</tr>
<tr>
<td>Board Award Date</td>
<td>July 8, 2008</td>
</tr>
<tr>
<td>Contract Start Date</td>
<td>July 2008, depending on contract negotiations.</td>
</tr>
</tbody>
</table>

**Note:** Award and start dates are approximate.

It is the responsibility of each bidder to be familiar with all of the specifications, terms and conditions. By the submission of a Bid, Bidder certifies that if awarded a contract they will make no claim against the County based upon ignorance of conditions or misunderstanding of the specifications.

### III.C. INFORMATIONAL MEETING/BIDDERS CONFERENCE

One informational meeting/bidders conference will be held to provide an opportunity for bidders to ask specific questions about the project and request RFP clarification and provide the County with an opportunity to receive feedback regarding the project and RFP.

Written questions submitted prior to the informational meeting/bidders conference in accordance with the Calendar of Events, and verbal questions received at the networking/bidders conferences will be addressed whenever possible at the conference. All questions will be addressed and the list of attendees will be included in an RFP Addendum following the conferences in accordance with the Calendar of Events.

Potential bidders are not required to attend the information meeting/bidders conference. Attendance is recommended, however, in order to further facilitate subcontracting relationships and to provide information required to assist them in formulating their bid.

An informational meeting/bidders conference will be held:

10:30 A.M. on Friday, May 2, 2008 at
Alameda County Behavioral Healthcare Services
2000 Embarcadero Cove, Ste. 400
Oakland, CA 94606

### III.D. SUBMITTAL OF BIDS

1. All bids must be SEALED and must be received no later than 12:00 noon on May 23, 2008.

**NOTE:** LATE AND/OR UNSEALED BIDS CANNOT BE ACCEPTED. IF HAND DELIVERING BIDS PLEASE ALLOW TIME FOR PARKING IN AREA PUBLIC PARKING LOTS AND ENTRY INTO SECURE BUILDING.

Bids will be received only at the address shown below, and by the time indicated in the Calendar of Events. Any bid received after said time and/or date or at a place other than the stated address cannot be considered and will be returned to the bidder unopened.

All bids, whether delivered by an employee of Bidder, U.S. Postal Service, courier or package delivery service, must be received and time stamped at the stated address prior to the time designated. BHCS timestamp shall be considered the official timepiece for the purpose of establishing the actual receipt of bids.
2. Bids are to be addressed and delivered as follows:
   Attn: OESD-2 FERC
   Alameda County Behavioral Health Care Services
   Julie Mills
   2000 Embarcadero Cove, Suite 400
   Oakland, CA 94606

3. Bidders are to submit one (1) original and eight (8) copies of their proposal, all three-hole punched. Original proposal is to be clearly marked and in a 3-ring binder, not bound.

4. Bidder's name and return address must also appear on the mailing package.

5. No electronic, telegraphic, or facsimile bids will be considered.

6. Bidder agrees and acknowledges all RFP specifications, terms and conditions and indicates ability to perform by submission of its bid.

7. Submitted bids shall be valid for a minimum period of ten (10) months.

8. All costs required for the preparation and submission of a bid shall be borne by Bidder.

9. Only one bid response will be accepted from any one person, partnership, corporation, or other entity; however, several alternatives may be included in one response. For purposes of this requirement, “partnership” shall mean, and is limited to, a legal partnership formed under one or more of the provisions of the California or other state’s Corporations Code or an equivalent statute.

10. It is the responsibility of the bidders to clearly identify information in their bid responses that they consider to be confidential under the California Public Records Act. To the extent that the County agrees with that designation, such information will be held in confidence whenever possible. All other information will be considered public.

11. All other information regarding the bid responses will be held as confidential until such time as the County Selection Committee has completed their evaluation and, or if, an award has been made. Bidders will receive mailed award/non-award notification(s), which will include the name of the bidder to be awarded this project. In addition, award information will be posted on the County’s “Contracting Opportunities” website, mentioned above.

12. Each bid received, with the name of the bidder, shall be entered on a record, and each record with the successful bid indicated thereon shall, after the award of the order or contract, be open to public inspection.

III.E. RESPONSE FORMAT

In order for bids to be considered complete, Bidder must provide all information requested. See Exhibit M, Response/Content Submittal; Completeness Checklist.

Bid responses are to be straightforward, clear, concise and specific to the information requested. Bid responses must be signed in ink and include evidence that the person or persons signing the proposal is/are authorized to execute the proposal on behalf of the bidder.

Bidders shall provide all of the below noted Bid documentation, exhibits and attachments. Any material deviation from these requirements may be cause for rejection of the proposal, as determined in the County’s
sole discretion. All original pages from the bidder (not including forms or attachments) should be printed in 12-point TIMES NEW ROMAN font with 1 inch margins around each page. “OE/SD-2 – Family Education and Resource Center” should be at the left header of each page with the name of the bidder at the left footer and the document page number at the right footer of each page.

Please note that the following Section III.F. EVALUATION CRITERIA / SELECTION COMMITTEE, provides a precise description of the point system that will be used by reviewers to evaluate bids. You should reference this section as you write your proposal. The headings in the criteria exactly match the headings found below.

The content and sequence for each required Bid document/exhibit shall be as follows:

1. Title Page:
Show RFP number and title, your company name and address, name of the contact person (for all matters regarding the RFP response), telephone number and proposal date.

2. Table of Contents
Bid responses shall include a table of contents listing the individual sections of the proposal and their corresponding page numbers. Tabs should separate each of the individual sections.

3. Cover Letter
Bid responses shall include a cover letter describing Bidder and include all of the following:
a) The official name of Bidder;
b) Bidder’s organizational structure (i.e. corporation, partnership, limited liability company, etc.);
c) The jurisdiction in which Bidder is organized and the date of such organization;
d) The address of Bidder’s headquarters, any local office involved in the Bid Proposal; and the address/location where the actual production of goods and/or services will be performed;
e) Bidder’s Federal Tax Identification Number;
f) The name, address, telephone, fax numbers and e-mail address of the person(s) who will serve as the contact(s) to the County, with regards to the RFP response, with authorization to make representations on behalf of and to bind Bidder;
g) A representation that Bidder is in good standing in the State of California and has all necessary licenses, permits, certifications, approvals and authorizations necessary in order to perform all of its obligations in connection with this RFP; and
h) An acceptance of all conditions and requirements contained in this RFP.
i) The agency’s executive director or designated board member must sign this letter.

4. Letter of Transmittal
Bid responses shall include a description of Bidder’s approach in providing its goods and/or services to the County stating its understanding of the work to be done and a positive commitment to perform the work as specified. This section shall be no more than one (1) page.

5. Management Plan (maximum of 4 pages not including required attachments, i.e. Work Plan Time Line in question 5.c.

5.a. Organizational Structure of Bidder and its Relationship to the Proposed Project: including a description of how the project will relate to the bidder’s organization. Include as ATTACHMENT A, an organizational chart of the bidder and an organizational chart for the project that includes all project partners and how they will function in relation to each other. The organizational chart should present the total organizational structure and where this project would reside within that structure. Submit ATTACHMENT A at the end of this section.
5.b. Roles and Responsibilities of “MOU” Partners: Describe the relationship with all partners, the functions these partners will perform and how their involvement will be coordinated with project staff. Provide a second chart that depicts the roles, responsibilities and reporting relationships of key staff, service providers and partners. Provide Memoranda of Understanding (MOU) from any project partners and collaborators who will be providing substantial services, housing or supports to project clients as ATTACHMENT B at the end of this section. Use the summary form on Exhibit L as a coversheet for the MOUs.

5.c. Work Plan & Time Line: Provide a complete Work Plan Time Line in the format provided in Exhibit K that includes major benchmarks and key tasks needed to reach those benchmarks as ATTACHMENT C at the end of this section.

5.d. Agency Personnel Capacity: Describe how your project will be managed. It is particularly important that you identify both the individual responsible for overseeing this project (to whom the program director will report), as well as the program director and other key roles. In addition, for key roles in the project where you will need to recruit and hire new staff, indicate the qualities, experience and expertise you will seek for each role and the time line for recruiting, hiring and training these individuals. Please include resumes as ATTACHMENT D at the end of the section.

6. Executive Summary
A brief synopsis of the highlights of the Proposal and overall benefits of the Proposal to the County. This synopsis should not exceed two (2) pages in length and should be easily understood.

Program Activities/Services Descriptions
Please use the section headings below. Refer to the Rating Scale for guidance in preparing a complete response. All ATTACHMENTS should be placed at the location specified in the question, either at the end of the section or the end of the document.

7. Vision for Addressing the Needs of Families
In two pages, provide a description of your vision for a Family Education and Resource Center. What principles would inform its design? How would these principles be operationalized? What would such a Center look like and how would it address the needs of family members?

8. Prior Experience Implementing the Principles and Values of the Mental Health Services Act
For each sub-section provide BOTH a description of how your organization currently addresses each issue AND how this experience would inform your operation of a FERC. Please use no more than one page for each sub-section.

8.a. MHSA Transformation: What involvement has your organization had in MHSA planning and implementation. How have you implemented MHSA principles into your organization?
8.b. Wellness and Recovery: Describe how the proposed program will reflect the values of wellness and recovery. How has your organization incorporated the principles of wellness and recovery?
8.c. Family Involvement: How has your organization become more family and/or consumer driven? Describe the role of family members in your organization. How will you ensure that family involvement is effective? Describe how your organization trains your staff to work effectively with families.
8.d. Family Challenges: Describe the challenges facing your organization in addressing the needs of family members and how you resolve them.
8.e. Family Leadership Development: Describe how your organization employs families as staff and/or provides them with leadership opportunities.
8.f. Cultural, Linguistic & Gender Responsiveness: Describe how you will provide services that are sensitive to different cultures, genders, and sexual orientations/identities and how services will be linguistically appropriate and accessible. Describe how your organization will provide services in the threshold languages of Vietnamese, Spanish, Farsi, English, and Chinese. Please refer to Section IV.1. CULTURAL COMPETENCE GUIDELINES. Describe how your organization incorporates culturally competent strategies into its family engagement efforts.


For each sub-section provide BOTH a description of how your organization currently addresses each issue AND how this experience would inform your operation of a FERC. Please use no more than one page for each sub-section.

9.a. Sub-contracting: Describe your experience working with and sub-contracting with other agencies. Describe how you monitor sub-contracted work relationships.

9.b. Collaboration: Describe your experience coordinating collaborative projects with multiple partners. Describe how you ensure that collaborative projects are implemented in an integrated manner.

9.c. Operation of Multiple Sites: Describe your experience operating a program that operates in multiple sites. Describe your strategies to ensure quality, equitable services throughout the County with collaboration between sites without unnecessary duplication of services?

9.d. Program Accessibility: Describe the program’s proposed geographic location and access to public transportation. Describe how incoming referrals calls will be handled and how long it will take to schedule an intake appointment for new clients. Describe how the FERC Operator will provide physical/architectural access to services and the provisions for making reasonable accommodation when requested or when the Service Provider identifies such a need.

9.e. Safety & Security: Describe your strategies to ensure the safety and security of staff, participants, family members and service partners at your facilities.

10. Prior Experience with FERC Components

For each sub-section provide BOTH a description of how your organization currently addresses each issue AND how this experience would inform your operation of a FERC. If you have not directly managed or delivered any one component, please describe how you would imagine you would manage or implement that component. Please use no more than one page for each sub-section.

10.a. Family Support Services: Describe your experience providing family support services.

10.b. Warm Line: Describe your experience providing warm-line or 24-hour responses to consumer-family needs. Describe how warm line staff will make referrals or otherwise handle crisis calls. (Note: This is not a crisis line.)

10.c. Training: Describe your experience providing training to other organizations.

10.d. Family Education: Describe your experience providing education and support to families or caregivers of mental health consumers.

10.e. Outreach and Engagement: Describe your experience conducting outreach and engagement to historically underserved populations.

10.f. AB 1424: Describe your experience providing training and/or information related to AB 1424.

11. References (Exhibit D1 and D2)

Bidders must provide a list of current and former contracts that demonstrate their ability to perform the services solicited herein. Include contact information.
Bidders are to provide a list of up to five (5) current and up to five (5) former organizational clients on Exhibit D1 and D2, attached hereto. References must be satisfactory as deemed solely by the County. References should have similar scope, volume and requirements to those outlined in these specifications, terms and conditions. Reference information is to include:

- **Company/Agency name**
- **Contact person (name and title)**, contact person is to be someone directly involved with the services
- **Complete street address**
- **Telephone number**
- **Type of business**
- **Dates of service.**

The County may contact some or all of the references provided in order to determine Bidder’s performance record on work similar to that described in this request. The County reserves the right to contact references other than those provided in the Response and to use the information gained from them in the evaluation process.

12. Data and Fiscal Management and Controls

a) In one page, describe your plan for meeting the data reporting obligations described on pages 31 - 32. Include how you will capture, store, analyze and report the data required.

b) Describe your fiscal management experience and the fiscal controls that will be used for this project. One page is allowed. *The fiscal agent must have knowledge of acceptable accounting practices and the ability to maintain accountability for contract funds.* Please include the following as **ATTACHMENT E at the end of the entire document:**

- Last three audited financial statements (if none, then financial statement for most recently completed fiscal year); if there are any findings in audit, please provide a response to all findings with steps taken to address them. *Include only in the original proposal.*
- Current year budget and year-to-date financial statements. *Include in original and all copies submitted.*

13. Bid Form

The cost of the proposed programs should be detailed on the forms contained in Exhibit B: Bid Form: Budget Instructions and Worksheets and must be downloaded as Excel files at http://www.acbhcs.org/MHSA/DocCtr/docCtr.htm#RFP. These forms should be filled out and submitted in hard copy in Section L. One CD labeled with the bidder’s name, with an electronic copy of the Excel file of Exhibit B, should also be submitted as **ATTACHMENT F at the end of the entire document, in the original proposal only.** The budget must include by program: detailed hours of operation, full time equivalent (FTE) of staffing by program, operating costs, units of services, revenues by payor sources, and cost per unit.

Exhibit B: Bid Form, Budget Spreadsheets, must be completed for annualized, startup, and one time budgets. The annualized budget should be completed for 12 full months of operation, and it will be prorated during contract negotiation, if necessary. Please note that a separate budget should be included for proposed One-Time Costs to be incurred during the start-up period. The “Start-Up” period may not exceed the first ninety (90) days of operation, so the start up budget should be completed for the first ninety days. It is not anticipated that funding levels will be adjusted, but bidders can anticipate annual COLA increases. The COLA increase is generally based on SEIU negotiated COLA amounts and is subject to Board of Supervisors’ approval.
Pricing for the procurement of goods and services by the County shall include all taxes, freight and all other costs, or credits, associated with the procurement and delivery to the County of Bidder’s goods and services. Refer to Section IV.B. PRICING.

14. Evidence of Insurance

Certificates of insurance are required per one of the attached Exhibits C-1 or C-2 from a reputable insurer evidencing all coverages required for the term of any contract that may be awarded pursuant to this RFP. Contractor(s) awarded contracts under this bid must name the County as additional insured on the certificate of insurance as specified in either Exhibit C-1 or C-2.

15. Disclosure Statement

The proposal must contain a response in the form of at least one complete sentence to address each of the following:

15.a. A statement of whether the proponent agency is now or has ever been the subject of public or private audit or special investigation due to potential or alleged financial, management, or program improprieties or other irregularities.

15.b. A statement of whether the proposed administrative staff have ever been the subject of, or been employed by an agency that was the subject of, a public or private audit or special investigation due to potential or alleged financial, management, or program improprieties or other irregularities.

15.c. A statement of whether a member of the Board of Directors or the proposed program has been a member of the Board of Directors of an agency that has been the subject of a public or private audit or special investigation due to alleged improprieties or other irregularities.

15.d. A statement providing information regarding all contracts for public funds that have been cancelled, terminated, or not renewed within the last five years, including the public funding agency's name, address, and telephone number.

15.e. A statement providing information on all pending or threatened litigation involving the proponent agency and any of its partners, principals, directors, or employees.

These statements should describe the program audited, cancelled, or sued; who audited, cancelled, or sued the program; the date of the audit, cancellation, or suit; and the purpose and outcome of the audit or suit. A response of “none” will not be considered an adequate response to this section.

16. Other required Submittals/Exhibits not included above that are required in the bid response:

- Exhibit A, Acknowledgement, must be signed and returned.
- Exhibit E, SLEB Certification Application Package, completed, signed, required documentation attached (applicable to a small or emerging business, located within the boundaries of Alameda County, seeking certification).
- Exhibit F, Small and Local or Emerging and Local Business (SLEB) Subcontracting Information Sheet, must be completed and signed.
- Exhibit G, Request for Preference for Local Business and Small and Local or Emerging and Local Business, completed and signed (read Exhibit G for applicability). If applying for local preference, submit the following:
  - Copy of a verifiable business license, issued by the County of Alameda or a City within the County; and
III.F. EVALUATION CRITERIA/SELECTION COMMITTEE

All proposals will be evaluated by a County Selection Committee (CSC). The CSC may be composed of County staff and other parties who may have expertise or relevant experience to the services needed or with the targeted population. The CSC will select a contractor in accordance with the evaluation criteria set forth in this RFP. The evaluation of the proposals shall be within the sole judgment and discretion of the CSC. All contact during the evaluation phase shall be through Julie Mills only. Bidders shall neither contact nor lobby BHCS administration, other staff or evaluators during the evaluation process. Attempts by Bidder to contact and/or influence BHCS administration, other staff or members of the CSC may result in disqualification of Bidder.

The CSC will evaluate each proposal meeting the qualification 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, will 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.

Bidders are advised that in the evaluation of unit cost, it will be calculated based on the formulas provided in the Budget Worksheets. This formula is calculated based on cost and utilization information input by the bidders.

As a result of this RFP, the County intends to award a contract to the responsible bidder(s) whose response conforms to the RFP and whose bid 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(s) that proposes to the County 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 response.

The County reserves the right to request oral presentations on June 9, 2008, from the organizations with the highest ranked bids in the evaluation of the written proposal and to assign additional points on the basis of those presentations. The county reserves the right to select any one of the top scoring bidders within a ten (10) percent point range.

The section numbers and headings below correspond exactly with Section III.E. RESPONSE FORMAT which should be used to organize the bidders’ narrative and required attachments. These specifications should be considered as minimum requirements. Much of the material needed to present a comprehensive proposal can be placed into one of the sections listed.
Each of the following Evaluation Criteria below will be used in ranking and determining the quality of bidders’ proposals. Proposals will be evaluated according to each Evaluation Criteria. Each responsive proposal will receive a rating up to three-hundred and fifteen (315) points. The following provides the Specific Rating Criteria for proposed services.

### 7. VISION FOR ADDRESSING THE NEEDS OF FAMILIES RATING ELEMENT

Section 7 should provide the reader a clear and specific description of the vision the bidder has for a Family Education and Resource Center program model.

#### 7. Vision

- **Possible Points**
  - **Vision**: Does the bidder’s overall response to questions 6-12 reflect an organizational capacity to provide a program consistent with the FERC vision outlined in the RFP?
  - Score according to the following scale:
    - Doubtful = 0, Possible = 10, Likely = 20, Highly Likely = 40

**Total Points for Section 7: Vision** 40 Points

### 8. PRIOR EXPERIENCE IMPLEMENTING THE PRINCIPLES AND VALUES OF THE MHSA RATING ELEMENT

Section 8 should provide the reader with a clear idea of the bidder’s experience with MHSA, the values of wellness and recovery, work with families and cultural competency.

#### 8.a. MHSA Transformation

- **Possible Points**
  - Does the bidder’s description of its involvement in the MHSA planning and implementation process seem to support its organizational capacity to implement the FERC? Have MHSA values and principles been integrated into the organization?

- **Possible Points**
  - Wellness and Recovery: Does the bidder clearly describe how the principles of wellness and recovery have been incorporated into its organization?

- **Possible Points**
  - Family Involvement: Does the bidder’s organization train its staff to work effectively with families? Does the bidder’s response clearly indicate an organization that is family and consumer driven? Are the roles of family members clearly defined?

- **Possible Points**
  - Family Challenges: Are the strategies the bidder has described effective for resolving challenges in addressing the needs of family members?

- **Possible Points**
  - Family Leadership Development: Does the applicant describe how its organization employs family members as staff? Does the bidder state what leadership development opportunities its organization provides for staff and non-staff family members?
### 8.f. Cultural, Linguistic & Gender Responsiveness:

| i. Is the bidder’s experience providing services that are sensitive to all cultures substantial and convincing? | 5 |
| ii. Has the bidder provided linguistically appropriate and accessible services? Does the bidder state how its organization has provided services when it doesn’t have a staff person who speaks the language of a family member or consumer? | 5 |
| iii. Is the bidder’s experience providing services that are sensitive to all genders and sexual orientations/identities substantial and convincing? | 5 |
| iv. Does the applicant describe how it incorporates culturally competent strategies to engage family members? | 5 |

**Total Section 8: MHSA Principles** 85 Points

### 9. PRIOR MANAGEMENT EXPERIENCE, INCLUDING MANAGEMENT OF A LARGE COLLABORATIVE PROJECT RATING ELEMENT

*Section 9 should clearly and specifically describe the bidder’s prior management experience regarding sub-contracting, collaborations, program accessibility, safety and operating multiple sites.*

| 9.a. Sub-contracting: | Does the bidder’s description present them as being capable to work with and sub-contract with other agencies? How well has the bidder monitored sub-contracted work relationships in the past? Are the strategies described effective for monitoring sub-contracts? | 20 |
| 9.b. Collaboration: | Does the bidder have experience coordinating collaborative projects with multiple partners? Does the bidder clearly explain how it has ensured that collaborative projects were implemented in an integrated manner? Are the strategies described effective for managing collaborative projects? | 20 |
| 9.c. Operation of Multiple Sites: | Does the bidder have experience operating a program that operates in multiple sites? Are the strategies described ones that will be effective in providing cross collaboration between sites without duplicating services while providing quality, equitable services throughout the County? | 20 |
| 9.d. Program Accessibility: | Is the bidder’s proposed geographic location accessible to public transportation? Rate the bidder’s handling of incoming referral calls? Does the intake policy described ensure simple access to services? Do the physical/architectural access provisions appear reasonable and adequate? | 15 |
| 9.e. Safety & Security: | Do the bidder’s described strategies to ensure the safety and security of staff, participants, family members and service partners at its facilities appear to be effective in ensuring everyone’s safety? | 10 |

**Total Section 9: Management Experience** 85 Points

### 10. PRIOR EXPERIENCE WITH FERC COMPONENTS RATING ELEMENT

*Section 10 should clearly and specifically describe the bidder’s experience working with family members including providing support, education, training and outreach.*

| 10.a. Family Support Services: | Does the bidder describe its experience providing family support services? Are the services described provided with family-driven strategies? | 15 |
| 10.b. Warm Line: | Does the bidder describe its experience providing warm-line and/or 24-hour responses to family/consumer needs? Does the bidder explain a protocol for how warm line staff will make referrals or otherwise handle crisis calls? Are the strategies described effective for running a warm-line and making referrals for crisis calls? | 10 |
| 10.c. Training: Does the bidder’s description of its experience providing training to other organizations indicate adequate training capability? | 10 |
| 10.d. Family Education: Does the bidder describe its experience providing education and support to families or caregivers of mental health consumers? Does the bidder describe family-driven strategies in the education and support programs they are providing to families? | 15 |
| 10.e. Outreach and Engagement: Does the bidder describe its experience conducting outreach and engagement to historically underserved populations? Does the experience described include strategies that are effective at engaging historically underserved populations? | 15 |
| 10.f. AB 1424: Does the bidder describe its experience providing training and/or information related to AB 1424? Does the bidder express a clear understanding of AB 1424? | 10 |

**Total Section 10: FERC Components**

75 Points

| 11. References (Exhibit D1 and D 2) Significant issues may result in disqualification. | No Points |
| 12.a. Data Management: Does the bidder have the capability to adequately manage the data? | 10 |
| 12.b. Fiscal Management/Controls: Significant issues may result in disqualification. | No Points |

**Total Section 12: Data and Fiscal Management/Controls**

10 Points

| 13. PROJECT BUDGET RATING ELEMENT (Use Exhibit B) The Project Budget should clearly identify how funds will be used and how costs for expenditures were determined. Further it should be clear to the reviewer how the budget is sufficient, realistic and appropriate to the project. | POSSIBLE POINTS |
| Is the budget appropriate for the level, quality and quantity of work being proposed? | 10 |
| Is the personnel budget consistent with the program design? | 10 |

**Total Section 13: Budget Bid Form**

20 Points

**TOTAL SCORE**

315 TOTAL

Alameda County Vendor? Additional 5%

Small, Local and Emerging Business (SLEB) certified? Additional 5%

If the bidder has not contracted with Alameda County BHCS within the last five years:

- Is a list of contracts attached that demonstrate their ability to perform the services they are proposing?
  [ ] YES  [ ] NO

- Is a description included of their fiscal management experience and the fiscal controls that will be used for this program?
  [ ] YES  [ ] NO
III.G. CONTRACT EVALUATION AND ASSESSMENT

During the initial sixty (60) day period of any contract, which may be awarded to Contractor, the contract monitor and/or other persons designated by the County will meet with the Contractor to evaluate 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 with the proposed service were evidenced which make it unlikely (even with possible modifications) that such proposed service has met the County requirements. If, as a result of such determination the County concludes that it is not satisfied with Contractor, Contractor’s performance under any awarded contract and/or Contractor’s goods and/or services as contracted for therein, the Contractor will be notified of contract termination effective forty-five (45) days following notice. Contractor shall be responsible for the removal of any installed equipment/system and shall return County facilities to their pre-installation state at no charge to the County. The County will have the right to invite the next highest ranked bidder to enter into a contract. The County also reserves the right to re-bid this project if it is determined to be in its best interest to do so.

III.H. NOTICE OF AWARD

1. At the conclusion of the RFP response evaluation process (“Evaluation Process”); all bidders will be notified in writing by certified mail, return receipt requested, of the contract award recommendation, if any, of Behavioral Health Care Services. The document providing this notification is the Notice of Award.

The Notice of Award will provide the following information:

- The name of the bidder being recommended for contract award;
- The names of all other bidders; and,
- In summary form [Bid numbers, evaluation points for each bidder]

2. Debriefings for unsuccessful bidders will be scheduled and provided upon written request and will be restricted to discussion of the unsuccessful bidder’s application with the Buyer.

   a. Under no circumstances will any discussion be conducted with regard to contract negotiations with the successful bidder, etc.
   b. Debriefing may include review of successful bidder’s proposal.

III.I. BID PROTEST/APPEALS PROCESS

Behavioral Health Care Services prides itself on the establishment of fair and competitive contracting procedures and the commitment made to follow those procedures. The following is provided in the event that bidders wish to protest the bid process or appeal the recommendation to award a contract for this project.

Any bid protest must be submitted in writing to:

Attn: Director of Behavioral Health Care Services
Alameda County Behavioral Health Care Services
2000 Embarcadero Cove, #400, Oakland, CA 94606.
1. The bid protest must be submitted before 5:00 p.m. of the tenth (10th) business day following the date of the Notice of Award.
   
   a. The bid protest must contain a complete statement of the basis for the protest.
   b. The protest must include the name, address and telephone number of the person representing the protesting party.
   c. The party filing the protest must concurrently transmit a copy of the protest and any attached documentation to all other parties with a direct financial interest which may be adversely affected by the outcome of the protest. At a minimum, those parties listed in the Notices of Award/Non-Award shall be notified of such protest and the specific grounds therefore.
   d. The procedure and time limits are mandatory and are the Bidder’s sole and exclusive remedy in the event of Bid Protest.

2. Bidder’s failure to comply with these procedures shall constitute a waiver of any right to further pursue the Bid Protest, including filing a Government Code claim or legal proceedings.

3. Upon receipt of written protest/appeal the Director, BHCS will review and provide an opportunity to settle the protest/appeal by mutual agreement, schedule a meeting to discuss or issue a written response to advise an appeal/protest decision within five (5) working days of review date.
   
   a. Responses will be issues and/or discussed at least five (5) days prior to Board hearing date.
   b. Responses will inform the bidder whether or not the recommendation to the Board is going to change.

4. The decision of the Director, BHCS may be appealed to the Director, Health Care Services Agency (HCSA). All appeals to the Director, (HCSA) shall be in writing and submitted within five (5) calendar days of notification of decision by the Director, BHCS.

5. The decision of the Director, HCSA is the final step of the appeal process.

IV. TERMS AND CONDITIONS

IV.A. TERM/TERMINATION/RENEWAL

1. The term of the contract, which may be awarded pursuant to this RFP, will be one year.

2. The term of the contract will begin on the first day of a month and run through the end of the fiscal year, and shall continue year to year provided funding is allocated by the County Board of Supervisors, until terminated in accordance with the agreement.

3. Termination for Cause: If County determines that Contractor has failed, or will fail, through any cause, to fulfill in a timely and proper manner its obligations under the Agreement, or if County determines that Contractor has violated or will violate any of the covenants, agreements, provisions, or stipulations of the Agreement, County shall thereupon have the right to terminate the Agreement by giving written notice to Contractor of such termination and specifying the effective date of such termination.

4. Without prejudice to the foregoing, Contractor agrees that if prior to or subsequent to the termination or expiration of the Agreement upon any final or interim audit by County, Contractor shall have failed in any way to comply with any requirements of this Agreement, then Contractor shall pay to County forthwith whatever sums are so disclosed to be due to County (or shall, at County’s election, permit County to deduct such sums from whatever amounts remain not disbursed by County to
5. Termination without Cause: County shall have the right to terminate this Agreement without cause at any time upon giving at least 30 days written notice prior to the effective date of such termination.

6. Termination by Mutual Agreement: County and Contractor may otherwise agree in writing to terminate this Agreement in a manner consistent with mutually agreed upon specific terms and conditions.

7. By mutual agreement any contract which may be awarded pursuant to this RFP, may be extended for additional terms at agreed prices with all other terms and conditions remaining the same.

IV.B. PRICING

1. Prices quoted shall be firm for the start up period and remaining months of the first fiscal year and for the second fiscal year of any contract that may be awarded pursuant to this RFP.

2. In subsequent years, all pricing as quoted will remain firm for the term of any contract that may be awarded as a result of this RFP with the exception of annual Board approved COLA.

3. The price(s) quoted shall be the maximum cost the County will pay for this contract based on negotiated rate methodology stated in the contract.

4. All prices quoted shall be in United States dollars and "whole cent," no cent fractions shall be used. There are no exceptions.

5. County will allocate the sum as indicated in Exhibit B, Bid Form to vendor awarded RFP, to be expended as described in the contract agreement. Unless an amendment to the agreement otherwise provides, that amount shall in no event be exceeded by Contractor, and County shall under no circumstances be required to pay in excess of that amount.

6. Price quotes shall include any and all payment incentives available to the County.

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

IV.C. AWARD

1. Proposals will be evaluated by a committee and will be ranked in accordance with the RFP section entitled “Evaluation Criteria/Selection Committee.”

2. The committee will recommend award to the bidder who, in its opinion, has submitted the proposal that best serves the overall interests of the County and attains the highest overall point score. Award may not necessarily be made to the bidder with the lowest price.

3. The County reserves the right to reject any or all responses that materially differ from any terms contained herein or from any Exhibits attached hereto and to waive informalities and minor irregularities in responses received.

4. The County reserves the right to award to a single or multiple contractors.
5. The County has the right to decline to award this contract or any part thereof for any reason.

6. Board approval to award a contract is required.

7. Contractor shall sign an acceptance of award letter prior to Board approval. A Master Contract must be signed following Board approval.

8. Final Master Contract terms and conditions will be negotiated with the selected bidder. Attached Exhibit J contains minimal Master Contract boilerplate language only.

9. The RFP specifications, terms, conditions and Exhibits, RFP 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.

IV.D. METHOD OF ORDERING

1. A Master Contract and accompanying Exhibit A – Program and Performance Requirements and Exhibit B - Budget and Terms and Conditions of Payment will be issued upon Board approval.

2. P.O.s and payments for products and/or services will be issued only in the name of Contractor.

IV.E. INVOICING

1. Contractor shall invoice the requesting department monthly in arrears, unless otherwise advised, upon satisfactory performance of services.

2. Payment will be made within thirty (30) days following receipt of invoice and upon complete satisfactory performance of services.

3. County shall notify Contractor of any adjustments required to invoice.

4. Invoices shall contain County PO number, invoice number, remit to address and itemized services description and price as quoted and shall be accompanied by acceptable proof of delivery; i.e., utilization reports from BHCS

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 Master Contract.

8. Payment shall be made based on monthly invoices supported by utilization reports from BHCS information system pursuant to the terms and conditions set forth in Exhibit B of the Master Contract. Sums not so paid shall be retained by County. In addition, Contractor will be required to submit an annual cost report at the end of each fiscal year to be used as final settlement between the County and Contractor.

9. Contractor shall submit all claims for reimbursement under the Master Contract within sixty (60) days after the ending date of the agreement. All claims submitted after sixty (60) days following the ending date of the agreement will not be subject to reimbursement by the County. Any "obligations incurred" included in claims for reimbursements and paid by the County which remain unpaid by the
Contractor after sixty (60) days following the ending date of the agreement will be disallowed under audit by the County.

10. Contractor agrees to comply with all requirements which are now, or may hereafter be, imposed by the funding government with respect to the receipt and disbursement of the funds referred to in Exhibit B, as well as such requirements as may be imposed by County. Without limiting the generality of the foregoing, Contractor agrees that it will not use funds received pursuant to this Agreement, either directly or indirectly, as a contribution in order to obtain any Federal funds under any Federal programs without prior written approval of County.

11. Contractor shall submit their final claim for reimbursement under the contract within sixty (60) days after the ending date of the contract.

IV.F. COUNTY PROVISIONS

1. Preference for Local Products and Vendors: A five percent (5%) preference shall be granted to Alameda County products or Alameda County vendors on all sealed bids on contracts except with respect to those contracts which state law requires be granted to the lowest responsible bidder. An Alameda County vendor is a firm or dealer with fixed offices and having a street address within the County for at least six (6) months prior to the issue date of this RFP/Q; and which holds a valid business license issued by the County or a city within the County. Alameda County products are those which are grown, mined, fabricated, manufactured, processed or produced within the County. Locality must be maintained for the term of the contract. Evidence of locality shall be provided immediately upon request and at any time during the term of any contract that may be awarded to Contractor pursuant to this RFP/Q.

2. Small and Emerging Locally Owned Business: A small business for purposes of this RFP is defined by the United States Small Business Administration as having no more than $6,500,000 in average annual gross receipts over the last three (3) years. An emerging business, as defined by the County is one having annual gross receipts of less than one-half (1/2) of the above amount over the same period of time. In order to participate herein, the small or emerging business must also satisfy the locality requirements and be certified by the County as a Small or Emerging, local business. A certification application package (consisting of Instructions, Application and Affidavit) has been attached hereto as Exhibit E and must be completed and returned by a qualifying contractor.

A locally owned business, for purposes of satisfying the locality requirements of this provision, is a firm or dealer with fixed offices and having a street address within the County for at least six (6) months prior to the issue date of this RFP/Q; and which holds a valid business license issued by the County or a city within the County.

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 the following provisions shall apply to this RFP:

a. If Bidder is certified by the County as either a small and local or an emerging and local business, the County will provide a five percent (5%) bid preference, in addition to that set forth in paragraph 1., above, for a total bid preference of ten percent (10%). However, a bid preference cannot override a State law, which requires the granting of an award to the lowest responsible bidder.
b. Bidders not meeting the small or emerging local business requirements set forth above do not qualify for a bid preference and must subcontract with one or more County certified small and/or emerging local businesses for at least twenty percent (20%) of Bidder’s total bid amount in order to be considered for the contract award. Bidder, in its bid response, must submit written documentation evidencing a firm contractual commitment to meeting this minimum local participation requirement. Participation of a small and/or emerging local business must be maintained for the term of any contract resulting from this RFP. Evidence of participation shall be provided immediately upon request at any time during the term of such contract. Contractor shall provide quarterly participation reports during the term of said contract and a final account statement at the end of the contract to the County Business Outreach Officer.

The County reserves the right to waive these small/emerging local business participation requirements in this RFP, if the additional estimated cost to the County, which may result from inclusion of these requirements, exceeds five percent (5%) of the total estimated contract amount or Ten Thousand Dollars ($10,000), whichever is less.

The following entities are exempt from the Small and Emerging Local Business (SLEB) requirements as described above and are not required to subcontract with a SLEB. If you apply and are certified as a SLEB, you will receive a 5% SLEB bid preference:

• non-profit community based organizations (CBO);
• non-profit churches or non-profit religious organizations (NPO);
• public schools; and universities; and
• government agencies

Non-profits must provide proof of their tax exempt status. These are defined as organizations that are certified by the U.S. Internal Revenue Service as 501(c)3.

If additional information is needed regarding this requirement, please contact Linda Moore, Business Outreach Officer, Alameda County General Services Agency, at (510) 208-9717 or via E-mail at linda.moore@acgov.org.

3. **First Source Program:** The First Source Program has been developed to create a public/private partnership that links CalWORKs job seekers, unemployed and under employed County residents to sustainable employment through the County’s relationships/connections with business, including contracts that have been awarded through the competitive process, and economic development activity in the County. Welfare reform policies and the new Workforce Investment Act requires that the County do a better job of connecting historically disconnected potential workers to employers. The First Source program will allow the County to create and sustain these connections.

Vendors awarded contracts for goods and services in excess of One Hundred Thousand Dollars ($100,000) as a result of any subsequently issued RFQ are to allow Alameda County ten (10) working days to refer potential candidates to vendor to be considered by Vendor to fill any new or vacant positions that are necessary to fulfill their contractual obligations to the County, that Vendor has available during the life of the contract before advertising to the general public. Potential candidates referred by County to Vendor will be pre-screened, qualified applicants based on vendor specifications. Vendor agrees to use its best efforts to fill its employment vacancies with candidates referred by County, but the final decision of whether or not to offer employment, and the terms and conditions thereof, rest solely within the discretion of the Vendor.

Bidders are required to complete, sign and submit in their bid response, the First Source Agreement that has been attached hereto as Exhibit H, whereby they agree to notify the First Source Program of
4. **Environmentally Friendly Packaging:** Alameda County is an environmentally responsible employer and seeks all practical opportunities for waste reduction and recycling. The County, therefore, encourages its contractors to reduce waste volume and toxicity by using environmentally friendly packaging material whenever possible. Options may include backhauling product packaging to the supplier for reuse or recycling, shipping in bulk or reduced packaging, using soy bean-based inks for packaging printing, using recycled product packaging or using recyclable or reusable packaging material. The County encourages all bidders and contractors for goods and services to adhere to these principles where practicable.

### IV.G. CONTRACT MANAGER/SUPPORT STAFF

1. Contractor shall provide a dedicated competent contract manager who shall be responsible for the County contract. The contract manager shall be the primary contact for all issues regarding Bidder’s response to this RFP and any contract which may arise pursuant to this RFP.

2. Contractor shall also provide adequate, competent support staff that shall be able to serve the County during normal working hours, Monday through Friday. Such representative(s) shall be knowledgeable about the contract and services offered and able to identify and resolve quickly any issues regarding the program.

3. Contract manager shall be familiar with Federal, State and County standards and work with the Behavioral Health Care Services staff to ensure that established standards are adhered to.

4. Contract manager shall keep the County Program Liaison informed of requests from departments as required.

### IV.H. GENERAL REQUIREMENTS

1. Bidder shall be regularly and continuously engaged in the business of providing the similar services required by this RFP for at least five (5) years in the last ten (10) years.

2. Bidder(s) shall be responsible for meeting requirements applicable to licensed practitioners of the healing arts as set forth by local and state laws and regulations, including health and safety codes, Welfare and Institutions Code, and those that should be known within the community standard in providing mental health services.

3. Bidder shall possess all permits, licenses and professional credentials necessary to supply product and perform services as specified under this RFP.
4. Proper conduct is expected of Contractor’s personnel when on County premises. This includes adhering to no-smoking ordinances, the drug-free work place policy, not using alcoholic beverages and treating employees courteously.

5. County has the right to request removal of any Contractor employee or subcontractor who does not properly conduct himself/herself/itself or perform quality work.

6. Contractor personnel shall be easily identifiable as non-County employees (i.e. work uniforms, badges, etc.).

IV.I. CULTURAL COMPETENCE GUIDELINES

1. Contractor must be able to demonstrate cultural competence in the following areas:

   a. Experience or track record of involvement with the target population - The applicant organization should have a documented history of positive programmatic involvement with the population/community to be served; e.g., a history of involvement with the target population or community.

   b. Training and staffing - The staff of the organization should have training in gender/age/cultural competence. Attention should be placed on staffing the initiative with people who are familiar with, or who are themselves members of, the population/community.

   c. Language - If an organization is providing services to a multi-linguistic population, there should be multi-linguistic resources, including use of skilled bilingual and/or bicultural individuals, as specified in the statement of work. Whenever a significant percentage of the target population/community is more comfortable with a language other than English, services need to be provided in the individual’s requested language.

   d. Materials - It should be demonstrated that materials and products such as audio-visual materials, public service announcements, training guides and print materials to be used in the project are gender/age/culturally appropriate or will be made consistent with the population/community to be served.

   e. Evaluation - Program evaluation methods and instrument(s) should be appropriate to the population/community being served. There should be rationale for the use of the evaluation instrument(s) that are chosen, and the rationale should include a discussion of the validity of the instrument(s) in terms of the gender/age/culture of the group(s) targeted. The evaluators should be sensitized to the culture and familiar with the gender/age/culture whenever possible and practical.

   f. Community representation - The population/community targeted to receive services should be a planned participant in all phases of program design. There should be an established mechanism to provide members reflective of the target population with opportunities to influence and shape the project’s proposed activities and interventions. A community advisory council or board of directors with decision-making authority should be established to affect the course and direction of the proposed project. Members of the targeted group should be represented on the council/board.

   g. Implementation - There should be objective evidence/indicators in the application that the applicant organization understands the cultural aspects of the community that will contribute to the program’s success and which will avoid pitfalls.
2. Proposals should demonstrate cultural competence throughout the project plan.

IV.J. ONLINE CONTRACT COMPLIANCE SYSTEM

As part of the Alameda County General Services Agency's commitment to assist contractors to conveniently comply with legal and contractual requirements, the County has established an online Contract Compliance System. The system was designed to help reduce contractors' administrative costs and to provide various work-flow automation features that improve the project reporting process.

Effective July 1, 2007, the Alameda County Contract Compliance System will be implemented to monitor contract compliance for County contracts through the use of a new interactive website, Elation Systems. The prime contractor and all participating subcontractors awarded contracts as of July 1, 2007, as a result of this bid process for this project, are required to use the secure web-based system to submit SLEB Program information including, but not limited to, monthly progress payment reports and other information related to SLEB participation.

The Alameda County Contract Compliance System has been designed to provide online functionality that streamlines the process, reduces paperwork and assists contractors and subcontractors in complying with the County’s SLEB Program and its reporting requirements. Utilizing the Alameda County Contract Compliance System will reduce the amount of time currently required to submit hard copy documentation regarding contract compliance information and is provided for use by County contractors and subcontractors at no cost.

Procedural differences between the previous conventional reporting and the new web-based system include:

- Monthly progress payment status reports will be submitted via the web-based system.
- Paper copies will no longer be required.
- Contractor will be required to enter data for payments made and subcontractors will be required to enter data for payments received into the web-based system.

Alameda County Contract Compliance System training and ongoing support are provided at no charge to contractors and participating sub-contractors awarded a contract as a result of this bid process for this project. Contractors having contracts with the County which have a start date on or after July 1, 2007 should schedule a representative from their office/company, along with each of their subcontractors, to attend training. Training sessions are approximately one hour and will be held periodically in a number of locations throughout Alameda County.

Upon award of contract, please view the training schedule [http://www.elationsys.com/elationsys/support_1.htm](http://www.elationsys.com/elationsys/support_1.htm) or call Elation Systems at (510) 764-1870. A special access code will be provided to contractors and subcontractors participating in any contract awarded as a result of this bid process to allow use of the System free of charge. It is the Contractor’s responsibility to ensure that they and their subcontractors are registered and trained as required to utilize the Alameda County Contract Compliance System.

Please contact Susan Wewetzer, Contract Compliance Officer at (510) 208-9617 if you have any other questions regarding utilization of the Alameda County Contract Compliance System.

IV.K. COMPLIANCE INFORMATION AND RECORDS

As needed and upon request, for the purposes of determining compliance with the SLEB Program, the Contractor shall provide the County with access to all records and documents that relate to SLEB participation and/or certification. Proprietary information will be safeguarded. All subcontractor submittals must be through the prime contractor.
RFP ATTACHMENTS

EXHIBITS A – Q
EXHIBIT A
COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

ACKNOWLEDGEMENT

The County of Alameda is soliciting bids from qualified vendors to furnish its requirements per the specifications, terms and conditions contained in the above referenced RFP/Q number. This Bid Acknowledgement must be completed, signed by a responsible officer or employee, dated and submitted with the bid response. Obligations assumed by such signature must be fulfilled.

1. Preparation of bids: (a) All prices and notations must be printed in ink or typewritten. No erasures permitted. Errors may be crossed out and corrections printed in ink or typewritten adjacent and must be initialed in ink by person signing bid. (b) Quote price as specified in RFP. No alterations or changes or any kind shall be permitted to Exhibit B, Bid Form. Responses that do not comply shall be subject to rejection in total.

2. Failure to bid: If you are not submitting a bid but want to remain on the mailing list and receive future bids, complete, sign and return this Bid Acknowledgement and state the reason you are not bidding.

3. Taxes and freight charges: (a) Unless otherwise required and specified in the RFP, the prices quoted herein do not include Sales, Use or other taxes. (b) No charge for delivery, drayage, express, parcel post packing, cartage, insurance, license fees, permits, costs of bonds, or for any other purpose, except taxes legally payable by County, will be paid by the County unless expressly included and itemized in the bid. (c) Amount paid for transportation of property to the County of Alameda is exempt from Federal Transportation Tax. An exemption certificate is not required where the shipping papers show the consignee as Alameda County, as such papers may be accepted by the carrier as proof of the exempt character of the shipment. (d) Articles sold to the County of Alameda are exempt from certain Federal excise taxes. The County will furnish an exemption certificate.

4. Award: (a) Unless otherwise specified by the bidder or the RFP gives notice of an all-or-none award, the County may accept any item or group of items of any bid. (b) Bids are subject to acceptance at any time within thirty (30) days of opening, unless otherwise specified in the RFP. (c) A valid, written purchase order mailed, or otherwise furnished, to the successful bidder within the time for acceptance specified results in a binding contract without further action by either party. The contract shall be interpreted, construed and given effect in all respects according to the laws of the State of California.

5. Patent indemnity: Vendors who do business with the County shall hold the County of Alameda, its officers, agents and employees, harmless from liability of an nature or kind, including cost and expenses, for infringement of use of any patent, copyright or other proprietary right, secret process, patented or unpatented invention, article or appliance furnished or used in connection with the contract or purchase order.

6. Samples: Samples of items, when required, shall be furnished free of expense to the County and if not destroyed by test may upon request (made when the sample is furnished), be returned at the bidder’s expense.

7. Rights and remedies of County for default: (a) In the event any item furnished by vendor in the performance of the contract or purchase order should fail to conform to the specifications therefore or to the sample submitted by vendor with its bid, the County may reject the same, and it shall thereupon become the duty of vendor to reclaim and remove the same forthwith, without expense to the County, and immediately to replace all such rejected items with others conforming to such specifications or samples; provided that should vendor fail, neglect or refuse so to do the County shall thereupon have the right purchase in the open market, in lieu thereof, a corresponding quantity of any such items and to deduct from any moneys due or that may there after come due to vendor the difference between the prices named in the contract or purchase order and the actual cost thereof to the County. In the event that vendor fails to make prompt delivery as specified for any item, the same conditions as to the rights of the County to purchase in the open market and to reimbursement set forth above shall apply, except when delivery is delayed by fire, strike, freight embargo, or Act of God or the government. (b) Cost of inspection or deliveries or offers for delivery, which do not meet specifications, will be borne by the vendor. (c) The rights and remedies of the County provided above shall not be exclusive and are in addition to any other rights and remedies provided by law or under the contract.

8. Discounts: (a) Terms of less than ten (10) days for cash discount will considered as net. (b) In connection with any discount offered, time will be computed from date of complete, satisfactory delivery of the supplies, equipment or services specified in the RFP, or from date correct invoices are received by the County at the billing address specified, if the latter date is later than the date of delivery. Payment is deemed to be made, for the purpose of earning the discount, on the date of mailing the County warrant check.

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. No guarantee or warranty: The County of Alameda makes no guarantee or warranty as to the condition, completeness or safety of any material or equipment that may be traded in on this order.

THE undersigned acknowledges receipt of above referenced RFP and/or Addenda and offers and agrees to furnish the articles and/or services specified on behalf of the vendor indicated below, in accordance with the specifications, terms and conditions of this RFP and Bid Acknowledgement.

Firm: ________________________________
Address: ________________________________
State/Zip: ________________________________

What advertising source(s) made you aware of this RFP?

By: ________________________________
Date: __________________ Phone: __________________

Printed Name Signed Above: __________________

Title: __________________

7/15/05
EXHIBIT B  
COUNTY OF ALAMEDA  
for  
OE/SD-2: Family Education and Resource Center  

BID FORM  

The cost in Exhibit B of this RFP shall form the Exhibit B for any resulting contract. It will include all taxes and all other charges and is the cost the County will pay for start-up costs and per unit of service for the approximately one year and nine month term of any contract that is a result of this bid. Cost shall be submitted on Exhibit B as is. No alterations or changes of any kind are permitted. Bid responses that do not comply will be subject to rejection in total.

MHSA RFP Budget Instructions

Please complete the following budget documents:

- **MHSA RFP Annualized Budget**: This form lists all costs, revenues, estimated units of service, and costs per unit (calculated automatically based on the costs and units entered) for each service modality. Detailed instructions for completing this form are attached. The MHSA Cost is the amount of funding available from the Mental Health Services Act for this program and must match the annualized amount listed in the RFP.

- **MHSA RFP Start-Up Budget**: List salaries and expenses needed to start up the program (including staff recruitment, moving expenses, office furniture, phones, computers, etc.) along with anticipated operating costs and revenues for the implementation period prior to direct services being provided (not to exceed 90 days). The Start-Up Budget form is similar to the Annualized Budget, so please use those detailed instructions for completing the budget information.

- **MHSA RFP Billable Staff Hours % Calculation**: This form is required only for the “Outpatient” component of the program (i.e., use the information from the “Outpatient” budget column, not the “Outreach” column). List only those classifications providing direct services to clients and the FTE (Full Time Equivalent – percentage of time based on a 40 hour work week).

- **MHSA RFP Expenses Detail**: This form is used to provide additional description for certain line items listed on your Detail Budget; this form only needs to be completed for “Miscellaneous” and “Professional & Specialized Services” line items.
MHSA RFP Annualized Budget
Detailed Instructions

- List “Provider Name” and “Program Name” in the spaces provided.

- Complete a separate column for the “Outreach” and “Outpatient” components of the program to indicate the annual costs applicable to each type of service.

- In the Salaries & Wages section, complete the following:
  - List all positions relevant to the programs reflected in the budget; staff may be grouped by classification.
  - Direct Services - For each position, indicate if staff provide direct services to clients (i.e., billable services such as providing counseling, case management, medication support, etc).
  - Annualized Salary - List the annualized salary for each position. This salary should reflect the annualized cost of the position based on a 40-hour workweek.
  - Provide the Full Time Equivalent (FTE) applicable to each position of each program. Enter the amount of time each position will be working in each program using a 40-hour week as base. (Examples: (a) If a person works 20 hours a week in a program, this would be 50% FTE. (b) If a person works a total of 37.5 hours per week, this is .94FTE).
  - List the budgeted amount for each classification in the applicable column (FTE x Annualized Salary).
  - Enter Employee Benefits on the line so designated.

- In the Operating Expenses section, complete the following:
  - List all expenses for the program applicable to Alameda County clients. Use the line items designated on the form. Space has been provided for any additional expenditure accounts you may need to add, but please try to use the standard categories as much as possible.
  - We require descriptions/explanations for “Miscellaneous” and “Professional & Specialized Services” line items on your Annualized Budget; please complete the form “MHSA RFP Expenses Detail” describing expenses for these line items (and any others that may need further explanation).

- On the “Admin” line, you may show indirect costs not to exceed 5% of your total program cost.

- In the “Provider Revenue” section, list all revenue that you expect to receive from any source other than Alameda County Behavioral Health Care Services that is applicable to this program including patient fees, insurance, grants, Medicare, etc. In the “County Revenue” section, list any revenue that would be received directly by the County including Medi-Cal, Medi-Cal Administrative Activities (MAA), etc. In the budget narrative, explain the assumptions used to calculate revenue amounts, i.e., percentage of Medi-Cal eligibles, number of services provided.

- Input units to be purchased by Alameda County BHCS for each program. For Outreach services, enter all staff-service hours (to be provided annually). For Outpatient services, use direct-staff hours and enter total hours of Case Management, Mental Health Services, Medication Support and Crisis Intervention. The form then automatically calculates the weighted cost per unit for each outpatient mode.
EXHIBIT C-1
COUNTY OF ALAMEDA
MINIMUM INSURANCE REQUIREMENTS
For Non Profit Organizations

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:

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<tr>
<th>TYPES OF INSURANCE COVERAGES</th>
<th>MINIMUM LIMITS</th>
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</thead>
<tbody>
<tr>
<td>A \nCommercial General Liability</td>
<td>$1,000,000 per occurrence (CSL)</td>
</tr>
<tr>
<td>Premises Liability; Products and Completed Operations; Contractual Liability; Personal Injury and Advertising Liability; Abuse, Molestation, Sexual Actions, and Assault and Battery</td>
<td>Bodily Injury and Property Damage</td>
</tr>
<tr>
<td>B \nCommercial or Business Automobile Liability</td>
<td>$1,000,000 per occurrence (CSL)</td>
</tr>
<tr>
<td>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</td>
<td>Any Auto</td>
</tr>
<tr>
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<td>Bodily Injury and Property Damage</td>
</tr>
<tr>
<td>C \nWorkers’ Compensation (WC) and Employers Liability (EL)</td>
<td>WC: Statutory Limits</td>
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<tr>
<td>Required for all contractors with employees</td>
<td>EL: $100,000 per accident for bodily injury or disease</td>
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<tr>
<td>D \nProfessional Liability/Errors and Omissions</td>
<td>$1,000,000 per occurrence</td>
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<td>Includes endorsements of contractual liability</td>
<td>$2,000,000 project aggregate</td>
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<td>E \nEmployee Dishonesty and Crime</td>
<td>Value of Cash Advance</td>
</tr>
<tr>
<td>F \nEndorsements and Conditions:</td>
<td></td>
</tr>
</tbody>
</table>

**ADDITIONAL INSURED:** General Liability, Automobile Liability, Professional Liability and Directors and Officers Liability Insurance Policies 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 and volunteers. Employee Dishonesty and Crime Insurance Policy shall be endorsed to name as Loss Payee (as interest may arise): County of Alameda, its Board of Supervisors, the individual members thereof, and all County officers, agents, employees and volunteers.

**DURATION OF COVERAGE:** All required insurance shall be maintained during the entire term of the Agreement with the following exception: 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 termination 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 shall be primary insurance to any insurance available to the Indemnified Parties and Additional Insured(s). 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 an 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 furnish separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to all of the requirements stated herein.

**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.
- Joint insurance program with the association, partnership or other joint business venture included as a “Named Insured.

**CANCELLATION OF INSURANCE:** All required insurance shall be endorsed 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 to:
Alameda County, Public Health, Virginia Harris, 1000 Broadway, Suite 500, Oakland, CA 94607
With a copy to Risk Management Unit (1106 Madison Street, Room 233, Oakland, CA 94607)
EXHIBIT C-2
COUNTY OF ALAMEDA
MINIMUM INSURANCE REQUIREMENTS
For Private For-Profit Organizations

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:

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<td>Required for all contractors with employees</td>
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<td>Includes endorsements of contractual liability and defense and indemnification of the County</td>
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E Endorsements and Conditions:

9. ADDITIONAL INSURED: All insurance required above with the exception of Professional Liability, Personal 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 and representatives.

10. DURATION OF COVERAGE: All required insurance shall be maintained during the entire term of the Agreement with the following exception: 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 termination 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.

11. REDUCTION OR LIMIT OF OBLIGATION: All insurance policies shall be primary insurance to any insurance available to the Indemnified Parties and Additional Insured(s). 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.

12. INSURER FINANCIAL RATING: Insurance shall be maintained through an insurer with a minimum A.M. Best Rating of A- or better, 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. Any deductible or self-insured retention amount or other similar obligation under the policies shall be the sole responsibility of the Contractor.

13. SUBCONTRACTORS: Contractor shall include all subcontractors as an insured (covered party) under its policies or shall furnish separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to all of the requirements stated herein.

14. 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.
   - Joint insurance program with the association, partnership or other joint business venture included as a “Named Insured.

15. CANCELLATION OF INSURANCE: All required insurance shall be endorsed to provide thirty (30) days advance written notice to the County of cancellation.

16. 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 require certificate(s) and endorsements must be sent to:
   - Department/Agency issuing the contract
   - With a copy to Risk Management Unit (1106 Madison Street, Room 233, Oakland, CA 94607)
**EXHIBIT D-1**  
**COUNTY OF ALAMEDA**  
for  
**OE/SD-2: Family Education and Resource Center**

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EXHIBIT E
COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

SMALL, LOCAL AND EMERGING BUSINESS PROGRAM
CERTIFICATION INSTRUCTIONS

1. Complete the application.

**Small Business:** Federal Small Business Administration (SBA) gross receipts limit by
North American Industry Classification System (NAICS) or Standard Industry
Classification (SIC) Codes.

**Emerging Business:** One half of the SBA gross receipt limit by NAICS OR SIC codes and
in business less than 5 years.

The following items must be attached to your Application:

- Copies of Signed Federal Tax Returns showing Gross Business Receipts for the
  last 3 years
- Copies of Business Licenses
- Copy of Current Identification (i.e. Driver’s License, Identification Card)
- Copy of Deed, Rental or Lease Agreement showing Business Address
- Copies of Last 3 completed Contracts and Proposals including name of Contact
  Person
- Personal Net Worth Statement (if the business has never filed taxes)
- Notarized Affidavit

If you own less than 51% interest in your business, please indicate other owner(s) name(s), title(s)
and percentage of ownership. List all current business and professional licenses. If you have been
in business for less than three years, please provide your actual gross receipts received for the period
that you have been in business. If you have not been in business for a complete tax year, please
provide actual gross receipts to date.
The Affidavit must be complete, notarized and attached to the Application. If any item is not
applicable, please put “N/A” in the designated area. If additional space is needed, please attach
additional sheet(s).

2. Please mail Application and Supporting Documents to:

   Alameda County General Services Agency
   Business Outreach Compliance Office/SLEB
   1401 Lakeside Drive, 10th Floor
   Oakland, CA 94612
   Attention: Linda Moore, Business Outreach Officer

If you have questions regarding your certification, please contact:

   Linda Moore
   (510) 208-9717 or Linda.moore@acgov.org

Thank you for your interest in doing business with Alameda County.
EXHIBIT E
COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

SMALL, LOCAL AND EMERGING BUSINESS PROGRAM
CERTIFICATION APPLICATION

Section A: Business Information

* Asterisk (*) indicates Required Information.

*Business Type:  □ Sole Proprietorship  □ Partnership  □ Corporation

*Business Name:  SLEB Vendor ID Number: ____________________

DBA (Circle One): Yes  or  No  *Federal Tax Identification Number: ____________________

*Business Address:  *How long at this address: ____________________

*Business Telephone Number:  Business Fax Number: ____________________

*Business Start Date:  *# of Employees: ____________________

Business Description:

Gross Business Receipts for Last Three Years (If first year in business, please list gross receipts received to date):

$ ___________________  20____ $ ___________________  20____ $ ___________________  19____

Section B: Contact Information

*Name:  *Title:__________________________

Address:  *Email Address: ____________________________

Phone:  Fax number: ____________________________

*Composition of Ownership – This is a Required Section

Public Entity (government, church, school, non-profit, publicly traded)  □ Yes  □ No

If “Yes,” skip Gender and Ethnicity below.

The collection of ethnicity and gender data is for statistical and demographic purposes only.

Please check the one most applicable category in each column:

Ethnicity
□ African American or Black (greater than 50%)  □ Female (greater than 50%)
□ American Indian or Alaskan Native (greater than 50%)  □ Male (greater than 50%)
□ Asian (greater than 50%)  □ Female (greater than 50%)
□ Caucasian or White (greater than 50%)  □ Male (greater than 50%)
□ Filipino (greater than 50%)  □ Hispanic or Latino (greater than 50%)
□ Native Hawaiian or other Pacific Islander (greater than 50%)  □ Multi-ethnic minority ownership (greater than 50%)
□ Multi-ethnic ownership (50% Minority-50% Non-Minority)  □ Multi-ethnic ownership (50% Minority-50% Non-Minority)

Section C: SIC and NAICS Codes Information

<table>
<thead>
<tr>
<th>SIC Code(s)</th>
<th>NAICS Code(s)</th>
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Section D: Business and License Information

Please List All Current Business and Professional Licenses:

License Type:  Date Issued/Expires:  Jurisdiction/Issuing Authority:

__________________________  ____________________________  ____________________________

__________________________  ____________________________  ____________________________

__________________________  ____________________________  ____________________________
CERTIFICATION RENEWAL APPLICATION

SLEB Vendor ID Number: _______________ Date of Initial Certification: ____________

*Business Name:  
*Federal Tax Identification Number: _____ - ______________

*Business Address:  
*How long at this address: ______________

*Business Telephone Number:  
Business Fax Number:

*Main Contact Name:  
*Email Address:

Phone:

*Gross Business Receipts for Last Three Years:

$______________________ 20____ $______________________ 20____ $______________________ 20____

Please Attach Verification of Business Income (Copies of signed Federal Tax Return)

Section C: SIC and NAICS Codes Information

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<tr>
<th>SIC Code(s)</th>
<th>NAICS Code(s)</th>
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</table>

RENEWAL AFFIDAVIT

I declare, under penalty or perjury all of the foregoing statements are true and correct.

________________________________________           ______________________________
(Signature)        (Title)

Please mail Application and Supporting Documents to:

GSA Purchasing  
Attention: Linda Moore  
1401 Lakeside Drive, 10th Floor  
Oakland, CA 94612

12/17/04
EXHIBIT E  
COUNTY OF ALAMEDA  
General Services Agency  
for  
OE/SD-2: Family Education and Resource Center  

AFFIDAVIT  
The undersigned swears, under penalty of perjury, that the foregoing statements are true and correct and include all material information necessary to identify and explain the operations of  

(Name of Firm)  
as well as the ownership thereof.  
The undersigned also states that he/she is properly authorized by  

(Name of Firm)  
to execute the affidavit. Further, the undersigned agrees to provide the County Of Alameda, current, complete and accurate information regarding: actual work performed on the project, any payment(s) made or received, any proposed changes to the activities of the above-referenced firm that affect the firm’s eligibility under this program, and to permit the audit and examination of books, records, and files of the named firm. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating appropriate legal action. The undersigned agrees that information provided may be shared with other governmental agencies.

Printed Name ___________________________ Signature ___________________________

NOTARY Title ___________________________ Date ___________________________

The foregoing affidavit was subscribed and sworn to before me on this ______ day of ________________________, 20____ by  

SEAL

Notary Public  
Commission Expires

Mail completed Application and Affidavit to:  

County of Alameda  
1401 Lakeside Drive, 10th Floor  
Oakland, CA 94612  
Attn: Linda Moore
EXHIBIT F
COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

SMALL LOCAL EMERGING BUSINESS (SLEB)
SUBCONTRACTING INFORMATION SHEET

In order to meet the small local emerging business (SLEB) requirements of this RFP, all bidders must complete this form as required below.

Bidders not meeting the definition of a SLEB (per this RFP County Provisions) are required to subcontract with a SLEB for at least twenty percent (20%) of the total estimated bid amount in order to be considered for contract award. This form must be submitted for each business that bidders will work with, evidencing a firm contractual commitment to meeting the SLEB participation goal. (Copy this form as needed.)

Bidders are encouraged to subcontract with a SLEB that can participate directly with this contract. One of the benefits of subcontracting will be economic, but this subcontracting will also assist the SLEB to grow and build the capacity to eventually bid as a prime on their own.

Once a contract has been awarded, bidders will not be able to substitute the subcontractor without prior written approval from the General Services Agency, Business Outreach Officer.

The General Services Agency, Business Outreach Officer will monitor the contract for compliance with the SLEB requirements.

<table>
<thead>
<tr>
<th>BIDDER:</th>
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<tr>
<td>□ is a SLEB.</td>
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</table>

□ is not a SLEB and will subcontract ________% with the SLEB named below for the following service(s):

<table>
<thead>
<tr>
<th>SLEB</th>
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<tbody>
<tr>
<td>Business Name:</td>
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<tr>
<td>Street Address:</td>
<td></td>
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<tr>
<td>City, State, Zip:</td>
<td></td>
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<tr>
<td>Phone:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Tax ID Number:</td>
<td></td>
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<tr>
<td>Principal Name:</td>
<td></td>
</tr>
</tbody>
</table>

SLEB Principal Signature: _____________________________ (Date)

Bidder Signature: _____________________________ (Date)
REQUEST FOR PREFERENCE
for
LOCAL BUSINESS
and
SMALL AND LOCAL OR EMERGING AND LOCAL BUSINESS

IF YOU WOULD LIKE TO REQUEST THE LOCAL BUSINESS, SMALL AND LOCAL BUSINESS, OR EMERGING AND LOCAL BUSINESS PREFERENCE, COMPLETE THIS FORM AND RETURN IT WITH YOUR BID. IN ADDITION, IF APPLYING FOR LOCAL PREFERENCE, SUBMIT THE FOLLOWING:

- Copy of a verifiable business license, issued by the County of Alameda or a City within the County;
- Proof of six (6) month business residency, identifying the name of the vendor and the local address: utility bills, deed of trust or lease agreement.

A five-percent (5%) preference will be granted to Alameda County products or vendors on all sealed bids on contracts except with respect to those contracts which State law requires be granted to the lowest responsible bidder. An Alameda County vendor is a firm or dealer with fixed offices and having a street address within the County for at least six (6) months prior to the date upon which a request for sealed bids or proposals is issued; and which holds a valid business license issued by the County or a city with the County. Alameda County products are those which are grown, mined, fabricated, manufactured, processed or produced within the County.

In addition, a five percent (5%) preference, for a total bid preference of ten percent (10%), shall be granted (except as noted above) if the bidder is certified by the County as either a small and local or an emerging and local business. Check the appropriate (2 maximum) boxes and provide the requested information below.

☐ Request for 5% local preference
☐ Request for 5% small and local preference  OR  ☐ Request for 5% emerging and local preference

Company Name: __________________________________________

Street Address: __________________________________________

Telephone Number: ________________________________________

Business License Number: __________________________________

The Undersigned declares that the foregoing information is true and correct:

Print/Type Name: _________________________________________

Title: ____________________________________________________

Signature: _______________________________________________

Date: ____________________________________________________
EXHIBIT H
COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

ALAMEDA COUNTY VENDOR FIRST SOURCE AGREEMENT
VENDOR INFORMATION

ALCOLINK Vendor Number (if known): 00000       SLEB Vendor Number:

Full Legal Name:

DBA

Type of Entity:   □ Individual   □ Sole Proprietor   □ Partnership
                 □ Corporation □ Tax-Exempted   □ Government or Trust

Check the boxes that apply:
 □ Goods Only   □ Goods & Services   □ Rents/Leases   □ Legal Services
 □ Rents/Leases paid to you as the agent   □ Medical Services   □ Non-Medical Services –

Describe   □ Other   __________

Federal Tax ID Number (required): _____
P.O. Box/Street Address:    __________

Vendor Contact’s Name:    __________
Vendor Contact’s Telephone: _______    Fax: _______
Vendor Contact’s E-mail address: _______

Please check all that apply:
LOC   □ Local Vendor (holds business license within Alameda County)
SML  □ Small Business (as defined by Small Business Administration)
I   □ American Indian or Alaskan Native (>50%)
A   □ Asian (>50%)
B   □ Black or African American (>50%)
F   □ Filipino (>50%)
H   □ Hispanic or Latino (>50%)
N   □ Native Hawaiian or other Pacific Islander (>50%)
W   □ White (>50%)

Number of Entry Level Positions available through the life of the contract: __________
Number of other positions available through the life of the contract: __________

This information to be completed by County:
Contract #: __________________
Contract Amount: __________________
Contract Term: __________________
EXHIBIT H
COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

ALAMEDA COUNTY VENDOR FIRST SOURCE AGREEMENT
VENDOR INFORMATION

Vendor agrees to provide Alameda County (through East Bay Works and Social Services Agency), ten (10) working days to refer to Vendor, potential candidates to be considered by Vendor to fill any new or vacant positions that are necessary to fulfill their contractual obligations to the County, that Vendor has available during the life of the contract before advertising to the general public. Vendor will also provide the County with specific job requirements for new or vacant positions. Vendor agrees to use its best efforts to fill its employment vacancies with candidates referred by County, but final decision of whether or not to offer employment, and the terms and conditions thereof, to the candidate(s) rest solely within the discretion of the Vendor.

Alameda County (through East Bay Works and Social Services Agency) agrees to only refer prescreened qualified applicants, based on vendor specifications, to vendor for interviews for prospective employment by Vendor (see Incentives for Vendor Participation under Vendor/First Source Program located on the Small Local Emerging Business (SLEB) Website, http://www.co.alameda.ca.us/gsa/sleb/vendor.shtml

____________________________________  ____________________
(Vendor Signature) (Date)

____________________________________  ____________________
(Company Name) (Date)

____________________________________  ____________________
(Alameda County Representatives Signature) (Date)
EXHIBIT I

COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

Exceptions, Clarifications, Amendments

List below requests for clarifications, exceptions and amendments, if any, to the RFP and its exhibits, including Exhibit J, and submit with your bid response.

The County is under no obligation to accept any exceptions and such exceptions may be a basis for bid disqualification.

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Reference To:</th>
<th>Description</th>
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<td>Paragraph No.</td>
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Contractor:
EXHIBIT J

COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

Contract Reference No._____________

MASTER CONTRACT

THIS CONTRACT, made and entered into on this ___ day of __________, 20___ by and between the COUNTY OF ALAMEDA, a body corporate and politic of the State of California, hereinafter referred to as "County," and «Contractor_Name», a ________________, doing business at «Street_Address», «CityStateZip», hereinafter referred to as "Contractor".

WITNESSETH:

WHEREAS, County is desirous of contracting with Contractor for the provision of certain services, a description of which is presented in Exhibit A(s), attached hereto; and

WHEREAS, Contractor is receiving funds pursuant to the funding source indicated in Exhibit B(s); and

WHEREAS, Contractor is willing to provide proof of insurance as specified in Exhibit C; and

WHEREAS, Contractor willingly agrees to participate in audits required by the County as defined in Exhibit D(s); and

WHEREAS, Contractor is willing and able to perform duties and render services which are determined by the Board of Supervisors to be necessary or appropriate for the welfare of residents of County; and

WHEREAS, County desires that such duties and services be provided by Contractor, and Contractor agrees to perform such duties and render such services, as more particularly set forth below:

NOW, THEREFORE, IT IS HEREBY MUTUALLY AGREED as follows:
1. **Term of Agreement.** The Term of this Agreement begins on the ___1st___ day of ___ , 20___ and shall continue year to year as specified more particularly in Exhibit B(s) provided funding is allocated by the County Board of Supervisors, until terminated in accordance with this Agreement.

Contractor understands and agrees that there is no representation, implication, or understanding that the services provided by Contractor under this Agreement will be purchased by County from Contractor under a new Agreement following expiration or termination of this Agreement. Contractor waives all rights or claims to notice or hearing respecting any failure by County to continue to purchase all or any such service from Contractor following the expiration or termination of this Agreement.

2. **Program Description and Performance Requirements-- Exhibit A(s).** This Agreement shall be accompanied by, marked Exhibit A(s), and by this reference made a part hereof, a description of the duties and services to be performed for County by Contractor, and Contractor agrees to comply with all provisions, to perform all work, and to provide all such duties and services set forth in Exhibit A(s) in a professional and diligent manner.

3. **Terms and Conditions of Payment -- Exhibit B(s).** County has allocated the sum as indicated in Exhibit B(s), to be expended as described in this Agreement. Unless an amendment to this Agreement otherwise provides, that amount shall in no event be exceeded by Contractor, and County shall under no circumstances be required to pay in excess of that amount. Payment shall be made pursuant to the terms and conditions set forth in Exhibit B(s), attached hereto and by this reference made a part hereof. Sums not so paid shall be retained by County.

   Unless it is otherwise provided in Exhibit B(s) to this Agreement, Contractor shall submit all claims for reimbursement under the Agreement within ninety (90) days after the ending date of the Agreement. All claims submitted after ninety (90) days following the ending date of the Agreement will not be subject to reimbursement by the County. Any "obligations incurred" included in claims for reimbursements and paid by the County which remain unpaid by the Contractor after ninety (90) days following the ending date of the agreement will be disallowed under audit by the County.

   Contractor agrees to comply with all requirements which are now, or may hereafter be, imposed by the funding government with respect to the receipt and disbursement of the funds referred to in Exhibit B(s), as well as such requirements as may be imposed by County. Without limiting the generality of the foregoing, Contractor agrees that it will not use funds received pursuant to this Agreement, either directly or indirectly, as a contribution in order to obtain any Federal funds under any Federal programs without prior written approval of County.
4. **Insurance -- Exhibit C.** Contractor shall maintain in force, at all times during the term of this Agreement, those insurance and bonding documentation described in Exhibit C attached hereto and made a part of this Agreement, and shall comply with all other requirements set forth in that Exhibit. Contractor shall provide Worker's Compensation insurance at Contractor's own cost and expense, and neither Contractor nor its carrier shall be entitled to recover from the County any costs, settlements, or expenses of Worker's Compensation claims arising out of this Agreement.

5. **Additional Fiscal Provisions.** Contractor shall not claim reimbursement from County for (or apply sums received from County with respect to) that portion of its obligations which has been paid by another source of revenue. Sums received as a result of applications for funds from public or private organizations shall be considered such revenue insofar as such sums are or can be applied to the work to be performed by Contractor pursuant to this Agreement.

Unrestricted or undesignated private charitable donations and contributions shall not be considered revenue applicable to this Agreement; Contractor has total freedom in planning for the usage of such resources in expanding and enriching programs, or in providing for such other operating contingencies as it may desire. Nothing herein shall be deemed to prohibit Contractor from contracting with more than one entity to perform additional work similar to or the same as that herein contracted for.

6. **Records.**

   (1) Contractor shall maintain on a current basis complete financial records including, but not necessarily limited to, books of original entry, source documents in support of accounting transactions, a general ledger, personnel and payroll records, cancelled checks, and related documents in accordance with generally accepted accounting principles and any specific requirements of the applicable funding source.

   (2) Contractor shall maintain on a current basis complete records pertaining to the provision of services and eligibility, including, but not limited to, medical records, client files, participant records, patient logs or other service related documentation in accordance with instructions provided by County.

   (3) Contractor shall maintain on a current basis complete records pertaining to Contractor’s organizational structure and activities, including, but not limited to, bylaws, articles of incorporation, documentation of tax exempt status, Board of Directors roster, minutes of meetings of the Board of Directors and committees, administrative program policies and procedures and any other documents required by County or the State or federal government or the applicable funding source.

   Contractor will cooperate with County in the preparation of, and will furnish any and all information required for, reports to be prepared by County and/or Contractor as may be required by the rules, regulations, or requirements of County or any other
governmental entity or applicable funding source. County shall specify in detail the cooperation required.

Records shall be retained by Contractor, and shall be made available for auditing and inspection, for no less than five (5) years following the provision of any services pursuant to this Agreement, or for a longer period as required by the applicable funding source. If Contractor enters into any County-approved agreement with any related organization to provide services such agreement shall contain a clause to the effect that the related records of that organization shall be retained, and shall be made available for auditing and inspection, for no less than five (5) years following its provision of services pursuant to the subcontract, or for a longer period as required by the applicable funding source.

County reserves the right to issue further instructions regarding the extent of records required to be kept, the format to be used, and record retention and access requirements as is necessary to perform audits and to otherwise comply with requirements set forth by applicable funding sources.

7. **Audits.** Contractor's records, as defined in this Agreement, shall be accessible to County for audit and inspection to assure proper accounting of funds, and to certify the nature of, and evaluate Contractor's performance of its obligations as set forth in this Agreement. County shall be entitled to access onto Contractor's premises to observe operations, inspect records or otherwise evaluate performance at all reasonable times and without advance notice. County shall conduct inspections and manage information in a manner consistent with applicable laws relating to confidentiality of records and in a manner that will minimize disruption of Contractor's work.

Separate and apart from the audit and inspection provisions set forth immediately above, Contractor's records will be subject to audits as required by Federal and/or State agencies and/or other funding sources. These audits include those performed pursuant to applicable OMB Circulars, as described more fully in Exhibit D of this Agreement, or audits otherwise authorized by Federal or State law.

8. **Indemnification.** Contractor agrees to indemnify, to defend at its sole expense, to save and hold harmless County, its officers, agents, and employees from any and all liability in addition to any and all losses, claims, actions, lawsuits, damages, judgments of any kind whatsoever arising out of the negligent acts, omissions or intentional misconduct of Contractor or Contractor's employees, agents, subcontractors or volunteers in performance of services rendered pursuant to this Agreement.

County agrees to indemnify, to defend at its sole expense, to save and hold harmless Contractor, its officers, agents, and employees from any and all liability in addition to any and all losses, claims, actions, lawsuits, damages, judgments of any kind whatsoever
arising out of the negligent acts, omissions or intentional misconduct of County or County employees, agents, subcontractors or volunteers in performance of services rendered pursuant to this Agreement.

9. **Subcontracting.** None of the work to be performed by Contractor shall be subcontracted without the prior written consent of County. Contractor shall be as fully responsible to County for the acts and omissions of any subcontractors, and of persons either directly or indirectly employed by them, as Contractor is for the acts and omissions of persons directly employed by Contractor. Contractor shall not transfer any interest in this Agreement (whether by assignment or novation) without prior written approval of County. However, Contractor may assign its rights to receive compensation from the County for performance of the Agreement to financial institutions for the purpose of securing financial resources, provided that written consent from the supervising department shall have first been obtained. No party shall, on the basis of this Agreement, in any way contract on behalf of, or in the name of, the other party to the Agreement, and any attempted violation of the provisions of this sentence shall confer no rights, and shall be void.

10. **Independent Contractor Status.** Neither the Contractor nor any of its employees shall by virtue of this Agreement be an employee of County for any purpose whatsoever, nor shall it or they be entitled to any of the rights, privileges, or benefits of County employees. Contractor shall be deemed at all times an independent contractor and shall be wholly responsible for the manner in which it performs the services required of it by the terms of this Agreement. Contractor assumes exclusively the responsibility for the acts of its employees as they relate to the services to be provided during the course and scope of their employment.

11. **Confidentiality.** Contractor agrees to maintain the confidentiality of any information which may be obtained with this work. Contractor shall comply with whatever special requirements in this regard as are described or referred to in Exhibit A(s) to this Agreement. Confidential information is defined as all information disclosed to Contractor which relates to County's past, present and future activities, as well as activities under this Agreement. Contractor will hold all such information in trust and confidence. Upon cancellation or expiration of this Agreement, Contractor will return to County all written or descriptive matter which contains any such confidential information. County shall respect the confidentiality of information furnished by Contractor to County as specified in Exhibit A(s) or as otherwise provided by law.

12. **Termination Provisions.** Termination for Cause -- If County determines that Contractor has failed, or will fail, through any cause, to fulfill in a timely and proper manner its obligations under the Agreement, or if County determines that Contractor has violated or will violate any of the covenants, agreements, provisions, or stipulations of the Agreement, County shall thereupon have the right to terminate the Agreement by giving
written notice to Contractor of such termination and specifying the effective date of such termination.

Without prejudice to the foregoing, Contractor agrees that if prior to or subsequent to the termination or expiration of the Agreement upon any final or interim audit by County, Contractor shall have failed in any way to comply with any requirements of this Agreement, then Contractor shall pay to County forthwith whatever sums are so disclosed to be due to County (or shall, at County's election, permit County to deduct such sums from whatever amounts remain undisbursed by County to Contractor pursuant to this Agreement or from whatever remains due Contractor by County from any other contract between Contractor and County).

Termination Without Cause -- County shall have the right to terminate this Agreement without cause at any time upon giving at least 30 days written notice prior to the effective date of such termination.

Termination By Mutual Agreement -- County and Contractor may otherwise agree in writing to terminate this Agreement in a manner consistent with mutually agreed upon specific terms and conditions.

13. **Compliance with Laws.** Contractor shall observe and comply with all applicable laws, ordinances, codes and regulations of governmental agencies, including federal, state, municipal and local governing bodies, having jurisdiction over the scope of services or any part hereof, including Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), all provisions of the Occupational Safety and Health Act of 1979 and all amendments thereto, and all applicable federal, state, municipal and local safety regulations. All services performed by Contractor must be in accordance with these laws, ordinances, codes and regulations. Contractor shall indemnify and save County harmless from any and all liability, fines, penalties and consequences from any noncompliance or violations of such laws, ordinances, codes and regulations. A violation of such laws, ordinances, codes and regulations shall constitute a material breach of this Agreement and can lead to the termination of this Agreement and appropriate legal proceedings.

14. **Accident Reporting.** If a death, serious personal injury, or substantial property damage occurs in connection with the performance of this Agreement, Contractor shall immediately notify the Supervising Department by telephone. Contractor shall promptly submit a written report, in such form as may be required by Supervising Department, of all accidents which occur in connection with this Agreement. This report must include the following information: (1) name and address of the injured or deceased person(s); (2) name and address of Contractor's subcontractor, if any; (3) name and address of Contractor's liability insurance carrier; and (4) a detailed description of the circumstances surrounding the accident, whether any of County's equipment, tools, materials or staff were
involved and the extent of damage to County and or other property; (5) determination of what effect, if any, accident will have upon Contractor's ability to perform services.

15. **Personal Property.** Unless otherwise provided in Exhibit B(s) to this Agreement, in the event that payment under this Agreement is other than by fee-for-service, title to all personal property having a unit purchase price of over $1,000 acquired by Contractor in connection with this Agreement or the services rendered pursuant thereto shall vest in County, and shall be returned to County at the expiration or termination of the Agreement.

16. **Non-Discrimination.** Contractor assures that he/she will comply with the Americans with Disabilities Act and Title VII of the Civil Rights Act of 1964. Contractor further agrees and that no person shall, on the grounds of race, creed, color, disability, sex, sexual orientation or national origin, age, religion, Vietnam Era Veteran's status, political affiliation, or any other non-merit factors, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under this Agreement.

17. **Governing Board Limitations; Conflict of Interest.** Contractor shall observe and comply with all applicable laws, ordinances, codes and regulations of governmental agencies, including federal, state, municipal and local governing bodies regarding conflicts of interest.

If Contractor has entered into this Agreement as a not-for-profit organization as defined by state and federal law, and is in receipt of funds from County based on such status, Contractor shall at all times conduct its business in a manner consistent with that required of a not-for-profit organization by applicable laws.

Contractor, whether or not a not-for-profit organization, shall not permit any member of its governing board to perform for compensation any administrative or operational functions for the Contractor with respect to the performance of this contract, be it in the capacity as director, officer or employee, (including, but not by way of limitation, fiscal, accounting, or bookkeeping functions) without first obtaining the written consent of the County Agency Director/Chief Administrator.

No administrative employee, officer or director of Contractor may do any of the following without first having given advanced written notice to the County Agency Director/Chief Administrator:

- receive funds from County other than those funds provided pursuant to the Agreement;
- simultaneously serve as an employee, officer or director of another community based organization;
• simultaneously serve as a Director of another governing board or commission which could have influence over the operations of Contractor.

Contractor shall not, without having given advanced written notice to County Agency Director/Chief Administrator of its intention, do any of the following:

• Employ any person who is related by blood or marriage to another employee, a manager, or a member of the governing board of the Contractor;

• Contract for the acquisition of goods or services for more consideration than would be paid for equivalent goods or services on the open market from any person who is related by blood or marriage to a manager or a member of the governing board of the Contractor; or

• Contract for the acquisition of goods or services for more consideration than would be paid for equivalent goods or services on the open market from any organization in which any person who is related by blood or marriage to a manager or member of the governing board of the Contractor has a substantial personal financial interest.

Contractor shall not, during the term of this Agreement, permit any member of the governing board of the Contractor to have or acquire, directly or indirectly, any personal financial interest in the performance of the Agreement, as by providing goods or services for compensation, or otherwise, without having first disclosed the same to the board and the County Agency Director/Chief Administrator, and said member shall not participate in board discussion or action on such matter.

Should the County Agency Director/Chief Administrator object to such employment or contracting and a resolution cannot be achieved then the act of proceeding on such employment or contracting shall constitute grounds for Termination of this Agreement for Cause under the provisions of paragraph 12.

18. **Drug-free Workplace.** Contractor and Contractor's employees shall comply with the County's policy of maintaining a drug-free workplace. Neither Contractor nor Contractor's employees shall unlawfully manufacture, distribute, dispense, possess or use controlled substances, as defined in 21 U.S. Code Section 812, including marijuana, heroin, cocaine, and amphetamines, at any County facility or work site. If Contractor or any employee of Contractor is convicted or pleads nolo contendere to a criminal drug statute violation occurring at a County facility or work site, the Contractor, within five days thereafter, shall notify the Supervising Department of the County department/agency for which the Agreement services are performed. Violation of this provision shall constitute a material breach of this Agreement.
19. **Modifications to Agreement.** County shall assign a liaison to Contractor with respect to the performance of this Agreement. Unless otherwise provided in Exhibit A(s) and/or B(s) to this Agreement, any adjustments requested by the Contractor to line items of a budget or to the program description included as an Exhibit to this Agreement may only be made upon written approval of the supervising department. Such adjustments shall not alter (1) services or other performance to be provided under this Agreement, (2) the time of performance of any act hereunder, or (3) the total amount of money allocated hereunder. This Agreement can be amended only by written agreement of the parties hereto.

20. **Designation of Authorized Personnel.** Contractor shall provide County with a list of Contractor's employees or members of Contractor's Board of Directors who have been authorized to act on behalf of Contractor in its dealings with County. An "act" on behalf of Contractor includes but is not necessarily limited to, execution of Agreement, Agreement amendments and exhibits, signing of claims, and authorization of payment on invoices. The list shall be updated as necessary to accurately reflect such authorizations.

21. **Notice.** All notices required hereunder will be in writing and served personally or by certified mail, return receipt requested, postage prepaid, at the addresses shown below:

**CONTRACTOR:** «Contractor_Name»  
«Street_Address»  
«CityStateZip»

**COUNTY:** Behavioral Health Care Services  
2000 Embarcadero Cove, Suite 400  
Oakland, CA 94606
IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and year first above written.

COUNTY OF ALAMEDA

By:______________________________  By:______________________________
   Signature

Name:____________________________  Name:____________________________
   (Printed)

Title: President of the Board of Supervisors

Date:______________________________

Approved as to Form:

By:________________________________
   County Counsel Signature

Date:______________________________

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement.
Exhibit A Template 05/06
Please refer to “Contractor Instructions for Completing the Exhibit A.”

MASTER CONTRACT EXHIBIT A TEMPLATE
COMMUNITY BASED ORGANIZATION CONTRACT

PROGRAM DESCRIPTION AND PERFORMANCE REQUIREMENTS

Contracting Department: Behavioral Health Care Services (BHCS)
Contractor Name: ________________________________
Contract Period: ________________________________

Type of Contract:
- □ Master: Contract Number ________________
- □ Services as Needed (SAN): □ EPSDT □ SACPA □ Level III

1. Contracted Services:

2. Program Name(s):

3. Program Objectives:

4. Program Description and Requirements:
   4A. Members of the Board of Directors:
   4B. Executive Director:
   4C. Medical Director:
4D. Contract Program Director:

4E. Contract Fiscal Officer:

4F. Program Description:

4G. Program Goals:

4H. Discharge Criteria and Planning:

4I. Case Management:

4J. Limitations of Service:

4K. Confidentiality of Health Information:

All information and records obtained in the course of providing services pursuant to this Agreement shall be confidential and are protected from disclosure by the California Welfare and Institutions Code, Section 5328, et seq. and other applicable federal and state law.

If Contractor is a Covered Entity within the meaning of the Health Insurance Portability and Accountability Act (HIPAA), then it shall provide services in conformance therewith.

Contractor will disclose to appropriate treatment providers individually identifiable health information concerning clients served pursuant to this Agreement for purposes of securing treatment and to the extent minimally necessary to accomplish the purpose of coordinating or managing health care and to perform the functions specified in the California Welfare and Institutions Code.

The maintenance, access, disposal and transfer of records shall otherwise be in accordance with professional standards and applicable County, State, and Federal laws and regulations and/or specified regulations of the Substance Abuse and Crime Prevention Act of 2000, detailed in section 9535 of Title 9 CCR.
Any sharing of identifiable health information shall be consistent with the provisions of HIPAA and other applicable federal and state laws relating to the use and disclosure of protected health information.

Records will contain sufficient detail to make it possible for contracted services to be evaluated. Contractor shall permit authorized BHCS personnel to make periodic inspections of the records. Contractor shall furnish information and patient records such as these personnel may require for monitoring, reviewing and evaluating fiscal and clinical effectiveness, appropriateness, and timeliness of the services being rendered under this contract.

4L. Quality Assurance:

Contractor has a Quality Assurance Plan meeting the requirements of the Department’s Office of Quality Assurance. This plan is available on-site for review by the Department.

Attached to this exhibit is an Addendum addressing elements to be included in the Quality Assurance Plan, including quality improvement activities which are the responsibility of Contractor.

4M. Minimum Staffing Qualifications:

Contractor has job descriptions on file with the Department for all personnel whose salaries, wages, and benefits are reimbursable in whole or in part under this agreement. Job descriptions shall specify the minimum qualifications for employment and duties to be performed. Contractor agrees to submit revised job descriptions prior to implementing any changes or employing persons who do not meet the minimum qualifications on file with the Department.

4N. Organizational Chart:

Contractor has an organizational chart reflecting the current operating structure on file with the Department. Contractor agrees to provide the Department with an updated version of this document in the event of any change to the operational structure.

5. Hours/Days of Operation:

6. Reporting Requirements:

Contractor shall comply with any reporting requirements of County, State or Federal funding sources as a condition of funding.

7. Evaluation Requirements:

Contractor shall submit to periodic and/or annual reviews of program delivery and fiscal reporting, as required by County, State and Federal funding sources.

8. Certification/Licensure:
9. Target Population:

10. Service Area:

11. Service Delivery Sites:

12. Service Criteria:
AUDIT REQUIREMENTS

The County contracts with various organizations to carry out programs mandated by the Federal and State governments or sponsored by the Board of Supervisors. Under the Single Audit Act Amendments of 1996 and Board policy, the County has the responsibility to determine whether those organizations receiving funds through the County have spent them in accordance with the provisions of the contract, applicable laws and regulations.

The County discharges this responsibility by reviewing audit reports submitted by contractors and through other monitoring procedures.

I.  AUDIT REQUIREMENTS

A.  Funds from Federal Sources: non-federal entities which are determined to be sub recipients by the supervising department according to §___ 210 of OMB Circular A-133 and which expend annual Federal awards of:

1.  $500,000 ($300,000 if the fiscal year ended before January 1, 2004) or more must have a single audit in accordance with §___ 500 of OMB Circular A-133. When an auditee expends Federal awards under only one Federal program (excluding R&D) and the Federal program's laws, regulations, or grant agreements do not require a financial statement audit of the auditee, the auditee may elect to have a program-specific audit conducted in accordance with §___ 235 of OMB Circular A-133.

2.  Less than $500,000 ($300,000 if the fiscal year ended before January 1, 2004) are exempt from the single audit requirement except that the County may require a limited-scope audit in accordance with §___ 230 (b)(2) of OMB Circular A-133.

B.  Funds from All Sources: non-federal entities which receive annual funds through the County from all sources of:

1.  $100,000 or more must have a financial audit in accordance with the U.S. Comptroller General’s Government Auditing Standards covering all County programs.

2.  Less than $100,000 is exempt from these audit requirements except as otherwise noted in the contract.

3.  If a non-federal entity is required to have or chooses to do a single audit, then it is not required to have a financial audit in the same year. However, if a non-federal entity is required to have a financial audit it may be required to also have a limited-scope audit in the same year.
C. General Requirements for All Audits:

1. All audits must be conducted in accordance with Government Auditing Standards prescribed by the U.S. Comptroller General.

2. All audits must be conducted annually, except where specifically allowed otherwise by laws, regulations or County policies.

3. Audit reports must identify each County program covered in the audit by contract number, contract amount and contract period. An exhibit number must be included when applicable.

4. If a funding source has more stringent and specific audit requirements, they must prevail over those described here.

II. AUDIT REPORTS

At least two copies of the audit reports package, including all attachments and any management letter with its corresponding response, should be sent to the County supervising department within six months after the end of the contract period or other time frame specified by the department. The County supervising department is responsible for forwarding a copy to the County Auditor within one week of receipt.

III. AUDIT RESOLUTION

Within 30 days of issuance of the audit report, the entity must submit to its County supervising department a plan of corrective action to address the findings contained therein. Questioned costs and disallowed costs must be resolved according to procedures established by the County in the Contract Administration Manual. The County supervising department will follow-up on the implementation of the corrective action plan as it pertains to County programs.

IV. ADDITIONAL AUDIT WORK

The County, the state or Federal agencies may conduct additional audits or reviews to carry out their regulatory responsibilities. To the extent possible, these audits and reviews will rely on the audit work already performed under these audit requirements.
EXHIBIT K
COUNTY OF ALAMEDA
for
OE/SD-2: Family Education and Resource Center

WORK PLAN TIME LINE

The work plan must include the *Major Benchmarks* listed below. The timeline must also provide a reasonable sequencing of sub-tasks that need to be completed to reach these benchmarks. In quarterly reports to BHCS, you will be required to complete the two far right columns to provide an update on what has actually been implemented and by when. The benchmarks on pages 31 - 32 of the RFP must be included.

<table>
<thead>
<tr>
<th>Start</th>
<th>End</th>
<th>Who</th>
<th>What</th>
<th>Deliverable</th>
<th>Actually Delivered</th>
<th>Actual Comp. Date</th>
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</tr>
</tbody>
</table>
EXHIBIT L
RFP NO. OESD-2 FERC VENDOR BID LIST

Below is the Vendor Bid List for this project consisting of vendors who have been issued a copy of this RFP/Q. This Vendor Bid List is being provided for informational purposes to assist bidders in making contact with other businesses as needed to develop local small and emerging business subcontracting relationships to meet the requirements of the Small Local Emerging Business (SLEB) Program (described within this RFP/Q). For additional information regarding the SLEB Program, please visit our website at http://www.acgov.org/gsa/sleb/ and/or contact Linda Moore, Business Outreach Officer, at Linda.Moore@acgov.org, or (510) 208-9717.

Potential bidders are strongly encouraged, but not required, to attend the Networking/Bidders Conference in order to further facilitate subcontracting relationships. Vendors who attend the Networking/Bidders Conference will be added to the Vendor Bid List. Please see the RFP/Q sections entitled ‘Calendar of Events’ and ‘Networking/Bidders Conference’ for additional information. The Networking/Bidders Conference scheduled for all current projects are posted on the GSA Calendar of Events website at http://www.acgov.org/gsa/Calendar.jsp. An RFP/Q Addendum will be issued to all vendors on the Vendor Bid List following the Networking/Bidders Conference and will include contact information for each vendor attendee.

<table>
<thead>
<tr>
<th>Business Name</th>
<th>Contact Name</th>
<th>Contact Phone</th>
<th>Address</th>
<th>City</th>
<th>Zip</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Better Way</td>
<td>Shahnaz Mazandarani</td>
<td>(510) 601-0203</td>
<td>3200 Adeline St.</td>
<td>Berkeley</td>
<td>94703</td>
<td><a href="mailto:smazandarani@abetterwayinc.net">smazandarani@abetterwayinc.net</a></td>
</tr>
<tr>
<td>ADR Mediation - DBA</td>
<td>Linda Lammers</td>
<td>(925) 462-5000</td>
<td>239 Main Street - Suite E-2</td>
<td>Pleasanton</td>
<td>94566</td>
<td><a href="mailto:linda@adrmediation.net">linda@adrmediation.net</a></td>
</tr>
<tr>
<td>AIDS Alliance</td>
<td>Peggy Bush</td>
<td>(510) 655-3435</td>
<td>5720 Shattuck Ave</td>
<td>Oakland</td>
<td>94609</td>
<td><a href="mailto:peggy@thecenteroakland.org">peggy@thecenteroakland.org</a></td>
</tr>
<tr>
<td>AIDS Project East Bay</td>
<td>Hazel Wesson</td>
<td>510 - 663-7950</td>
<td>1755 Broadway, 3rd Fl.</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:hwesson@apeb.org">hwesson@apeb.org</a></td>
</tr>
<tr>
<td>Alameda County Medical Ctr</td>
<td>Nancy Halloran</td>
<td>(510) 891-5700</td>
<td>1900 Embarcadero, Suite 400</td>
<td>Oakland</td>
<td>94606</td>
<td><a href="mailto:nhalloran@acmedctr.org">nhalloran@acmedctr.org</a></td>
</tr>
<tr>
<td>Alameda County Network of Mental Health Clients</td>
<td>Nancy Thomas</td>
<td>510-652-5891</td>
<td>333 Hegenberger Dr.</td>
<td>Oakland</td>
<td>94621</td>
<td><a href="mailto:acnetmhc@aol.com">acnetmhc@aol.com</a></td>
</tr>
<tr>
<td>Alameda Family Services Inc.-Alameda Point Collaborative</td>
<td>Irene Kudarauskas</td>
<td>510-521-4152</td>
<td>677 West Ranger Ave.</td>
<td>Alameda</td>
<td>94501</td>
<td><a href="mailto:irenek@xanthos.org">irenek@xanthos.org</a></td>
</tr>
<tr>
<td>Alejandro Rojas - DBA - DBA</td>
<td>Alejandro Rojas</td>
<td>(510) 938-2020</td>
<td>PO Box 12484</td>
<td>Oakland</td>
<td>94604</td>
<td><a href="mailto:intlclubosostapatios@hotmail.com">intlclubosostapatios@hotmail.com</a></td>
</tr>
<tr>
<td>Alternative Family Services</td>
<td>Jay Berlin</td>
<td>707-765-2700</td>
<td>111 Myrtle St.</td>
<td>Oakland</td>
<td>94607</td>
<td><a href="mailto:jberlin@afs4kids.org">jberlin@afs4kids.org</a></td>
</tr>
<tr>
<td>Alternative Family Services</td>
<td>Linda Ratner</td>
<td>(510) 839-3800</td>
<td>111 Myrtle Street</td>
<td>Oakland</td>
<td>94607</td>
<td><a href="mailto:lindaratner@comcast.net">lindaratner@comcast.net</a></td>
</tr>
<tr>
<td>Ann Martin Children's Center, Inc.</td>
<td>David Theis</td>
<td>510-655-7880</td>
<td>1250 Grand Ave.</td>
<td>Piedmont</td>
<td>94610</td>
<td><a href="mailto:davidtheis@annmartin.org">davidtheis@annmartin.org</a></td>
</tr>
<tr>
<td>Ariel Outreach Mission</td>
<td>Nadine Scott</td>
<td>(510) 635-5703</td>
<td>P.O. Box 5035</td>
<td>Oakland</td>
<td>94605</td>
<td><a href="mailto:dianscott@earthlink.net">dianscott@earthlink.net</a></td>
</tr>
<tr>
<td>Asian Community Mental Health Services</td>
<td>Betty Hong</td>
<td>510-268-6020</td>
<td>310 - 8th St.</td>
<td>Oakland</td>
<td>94607</td>
<td><a href="mailto:BettyH@ACMHS.org">BettyH@ACMHS.org</a></td>
</tr>
<tr>
<td>Asian Pacific Psychologil Services</td>
<td>Beatrice Lee</td>
<td>510-835-2777</td>
<td>431 - 30th St., Ste. 6A</td>
<td>Oakland</td>
<td>94609</td>
<td><a href="mailto:blee@appsweb.org">blee@appsweb.org</a></td>
</tr>
<tr>
<td>Asian/Pacific Islander Wellness</td>
<td>Rachel Matillano</td>
<td>(510) 625-1578</td>
<td>1755 Broadway St., 3rd Floor</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:rachel@apiwellness.org">rachel@apiwellness.org</a></td>
</tr>
<tr>
<td>BACS-Townhouse</td>
<td>Liz Prince</td>
<td>510-658-9480</td>
<td>629 Oakland Ave.</td>
<td>Oakland</td>
<td>94611</td>
<td><a href="mailto:eprince@bayareacs.org">eprince@bayareacs.org</a></td>
</tr>
<tr>
<td>Barbara F. Strouzas, MFT</td>
<td>Barbara Strouzas</td>
<td>(925) 960-0910</td>
<td>1790 Holmes Street</td>
<td>Livermore</td>
<td>94550</td>
<td><a href="mailto:bobbiestrouzas@yahoo.com">bobbiestrouzas@yahoo.com</a></td>
</tr>
<tr>
<td>Bay Area Youth Center-Calaveras</td>
<td>Joshua Leonard</td>
<td>510-727-9401</td>
<td>24461 Calaveras Rd.</td>
<td>Hayward</td>
<td>94545</td>
<td><a href="mailto:josh.leonard@bayareayouthcenters.org">josh.leonard@bayareayouthcenters.org</a></td>
</tr>
<tr>
<td>Berkeley Place-Casa DeLa Vida</td>
<td>Russ Hudlemeyer</td>
<td>510-848-5865</td>
<td>421 Fairmount Ave.</td>
<td>Oakland</td>
<td>94611</td>
<td><a href="mailto:200meyer@msn.com">200meyer@msn.com</a></td>
</tr>
<tr>
<td>Bonita House</td>
<td>Richard Crispino</td>
<td>510-923-1099</td>
<td>1410 Bonita Ave.</td>
<td>Berkeley</td>
<td>94709</td>
<td><a href="mailto:nick@bonitahouse.org">nick@bonitahouse.org</a></td>
</tr>
<tr>
<td>BOSS - Oakland</td>
<td>Boona Cheema</td>
<td>510-649-1930</td>
<td>396 Fairmont Ave.</td>
<td>Oakland</td>
<td>94611</td>
<td><a href="mailto:boonache@aol.com">boonache@aol.com</a></td>
</tr>
<tr>
<td>Brother2Brother/Sister2Sister</td>
<td>Wil Oliver</td>
<td>(510) 268-1126</td>
<td>1511 Jackson St., Suite #25</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:wwweblife@sbcglobal.net">wwweblife@sbcglobal.net</a></td>
</tr>
<tr>
<td>Catholic Charities of the Diocese</td>
<td>Solomon Belette</td>
<td>(510) 768-3100</td>
<td>433 Jefferson St.</td>
<td>Oakland</td>
<td>94607</td>
<td><a href="mailto:solomon@ccceb.org">solomon@ccceb.org</a></td>
</tr>
<tr>
<td>Catholic Charities The E Bay</td>
<td>Barbara Perrazas</td>
<td>(510) 768-3105</td>
<td>433 Jefferson St</td>
<td>Oakland</td>
<td>94607</td>
<td><a href="mailto:barbara@ccceb.org">barbara@ccceb.org</a></td>
</tr>
<tr>
<td>Children's Hospital and Research Center at Oakland-Psychopharmacology Clinic</td>
<td>Renee Wachtel, M.D., Medical Director</td>
<td>510-428-3351</td>
<td>5220 Claremont Avenue</td>
<td>Oakland</td>
<td>94618</td>
<td><a href="mailto:rwachtel@mail.cho.org">rwachtel@mail.cho.org</a></td>
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<tr>
<td>Children's Learning Center</td>
<td>Patricia Dilks</td>
<td>510-769-7100</td>
<td>1910 Central Ave.</td>
<td>Alameda</td>
<td>94501</td>
<td><a href="mailto:pdilks@cicalameda.com">pdilks@cicalameda.com</a></td>
</tr>
<tr>
<td>Ciddio-Morris Associates, Inc.</td>
<td>Jim Morris</td>
<td>( 510 ) 208-7100</td>
<td>1611 Telegraph Ave #88</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:jmorris@ciddiomorris.com">jmorris@ciddiomorris.com</a></td>
</tr>
<tr>
<td>Crisis Support Services of Alameda County</td>
<td>Nancy Salamy</td>
<td>510-420-2476</td>
<td>P.O. Box 9102</td>
<td>Oakland</td>
<td>94609</td>
<td><a href="mailto:nsalamy@crisissupport.org">nsalamy@crisissupport.org</a></td>
</tr>
<tr>
<td>CSWL Inc - DBA</td>
<td>Peema Mahesh</td>
<td>( 925 ) 249-3000</td>
<td>6800 Koll Center Pkwy. Ste. 100</td>
<td>Pleasanton</td>
<td>94566</td>
<td><a href="mailto:pemaa@cswl.org">pemaa@cswl.org</a></td>
</tr>
<tr>
<td>East Bay Agency for Children-Therapeutic Nursery School</td>
<td>Steve Eckert</td>
<td>510-268-3770</td>
<td>6117 Martin Luther King Jr. Wy.</td>
<td>Oakland</td>
<td>94609</td>
<td><a href="mailto:steve@ebac.org">steve@ebac.org</a></td>
</tr>
<tr>
<td>East Bay Community Law Center</td>
<td>Jeff Selbin</td>
<td>( 510 ) 548-4040</td>
<td>2921 Adeline St.</td>
<td>Berkeley</td>
<td>94703</td>
<td><a href="mailto:jselbin@eclc.org">jselbin@eclc.org</a></td>
</tr>
<tr>
<td>East Bay Community Recovery Project</td>
<td>Renato Gomes</td>
<td>( 510 ) 832-0600</td>
<td>2551 San Pablo Ave</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:gomes@ebcrp.org">gomes@ebcrp.org</a></td>
</tr>
<tr>
<td>East Bay Community Recovery Project</td>
<td>Joan Zweden</td>
<td>510-446-7100</td>
<td>2577 San Pablo Ave.</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:jzweden@ebcrp.org">jzweden@ebcrp.org</a></td>
</tr>
<tr>
<td>Eden I &amp; R Inc</td>
<td>Barbara Bernstein</td>
<td>( 510 ) 537-2710</td>
<td>570 B St</td>
<td>Hayward</td>
<td>94541</td>
<td><a href="mailto:bberstein@edenir.org">bberstein@edenir.org</a></td>
</tr>
<tr>
<td>Edward Pieczenik, LCSW</td>
<td>Edward Pieczenik</td>
<td>( 510 ) 481-0130</td>
<td>16584 Selby Drive</td>
<td>San Leandro</td>
<td>94578</td>
<td><a href="mailto:eddiejaq@aal.com">eddiejaq@aal.com</a></td>
</tr>
<tr>
<td>Family Path Inc., Parental Stress-Fremont</td>
<td>Marcella Reeves</td>
<td>510-893-9320</td>
<td>39155 Liberty St., Ste. G72</td>
<td>Fremont</td>
<td>94538</td>
<td><a href="mailto:mreeves@familypaths.org">mreeves@familypaths.org</a></td>
</tr>
<tr>
<td>Family Support Services of the Bay Area-Family Reclaim/ARS/Kinship</td>
<td>Lou Fox</td>
<td>510-834-2443</td>
<td>401 Grand Ave., Suite 200 &amp; 500</td>
<td>Oakland</td>
<td>94610</td>
<td><a href="mailto:lfox@fssba-oak.org">lfox@fssba-oak.org</a></td>
</tr>
<tr>
<td>Fred Finch Youth Center-Coolidge Court</td>
<td>Vonza Thompson</td>
<td>510-482-2244</td>
<td>3850 Coolidge Ave</td>
<td>Oakland</td>
<td>94602</td>
<td><a href="mailto:vonthompson@fredfinch.org">vonthompson@fredfinch.org</a></td>
</tr>
<tr>
<td>G.O.A.L.S. For Women</td>
<td>Gwendolyn Wilson</td>
<td>( 516 ) 465-0565</td>
<td>3356 Adeline Street</td>
<td>Berkeley</td>
<td>94703</td>
<td><a href="mailto:bayvinanuru@msn.com">bayvinanuru@msn.com</a></td>
</tr>
<tr>
<td>Goals for Women</td>
<td>Gwen Wilson</td>
<td>510-985-0500</td>
<td>4236 Martin Luther King Jr. Way</td>
<td>Oakland</td>
<td>94609</td>
<td><a href="mailto:gwen@goalsforwomen.org">gwen@goalsforwomen.org</a></td>
</tr>
<tr>
<td>Health &amp; Human Resource Education Center</td>
<td>Tisha Kenny</td>
<td>510-549-5990</td>
<td>2298 Fulton St., Ste. 103</td>
<td>Berkeley</td>
<td>94704</td>
<td><a href="mailto:admin@hhrec.org">admin@hhrec.org</a></td>
</tr>
<tr>
<td>Hiawatha Harris-Pathways to Wellness Oakland</td>
<td>Neisha Becton</td>
<td>925-520-0005</td>
<td>411 - 30th St., Ste. 314</td>
<td>Oakland</td>
<td>94609</td>
<td><a href="mailto:nbecton@pathwayswellness.net">nbecton@pathwayswellness.net</a></td>
</tr>
<tr>
<td>Hiawatha Harris-Pathways to Wellness Union City</td>
<td>Neisha Becton</td>
<td>925-520-0005</td>
<td>1328 DeCoto Rd., Ste. 124</td>
<td>Union City</td>
<td>94587</td>
<td><a href="mailto:nbecton@bhrcorp.org">nbecton@bhrcorp.org</a></td>
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<tr>
<td>Jewish Family and Children's Services of the East Bay</td>
<td>Avi Rose</td>
<td>510-704-7480</td>
<td>2484 Shattuck Ave., Ste. 210</td>
<td>Berkeley</td>
<td>94704</td>
<td><a href="mailto:awrose@fcs-eastbay.org">awrose@fcs-eastbay.org</a></td>
</tr>
<tr>
<td>Kevin Grant Consulting</td>
<td>Kevin Grant</td>
<td>( 510 ) 301-3589</td>
<td>P.O.Box 184 San Leandro, CA</td>
<td>San Leandro</td>
<td>94577</td>
<td><a href="mailto:grantcon@sbcglobal.net">grantcon@sbcglobal.net</a></td>
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<tr>
<td>Kidango</td>
<td>Paul Miller</td>
<td>510-744-9280</td>
<td>4533 Mattos Dr.</td>
<td>Fremont</td>
<td>94536</td>
<td><a href="mailto:pmiller@kidango.org">pmiller@kidango.org</a></td>
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<tr>
<td>La Cheim</td>
<td>Victor Prada</td>
<td>510-985-2810</td>
<td>5261 Claremont Ave.</td>
<td>Oakland</td>
<td>94618</td>
<td><a href="mailto:vic@lacheim.org">vic@lacheim.org</a></td>
</tr>
<tr>
<td>La Clinica</td>
<td>Leslie Preston</td>
<td>510-535-4092</td>
<td>1501 Fruitvale Ave.</td>
<td>Oakland</td>
<td>94601</td>
<td><a href="mailto:lpreston@laclinica.org">lpreston@laclinica.org</a></td>
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<tr>
<td>La Familia</td>
<td>Hector Mendez</td>
<td>510-881-5921</td>
<td>26081 Mocine Ave.</td>
<td>Hayward</td>
<td>94544</td>
<td><a href="mailto:finance_ifco@sbcglobal.net">finance_ifco@sbcglobal.net</a></td>
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<tr>
<td>Lao Family Community Dev., Inc</td>
<td>Kathy Chao</td>
<td>( 510 ) 533-8850</td>
<td>1551 23rd Avenue</td>
<td>Oakland</td>
<td>94606</td>
<td><a href="mailto:kchao@laofamilynet.org">kchao@laofamilynet.org</a></td>
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<tr>
<td>Lincoln Child Center</td>
<td>Chris Stoner-Mertz</td>
<td>510-531-3111</td>
<td>4368 Lincoln Ave.</td>
<td>Oakland</td>
<td>94605</td>
<td><a href="mailto:chrisstoner@lincolncrcc.org">chrisstoner@lincolncrcc.org</a></td>
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<tr>
<td>Mental Health Association</td>
<td>Stephen Bischoff</td>
<td>510-835-5010</td>
<td>954 – 60th St.</td>
<td>Oakland</td>
<td>94608</td>
<td><a href="mailto:sbj@mhaac.org">sbj@mhaac.org</a></td>
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<tr>
<td>Native American Health Center</td>
<td>Martin Waukazo</td>
<td>510-261-0524</td>
<td>3124 International Blvd.</td>
<td>Oakland</td>
<td>94601</td>
<td><a href="mailto:mwaukazo@nativehealth.org">mwaukazo@nativehealth.org</a></td>
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<tr>
<td>Northern California Community Development</td>
<td>Theressa Macklin</td>
<td>( 510 ) 783-2225</td>
<td>27745 Tyrrell Avenue</td>
<td>Hayward</td>
<td>94544</td>
<td><a href="mailto:tmacklin@norcalmetro.org">tmacklin@norcalmetro.org</a></td>
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<tr>
<td>Opportunity Plus, Inc.-Oak Hill</td>
<td>Sheila Sykes-Nero</td>
<td>510-484-5446</td>
<td>33 Oak Hill Circle</td>
<td>Oakland</td>
<td>94605</td>
<td><a href="mailto:011652@msn.com">011652@msn.com</a></td>
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<tr>
<td>P.E.E.R.S.</td>
<td>Khatera Aslami</td>
<td>510-832-7337</td>
<td>1825 San Pablo Ave.</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:kaslami@peersnet.org">kaslami@peersnet.org</a></td>
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<tr>
<td>Portia Bell Humm Behavioral Health and Training Center</td>
<td>Joty Sikand</td>
<td>925-825-1793</td>
<td>3550 Mowry Ave., Ste. 102</td>
<td>Fremont</td>
<td>94538</td>
<td><a href="mailto:jsikand@humecenter.org">jsikand@humecenter.org</a></td>
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<tr>
<td>Prescott-Joseph Center</td>
<td>Washington Burns</td>
<td>( 510 ) 208-6651</td>
<td>920 Peralta St</td>
<td>Oakland</td>
<td>94607</td>
<td><a href="mailto:dburns@prescottjoseph.org">dburns@prescottjoseph.org</a></td>
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<tr>
<td>R &amp; R Homes</td>
<td>Jason Newell</td>
<td>510-235-3172</td>
<td>4244 Wall Avenue</td>
<td>Richmond</td>
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<td><a href="mailto:jason_rarhomes@sbcglobal.net">jason_rarhomes@sbcglobal.net</a></td>
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<tr>
<td>Safe Passages</td>
<td>Antonio Gastelum</td>
<td>( 510 ) 238-2131</td>
<td>250 Frank Ogawa Plaza, #6306</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:agastelum@oaklandnet.com">agastelum@oaklandnet.com</a></td>
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<td>Schuman-Liles Psychiatric Clinic</td>
<td>Letha Barnet</td>
<td>510-569-9334</td>
<td>10850 MacArthur Blvd.</td>
<td>Oakland</td>
<td>94605</td>
<td><a href="mailto:lethabarnett@sbcglobal.net">lethabarnett@sbcglobal.net</a></td>
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<td>Seneca Center-Destiny/Building Blocks</td>
<td>Ken Berrick</td>
<td>510-481-1222</td>
<td>2370 Grande Vista Pl.</td>
<td>Oakland</td>
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<td><a href="mailto:ken@senecacenter.org">ken@senecacenter.org</a></td>
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<tr>
<td>Spectrum Home Health Care Inc</td>
<td>Judy Edlund</td>
<td>( 510 ) 483-9225</td>
<td>341 Juana Ave</td>
<td>San Leandro</td>
<td>94577</td>
<td><a href="mailto:shhc@aol.com">shhc@aol.com</a></td>
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<tr>
<td>St. Mary's Center</td>
<td>Carol Johnson</td>
<td>( 510 ) 923-9600</td>
<td>925 Brockhurst</td>
<td>Oakland</td>
<td>94608</td>
<td><a href="mailto:cjohnson@stmaryscenter.org">cjohnson@stmaryscenter.org</a></td>
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<tr>
<td>Organization</td>
<td>Name</td>
<td>Phone</td>
<td>Address</td>
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<tr>
<td>STARS</td>
<td>Sandra Simmons</td>
<td>510-352-9200</td>
<td>545 Estudillo Ave.</td>
<td>San Leandro</td>
<td>94577</td>
<td><a href="mailto:sansimmons@starsinc.com">sansimmons@starsinc.com</a></td>
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<tr>
<td>Sue P. Ezekiel LMFT, Ph. D.</td>
<td>Sue Ezekiel</td>
<td>(510) 548-1413</td>
<td>1905 Berkeley Way</td>
<td>Berkeley</td>
<td>94704</td>
<td><a href="mailto:Ezekielsp@aol.com">Ezekielsp@aol.com</a></td>
</tr>
<tr>
<td>The Perinatal Council</td>
<td>Barbara Bunn McCullough</td>
<td>510-903-7503</td>
<td>2648 International Blvd.</td>
<td>Oakland</td>
<td>94601</td>
<td>bbmccullough@perinatal council.org</td>
</tr>
<tr>
<td>The R.E.F.U.G.E.-Garden</td>
<td>Jason Henderson</td>
<td>510-301-5809</td>
<td>2726 Garden St.</td>
<td>Oakland</td>
<td>94619</td>
<td><a href="mailto:jbhrefuge@comcast.net">jbhrefuge@comcast.net</a></td>
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<tr>
<td>Through the Looking Glass</td>
<td>Megan Kirshbaum</td>
<td>510-848-1112</td>
<td>2198 Sixth St.</td>
<td>Berkeley</td>
<td>94710</td>
<td><a href="mailto:megan_kirshbaum@lookingglass.org">megan_kirshbaum@lookingglass.org</a></td>
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<tr>
<td>Tiburcio Vasquez Health Center</td>
<td>Jose Joel Garcia</td>
<td>510-471-5907</td>
<td>567 W. A St.</td>
<td>Hayward</td>
<td>94541</td>
<td><a href="mailto:jgarcia@tvhc.org">jgarcia@tvhc.org</a></td>
</tr>
<tr>
<td>Tom L. Clark</td>
<td>Tom Clark</td>
<td>(510) 548-6864</td>
<td>2576 Shattuck Ave.</td>
<td>Berkeley</td>
<td>94704</td>
<td><a href="mailto:Tomclark@attbi.com">Tomclark@attbi.com</a></td>
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<tr>
<td>Traveler’s Aid Society</td>
<td>Lugina Yates</td>
<td>510-444-6834</td>
<td>580 18th St.</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:lyates55@yahoo.com">lyates55@yahoo.com</a></td>
</tr>
<tr>
<td>United Advocates for Children of California-Family Partnership Program</td>
<td>Jennifer Clancy, Exec. Dir.</td>
<td>510-473-0500</td>
<td>303 Hegenberger Road</td>
<td>Oakland</td>
<td>94613</td>
<td><a href="mailto:jclancy@uacc4families.org">jclancy@uacc4families.org</a></td>
</tr>
<tr>
<td>Volunteers of America Bay Area</td>
<td>Zakkiyyah Nazeeh</td>
<td>(510) 473-0500</td>
<td>1701 Harbor Bay Parkway, Ste 220</td>
<td>Alameda</td>
<td>94502</td>
<td><a href="mailto:hyuen@voaba.org">hyuen@voaba.org</a></td>
</tr>
<tr>
<td>West Coast Childrens-CASS</td>
<td>Stacy Katz</td>
<td>510-527-7249</td>
<td>405 14th St., Ste. 210</td>
<td>Oakland</td>
<td>94612</td>
<td><a href="mailto:skatz@westcoastcc.org">skatz@westcoastcc.org</a></td>
</tr>
<tr>
<td>West Oakland Health Center</td>
<td>Peter LeDuff</td>
<td>510-433-1771</td>
<td>2722 Adeline St.</td>
<td>Oakland</td>
<td>94607</td>
<td><a href="mailto:peterl@wohc.org">peterl@wohc.org</a></td>
</tr>
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</table>
EXHIBIT M
ALAMEDA COUNTY
for
OE/SD-2: Family Education and Resource Center

RESPONSE CONTENT AND SUBMITTALS
COMPLETENESS CHECKLIST

Please refer to Section III.E. RESPONSE FORMAT for the specific questions under each of the sections described below. The sequence for each required Bid document/exhibit shall be as follows:

CHECK LIST

1. TITLE PAGE

2. TABLE OF CONTENTS

3. COVER LETTER

4. LETTER OF TRANSMITTAL

5. MANAGEMENT PLAN  (Maximum of eight (8) pages, not including required Work Plan Time Line and one additional page each for an organizational chart of the applicant and an organizational chart for the project that includes all project partners and how they will function in relation to each other)
   Attachment A- Organizational Chart
   Attachment B- Memorandums of Understanding (MOU’s) with Exhibit L coversheet
   Attachment C- Work Plan Time Line (Exhibit K)

6. EXECUTIVE SUMMARY  (Maximum of two (2) pages)

7. VISION FOR ADDRESSING THE NEEDS OF FAMILIES  (Maximum of two (2) pages)

8. PRIOR EXPERIENCE IMPLEMENTING THE PRINCIPLES AND VALUES OF MHSA  (Maximum of six (6) pages)

9. PRIOR MANAGEMENT EXPERIENCE  (Maximum of five (5) pages)

10. PRIOR EXPERIENCE WITH FERC COMPONENTS  (Maximum of six (6) pages)

11. REFERENCES  (Exhibit D1 and D2)

12. DATA AND FISCAL MANAGEMENT AND CONTROLS  (Maximum of one (1) page)
   Attachment E- Fiscal Audit and Current Budgets and Year to Date Financial Statements (SUBMIT AT END OF DOCUMENT. Only one set of the last three audited financial statements needs to be submitted.)

13. BID FORM
   Submit hard copies of Exhibit B.
14. EVIDENCE OF INSURANCE

15. DISCLOSURE STATEMENT

16. OTHER REQUIRED SUBMITTALS/EXHIBITS NOT INCLUDED ABOVE THAT ARE REQUIRED IN THE BID RESPONSE:

Exhibit A, Acknowledgement, must be signed and returned.
Exhibit E, SLEB Certification Application Package, completed, signed, required documentation attached (applicable to a small or emerging business, located within the boundaries of Alameda County, seeking certification).
Exhibit F, Small Local Emerging Business (SLEB) Subcontracting Information Sheet, must be completed and signed.
Exhibit G, Request for Preference for Local Business and Small Local or Emerging Local Business, completed and signed (read Exhibit G for applicability). If applying for local preference, submit the following:
  Copy of a verifiable business license, issued by the County of Alameda or a City within the County; and
  Proof of six (6) month business residency, identifying the name of the vendor and the local address: utility bills, deed of trust or lease agreement.
Exhibit H, First Source Agreement, must be completed and signed (applicable to contracts over $100,000).
Exhibit I, Exceptions, Clarifications and Amendments Form, must be completed and signed. Any exceptions, clarifications and amendments should also address the attached Exhibits, particularly Exhibit J, Standard Agreement (The County is under no obligation to accept any exceptions and such exceptions may be a basis for bid disqualification).
EXHIBIT N
DEBARMENT AND SUSPENSION CERTIFICATION

COUNTY OF ALAMEDA
RFP No. OESD-2 FERC
For
Family Education and Resource Center

The bidder, under penalty of perjury, certifies that, except as noted below, bidder, its principal, and any named subcontractor:

- Is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any federal agency;
- Has not been suspended, debarred, voluntarily excluded or determined ineligible by any federal agency within the past three years;
- Does not have a proposed debarment pending; and
- Has not been indicted, convicted, or had a civil judgment rendered against it by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past three years.

If there are any exceptions to this certification, insert the exceptions in the following space.

Exceptions will not necessary result in denial of award, but will be considered in determining bidder responsibility. For any exception noted above, indicate below to whom it applies, initiating agency, and dates of action.

Notes: Providing false information may result in criminal prosecution or administrative sanctions. The above certification is part of the Proposal. Signing this Proposal on the signature portion thereof shall also constitute signature of this Certification.

BIDDER: _________________________________________________________________

PRINCIPAL: _______________________________ TITLE: ________________________

SIGNATURE: ______________________________ DATE: ________________________
Family Education & Resource Center Overview

**North County Main Center**
- Administration of FERC
  - Training
  - Supervision
  - Management

**Strategies**

**Community-Based Resources, Services and Supports**
- Education Training
- Peer Support
- Information and Referral

**Outreach and Collaboration**
- CBO’s serving cultural and linguistic groups
- Mental Health Advocacy and Family-Serving Organizations

**Advocacy for System Change**
- Technical Assistance to mental health system providers
- Training to family member leadership

**Exhibit O**
FERC Organizational Chart

- Central Satellite
- Tri-Valley Satellite
- South County Satellite
Family Education & Resource Center

Goals

- Supports to family members and caregivers of individuals with SMI and SED
- To provide information, referral and education to family members
- To support the mental health system in integrating a family perspective

Community Services and supports to family members

- Education and Training
  - Education programs delivered in partnership with CBOs
  - Education workshops provided in community
  - NAMI and VACF Education Programs

- Information and Referral
  - Cultural Comp. Outreach with CBOs
  - Family Advocates
  - 1-1 appointments and drop in
  - Resource center at main and Satellites
  - Warm line

- Peer Support
  - Provision of groups in community
  - Peer support groups
  - Family Advocate

Advocacy for System Change

- Training to Family Leadership
  - Outgoing Support
  - Advocacy Training
  - Recruitment of family leaders

- Training and Technical Assistance to Providers at BHCS
  - Partnerships with BHCS Training department
  - Training to Providers Organizations and MHSA funded programs

OUTCOMES

- Engagement of underserved groups in services
- Improved family coping and reduced stress
- Improved understanding of mental illness and mental health system
- Integration of a family perspective and wellness and recovery principles in mental health system
DEMOGRAPHIC DATA ANALYSIS

To identify the location of the central FERC office and the satellite sites, the Start-Up Team analyzed both poverty data and data on BHCS client population, disaggregating this data by region and city. The percent of BHCS clients served closely mirrors the percent of the population that is less than 200% of the poverty rate. The summary below captures this dynamic.\(^\text{15}\)

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<th>Percent of County Poverty Population</th>
<th>North</th>
<th>Central</th>
<th>South</th>
<th>East</th>
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<td>Percent of Total County BHCS Adult Clients Served</td>
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<td>23.34%</td>
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<td>Percent of Total County BHCS Child Clients Served</td>
<td>52.57%</td>
<td>22.47%</td>
<td>10.97%</td>
<td>4.72%</td>
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</table>

Locating the FERC Central office in Oakland and allocating one-half of the Family Advocates to the Central FERC center is consistent with data that indicates that North County represents over 50% of the BHCS population. The location in Oakland is especially warranted given that over 85% of all BHCS clients reside in North or Central County. Ideally, the center should be located in East Oakland near BART and other public transportation to facilitate access from other regions.

The recommendation to locate one satellite in the Tri-Valley area is also consistent with the data, given that only 4% of the BHCS client population resides in that region. Further, the recommendation to locate the Tri-Valley satellite in Livermore is responsive to Livermore having four times the number of BHCS clients as Pleasanton.

---

\(^{15}\) Source: All data reported here was provided by Behavioral Health Care Services.
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<td>161,008</td>
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EXHIBIT Q
COUNTY OF ALAMEDA

for
OE/SD-2: Family Education and Resource Center

MEMORANDUM OF UNDERSTANDING
GUIDELINES AND SUMMARY LISTING

Please note, according to California Department of Mental Health regulations, clinical services MAY NOT be subcontracted to an organizational provider that is subject to Medi-Cal settlement requirements.

Throughout your proposal you will be describing how you propose to implement grant-funded activities. Many of these proposed steps may require the cooperation and involvement of sub-contracted project partners as well as other unfunded organizations, landlords, employers, training organizations, health organizations, etc. A key element of your proposal submission is the development of Memoranda of Understanding with each of the key collaborators in your proposal. BHCS is requiring all applicants to obtain detailed MOUs from each of these collaborators. In the event that your proposal includes no partners, it is important that Section G.2 articulates specifically how your staff will deliver all the services in your proposal.

MOUs should stipulate:

- The conditions under which partner organizations will participate in your project;
- The specific roles they will fulfill and either the job titles and/or the specific individuals that will perform these roles;
- The amount of funding (if any) that they will receive via sub-contract;
- The timeline within which these activities will be completed or conducted;
- The commitment to participate in ongoing project planning;
- The extent to which the partner was involved in the planning of your proposal;
- The history of collaboration that the organization has had with your organization; and
- The relevant experience and expertise of the partner

Signed MOUs should be submitted as ATTACHMENT B after Question G.2, with a table of contents indicating who has provided MOUs and a one or two sentence description of the contents of the MOU. In your narrative, when you describe the proposed actions of your partners, you should parenthetically note that these actions are supported by an MOU in ATTACHMENT B.

ATTACHMENT B will be rated by reviewers with 15 points being possible for proposals that have provided clear, detailed documentation of partner commitments. MOUs that vaguely describe planned involvement or fail to give a clear picture of how they will implement project strategies, will result in fewer points. If a proposal is submitted without any supporting MOUs, no points will be awarded. The absence of MOUs would also impact a proposal score for its Management Plan.

MOUs should be obtained from any organization that plays a substantive role in your proposal’s operations, however, you should not use the MOU framework for submitting letters of support. Reviewers will not consider or value MOUs that simply indicate that they support the proposal, see value in the services, or provide validation of the experience and expertise of the applicant. The MOU is designed to substantiate another organization’s direct involvement in your proposed project.
# EXHIBIT Q  
MEMORANDUM OF UNDERSTANDING  
TABLE OF CONTENTS

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