**ANNOUNCEMENT**

*REQUEST FOR PROPOSALS*

Alabama Department of Youth Services (DYS)

The Alabama Department of Youth Services hereby solicits Proposals from qualified parties to provide the following in-state residential services to juveniles:

|  |  |  |  |
| --- | --- | --- | --- |
| SERVICE CATEGORY | GENDER (NUMBER OF UNITS) | CAPACITY AND AREA | SPECIAL CONDITIONS |
| 1. Community Residential Treatment Program and Facility for Low Functioning Youth | Male (1) | 12-16 youth in each program | Medicaid Rehabilitation Provider, Licensed by DYS, Self-Contained Educational Program that meets the State of Alabama Education regulations |
| 2. Community Residential Treatment Program for Medium Risk Youth | Male (2-4) | 16-24 youth in each program. Facilities geographically dispersed throughout Alabama | Medicaid Rehabilitation Provider, Licensed by DYS, Self-Contained Educational Program that meets the State of Alabama Education regulations, Family-Oriented Program |
| 3a. Community Group Home Programs | Male (1-2) | 8-12 youth in each program | Licensed by DYS with an option for Medicaid Rehabilitation Provider, Self-Contained Educational Program that meets the State of Alabama Education regulations or community school educational program with delineated plans for summer enrichment |
| 3b. Community Group Home Programs with Self-Contained Educational Program | Male (1-2) | 8-12 youth in each program | Licensed by DYS with an option for Medicaid Rehabilitation Provider, Self-Contained Educational Program that meets the State of Alabama Education regulations |
| 4a. Drug/Alcohol Residential Treatment Program | Male (2-3) | 16-24 youth in each program | Medicaid Rehabilitation Provider, Licensed by DYS, Self-Contained Educational Program that meets the State of Alabama Education regulations |
| 4b. Intensive Drug/Alcohol Residential Treatment Program | Male (1) | 14-16 youth in each program | Medicaid Rehab Provider, Licensed by DYS, Self-Contained Educational Program that meets the State of Alabama Education regulations, Provision of drug/alcohol services in a protected setting to ensure community and youth safety |
| 5a. Intensive Multipurpose/ Multifunctional Female Residential Treatment Program for Drug/Alcohol, Step-down, & Short-term Services | Female (1) | 8-12 youth in each program | Medicaid Rehab Provider, Licensed by DYS, Self-Contained Educational Program that meets the State of Alabama Education regulations, Provision of drug/alcohol services in a protected setting to ensure community and youth safety, Ability to provide a continuum of service needs specifically step-down and short-term services |
| 5b. Female Residential Treatment Program for Drug/Alcohol & Step-down Services | Female (1) | 12-16 youth in each program | Medicaid Rehab Provider, Licensed by DYS, Self-Contained Educational Program that meets the State of Alabama Education regulations, Provision of a continuum of service needs which includes step-down services |
| 6. Female Intensive Residential Treatment Program | Female (1) | 12-24 youth in the program | Medicaid Rehabilitation Provider, Licensed by DYS, Self-Contained Educational Program that meets the State of Alabama Education regulations, Family-Oriented Program |

Proposals are due by **3:00 PM CDT on April 30, 2020** at the Department of Youth Services address below. A mandatory Proposers conference will be held at **10:00AM CDT on April 3, 2020 via teleconference. See page one (1) for instructions on how to join the teleconference.** Further details and expectations are outlined in the Request for Proposal Package. Submit this form with your Proposal.

For Regular U.S. Mail: For Courier Service:

**Alabama Department of Youth Services Alabama Department of Youth Services**

**P.O. Box 66 1000 Industrial School Road**

**Mt. Meigs, Alabama 36057 Montgomery, Alabama 36057**

**Attention: Pat Pendergast Attention: Pat Pendergast**

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposer’s Name & Address:** |  | | |
| **Contact Person:** |  | | |
| **Title:** |  | | |
| **Phone:** |  | **Fax:** |  |

**AFFIRMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| STATE OF ALABAMA  DEPARTMENT OF YOUTH SERVICES | | REQUEST FOR PROPOSAL | |
| DATE ISSUED: March 19, 2020 | |
| **FOR:** RESIDENTIAL PLACEMENT OF JUVENILE OFFENDERS | | PROPOSAL MUST BE RECEIVED BEFORE:  DATE: April 30, 2020 TIME: 3 PM CDT | |
| PROPOSAL MUST BE PUBLICLY OPENED:  DATE: May 1, 2020 TIME: 10 AM CDT | |
| TO BE COMPLETED BY PROPOSER  INFORMATION IN THIS SECTION SHOULD BE PROVIDED AS APPROPRIATE. THIS FORM MUST BE IN INK OR TYPED WITH ORIGINAL SIGNATURE AND NOTARIZATION.    1. PROGRAM CAN BE STARTED WITHIN \_\_\_\_\_\_\_\_ DAYS AFTER EXECUTION OF CONTRACT.  2. PRICES VALID FOR ACCEPTANCE WITHIN \_\_\_\_\_\_\_\_\_\_\_\_\_ DAYS.  3. FEDERAL EMPLOYER ID NO. (IF NO FEIN, ENTER SSN): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SUBMIT THIS FORM WITH YOUR PROPOSAL:  REGULAR U.S. MAIL COURIER SERVICE  Alabama Department of Youth Services Alabama Department of Youth Services  P.O. Box 66 1000 Industrial School Road  Mt. Meigs, Alabama 36057 Montgomery, Alabama 36117  Attention: Pat Pendergast Attention: Pat Pendergast | | | |
| SIGNATURE AND NOTARIZATION REQUIRED  I HAVE READ THE ENTIRE REQUEST FOR PROPOSAL AND AGREE TO PROVIDE THE SERVICES PROPOSED AT THE PRICE QUOTED. I HEREBY AFFIRM I HAVE NOT BEEN IN ANY AGREEMENT OR COLLUSION AMONG PROPOSERS IN RESTRAINT OF FREEDOM OF COMPETITION BY AGREEMENT TO SUBMIT A PROPOSAL AT A FIXED PRICE OR TO REFRAIN FROM SUBMITTING A PROPOSAL. | | | |
| SWORN TO AND  SUBSCRIBED BEFORE ME THIS  \_\_\_\_\_ DAY OF \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  NOTARY PUBLIC | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  COMPANY NAME  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  MAIL ADDRESS  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  CITY, STATE, ZIP  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PHONE INCLUDING AREA CODE | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AUTHORIZED SIGNATURE (INK)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TYPE/PRINT AUTHORIZED NAME  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  TITLE  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  FAX NUMBER |

**ALABAMA DEPARTMENT OF YOUTH SERVICES**

**REQUEST FOR PROPOSALS**

**Proposals Due By**

**3 PM CDT on April 30, 2020**

Submit to:

*For Regular U.S. Mail*:

Alabama Department of Youth Services

P.O. Box 66

Mt. Meigs, Alabama 36057

Attention: Pat Pendergast

*or*

*For Courier Service:*

Alabama Department of Youth Services

1000 Industrial School Road

Montgomery, Alabama 36117

Attention: Pat Pendergast

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**ATTACHMENTS**

1. Board Resolution
2. Budget Format
3. Cost Proposal – **MANDATORY**
4. Estimated Medicaid Billing Units[[1]](#footnote-1)

**INTRODUCTION**

The Alabama Department of Youth Services (hereinafter referred to as “DYS”), is an agency created by state law and is charged with the responsibility of rehabilitating delinquent youth (Ala. Code § 44-1-1 *et. seq.* 1975). The statutory authority of DYS to enter into any contract with any private person, group, organization, or agency capable of contracting for needed services is provided in the Code of Alabama, 1975, § 44-1-24 as amended. Act 2001-955 provides additional mandates that state agencies must follow. Among those requirements is a provision that requires the execution of a disclosure statement by Proposers. Proposers will be required to provide the disclosure statement during contract negotiations. Proposers should follow those provisions when developing their Proposals for this initiative.

This Request for Proposal (RFP) package contains all the information and forms necessary to complete and submit a Proposal for the services indicated herein. The RFP is organized to promote an orderly analysis of the requirements of DYS. The RFP also provides a basis for developing Proposals which should contain all the information necessary for DYS to conduct an evaluation of the Proposals received. The RFP contains several sections and attachments. Each section should be read in its entirety for it establishes the minimum requirements for the format and the contents of the Proposal. The original Proposal and the *Cost Proposal (Attachment 3*) shall be signed by the official authorized to bind the Proposer. For not-for-profit organizations, such authority shall be evidenced by a *Board Resolution (Attachment 1)*.

The term “Proposer” refers to the entity or organization submitting a Proposal in response to this RFP. The term “Proposal” refers to a complete proposal, including the attachments and exhibits herein described, submitted in response to this RFP. The term Vendor refers to a successful Proposer that has entered into a contract with DYS to provide in-state community-based diversion services for court involved youth.

This RFP contains general information and requirements which are applicable to the program service categories indicated herein. This RFP provides the opportunity for Proposers to develop Proposals for nine (9) service categories. Proposers seeking contracts for more than one service category must submit separate Proposals for each such service category. Attachment 3: Cost Proposal is provided in the attachment section of the RFP for the responder to provide the per diem costs for the initiative that the Proposer addresses.

Any amendments to the RFP will be issued to all Proposers receiving the RFP. This will be done sufficiently in advance of the Proposal due date to allow all Proposers to take all changes into account when preparing their Proposal(s).

A Proposer’s conference will be held at 10:00am on **April 3, 2020** via teleconference. The Proposer’s conference is mandatory to all Proposers who wish to submit a Proposal for any of the service categories. Any questions concerning the RFP package will be addressed at this meeting. To receive the teleconference link email [pat.pendergast@dys.alabama.gov](mailto:pat.pendergast@dys.alabama.gov) by **April 2, 2020**.

The deadline for submission of written questions concerning this RFP package is **March 26, 2020.** Questions may be submitted via regular U.S. mail, Attn: Pat Pendergast, P.O. Box 66, Mt. Meigs, Alabama 36057, or email at [pat.pendergast@dys.alabama.gov](mailto:pat.pendergast@dys.alabama.gov).

Information regarding who submitted Proposals will not be available by telephone or in writing. Proposers interested in this information should attend the RFP opening on **May 1, 2020** in the DYS Board Room, Mt. Meigs Campus, Montgomery, Alabama. For Proposers unable to attend, information regarding who submitted Proposals will only be available after award of the contract.

Alabama Law provides that a foreign corporation (an out-of-state company/firm) may not transact business in the state until it obtains a Certificate of Authority from the Secretary of State (Section 10-2b-15.01, Code of Alabama 1975). To obtain forms for a Certificate of Authority contact the Secretary of State, Corporations Division, (334) 242-5324.

All Vendors must have an activated account within STAARS. If needed, the account can be activated by verifying the Taxpayer ID Number (TIN) and creating a VSS portal login ID. This can be done by visiting the VSS Portal at <https://procurement.staars.alabama.gov>. Once the account is created, the Vendor should follow the instructions on the STAARS website to access the account. Finance and DYS will no longer be able to update or correct billing addresses. This will be the responsibility of the Vendor.

According to STAARS, the name and address on the contract, E-Verify, and invoice must be the same. Please note that if the Vendor is doing business under another company, a Company Profile Page must accompany the E-Verify to associate the two companies.

ACT 2001-955 requires a disclosure statement to be completed and filed with all Proposals, bids, contracts, or grant Proposals submitted to the State of Alabama in excess of $5000. The form is available at <https://www.alabamaag.gov/Documents/files/File-AL-Vendor-Disclosure-Statement.pdf>, and instructions to complete the form is available at <https://www.alabamaag.gov/Documents/files/Vendor-Disclosure-Instructions.pdf>. ACT 2011-535, as amended by Act 2012-491, requires that you enroll in the federal E-Verify program if awarded the contract.  A completed form must be attached. Instructions are available at <http://immigration.alabama.gov/eVerify.aspx>.

The evaluation criteria outlined in this RFP are intended to assist DYS in the evaluation of Proposals. The actual award of contracts may also be based upon additional information obtained in interviews with Proposers, additional written information obtained from Proposers, and/or information concerning the Proposer’s previous performance in the operation of similar programs. The Executive Director of DYS may choose to negotiate directly with Proposers on the final per diem rate to be paid by the State of Alabama.

DYS reserves the right to reject any and all Proposals submitted in response to this Request. DYS is not required to accept any Proposal based solely on costs and is not bound to accept the lowest costs Proposal in any service category.

**PROPOSAL SUBMISSION**

One (1) original Proposal and one (1) electronic searchable PDF or MS Word copy of the Proposal saved on a USB flash drive must be received by DYS by 3:00 p.m. CDT on **April 30, 2020** at the address below. Faxed or emailed proposals will not be accepted.

MAILING ADDRESS FOR REGULAR U.S. MAIL DELIVERY:

Alabama Department of Youth Services

P.O. Box 66

Mt. Meigs, Alabama 36057

Attn: Pat Pendergast

OR FOR COURIER SERVICE:

Alabama Department of Youth Services

1000 Industrial School Road

Montgomery, Alabama 36117

Attn: Pat Pendergast

Proposals will be opened at 10:00 a.m. CDT on **May 1, 2020** in the DYS Board Room, Mt. Meigs Campus, Montgomery, Alabama.

**GENERAL INFORMATION**

The Alabama Department of Youth Services (hereinafter referred to as “DYS”) is soliciting Proposals for in-state services for juvenile offenders. The statutory authority of DYS to enter into any contract with any private person, group, organization, or agency capable of contracting for needed services is provided in the Code of Alabama, 1975, § 44-1-24 as amended. Act 2001-955 provides additional mandates that state agencies must follow. Among those requirements is a provision that requires the execution of a disclosure statement by Proposers. Proposers will be required to provide the disclosure statement during contract negotiations. Proposers should follow those provisions when developing their Proposals for this initiative.

The purpose of the RFP process is to encourage private organizations to develop program models which will provide cost effective services which are based on research evidence. These services should be designed to aid DYS in meeting the service needs of youth committed to the care and custody of DYS.

Each Proposal will be judged on its own merit. Proposers should assess the need for therapeutic services and staffing levels consistent with the characteristics of the population to be served. Proposers should be mindful of existing fire, health, and life safety concerns when preparing Proposals.

DYS will not provide start-up funds or cash advances to successful Proposers. Therefore, DYS is seeking providers who meet all necessary qualifications and are financially and otherwise capable of immediate response and compliance to the time tables for the beginning of services.

The Proposer must have the financial resources to operate for ninety (90) days as demonstrated by an audited financial statement prepared by a Certified Public Accountant or a letter of credit from a duly recognized financial institution equal to 25% of the first year’s operating budget. Proposal(s) not in compliance will be rejected.

Successful Proposers must furnish a performance bond equal to 25% of the operating budget within ten (10) working days after notice of award. It shall be made payable to DYS and can be a cashier’s check, other type of bank certified check (personal/company checks unacceptable), money order, an irrevocable letter of credit, or surety bond issued by a company authorized to do business in the State of Alabama. Under special circumstances a Proposer may make a request to the Executive Director to waive this requirement.

The Proposer must have a minimum of $2,000,000 liability coverage with $1,000,000 for each occurrence and worker’s compensation insurance in accordance with the laws of the State of Alabama. The Proposer is responsible for damage caused by their employees. Insurance must be in effect for the entire length of the contract. The Proposal shall include a statement of insurability as an attachment. At the time of the award, the successful Proposer shall provide an insurance certificate to DYS. This announcement does not commit the State of Alabama or DYS to award contracts or to pay for any costs incurred in the preparation of Proposals. DYS reserves the right to accept or cancel this announcement or any work statement component at any time.

The contracts awarded shall be based on the Proposals considered most advantageous to DYS as indicated by the evaluation criteria contained in this RFP.

The award of a contract does not automatically commit DYS to any expenditure. In accordance with state statutes any contract must be approved by the Contract Review Permanent Legislative Oversight Committee (known as the Legislative Contract Review Committee) and signed by the Finance Director and the Governor before a legal commitment can be made to expend public funds for a contract.

The deadline for submission of fully executed contracts to the Legislative Contract Review Committee is 1:00 p.m. on August 24, 2020. Therefore, fully executed contracts, along with all required exhibits and attachments, must be submitted by the successful Proposer to the DYS Legal Division by close of business on Tuesday, August 11, 2020.

DYS may request additional information for the purpose of evaluating the Proposal. The Proposer must submit requested information within **five (5)** working days of the request or the Proposal will be disqualified.

For this RFP the following definitions shall apply:

(a) Vendor: A successful proposer that has entered into a contract with DYS to provide in-state rehabilitative services to delinquent youth committed to DYS.

(b) Affirmative Action Policy: The policy adopted by a Vendor that is in full compliance with applicable provisions of federal law and the Alabama State Law and that ensures equal opportunity in the areas of employee selection, retention, rate of pay, demotion, transfer, layoff, termination, and promotion regardless of age, disabilities, race, religion, sex, or ethnic origin.

(c) Prison Rape Elimination Act (PREA): The federal law passed in 2003 that requires agencies to establish a zero tolerance policy towards sexual assault and sexual harassment in confinement settings, create protocols and procedures in response to such allegations, and adhere to mandatory standards related to the law.

(d) Juvenile Delinquent: A person below the age of 21 who has been adjudicated delinquent by a court of competent jurisdiction on the basis of commission of an act or omission to act that would have constituted a crime had the person been 18 years of age or older at the time of the act or omission to act.

(e) Resident: A Juvenile Delinquent who has been committed to DYS.

(f) Gender-Specific: A specialized program of activities that will meet the developmental needs of both males and females and identifies the manner in which the program will meet Gender-Specific treatment goals. A strong emphasis will be placed on Gender-Specific programs directed toward females. Additionally, there is considerable evidence that a large percentage of girls in placement have suffered from trauma and abuse. A Gender-Specific program that provides appropriate trauma intervention services and encompasses the developmental needs of girls is required.

(g) Serious Juvenile Offender (SJO): A child adjudicated for certain serious offenses and specifically designated a serious juvenile offender by the committing juvenile judge. SJOs must remain in DYS custody a minimum of 12 months in a secure facility maintained and staffed separately and which implements programs for such offenders.

(h) Self-Contained Educational Program: Vendor provided educational services in compliance with Federal and Alabama state laws and regulations. Requirements include program youth participating in a twelve month education program. The program must provide state approved courses and services to meet the needs of all students, including those with special needs and limited language students such as English language learners (ELL) or English as a second language (ESL).

(i) Treatment Program: A structured, evidence-based rehabilitative program, which serves youth who have been adjudicated delinquent and who are in need of specialized services in a supervised treatment environment twenty-four (24) hours per day.

(j) Co-Occurring: A secondary rehabilitative or cognitive disorder that exists in addition to the identified problem.

(k) Safe Rooms: The use of a single occupancy room which meets the requirements for a secure room but is not necessarily the youth’s own room. The requirements for a single occupancy room are found in DYS Operations Manual in Chapter 7.8 and 13.3.1. Youth who are placed in a single occupancy room designated as a Safe Room are those who are classified as meeting the criteria established in Chapter 13.10.3. Students placed in Safe Rooms require maximum contact with adult supervisors, including a minimum of 15 minute visual observation. The use of Safe Rooms may also be considered use of Isolation. All facilities are to minimize the use of any type of Room Confinement, Isolation, and segregation, particularly as a form of behavior management.

(l) Room Confinement: Instances when a youth is confined for cause or consequences for 15 minutes or more in the room or cell in which he or she usually sleeps, rather than being confined in an Isolation cell or room.  Youth may be transferred to a designated unit for confinement.  Room Confinement may occur in locked or unlocked rooms but cannot occur in open-bay dormitories.

(m) Isolation:  Instances when a youth is confined alone for cause or consequences for 15 minutes or more in a room other than the room or cell in which he or she usually sleeps.  Isolation can occur in locked or unlocked rooms but cannot occur in open-bay dormitories.

(n) PowerSchool: The state mandated web-based student information system that stores data such as standardized tests, daily class work, credits, attendance, discipline, and health and special education data.

(o) No Eject/No Reject: A policy that recognizes that services should be based on the needs of the youth and an expectation that contract providers should provide services to the types of youth placed with the provider by contractual agreement. DYS maintains the right to determine the appropriate service program based on the individual needs of the child. Every effort will be made to place youth in the program which DYS determines best meets the youth's individual needs. That decision will be made by DYS only. The Vendor will not have the right to reject the youth. The Vendor should document treatment efforts prior to any request for placement reconsideration to remove any youth from the program. This request must comply with DYS policy, procedure, and criteria developed by DYS. At a minimum, no youth placed in a program will be rejected or ejected without adhering to said procedures.

(p) Trauma-Informed: A model promoting healing, wellness, and recovery for youth that have experienced childhood trauma. This model includes providing services in a compassionate, culturally sensitive, safe treatment environment that helps youth recognize triggers of their traumatic experiences and how to develop and utilize coping strategies in response to those triggers. Building a trusting and transparent relationship among staff and youth is essential.

(q) Trauma-Responsive: Addresses the need for an entity to consider every aspect of the organization in relation to the provision of trauma related services and how those services are operationalized throughout the program. This requires a review of programming, treatment environment, values, staff, training, physical environment, and agency culture. Ongoing assessment and improvement is necessary to ensure services are continuously trauma-responsive.

DYS and any duly authorized representative of DYS shall have open access to all facilities, records (including electronic files and documentation), and books of Vendors for audit and compliance purposes pertinent to the contract.

**The original Proposal and the *Cost Proposal (Attachment 3*) shall be signed by the official authorized to bind the Proposer. For not-for-profit organizations, such authority shall be evidenced by a *Board Resolution (Attachment 1)*.**

By submission of a Proposal, the Proposer certifies that in conjunction with this Proposal:

* The prices in the Proposal have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition as to any matter relating to such prices with any other Proposer.
* No attempt has been made or will be made by the Proposer to induce any other Proposer to submit or not submit a Proposal for the purpose of restricting competition.

The “Affirmation” document must be executed to confirm that the Proposer has followed these ethical standards.

**SUBCONTRACTS:**

The Proposer **must** specify in the Proposal which service(s), if any, will be subcontracted. For the purposes of this solicitation, a “subcontractor” is an individual or company who assumes some of the obligations of the Proposer via a contract. DYS will have no direct contractual relationship with the individual or company performing that portion of the program. All subcontracts shall be subject to the same clauses required by law and by the primary contract. All subcontracts must be approved in writing by the Executive Director of DYS if a contract is awarded. Proposer must submit qualifications of any subcontractors.

**AFFIRMATIONS:**

The Proposal must contain a suitable Affirmative Action Policy to be adopted by Proposers. The policy must comply with all applicable Alabama and federal legal requirements. The Proposal must contain a suitable plan for compliance with the Americans with Disabilities Act. The Proposer must certify that they operate in a “drug-free” environment.

The Proposal should be prepared in a straightforward manner and include a concise description of the Proposer's ability to meet the requirements of the RFP.

**DOCUMENTATION REQUIREMENTS:**

* **“ANNOUNCEMENT”** of the RFP
* **“Affirmation”** fully completed and executed.
* **Insurance Requirements** *-* Submit appropriate documentation of insurance for liability coverage at a minimum of $2,000,000 with $1,000,000 for each occurrence.
* **Fully Developed Budget –** May be submitted under separate folder as proprietary information. This information will be used in the review process to ascertain cost effectiveness of proposed program.
* ***Cost Proposal Summary*** **– Attachment 3**
* **Estimated Medicaid Billing Units – Attachment 4[[2]](#footnote-2)**

**PROGRAM PERFORMANCE AND SANCTIONS**:

While it is a goal of DYS for all Vendors to administer a program of rehabilitation for youth which meets the performance requirements of this RFP, it is necessary to have a system of monitoring to assure program performance at the highest possible level. A contract resulting from this RFP may be sanctioned or terminated by DYS for:

* Failure to comply with provisions of the contract, including failure to follow licensure obligations, administrative code requirements, and the policies and procedures of DYS
* Un-availability of funds
* Repeated failure to comply with a corrective plan of action

Sanctions may be imposed on any provider who fails to adhere to any provision of the RFP and/or contract, either intentionally or through gross negligence. These sanctions will/can be issued by DYS or a designated representative. Sanctions are intended to create a positive change of compliance with the RFP and/or contract, and are not intended to cause any negative or detrimental effect on the services available to youth. Continued/repeated sanctions may jeopardize the future of the provider's contract with DYS. Sanctions may include, but are not limited to:

* Develop a corrective plan of action
* Placement on probationary status
* Reducing the number of youth assigned to the facility
* Monetary/financial sanctions as specified by DYS within the contract document
* Wholly or partially suspend or terminate the current award for the Proposer’s program
* Take other remedies that are legally available

**PROCESS AND PROCEDURES:**

DYS publishes rules for the operations of the various programs which are subject to the licensure authority of the agency. These rules are promulgated under the provisions of the Alabama Administrative Procedures Act. These rules describe the content of program requirements as well as the procedures for handling programs which are not in compliance with requirements. The general rules for licensure and sanctioning authority are located in the Administrative Code, Chapters 950-1-4. Specific rules for community residential programs are located in 950-1-6. The administrative code is available for review at [www.alabamaadministrativecode.state.al.us](http://www.alabamaadministrativecode.state.al.us).

**PREA:**

Successful Proposers must comply with the Prison Rape Elimination Act (PREA) of 2003 (Federal Law 42. U.S.C. 15601 ET. Seq.), all applicable PREA standards, and DYS policies related to PREA which outlines measures for the prevention, detection, monitoring, investigating, and eradicating all forms of sexual abuse within all DYS operated or contracted facilities/programs/offices. Proposers must acknowledge that in addition to “self-monitoring requirements” DYS will conduct announced or unannounced compliance monitoring activities, including on-site visits. A failure to comply with PREA, including PREA standards and DYS policies, may result in termination of the contract. Additional PREA related information and resources may be found at <http://www.prearesourcecenter.org> and <http://www.dys.alabama.gov>.

**HIPAA COMPLIANCE AND CONFIDENTIALITY:**

Vendors must comply with the requirements of the Health Insurance Portability and Accountability Act. HIPAA involves protecting the privacy and security of Protected Health Information (PHI) of Residents that Vendors will have access to. Vendors must enter a Business Associate Agreement with DYS. In addition, Vendors must comply with state law preventing the disclosure, except in specific limited circumstances, of any information concerning any youth for whom DYS provides services or care, which information is derived from the records, papers, files, or communications of DYS. (Code of Alabama, § 44-1-39, 1975, as amended).

**HEALTH CARE COVERAGE:**

Vendors must make every reasonable effort necessary to obtain health care coverage for program youth. Each youth in the Vendor’s care will be enrolled in the Children’s Health Insurance Program (CHIP/Medicaid) through applications provided by DYS. Some youth may also have private health insurance coverage through their guardian. Those youth who are enrolled in ALL Kids will not be eligible for Medicaid coverage. If the youth has private insurance through his/her family, the Vendor will be responsible for collecting information regarding that insurance (i.e. Name of insurance company, policy number and holder, etc.). All routine medical and/or dental services, co-pays, expenses, and medications not paid by Medicaid, private health insurance, or ALL Kids will be the Vendor’s responsibility. The cost for non-routine expenses not covered by a youth’s designated health care provider will be coordinated between DYS and the Vendor on a case-by-case basis. Anticipated expenses not covered by health care providers must be reflected in the program budget.

**MEDICAID REHABILITATIVE SERVICES:**

* All rehabilitative services provided by the Vendor shall be rendered in compliance with the requirements outlined in the most current Medicaid Code Chapter 105 Rehabilitative Services Manual, which is available for review at[www.medicaid.alabama.gov](http://www.Medicaid.alabama.gov). It will be a condition of the Vendor’s contract to ensure that rehabilitative services meet the requirements in the above mentioned manual. The Vendor’s contract will provide for monitoring and chargebacks to the Vendor for any charges against DYS that were assessed as a result of the Vendor’s failure to meet Medicaid requirements. The Vendor will also be responsible for having on file the necessary credentials (i.e. degrees, licenses, etc.) of those professionals providing rehabilitative services and for submitting such credentials to DYS for approval and enrollment.
* All rehabilitative services shall be provided based on the determination of medically necessary services through an assessment/intake process. The assessment process shall culminate in an individualized service plan also known as DYS service plan. The required components of the assessment process are listed in the most current Medicaid Code Chapter 105 manual.

* Vendors must meet requirements of the most current Medicaid Code - Chapter 105 - Rehabilitative Services - DYS which requires that Vendors utilize an intake evaluation process resulting in a written treatment plan (service plan) completed within 10 days of admission. Written treatment plans (service plan) must identify clinical treatment focus, necessary services and specific rehabilitative services to meet needs, referrals for other needed services, expected processes/outcomes that youth and therapist will work toward. Treatment plans must be approved by professionals as described in the most current Medicaid Code Chapter 105. Treatment plans must be reviewed at least once every three months (within 90 days) by eligible staff to determine the youth’s progress toward treatment objectives, the appropriateness of the services furnished, and the need for continued treatment. Documentation of this Medicaid Rehabilitative treatment plan review is required in the youth’s treatment record.
* Documentation in the youth’s record for each session, service or activity for which Medicaid reimbursement is requested must also comply with Medicaid rules in Chapter 105.
  + - * + The Vendor will be solely responsible for submitting and re-submitting/reversing (when necessary) Medicaid claims using a DYS approved process. The Vendor is responsible for documenting the provision of rehabilitation services in a manner that substantiates the Medicaid claim and meets Medicaid requirements for record-keeping and retention.
  + The Vendor is subject to an audit of its records regarding Medicaid claims and must keep accurate records and maintain original source documentation in preparation for such an audit. An audit of records and documentation may result in DYS being assessed charges if a determination is made that a Vendor’s records and documentation are inadequate or inaccurate. ***Charges assessed to DYS shall be recouped from the contracted Vendor.***
* The Vendor will have primary responsibility to bill Medicaid for rehabilitative services rendered upon accepting physical custody of the youth from DYS. All funds will be sent directly to DYS. These Medicaid funds shall be utilized to pay Vendors for rehabilitative services delivered to youth in their care. The Vendor must maintain a direct deposit mechanism to receive Medicaid payments.
  + The Vendor will provide rehabilitative services in accordance with the Alabama Medicaid Agency’s Rehabilitative Service Manual and will bill for all eligible rehabilitative services. DYS personnel will monitor Medicaid claims submitted by the Vendor. Failure to submit adequate and timely claims could result in DYS withholding a portion of the Vendor’s per diem or other corrective action.
* The Vendor will be expected to work with any duly authorized representative of DYS and provide open access to all facilities and records including electronic files/documentation.
* Medicaid Rehabilitative Services Providers must complete the Estimated Medicaid Billing Units form (Attachment 4)[[3]](#footnote-3).

**The successful Proposer must be able to begin operations and accept youth by October 1, 2020*.* Failure to begin operations within this period of time may result in cancellation of the contract.**

**PROGRAM INFORMATION**

**PERFORMANCE/STATUS REPORT:**

Proposers’ contracts with DYS will require submission of quarterly reports for the quarters ending December 31st, March 31st, June 30th, and September 30th. These reports are due by the 15th of the month following each quarter. An annual report shall be due within sixty (60) days after the end of each contract year. The quarterly reports and the annual report shall reflect the efficiency and effectiveness of services and the outcome of the services for youth served during the program. The performance areas to be addressed in these reports shall include, but not be limited to the following:

1. A list, including names and dates, of the following: any escapes, AWOLs, transfers, number of participants who successfully completed the program with the length of stay/number of days
2. The number of youth who substantially complete the service plan, including an average percentage of treatment plan objectives that are successfully completed at release
3. Compliance with agency priority referral policies, as contained in the DYS Operations Manual
4. Number of youth who attained GEDs, Alabama high school diplomas, and the number of students who received special educational services while enrolled in the program
5. Pre and post testing data in the areas of math and reading for youth enrolled more than 90 days
6. Number of youth who, while in the program, were referred to and participated in higher education, vocational training, Vocational Rehabilitation Services (VRS), enrolled in Work Keys, and other community-based programs
7. Gender-Specific services provided in the program
8. Number of staff completing DYS training and plans for meeting ongoing training needs
9. Incident reports that follow the DYS incident reporting policy, including but not limited to, the number of escapes, fights, physical abuse, PREA allegations (including substantiated and unsubstantiated reports), and suicide attempts
10. Psychological services including the number of referrals, access to services, and timeliness of services
11. Medical services provided, including dates, number of referrals, reasons for the referrals, access to physicians, nurses, and hospital visits
12. Number of the following: use of Isolation, Safe Rooms, Room Confinement, restraints
13. Number of review of placements due to escapes, AWOLs, assaults, injuries, health related and safety issues
14. Reports that identify cost associated with the delivery of each specific treatment service. Vendors must distinguish, at a minimum, between treatment, administration, room and board, educational, medical and un-allowed cost such as lobbying, fund-raising, and similar cost

If DYS develops the capacity to collect these data electronically, the Vendor may be required to participate in the electronic data collection process.

**FISCAL CONSIDERATION/PAYMENT:**

DYS anticipates that a twelve (12) month contract will be awarded beginning October 1, 2020 and ending September 30, 2021, with an option to issue a second or third one year contract with the same terms and conditions. The second or third contract, if agreed by both parties, would begin the day after the first or second contract expires. Any successive contract must have written approval of both the state and the Vendor no later than ninety (90) days prior to the expiration of the previous contract. A contract may be terminated by either party with a thirty day written notice.

Payment for services will be on a per diem basis (Attachment 3). Proposers must complete the Program Budget (Attachment 2) and provide the calculation that resulted in the per diem for each program for which a proposal has been submitted. The calculated per diem on Attachment 2 must match the per diem indicated on Attachment 3.

The Vendor will invoice DYS each month in arrears for the number of youth served that month. Payment will be made for each day each youth is served, beginning the day of arrival at the facility. No payment will be made for the day of departure of the youth. When there is an interruption of services due to the absence of the youth for hospitalization or court appearance, the Vendor may invoice DYS for those days, not to exceed three (3) days unless prior authorization is requested and approved by the DYS Deputy Director of Community Services or designee. When there is an interruption of services due to an escape of the youth, payment will be allowed for the day of departure, but no other day(s) thereafter unless the youth is returned to that facility at which time, payment may be resumed. DYS will provide an invoice format to the successful Proposer for use in invoicing monthly.

Medicaid Rehabilitation Services are required to be provided within applicable service categories. Therefore, the Vendor will be required to file accurate and timely claims each month with the Alabama Medicaid Agency which follow established procedures of that agency. Billing manuals are provided by the fiscal agent for the Alabama Medicaid program. All funds will be sent directly to DYS. Failure to file accurate and timely claims may result in a delay of payment to the Vendor.

**SPECIAL/MANDATORY REQUIREMENTS:**

The Vendor shall abide by all relevant and applicable laws and policy and procedures as they now exist or as they may be amended. The Vendor is responsible for staying abreast and knowledgeable of all applicable state and federal laws and policies of DYS. The Vendor shall hold DYS harmless from any consequences occurring as a result of, arising out of, or as related to any failure on the part of the Vendor to abide by such laws and/or policies. If a Vendor provides sufficient justification that an amended regulation or procedure results in a substantial and unforeseen change in the services the Vendor is required to provide, the Vendor will have the opportunity to discuss adjusting the per diem rate with the Executive Director of DYS.

The Proposer must provide certificate of insurability. The successful Proposer shall be required to obtain and maintain insurance coverage as outlined in this RFP.

The provider must have an operating license from DYS prior to placement of youth.

Medicaid Rehabilitative Services Providers must complete the Estimated Medicaid Billing Units form (Attachment 4)[[4]](#footnote-4).

The successful Proposer will abide by all requirements outlined in this RFP, including the **Special/Mandatory Requirements** section delineated above.

**SCHEDULE OF EVENTS**

**Request for Proposal Announced:**  **March 19, 2020**

**Deadline to Receive Written Questions:**  **March 26, 2020**

**Deadline to Receive Teleconference Link: April 2, 2020**

**5:00 p.m.**

**Proposers Conference: April 3, 2020**

Attendance is mandatory for **all** Proposers **10:00 a.m.**

*Location*: Teleconference, see page one for details

**Proposals Due by 3 PM CDT on: April 30, 2020**

**Proposals Opened:**  **May 1, 2020**

*Location*: DYS Board Room **10:00 a.m.**

1000 Industrial School Rd

Montgomery, AL 36117

**Review of Proposals:**  **May 4, 2020 – May 29, 2020**

**Notification of Successful Proposer:**  **June 5, 2020**

**Completion of Negotiations and Execution of Contract**:  **June 29, 2020**

**Submission of Fully Executed Contracts, with Attachments: August 11, 2020**

**Deadline to Begin Program Operations: October 1, 2020**

DYS reserves the right to deviate from this schedule.

**PROPOSAL CONTENT**

The Proposal shall contain at a minimum the following:

Identifying Information

* Name of Proposer
* Name of contact person for Proposer
* Telephone number and e-mail address for contact person
* Complete mailing address
* Municipal address for facility to be used for services
* Federal tax identification number
* Proposer status (i.e.: non-profit, proprietorship)
* Brief history of Proposer

**FAILURE TO PROVIDE REQUIRED INFORMATION AND/OR DOCUMENTATION AND FAILURE TO ADHERE TO THE FORMAT AND PAGE LIMITS INDICATED BELOW WILL RESULT IN THE DISQUALIFICATION OF THE PROPOSAL.**

Proposers shall adhere to the following format in the preparation of Proposals:

* One (1) original Proposal with proprietary information and notarized documents and one (1) electronic searchable PDF or MS Word copy of the Proposal (excluding proprietary information) saved on a USB flash drive shall be submitted
* Proposal shall be typed on letter-size white paper, 12pt font size, 1 inch margins, no typeface preference
* Pages shall be numbered consecutively throughout the Proposal
* The original Proposal must be clearly marked “Original”
* The cover of the Proposal shall indicate the Proposal is submitted in response to the Request for Proposal and indicate the service category being proposed
* The title page shall state the name, title, address and telephone number of the Proposer and the service category being proposed
* A table of contents page shall indicate page locations for each of the principal sections of the Proposal and additional information as appropriate
* Each page of the Proposal shall include the name of the Proposer and service category proposed in the upper right hand corner. The Proposal shall be tabbed and divided into three parts:
  + Technical: The narrative description of the program (page 15), **must not exceed forty (40) double-spaced typewritten pages; addenda, if necessary, must not exceed thirty (30) pages, labeled and listed in the table of contents**
  + Qualifications of Proposer: Capability Statement (page 21), **must not exceed thirty (30) pages**
  + Cost (page 23): The completed and signed *Cost Proposal* (Attachment 3) must be included in the Proposal. Failure to submit a completed and signed Cost Proposal will result in automatic disqualification of the Proposal.
* Proposer Disclosure Statement (page 2)
* Federal E-Verify Program Enrollment Verification Form (page 2)
* Proprietary financial information should only be submitted in the original Proposal or may be provided in a separate sealed envelope, which will only be available to DYS. The financial information will be returned to all Proposers upon award or upon completion of the evaluation process.

**The Proposal describes the Proposer’s scope of work and programs and services to be provided. Thus**, **the Proposal package is the Proposer’s plan for carrying out their work as described within the Proposal. Therefore, the Proposal will be a part of the contractual agreement between the Proposer and DYS.**

**Technical: The Program Description**

When preparing the program description, extreme care shall be taken to accurately describe the program, services, staffing, treatment patterns, etc. Successful Proposers will be held responsible for the continued provision of services as described in the Proposal for the entire contract period. If the Proposer chooses to contract with other service providers to meet any of the requirements outlined in the RFP, then a detailed description of those services is required. It is the Proposer’s responsibility to ensure the descriptions meet the guidelines noted within this RFP. For example, if a community mental health center will be used to meet the mental health needs of youth, a detailed description of those services and their scope of work is required.

Literature Support and Need Documentation: The problems the program addresses

The need documentation and research section must provide a clear description of the nature of the problems of the youth being served and the conceptual basis for the Treatment Programs to be utilized with this population of youth. Current research literature shall be presented to describe the client and client systems, Trauma-Informed and Trauma-Responsive care and staff education, including the problems confronting the delivery of services to this population as described by the category. Literature support shall provide the basis for the selection of the service model(s) to be used in the program and services to be delivered. Research findings shall support the treatment approach being proposed. The program and services shall be linked to the philosophy and conceptual basis provided by research studies. The literature and program support information shall aid the Proposer in developing a logic model which pulls together the various **theories and approaches to be integrated within a strength-based, holistic program approach.**

The problem statement can use information from the Proposer’s own experience with the population to be served, including successes and difficulties in serving the youth being addressed. However, descriptive information, including program design, without the support of research and practice literature, will be deemed insufficient.

Goals, Priorities, and Objectives

Establishing program goals, determining priorities, and developing measurable objectives is a critical aspect of effective program design. Generally, a broad program goal shall be crafted, followed by sub-goals which address the results anticipated for each program component. Each sub-goal will then have a set of objectives which will reflect, with specificity, the measurable attainments anticipated by the specific program component. The goals and objectives shall be based on the needs documentation as described above and be conceptually linked to the evidence-based research provided within the literature review. **It is DYS’ expectation that ninety percent (90%) of program participants in the service category will meet the stated objectives of the program and successfully complete the program.**

Action for Start-Up

* Provide a project timeline/action plan matrix showing the steps required to achieve program operation, including target dates.
* Explain how action steps relate to the overall mission statement of the program and the Proposer’s parent agency if applicable.
* Develop a logic model for the proposed program, including program goals and objectives. Resources for logic models may be viewed at <https://ojjdp.ojp.gov/funding/performance-measures>.
* Describe specific policies and procedures for meeting the intake criteria specified by the agreement with DYS, which makes the ultimate placement decision. As such, Proposers are not permitted to develop independent admission and/or No Eject/No Reject policies that conflict with the contractual agreement.

Release Policies and Procedures

* The program Proposal is expected to demonstrate the presence of a detailed plan for transition/reentry. At a minimum, the plan must include the procedures which will result in a seamless transition of the youth from the program to his or her community. **The Proposal shall outline how the program will provide comprehensive transitional services. The transitional services must address the importance of the following program activities: work with the families/guardians, community mental health liaisons, social workers, and court personnel; scheduling appointments, managing medications, and transitioning from program Medicaid to community Medicaid.** Community activities must be determined based on the behavior and characteristics of individual youth with consideration given to community, youth, and staff safety. Program activities, as outlined above, will be a part of the evaluation and monitoring of the program’s transitional plan. Transitional Services shall begin at the time of admission and are to be included in the youth’s ISP.
* Explain pre-release and aftercare planning requirements
* While a minimum length of stay is recommended for each service category, DYS recognizes that some youth may not be able to succeed as expected in some programs. If it appears that a youth is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.
* Outline the transitional planning and services; when developmentally appropriate, independent living skills shall be a part of transitional planning
* State policy on release prior to program completion
* Provide procedures for the culmination and transfer of school records, including but not limited to, the official student transcript and report card as detailed in the *Alabama State Department of Education: A Transition Guidebook*. The guidebook is available for review on the ALSDE website.

Programs and Services

* A generalized program, where all youth participate in the same treatment plan activities and therapeutic services will not be accepted. The proposal shall discuss plans for differential assessment, policies requiring the development of individualized treatment plans, procedures for developing such treatment plans, and training requirements for staff in the area of assessment and treatment plan development and implementation.
* The program service philosophy and conceptual basis shall include logical presentation of strength-based, Gender-Specific programming incorporating theories of Trauma-Informed and Trauma-Responsive care. Staff training on appropriate responses to trauma sensitive youth is an essential component of training. The program and services shall be linked to the philosophy and conceptual basis, and support program goals and objectives.
* Cite research and/or articles on the conceptual model that will be used; and explain how this model will benefit the youth in the proposed category. Discuss the particular program curriculum that will be used. For information regarding evidence-based model programs refer to <http://www.ojjdp.gov/mpg>.
* The program design shall specify plans for youth orientation into the program with an established timeframe.
* Screening and assessment are a required component of service provision. The Proposal must identify the screening protocol and process that will be used during youth intake. The assessment tool(s) shall be based on a valid instrument(s) and shall take into account youth age and cultural differences. Additionally, the Proposal must describe plans to screen youth for risk and victimization in adherence with PREA requirements and assess youth for risk of sexual exploitation.
* Describe treatment and the process for youth progression through the program. The progression of treatment shall be based on the chosen treatment model and the conceptual rationale for selecting that modality. Describe the specific treatment interventions used within that model. Include the proposed balance of treatment, including the percentage of time allocated to individual, group, and family interventions.
* Measurement of treatment gains is essential to indicate the direction of development. Explain methods for measuring youth treatment gains, the tools used to measure those treatment gains, and evaluation strategies (i.e., what are the guidelines for assessing a youth’s readiness to progress through the program).
* Both process and outcome measures are required. Process measures include factors such as the number of youth completing the program and the number of problems addressed. Outcome measures include factors such as the level of coping skills attained or changes in the level of self-esteem. The outcome measures require tools to indicate the impact of treatment. Service providers need to identify the tools they will use to measure the factors they identify for treatment. For additional information regarding outcome measures, refer to <http://www.ojjdp.gov/grantees/pm/glossary.html>.
* Describe programming and activities implemented within the facility and outside of the facility, including accessible community resources and the plan for creating a community partnership to provide those resources and activities. It is the Vendor’s responsibility to address the transportation needs of the youth placed in their facility.
* Explain plans for ensuring that youth are provided with the opportunity to participate in religious activities and counseling on a voluntary basis. Describe alternative activities offered to youth not participating in religious activities.
* Describe the service delivery process, admission through transitional planning, list support services available and the sources of these services.
* Identify position(s) responsible for provision of each service.
* Note average frequency and duration of provision of each service:
  + Individual and group sessions
  + List types of recreational programs and leisure activities and note frequency and duration of such activities.
  + Describe educational, career and vocational, technology, and employment services, voluntary and community services.
  + Explain plans for family/guardian engagement, including frequency and duration.
* Delineate plans for use of subcontracts, cooperative agreements, or community resources in service delivery, if applicable. Include the names of the agencies and letters of commitment from them.
* **Selected Vendors will maintain required information on DYS’s electronic records management system; therefore, the proposal must describe plans to ensure service plan development/updates, progress reports, admissions, releases, transfers, and any other movement in and out of the facility are entered in the system in a timely manner. Monthly training on the electronic records management system will be offered to selected Vendors and ongoing support will be available, when needed.**

**The direct and support services provided shall be identified within the categories below**:

**Case Management Services**

* Individual service plans (ISP) are developed, implemented, and amended for youth in accordance with current DYS policy.
* When a separate treatment plan is developed, implemented, and amended in compliance with DYS policy. Progress shall be documented in the DYS electronic records management system and a copy of the treatment plan shall be maintained in the youth’s file.
* Proposer shall describe mechanisms for engaging youth, which may include resistant and/or lower functioning youth, in the ISP process. Youth are expected to be treated as active participants in service plan development, modifications, and amendments.
* The program shall maintain ongoing contact with probation officers, families/guardians, and Department of Human Resources (DHR), when applicable, regarding the youth’s progress on the service plan. This communication begins immediately when the youth is received and shall continue throughout the youth’s length of stay, and appropriate follow-up recommendations shall be developed as part of the release planning process and included in the Notice of Release to the court. Follow-up recommendations shall address protective factors such as appropriate services, resources, and conditions that support the youth’s successful return to and maintenance in his/her community. Additionally, impediments to release readiness shall be discussed with DYS Community Services administration. Communication with probation officers, families/guardians, and DHR (when applicable) shall be documented.
* Successful Proposers with access to DYS electronic records management system must enter and keep current all information required by the system, as indicated above including additional requests made by a designated DYS representative.
* Progress notes and other daily documentation must be completed for every contact or service provided to program youth. Notes shall reflect treatment progress as related to the treatment plan, and shall be dated, signed, and kept in a secure location.
* Treatment gains must be clearly delineated and included in the reports maintained in the DYS electronic records management system.

**Intervention Modalities**

* Appropriate individual and/or group counseling is provided on a regular basis by properly qualified professional staff that is appropriately degreed. Group size shall not exceed the requirements set out in the Medicaid Code – Chapter 105 for the group counseling and/or group basic living skills services.
* All interventions must be validated and based on a conceptual model supported by empirical research.
* Strength-based intervention services must be included in all treatment approaches and interventions.
* The Proposal shall explain how the chosen conceptual model impacts therapy. There must be a clear connection between group services and individual counseling assignments and its role in youth rehabilitation.
* Explain the rationale behind the average length of stay, and how the interventions are adequately accomplished given the proposed time frame.
* Describe plans to modify intervention modalities to accommodate the varying youth needs and changes in the needs of the overall population.
* All youth are actively involved in, at a minimum, basic life skills training, drug and alcohol education and prevention,health and sex education, and academic and vocational education appropriate for youth of their age and ability.
* Describe programming that provides for a combination of incentives and disincentives that are fairly and consistently utilized to improve attitudes, values, self-esteem, and responsible behavior of youth which are appropriate to the developmental level of the youth.
* De-escalation methods and interventions and staff training in these areas are described.
* The Proposal shall detail the behavior management strategies and interventions that will be implemented with verbally and physically aggressive and volatile youth. Proposal shall describe the type of physical intervention that will be used for aggressive and volatile youth, and the circumstances surrounding the use of this intervention strategy. It is expected that the behavior management strategies and interventions detailed will match the behavior management model or program identified in the training section of the Proposal.
* The program shall describe suicide and/or self-injurious behavior prevention and intervention strategies and protocols, along with any research supporting the approaches.
* The Proposal shall discuss plans for minimizing confinement, Isolation, and group consequences.

**Educational Services**

* A twelve (12) month comprehensive educational plan (special program) must be provided. The educational services in this special program must meet the individual needs for each youth. At a minimum, the special program shall provide K-12 credit bearing coursework, special educational services, workforce development training (i.e. Work Keys), and alternative educational services, such as academic enrichment, remediation and GED/ACT preparatory services. **All online educational programming must be submitted to a designated DYS representative for pre-approval prior to implementation.**
* Letter of intent from the local educational authority and agreements with post-secondary institutions shall be provided.
* Youth identified as having a disability shall receive special education services in accordance with the guidelines required by the State of Alabama and the *Individuals with Disabilities Education Act.*
* The special program shall be in compliance with the regulations issued by the Alabama Department of Education and all other applicable state and federal laws, including but not limited to procedural due process relating to applicable notices, timelines and safeguards.
* The special program will comply with all State Department of Education requirements for teachers and paraprofessionals providing services under the special program.
* The special program will comply with all State Department of Education curriculum content requirements.
* The Proposer is responsible for maintaining all appropriate educational records. Each student’s attendance, grades, and other demographic and academic data will be maintained while enrolled in the special program. All classes offered shall be identified according to the most current State of Alabama Courses and Personnel Codes. The course numbers, grades, and credits earned shall be timely documented in the youth’s PowerSchool Database as earned and completed prior to their release. Upon request the Provider is responsible for the timely provision of such records to DYS as requested.
* The special program will submit to an annual fiscal audit by the Alabama Department of Education or designee to ensure that all state or federal educational funds were expended in an appropriate manner and in accordance with applicable State and Federal laws and regulations.
* The special program will maintain and safeguard the confidentiality of personally identifiable educational data and records in accordance with the Family Educational Rights and Privacy Act (FERPA).
* The special program will not discriminate against students on the basis of race, color, national origin, sex, age, or disability.
* The Proposer must assure that each student is withdrawn from their home school and enrolled in the special program.
* The Proposal shall explain methods for identifying special needs and ELL/ESL youth and provisions for providing special education and ELL/ESL services to those youth. The special program will ensure that all students, including those with disabilities, participate in the State Assessment Program.
* The Proposer is required to conduct pre and post testing in the areas of math and reading for all youth enrolled more than 90 days. The Proposal shall explain the collection and reporting protocol of collected data.
* The GED component of the educational program must provide opportunities to prepare for, pre-test, remediate, and test for the GED.  GED preparation and testing is to be provided at no cost to the youth and his/her family/guardian. All cost related to GED testing and preparation is the responsibility of the program.
* Opportunities to explore career/vocational interests are considered good practice and shall be a part of the educational program. The Proposal shall explain methods for providing career and vocational opportunities including a workforce develop program for the youth.
* A minimum of three hundred and sixty (360) minutes of instruction are required each school day.
* The Proposal shall demonstrate how educational/academic enrichment will be provided during the summer months. This shall include at a minimum, a schedule, the type of activity, and service provider for each activity.

**Support Services**

Appropriate recreational programs and leisure activities for youth shall be provided. Recreational opportunities are scheduled even in the event of inclement weather. A staff member trained in recreation or a related field shall be designated to plan and supervise recreation activities. The following support service areas must be addressed in program design:

* + The basic living needs of all youth, including a balanced diet, routine medical and dental services, and other essentials (e.g. clothing, personal hygiene items, and laundry services) are met.
  + The program and services promote and provides for the involvement of the families/guardians of committed youth during their rehabilitation. Describe the interventions and treatment strategies to involve the family/guardian throughout each component of treatment.

**Qualifications of the Proposer: Capability Statement**

Organizational Structure

* Describe organizational structure to include parent companies and sub-units of organization.
* Include an organizational chart.
* Stated purpose and goals of the organization.
* Describe experience with Medicaid billing.

Qualifications of Staff

* Describe staffing patterns, including administrative and programmatic, and give rationale.
* Provide information regarding the qualifications and experience of program and treatment staff. Include copies of job descriptions and resumes/vitae of key personnel.
* Describe the program’s plan to achieve cultural competency and culturally diverse staff.
* Professional treatment staff must be appropriately degreed in a human service field. It is highly desirable for a staff member working as a mental health professional to possess a graduate degree in a mental health related field and be licensed in their profession.
* In Self-Contained Educational Programs, all teachers must be appropriately degreed and certified through the State Department of Education a minimum of a Class B or a Specialty Area 1 teaching certificate in the content area in which they are responsible for instruction.
* All staff (including interns, subcontract providers, and volunteers) must have a criminal records background check completed through the Alabama Bureau of Investigation and receive clearance through the DHR Child Abuse/Neglect (CA/N) Central Registry prior to an offer of employment and contact with youth.

Proposers awarded the contracts will be required to comply with DYS training guidelines as outlined by DYS Operations Manual. These requirements will include, but are not limited to the following:

* Describe the designated personnel that will develop, implement, and oversee the staff training program. This may include a designated training coordinator and/or training committee.
* The Proposal shall describe how staff training needs will be developed, evaluated, and updated based on an annual assessment that identifies job-related training needs.
* The Proposal shall present a training plan to achieve cultural competency among diverse staff. The training plan shall also address staff engagement with a diverse population of youth, including an understanding of racial, ethnic, and cultural disparities.
* At a minimum, training plans shall address Trauma-Informed and Trauma-Responsive care, including appropriate responses to trauma sensitive youth, suicide and self-injurious behavior prevention and intervention, physical intervention strategies, transitional services, and PREA compliance which includes working with a special population of youth such as transgender, gay, and intersex (see page 9). Explain how the timeline will be met for staff completing the individualized training plan. This shall include pre-service, in-service, and specialized training curriculum.
* Describe the methods for receiving input for the training content from facility and unit administrators, facility and unit training directors, and training advisory committees.
* Include a plan for ensuring that staff training plans are reviewed and updated annually using current literature.
* Explain methods for providing and making readily available, staff development resources such as a library or reference materials, to all personnel.
* Explain provisions for staff to attend training sessions appropriate to their discipline which may exceed DYS’s minimum training requirements.
* All training sessions shall be conducted by individuals with expertise in the particular area being taught. The training curriculum shall be based on the most current service delivery literature, and relevant to the population being served.
* The Proposal shall include methods of training evaluation and describe how training presenters will be evaluated by training participants.
* Describe the evaluation tools that will be used to measure the participants’ comprehension of the training content.

Program and Case Auditing

* The Proposal shall describe the program methods for internal auditing, including how often the internal auditing will occur.
* Identify staff person or committee responsible for conducting internal audits.
* Describe the method of program evaluation to be used to determine the effectiveness of the program.
* Explain how the audit findings will be used to correct any identified program deficiencies.
* Identify staff person responsible for overseeing the implementation of any corrective action measures.

**Note:** It is understood and agreed that DYS is authorized to conduct service delivery audits of all Vendors as deemed necessary. This includes any designated DYS personnel and/or parties contracted to provide technical assistance to the agency. The Vendor must make provisions to ensure that DYS has access to the full and complete records regarding all features of the facility, administration, expenditures, management, maintenance, and staff training/development information.

Program Site (*applicable to all categories except Category 6*):

Unless otherwise noted, Proposers must provide the facility and space needed to operate the proposed program. At a minimum, the facility description must include the following:

* Describe the site. Include square footage and floor plan, to scale, of the proposed site.
* Provide copies of county and state approvals obtained (i.e. zoning of property, fire marshal, health inspection).

Summary Qualifications of Proposer

* The Proposer has significant experience in the provision of the program services being offered.
* Key personnel are well qualified and have experience in performance of similar work.
* The Proposer has sufficient financial strength to bear costs associated with program development and on-going program maintenance.
* The Proposer has access to essential support services (administrative, fiscal, staff development).

**Cost Proposal**

* Cost Proposal must contain a completed *Budget Format* (Attachment 2) and the itemized statements required therein. Additional information requested by DYS for the purpose of determining the validity of the per diem quoted shall be provided within five (5) working days or the Proposal will be rejected.
* Cost Proposal (Attachment 3) must contain a per diem quote that matches the per diem quote calculated on the Program Budget (Attachment 2). To minimize the need for significant program changes during periods of low census, DYS will guarantee payment of per diem rates based on capacity. Therefore, Vendors must consider the following information when developing the Cost Proposal:
  + Program capacity up to fifty percent will be paid at one hundred percent of the agreed upon per diem rate (e.g., 10 total slots, only 4 slots are used, 100% per diem will be paid for 5 slots which includes the empty bed)
  + Empty beds beyond fifty percent capacity will be paid at fifty percent of the agreed upon per diem rate (e.g., empty beds 6 – 10 will receive 50% of the per diem)
* Medicaid Rehabilitative Services Providers must provide an estimated number of units that will be billed in a seven (7) day week (Attachment 4).
* Cost Proposals indicating donated goods or services shall include the following:
* source of donation including grants, donations from benefactors, or any other subsidies which would serve to offset the cost to the Proposer
* disclosure of the value of the in-kind donation of goods and services
* written statement from the donor guaranteeing that the services, funds, or goods donated will be for the entire term of the contract if it is awarded
* Cost Proposal for educational services shall include at a minimum, all K-12 education, post-secondary, and all alternative educational services (i.e. GED, PowerSchool, transportation, technology, books, etc.). Credit-bearing post-secondary educational expenses are not required.
* All providers must provide a letter of intent from the Local Education Authority (LEA) for the educational program proposed, or the self-contained educational plan that meets educational program requirements.
* Include any additional information the Proposer feels appropriate to substantiate the fee quoted.

**Documentation Required With Proposal:**

* Announcement Form Completed
* Affirmation Form Executed
* Cost Proposal Summary **(Attachment 3)**
* Audited Financial Statement
* Budget Format **(Attachment 2)**
* List of Board of Directors
* Narrative description of the program
* Proposer Capability Statement
* Job Descriptions
* Organizational Chart
* Resume or Position Description for Program Director
* Board Resolution (**Attachment 1)**
* List of Agency References
* Letter of Tax Exempt Status, if applicable
* Description of Proposed Site including floor plans to scale
  + - Proposer Disclosure Statement

Federal E-Verify Program Enrollment Verification Form

* Disclosure of Ownership, Execute affidavit or provide other ownership documents
* Documentation of Insurability
  + Agreement of Accountability
  + Letter of intent from the local education authority or the self-contained educational plan
  + Estimated Medicaid Billing Units (**Attachment 4**)[[5]](#footnote-5)

**PROPOSAL EVALUATION CRITERIA**

Technical Approach - 50 Points

Various elements of the technical approach are provided throughout the RFP. The following components highlight some of the key concepts and requirements. However, it is the Proposer’s responsibility to review the requirements included in the body of the RFP and to adequately address the requirements in the Proposal.

1. The program design is described adequately and links conceptual models to program design and development; specifically addressing the population to be served.
2. Goals and objectives are presented, feasible, and supported by current literature. Sub goals and specific objectives are provided, measurable, and linked to the conceptual model for the program.
3. The program describes how Trauma-Informed and Trauma-Responsive care is incorporated into treatment approaches and interventions.
4. Proposal describes methods for engaging youth in ISP development, modifications, and amendments.
5. Proposal explains how the program will utilize selected assessment and screening tools to inform ISP development and programming.
6. Suicide and self-injurious behavior prevention and intervention strategies and protocols are clearly explained.
7. Methods and interventions proposed for de-escalation and behavior management shall be explained, including the rationale for selecting chosen methods.
8. All components of educational and vocational programming and activities are to be extensively described. This description must include but not limited to GED preparation, methodology for credit attainment, record keeping, teacher training and post-secondary assistance.
9. Proposal includes an internal performance monitoring and program evaluation system.
10. Proposal addresses and demonstrates a clear understanding of each of the program specifications and technical issues of the RFP.
11. The program objectives are realistic, reasonable and obtainable.
12. The Proposal specifically addresses methodologies to accomplish the objectives set forth in the work statement.
13. The Proposal demonstrates a creative and innovative approach.
14. The Proposal makes use of evidence-based practice approaches and methodologies.
15. The Proposal delineates a specific rationale for approaches selected to ensure that gender responsive programming is implemented.
16. Outlines strategies to include engagement of the family/guardian and supportive community resources.
17. The Proposal details transitional services and preparation for independent living as a program component. Also includes networking with community resources, the court system, the education system, and the community services division to ensure proper transitional planning.
18. The Proposal includes a contingency plan for dealing with critical incidents and/or emergency situations.

Qualifications of Proposer – 15 Points

See the description of the various responsibilities as described in the RFP under the Qualifications of the Proposer: Capability Statement (page 21). The evaluation criteria will include elements of the aforementioned requirements, including the components highlighted below:

1. Proposal includes sufficient number of staff to deliver the proposed services.
2. Qualifications of staff are adequately described and are appropriate for the task to be performed.
3. Job descriptions for all staff are included. Job descriptions clearly outline the task to be performed by each worker.
4. Lines of authority among staff members are clearly described.
5. Overall staffing patterns are conducive to achievement of objectives.
6. Describes how staff training plans integrate Trauma-Informed and Trauma-Responsive care approaches, gender responsive treatment, job functions, and youth population.
7. Square footage is adequate to the program needs of the youth served.

Cost - 35 Points

1. Information provided in the Cost Proposal supports the reasonableness of the per diem quoted. Unreasonable per diems, for example $10 or $300, will be deemed unreasonable and no points given for costs.
2. Cost points, price per youth per day, will be determined using the following formula:

*Lowest Annual Cost***/***Proposal Annual Cost to be Graded* x *Maximum Cost Points (35)* **=** *Proposal Cost Points*.

**SERVICE CATEGORY #1**

**COMMUNITY RESIDENTIAL TREATMENT PROGRAM**

**AND FACILITY FOR LOW FUNCTIONING YOUTH**

DYS is soliciting Proposals to provide services for twelve (12) to sixteen (16) low functioning male youth, who are in the care and custody of DYS. These youth include those adjudicated adolescents who may be characterized by developmental and/or intellectual disabilities and one or more of the following: (a) more pronounced social or emotional deficits than is typical of their age grouping, (b) adaptive functioning that requires increased or more intensive staff supervision, (c) hearing or speech impairments, (d) those who benefit from a more homogeneous peer grouping, (e) deficits (cognitive and social) resulting from environmental deprivation. Youth may also have a history of multiple service needs. They may require crisis intervention services and security monitoring for elopement.

DESCRIPTION:

Some delinquent youth cannot benefit from a typical juvenile justice environment as a result of developmental disorders manifested by low functioning in the basic areas of their life. Most typical youth programs make use of cognitive and rehabilitative approaches that are difficult for low functioning youth to master. Therefore, Proposers are required to identify Trauma-Informed and Trauma-Responsive curriculum and treatment approaches normalized for this population of youth or curriculum that may be modified to accommodate low functioning youth. Additionally, programming should be Gender-Specific and include at a minimum: concepts of strength-based theories, rites of passage, health promotion, healthy sexuality, and family dynamics. Partnerships with agencies such as vocational rehabilitation and/or special education services are expected to promote full inclusion in education for low functioning youth.

These youth have difficulty being socially accepted by their delinquent peers, resulting in their being vulnerable to social isolation and aggressive peer behaviors. Additionally, this category of youth may exhibit challenging behaviors; therefore, the program description should include mechanisms for addressing such behaviors. A program specifically designed to work with these youth should make use of approaches tailored to this population. Identification of concrete opportunities to practice social skills, positive peer interaction, basic self-care and life skills acquisition is expected in the Proposal. The goal of such a program is to aid these youth to make maximum gains in a program that focuses on capacities rather than limitations (i.e., strength-based approach). The Proposal must indicate measurement of treatment gains and how progress will be measured and communicated to the youth in meaningful ways.

Genetic and environmental factors contribute greatly to cognitive disabilities. Due to the vulnerable nature of these youth and their families/guardians, those that work with this population should be reminded of their ethical responsibility to provide adequate services. For information on ethics refer to the Certified Rehabilitation Counselor website at <http://www.crccertification.com/>, or the National Association of Social Workers website at <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>.

The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The Proposer shall tailor those requirements specifically to this initiative. The philosophy and conceptual rationale of the program should be presented in a specific manner. Specific attention should be paid to issues and approaches that are directly related to this program category. As an example, the Proposer shall present how the program will promote youth engagement in a Treatment Program that deals with the youth taking responsibility for and accepting accountability for their offending behavior. The program should specify how the facility will individualize therapeutic treatment services including expected duration of the treatment relative to the special needs youth served and assessed need for treatment through the development of an individualized therapeutic service plan. The ISP development, modification, and amendment process must adhere to DYS policy and guidelines. It is an expectation that all youth, including resistant youth, are active contributors in the ISP process.

The Proposal must indicate an understanding of the historical perspectives and the impact of cultural attitudes regarding people with disabilities. Proposers need to be aware of the following:

* Judgmental attitudes about those worthy and unworthy of assistance
* Medical knowledge that may impact assessment, diagnosis, and treatment options
* Economic conditions impact human development in addition to common economic concerns
* Beliefs about the cause of disabilities which may result in shaming and blaming of youth, and impact service delivery
* Lack of acceptance and ways to promote acceptance
* Legal and social reforms that target discrimination and access to services
* Psychological and social barriers associated with living with disabilities

Factors such as those referenced above impact program design. The Proposer is expected to indicate how the program addresses these issues. For example, re-entry into the community includes family/guardian engagement and access to mainstream community resources; therefore, family/guardian participation and a resource list are expected. DYS expects Proposers to outline strategies to provide advocacy and components such as specialized training, peer accountability, and self esteem development. DYS seeks to provide the Proposer with the flexibility to tailor an effective strength-based program model for the specialized group of youth who are proposed to be served.

LOCATION AND PHYSICAL REQUIREMENTS:

The physical location of the program site must be within the State of Alabama, and meet all license requirements.

The physical structure of the building shall have adequate square footage to meet the programmatic needs of the twelve (12) to sixteen (16) low functioning youth served in the program. Policy and procedure permit youth to decorate their living and sleeping quarters with personal possessions. Adequate space must be provided for various services and programs within the facility including space for counseling, meals, recreation, and other support services.

The facility shall have a sufficient number of Safe Rooms that allows for the youth to calm down while being monitored for safety (such as a video system or large plexiglass windows).

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth, and staff shall be available to youth twenty-four (24) hours per day, seven (7) days per week. Due to the nature of this population, this facility will require, at minimum, a staff to youth ratio of 1:8 while youth are awake and 1:12 when youth are asleep. Staff count shall not include administrative and clinical personnel. There should be a sufficient number of mental health professionals to provide services. Counseling shall also be available to the participant’s immediate family/guardian. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population.

SPECIAL CONDITIONS:

Ninety percent (90%) of youth should complete the program within one hundred-eighty (180) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

The program must meet certain designated conditions, as described elsewhere in this document. Some of those requirements include: possessing license as required by appropriate state agency, be designated as a DYS Medicaid Rehabilitative Services Provider, and have a twelve (12) month Self-Contained Educational Program. Engagement of the family/guardian in the program is vital and DYS expects the Proposer to outline a methodology for engaging families/guardians from intake to community transition/discharge. The Proposer should describe specific programs and strategies that will be used to engage the youth’s family/guardian in the rehabilitation process. A security plan for special needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #2**

**COMMUNITY RESIDENTIAL TREATMENT PROGRAM FOR**

**MEDIUM RISK YOUTH**

DYS is soliciting Proposals for programs that are geographically dispersed throughout Alabama to provide services for sixteen (16) to twenty-four (24) male offenders, in each program, who are in the care and custody of DYS. A total of two (2) to four (4) units may be awarded. A provider can propose the operation of more than one program for this category but a separate Proposal and cost figures must be submitted for each program. Youth referred to community residential programs are more likely to have moderate legal involvement and are considered medium risk based on DYS risk assessment, and may include youth who have runaway behavior, physical aggressiveness, gang and weapons related history, and moderate to high behavioral/emotional problems. They often present challenging behavior beyond the behaviors referenced above, as the intensity of the behavior varies with each youth. Youth referred by DYS will have been classified as requiring a high degree of supervision. DYS is seeking Proposals that are staff secure and do not require a secure facility.

DESCRIPTION:

This is a community residential program for medium risk youth designed to provide a goal directed, highly structured, treatment, and counseling program. Programming should include healthy behaviors and the development of interests such as vocations or hobbies. This program is also designed to promote the safe return of youth to their home and prevent a return to criminal behavior. The program should include creative means of involving the family/guardian in the therapeutic process from intake to community transition/discharge. Programming should be Gender-Specific and include at a minimum: concepts of Trauma-Informed and Trauma-Responsive care, strength-based theories, rites of passage, health promotion, healthy sexuality, and family dynamics.

The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The Proposer shall tailor those requirements specifically to this initiative.

Counseling shall be available to the family/guardian and they should be encouraged to use the service. The Proposer must provide an explanation of the model or conceptual rationale they will be basing their program on as well as the implications for use with the population that the program will serve. The Proposer shall specify whether the Proposal is directed to a single program in a particular catchment or to the provision of two programs in the appropriate regional catchment areas. A separate Proposal shall be developed for each program unit being responded to. DYS seeks to provide the Proposer with the flexibility to tailor an effective program model for the specialized group of youth who are proposed to be served.

The following services shall be afforded to each youth, as appropriate, according to his needs as detailed in the individual program plan:

* + Educational services (as required by state and federal statutes)
  + Independent living services
  + Substance use counseling/education
  + Emotional/rehabilitative counseling
  + Moral/character development training
  + Access to therapeutic staff and localmental health services

A service plan, which includes family/guardian involvement in the youth’s rehabilitation process, will be developed by the Vendor within ten (10) days for all youth placed within the facility. Input from the youth, family/guardian, and Vendor must be included in order to develop a service plan that will address the individual circumstances of each case. The Proposal should specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services. The ISP development, modification, and amendment process must adhere to DYS policy and guidelines. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. Individual and group counseling should be directed toward accomplishing the goals of the ISP.

LOCATION AND OTHER PROGRAM REQUIREMENTS:

The physical location of the program site must be within the State of Alabama, and meet all license requirements.

The physical structure of the building shall have adequate square footage to meet the programmatic needs of the sixteen (16) to twenty-four (24) medium risk youth served in the program. Policy and procedure permit youth to decorate their living and sleeping quarters with personal possessions. Adequate space must be provided for various services and programs within the facility including space for counseling, meals, recreation, and other support services.

The facility should have a sufficient number of Safe Rooms that allows for the youth to calm down while being monitored for safety (such as a video system or large plexiglass windows).

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth and shall be available to youth twenty-four (24) hours per day, seven (7) days per week. This facility will require, at minimum, a staff to youth ratio of 1:8 while youth are awake and 1:12 when youth are asleep. Staff count shall not include administrative and clinical personnel. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population.

SPECIAL CONDITIONS:

Ninety percent (90%) of youth should complete the program within one hundred-twenty (120) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

Programs must meet certain designated conditions, as described elsewhere in this document. Some of those requirements include: possessing license as required by the appropriate state agency, be designated as a DYS Medicaid Rehabilitative Services Provider, have a twelve (12) month Self-Contained Educational Program, and promote and provide for family/guardian involvement in the youth’s rehabilitation. A security plan for the needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan. Engagement of the family/guardian in the program is vital and DYS expects the Proposer to outline a methodology for engaging the family/guardian from intake to community transition/discharge.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #3a**

**COMMUNITY GROUP HOME PROGRAM(S)**

DYS is soliciting Proposals to provide services for eight (8) to twelve (12) male offenders. A total of one (1) to two (2) units may be awarded. The population shall be between the ages of twelve (12) to twenty-one (21) years, who have been committed to DYS. A provider can propose the operation of more than one group home, but a separate Proposal and cost figures must be submitted for each program.

These youth are more likely to have limited legal involvement and are considered low risk. Youth referred to group home programs may include youth who have runaway behavior, physical aggressiveness, and moderate behavioral/emotional problems. However, they often present challenging behavior beyond the behaviors referenced above. These youth often have unstable home environments and a history of school related problems.

**Although these youth may attend school in the community, they require year-round educational including transitional services to promote reintegration into the community.** Additionally, there may be youth in transition from DYS services to independent living arrangements. Therefore, resources such as independent living skills development, college preparation, and workforce preparation are essential. Transitional services for this population must include engagement and/or referrals to community-based resources prior to release from the facility to promote a seamless re-entry into the community (see page 16).

DESCRIPTION:

A group home is a rehabilitative Treatment Program which serves youth who have been adjudicated delinquent or in need of services in a professionally staffed residential environment twenty-four (24) hours per day with an operational maximum capacity of twelve (12).

The purpose of a group home is to provide a comprehensive program of care and treatment to youth in a non-secure, supportive setting with a homelike atmosphere. Incorporating strength-based services and opportunities for positive youth development is essential to treatment programming.

The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The Proposer shall tailor those requirements specifically to this initiative.

Services will be individualized and based on a specific program plan developed for the youth by the Vendor. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services. Individual service plans must be developed, modified, and amended in accordance with DYS policy and guidelines. The overall goal of the services is to reduce negative behavior and contributing factors which may lead to future youth involvement with the criminal justice system. DYS seeks to provide the Proposer with the flexibility to tailor an effective program model for the specialized group of youth who are proposed to be served. Programming shall be Gender-Specific, target the specific needs of the youth being served, and incorporate concepts of Trauma-Informed and Trauma-Responsive care.

The primary objectives of the group home are:

* to provide for the safety and well-being of the youth, program staff, and community
* to provide services designed to reduce self destructive behaviors; enhance life skills; facilitate social and emotional adjustment; and promote independent living skills
* to provide services to the youth's family/guardian from intake to discharge to facilitate the successful reintegration of the youth to the community to which he will be returning
* to assist in providing access to post-secondary educational services which include, but are not limited to, college preparation and referrals for post-secondary services

Progress toward attainment of desired results will be assessed at least monthly, to facilitate return of the youth to their home or to a community, home-based service in a timely and efficient manner.

Group home programs shall provide a broad range of services including, but not limited to:

* assessment and individual service plan development
* individual and group counseling services in-house and through community resources
* family/guardian counseling services
* recreational services
* community involvement/services

The Proposer shall provide a description of services that will be offered both in house and through community resources. This description must include the agency/provider name, program type, a description of the service as well as the rationale and impact for choosing the service, and position/individual providing the service.

The following services shall be afforded to each youth, as appropriate, according to his needs established in the individual program plan:

* + Educational services (as required by state and federal statutes)
  + Independent living services
  + Substance use counseling/education
  + Emotional/behavioral counseling
  + Parenting skills training
  + Moral/character development training
  + Access to therapeutic staff and localmental health services

LOCATION AND PHYSICAL REQUIREMENTS:

It is highly desirable for group homes available to DYS to be widely dispersed geographically within the State of Alabama.

The physical structure of the group home shall have adequate square footage to meet the programmatic needs of the eight (8) to twelve (12) youth served in the program. Additional consideration will be given to Vendors that describe plans to equip the facility with warning devices that will alert staff of youth attempts to escape. Policy and procedure permit youth to decorate their living and sleeping quarters with personal possessions. Adequate space must be provided for various services and programs within the facility including space for counseling, meals, recreation, and other support services.

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth and shall be available to youth twenty-four (24) hours per day, seven (7) days per week. This facility will require, at minimum, a staff to youth ratio of 1:8 while youth are awake and 1:12 when youth are asleep. Staff count shall not include administrative and clinical personnel. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population.

SPECIAL CONDITIONS:

Ninety percent (90%) of youth should complete the program within ninety (90) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

Programs must meet certain designated conditions, as described elsewhere in this document. Some of those requirements include: possessing license as required by the appropriate state agency, be designated as a DYS Medicaid Rehabilitative Services Provider, have a twelve (12) month educational program, and promote and provide for family/guardian involvement in the youth’s rehabilitation. The program must promote and provide for family/guardian involvement. A security plan for the needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan. Engagement of the family/guardian in the program is vital and DYS expects the Proposer to outline a methodology for engaging the family/guardian from intake to community transition/discharge.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #3b**

**COMMUNITY GROUP HOME PROGRAM(S)**

**WITH SELF-CONTAINED EDUCATIONAL PROGRAM**

DYS is soliciting Proposals to provide services for eight (8) to twelve (12) male offenders in each program. A total of one (1) to two (2) units may be awarded according to capacity. The population shall be primarily between the ages of twelve (12) to twenty-one (21) years, who have been committed to DYS. A provider can propose the operation of more than one group home, but a separate Proposal and cost figures must be submitted for each program.

These youth are more likely to have limited legal involvement and are considered low risk. Youth referred to group home programs may include youth who have runaway behavior, physical aggressiveness, and moderate behavioral/emotional problems. However, they often present challenging behavior beyond the behaviors listed. These youth often have de-stabilized home environments and a history of school failure.

**These youth require on-site education and transitional services to promote reintegration into the community.** Additionally, there may be youth in transition from DYS services to independent living arrangements. Therefore, resources such as independent living skills development, college preparation, and workforce preparation are essential. Transitional services for this population must include engagement and/or referrals to community-based resources prior to release from the facility to promote a seamless re-entry into the community (see page 16).

DESCRIPTION:

A group home is a rehabilitative Treatment Program which serves youth who have been adjudicated delinquent or in need of services in a professionally staffed residential environment twenty-four (24) hours per day with an operational capacity of a maximum of twelve (12) youth.

The purpose of a group home is to provide a comprehensive program of care and treatment to youth in a non-secure, supportive setting with a homelike atmosphere. Incorporating strength-based services and opportunities for positive youth development is essential to treatment programming.

The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The Proposer shall tailor those requirements specifically to this initiative.

Services will be individualized and based on a specific program plan developed for the youth by the Vendor. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services. Individual service plans must be developed, modified, and amended for each youth in accordance with DYS policy and guidelines. The overall goal of the services is to reduce negative behavior and contributing factors which may lead to future youth involvement with the criminal justice system. DYS seeks to provide the Proposer with the flexibility to tailor an effective program model for the specialized group of youth who are proposed to be served. Programming shall be Gender-Specific, incorporate concepts of Trauma-Informed and Trauma-Responsive care, and target the specific needs of the youth being served.

The primary objectives of the group home are:

* to provide for the safety and well-being of the youth, program staff, and community
* to provide services designed to reduce self destructive behaviors; enhance life skills; facilitate social and emotional adjustment; and promote independent living skills
* to provide services to the youth’s family/guardian to facilitate the successful reintegration of the youth to the community to which he will be returning
* to assist in providing access to post-secondary educational services which include, but are not limited to, college preparation and referrals for post-secondary services

Progress toward attainment of desired results will be assessed at least monthly, so as to facilitate return of the youth to their home or to a community, home-based service in a timely and efficient manner.

Group home programs shall provide a broad range of services including, but not limited to:

* assessment and individual service plan development
* individual and group counseling services in-house and through community resources
* family/guardian counseling services
* recreational services
* community involvement/services

The Proposer shall provide a description of services that will be offered both in house and through community resources. This description must include the agency/provider name, program type, a description of the service as well as the rationale and impact for choosing the service, and position/individual providing the service.

The following services shall be afforded to each youth, as appropriate, according to his needs established in the individual program plan:

* + Educational services (as required by state and federal statutes)
  + Independent living services
  + Substance use counseling/education
  + Emotional/behavioral counseling
  + Parenting skills training
  + Moral/character development training
  + Access to therapeutic staff and localmental health centers

LOCATION AND PHYSICAL REQUIREMENTS:

It is highly desirable for group homes available to DYS to be widely dispersed geographically within the State of Alabama.

The physical structure of the group home shall have adequate square footage to meet the programmatic needs of the eight (8) to twelve (12) youth served in the program. Additional consideration will be given to Vendors that describe plans to equip the facility with warning devices that will alert staff of youth attempts to escape. Policy and procedure permit youth to decorate their living and sleeping quarters with personal possessions. Adequate space must be provided for various services and programs within the facility including space for counseling, meals, recreation, and other support services.

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth and shall be available to youth twenty-four (24) hours per day, seven (7) days per week. This facility will require, at minimum, a staff to youth ratio of 1:8 while youth are awake and 1:12 when youth are asleep. Staff count shall not include administrative and clinical personnel. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population.

SPECIAL CONDITIONS:

Ninety percent (90%) of youth should complete the program within ninety (90) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

Programs must meet certain designated conditions, as described elsewhere in this document. Some of those requirements include: possessing license as required by the appropriate state agency, be designated as a DYS Medicaid Rehabilitative Services Provider, have a twelve (12) month Self-Contained Educational Program, and promote and provide for family/guardian involvement in the youth’s rehabilitation. The program must promote and provide for family/guardian involvement. A security plan for the needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan. Engagement of the family/guardian in the program is vital and DYS expects the provider to outline a methodology for engaging the family/guardian from intake to discharge.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #4a**

**DRUG/ALCOHOL RESIDENTIAL TREATMENT PROGRAM**

DYS is soliciting Proposals to provide drug education and treatment services for sixteen (16) to twenty-four (24) males. A total of two (2) to three (3) units may be awarded according to capacity. A provider can submit a Proposal to operate more than one program. However, a separate Proposal and cost figures must be submitted for each program and facility.

For these youth, the assessment process identified drug and/or alcohol use disorder(s) as a concomitant problem. Youth referred for treatment of a substance use disorder may also require interventions related to mental health, impulsive behaviors, compulsive disorders, trauma, family dysfunction, academic disengagement, and environmental stressors. Co-Occurring issues in addition to the identified problem of a substance use disorder must be addressed. This population has different needs, different levels of delinquency, and substance use issues which may include compulsive addiction and impulsive drug use. The preceding dynamics impact interventions; therefore, Trauma-Informed and Trauma-Responsive strength-based treatment approaches are essential to rehabilitation.

DESCRIPTION:

This is a residential program designed to provide treatment, educational remediation, rehabilitative services, and behavior modification for youth committed to DYS. Thus, programs are needed which work with both the delinquent patterns and socialization of these youth while working with their problems of substance use. DYS expects programs to identify and describe the evidence-based practice and curriculum intended for holistic treatment approach.

The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The Proposer shall tailor those requirements specifically for this population of youth. Due to the duration of each program, structured and intensive treatment interventions are imperative to youth rehabilitation.

The philosophy and conceptual rationale of the program shall be directly correlated with treatment interventions and service plan development. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. Thorough screening, assessment, and evaluation of youth needs and other mitigating issues during the intake process are essential to treatment planning. Valid comprehensive evaluation instruments that have been used to aid in treatment planning shall be utilized. Proposers should identify what evaluation instruments will be used. Additional information and/or guidance regarding assessment and evaluation tools for the treatment of adolescents with substance use disorders may be obtained through <http://www.samhsa.gov>.

Program design shall reflect diverse, but related, integrated treatment interventions. The provider shall present how the program will promote youth engagement and active participation in the Treatment Program. Individual and group therapy are major components of substance use treatment. The Proposer shall describe how individual and group therapy activities will address the following treatment components:

* + Physical and mental health
  + Substance use disorder
  + Educational program
  + Decision making
  + Social responsibility
  + Accountability for offending behavior
  + Relapse prevention

The program model and intervention strategies shall be Gender-Specific, and formulated to meet the needs of the proposed category of youth. The Proposer must describe program plans for modifying treatment interventions and/or program model, to meet the varying needs of adolescents with substance use disorders as revealed during the intake process and throughout treatment. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services. Youth with substance use disorders often exhibit certain behavioral and/or personality traits that may impede treatment interventions. The Proposal must delineate plans for dealing with non-compliant behaviors that could limit progress within the program.

LOCATION AND PHYSICAL REQUIREMENTS:

The physical location of the program site must be within the State of Alabama, and meet all license requirements.

The physical structure of the building shall have adequate square footage to meet the programmatic needs of the sixteen (16) to twenty-four (24) youth served in the program. Policy and procedure permit youth to decorate their living and sleeping quarters with personal possessions. Adequate space must be provided for various services and programs within the facility including space for counseling, meals, recreation, and other support services.

The facility shall have a sufficient number of Safe Rooms that allows for the youth to calm down while being monitored for safety (such as a video system or large plexiglass windows).

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth and shall be available to youth twenty-four (24) hours per day, seven (7) days per week. This facility will require, at minimum, a staff to youth ratio of 1:8 while students are awake and 1:12 when students are asleep. Staff count shall not include administrative and clinical personnel. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on page 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population, which shall include drug treatment training and certifications in substance use disorders.

SPECIAL CONDITIONS:

Ninety percent (90%) of youth should complete the program with in thirty (30) to ninety (90) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

Programs must meet certain designated conditions, as described elsewhere in this document. Some of those requirements are: to be licensed by appropriate state agency, operate a twelve (12) month Self-Contained Educational Program, and be designated as a DYS Medicaid Rehabilitative Services Provider. The Proposer shall describe specific programs that will be used to engage the youth’s family/guardian in the rehabilitation process. A security plan for special needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan. Engagement of the family/guardian in the program is vital and DYS expects the Proposer to outline a methodology for engaging the family/guardian from admission to community transition/release.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs and tailored to meet the specific/unique needs of youth referred in this category, especially plans to connect youth with community support groups and/or services addressing substance use disorders. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #4b**

**INTENSIVE DRUG/ALCOHOL RESIDENTIAL TREATMENT PROGRAM**

DYS is soliciting Proposals to provide intensive drug/alcohol education and treatment services for fourteen (14) to sixteen (16) males in a residential setting. This setting must have procedures in place to minimize escapes. One (1) unit may be awarded according to capacity.

For these youth, the assessment process identified drug and/or alcohol use disorder as a concomitant problem. Youth referred for substance use treatment may also require interventions related to mental health, impulsive behaviors, compulsive disorders, trauma, family dysfunction, academic disengagement, and environmental stressors. Co-Occurring issues in addition to the identified problem of a substance use disorder must be addressed. This population has different needs, different levels of delinquency, and substance use issues which may include compulsive addiction and impulsive drug use. At a minimum, youth in this category may have a medium to high risk score, history of running away, verbal and physical aggression, and intensive behavioral health needs. The preceding dynamics impact interventions; therefore, Trauma-Informed and Trauma-Responsive strength-based treatment approaches are essential to rehabilitation.

DESCRIPTION:

This is a residential program designed to provide treatment, educational remediation, rehabilitative services, and behavior modification for youth committed to DYS. Thus, a program is needed which work with both the delinquent patterns and socialization of these youth while working with their problems of substance use. DYS expects the program to identify and describe the evidence-based practice and curriculum intended for holistic treatment approach.

The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The Proposer shall tailor those requirements specifically for this population of youth. Due to the duration of the program, structured and intensive treatment interventions are imperative to youth rehabilitation.

The philosophy and conceptual rationale of the program shall be directly correlated with treatment interventions and service plan development. Thorough screening, assessment, and evaluation of youth needs and other mitigating issues during the intake process are essential to treatment planning. Valid comprehensive evaluation instruments that have been utilized to aid in treatment planning shall be utilized. Proposers should identify what evaluation instruments will be used. Additional information and/or guidance regarding assessment and evaluation tools for the treatment of youth with substance use disorder(s) may be obtained through <http://www.samhsa.gov>.

Program design shall reflect diverse, but related, integrated treatment interventions. The Proposer shall present how the program will promote youth engagement and active participation in the Treatment Program. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. Individual and group therapy are major components of substance use treatment. The Proposer shall describe how individual and group therapy activities will address the following treatment components:

* + Physical and mental health
  + Substance use disorder
  + Educational program
  + Decision making
  + Social responsibility
  + Accountability for offending behavior
  + Relapse prevention

The program model and intervention strategies shall be Gender-Specific, and formulated to meet the needs of the proposed category of youth. The Proposer must describe program plans for modifying treatment interventions and/or program model, to meet the varying needs of adolescents with substance use disorders as revealed during the intake process and throughout treatment. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services. Youth with substance use disorders often exhibit certain behavioral and/or personality traits that may impede treatment interventions. The Proposal must delineate plans for dealing with non-compliant behaviors that could limit progress within the program.

LOCATION AND PHYSICAL REQUIREMENTS:

The physical location of the program site must be within the State of Alabama, and meet all license requirements.

The physical structure of the building shall have adequate square footage to meet the programmatic needs of the fourteen (14) to sixteen (16) youth served in the program. Based on the youth dynamics and descriptors noted above the Vendor must ensure services are provided in a protected facility to minimize the risk of escapes. At a minimum the facility must include hardware security for the primary entry and exit points for the building. Policy and procedure permit youth to decorate their living and sleeping quarters with personal possessions. Adequate space must be provided for various services and programs within the facility including space for counseling, meals, recreation, and other support services.

The facility shall have a sufficient number of Safe Rooms that allows for the youth to calm down while being monitored for safety (such as a video system or large plexiglass windows).

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth and shall be available to youth twenty-four (24) hours per day, seven (7) days per week. This facility will require, at minimum, a staff to youth ratio of 1:8 while students are awake and 1:12 when students are asleep. Staff count shall not include administrative and clinical personnel. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population, which shall include drug treatment training and certifications in the treatment of substance use disorders.

SPECIAL CONDITIONS:

Ninety percent (90%) of youth should complete the program with in thirty (30) to ninety (90) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

The program must meet certain designated conditions, as described elsewhere in this document. Some of those requirements are: to be licensed by appropriate state agency, operate a twelve (12) month Self-Contained Educational Program, and be designated as a DYS Medicaid Rehabilitative Services Provider. The Proposal shall describe specific programs that will be used to engage the youth’s family/guardian in the rehabilitation process. A security plan for special needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan. Engagement of the family/guardian in the program is vital and DYS expects the provider to outline a methodology for engaging the family/caregivers from admission to community transition/release.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category, especially plans to connect youth with community support groups and/or services addressing substance use disorders. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #5a**

**INTENSIVE MULTIPURPOSE/MULTIFUNCTIONAL FEMALE RESIDENTIAL TREATMENT PROGRAM FOR**

**DRUG/ALCOHOL, STEP-DOWN, & SHORT-TERM SERVICES**

DYS is soliciting Proposals to provide a unique multipurpose and multifunction intensive residential program for females. The program and physical plant design should meet the needs of three distinct female populations. Drug and alcohol treatment is the primary program component for program participants. Additionally, the program will make provision for and provide programming to meet the transitional needs of females “stepping down” from drug treatment as a transitional step out of the program and DYS custody. Lastly, the program and physical plant design should provide services for females in need of a short-term residential placement which will include meeting the transitional needs of females “stepping down” from more intensive DYS programs AND serve as an initial placement for females in need of a short-term residential program. The program structure should accommodate eight (8) to twelve (12) females for the total population in a residential setting. The physical plant must have the ability to structure the programing and residential experience so that the Drug and Alcohol treatment and the transitioning Drug and Alcohol population is physically separate from those females place in the short-term residential program component. This setting must have procedures in place to minimize escapes. One (1) unit may be awarded according to capacity.

Females placed for Drug and/or Alcohol treatment require a program screening and assessment process that considers Co-Occurring disorders, Trauma, and the problems associated with drug and alcohol use or disorders, especially among female populations. Family dysfunction, academic disengagement, and environmental stressors are not uncommon among youth involved in the Juvenile Justice system. Thus, females placed in the program primarily for drug and alcohol treatment require Trauma-Informed Strength-based treatment approaches in a Trauma-Responsive program. This population has different needs, different levels of delinquency, and substance use issues which may include compulsive addiction and impulsive drug use. At a minimum, youth in this category may have a medium to high risk score, history of running away, verbal and physical aggression, and intensive behavioral health needs. A key component of the drug treatment program component is the ability to transition youth, who have successfully completed treatment, out of the program. Hence, the step-down component of the program is included as a program component for the appropriate youth when the need is indicated.

This category also addresses several DYS needs beyond drug and/or alcohol treatment. This category addresses the need for a short-term residential program that will serve as a step-down program for youth released from more intensive residential programs and youth in need of short-term residential services. Youth referred for intensive short-term programming may be in transition out of custody or the program is the initial DYS placement. Youth in the intensive short-term program are expected to live in a separate physical space than those in the facility for drug and/or alcohol treatment, which includes youth stepping down from drug and/or alcohol treatment. The short-term program should provide, at a minimum, drug education, trauma-informed care, strength-based services, and programming and services that address the unique needs of females in the Juvenile Justice system. Youth in the short-term residential program may have low to moderate risk scores with high need scores. However, youth in this are anticipated to benefit from a short-term residential experience that is designed to deter them from further involvement in the system and minimize the contagion effect. Therefore, youth may be referred for a specific program track or all program components with specific length of stays. In summary, this multifaceted/multipurpose program will address the needs of the following distinct program components:

* Drug Treatment with a Step-down component
* Short-term residential services
* Short-term Step-down services

DESCRIPTION:

The purpose of this service category is to provide a multipurpose/multifaceted comprehensive program of care, treatment, educational remediation, rehabilitative services, and behavior modification for youth in a protected treatment atmosphere. The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The dynamics mentioned above impact interventions; therefore, Trauma-Informed and Trauma-Responsive strength-based treatment approaches are essential to rehabilitation. The Proposer shall tailor those requirements specifically for this population of youth. The program model and intervention strategies shall be Gender-Specific, and formulated to meet the needs of the proposed category of youth. Proposers are expected to specify how security will be maintained. These strategies may include, but are not limited to, monitoring and surveillance, staff to student ratio, meaningful staff to student interaction, incentives and consequences to reduce flight risks, adequate links and access to the community, a safe treatment environment, and approaches that promote self-awareness and peer accountability.

Proposals must clearly delineate how the provision of services will differ for youth referred to a specific program component versus those youth that may transition from one component to another. Additionally, the Vendor must describe how program activities, treatment expectations, and services will impact the interaction among youth in separate program components. The distinction between program components shall be evident in youth treatment plans, and the proposal shall indicate the number of slots allocated for each service components.

**Drug/Alcohol Component:** The philosophy and conceptual rationale of this component shall be directly correlated with treatment interventions and service plan development. Thus, a program is needed which work with both the delinquent patterns and socialization of these youth while working with their problems of substance use. DYS expects the program to identify and describe the evidence-based practice and curriculum intended for holistic treatment approach. The drug/alcohol treatment program must be clearly distinguishable from the drug/alcohol education component of the short-term program. A proposal that interchanges the terms drug/alcohol treatment with drug/alcohol education and prevention is unacceptable.

The Proposer must describe program plans for modifying treatment interventions and/or program model, to meet the varying needs of youth with substance use disorder(s) as revealed during the intake process and throughout treatment. Thorough screening, assessment, and evaluation of youth needs and other mitigating issues during the intake process are essential to treatment planning. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services. Valid comprehensive evaluation instruments that have been utilized to aid in treatment planning shall be utilized. Proposers should identify what evaluation instruments will be used. Additional information and/or guidance regarding assessment and evaluation tools for the treatment of adolescents with substance use disorder(s) may be obtained through <http://www.samhsa.gov>. Youth with substance use disorder(s) often exhibit certain behavioral and/or personality traits that may impede treatment interventions. The Proposal must delineate plans for dealing with non-compliant behaviors that could limit progress within the program.

Program design shall reflect diverse, but related, integrated treatment interventions. The Proposer shall present how the program will promote youth engagement and active participation in the Treatment Program. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. Individual and group therapy are major components of substance use treatment. The Proposer shall describe how individual and group therapy activities will address the following treatment components:

* + Physical and mental health
  + Substance use disorder
  + Educational program
  + Decision making
  + Social responsibility
  + Accountability for offending behavior
  + Relapse prevention

**Step-down Component:** Youth may transition into this program component after completion of the drug/alcohol substance use component noted above, youth may be referred directly to this component after completing treatment in another residential program, as described in the category description.

The overall goal of step-down services is twofold. The first is to reduce negative behavior which may lead to future youth involvement with the criminal justice system. The second is to orient youth with problem solving skills, goal attainment, and methods to minimize negative consequences. A strength-based perspective identifying protective factors and personal strengths is expected. Services must be individualized and based on a specific program plan developed for the youth by the Vendor. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services.

The proposal must describe plans to implement activities to engage youth in community-based experiences that promote positive socialization, self-esteem development, integration of positive values and pro-social behavior. Proposers are expected to provide a list of community partners and resources to ensure the program meets the requirements for positive community-based experiences. Beyond the use of a levels system, treatment modalities that engage the youth in the therapeutic process are required. An understanding of approaches to get girls to process and change their behavior shall be apparent in the language and the curriculums identified by the Proposer. Descriptions of measures for treatment gains are required. This includes documentation from community resources as well as facility documentation of the youth’s progress. Crisis intervention and capacity building concepts need to be evident in the program design.

The primary objectives of the step-down component are:

* + to assist youth in maintaining prior treatment gains and build on those skills
  + to provide for the safety and well-being of the youth, program staff and community
  + to provide services designed to reduce self-destructive behaviors; enhance life skills; facilitate social and emotional adjustment; and promote independent living skills
  + to provide services to the youth’s family/guardian to facilitate the successful reintegration of the youth to the community to which she will be returning
  + to provide educational opportunities and support to youth with a history of disengagement from the traditional school system
  + to assist in providing access to post-secondary educational services which include, but are not limited to, college preparation and referrals for post-secondary services
  + to provide assessments and interventions that consider the impact of childhood experiences such as abuse, neglect, exposure to violence, relationship difficulties, incarcerated family members, and substance use
  + to intervene with the youth and the systems associated with that youth to promote positive changes and re-integration into the community

**Short-term residential Component:** Youth referred to this program component will be placed based upon the DYS Screening and Placement process. Generally, youth screened and placed may be court ordered for or in need of a short-term residential program that can provide opportunities to address the issues that resulted in the youth’s commitment to DYS.

The primary components for the short-term program include:

* the provision of targeted treatment services in a highly structured environment
* brief, intensive services between forty-two (42) to ninety (90) days (exigent circumstances or additional needs identification must be discussed with DYS)
* the implementation of individualized treatment interventions that will address the reason for the referral, including issues with social and emotional adjustment, disengagement from traditional educational services, and life skill development
* ongoing engagement with community service provides to ensure smooth transition back to the community
* participation in educational services
* screening and assessment to inform treatment, service, and transitional needs

LOCATION AND PHYSICAL REQUIREMENTS:

The physical location of the program site must be within the State of Alabama, and meet all licensing requirements.

The physical structure of the building shall have adequate square footage to meet the programmatic needs of the eight (8) to twelve (12) youth served in the program. Based on the youth dynamics and descriptors noted above the Vendor must ensure services are provided in a protected facility to minimize the risk of escapes and increase community and youth safety. At a minimum the facility must include hardware security for the primary entry and exit points for the building. Policy and procedure permit youth to decorate their living and sleeping quarters with personal possessions. Adequate space must be provided for various services and programs within the facility including space for counseling, meals, recreation, and other support services. It is especially important that physical plant allows for the minimizing of a contagion effect whereby lower risk less delinquent youth are negatively affected by higher risk more delinquent youth. It is preferred that residential living provides for separation of the drug/alcohol program youth, which includes those stepping down, from those youth placed in the short-term residential program which includes youth stepping down from other intensive residential programs.

The facility shall have a sufficient number of Safe Rooms that allows for the youth to calm down while being monitored for his safety (such as a video system or large plexiglass windows).

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth and shall be available to youth twenty-four (24) hours per day, seven (7) days per week. This facility will require at minimum, a staff to youth ratio of 1:8 while students are awake and 1:12 when students are asleep. Staff count shall not include administrative or clinical personnel. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population.

SPECIAL CONDITIONS:

Length of stay may vary based on the program component and youth needs. Therefore, ninety percent (90%) of youth should complete the program within ninety (90) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

Programs must meet certain designated conditions, as described elsewhere in this document. Some of those requirements include: possessing license as required by appropriate state agency, be designated as a DYS Medicaid Rehabilitative Services Provider, and operate a twelve (12) month Self-Contained Educational Program. A security plan for special needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan. Engagement of the family/guardian in the program is vital and DYS expects Proposers to discuss a methodology for engaging the family/guardian from intake to community transition/discharge.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category, especially plans to connect youth with community support groups and/or services addressing substance use disorders. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #5b**

**FEMALE RESIDENTIAL TREATMENT PROGRAM FOR**

**DRUG/ALCOHOL & STEP-DOWN SERVICES**

DYS is soliciting Proposals to provide drug/alcohol education and treatment services and step-down services for twelve (12) to sixteen (16) females. One (1) unit may be awarded according to capacity.

This category addresses several DYS needs which includes services for drug and/or alcohol use or disorder and a step-down program for youth released from residential care or transitioning from substance use treatment services. Youth referred for this category will include youth with or without substance use issues and therefore may require varying levels of the program components outlined here. Thus, it is important that the physical design of the facility and program activities minimizes (and eliminates whenever feasible) the interactions between low risk and high risk youth with distinct treatment needs. Youth may be referred for a specific program track or all program components. Due to the different program tracks, length of stay may vary and youth in this category may exhibit one or more of the following service needs:

* Substance Use – Youth referred for a substance use disorder may also require interventions related to mental health, impulsive behaviors, compulsive disorders, trauma, family dysfunction, academic disengagement, and environmental stressors. Co-Occurring issues in addition to the identified problem of substance use must be addressed. This population has different needs, different levels of delinquency, and substance use issues which may include compulsive addiction and impulsive drug use.
* Step-down Residential – Youth referred for step-down residential care may include youth who have successfully completed a residential program and often exhibit runaway and truant behavior, physical aggressiveness, and moderate behavioral/emotional problems.

DESCRIPTION:

The purpose of this service category is to provide a comprehensive program of care, treatment, educational remediation, rehabilitative services, and behavior modification for youth in a non-secure treatment atmosphere. The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The dynamics mentioned above impact interventions; therefore, Trauma-Informed and Trauma-Responsive strength-based treatment approaches are essential to rehabilitation. The Proposer shall tailor those requirements specifically for this population of youth. The program model and intervention strategies shall be Gender-Specific, and formulated to meet the needs of the proposed category of youth. Proposers are expected to specify how security will be maintained. These strategies may include, but are not limited to, monitoring and surveillance, staff to student ratio, meaningful staff to student interaction, incentives and consequences to reduce flight risks, adequate links and access to the community, a safe treatment environment, and approaches that promote self-awareness and peer accountability.

Proposals must clearly delineate how the provision of services will differ for youth referred to a specific program component versus those youth that may transition from one component to another. Additionally, the Vendor must describe how program activities, treatment expectations, and services will impact the interaction among youth in separate program components. The distinction between program components shall be evident in youth treatment plans, and the proposal shall indicate the number of slots allocated for each service components.

**Drug/Alcohol Component:** The philosophy and conceptual rationale of this component shall be directly correlated with treatment interventions and service plan development. Thus, a program is needed which work with both the delinquent patterns and socialization of these youth while working with their problems of substance use. DYS expects the program to identify and describe the evidence-based practice and curriculum intended for holistic treatment approach.

The Proposer must describe program plans for modifying treatment interventions and/or program model, to meet the varying needs of adolescents with substance use disorder(s) as revealed during the intake process and throughout treatment. Thorough screening, assessment, and evaluation of youth needs and other mitigating issues during the intake process are essential to treatment planning. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services. Valid comprehensive evaluation instruments that have been utilized to aid in treatment planning shall be utilized. Proposers should identify what evaluation instruments will be used. Additional information and/or guidance regarding assessment and evaluation tools for the treatment of adolescents with substance use disorders may be obtained through <http://www.samhsa.gov>. Substance abusing youth often exhibit certain behavioral and/or personality traits that may impede treatment interventions. The Proposal must delineate plans for dealing with non-compliant behaviors that could limit progress within the program.

Program design shall reflect diverse, but related, integrated treatment interventions. The Proposer shall present how the program will promote youth engagement and active participation in the Treatment Program. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. Individual and group therapy are major components to address substance use disorder(s). The Proposer shall describe how individual and group therapy activities will address the following treatment components:

* + Physical and mental health
  + Substance use disorder
  + Educational program
  + Decision making
  + Social responsibility
  + Accountability for offending behavior
  + Relapse prevention

**Step-down Component:** This component is intended for youth that have successfully completed court requirements but require additional skill development prior to returning to the community. Youth may transition into this program component after completion of the drug/alcohol component noted above, or youth may be referred directly to this component after completing treatment with another residential program. The overall goal of the services is twofold. The first is to reduce negative behavior which may lead to future youth involvement with the criminal justice system. The second is to orient youth with problem solving skills, goal attainment, and methods to minimize negative consequences. A strength-based perspective identifying protective factors and personal strengths is expected. Services must be individualized and based on a specific program plan developed for the youth by the Vendor. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process. The Proposal shall specify how the program will individualize therapeutic treatment services, through the use of screening and assessment tools to help determine treatment needs and duration of services.

The proposal must describe plans to implement activities to engage youth in community-based experiences that promote positive socialization, self-esteem development, integration of positive values and pro-social behavior. Proposers are expected to provide a list of community partners and resources to ensure the program meets the requirements for positive community based non-secure experiences. Beyond the use of a levels system, treatment modalities that engage the youth in the therapeutic process are required. An understanding of approaches to get girls to process and change their behavior shall be apparent in the language and the curriculums identified by the Proposer.

Descriptions of measures for treatment gains are required. This includes documentation from community resources as well as facility documentation of the youth’s progress. Crisis intervention and capacity building concepts need to be evident in the program design.

The primary objectives of the step-down component are:

* + to assist youth in maintaining prior treatment gains and build on those skills
  + to provide for the safety and well-being of the youth, program staff and community
  + to provide services designed to reduce self-destructive behaviors; enhance life skills; facilitate social and emotional adjustment; and promote independent living skills
  + to provide services to the youth’s family/guardian to facilitate the successful reintegration of the youth to the community to which she will be returning
  + to provide educational opportunities and support to youth with a history of disengagement from the traditional school system
  + to assist in providing access to post-secondary educational services which include, but are not limited to, college preparation and referrals for post-secondary services
  + to provide assessments and interventions that consider the impact of childhood experiences such as abuse, neglect, exposure to violence, relationship difficulties, incarcerated family members, and substance use
  + to intervene with the youth and the systems associated with that youth to promote positive changes and re-integration into the community

LOCATION AND PHYSICAL REQUIREMENTS:

The physical location of the program site must be within the State of Alabama, and meet all licensing requirements.

The physical structure of the building shall have adequate square footage to meet the programmatic needs of the twelve (12) to sixteen (16) youth served in the program. Physical separation between youth in the two categories is pertinent. Therefore, it is preferred that residential living areas provides for separation of the drug/alcohol program youth, which includes those youth stepping down from a more intensive substance use program, from those youth stepping down from other residential programs.

The facility shall have a sufficient number of Safe Rooms that allows for the youth to calm down while being monitored for his safety (such as a video system or large plexiglass windows).

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude or a founded complaint of child abuse (see page 21). A plan must be in place to update the screening annually.

The number of staff qualified to provide all structural components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of awake program staff to meet the needs of the youth and shall be available to youth twenty-four (24) hours per day, seven (7) days per week. This facility will require at minimum, a staff to youth ratio of 1:8 while students are awake and 1:12 when students are asleep. Staff count shall not include administrative or clinical personnel. Educational and treatment staff must be qualified in accordance with the State of Alabama Law, policy and DYS regulations. Education and Treatment Programs must operate on a twelve (12) month basis (see pages 19-20).

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population.

SPECIAL CONDITIONS:

Length of stay may vary based on the program component and youth needs. Therefore, ninety percent (90%) of youth should complete the program within ninety (90) days of entering the program. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

Programs must meet certain designated conditions, as described elsewhere in this document. Some of those requirements include: possessing license as required by appropriate state agency, be designated as a DYS Medicaid Rehabilitative Services Provider, and operate a twelve (12) month Self-Contained Educational Program. A security plan for special needs of youth must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide and self-injurious behavior prevention and intervention plan. Engagement of the family/guardian in the program is vital and DYS expects Proposers to discuss a methodology for engaging the family/guardian from intake to community transition/discharge.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category, especially plans to connect youth with community support groups and/or services addressing substance use disorders. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**SERVICE CATEGORY #6**

**FEMALE INTENSIVE RESIDENTIAL TREATMENT PROGRAM**

DYS is soliciting Proposals to provide in-state residential services in a DYS provided facility for twelve (12) and/or twenty-four (24) female offenders who are in the care and custody of DYS.

Girls in this category are more likely to exhibit moderate to high behavioral problems; have been non-responsive to traditional in-home treatment approaches, have a history of school disengagement, a history of surviving sexual and/or physical abuse, and display behavioral/emotional problems. The intensity of the behavior varies with each youth. Their social history may include multiple placements by DYS and/or DHR, admittance in short term care facilities, mental health services with or without a mental health diagnosis, may exhibit self-injurious and/or suicidal behaviors, non-compliance with medication, intellectual deficits, inadequate impulse control, relational aggression (i.e., bullying and gossiping), and physical aggression toward others. Youth may also have a history of multiple service needs. They may require crisis intervention services and security monitoring for elopement. The preceding dynamics impact interventions; therefore, Trauma-Informed and Trauma-Responsive, strength-based, holistic treatment approaches are essential to rehabilitation.

Research indicates that there are several factors that contribute to girls’ involvement in the juvenile justice system; and although some life experiences are comparable to those of adolescent boys, it is the response to those circumstances along with developmental changes that are unique to girls which increases the need for differential approaches to treatment to address those Gender-Specific needs. This research necessitates that providers seeking to submit a Proposal for this service category develop programming that provides trauma responsive treatment which addresses coping methods for physical, emotional, and sexual abuse. Additionally, research recommends that program design shall describe mechanisms for enhancing the girls’ sense of self-identity, assertiveness and communication skills, and empathy building activities; which can be linked to relational aggression (Crothers et al., 2005). Developing authentic healthy relationships with peers and positive adult role models, and recognizing unhealthy relationships, are integral factors in rehabilitative treatment for girls (Foley, 2008). Those relationships often influence their sense of self-worth and belonging; which may result in an unhealthy view of sexual identity (Lowen, 2011). Therefore, it is important that treatment environments allow opportunities/activities that encourage self-expression and exploration to counteract past experiences and negative societal views and replace those images with ideas that encourage positive growth and healthy development.

Gender responsive programming is essential to the adolescent development and rehabilitation for this population of girls. As described by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) (1998), Gender-Specific programs must address the issues of delinquent girls using a comprehensive approach that allows for the exploration of problems, risks, history, and behaviors all at once and not fragmented. Essentially, the challenges girls face are complex and interrelated; therefore, services shall be provided on a continuum that permits youth to recognize the correlation between their past experiences, relationships, risk factors, and subsequent behavior. Positive relationships, specifically with a caring adult that expresses a genuine commitment, is an essential protective factor that will minimize the likelihood that girls will turn to peers (often negative influences) for support and validation (OJJDP, 1998). In addition to the areas mentioned in the above paragraph, identifying, understanding, and addressing the correlation between protective and risk factors is integral to the treatment of adolescent girls.

DESCRIPTION:

This program is designed to provide enhanced treatment and rehabilitative services for girls who are in the care of DYS and require Gender-Specific services to promote their safe return to their families and communities. The youth in this category have issues that are intense and may be more behavioral in nature. The use of valid screening and assessment instruments that have been normed for girls is required, and proposed instruments shall be described in the Proposal. The Proposal shall include the activities and program description requirements as described previously in pages 1-22. The Proposer shall tailor those requirements specifically to this initiative.

DYS seeks Proposals from providers for the provision of services which meet the unique needs of girls who are committed to DYS. The program design shall include evidence-based research, and provide enriched opportunities for girls to experience activities that will aid their psychosexual development and growth. The conceptual base for the program design shall be based on theories and program models which are known to be effective with the type of troubled delinquent girls to whom the program will be directed. Additionally, the program shall provide activities which will integrate positive cultural mores within the program. Therefore, entities developing female specific programs need to include:

* Impact of societal views on the treatment of adolescent females
* Knowledge and understanding of pubertal changes and the impact on female physical, emotional, and psychological health
* Thorough assessment which guides individualized services utilizing various Gender-Specific treatment interventions that include but are not limited to emotional/behavioral counseling
* Methods for addressing significant physical aggression and behavioral issues
* Approaches for addressing drug and alcohol treatment and/or education
* Access to therapeutic staff and mental health professionals
* Recognition and respect for various cultural beliefs and experiences present among this population of girls. This includes opportunities for enhancing cultural competency/sensitivity through programming and treatment experiences
* Gender sensitive policies that address practices such as cohesiveness between treatment and restraint necessary to minimize self-harm
* Parental education (when applicable)
* Comprehensive transitional/reentry component that describes program’s method for a youth’s seamless transition to her community
* Staff training regarding gender responsive programming and female development
* The frequency and duration for individual and group sessions

The Proposal shall also include the activities and/or program description requirements as outlined in the Description section of this RFP. The Proposer can determine the focus of the Treatment Program based on those requirements to specifically meet the needs of the type of girls that are intended to be served by the program. Creativity to address the Gender-Specific needs of delinquent girls is expected in the Proposal. These strategies may include but are not limited to the following: the use of art and literature that promote valuable contributions by women; images of various body types; diverse concepts of beauty; and encourage appropriate pro-social behavior. Specific attention shall be paid to issues and approaches that are directly related to girls who are behaviorally challenged. As an example, the Proposer shall present how the program will promote the engagement of resistant girls in the Treatment Program. Additionally, the Proposal shall describe how violence and aggression in girls will be addressed through treatment interventions and rehabilitative management programs. Approaches such as No Eject/No Reject policies and steps for de-escalation are required as they define strategies, beyond removal of the youth, to deal with difficult girls.

The program shall specify how the individualized treatment needs will be determined, including any assessment protocol(s). The process of determining gains, how treatment compliance and completion will be determined, and a projection of the expected duration of the Treatment Program shall be described. The service plan shall address the educational, emotional, and social needs of each girl, and include information regarding family/guardian engagement. When needed, counseling services shall be available to a youth’s immediate family/guardian. The service plan shall also include treatment goals related to protective factors and/or strengths. The program shall specify how the facility will individualize therapeutic treatment services including expected duration of the treatment relative to the youth served and assessed need for treatment through the development of an individualized service plan. The ISP development, modification, and amendment process must adhere to DYS policy and guidelines. It is an expectation that all youth, including resistant and lower functioning youth, are active contributors in the ISP process.

The program plan shall ensure stabilization, both medically and behaviorally and include access to

24 hour medical care, including dental and vision services. Plans shall be made to ensure that staff are well trained in caring for youth that are non-compliant with medication. In addition, training strategies regarding crisis intervention, stabilization procedures, and security protocol are required. The program shall define a plan for psychiatric consultation, as well as medical consultation and care. Medicaid rehabilitation services shall be readily available as dictated by the population served.

In addition to the training requirements noted on pages 21-22, the training program for this category shall detail the clinical skills and program specific training applicable to serving this population. DYS seeks to provide the Proposer with the flexibility to tailor an effective program model for the group of twelve (12) and/or twenty-four (24) girls who are proposed to be served.

LOCATION AND PHYSICAL REQUIREMENTS:

The program will be housed in the DYS J. Walter Wood Jr. Residential Treatment Facility located at 851 Sprott Road, Montgomery, AL 36117, and must meet all license requirements. The facility is equipped with a surveillance system, DYS VoIP phone system, and has the capacity for twenty-four (24) youth. Regular preventative maintenance and janitorial services will be the responsibility of the selected Vendor. This includes clogged drains and receptacles, standard light bulb replacement, smoke detector(s) maintenance, monitoring of security and safety mechanisms, and overall cleanliness of the building (i.e., sweeping, mopping, vacuuming, etc.). The proposal shall describe the Vendor’s plan to ensure the ongoing maintenance and janitorial needs will be met. All major facility maintenance and lawn care will be provided by DYS. Additionally, long-term physical operational maintenance of the facility will be the responsibility of DYS. The Vendor must provide timely notification to DYS of issues related to long-term operational issues (i.e., A/C or heating problems, etc.).

Based on the facility space and existing furnishings the Proposer must describe plans for the remaining furnishings and explain how Gender-Specific treatment, this population of adolescent girls, and staff and youth safety influenced the proposed design elements.

STAFFING AND PROFESSIONAL SERVICE REQUIREMENTS:

Educational and treatment staff must be qualified in accordance with Federal and State of Alabama Law, DYS policy and regulations, and Medicaid provider regulations. Criminal offense and child abuse screening shall be conducted and documented to assure that no staff member has a criminal record involving moral turpitude, or a founded complaint of child abuse. Additionally, it will be the Proposer’s responsibility to ensure that designated staff members (if applicable per job responsibilities) meet professional license requirements, Medicaid qualifications, and are permitted to provide medical services. A plan must be in place to ensure all state professional licenses and certifications are up to date. The Proposer is also responsible for meeting all PREA staff background checks and screening requirements.

The needs of this population require intensive programming and supervision. The number of staff qualified to provide all program components shall be adequate to meet the needs of the youth and shall be available to each program participant. There shall be an adequate number of program staff to meet the needs of the youth and staff shall be available to youth twenty-four (24) hours per day, seven (7) days per week. Due to the nature of this population, this facility will require, at minimum, a staff to youth ratio of 1:6 while youth are awake and 1:8 when youth are asleep. Staff count shall not include administrative, educational, or clinical (i.e., therapists, case managers, etc.) personnel.

MEALS AND COST PROPOSAL CONSIDERATIONS:

* Cost Proposal must include cost for meals and delivery and specify the following:
* plans for the provision of youth meals that meet child nutrition and health requirements. Plans shall include Proposer information, delivery, and on-site meal preparation
* whether or not the Proposer plans to use DYS provided meals
  + *Note:* if meals will be obtained from DYS the per diem rate must reflect these savings. Current DYS meal rate is $2.83, and this rate may be adjusted annually on October 1 based on the Consumer Price Index. Rate does not include delivery and on-site preparation costs which must be arranged by the provider.
* if DYS will not be providing the meals the Proposer shall indicate the supplier, rate, and fees in the Cost Proposal

SPECIAL CONDITIONS:

The program must meet certain designated conditions, as described elsewhere in this document. Those requirements are: possessing license as required by the appropriate state agency, be designated as a DYS Medicaid Rehabilitative Services Provider, have a twelve (12) month Self-Contained Educational Program (refer to pages 19-20), and promote and provide for family/guardian involvement in the resident’s rehabilitation. Ninety percent (90%) of youth should complete the program within one hundred-twenty (120) to one hundred-eighty (180) days of entering the program. Progress toward attainment of desired results will be assessed at least monthly. DYS recognizes that some students may not be able to succeed as expected in some programs. If it appears that a student is unable to successfully complete a program, the Vendor must utilize the internal “Review of Placement” process within the DYS system. The Vendor will not be authorized to contact the committing court requesting or suggesting amendments to the existing court order, or a new court order resulting in an extended length of stay at the program.

Serious Juvenile Offenders (SJO) may also be committed to the program for a minimum of one year or a commitment term specified by juvenile court. A safety and security plan must be included in the Proposal. The security plan must describe steps that will be taken to minimize escapes and include a suicide prevention and intervention plan which addresses methods for minimizing self-injurious behavior. The suicide prevention plan must be approved by a licensed mental health professional or physician.

Youth released from a residential facility often face a number of challenges that may impact their reintegration into the community and potentially impede their progress towards becoming productive – contributing members of society. These challenges may include obstacles transitioning to a new educational setting, obtaining employment, securing housing, receiving the necessary mental health services to continue the progress made during residential care, and issues reengaging into the familial environment. Given these potential challenges, additional life and work skill development is necessary. Therefore, the proposal must describe transitional planning activities anticipated for each youth prior to release from DYS (see page 16 for additional requirements). Transitional services should be individualized and informed by both programmatic and community needs, and tailored to meet the specific/unique needs of youth referred in this category. The program must maintain a community resource list/resource bank to assist youth and their families with transitional services.

**ATTACHMENT 1**

**BOARD RESOLUTION**

State of Alabama

County of

On the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_ at a meeting of the Board of Directors of:

,

with a quorum of the directors present, it was duly moved and seconded that the following resolution be adopted.

BE IT RESOLVED that the Board of Directors of the above corporation do hereby authorize

(Name & Title) and his/her successors in office to negotiate on terms and conditions that he/she may deem advisable, a contract or contracts with DYS and to execute said documents on behalf of the corporation, and further we do hereby give him/her the power and authority to do all things necessary to implement, maintain, amend or review said documents.

The above resolution was passed by a majority of those present and voting in accordance with the by-laws and articles of incorporation.

I certify that the above and foregoing constitutes a true and correct copy of the part of the minutes of a meeting of the Board of Directors on the above stated date.

|  |  |  |  |
| --- | --- | --- | --- |
| President |  | Date |  |
|  |  |  |  |

Secretary Date

**ATTACHMENT 2**

**PROGRAM BUDGET**

|  |  |  |  |
| --- | --- | --- | --- |
| **DESCRIPTION** | **ANNUAL BUDGET** | **Administrative** | **Programmatic** |
| SALARIES & FRINGES: |  |  |  |
| Personnel Salaries \* |  |  |  |
| Fringe Benefits |  |  |  |
| Total Salaries & Fringes |  |  |  |
| PERSONNEL TRAVEL: |  |  |  |
| Transportation |  |  |  |
| Conferences |  |  |  |
| Training |  |  |  |
| Total Personnel Travel |  |  |  |
| OPERATING SERVICES: |  |  |  |
| Printing |  |  |  |
| Insurance |  |  |  |
| Maintenance – Auto |  |  |  |
| Janitorial |  |  |  |
| Rental - Other \* |  |  |  |
| Dues & Subscriptions |  |  |  |
| Postage |  |  |  |
| Data/Internet |  |  |  |
| Utilities (Electricity & Water Only) |  |  |  |
| Auditing/Accounting |  |  |  |
| Total Operating Services |  |  |  |
| OPERATING SUPPLIES: |  |  |  |
| Office Supplies |  |  |  |
| Medical Supplies |  |  |  |
| Educational Technology & Maintenance |  |  |  |
| Food\* |  |  |  |
| Automotive Supplies |  |  |  |
| Maintenance Supplies |  |  |  |
| Janitorial Supplies |  |  |  |
| Laundry Supplies |  |  |  |
| Dietary Supplies\* |  |  |  |
| Juvenile/Offender Personal |  |  |  |
| Total Operating Supplies |  |  |  |
| PROFESSIONAL SERVICES: |  |  |  |
| Accounting & Auditing |  |  |  |
| Medical |  |  |  |
| Non-covered Medical Expenses |  |  |  |
| Consulting \* |  |  |  |
| Legal \* |  |  |  |
| Education \* |  |  |  |
| Other \* |  |  |  |
| Total Professional |  |  |  |

**ATTACHMENT 2**

**PROGRAM BUDGET**

|  |  |  |  |
| --- | --- | --- | --- |
| **DESCRIPTION** | **ANNUAL BUDGET** | **Administrative** | **Programmatic** |
| ACQUISITIONS: |  |  |  |
| Auto \* |  |  |  |
| Equipment \* |  |  |  |
| Other \* |  |  |  |
| Total Acquisitions |  |  |  |
| Other |  |  |  |
| Interest Expense \* |  |  |  |
| Miscellaneous Expenses \* |  |  |  |
| Total Other |  |  |  |
| TOTAL ANNUAL BUDGET |  |  |  |

|  |  |
| --- | --- |
| **PER DIEM CALCULATION** |  |
| Total Annual Budget | $ |
| Less (other non-Medicaid funding sources): |  |
| Education Grants | $ |
| Education Foundation Funding | $ |
| Specialized Treatment Center Funding | $ |
| ALSDE – Federal Funds (N& D, IDEA, Carl Perkins, etc.) | $ |
| Child Nutrition Funding | $ |
| Foundations/Corporations | $ |
| Other\* | $ |
| Net Annual Budget | $ |
| Net Annual Budget divided by 365 days | 365 days |
| Net Daily Budget | $ |
| Net Daily Budget divided by anticipated daily population | daily youth |
| Equals the Daily Per Diem Rate[[6]](#footnote-6) | $ |
| Percentage of the Daily Per Diem Rate that is considered room and board | % |

**\*Explanation of these line items must be attached to the Budget Format. Positions and salaries for each position must be attached. Indirect costs must be documented.**

**ATTACHMENT 3**

**COST PROPOSAL**

This sheet is a **MANDATORY** requirement of the Request for Proposal and must be signed by the person authorized to bind the proposing organization. Proposer may offer a different per diem for each service category or a different per diem for separate programs within a program category. For each program on which you are bidding, provide the per diem in the table below.

|  |  |  |
| --- | --- | --- |
| **SERVICE CATEGORY** | **PROGRAM** | **PER DIEM** |
| **2020-2023** |
| 1. | Community Residential Treatment Program and Facility for Low Functioning Youth |  |
| 2. | Male Community Residential Treatment Program for Medium Risk Youth |  |
| 3. | A. Male Community Group Home Program |  |
| 1. Male Community Group Home Program with Self-Contained   Educational Program |  |
| 4. | A. Drug/Alcohol Residential Treatment Program for  Males |  |
| B. Intensive Drug/Alcohol Residential Treatment  Program for Males |  |
| 5. | A. Intensive Multipurpose/Multifunctional Female Residential Treatment Program for Drug/Alcohol, Step-down, & Short-term Services |  |
| B. Female Residential Treatment Program for Drug/Alcohol & Step-down Services |  |
| 6. | Female Intensive Residential Treatment Program |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Proposer Signature of Contract Officer Date

**ATTACHMENT 4[[7]](#footnote-7)**

**ESTIMATED MEDICAID BILLING UNITS**

Proposer shall estimate the number of units that will be billed to Medicaid weekly (7 days). Estimates must be based on anticipated daily population and intake/release procedures.

|  |  |  |  |
| --- | --- | --- | --- |
| **Service Description** | **Max Daily Units Per Youth** | **Estimated Number of Youth That Will Receive Services** | **Estimated Weekly Billed Medicaid Units** |
| Individual Counseling  (30 minutes) | 1 Unit |  |  |
| Individual Counseling  (45 minutes) | 1 Unit |  |  |
| Individual Counseling  (60 minutes) | 1 Unit |  |  |
| Group Counseling  (60 minutes) | 1 Unit |  |  |
| Family Counseling w/Youth Present  (60 minutes) | 1 Unit |  |  |
| Family Counseling w/o Youth Present  (60 minutes) | 1 Unit |  |  |
| Crisis Intervention Services  (15 minutes) | 12 Units |  |  |
| Medical Assessment and Treatment  (15 minutes) | 6 Units |  |  |
| Medication Administration | 1 Unit |  |  |
| Medication Monitoring  (15 minutes) | 2 Units |  |  |
| Individual Basic Living Skills  (15 minutes) | 20 Units |  |  |
| Group Basic Living Skills  (15 minutes) | 8 Units |  |  |
| Individual Family Support Psychoeducational Services  (15 minutes) | 8 Units |  |  |
| Group Family Support Psychoeducational Services  (15 minutes) | 8 Units |  |  |
| Mental Health Coordination  (15 minutes) | 24 Units |  |  |
| Other (please specify) | \_\_ Unit(s) |  |  |

1. This attachment is applicable for Vendors with a Medicaid services contract with DYS. [↑](#footnote-ref-1)
2. This attachment is applicable for Vendors with a Medicaid services contract with DYS. [↑](#footnote-ref-2)
3. This attachment is applicable for Vendors with a Medicaid services contract with DYS. [↑](#footnote-ref-3)
4. This attachment is applicable for Vendors with a Medicaid services contract with DYS. [↑](#footnote-ref-4)
5. This attachment is applicable for Vendors with a Medicaid services contract with DYS. [↑](#footnote-ref-5)
6. Program capacity up to fifty percent will be paid at one hundred percent of the agreed upon per diem rate and empty beds over fifty percent capacity will be paid at fifty percent of the agreed upon per diem rate. See example on page 23. [↑](#footnote-ref-6)
7. This attachment is applicable for Vendors with a Medicaid services contract with DYS. [↑](#footnote-ref-7)