

**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 services to juveniles:

SERVICE CATEGORY	GENDER (Number of Potential Awards)	CAPACITY AND AREA	SPECIAL CONDITIONS
1. Community Residential Treatment Program and Facility for Youth and Behavioral Issues and Development or Intellectual Delays	Male (1)	8 youth per program	Medicaid Rehab 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 youth in the program	Medicaid Rehab Provider, Licensed by DYS, Self-contained Educational Program that meets the State of Alabama Education regulations, Family-Oriented Program
2. Community Residential Treatment Program for Medium Risk Youth	Female (1)	16 youth in the program	Medicaid Rehab Provider, Licensed by DYS, Self-contained Educational Program that meets the State of Alabama Education regulations, Family-Oriented Program
5. Short Term Community Treatment Program for Females	Female (1-2)	8-16 youth in each program	Medicaid Rehab Provider, Licensed by DYS, Self-contained Educational Program that meets the State of Alabama Education regulations. Program will be expected to be approximately 90-120 days in length.
6. Female Intensive Residential Treatment Program	Female (1)	24 youth in each program.	Medicaid Rehab Provider, Licensed by DYS, Self-contained Educational Program that meets the State of Alabama Education regulations. Program will be expected to be approximately 90-120 days in length.

Proposals are due by **3:00 PM CDT on May 28, 2026** at the Department of Youth Services address below. A mandatory Proposers conference will be held at **10:00AM CDT on May 15, 2026, via teleconference/Zoom. See page one (1) for instructions on how to join the teleconference.** Further details are outlined in the Request for Proposal Package. Submit this form, a paper copy of the proposal, and a USB with the proposal and all attachments to the address listed below.

For Regular U.S. Mail:  
**State of Alabama**  
**Department of Youth Services**  
**P.O. Box 66**  
**Mt. Meigs, Alabama 36057**  
**Attention: Mr. Chris Narcisse & Mrs. Monica Roland**

For Courier Service:  
**State of Alabama**  
**Department of Youth Services**  
**Administrative Support Operations**  
**1000 Industrial School Road**  
**Montgomery, Alabama 36057**  
**Attention: Mr. Chris Narcisse & Mrs. Monica Roland**

**Offeror's Name & Address:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

## AFFIRMATION

STATE OF ALABAMA DEPARTMENT OF YOUTH SERVICES	REQUEST FOR PROPOSAL			
	DATE ISSUED: <b>April 17, 2026</b>			
<b>FOR:</b> RESIDENTIAL PLACEMENT OF JUVENILE OFFENDERS	PROPOSAL MUST BE RECEIVED BEFORE:  DATE: <b>May 28, 2026</b> TIME: 3 PM CDT			
<p><b>TO BE COMPLETED BY OFFERER</b></p> <p>INFORMATION IN THIS SECTION SHOULD BE PROVIDED AS APPROPRIATE. THIS FORM MUST BE IN INK OR TYPED WITH ORIGINAL SIGNATURE AND NOTARIZATION.</p> <p>1. PROGRAM CAN BE STARTED WITHIN _____ DAYS AFTER EXECUTION OF CONTRACT.</p> <p>2. PRICES VALID FOR ACCEPTANCE WITHIN _____ DAYS.</p> <p>3. FEDERAL EMPLOYER ID NO. (IF NO FEIN, ENTER SSN): _____</p> <p style="margin-left: 40px;">SUBMIT THIS FORM WITH YOUR PROPOSAL:</p> <table style="width: 100%; margin-left: 40px;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><u>REGULAR U.S. MAIL</u></p> <p>State of Alabama                      Department of Youth Services                      P.O. Box 66                      Mt. Meigs, Alabama 36057                      Attention: Mr. Chris Narcisse &amp;                      Mrs. Monica Roland</p> </td> <td style="width: 50%; vertical-align: top;"> <p><u>COURIER SERVICE</u></p> <p>State of Alabama                      Department of Youth Services                      Administrative Support Operations                      1000 Industrial School Road                      Montgomery, Alabama 36117                      Attention: Mr. Chris Narcisse &amp;                      Mrs. Monica Roland</p> </td> </tr> </table>			<p><u>REGULAR U.S. MAIL</u></p> <p>State of Alabama                      Department of Youth Services                      P.O. Box 66                      Mt. Meigs, Alabama 36057                      Attention: Mr. Chris Narcisse &amp;                      Mrs. Monica Roland</p>	<p><u>COURIER SERVICE</u></p> <p>State of Alabama                      Department of Youth Services                      Administrative Support Operations                      1000 Industrial School Road                      Montgomery, Alabama 36117                      Attention: Mr. Chris Narcisse &amp;                      Mrs. Monica Roland</p>
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<p><b>SIGNATURE AND NOTARIZATION REQUIRED</b></p> <p>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.</p>				
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 May 28, 2026**

Submit to:

*For Regular U.S. Mail:*

State of Alabama  
Department of Youth Services  
P.O. Box 66  
Mt. Meigs, Alabama 36057  
Attention: Mr. Chris Narcisse &  
Mrs. Monica Roland

*Or*

*For Courier Service:*

State of Alabama  
Department of Youth Services  
Administrative Support Operations  
1000 Industrial School Road  
Montgomery, Alabama 36117  
Attention: Mr. Chris Narcisse &  
Mrs. Monica Roland

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## ATTACHMENTS

1. Board Resolution
2. Budget Format
3. Cost Proposal – **MANDATORY**
4. Estimated Medicaid Billing Units<sup>1</sup>

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<sup>1</sup>This attachment is applicable for Suppliers with a Medicaid services contract with DYS.

# 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 DHS 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 Offerors. Offerors will be required to provide the disclosure statement during contract negotiations. Offerors 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 one or more Proposals for the services indicated herein. The RFP is organized to promote an orderly analysis of the requirements of the DHS. The RFP also provides a basis for developing Proposals which should contain all the information necessary for DHS 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 Offeror. For not-for-profit organizations, such authority shall be evidenced by a *Board Resolution (Attachment 1)*.

The term “Offeror” 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 Supplier refers to a successful Offeror that has entered into a contract with DHS 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 Offerors to develop a Proposal for one (1) 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 Offeror addresses.

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

An Offeror’s conference will be held at 10:00 am on **May 15, 2026** via teleconference. The Offeror’s conference is mandatory to all Offerors 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 [monica.rowland@dys.alabama.gov](mailto:monica.rowland@dys.alabama.gov) by **May 14, 2026** at **5:00pm**.

The deadline for submission of written questions concerning this RFP package is **May 7, 2026**. Questions may be submitted via email to [monica.rowland@dys.alabama.gov](mailto:monica.rowland@dys.alabama.gov)

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 Suppliers must have an activated account in Alabama Buys. This can be done by visiting <https://alabamabuys.gov>. Registering in Alabama Buys will automatically register suppliers in STAARS. Once the account is created, the Supplier should follow the instructions on the AL Buys supplier website to access the account. Finance and DYS will no longer be able to update or correct the billing addresses. This will be the responsibility of the Supplier. The Supplier must be registered in AL Buys before a contract is awarded.

According to Alabama Buys, the name and address on the contract, E-Verify, and invoice must be the same. Please note that if the Supplier 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 \$25,000. The form is available at <https://www.procurement.alabama.gov> under Supplier Resources. 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. Form may be found at [https://alison.legislature.state.al.us/files/pdf/joint/contract\\_review/Certificate\\_of\\_Compliance.pdf](https://alison.legislature.state.al.us/files/pdf/joint/contract_review/Certificate_of_Compliance.pdf)

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 Offerors, additional written information obtained from Offerors, and/or information concerning the Offeror's previous performance in the operation of similar programs. The Executive Director of DYS may choose to negotiate directly with Offerors on the final student residential daily 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**

Proposal must be received by DYS by 3:00 p.m. CDT on **May 28, 2026** at the following below.  
Faxed or electronic proposals will not be accepted.

### **MAILING ADDRESS FOR REGULAR U.S. MAIL DELIVERY:**

State of Alabama  
Department of Youth Services  
P.O. Box 66  
Mt. Meigs, Alabama 36057  
Attn: Ms. Chris Narcisse & Mrs. Monica Roland

### **OR FOR COURIER SERVICE:**

State of Alabama  
Department of Youth Services  
Administrative Support Operations  
1000 Industrial School Road  
Montgomery, Alabama 36117  
Attn: Mr. Chris Narcisse & Mrs. Monica Roland

## 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 DHS 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 Offerors. Offerors will be required to provide the disclosure statement during contract negotiations. Offerors 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 DHS in meeting the service needs of youth committed to the care and custody of DHS.

Each Proposal will be judged on its own merit. Offerors should assess the need for therapeutic services and staffing levels consistent with the characteristics of the population to be served. Offerors 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 Offerors; therefore, we wish to stress that DHS 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 Offeror 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 Offerors 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 the DHS 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 Offeror may make a request to the Executive Director to waive this requirement.

The Offeror 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 Offeror 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 Offeror shall provide an insurance certificate to DHS. This announcement does not commit the State of Alabama or the DHS to award contracts or to pay for any costs incurred in the preparation of Proposals. DHS 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 DHS as indicated by the evaluation criteria contained in this RFP.

The award of a contract does not automatically commit DHS 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 Chief Procurement Officer 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 1, 2026**. Therefore, fully executed contracts, along with all required exhibits and attachments, must be submitted by the successful Offeror to the DYS Legal Division by close of business on **July 15, 2026**

DYS may request additional information for the purpose of evaluating the Proposal. The Offeror 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) Supplier: A successful Offeror 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 Supplier 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 Education Program: A Supplier provided educational services in compliance with Federal and Alabama state laws and regulations. Requirements include program youth participating in a twelve-month comprehensive education program, retention of student records, and mandated professional development. The program must provide state approved courses, evaluations, 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 behavioral program is *preferred*, which serves youth who have been adjudicated delinquent and who need specialized services in a supervised environment twenty-four (24) hours per day.

(j) Evidence-based treatment program: A prevention or treatment practice, regimen, or service that is grounded in consistent scientific evidence showing that it improves client/participant outcomes in both clinically controlled and real-world settings. The practice is sufficiently documented through research to permit the assessment of fidelity. This means elements of the practice are standardized, replicable, measurable, and effective within a given setting and particular population.

(k) Co-occurring: A secondary behavioral or cognitive disorder that exists in addition to the identified problem.

(l) Holistic enrichment and intervention: The causes of disorders in youths are multifaceted, requiring an evaluation and intervention system based on a holistic frame of reference that is developmentally appropriate.

(m) 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.

(n) Room confinement: Instances when a Youth is confined for cause or punishment 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.

(o) Isolation: Instances when a Youth is confined alone for cause or punishment 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.

(p) 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.

(q) 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 Supplier will not have the right to reject the youth. The Supplier 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.

(r) 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.

(s) 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.

(t) Transitional Services: Activities that prepare youth to function outside of the facility successfully. These include planning for academic transitions, therapeutic transitions, transition of medical care, and otherwise preparing the youth to return to live in a home environment. Transitional services include interchangeable terms such as Reintegration and Re-Entry.

DYS and any duly authorized representative of DYS shall have access to all facilities, books and records (including electronic files and documentation) of Suppliers for the purpose of 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 Offeror. For not-for-profit organizations, such authority shall be evidenced by a *Board Resolution (Attachment 1)*.**

By submission of a Proposal, the Offeror 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 Offeror.
- No attempt has been made or will be made by the Offeror to induce any other Offeror to submit or not submit a Proposal for the purpose of restricting competition.

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

#### **SUBCONTRACTS:**

The Offeror **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 Offeror 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. Offeror must submit qualifications of any subcontractors.

**AFFIRMATIONS:**

The Proposal must contain a suitable affirmative action policy to be adopted by Offerors. 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 Offeror must certify that they operate in a “drug-free” environment.

The Proposal should be prepared in a straight forward manner and include a concise description of the Offeror'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<sup>2</sup>**

**PROGRAM PERFORMANCE AND SANCTIONS:**

While it is a goal of DYS for all Suppliers 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 the State 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.

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<sup>2</sup> This attachment is applicable for Suppliers with a Medicaid services contract with DYS.

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 youths 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 Offeror'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 Offerors 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. Offerors 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:**

Suppliers 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 Suppliers will have access to. Suppliers must enter a Business Associate Agreement with DYS. In addition, Suppliers 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:**

Suppliers must make every reasonable effort necessary to obtain health care coverage for program youth. Each youth in the Supplier'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 Supplier 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 Supplier'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 Supplier 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 Supplier 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 Supplier's contract to ensure that rehabilitative services meet the requirements in the above-mentioned manual. The Supplier's contract will provide for monitoring and chargebacks to the Supplier for any charges against DYS that were assessed as a result of the Supplier's failure to meet Medicaid requirements. The Supplier will also be responsible for having on file the necessary credentials (i.e. degrees, licenses, etc.) of those professionals providing rehabilitative service and for submitting such credentials to DYS for approval and enrollment. The Supplier shall bill all eligible and medically necessary services (such as Basic Living Skills, Individual Counseling, Group Counseling, Medication Administration, Medication Monitoring) to Medicaid or any other insurance.
- All rehabilitative services shall be provided based on the determination of services needed 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.
- Suppliers must meet requirements of the most current Medicaid Code - Chapter 105 - Rehabilitative Services - DYS which requires that Suppliers 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 signed off on 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 (review and update, or continue).
- 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 Supplier will be solely responsible for submitting and re-submitting/reversing (when necessary) Medicaid claims using the DYS approved process. The Supplier 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 Supplier may be 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 Supplier's records and documentation are inadequate or inaccurate. ***Charges assessed to DYS shall be recouped from the contracted Supplier.***
- The Supplier 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 Suppliers for rehabilitative services delivered to youth in their care. The Supplier must maintain a direct deposit mechanism to receive Medicaid payments.
- The Supplier will provide rehabilitative services in accordance with the Alabama Medicaid Agency's Rehabilitative Service Manual, and will bill for eligible treatment costs for rehabilitative services. DYS personnel will monitor Medicaid claims submitted by the Supplier. Failure to submit adequate and timely claims could result in DYS withholding a portion of the Supplier's per diem or other corrective action.
- The Supplier 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 Service Providers must complete the Estimated Medicaid Billing Units form (Attachment 4)<sup>3</sup>.

**It is the Offerors responsibility to ensure that the physical structure identified in the proposal is ready for occupancy on October 1, 2026.**

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<sup>3</sup>This attachment is applicable to Suppliers with a Medicaid services contract with DYS.

## **PROGRAM INFORMATION**

### **PERFORMANCE/STATUS REPORT:**

Offerors' contracts with DYS will require submission of quarterly reports for the quarters ending December 31<sup>st</sup>, March 31<sup>st</sup>, June 30<sup>th</sup>, and September 30<sup>th</sup>. These reports are due by the 15<sup>th</sup> 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 youths 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 youths 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 youths 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. Professional external 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 restraints, timeout, isolation, voluntary segregation, and mandatory segregation
13. Number of re-staffs, runaways, assaults, injuries, health related and safety issues
14. Data on certified teachers and a status report on state mandated professional development for teachers.

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

### **FISCAL CONSIDERATION/PAYMENT:**

DYS expects to award multiple contracts as outlined on the face sheet of this packet. DYS anticipates that a twelve (12) month contract will be awarded beginning October 1, 2026 and ending September 30, 2027 with a two-year renewal option. The second contract, if agreed by both parties, would begin the day after the first contract expires. Any successive contract must have written approval of both the state and the Supplier 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). Offerors 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 Supplier will invoice DYS each month in arrears for the number of youths 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 Supplier 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/Screening and Placement Coordinator 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 Offeror for use in invoicing monthly.

Medicaid Rehabilitation Services are required to be provided within applicable service categories. Therefore, the Supplier 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 Supplier.

Supplier is responsible for paybacks to Medicaid for their claims paid for rehabilitative services that do not meet medical requirements or are deemed ineligible or erroneous as a result of an audit. While the DYS team will provide ongoing support, it is the Suppliers responsibility to stay abreast of all changes to Medicaid rules and requirements and remain knowledgeable of those requirements.

**SPECIAL/MANDATORY REQUIREMENTS:**

The Supplier shall abide by all relevant and applicable laws and policy and procedures as they now exist or as they may be amended, this includes, but is not limited to, complying with DYS policies related to the reporting of critical incidents. The Supplier is responsible for staying abreast and knowledgeable of all applicable state and federal laws and policies of DYS. The Supplier 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 Supplier to abide by such laws and/or policies. If a Supplier provides sufficient justification that an amended regulation or procedure results in a substantial and unforeseen change in the services the Supplier is required to provide, the Supplier will have the opportunity to discuss adjusting the per diem rate with the Executive Director of DYS.

The Offeror must provide certificate of insurability. The successful Offeror 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 Service Providers must complete the Estimated Medicaid Billing Units form (Attachment 4)<sup>4</sup>

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

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<sup>4</sup>This attachment is applicable for Suppliers with a Medicaid services contract with DYS.

## **ENFORCEMENT OF STANDARDS AND CONTRACTUAL COMPLIANCE**

Notwithstanding any provision of this Agreement to the contrary, DYS reserves the right to enforce compliance with all applicable standards and obligations, including but not limited to: licensure standards (whether mandatory or non-mandatory), contractual terms, agency policies and procedures, quality assurance issues, and any other performance expectations or conditions that DYS, in its sole discretion, deems necessary for the safety, well-being, and effective operation of its programs.

In the event that DYS identifies any condition, action, or omission by the Supplier that fails to meet such standards or requirements, DYS may issue a written Notice of Deficiency specifying the nature of the deficiency and providing a period of not less than sixty (60) calendar days from receipt of such notice to remedy the identified issue(s) to the satisfaction of the DYS Executive Director.

If the Supplier fails to correct the deficiency within the specified time frame, DYS may, at its sole discretion and in the interest of public safety or program integrity, impose sanctions. Such sanctions may include, but are not limited to, a reduction to the guaranteed minimum payment otherwise owed under this Agreement's occupancy provision, in an amount determined by the DYS Executive Director.

The imposition of sanctions under this section shall not preclude DYS from pursuing any other rights or remedies available under this Agreement or applicable law, including suspension, corrective action, or termination of the Agreement.

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## SCHEDULE OF EVENTS

**Request for Proposal Announced:** April 17, 2026

**Deadline to Receive Written Questions:** May 7, 2026

**Offerors Conference:** May 15, 2026  
Attendance is mandatory for **all** Offerors 10:00 a.m.  
*Location:* Teleconference, see page one for details.

**Proposals Due by 3 PM CDT on:** May 28, 2026

**Review of Proposals:** June 1- June 30, 2026

**Notification of Successful Offeror:** This will be completed by the State of Alabama Division of Procurement. We anticipate notification after June 30, 2026.

After June 30, 2026

**Deadline to Begin Program Operations:** October 1, 2026

DYS reserves the right to deviate from this schedule.

# PROPOSAL CONTENT

The Proposal shall contain at a minimum the following:

## Identifying Information

- Name of Offeror
- Name of contact person for Offeror
- 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
- Offeror status (i.e.: non-profit, proprietorship)
- Brief history of Offeror

## **FAILURE TO PROVIDE REQUIRED INFORMATION AND/OR DOCUMENTATION MAY RESULT IN DISQUALIFICATION OF THE PROPOSAL.**

Offerors shall adhere to the following format in the preparation of Proposals.

- One (1) original Proposal with proprietary information and notarized documents submitted via email.
- 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 Offeror 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 Offeror 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 16), **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 Offeror: Capability Statement (page 22), **must not exceed thirty (30) pages.**
  - Cost (page 24): 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.
- Offeror 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 Offerors upon award or upon completion of the evaluation process.

**The Proposal describes the Offeror’s scope of work and programs and services to be provided. Thus, the Proposal package is the Offeror’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**

## Offeror 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 Offerors will be held responsible for the continued provision of services as described in the Proposal for the entire contract period. If the Offeror 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 Offeror'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 should include that from within the last 10 years and shall be presented to describe the client and client systems, trauma-informed 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 Offeror 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 Offeror'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 Offeror's

parent agency if applicable.

- Develop a logic model for the proposed program, including program goals and objectives. A sample logic model may be viewed at [http://www.ojjdp.gov/grantees/pm/logic\\_models.html](http://www.ojjdp.gov/grantees/pm/logic_models.html).
- Describe specific policies and procedures for meeting the intake criteria specified by the agreement with DYS, which makes the ultimate placement decision. As such, Offerors are not permitted to develop independent admission and/or rejection 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 the 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.** While transitional services are included in the youth's ISP, a youth's transitional/re-entry/reintegration plan is a separate document and differs from the ISP and/or Individualized Treatment Plan. For purposes of distinguishing roles and responsibilities, the transitional plan will include recommendations for Aftercare, as Aftercare is a function of the Juvenile Court. The program is responsible for making recommendations and initial referrals for programs including, but not limited to, community mental health centers and academic institutions.
- Explain pre-release and aftercare planning requirements
- While 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 Supplier must utilize the internal "Review of Placement" within DYS system. The Supplier 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 at [Transition Guidebook](#)

#### 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 should be individualized and adapted based on assessed need for each youth. Program Description should include descriptions of how the program intends to ensure that the services will be individualized for each youth. Offerors should review DYS Policy 13.5.2 regarding length of stay

reporting requirements for youth, with indeterminate commitments.

- **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. Please note that there may have been recent updates to how gender specific practices and policies are defined. The offeror should be aware of the current recommended policies and practices.**
- 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 consider 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. Screening for self-harm and potential to harm others must be completed and should be comprehensive as set forth in Medicaid Chapter 105. Screening and Assessment for Independent Living skills is also required and should be comprehensive in nature. Screening for trauma related symptoms must be completed upon admission via the screening tool provided by DYS. Screening and Assessment instruments do not require a psychologist, psychometrist, psychiatrist, or other highly specialized staff to complete and can be completed by most of the clinical staff employed in the program. Assessment should include the family's input as often as possible.
- 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 modality. 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 Supplier'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.
- The program should be able to describe the expected dosage (hours and intensity) a youth will receive through the designed program. This should be confirmed in the weekly schedule of the program and include the following:
  - 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 Suppliers 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 into the system in a timely manner. Monthly training on the electronic records management system will be offered to selected Suppliers and ongoing support will be available, when needed.**

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

#### **Service Plan Management**

- Individual service plans (ISP) are developed, implemented, and amended for youth in accordance with current DYS policy. The development of these plans must involve the youth at all times. It is further expected that ISP's development will also include the family when possible. For Medicaid Rehabilitation Providers, the ISP must be developed and approved by a qualified professional per provisions laid out in Medicaid Chapter 105.
- Separate treatment plans shall be developed, implemented, and amended in compliance with DYS policy for each youth placed in the Supplier's facility. 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.
- Offeror 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 monthly 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 Offerors with access to DYS electronic records management system must enter and keep current all information required by the system.
- 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 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. 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 punishment.
- The Proposal shall include descriptions of behavioral intervention training and how it will be provided to staff.
- The Program should describe how Drug and Alcohol Treatment will be provided for a youth that is assessed to need the service.

### **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, academic, career, and post-secondary counseling, and GED/ACT preparatory services. **All online educational programming must be submitted to a designated DYS representative for pre-approval prior to implementation. No online educational service should be the sole educational services for the population. All suppliers must pursue and obtain an Alabama Department of Education STC (Specialized Treatment Center) endorsement.**

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- 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 follow 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 Offeror 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 Offeror 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 youth and provisions for providing special education services to those youth. The special program will ensure that all students, including those with disabilities, participate in the **State Assessment Program** (ACAP, Workkeys, etc.)
- The Offeror 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 exploring 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 Offeror: 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 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. Program must be prepared to provide verification of certified and appropriately degreed staff to DYS licensing staff during their temporary licensing audit.**
- Educational personnel must maintain at a minimum, a Class B or a Specialty Area 1 teaching certificate in the content area in which they are responsible for instruction from the Alabama State Department of Education.
- 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.
- Medicaid Rehabilitation providers should have treatment staff providing individual, group, or family therapy that meet the requirements of Medicaid Chapter 105.

The Offeror awarded this contract 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 the following areas:
  - Trauma-Informed and Trauma-Responsive care, including appropriate responses to trauma sensitive youth,
  - Suicide and self-injurious behavior prevention and intervention,
  - Transitional services,
  - PREA compliance which includes working with a special population of youth such as transgender, gay, and intersex (see page 9).
  - Working with clients with Problematic Sexual Behaviors, including treatment modalities available for clients exhibiting these behaviors, appropriate language and responses to use with these youth.
  - Awareness of Sex Trafficking among youth, warning signs, interventions that can help youth leave their trafficker, the importance of community support and not blaming the victim, and resources that can assist the youth with a safe transition back to a community setting.
  - De-escalation techniques and behavior management techniques.
  - Gender specific services.
  - Proper use of safe room and room confinement.

Explain how the timeline will be met for staff completing the individualized training plan. This plan should include initial training for staff, as well as a schedule for on-going training to address/re-visit these topics as new research is developed in these areas. The plan should also 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 Suppliers as deemed necessary. This includes any designated DYS personnel and/or parties contracted to provide technical assistance to the agency. The Supplier 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, Offerors 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 Offeror

- The Offeror 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 Offeror has sufficient financial strength to bear costs associated with program development and on-going program maintenance.
- The Offeror 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, Suppliers must consider that DYS will guarantee payment of per diem rates based on program capacity up to seventy-five percent (e.g. 16 total beds, only 11 beds are used, 100% per diem will be paid for 12 beds which includes the empty bed)."
- Medicaid Rehabilitative Service 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 Offeror
  - 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 Offeror 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
- Offeror 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
- Offeror 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**)<sup>5</sup>

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<sup>5</sup> This attachment is applicable for Suppliers with a Medicaid services contract with DYS.

## 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 Offeror's responsibility to review the requirements included in the body of the RFP and to adequately address the requirements in the Proposal.

- A. The program design is described adequately and links conceptual models to program design and development; specifically addressing the population to be served.
- B. 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.
- C. The program describes how **Trauma-Informed and Trauma- Responsive care** is incorporated into treatment approaches and interventions.
- D. Proposal describes methods for **engaging youth in ISP development, modifications, and amendments**.
- E. Proposal explains how the program will utilize selected assessment and screening tools to inform ISP development and programming.
- F. Suicide and self-injurious behavior prevention and intervention strategies and protocols are clearly explained.
- G. Methods and interventions proposed for **de-escalation and behavior management** shall be explained, including the rationale for selecting chosen methods.
- H. All components of educational and vocational programming and activities are to be extensively described. This description must include but not be limited to GED preparation, PowerSchools, record keeping, teacher training, and post-secondary assistance.
- I. Proposal includes an internal performance monitoring and program evaluation system.
- J. Proposal addresses and also demonstrates a clear understanding of each of the program specifications and technical issues of the RFP.
- K. The program objectives are realistic, reasonable and obtainable.
- L. The Proposal specifically addresses methodologies to accomplish the objectives set forth in the work statement.
- M. The Proposal demonstrates a **creative and innovative approach**.
- N. The Proposal makes use of **evidence-based practice approaches and methodologies**.
- O. The Proposal delineates a specific rationale for approaches selected to ensure that gender responsive programming is implemented.
- P. Outlines strategies to include **engagement of the family/guardian** and supportive community resources.
- Q. 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.
- R. The Proposal includes a contingency plan for dealing with critical incidents and/or emergency

situations.

Qualifications of Offeror – 15 Points

See the description of the various responsibilities as described in the RFP under the Qualifications of the Offeror: Capability Statement (page 22). The evaluation criteria will include elements of the aforementioned requirements, including the components highlighted below:

- A. Proposal includes sufficient number of staff to deliver the proposed services.
- B. Qualifications of staff are adequately described and are appropriate for the task to be performed.
- C. Job descriptions for all staff are included. Job descriptions clearly outline the task to be performed by each worker.
- D. Lines of authority among staff members are clearly described.
- E. Overall staffing patterns are conducive to achievement of objectives.
- F. Describes how staff training plans are informed by trauma-informed care, gender responsive treatment, job functions, and youth population.
- G. Square footage is adequate to the program needs of the youth served.

Cost - 35 Points

- A. Information provided in the Cost Proposal supports the reasonableness of the per diem quoted. Unreasonable per diems, for example \$10 will be deemed unreasonable and no points given for costs.
- B. 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 YOUTH WITH BEHAVIORAL ISSUES AND  
DEVELOPMENTAL/INTELLECTUAL DELAYS**

DYS is soliciting Proposals to provide services for eight (8) male youth with behavioral issues and developmental/intellectual delays, 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. They may be youth who have been declared to be multiple needs children by juvenile court. 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 lower functioning in the basic areas of their life. Most typical youth programs make use of cognitive and behavioral approaches that are difficult for lower functioning youth to master. Therefore, Proposers are required to identify curriculum and treatment approaches that may be modified to accommodate lower functioning youth while utilizing concepts of trauma-informed care. Partnerships with agencies such as vocational rehabilitation and/or special education services are expected to promote full inclusion in education for lower 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 (including aggressive behavior); 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 <http://www.socialworkers.org>.

The Proposal should include the activities and program description requirements as described previously in pages 1-25. The Proposer should 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 should 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 worthiness 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, as discussed in *Zastrow, C. Introduction to social work and social welfare empowering people, (CA: Thompson Brooks/Cole, 2008, 2004)*

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) lower 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 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 22). 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 page 20-21).

At a minimum, all staff with direct client contact should be trained in the following areas:

- Trauma-Informed and Trauma-Responsive care, including appropriate responses to trauma sensitive youth
- Suicide and self-injurious behavior prevention and intervention
- Transitional services
- PREA compliance which includes working with a special population of youth such as transgender, gay, and intersex (see page 9)
- Working with clients with Problematic Sexual Behaviors, including treatment modalities available for clients exhibiting these behaviors, appropriate language and responses to use with these youth
- Awareness of Sex Trafficking among youth, warning signs, interventions that can help youth leave their trafficker, the importance of community support and not blaming the victim, and resources that can assist the youth with a safe transition back to a community setting
- De-escalation techniques and behavior management techniques
- Gender specific services
- Proper use of safe room and room confinement

#### SPECIAL CONDITIONS:

Ninety percent (90%) of program participants are expected to 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" within DYS system. The vendor must also comply with DYS policy 13.5.2 regarding youth without a determinant commitment who remain in the program for six months. 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 comprehensive twelve (12) month comprehensive 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. Proposers must describe transitional planning techniques anticipated for each youth prior to release from DYS (see page 17). The program must maintain a community resource list/resource bank to assist youth and their families with educational and therapeutic 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 up to sixteen (16) offenders, in each program, who are in the care and custody of DYS. A total of two (6) separate contracts may be awarded, with two (2) of those serving females and two to four (2-4) of them serving males. 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.

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 care, strength-based approaches, rites of passage, healthy lifestyle, healthy sexuality, aggression replacement/anger control, gang management curriculum, and family dynamics.

The Proposal should include the activities and program description requirements as described previously in pages 1-19. The Offeror should tailor those requirements specifically to this initiative.

Counseling should be available to the family/guardian and they should be encouraged to use the service. The Offeror 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 Offeror should specify whether the program will cover admissions from a particular geographical area of the state, i.e., north Alabama counties or statewide. Because a total of three (3) to four (4) units may be awarded, the Offeror may opt to submit multiple applications covering different (but specifically identified) areas of the state. A separate Proposal should be developed for each program unit being responded to. DYS seeks to provide the Offeror 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/behavioral counseling
- Moral/character development training
- Access to therapeutic staff and local community mental health services
- Aggression/Aggressive Behavior Management

A service plan, which includes family/guardian involvement in the youth's rehabilitation process, will be developed by the Supplier within ten (10) days for all youth placed within the facility. Input from the youth, family/guardian, and Supplier 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 to accomplish 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) 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 20). 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 page 19).

At a minimum, all staff with direct client contact should be trained in the following areas:

- Trauma-Informed and Trauma-Responsive care, including appropriate responses to trauma
- sensitive youth,
- Suicide and self-injurious behavior prevention and intervention,
- Transitional services,
- PREA compliance which includes working with a special population of youth such as transgender, gay, and intersex (see page 9).
- Working with clients with Problematic Sexual Behaviors, including treatment modalities

- available for clients exhibiting these behaviors, appropriate language and responses to use with these youth.
- Awareness of Sex Trafficking among youth, warning signs, interventions that can help youth leave their trafficker, the importance of community support and not blaming the victim, and resources that can assist the youth with a safe transition back to a community setting.
- De-escalation techniques and behavior management techniques.
- Gender specific services.
- Proper use of safe room and room confinement.

**SPECIAL CONDITIONS:**

Ninety percent (90%) of participants will 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 Supplier must utilize the internal “Review of Placement” within DYS system. The Supplier must also comply with DYS policy 13.5.2 regarding youth without a determinant commitment who remain in the program for six months. The Supplier 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 comprehensive 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 Offeror to outline a methodology for engaging the family/guardian from intake to community transition/discharge. Providers must describe transitional planning techniques anticipated for each youth prior to release from DYS (see page 17). The program must maintain a community resource list/resource bank to assist youth and their families with educational and therapeutic transitional services.

**SERVICE CATEGORY #5**  
**SHORT TERM COMMUNITY TREATMENT PROGRAM FOR FEMALES**

DYS is soliciting Proposals to provide services for eight (8) to twelve (12) females. A total of one (1) to two (2) units may be awarded according to capacity. A Proposer can submit a Proposal for one or more programs. However, a separate Proposal and cost figures are required for each program. These youth are more likely to have limited legal involvement and are considered low risk. However, they often present challenging behavior beyond the behaviors referenced above. Youth referred to short term community treatment programs may include youth who have runaway and truant behavior, physical aggressiveness, and moderate behavioral/emotional problems. The preceding dynamics impact interventions; therefore, trauma-informed strength-based treatment approaches are essential to rehabilitation.

**DESCRIPTION:**

A short-term community treatment program is a structured behavioral treatment program which serves youth who have been adjudicated delinquent or in need of services in a structured environment twenty-four (24) hours per day with an operational capacity of eight (8) to twelve (12). This program should be able to accommodate both a 45-day option and a 90-day option.

The purpose of this service category is to provide a comprehensive program of care and treatment to the youth in a non-secure treatment type atmosphere. The Proposal shall include the activities and program description requirements as described previously in pages 1-25. The Proposer shall tailor those requirements specifically to this initiative. 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.

The program shall 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.

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 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.

Descriptions of measures for treatment gains are required. This includes documentation from community resources as well as facility documentation of the youth's progress.

Due to the short-term treatment anticipated, crisis intervention and capacity building concepts need to be evident in the program design.

The primary objectives of the short-term community treatment program 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 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 abuse
- to intervene with the youth and the systems associated with that youth to promote positive changes and re-integration into the community
- Trauma-Informed and Trauma-Responsive care, including appropriate responses to

#### 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.

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 22). 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 page 17).

At a minimum, all staff with direct client contact should be trained in the following areas:

- Trauma-Informed and Trauma-Responsive care, including appropriate responses to trauma sensitive youth,
- Suicide and self-injurious behavior prevention and intervention,
- Transitional services,
- PREA compliance which includes working with a special population of youth such as transgender, gay, and intersex (see page 9).
- Working with clients with Problematic Sexual Behaviors, including treatment modalities available for clients exhibiting these behaviors, appropriate language and responses to use with these youth.
- Awareness of Sex Trafficking among youth, warning signs, interventions that can help youth leave their trafficker, the importance of community support and not blaming the victim, and resources that can assist the youth with a safe transition back to a community setting.
- De-escalation techniques and behavior management techniques.
- Gender specific services.
- Proper use of safe room and room confinement.

#### SPECIAL CONDITIONS:

Ninety percent (90%) of the participants are expected to complete the program within forty-two (42) 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” within DYS system. The vendor must also comply with DYS policy 13.5.2 regarding youth without a determinant commitment who remain in the program for six months. 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 rehabilitation provider, and operate a comprehensive 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. Providers must describe transitional planning techniques anticipated for each youth prior to release from DYS (see page 17). The program must maintain a community resource list/resource bank to assist youth and their families with therapeutic and educational 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, relational aggression (i.e., bullying and gossiping), and physical aggression toward others. These youth may be declared as multiple needs children by juvenile court. They may require crisis intervention services and security monitoring for elopement. The preceding dynamics impact interventions; therefore, trauma-informed, 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 1-19. 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
- Access to therapeutic staff and mental health professionals
- Plans for addressing drug and alcohol treatment and/or education
- 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
- Staff training and student curriculum that addresses awareness of sexual exploitation and sex trafficking.
- 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 behavioral management programs. Approaches such as no eject/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.

The training program for staff shall be consistent with DYS requirements for staff in a community residential program as outlined herein. The training plan shall also provide yearly training conducted by qualified personnel on meeting the needs of female youth. The Proposal shall provide information regarding the manner in which those training needs will be identified and met. 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. All physical facility maintenance and lawn care will be provided by DYS. Proposer shall outline a plan for janitorial services within the building.

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:

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 22). A plan must be in place to update the screening annually.

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.

At a minimum, all staff with direct client contact should be trained in the following areas:

- Trauma-Informed and Trauma-Responsive care, including appropriate responses to trauma sensitive youth,
- Suicide and self-injurious behavior prevention and intervention,
- Transitional services,
- PREA compliance which includes working with a special population of youth such as transgender, gay, and intersex (see page 9).
- Working with clients with Problematic Sexual Behaviors, including treatment modalities available for clients exhibiting these behaviors, appropriate language and responses to use with these youth.
- Awareness of Sex Trafficking among youth, warning signs, interventions that can help youth leave their trafficker, the importance of community support and not blaming the victim, and resources that can assist the youth with a safe transition back to a community setting.
- De-escalation techniques and behavior management techniques.
- Gender specific services.
- Proper use of safe room and room confinement.

#### 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 \$4.72, 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 comprehensive twelve (12) month self-contained educational program (refer to page 20-21), and promote and provide for family/guardian involvement in the resident's rehabilitation. Ninety percent (90%) of youth shall complete the program within one hundred-twenty (120) to one hundred-eighty (180) days (four to six months) 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" within DYS system. The vendor must also comply with DYS policy 13.5.2 regarding youth without a determinant commitment who remain in the program for six months. 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.

Youth in need of evaluation and/or stabilization may be placed in the program for up to 30 days for those purposes before transitioning to another facility that is suited for their needs. Additionally, 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. Additionally, providers must describe transitional planning techniques anticipated for each youth prior to release from DYS. Family/guardian engagement from intake to community transition/discharge is essential. The program must maintain a community resource list/resource bank to assist youth and their families with therapeutic and educational 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
<b>SALARIES &amp; FRINGES:</b>			
Personnel Salaries *			
Fringe Benefits			
Total Salaries & Fringes			
<b>PERSONNEL TRAVEL:</b>			
Transportation			
Conferences			
Training			
Total Personnel Travel			
<b>OPERATING SERVICES:</b>			
Printing			
Insurance			
Maintenance – Auto			
Janitorial			
Rental - Other *			
Dues & Subscriptions			
Postage			
Data/Internet			
Utilities (Electricity & Water Only)			
Auditing/Accounting			
Total Operating Services			
<b>OPERATING SUPPLIES:</b>			
Office Supplies			
Medical Supplies			
Educational Technology & Maintenance			
Food*			
Automotive Supplies			
Maintenance Supplies			
Janitorial Supplies			
Laundry Supplies			
Dietary Supplies*			
Juvenile/Offender Personal			
Total Operating Supplies			
<b>PROFESSIONAL SERVICES:</b>			
Accounting & Auditing			
Medical			
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):	
PowerSchools	\$
Education Grants	\$
Education Foundation Funding	\$
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 capacity daily population	___ daily youth
Equals the Daily Per Diem Rate <sup>6</sup>	\$
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.**

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<sup>6</sup>DYS will guarantee payment of per diem rates based on program capacity up to seventy-five percent (e.g. 16 total beds, only 11 beds are used, 100% per diem will be paid for 12 beds which includes the empty bed).”

**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. Offeror 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
		2027- 2029
2.	Male Medium Risk Residential Treatment Program	

\_\_\_\_\_  
Name of Offeror

\_\_\_\_\_  
Signature of Contract Officer

\_\_\_\_\_  
Date

**ATTACHMENT 4<sup>7</sup>**  
**ESTIMATED MEDICAID BILLING UNITS**

Offeror 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.

<b>Service Description</b>	<b>Max Daily Units Per Youth</b>	<b>Number of Youth Services are Billed</b>	<b>Estimated Weekly Billed Medicaid Units</b>
Individual Treatment (30/45/60 minutes)	1 Unit		
Group Treatment (60 minutes)	1 Unit		
Family Treatment w/Youth Present (60 minutes)	1 Unit		
Family Treatment w/o Youth Present (60 minutes)	1 Unit		
Multi-Family Group Treatment (60 minutes)	1 Unit		
Crisis Intervention Services (15 minutes)	12 Units		
Physician Services (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 Consultation (15 minutes)	24 Units		
Other (please specify)	__ Unit(s)		

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<sup>7</sup> This attachment is applicable for Suppliers with a Medicaid services contract with DYS.