



VENTURA COUNTY  

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**BEHAVIORAL HEALTH**  
A Department of Ventura County Health Care Agency

**REQUEST FOR PROPOSAL (RFP)**

**MOBILE MENTAL HEALTH PROGRAM**

ISSUED: FEBURARY 2, 2024

DUE: MARCH 4, 2024

**RFP INTRODUCTION**

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**RFP INTRODUCTION**

**Ventura County Behavioral Health  
RFP Summary**

**Purpose**

Ventura County Behavioral Health (VCBH), a division of the County of Ventura, is seeking written proposals from qualified culturally proficient providers to select one provider to deliver mobile, reliable, flexible physical and mental health care in the community, especially focused on unserved and underserved individuals in Ventura County, regardless of insurance or residential/citizen status. The Mobile Mental Health Program is designed to deliver quality, brief, potentially consistent, walk-in style mobile mental health intervention to residents who have recently been in crisis, live in underserved areas, or are a part of underserved communities.

The initial anticipated contract period will be from July 1, 2024 through June 30, 2025 with the possibility of one (2) additional one (1) year extension.

**Timeline (subject to change)**

Issue RFP.....	February 2, 2024
Bidder Registration (Intent to Bid).....	March 4, 2024
Bidder Questions Due to VCBH.....	February 16, 2024
VCBH Question Response .....	February 26, 2024
Proposals Due by 5 p.m.....	March 4, 2024
Contractor Selection/Notification.....	April 29, 2024
Contract Finalized.....	May 6, 2024
Board of Supervisors Approval Received.....	June 18, 2024
Operations Initiated by Contractor.....	July 1, 2024

**Intent to Bid**

Each bidder is responsible for indicating their intent to bid by March 4, 2024, through the Ventura County Bonfire system at <https://ventura.bonfirehub.com/opportunities/113443>. **To be able to submit a proposal, your organization must indicate its intent to bid.** Any RFP addenda, questions and answers, or updated information will be made available through the Bonfire system.

**Bidder RFP Questions**

All questions related to this RFP may be directed to the assigned VCBH Contracts Administrator, Jillian Simmons, through the Message section of the Bonfire system at <https://ventura.bonfirehub.com/opportunities/113443>. The VCBH Contracts Administrator facilitating this RFP is the **only individual** authorized to answer questions related to this RFP. **Any questions directed to or contact with VCBH staff, other than the assigned VCBH Contracts Administrator, will disqualify a potential bidder.** The questions and answers will be distributed through the online Bonfire system to all registered bidders.

**Bidder Bonfire Support**

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Any technical questions or issues related to the use of the Bonfire system may be sent to [support@gobonfire.com](mailto:support@gobonfire.com). Bidders are encouraged to not only ensure they understand the Bonfire system in advance of uploading an RFP proposal, but to allow sufficient time to upload their RFP proposals if they encounter issues that will require Bonfire system support.

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### **GENERAL INFORMATION**

#### **1.1 Purpose of RFP**

Ventura County spent 18 months conducting a Community Mental Health Needs Assessment in 2019 (CMHNA, 2019). Due to a delay in supply lines the building of the required van for the proposed Mobile Mental Health Van was delayed by two years. Thus, some of the cited sources are still from that point in time however they remain a critical need.

The CMHNA assessment resulted in the following key findings:

- Lack of access to needed mental health services
- Depression as a major mental health illness
- Individuals experiencing homelessness having the worst mental health outcomes
- Substance abuse as a co-morbidity impacting health care

Therefore, through this RFP the County seeks to: (1) enhance care for individuals experiencing homelessness and living with mental illness, (2) enhance/improve focus on culturally responsive mental health services, and (3) provide field based follow up for individuals who have had a recent crisis or crisis-like situation. The proposed mobile mental health model is a promising best practice for mollifying many obstacles and barriers to mental health care access. Examples of barriers include transportation, limited to no health insurance, resident/citizenship status, financial costs, linguistic and cultural barriers, a perceived absence of patient centered care, psychological barriers, intimidation by health care settings, hours of operation, anonymity, and stigma concerns

In response to the CMHNA, 2019 assessment findings, VCBH is seeking a provider to implement a mobile mental health care service. The Mobile Mental Health Program will deliver quality, brief, walk-in style mobile mental health therapy to residents who have recently been in crisis, live in underserved areas, and/or those who are a part of underserved communities. The selected contractor from this RFP will provide a menu of flexible services focused on patient-centered care through patient education and empowerment in the community and on-call. Services would be short-term solutions focused on mental health sessions, substance use services, peer support, injections or prescription of psychiatric medications, prevention screenings and testing of health factors, and diabetes and hypertension monitoring.

#### **1.2 Nomenclatures**

The terms Bidder, Vendor, or Proposer may be used interchangeably in this RFP to designate an organization interested in responding to this RFP. The terms RFP, RFP Solicitation, or Solicitation refer to all proposal documents and related addenda produced by VCBH and provided to prospective Bidders. The terms Successful Proposer, Successful Contractor, and Contractor may be used interchangeably in this RFP and shall refer exclusively to the organization with whom VCBH enters a contract because of this RFP.

#### **1.3 VCBH Background**

VCBH is the public authority at the County level that is responsible for mental health and

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substance use prevention, education, and treatment. As a public agency, VCBH is responsible for assisting many of the County's most vulnerable residents who have serious mental illness.

VCBH provides leadership, coordination, and oversight of the prevention and early intervention services for the following populations:

- Individuals and families who have been identified as experiencing the onset or early signs of mental illness.
- Individuals in the community suffering with depression and anxiety whose symptoms may worsen if unattended.
- Individuals who have Medi-Cal, private insurance, no insurance, or who are underinsured.

VCBH is committed to providing comprehensive mental health services and ensuring that a full continuum of care is available for clients. VCBH provides mental health services through county operated outpatient clinics, regionally based county service teams, and various contract providers. VCBH strives to ensure that the mental health services that are provided to clients are consumer-driven, integrated, recovery oriented, and culturally competent.

**1.4 Mobile Mental Health Program Background**

Ventura County has an ongoing focus on how to address several critical issues identified by the 2019 CMHNA as outlined in the most recent Mental Health Services Act (MHSA) 2020-2023 Three-Year Program and Expenditure Plan. Additionally, with the COVID-19 pandemic, these critical issues have been exacerbated, increasing the need for urgent services, and responding in a more immediate manner. Chief among the findings of the CMHNA was the importance of providing: (1) enhanced behavioral health services for individuals who are experiencing homelessness and living with mental illness and (2) more culturally responsive mental health services provision. Additionally, a need for an augmentation of VCBH's crisis team services has also been identified. Community stakeholders have flagged the need for a response to crisis calls that do not rise to the level requiring immediate intervention (such as a 5150) but do require an urgent field response. The mobile mental health provider can also respond after a client who has been placed on a psychiatric hold and remains in an emergency department, but either has ceased to meet 5150 criteria or their 72-hour hold has expired. The County does not have a singular ability or responsibility across these issues but can work to be adaptable in its commitment to respond.

One of the primary goals of MHSA Innovations funding is to increase access to mental health services. Given the County's vastly diverse communities and individual needs, combining these services into one programmatic approach may be challenging. However, findings from a mobile health literature review of 51 articles with evidence found that mobile health care units are successful in reaching vulnerable populations by delivering services directly in communities of need and flexibly adapting their services based on the

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changing needs of the targeted community (Yu, S.W.Y., Hill, C., Ricks, M.L. et al. 2017).

The County is seeking a provider to implement a program that delivers a menu of flexible services to the underserved and who can supplement requests for assistance to crisis calls that do not rise to the level requiring a crisis field response with an expedited curbside appointment response. This hybrid model would be able to bill for Short-Doyle Medi-Cal (SD/MC) Federal Financial Participation (FFP) mental health services on existing hard-to-reach clients and expand outreach efforts for the public in need of mental health services whose entry point may come during an especially stressful situation.

Barriers to any type of health care include transportation, health insurance status, undocumented status, financial costs, linguistic and cultural barriers, an absence of patient-centered care, psychological barriers, challenges navigating health care settings, hours of operation, anonymity, and stigma concerns. Mobile mental health care can overcome these elements by providing culturally competent trained staff who are easy to talk to and through reliable schedules offer services in familiar environments. Mobile services can also assist in identifying additional risk factors and chronic diseases that may contribute to the overall shorter lifespan of individuals living with serious mental illness (Carmack HJ. 2010).

The successful bidder would provide and/or collaborate with the Health Care Agency (HCA) and/or a medical provider to provide services that will combine a focus on mental health as well as monitoring or screening for chronic physical health conditions such as diabetes, hypertension, and heart disease. Baseline and regular follow-up screenings are integral to managing these chronic conditions which are challenging to maintain, especially within migrant farm working populations where individuals may be experiencing homelessness or living temporarily in farmworker housing. There is also evidence that indicates mobile unit patients demonstrate an increased sense of self-efficacy and ability to manage their chronic conditions and navigate the healthcare system – a chief concern for individuals who are homeless (Aung K, Hill C, Bennet J, Song Z, Oriol N. 2015).

Attempts to create this plan and work towards solving some of these community concerns have been ongoing since early 2020. Changing needs and fiscal insolvency prevented the project from moving forward. In late 2020, the plan was submitted as an Innovation idea listing several project goals and overwhelmingly received the most votes to be developed. Later approvals took place at the Behavioral Health Advisory Board, Board of Supervisors, and the Mental Health Services Oversight and Accountability Commission (MHSOAC) with the final approval in June 2021. Evaluation requirements for Innovation funding are established as a part of this approval process. The successful bidder will have to support these evaluation efforts and potentially assist in presenting findings.

**1.5 Target Population to be Served****Mobile Mental Health Program Target Population Background**

The successful bidder shall be able to serve the following unserved and underserved populations in Ventura County as defined by the CMNHA: (1) Hispanic/Latinx community



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(including a focus on Indigenous communities from Mexico and Latin America, temporary and permanent agricultural workers, and limited English speakers) and (2) individuals who identify as experiencing homelessness. The successful bidder shall also be able to serve individuals who have had a recent mental health crisis. The successful bidder shall also serve other underserved populations such as adults, older adults, children, transitional age youth, LGBTQ+, Black and African American, and other populations identified as unserved and underserved in subsequent CMHNAs.

The Ventura County CMHNA found that homeless individuals reported worse mental health outcomes than every other priority population across several key factors, including (1) self-rated mental health status, (2) substance use, (3) suicidal ideation or attempts, and (4) receiving mental health services that were either culturally or linguistically inappropriate. Homelessness has been rising in Ventura County. As shown in the table below, the 2020 point-in-time count demonstrates a 4% increase from the year before.

<b>Yearly Point in Time Count Homeless Individuals</b>	<b>Totals</b>
2018	1,299
2019	1,669
2020	1,743
2021	0*
2022	2,441

\*Department of Housing and Urban Development approved the cancellation of the 2021 unsheltered count due to COVID.

The total number of homeless individuals in 2020, according to that same report, is 1,743. The 2020 point-in-time homeless count also showed unevenly distributed homeless individuals with two-thirds of the individuals living in the cities of Oxnard and Ventura, the county’s largest urban centers.

**Ventura County Population Information**

In 2022, Ventura County had a total population of 840,473.

Ventura County’s race and ethnicity percentages are as follows:

<b>Race/Ethnicity</b>	<b>Percentage</b>
Caucasian/White	44.11%
Hispanic/Latino	54.89

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**1.6 Budget**

To assist VCBH in determining the potential cost of bidders’ services, each bidder’s budget must respond to the staffing guidelines, training, supervision, management, and services detailed in this RFP. Bidders must use the budget template (Attachment “A”) in developing and submitting their budgets for this RFP. VCBH recognizes that the selected contractor will need to conduct various startup/transition activities in advance of and preparation for program service delivery. Therefore, VCBH will contract with the successful bidder for three (3) years, with the first three (3) months of the budget for year one being for a start-up period. After the three (3) month start-up period of July 1, 2024, through September 30, 2024, the submitted budgets should reflect a fully operational program.

Bidders shall submit a budget which includes each of the following terms:

- July 1, 2024, through September 30, 2024 (start-up budget)
- October 1, 2024, through June 30, 2025 - fully operational program
- July 1, 2025, through June 30, 2026 – fully operational program
- July 1, 2026, through June 30, 2027 – fully operational program

The budgets should detail expenses using Attachment “A.” Expenses are to detail staffing (use the Salary and Benefits tab), direct operational expenses, and indirect expenses. (indirect expenses not to exceed 15% of direct expenses and should include the type of expenses that are not tied to the direct provision of consumer services). For each budgetary line item, please include in the description column of the budget tab of Attachment “A,” a description of the item, your calculations, annual amount, and any additional information that justifies the expense. The budgets should detail revenue and expenses. Revenue for the budgets should include SD/MC FFP—bidders should budget with SD/MC FFP being 10% of total services. Budgets may include the cost of local office space for the bidder’s staff. See Section 3.1 (Scope of Work) for details on space for individual and group meeting arrangements. Rent or lease agreements for office space should be short-term, not more than the term of this agreement. Training costs should be included in the budget to accommodate any needed staff training as described in the training portion of Section 3.1 (Scope of Work). The ”not-to-exceed amounts” for the proposed agreement terms for the services described in this RFP are listed in the table below:

Contract Terms	Not To Exceed Maximums
Year One: 3 Month Startup Period July 1, 2024 through September 30, 2024	\$80,000
Year One: 9 Months of a Fully Operational Program October 1, 2024 through June 30, 2025	\$837,848
Year Two: 12 Months of a Fully Operational Program July 1, 2025 through June 30, 2026	\$942,825
Year Three: 12 Months of a Fully Operational Program July 1, 2026 through June 30, 2027	\$969,744

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**1.7 Timeline**

The RFP schedule is provided below (this schedule is subject to change):

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**1.8 RFP Questions**

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**1.9 Bidder Eligibility**

To be deemed eligible and qualified to submit a proposal, a respondent must demonstrate in their proposal that they meet the following minimum requirements by RFP submission deadline. A respondent that does not demonstrate that they meet these minimum requirements will be considered non-responsive and will not be eligible for evaluation and consideration for award of the contract.

**Suspension and Debarment and Exclusion**

To be eligible to submit a proposal, a bidder **must not** be listed as an ineligible person on the U.S. Department of Health and Human Services Office of Inspector General’s List of Excluded Individuals/Entities from federal programs. The Office of Inspector General defines an ineligible person as any individual or entity that is currently excluded, suspended, debarred or otherwise ineligible to participate in the federal health care programs. They are also defined as any individual or entity that has been convicted of a criminal offense related to the provision of health care items/services and who has not been reinstated in the federal health care programs after a period of exclusion, suspension, debarment, or ineligibility. **VCBH will not review a proposal submitted by an individual or entity on the list mentioned above.**

VCBH plans to use the following link to identify individuals and entities that are not eligible to contract with VCBH: <http://exclusions.oig.hhs.gov/>.

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**Each bidder should verify that they are not on the list prior to submitting a proposal by using the link above or the bidders' sanction check provider.** If a bidder is erroneously listed on the sanction list, they will be responsible for correcting the error prior to the submittal of their proposal.

VCBH requires that all potential contract entities self-disclose any pending charges or convictions against them or any individual with their organization for violations of criminal law, any sanctions, and any disciplinary actions by any federal or state law enforcement agency, regulatory agency, or licensing agency (including exclusion from Medicare and Medicaid programs).

If a contractor and/or individual within the contractor's organization becomes an ineligible person after VCBH has executed a contract with the entity/individual, the contractor/individual shall be removed from any responsibility and involvement with the VCBH contracted obligations that are related to federal or state health care programs/funding.

**Social Security Administration Death Master File Verification**

Prior to the awarded respondent executing a contract with VCBH, VCBH will require the proposed contractor to provide a Social Security Death Master File report that verifies that none of the proposed contractor's program staff are listed in the database as individuals using social security numbers of deceased individuals to fraudulently provide services.

**California Secretary of State Business Entities Search**

Business entities registered with the California Secretary of State as a corporation, limited liability company, or limited partnership must have an active status designation on the California Secretary of State Business Entities Search website. VCBH will not review a proposal submitted from an entity that has any other status designation. VCBH plans to use the following link to verify a business entity's status: <https://bizfileonline.sos.ca.gov/>. Each bidder should verify their status designation prior to submitting a proposal. If a bidder's status requires correction, this correction must be made prior to the submittal of their proposal.

**Vendor Required Experience**

A bidder must have a minimum of three (3) years of experience providing mental health treatment services to individuals specifically underserved communities as previously mentioned, and familiarity with billing Medi-Cal for mental health treatment services. The bidder must demonstrate that they are qualified to offer a menu of services that will support the targeted population's mental health treatment and promote a recovery culture that will ultimately help link individuals from the targeted population to the appropriate level of care, treatment for individuals already engaged, or provide triage mental health services.

At a minimum, the bidder must:

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- 1) Have a current Medi-Cal Site Certification from Ventura County or be able to obtain a Medi-Cal Site Certification from Ventura County. If the successful bidder does not have a current Medi-Cal Site Certification from Ventura County, the successful bidder must work with the County to obtain Medi-Cal Site Certification prior to contracting.
- 2) Have staff that have at least three (3) years of experience in providing services to underserved populations such as Latino/a/x beneficiaries and who have experience in, but not limited to:
  - a. Conducting outreach to underserved and unserved individuals.
  - b. Providing access and linkage services to mental health care.
  - c. Treating and outreaching to VCBH clients.
  - d. Targeting areas in the County that are convenient for underserved populations such as people who are currently experiencing homelessness, black, indigenous, and other people of color (BIPOC), and migrant and stationary agriculture workers.
  - e. Handling sensitive or difficult situations from community members seeking social, physical, or mental health services appropriately and confidentially.
  - f. Applying principles and skills acquired from training from clinical and non-clinical professionals in the delivery of services.
  - g. Educating community members in informal settings in the management of mental health diagnosis, coping, well-being practices, basic mental health, and stigma reduction.
  - h. Identifying early signs and symptoms of mental health issues including early stages of psychosis, depression, and anxiety.
- 3) Understand the wellness perspective in supporting healthy communities.
- 4) Provide community education and outreach to unserved and underserved communities.
- 5) Understand needs, support, and community resources.
- 6) Support individuals who are recently released from a psychiatric hold (5150-5250).
- 7) Have knowledge of motivational interviewing/counseling to support successful engagement in treatment.
- 8) Understand and respect everyone's unique perspective demonstrating the ability to develop positive relationships (meeting people where they are and supporting a whatever-it-takes approach).
- 9) Have experience providing culturally adaptive, creative, and flexible outreach to underserved communities.
- 10) Have an organized delivery system that can schedule rapid appointments anywhere from 24-72 hours after a crisis call or expired hold in an ER.
- 11) Have a multidisciplinary team that includes bi-cultural and bilingual staff and peers who are all specifically trained in culturally adept care.
- 12) Hold consistent pop-up clinic events in partnership with the HCA or other medical providers to build trust with target communities.
- 13) Target areas in the County that are convenient for underserved populations such as people who are currently homeless or essential farmworkers.

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- 14) Report, follow, and adhere to any Internal Review Board requirements on patient safety and data security.
- 15) Have the infrastructure in place, including staff with specific roles and responsibilities, to operate a local program that provides all the services described in the section above through community outreach, education, one-on-one support, therapy, injections, screening, and referrals to VCBH or other community-based organizations.
- 16) Have the capability and system to report pertinent outcomes for program effectiveness and community impacts. These outcomes must support the MHSA Innovation evaluation plan.
- 17) Detail the services they have provided that are similar to the services outlined in this RFP and which were delivered without a plan of correction or contract failure.
- 18) Have a procedure in place for conducting background/live scan checks of all staff employed to conduct the services specified in this RFP.
- 19) Deliver culturally and linguistically competent services.
- 20) Deliver services and connect with the community through a Diversity Equity Inclusion (DEI) and Anti-Racism lens.

## SECTION 2.0 INSTRUCTIONS TO BIDDERS/RULES GOVERNING COMPETITION

### 2.1 Submittal Deadline

Completed proposals should be submitted online through the Bonfire system (<https://ventura.bonfirehub.com/opportunities/113443>) no later than 5:00 p.m., March 4, 2024.

Bidders are allowed to submit more than one proposal with different methods of meeting the RFP requirements. If a bidder submits more than one proposal, one proposal must be marked “Base Proposal” and the others shall be marked “Alternate Proposal 1”, “Alternate Proposal 2”, etc. Each base proposal and alternate proposal shall be submitted following the terms and conditions of this RFP.

**Bidders are responsible for making certain their proposals are received on or before the proposal submittal deadline.** The receiving time in the Bonfire System will be the governing time for the acceptability of proposals---**no late submittals will be allowed.**

### 2.2 Proposal Response

Bidders must submit their proposals and all required information and forms by the submittal deadline. Proposals failing to provide complete information may be deemed non-responsive. Bidders should keep copies of their submittals for future reference.

### 2.3 Modification of Proposals

If a Bidder wishes to make modifications to a proposal that has already been submitted to VCBH online through the Bonfire System, they must withdraw the proposal to make the modifications. All modifications must be made in ink, properly initiated/executed by the Bidder’s authorized representative, and submitted in accordance with the terms and conditions of this RFP. **It is the responsibility of the Bidder to ensure that modified proposals are resubmitted through the Bonfire System before the submittal deadline.** Proposals cannot be changed or modified after the submittal deadline.

Bidders may withdraw their proposals any time before the submittal deadline by submitting a notification of withdrawal that is signed by the Bidder’s authorized agent.

### 2.4 Opening of Proposals

Proposals will not be opened publicly. However, a list of the names of the organizations that submitted a proposal will be available within a reasonable time after the submittal deadline. Proposals will be made public and may be inspected at the time of award.

### 2.5 Examination of the Request for Proposal

Bidders should carefully examine the entire RFP, any addenda thereto, and all related materials and data referenced herein or otherwise available to the Bidder.

Bidders shall be presumed to be familiar with all specifications and requirements of this RFP. Failure or omission to examine any form, instrument or document shall in no way

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relieve bidders from any obligation with respect to this RFP.

**2.6 Proposal Validity**

Proposals submitted hereunder shall be firm for 90 calendar days from the due date and through the initial 27-month period of operation.

**2.7 Proposal Content/Format**

To be considered responsive, proposals should address all items identified in this RFP. Proposals should be prepared in such a way as to provide a straightforward and concise discussion of the Bidder's ability to provide the services described in this RFP and meet the needs of VCBH.

Please note that some RFP questions require that the Bidder provide a detailed response and/or attachment. Failure to provide a complete response may be grounds for the rejection of a proposal. Emphasis should be concentrated on conformance to the RFP instructions, responsiveness to the RFP requirements, and completeness/clarity of content.

To facilitate the evaluation and comparison of all submitted proposals, Bidder proposals should be submitted in the format described in this RFP. Specifically, Bidders should present their proposals in the order described in Sections 3.2 and 3.3 of this RFP (each section and all attachments should be clearly labeled). Format instructions must be adhered to; all RFP requirements and requests for information in the proposal must be responded to; and all requested data must be supplied. Failure to comply with this requirement may cause rejection.

Please respond to this RFP solicitation on 8 1/2" X 11" paper using either Times New Roman or Arial font and no smaller than 12-point font size. Margins should be one inch all around. All pages must be numbered. Single or double spacing is acceptable.

**2.8 Costs Incurred in Responding**

VCBH will not pay any costs incurred in proposal preparation, presentation, demonstration, or negotiation. Nor does VCBH commit to procure or contract for any services. All costs of proposal preparation shall be borne by the bidder. It is understood that all proposals, inquiries, and correspondence relating to this RFP and all reports, charts, displays, schedules, exhibits, and other documentation will become the property of VCBH when submitted to VCBH and may be considered public information under applicable law. VCBH assumes no liability for any costs incurred by bidders throughout the entire selection process.

**2.9 Addenda**

VCBH will issue written addenda to make changes, additions, or deletions to this RFP. Oral communications regarding this RFP **will not** be valid or binding, nor excuse the successful bidder of any obligations hereunder, unless set forth in writing by VCBH. Addenda will be sent to all known Bidders that complete an intent to bid within the Bonfire



## SECTION 2.0 INSTRUCTIONS TO BIDDERS/RULES GOVERNING COMPETITION

System and said addenda will be made available through the Message Section (see Public Notices subsection) of the online Bonfire Systems at <https://ventura.bonfirehub.com/opportunities/113443>. It is the responsibility of each Bidder to ensure that VCBH has their correct business name, address, and contact information on file in the online Bonfire System. Any prospective Bidder who obtains a copy of the RFP documents from any other source other than online Bonfire System is responsible for advising VCBH that they have said documents and that they wish to receive subsequent Addenda.

### 2.10 **Confidential and Proprietary Data**

All materials received relative to this RFP will be kept confidential, until such time an award is made, or the RFP is canceled, at which time all materials received will be made available to the public. All received proposals will be subject to the California Public Records Act, Government Code §6250. Under the California Public Records Act, VCBH may be obligated to provide a copy of all responses to this RFP, if such requests are made after the contract is awarded.

One exception to this required disclosure is information that fits within the definition of a confidential trade secret (Government Code section 6254(k)) or contains other technical, financial, or other data whose public disclosure could cause injury to the bidder's competitive position. If any bidder believes that information contained in its response to this RFP should be protected from disclosure, the bidder must specifically mark the pages of the response that contain the information. The County will not honor any attempt by the bidder to designate its entire proposal as proprietary.

### 2.11 **Commitments, Warranty, and Representations**

The proposal submitted in response to this RFP will be included as part of the final contract. Bidders are cautioned that if a contract is awarded because of this procurement process, any written commitment by a bidder within the scope of this procurement shall be binding upon the bidder whether incorporated into a contract document. Failure of the bidder to fulfill any such commitment shall render the bidder liable for liquidation or other damages due to VCBH under the terms of the contract. For this procurement, a commitment by a bidder includes:

- Any modification, affirmation, or representation as to the above, which is made by a bidder in or during negotiation.
- Any representation by a bidder in a proposal, supporting document, or negotiations about the services to be performed (regardless of the fact that the duration of such commitment may exceed the duration of the contract).

### 2.12 **Proposal Validation/Evaluation/Award**

#### **Validation**

Proposals will be checked for the information required to conform with this RFP. The

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absence of required information may be cause for rejection.

**Evaluation**

The successful bidder shall be chosen in accordance with, but not limited to, the following criteria:

1. Proven Performance

The bidder's background, experience, and organizational stability will be assessed. The evaluation will focus on the bidder's record of successful service and support to accounts of comparable size and environment. The ability of the bidder will be evaluated in terms of technical resources, staffing, and staff experience.

Bidder organizational references will be contacted, and their responses will become a part of the award/review process.

2. Compliance with Contract Terms and Conditions

The ability of the bidder to meet and abide by the contract terms and conditions outlined in the attached agreement without requiring modification to the agreement.

3. Support

Emphasis will be placed on the bidder's ability to service and support the needs of VCBH and the clients/families we serve. The Bidder's organizational structure, staffing plan, and method for meeting the requirements of this RFP, in the most efficient manner possible, will be an important consideration.

4. Requirements/Specifications (plan and approach)

Proposals will be evaluated on the following: general quality and responsiveness to the terms, conditions, and time of performance, completeness, and thoroughness, grasp of the work to be performed, approach to be used, and ability to meet the requirements/specifications outlined in this RFP.

5. Cost

The proposals will be evaluated based on the bidder's reasonableness of cost.

**Award**

The contract will be awarded to the Bidder offering the most advantageous proposal after consideration of all evaluation criteria set forth herein. The criteria are not listed in any

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order of preference. VCBH will establish an Evaluation Committee that will be responsible for evaluating all proposals received in accordance with the evaluation criteria. The Evaluation Committee may also:

- Contact and evaluate the Bidder's and any subcontractor's references.
- Contact any Bidder to clarify any response.
- Contact any current users of a Bidder's services.
- Solicit information from any available source concerning any aspect of a proposal.
- Seek and review any other information deemed pertinent to the evaluation process.

VCBH reserves the right to establish weight factors that will be applied to the criteria depending upon the order of importance. Weight factors and a summary of evaluation scores will not be released until after award of the contract. VCBH will not be obligated to accept the lowest priced proposal but will make an award in the best interests of VCBH after all factors have been evaluated. While VCBH intends to enter into a contract for these services, it will not be bound to do so. VCBH reserves the right to reject any or all proposals.

VCBH shall be the sole judge of the successful offers hereunder. VCBH reserves the right to award the contract to a Bidder that might not have submitted the lowest total price and may negotiate with any or all Bidders. Bidders are advised that an award may be made without discussion or any contact concerning the received proposals. Accordingly, proposals should contain the most favorable terms from a price and technical standpoint. **DO NOT ASSUME** that you will be contacted or afforded an opportunity to clarify, discuss, or revise your proposal.

The award will be through a written contract with the successful Bidder. A Notification of Intent to Award may be sent to any selected Bidder but does not obligate VCBH to award the contracts until the completion of the entire RFP process. The award ~~is~~ will be contingent upon the successful negotiation of the final contract terms. Negotiations shall be confidential and not subject to disclosure to competing Bidders unless an agreement is reached. If contract negotiations cannot be concluded successfully, VCBH may negotiate with the next highest-scoring Bidder or withdraw the RFP. The Ventura County Board of Supervisors' approval is required for all contracts that exceed \$200,000.

The contractor shall not commence work until a meeting is held between representatives of the contractor and VCBH. The meeting will be held at VCBH, at a time and date to be established.

**2.13 Presentations**

Bidders may be invited to make presentations to VCBH if needed.

**2.14 Site Visits**

VCBH reserves the right to schedule site visits to the bidder's facilities or current operational sites to assess the capability and ability of the bidder to fulfill their contractual

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obligations with VCBH.

**2.15 Additional Information**

If during the evaluation process, VCBH is unable to determine a bidder's ability to perform, VCBH has the option of requesting any additional information that VCBH deems necessary to determine the bidder's ability. The bidder will be notified and permitted five (5) business days to comply with any such request.

**2.16 Errors/Defects in Proposals**

If discrepancies between sections or other errors are found in a proposal, VCBH may reject the proposal. However, VCBH may, at its sole option, correct any mathematical errors in price.

VCBH may waive any immaterial deviation or defect in a proposal. VCBH's waiver of an immaterial deviation or defect shall in no way modify the RFP documents or excuse the bidder from full compliance with the RFP requirements if awarded a contract.

**2.17 Rejection of Proposals**

VCBH reserves the right to reject the proposal of any bidder who:

- Previously failed to perform adequately for the County or any other governmental agency within the previous twelve (12) months.
- Submits false, incomplete, or unresponsive statements in a proposal.
- Is in default on the payment of taxes, licenses, or other monies due to the County.
- Submits a proposal that contains errors or discrepancies.

**2.18 RFP Cancellation**

VCBH reserves the right to cancel this solicitation at any time before the submittal deadline.

**2.19 Protest Procedures**

For a protest to be considered, the protest must be made in writing, signed by the bidder's authorized representative, and delivered to the VCBH Contracts Manager at 1911 Williams Drive, Suite 200, Oxnard, CA 93036. The VCBH Contracts Manager reserves the right to refuse to hear protestors who have not followed the procedures listed below.

The following conditions apply to the proposal protest:

- a. Before Proposal Submittal Deadline. Protests of specifications, terms, conditions, or any other aspects of the RFP solicitation must be made before the proposal submittal deadline.
- b. After Proposal Submittal Deadline. Protests of award must be made, no later than five (5)

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calendar days after the aggrieved party knows or should have known of the facts giving rise to the protest.

c. Protest Content. All protests must include the following information:

- 1) The name, address, and telephone number of the protestor.
- 2) The signature of the protestor or protestor's authorized representative.
- 3) The RFP solicitation or contract number.
- 4) A detailed statement of the legal and/or factual grounds for the protest.
- 5) The form of relief requested.

d. Protest Process.

- 1) If the VCBH Contracts Manager can resolve the issue, there is no further action required.
- 2) If there is no resolution, the issue will be referred to the VCBH Administrative Services Division Chief for review and resolution. If the issue is resolved, there is no further action required.
- 3) If there is no resolution, the issue will be referred to the VCBH Director who will make a determination on the issue and render a determination. This determination will be final.

**SECTION 3.0****MOBILE MENTAL HEALTH SERVICES SCOPE OF WORK/PROPOSAL  
INSTRUCTIONS****3.1 Scope of Work****Mobile Mental Health Program Goals and Details*****Program Goals:***

The goal of the Mobile Mental Health Program is to provide reliable flexible physical health screenings and mental health care to and in the community that is especially focused on unserved and underserved individuals in Ventura County regardless of insurance or legal status. By providing flexible, direct health and mental health care in the community, the approach can potentially positively affect stigma, emergency room (ER) use, and client engagement for unserved and underserved populations living in Ventura County.

The Mobile Mental Health Program is designed to deliver quality, brief, potentially consistent, walk-in style mobile mental health therapy to residents who have recently been in crisis, live in underserved areas, or are part of unserved or underserved communities. Specifically, the successful bidder shall be able to serve the following unserved and underserved populations in Ventura County as defined by the CMNHA:

- (1) Hispanic/Latinx community (including a focus on Mexican Indigenous, temporary, or permanent agricultural workers, and monolingual Spanish speakers).
- (2) Individuals who identify as being homeless.
- (3) Individuals who have had a recent mental health crisis.
- (4) Other underserved populations such as adults, older adults, children, transitional age youth, LGBTQ+, Black and African American, and other populations identified as unserved and underserved in subsequent CMHNAs.

The objectives of mobile mental health care are to increase access to care, decrease mental health symptoms, ease the stigma of mental health, and reduce the toll mental illness takes on local people, organizations, and the social network of the community. A menu of flexible services should be provided by a diverse multidisciplinary team focused on patient-centered care through patient education and empowerment in the community and delayed on-call. Services would be short-term solutions focused on mental health sessions, substance use services, peer support, injections or prescriptions of psychiatric medications, prevention screenings and testing of health factors, and diabetes and hypertension monitoring.

The program will include one specially outfitted van owned by the County. The successful bidder will be expected to staff the van with a full range of behavioral health staff who are trained to respond to crises and provide short-term mental health intervention. The van must be staffed with a multidisciplinary team, including a mental health clinician, nurse, peer support specialists, and telepsychiatry as needed. All staff members who drive the van will be required to have a valid California driver's license. The vehicle, in part, will be utilized to support the: (1) crisis team's calls that do not meet the threshold for immediate intervention, (2) community follow-up for clients who did meet the threshold for immediate intervention, but their hold expired in the ER before placement, and (3) ongoing preventative and treatment services that may be delivered in

**SECTION 3.0****MOBILE MENTAL HEALTH SERVICES SCOPE OF WORK/PROPOSAL INSTRUCTIONS**

partnership with HCA or another medical provider in and for vulnerable or disenfranchised communities.

The objective is to deliver field-based treatment (i.e., de-escalation, medication, temporary placement, prevention screenings, etc.) to voluntary clients who are able and willing to accept the help, thereby decreasing the need for involuntary treatment. The primary focus for this multidisciplinary team is to provide rapid flexible mental health services and screenings that are supportive, ~~and~~ strength-based, and that assist the individual to remain in the least restrictive level of care possible.

Pop-up clinics will be used to establish trust through routine outreach and engagement opportunities in some of the County's most vulnerable communities. Examples of these vulnerable communities include farmworker housing, homeless shelters, and cities with high numbers of monolingual people, have high poverty rates, or have high homeless counts. Pop-up events will be coordinated with HCA's mobile clinic or other medical providers to provide physical and mental health care clinic services and medication administration.

***Mobile Mental Health Program Details:***

This program will operate eight (8) hours per day (10 am-7 pm suggested, with a one-hour lunch included in this timeframe), five (5) days per week (Tuesday-Saturday suggested) and will provide services throughout Ventura County. Team members who are outgoing, engaging, bicultural, and bilingual shall be sought out for hire and supported by the bidder with additional specialized training in patient-centered care. Cultural competence will be paramount in program set-up and structure. The program indicates a specific peer position; however, the provider is encouraged to include peers at all levels of employment. Research studies demonstrate that peer support improves client functioning, increases client satisfaction, reduces family burden, alleviates depression and other symptoms, reduces homelessness, reduces hospitalizations and hospital days, increases client activation, and enhances client self-advocacy. This program can be staffed by two (2) full-time positions or four (4) part-time positions depending on contractor and staff agreement of preference.

**VCBH Vision and Service Structure**

The provider selected from this RFP will contract with VCBH for mobile mental health services and will report to the assigned Behavioral Health Manager. Mobile mental health services will address the health and mental health needs of unserved and underserved populations. Mobile services will offer curbside care in the primary settings of people's lives, including people's doorsteps, churches, parking lots, grocery stores, community centers, or other frequented spaces of the target community.

Hiring will prioritize individuals with lived experience who can support and engage families in their pursuit of wellness and recovery. The successful bidder will have a successful track record of providing triage mental health, walk-in treatment, and outreach services to unserved, underserved, and culturally diverse populations. The selected provider will be assigned to work in

**SECTION 3.0****MOBILE MENTAL HEALTH SERVICES SCOPE OF WORK/PROPOSAL INSTRUCTIONS**

all geographical areas within the County. They must have the ability to be flexibly deployed and customized to fit the evolving needs of populations and health systems, as well as the ability to link clinical and community settings. The program will focus on overcoming the following barriers to treatment: accessibility (e.g., geography, time, distance, transportation, language), availability of providers or appointments, mental or physical health literacy, and lack of trust. According to a 2015 research article by Aung, because mobile health clinics are a community-centered solution they can eliminate barriers to access, reduce health disparities, and improve care delivery while decreasing costs. These clinics on wheels travel into the heart of communities, often delivering preventative care and health education, filling critical gaps in care, and in many cases, addressing social determinants of health, such as food insecurity, legal needs, and housing. The successful bidder should be prepared to address such “out of the box” needs as they arise in the field and assist the evaluator in documenting all efforts to meet the community where they are at to determine best practices and replication of this program.

**Service Requirements**

Successful bidders will be able to submit a plan that articulates how the program will accomplish the following:

1. Work with the community to successfully target unreserved, vulnerable, and disenfranchised communities or populations (how will the program take community input, determine targets, what will the provider do to reach said targets, what will the provider propose to reach them continuously, etc.?).
2. Specify how the bidder will ensure culturally competent staff are hired or trained (how will the provider ensure staff will instill trust, comfort, and security for all types of individuals including monolingual individuals?).
3. Partner with community organizations (how will the provider partner with medical providers or HCA for regular clinics, work with the crisis team to develop a process for non-urgent referrals, establish partners in areas where use of facilities may be necessary to provide treatment and/or communicate the program’s existence for referral purposes?).
4. Validate the need (how will the program ensure it’s serving the targeted population and meeting their needs? What is the proposed service delivery model for short-term goal-oriented treatment? How will the program communicate any regular treatment of VCBH clients? How will the provider communicate with agencies or the broader community about additional service needs?).
5. Market the service (what methods and how will the provider communicate the van’s services, locations, and changing pop-up event schedules?).
6. Add services based on local needs (how will the program partner with agencies or set meetings to communicate what’s working/not working and to ensure services the van does not provide but are needed can be met?).
7. Evaluation (how will you meet all the evaluation reporting requirements to ensure all clients are asked to participate and made aware of the study? How will you keep patient documents secure and private? How will you ensure completion of quarterly and year-end reports?).



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**MOBILE MENTAL HEALTH SERVICES SCOPE OF WORK/PROPOSAL**  
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**Administrative Requirements**

For administrative requirements, the successful bidder will be required to:

- Meet with VCBH staff to review progress, problem-solve, and provide updates.
- Provide a calendar of events with outreach and engagement activities.
- Track and report any assessments, injections, appointments, and engagement in VCBH's Electronic Healthcare Record (EHR).
- Provide a monthly report that includes tracking of all activities, including, but not limited to:
  - Client program service delivery data that includes MHSA outcomes and satisfaction survey.
  - Complete metrics at monthly, 6-month, and 12-month intervals and upon request during times of audits related to:
    - Data collection
    - Demographic information
    - Unique identifiers for unduplicated count
    - Participant surveys
    - Outreach activity log
- Have and maintain a good working relationship with county agencies and partners such as local Hospitals, Human Services Agencies, HCA, Community Based Service Providers, and Homeless Shelters

**Performance Measures and Program Outcome Requirements**

The successful bidder/contractor will be required to participate in an evaluation with another contracted provider and meet the requirements for data collection to support answering the following learning goals:

1. Does the mobile services model provide improved access to treatment for the target populations? (i.e., people who are homeless, temporary, or year-round essential farmworkers)
2. Why have clients sought care with the mobile unit and were they satisfied?
  - a. Where have they received services previously?
3. Which services were most highly utilized?
  - a. Of those services, were they reimbursable to a degree that makes the model feasible for long-term solvency? (i.e., is the program fiscally solvent without Innovations funding?)
4. Examination of care provision including the clinical condition of patients diagnosed with a mental illness.

The following is the draft evaluation which is subject to change and approval of the MHSOAC:

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Research Question	Indicators	Measure Being Considered
1. Does the mobile services model provide improved access to treatment for the target populations? (i.e., people who are homeless, temporary, or year-round essential farmworkers)	<ul style="list-style-type: none"> <li>• Increase in first-time clients and/or</li> <li>• Seriously Mentally Ill (SMI) clients who are inconsistently engaged in treatment</li> <li>• Retention of either population or successful referral to a primary clinic</li> </ul>	<ul style="list-style-type: none"> <li>• Modified MHSA demographics questionnaire</li> <li>• Treatment adherence and site tracked in the Care Manager Electronic Healthcare Record (EHR) system</li> </ul>
2. Why have clients sought care with the mobile unit and were they satisfied?  a. Where have they received services previously?	<ul style="list-style-type: none"> <li>• Qualitative measures tracked through client focus groups</li> <li>• 80% or above in client satisfaction rate</li> </ul>	<ul style="list-style-type: none"> <li>• 2 question Community Supportive Services (CSS) Satisfaction survey</li> <li>• Focus groups to take place a minimum of once per year</li> <li>• Intake form or EHR history</li> </ul>
3. Which of the provided services were most highly utilized?  a. Of those services, were they reimbursable to a degree that makes the model feasible for long-term solvency? b. Did the program exceed capacity in any one target area? c. Was it enough to warrant more than one van or service focus?	<ul style="list-style-type: none"> <li>• EHR service provision log for the mobile site code</li> <li>• Reconciliation of program cost with Federally Funded Partnership (FFP) match annually</li> </ul>	<ul style="list-style-type: none"> <li>• Expenditure reports</li> <li>• General Claims Data</li> <li>• MHSA Annual Revenue and Expenditure Report</li> </ul>
4. Examination of care provision including clinical condition of patients diagnosed with a mental illness	<ul style="list-style-type: none"> <li>• Referrals into clinic services</li> <li>• Improved ratings on mood scale</li> </ul>	<ul style="list-style-type: none"> <li>• General Claims Data</li> <li>• Patient Health Questionnaire (PHQ)-9 question version</li> <li>• Generalized Anxiety Disorder (GAD)-7 question version</li> <li>• Treatment Perception Survey (TPS) client survey</li> </ul>

1. Learning Goal 1: Does the mobile services model provide improved access to treatment for the target populations? (i.e., people who are homeless, temporary, or year-round essential farmworkers)

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- Current MHSA demographic forms already ask for much of the required information that would assist in identifying the target population. Modifications to include occupation or homeless status can be added:
    - Increase in first-time clients and/or to understand if there was increased access to services.
    - SMI clients who are inconsistently engaged in treatment identified by response to homeless status question or their EHR record of treatment engagement.
    - Retention of either population or successful referral to a primary clinic --this learning goal would be limited to VCBH client care. Individuals who meet medical necessity can be tracked by service site either into clinic care or utilization rates for both clinic and mobile site care.
2. Learning Goal 2: Why have clients sought care with the mobile unit and were they satisfied? Where have they received services previously?  
Focus groups and qualitative data will be utilized to track client responses to questions about previous care and the purpose of seeking services to get depth and clarity on both questions. Surveys will be tracked to identify client satisfaction.
- A community-based response approach will be followed to engage community stakeholders to obtain feedback about the mental health status and flexible service delivery focused on three (3) subpopulations: (1) individuals who identify as homeless (2) temporary or permanent agricultural workers, and (3) non-urgent crisis response follow-ups. Focus group methods will stem from previous literature and prior experience working with the target population. Focus groups will follow the methodology recommended by Kreuger (2008) including the use of focus group facilitators of the same racial/ethnic background as group members, holding the session in an environment that promotes discussion, providing refreshments, audio-taping the session, and following a prescribed set of questions. Focus groups will include 8-10 participants each and will last approximately 90 minutes.
3. Learning Goal 3: Which services were most highly utilized? And of those were they reimbursable to a degree that makes the model feasible for long-term solvency? Can the program be successful without Innovation funding? Did the program exceed capacity in any one target area? Was it enough to warrant more than one van or service focus?
- The above questions may change based on the program implementation and the highest utilization of the program based on subpopulations. Annual revenue and expenditure reports, claims data, and service provision data will be used to understand if the program is providing any one service over another such as crisis response, case management, psychiatric care (etc.), and most importantly if the resulting program model is feasible without MHSA Innovation dollars.
4. Learning Goal 4: Examination of care provision including clinical condition of patients diagnosed with a mental illness.
- Clinical condition will be measured through a survey administered once per visit for the mobile mental health services. If clients are referred to a primary clinic improved

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progress can be tracked in more detail through the EHR. Referral rates will also be tracked through the Care Manager application.

The successful bidder will also be expected to submit a quarterly data report through an agreed-upon method. VCBH will provide the successful bidder with direction in establishing a system for data collection and data integrity measures. The successful bidder may petition VCBH to accept alternative performance measures in addition to those listed above. The successful bidder is responsible for the mandatory measures until written acceptance of the proposed alternative measures from the VCBH Director or designee has been received. The successful bidder/contractor and assigned staff will receive training on data entry, scoring, and reporting as required by VCBH to implement a performance and outcomes measures system. The successful bidder will be provided with an outcome or measurement tool to collect and report outcomes, successful progression towards benchmarks, and gathering of consumer input.

**3.2 RFP Proposal Questions and Budget Request**

Bidders responding to this RFP shall demonstrate their ability to implement, manage, and evaluate the performance of the program described in this RFP. Bidders are required to answer all the questions in this section of the RFP in the bidder's response. Proposals shall include a response to the following areas of interest/questions:

**I. Organization Profile and Qualifications (Limited to 2 pages of text)**

Bidders must provide an organization profile. The profile must include the following information:

- a) Organization ownership. If incorporated, the state in which the organization is incorporated and the date of incorporation.
- b) Location of the organization's offices.
- c) Location of the office servicing any California contracts.
- d) Number of employees both locally and nationally.
- e) Location(s) from which employees will be assigned to the VCBH contract.
- f) Name, address, and telephone number of the bidder's point of contact for the contract that results from this RFP.
- g) Organization background.
- h) Experience, qualifications, and length of time operating the type of services described in this RFP. Please describe the type of services that were provided, including the number of staff, location of services, and date the services were provided. A minimum of three (3) years experience providing the type of services and report strategies described in this RFP is required to submit a proposal.
- i) The bidder must also include a complete disclosure of any alleged significant prior or ongoing contract failures. Disclosure of any alleged significant prior or ongoing plan of correction and contract failures, any past or pending civil or criminal litigation or investigations which involve the Bidder or for which the Bidder has been found guilty

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or liable. VCBH also requires that all potential contract entities self-disclose any pending charges or convictions against them or any individual with their organization for violations of criminal law, any sanctions, and any disciplinary actions by any federal or state law enforcement agency, regulatory agency, or licensing agency (including exclusion from Medicare and Medicaid programs). Failure to fully comply with this provision may disqualify a proposal.

VCBH reserves the right to reject any proposal based upon the bidder's prior history with the County or with any other party based on their prior unsatisfactory performance, criminal, adversarial, or contentious behavior, significant failure(s) to meet contract milestones or other significant contractual failures.

**II. Staff Recruitment, Qualifications, and Productivity** (Limited to 4 pages of text plus Resumes, Job Descriptions, and Salary Information)

In this section, the bidder shall respond to the following questions:

- a) Describe how your organization will recruit, train, supervise, and retain diverse multidisciplinary staff as outlined in the RFP.
- b) Identify key staff and their position within the organization (use Attachment E). Specifically, identify those individuals who will be directly involved in meeting the day-to-day requirements of the program, providing clinical oversight (if applicable), supervising staff, and managing/overseeing the contract. Provide a resume, licenses/certifications, job description, and salary information for these staff members, plus Attachment E. Attachment E is available in the online Bonfire System (<https://ventura.bonfirehub.com/opportunities/113443>) as Attachment E Key Staff.
- c) If the bidder plans to subcontract work, indicate the name and address of the organization, type of work, and tasks they will perform. Identify the staff to be assigned, their position, qualifications, and representative experience.
- d) Describe how, in consultation with VCBH, the bidder will establish and monitor staff expectations and demonstrate efficient management of program personnel and resources.

**III. Program Approach and Work Plan** (Limited to 6 pages of text)

In this section, the Bidder shall respond to the following items:

- a) Describe your program implementation plan. Include information related to your startup budget, implementation process, and training needs.
- b) Describe how the proposed program will provide services as defined in this RFP. Describe your implementation strategies. Please include details regarding all program/service components and goals. Please detail how you will align services to coincide with VCBH's vision for service provision and structure, as detailed in Section 3.1.

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- c) Describe how your organization will develop and implement an ongoing training curriculum for staff to best provide the proposed activities and successfully meet the needs of the targeted population.
- d) Describe how staff will be provided with supervision to ensure that they maintain their wellness.
- e) Describe how supervision, management, and support for the day-to-day program operation will be provided.

**IV. Cultural Competency (Limited to 5 pages of text)**

In this section, the Bidder shall:

- a) Describe how the bidder will work to establish a program that is culturally and linguistically competent (aligned to the population of Ventura County, as outlined in Sections 1.5 and 3.1 of this RFP).
- b) Describe how the bidder will establish a program that provides equal access to services and monitors and evaluates the quality-of-care services to racial/ethnic, cultural, geographic, and linguistic populations.
- c) Describe how the bidder will effectively engage and retain consumers of diverse racial/ethnic, cultural, and linguistic populations.
- d) Describe how the bidder will adhere to the evaluation requirements.
- e) Describe how the bidder will train staff to effectively address the needs and values of the racial/ethnic, cultural, and/or linguistic population of the community served.
- f) Describe any potential challenges to establishing a program that is culturally and linguistically competent and how these challenges will be addressed.

**V. Quality Assurance and Performance Measurement (Limited to 2 pages of text)**

In this section, the Bidder shall provide the following information related to the projected outcomes associated with the proposal as well as any evaluation method that will be utilized to measure successes and/or setbacks associated with this project on an ongoing basis. In developing your response, please fully address the reports and outcome measures identified in Section 3.1 (Scope of Work).

- a) Describe your approach to adhering to the evaluation methods your organization will use to gather, measure, and evaluate: (1) consumer satisfaction, (2) consumer goals and objectives, and (3) contract outcomes, as described in Section 3.1 of this RFP. Additionally, state your understanding that you will need to collaborate with other entities/evaluators selected by the County to accomplish data collection requirements, such as, but not limited to, filling out monthly, quarterly, and annual reports, supplying clients for focus groups, keeping diligent records, and attending evaluation meetings as necessary.

**VI. Budget Request (Limited to 1 page of text, plus Attachment A)**

To assist VCBH in determining the potential cost of bidders' services, each bidder's budget must respond to the staffing guidelines, training, supervision, management, and services

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**MOBILE MENTAL HEALTH SERVICES SCOPE OF WORK/PROPOSAL**  
**INSTRUCTIONS**

detailed in this RFP. Bidders must use the budget template (Attachment “A”) in developing and submitting their budgets for this RFP. VCBH recognizes that the selected contractor will need to conduct various startup/transition activities in advance of and preparation for program service delivery. Therefore, VCBH will contract with the successful bidder for three (3) years, with the first three (3) months of the year one budget being for a start-up period. After the three (3) month start-up period of July 1, 2024 through September 30, 2024, the submitted budgets should reflect a fully operational program.

Bidders shall submit a budget which includes each of the following terms:

- July 1, 2024, through September 30, 2024 (start-up budget)
- October 1, 2024, through June 30, 2025 - fully operational program
- July 1, 2025, through June 30, 2026 – fully operational program
- July 1, 2026, through June 30, 2027 – fully operational program

The budgets should detail expenses using Attachment “A.” Expenses are to detail staffing (use the Salary and Benefits tab), direct operational expenses, and indirect expenses (indirect expenses not to exceed 15% of direct expenses and should include the type of expenses that are not tied to the direct provision of consumer services). For each budgetary line item, please include in the description column of the budget tab of Attachment “A,” a description of the item, your calculations, the annual amount, and any additional information that justifies the expense. The budgets should detail revenue and expenses. Revenue for the budgets should include SD/MC FFP—bidders should budget with SD/MC FFP being 10% of total services. Budgets may include the cost of local office space for the bidder’s staff. See Section 3.1 (Scope of Work) for details on space for individual and group meeting arrangements. Rent or lease agreements for office space should be short-term, not more than the term of the agreement. Training costs should be included in the budget to accommodate any needed staff training as described in the training portion of Section 3.1 (Scope of Work). The not-to-exceed amounts for the proposed agreement terms for the services described in this RFP are listed in the table below:

Contract Terms	Not To Exceed Maximums
Year One: 3 Month Startup Period July 1, 2024 through September 30, 2024	\$80,000
Year One: 9 Months of a Fully Operational Program October 1, 2024 through June 30, 2025	\$837,848
Year Two: 12 Months of a Fully Operational Program July 1, 2025 through June 30, 2026	\$942,825
Year Three: 12 Months of a Fully Operational Program July 1, 2026 through June 30, 2027	\$969,744

**3.3 Required Proposal Information**

**SECTION 3.0****MOBILE MENTAL HEALTH SERVICES SCOPE OF WORK/PROPOSAL INSTRUCTIONS**

Please ensure that your proposal has the following information and structure:

a. **Cover Letter/Signature on Proposal** (Limited to 1 page of text)

A cover letter, which shall be considered an integral part of the proposal, shall be signed by the individual(s) who is/are authorized to bind the bidder contractually. The signature(s) must indicate the classification or position that the individual(s) hold in the bidder's organization.

The cover letter shall designate a person or persons who may be contacted during the period of evaluation with program/fiscal questions or contract issues. Include the contact name(s), type of questions/issues they can respond to, title, address, telephone number, fax number, and email address.

The cover letter shall be on the bidders' company letterhead with the legal name of the company that VCBH would be contracting with.

b. **Executive Summary** (Limited to 1 page of text)

Please provide an executive summary of your proposal that clearly shows that your organization is qualified to perform the services described in this RFP and that you fully understand the multiple components of the RFP.

c. **Response to the RFP Proposal Questions and Budget Request** (Limited to 22 pages)

Please respond to the RFP proposal questions that are listed in Section 3.2 of this RFP. Bidder's responses shall address each item in the order given, identify each response by item letter, and include any attachments that are requested. Submit a full explanation of and justification for any exemptions or deviations.

d. **Financial Statement** (Limited to 1 page of text plus supporting documents)

Bidders must provide a current and prior year financial statement or their latest annual report. Bidders shall make a definitive statement regarding their financial ability to perform the requirements hereunder.

e. **References** (Limited to 1 page of text) (see/use Attachment D, available in the online Bonfire System (<https://ventura.bonfirehub.com/opportunities/113443>) as Attachment D References.

Bidders must provide a minimum of three (3) references from similar projects performed within the last three years. Please note that references cannot be current Ventura County employees. Information provided shall include:

1. Organization name
2. Project Manager's name and telephone number
3. Project description



**SECTION 3.0****MOBILE MENTAL HEALTH SERVICES SCOPE OF WORK/PROPOSAL INSTRUCTIONS**

4. Project dates (starting and ending)
5. Staff assigned to the project and who will be assigned to the VCBH contract per this RFP
6. Dollar value of contract

f. **Business Continuity Plan** (Limited to 1 page of text)

Please provide a short description of the plans and procedures your organization has in place to keep operations running smoothly if: (1) one of your key staff members is on vacation or is temporarily or permanently incapacitated, (2) a natural or man-made disaster occurs that disrupts operations, or (3) COVID-19 State and Local Public Health Ordinance requirements impact the face-to-face delivery of services (Bidders are required to comply with the State and Local Public Health Ordinance).

g. **Bidder Understanding** (Limited to 2 pages of text)

Bidders may include an understanding of VCBH's needs or any other information deemed necessary which may not be required in any other section of the RFP.

h. **Requirements** (Limited to 2 pages of text)

Bidder shall state on a **point-by-point** basis whether the proposal is in compliance with the requirements/specifications of the RFP (Section 3.3). A full explanation of and justification for any exemptions or deviations must be provided in this section.

i. **Compliance with County Standard Contract Terms and Conditions**  
(Limited to 3 pages of text)

Bidders shall review the standard contract (see Section 4.1 and Attachment B) and state their acceptance of the contract terms as presented. Any comments, deviations, or exceptions to this contract must be provided in your proposal. Precise substitute wording must be offered in place of any section objected to. It is not enough to state merely that an exception is noted to a particular section. Deviations considered excessive by the County may reduce or eliminate a Bidder.

j. **Payment Terms** (Limited to 1 page of text)

Customary payment terms are Net 45 days for work performed. Bidders shall indicate their acceptance of these payment terms.

k. **Non-Collusion Affidavit**

Bidder proposals must include a signed original of the Non-Collusion Affidavit that is provided in Attachment C (see Section 4.6 for more information). Non-Collusion Affidavit is available in the online Bonfire System (<https://ventura.bonfirehub.com/opportunities/113443>) as Attachment C Non-Collusion Affidavit.

**SECTION 4.0**  
**CONTRACT TERMS AND CONDITIONS****4.1 Compliance with VCBH Contract Terms and Conditions**

The successful bidder will be required to enter into a written contract with VCBH for the services described in this RFP. The County's standard contract (see Attachment B) shall form the basis for any contract entered into hereunder. Please review the attached contract prior to submitting your proposal. Any comments or exceptions to this contract must be included in your proposal.

**4.2 Insurance Requirements**

The successful Bidder shall acquire and maintain all insurances described in Section 9 of the standard contract (see Attachment B).

**4.3 Permits**

Unless otherwise provided herein, the successful Bidder shall:

- Obtain all permits and licenses necessary for the performance of the contract.
- Pay all charges and fees necessary for the performance of the contract.
- Give all public notices necessary for the lawful performance of the contract.

**4.4 Contract Term**

Continuation of the contract is subject to the appropriation of funds for such purpose by the Ventura County Board of Supervisors. If funds to affect such continued payment are not appropriated, VCBH may terminate the contract and the contractor will relieve VCBH of any further obligation.

**4.5 Payment Terms**

Customary payment terms are Net 45 days for work performed.

**4.6 Non-Collusion**

If there is reason to believe that collusion exists among the Bidders, VCBH may refuse to consider proposals from participants in such collusion. No person, organization, or corporation under the same or different name, shall make, file, or be interested in more than one proposal for the same work unless alternate proposals are called for. A person, organization, or corporation that has submitted a sub-proposal to a Bidder, or who has quoted prices on materials to a Bidder, is not thereby disqualified from submitting a sub-proposal or quoting prices to other Bidders. Bidders shall submit with their proposal an executed Non-Collusion certification.

RFP Attachments

VENTURA COUNTY BEHAVIORAL HEALTH

MOBILE MENTAL HEALTH PROGRAM

ATTACHMENTS

**RFP Attachments – Budget Template**

**RFP Attachment “A”**

**Budget Template**

Excel Budget Template worksheet is available in the online Bonfire System (<https://ventura.bonfirehub.com/opportunities/113443>) as Attachment A – Budget Template.

In Attachment “A,” includes all budget information and describes how each line item on the budget is cost-effective and provides value to the Mobile Mental Health Program. Also, lay out the calculations and assumptions that were used to develop the proposed units of service, and costs, and that justifies the proposed budget.

**RFP Attachments – Standard Agreement**

**RFP Attachment “B”**

**See sample contract in Public Files section of RFP and respond to sample contract  
Section 4 Requested Information section of this RFP**

**RFP Attachments – Non-Collusion Affidavit**

**RFP Attachment “C”**

**Mobile Mental Health Program RFP  
Non-Collusion Affidavit  
To Be Executed by Bidder and Submitted with Proposal**

\_\_\_\_\_, being first duly sworn, deposes and says that he or she is (Owner) of \_\_\_\_\_ (Contractor Name) the party making the foregoing proposal that the proposal is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the proposal is genuine and not collusive or sham; that the offeror has not directly or indirectly induced or solicited any other offeror to put in a false or sham proposal, and has not directly or indirectly colluded, conspired, connived, or agreed with any offeror or anyone else to put in a sham proposal, or that anyone shall refrain from bidding; that the offeror has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the proposal price of the offeror or any other offeror, or to fix any overhead, profit, or cost element of the proposal price, or of that of any other offeror, or to secure any advantage against the public body awarding the contract of anyone interested in the offered contract; that all statements contained in the proposal are true; and further, that the offeror has not, directly or indirectly, submitted his or her proposal price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company association, organization, proposal depository, or to any member or agent thereof to effectuate a collusive or sham proposal.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signed at (Place)

\_\_\_\_\_  
Offeror Name  
(Person, Firm, Corp.)

\_\_\_\_\_  
Authorized Representative

\_\_\_\_\_  
Address

\_\_\_\_\_  
Representative's Name

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Representative's Title

**RFP Attachments – References**

**RFP ATTACHMENT “D”**

REFERENCES

Mobile Mental Health Program RFP

Reference #1	Reference #2	Reference #3
<b>Organization Name</b>		
<b>Reference Contact information</b>		
<b>Project/Partnership Description</b>		
<b>Staff Assigned to Referenced Project</b>		
<b>Project Dates (Start &amp; End)/Project Dollar Value</b>		

