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**COUNTY OF OCEAN  
ADMINISTRATION BUILDING  
101 HOOPER AVENUE  
TOMS RIVER, NEW JERSEY 08753**

***COMPETITIVE CONTRACT***

***PROPOSAL***

***FOR***

***OUTPATIENT SUBSTANCE ABUSE TREATMENT SERVICES***

***FOR THE OCEAN COUNTY DEPARTMENT OF JUVENILE  
SERVICES***

***YOUTH SERVICES COMMISSION***

***2020***

## **NOTICE OF COMPETITIVE CONTRACTING PROPOSAL** **OUTPATIENT SUBSTANCE ABUSE TREATMENT SERVICES**

The Ocean County Department of Juvenile Services; Youth Services Commission is seeking proposals for Outpatient Substance Abuse Treatment Services.

The Ocean County Youth Services Commission announces the availability of funding for Outpatient Substance Abuse Treatment Services for youth on probation. Funding is available for this program through an approved state grant proposal. The state grant proposal is available upon request.

A funding allocation of \$49,000.00 is available to provide Outpatient Substance Abuse Treatment Services for youth on probation in Ocean County, New Jersey. Services are to be billed monthly at fee per service rate, to be included in the budget section of this proposal.

Proposals may be obtained by contacting the Ocean County Department of Juvenile Services, Youth Services Commission Administrator, Shelby Voorhees at 732-288-7656, [SVoorhees@co.ocean.nj.us](mailto:SVoorhees@co.ocean.nj.us), or you can access the proposal packet on the Ocean County Bid Portal by visiting [www.co.ocean.nj.us/ocbidportal.nsf](http://www.co.ocean.nj.us/ocbidportal.nsf).

### **FUNDING GUIDELINES**

The Ocean County Youth Services Commission is soliciting competitive contract proposals for Outpatient Substance Abuse Treatment Services utilizing Family Court/State Community Partnership Funds for the periods 1/1/2021 through 12/31/2021. Contracts may be renewed on an annual basis based on performance and recommendations of the YSC Monitoring Committee (to the Full Council YSC) for a period not to exceed five (5) years or as otherwise directed by the New Jersey Juvenile Justice Commission. No legal liability on the part of the County for payment of any money shall arise unless, and until, funds are made available each year to the Director of the Department of Finance. The County reserves the right to award this contract in whole or in part to one or more agencies.

### **PROGRAM GUIDELINES**

This program shall provide Outpatient Substance Abuse Treatment Services for juveniles involved in the Family Court System in Ocean County.

### **SCOPE OF SERVICES**

1. To improve the overall mental health of participating juveniles.
2. To provide comprehensive evaluations of substance abuse; report to include substance abuse treatment recommendation(s).
3. To provide American Society of Addiction Medicine (ASAM) substance abuse education level .5 and outpatient counseling level 1 and 2.1 to juveniles identified with substance abuse issues. The successful vendor(s) is expected to leverage and not supplement or supplant other sources of funding for services for which a youth may be eligible, such as Medicaid, Medicare, private health insurance, and reimbursement from the State Department of Children and Families.
4. To encourage termination of substance abuse.
5. To support a positive transition for juveniles who are returning to the community.
6. To prevent future delinquency and recidivism as a result of substance abuse.
7. Proposer is to include Family Engagement to increase the success of youth involved in program and/or services provided.
8. Provider is to include Community Engagement to strengthen community bonds and increase the success of youth involved in the program
9. To maintain an environment encouraging juveniles' positive and constructive behavior.
10. To provide a cost-effective program within budgetary guidelines.

11. To maintain licenses/accreditation and operate within federal, state, and county regulations.
12. Proposer to work cooperatively with all members of the system, including but not limited to: Family Court, Probation Supervision, Youth Case Management, Care Management Organization, Division of Youth and Family Services, and the MDT.
13. Proposer to submit written reports and communicate verbally or via email to the Court System as needed.
14. Proposer to refer and link juveniles to other services, such as, but not limited to, job readiness, GED preparation, and vocational training; and other agencies public and private, such as Private Industry Council, DVR, Ocean County College, United Way, etc.
15. Proposer shall submit monthly, quarterly & yearly reports as requested by the County and required by the state Juvenile Justice Commission, including reporting via the Internet. This includes but is not limited to YSC monthly spreadsheets, Quarterly Program Implementation and Outcome Reports, Sign-In Sheets for all Face-to Face contacts, Youth Exit Surveys, and JAMS Intake/Completions and Quarterly Narratives.
16. Proposer will participate in Annual Program Monitoring with the Youth Services Commission and will follow all Monitoring guidelines, including but not limited to: fiscal audits, reporting, staff and youth interviews, random site visits, program analysis, etc.
17. Submit Monthly billing and all required backup documentation on the 15<sup>th</sup> of each month.
18. Proposer shall maintain an appropriate log of the clients' activities and progress.
19. Proposer shall collect post-program surveys from all participant.
20. The County shall have the right, at any time, to inspect the operations and records of the Proposer with regard to the implementation of the Outpatient Substance Abuse Services.
21. The Proposer will cooperate fully and completely with the Monitoring Committee of the Youth Services Commission and the Youth Services Commission Administrator.
22. Proposer to indicate if/how services may be provided to non-English speaking clients, especially Spanish.
23. Proposer to include weekly substance education services at the RAISE program at 155 Sunset Avenue.
24. Proposer to indicate if/how services will be provided geographically or at multiple locations.
25. All goals and objectives as set forth in N.J.S.A. 2A:4A-76 et seq. and the Juvenile/Family Crisis Operations Manual by the New Jersey Judiciary.

### **ELIGIBLE APPLICANTS**

Eligible applicants are to be organizations or agencies with a minimum of two years of experience running these types of programs and providing these types of services to Ocean County youth and families.

Services must be provided by appropriately licensed professionals.

Proposer must meet all licensing requirements of the State of New Jersey.

### **PROPOSAL SUBMISSION REQUIREMENTS**

Please submit one (1) original and eight (8) copies of your application to the Department of Juvenile Services, Youth Services Commission, Attention: Shelby Voorhees, Youth Services Commission, 165 Sunset Avenue, Toms River New Jersey, no later than **4:00 p.m. on Friday, November 13, 2020.**

The Proposal Review Committee comprised of Youth Services Commission members will hold a review of the applications **November 16 through November 20, 2020.** All agencies/organizations should be available for a ten (10) minute oral presentation as part of the review process via Webex. Agencies/organizations will be contacted regarding the proposal review date and scheduled time slot.

A Technical Assistance meeting will be held on **Monday, October 26, 2020 at 10:00 a.m.,** via Webex. All applicants are strongly encouraged to attend although attendance is not mandatory.

### **PROPOSAL GUIDELINES**

Applicants are required to include the following in their proposal:

1. Organization mission, history & current activities
2. Detailed description of proposed program
3. Organization capacity-current leadership, staff and operating budget
4. Measurable outcomes and tools to be used

### **APPEALS PROCESS**

See attached Appeals Process

### **AWARD NOTIFICATION**

The Youth Services Commission grant for Outpatient Substance Abuse Treatment Services will be awarded upon Freeholder approval.

If you have any questions please contact: Shelby Voorhees at 732-288-7656 or SVoorhees@co.ocean.nj.us OR Bob Knight at 732-288-7729 or RKnight@co.ocean.nj.us.

All proposals must include the following documents: (Include all mandatory documents below as well as on the Document Checklist)

1. Statement of Ownership in compliance with N.J.S.A. 52:25-24.2. (Mandatory Document)
2. Acknowledgement of Receipt of Addenda or Revisions (If Issued)
3. Disclosure of Investment Activities in Iran (Mandatory Document)
4. Budget/Unit Cost Proposal
5. Non-Collusion Affidavit
6. Affirmative Action Regulations N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.) Compliance Statement
7. Signature Page
8. Copy of New Jersey Business Registration Certificate in compliance with N.J.S.A. 52:32-44  
OR Copy of IRS letter granting tax exempt status under Sec. 501(c)3
9. One (1) original and eight (8) copies of the proposal
10. References
11. Certificate of Insurance
12. Certified Audit
13. Project Description
14. Organizational Chart
15. Current List of Board of Directors

**Proposers who are not registered as vendors with the County of Ocean should register on the Ocean County Bid Portal, under the Vendor Self Service tab <http://www.co.ocean.nj.us/OC/Purchasing/frmHomePDept.aspx>**

### **Evaluation Criteria**

A review committee will review and rank all responses. All proposals will be reviewed to determine if they conform to all the proposal requirements set forth and the following selection criteria will be used in award of a contract for the services described herein.

- 40 % - Technical Criteria**
- 30 % - Management Criteria**
- 30 % - Cost Criteria**

## 1. Technical Criteria:

### i. Proposed methodology:

- (1) Does the vendor's proposal demonstrate a clear understanding of the scope of work and related objectives?
- (2) Is the vendor's proposal complete and responsive to the specific RFP requirements?
- (3) Has the past performance of the vendor's proposed methodology been documented?

## 2. Management Criteria:

### i. Project management:

- (1) How well does the proposed scheduling timeline meet the contracting unit's needs?
- (2) Is there a project management plan?

### ii. History and experience in performing the work:

- (1) Does the vendor document a record of reliability of timely delivery and on-time and on-budget implementation?
- (2) Does the vendor demonstrate a track record of service as evidenced by on-time, on-budget, and contract compliance performance?
- (3) Does the vendor document industry or program experience?
- (4) Does the vendor have a record of moral integrity?

### iii. Availability of personnel, facilities, equipment and other resources:

- (1) To what extent does the vendor rely on in-house resources vs. contracted resources?
- (2) Are the availability of in-house and contract resources documented?

### iv. Qualification and experience of personnel:

- (1) Documentation of experience in performing similar work by employees and when appropriate, sub-contractors?
- (2) Does the vendor make use of business capabilities or initiatives that involve women, the disadvantaged, small and/or minority owned business establishments?
- (3) Does the vendor demonstrate cultural sensitivity in hiring and training staff?

## 3. Cost Criteria:

### i. Cost of goods to be provided or services to be performed:

- (1) Relative cost: How does the cost compare to other similarly scored proposals?
- (2) Full explanation: Is the price and its component charges, fees, etc. adequately explained or documented?
- (3) Does the cost of services fit within the contract ceiling and expected Level of Service?

### ii. Assurances of performance:

- (1) If required, are suitable bonds, warranties, or guarantees provided?
- (2) Does the proposal include quality control and assurance programs?

**Ranking** - All proposals will be reviewed for completeness and qualifications. **All proposals must meet an average score of 80 to be considered for funding.** The proposal receiving the highest number of points will be the proposal(s) recommended to the Full Youth Services Commission for approval. Please see attached Score Sheet to be used.

The County of Ocean shall award a contract to the vendor or vendors that best meet the needs and interest of Ocean County. The County reserves the right to negotiate the terms and conditions of a contract with the successful vendor or vendors to obtain the most cost advantageous services for the County.

**Indemnity Clause** - The proposer, if awarded a contract, agrees to protect, defend and save harmless the County against any damage for payment for the use of any patented material process, article or device that may enter into the manufacture, construction or form a part of the work covered by either order or contract, and he further agrees to indemnify and save harmless the County from suits or actions of every nature and description brought against it, for, or on account of injuries or damages received or sustained by any party or parties by, or from any of the negligent acts of the contractor, his servants or agents.

**Pay to Play Requirements** - Starting in January 2007, all business entities are advised of their responsibility to file an annual disclosure statement of political contributions with the New Jersey Election Law Enforcement Commission (ELEC) pursuant to N.J.S.A. 19:44A-20.27 if they receive contracts in excess of \$50,000 from public entities in a calendar year. Business entities are responsible for determining if filing is necessary. Additional information on this requirement is available from ELEC at 888-313-3532 or at [www.elec.state.nj.us](http://www.elec.state.nj.us).

**Certification of Non-Involvement in Prohibited Activities in Iran** - Pursuant to N.J.S.A. 52:32-58, the proposer must certify that neither the vendor, nor one of its parents, subsidiaries, and/or affiliates (as defined in N.J.S.A. 52:32-56(e)(3)), is listed on the Department of the Treasury's List of Persons or Entities Engaging in Prohibited Investment Activities in Iran and that neither is involved in any of the investment activities set forth in N.J.S.A. 52:32-56(f). If the vendor is unable to so certify, the vendor shall provide a detailed and precise description of such activities.

**Transitional Period** - In the event services are terminated by contract expiration or by voluntary termination by either the Contractor or the County of Ocean, the Contractor shall continue all terms and conditions of said contract for a period not to exceed one (1) month at the County's request.

**Statement of Ownership** - The provisions of N.J.S.A. 52:25-24.2 applies to all forms of corporations and partnerships, including, but not limited to, limited partnerships, limited liability corporations, limited liability partnerships, and Subchapter S corporations.

**Business Registration Certificate** –

Pursuant to N.J.S.A. 52:32-44, Ocean County (“Contracting Agency”) is prohibited from entering into a contract with an entity unless the bidder/proposer/contractor, and each subcontractor that is required by law to be named in a bid/proposal/contract has a valid Business Registration Certificate on file with the Division of Revenue and Enterprise Services within the Department of the Treasury.

Prior to contract award or authorization, the contractor shall provide the Contracting Agency with its proof of business registration and that of any named subcontractor(s).

Subcontractors named in a bid or other proposal shall provide proof of business registration to the bidder, who in turn, shall provide it to the Contracting Agency prior to the time a contract, purchase order, or other contracting document is awarded or authorized.

During the course of contract performance:

- (1) the contractor shall not enter into a contract with a subcontractor unless the subcontractor first provides the contractor with a valid proof of business registration.
- (2) the contractor shall maintain and submit to the Contracting Agency a list of subcontractors and their addresses that may be updated from time to time.
- (3) the contractor and any subcontractor providing goods or performing services under the contract, and each of their affiliates, shall collect and remit to the Director of the Division of Taxation in the Department of the Treasury, the use tax due pursuant to the Sales and Use Tax Act, (N.J.S.A. 54:32B-1 et seq.) on all sales of tangible personal property delivered into the State. Any questions in this regard can be directed to the Division of Taxation at (609)292-6400. Form NJ-REG can be filed online at <http://www.state.nj.us/treasury/revenue/busregcert.shtml>.

Before final payment is made under the contract, the contractor shall submit to the Contracting Agency a complete and accurate list of all subcontractors used and their addresses.


Pursuant to N.J.S.A. 54:49-4.1, a business organization that fails to provide a copy of a business registration as required, or that provides false business registration information, shall be liable for a penalty of \$25 for each day of violation, not to exceed \$50,000, for each proof of business registration not properly provided under a contract with a contracting agency.

**Please see samples of acceptable Business Registration Certificates on next page.**

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE		DEPARTMENT OF TREASURY/ DIVISION OF REVENUE PO BOX 252 TRENTON, N J 08646-0252
TAXPAYER NAME:	TRADE NAME:	
TAXPAYER IDENTIFICATION#:	SEQUENCE NUMBER:	
ADDRESS:	ISSUANCE DATE:	
EFFECTIVE DATE:	 <small>Acting Director</small>	
FORM-BRC(08-01)	<small>This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.</small>	

THESE ARE SAMPLES OF THE ONLY ACCEPTABLE BUSINESS REGISTRATION CERTIFICATES.

ONE OF THESE DOCUMENTS MUST BE PROVIDED WITH THE PROPOSAL SUBMISSION OR PRIOR TO AWARD OF THE CONTRACT, REGARDLESS OF THE FACT THAT A COPY MAY ALREADY BE ON FILE WITH THE COUNTY OF OCEAN.

 <b>STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE</b>	
Taxpayer Name:	TAX REG TEST ACCOUNT
Trade Name:	
Address:	847 ROEBLING AVE TRENTON, NJ 08611
Certificate Number:	1093907
Date of Issuance:	October 14, 2004
For Office Use Only:	
	20041014112823533



**NON - COLLUSION AFFIDAVIT**

STATE OF NEW JERSEY :

: ss

COUNTY OF \_\_\_\_\_ :

I, \_\_\_\_\_ of  
the City of \_\_\_\_\_ In the County of \_\_\_\_\_  
and the State of \_\_\_\_\_, of full age, being duly sworn  
according to law on my oath depose and say that:

I am \_\_\_\_\_ of the firm of  
\_\_\_\_\_ the vendor  
making the Proposal for the above-named Project, and that I executed the said Proposal with  
full authority so to do; that said vendor has not, directly or indirectly, entered into any agreement,  
participated in any collusion, or otherwise taken any action in restraint of free, competitive  
procurement in connection with the above-named Project; and that all statements contained in said  
Proposal and in this affidavit are true and correct, and made with full knowledge that the  
County of Ocean relies upon the truth of the statements contained in said Proposal and in the  
statements contained in this affidavit in awarding the contract for the said Project.

I further warrant that no person or selling agency has been employed or retained to  
solicit or secure such contract upon an agreement or understanding for a commission,  
percentage, brokerage or contingent fee, except bona fide employees or bona fide established  
commercial or selling agencies maintained by \_\_\_\_\_.  
(N.J.S.A. 52:34-15). (Name of Contractor)

\_\_\_\_\_  
(Also type or print name of affiant under signature)

Subscribed and sworn to  
before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public of  
My commission expires

**EXHIBIT A**

**MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE  
N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)  
N.J.A.C. 17:27**

**GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS**

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at [www.state.nj.us/treasury/contract\\_compliance](http://www.state.nj.us/treasury/contract_compliance))

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.**

# **AFFIRMATIVE ACTION QUESTIONNAIRE**

## **NOTICE TO ALL CONTRACTORS**

### **AFFIRMATIVE ACTION REGULATIONS N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.)**

A. ACTIVITY OF YOUR COMPANY- Indicate below:

- Procurement and/or Service Company
- Professional Consultant
- Other \_\_\_\_\_

All Contractors, except Government Agencies, are required to comply with the above law.

B. TO ALL CONTRACTORS:

1. Within seven (7) days after receipt of the notification of intent to award the contract or receipt of the contract, whichever is sooner, a Contractor should present one of the following to the County of Ocean:
  - (a) An existing federally approved or sanctioned affirmative action program.
  - (b) A New Jersey Certificate of Employee Information Report Approval.
  - (c) If the Contractor cannot present "a" or "b", the Contractor is required to submit a completed Employee Information Report (Form AA302). This form will be made available to the Contractor by the County of Ocean.

C. QUESTIONS BELOW MUST BE ANSWERED BY ALL CONTRACTORS:

1. Do you have a Federally approved or sanctioned Affirmative Action Program?

Yes \_\_\_\_\_ No \_\_\_\_\_

- (a) If yes, please submit a photocopy of such approval.

2. Do you have a State of New Jersey "Certificate of Employee Information Report" approval?

Yes \_\_\_\_\_ No \_\_\_\_\_

- (a) If yes, please submit a photocopy of such certificate.

The undersigned Contractor certifies that he is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.) and agrees to furnish the required documentation pursuant to the law.

COMPANY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_

Note: A contract must be rejected as non-responsive if a contractor fails to comply with the requirements of N.J.S.A. 10:5-31 et seq. and P.L. 1975 C. 127 (N.J.A.C. 17:27-1 et seq.).

# ***AMERICANS WITH DISABILITIES ACT***

## **Equal Opportunity For Individuals With Disabilities**

The CONTRACTOR and the COUNTY do hereby agree that the provisions of title II of the Americans with Disabilities Act of 1990 (the "Act") (42 U.S.C. 12101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereunto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the COUNTY pursuant to this contract, the CONTRACTOR agrees that the performance shall be in strict compliance with the Act. In the event that the CONTRACTOR, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the CONTRACTOR shall defend the COUNTY in any action or administrative proceeding commenced pursuant to this Act. The CONTRACTOR shall indemnify, protect and save harmless the COUNTY, its agents, servants and employees from and against any and all suits, claims, losses, demands, or damages of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The CONTRACTOR shall, at its own expense, appear, defend and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the COUNTY'S grievance procedure, the CONTRACTOR agrees to abide by any decision of the COUNTY which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the COUNTY or if the COUNTY incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the CONTRACTOR shall satisfy and discharge the same at its own expense.

The COUNTY shall, as soon as practicable after a claim has been made against it, give written notice thereof to the CONTRACTOR along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the COUNTY or any of its agents, servants and employees, the COUNTY shall expeditiously forward or have forwarded to the CONTRACTOR every demand, complaint, notice, summons, pleading, or other process received by the COUNTY or its representatives.

It is expressly agreed and understood that any approval by the COUNTY of the services provided by the CONTRACTOR pursuant to this contract will not relieve the CONTRACTOR of the obligation to comply with the Act and to defend, indemnify, protect and save harmless the COUNTY pursuant to this paragraph.

It is further agreed and understood that the COUNTY assumes no obligation to indemnify or save harmless the CONTRACTOR, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the CONTRACTOR expressly understands and agrees that the provision of this indemnification clause shall in no way limit the CONTRACTOR'S obligations assumed in this Agreement, nor shall they be construed to relieve the CONTRACTOR from any liability, nor preclude the COUNTY from taking any other actions available to it under any other provisions of this Agreement or otherwise at law.

**SIGNATURE PAGE**

The County of Ocean does not discriminate on the basis of handicapped status in the admission or access to, or treatment, or employment in its programs or activities.

The County of Ocean shall allow access to any books, documents, papers and records of the contractor, which are directly pertinent to that specific contract.

Compliance is required with all applicable standards, orders, or requirements issued under 306 of the Clean Air Act, Section 508 of the Clean Water Act, Executive Order 11738 and Environmental Protection Agency Regulations (40 CRF, Part 15) which prohibits the use under non-exempt federal contracts, grants or loans of facilities included on the EPA list of violating facilities.

"The County of Ocean considers it to be a substantial conflict of interest for any company desiring to do business with the County to be owned, operated or managed by any County employee, nor shall any County personnel be employed by the vendor in conjunction with any work to be performed for or on behalf of the County of Ocean".

I HEREBY CERTIFY COMPLIANCE WITH THE FOREGOING.

Partnership

The undersigned is a Corporation under the law of the State

Individual

of \_\_\_\_\_, having principal offices  
at \_\_\_\_\_.

\_\_\_\_\_  
NAME OF COMPANY, CORPORATION OR INDIVIDUAL  
- PLEASE PRINT -

**SIGNED BY:** \_\_\_\_\_

\_\_\_\_\_  
PRINT NAME AND OFFICIAL TITLE

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_  
INCLUDE ZIP CODE

**TELEPHONE:** \_\_\_\_\_

**E-MAIL ADDRESS** \_\_\_\_\_

**FEDERAL IDENTIFICATION NO.** \_\_\_\_\_

**STATEMENT OF OWNERSHIP DISCLOSURE**

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

**This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.**

**Name of Organization:** \_\_\_\_\_

**Organization Address:** \_\_\_\_\_

**PART I - Check the box that represents the type of business organization:**

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type)     Limited Liability Company (LLC)
- Partnership         Limited Partnership     Limited Liability Partnership (LLP)
- Other (be specific): \_\_\_\_\_

**PART II**

- The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**

**OR**

- No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Address

**PART III - Disclosure of 10% or Greater Ownership in the Stockholders, Partners or LLC Members Listed in PART II**

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above.** The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Address

**PART IV Certification**

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the County of Ocean is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the County of Ocean to notify the County of Ocean in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the County of Ocean to declare any contract(s) resulting from this certification void and unenforceable.

<b>Full Name (Print):</b>	<b>Title:</b>
<b>Signature:</b>	<b>Date:</b>



# DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN

## PART 1: CERTIFICATION PROPOSERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX FAILURE TO CHECK ONE OF THE BOXES WILL RENDER THE PROPOSAL NON-RESPONSIVE

Pursuant to Public Law 2012, c. 25, any person or entity that submits a proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Proposers **must** review this list prior to completing the below certification. **Failure to complete the certification will render a vendor's proposal non-responsive.** If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

### PLEASE CHECK THE APPROPRIATE BOX:

I certify, pursuant to Public Law 2012, c. 25, that neither the vendor listed below nor any of the vendor's parents, subsidiaries, or affiliates is **listed** on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed below, or I am an officer or representative of the entity listed below and am authorized to make this certification on its behalf. **I will skip Part 2 and sign and complete the Certification below.**

### OR

I am unable to certify as above because the vendor and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

## PART 2: PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN

You must provide a detailed, accurate and precise description of the activities of the vendor's person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes below.

### PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, PLEASE ADD AN ADDITIONAL SHEET(S) OF PAPER.

Name _____	Relationship to Proposer _____
Description of Activities _____ _____	
Duration of Engagement _____	Anticipated Cessation Date _____
Proposer Contact Name _____	Contact Phone Number _____

Certification: I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that the County of Ocean is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the County to notify the County in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the County of Ocean and that the County at its option may declare any contract(s) resulting from this certification void and unenforceable.

Name of Proposer: \_\_\_\_\_

Full Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

## DOCUMENT CHECKLIST

**Project Title:** Outpatient Substance Abuse Treatment Services

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Items submitted  
(Proposer's INITIALS)

**A. FAILURE TO SUBMIT ANY OF THESE DOCUMENTS IS  
MANDATORY CAUSE FOR REJECTION OF PROPOSAL**



- |          |   |       |
|----------|---|-------|
| <u>X</u> | Statement of Ownership (N.J.S.A. 52:25-24.2)                  | _____ |
| <u>X</u> | Acknowledgment of receipt of addenda or revisions (if issued) | _____ |
| <u>X</u> | Disclosure of Investment Activities in Iran                   | _____ |
| <u>X</u> | Cost Proposal   | _____ |

**B. FAILURE TO SUBMIT ANY OF THESE DOCUMENTS MAY BE CAUSE  
FOR REJECTION OF PROPOSAL**

- |          |  |       |
|----------|--|-------|
| <u>X</u> | Non-Collusion Affidavit                                      | _____ |
| <u>X</u> | Affirmative Action questionnaire                             | _____ |
| <u>X</u> | Signature Page   | _____ |
| <u>X</u> | One (1) Original and eight (8) copies of Proposal Submission | _____ |
| <u>X</u> | References   | _____ |
| <u>X</u> | Certificate of Insurance                                     | _____ |
| <u>X</u> | Certified Audit  | _____ |
| <u>X</u> | Project Description  | _____ |
| <u>X</u> | Organizational Chart   | _____ |
| <u>X</u> | Current List of Board of Directors                           | _____ |

**C. DOCUMENTS REQUESTED TO BE INCLUDED WITH THE PROPOSAL**

- |          |  |       |
|----------|--|-------|
| <u>X</u> | Copy of New Jersey Business Registration Certificate in compliance with N.J.S.A. 52:32-44 <u>OR</u> Copy of IRS letter granting tax exempt status under Sec. 501(c)3 | _____ |
|----------|--|-------|

**D. THE UNDERSIGNED PROPOSER HEREWITH SUBMITS  
THE ABOVE REQUIRED DOCUMENTS.**

**PRINT NAME OF PROPOSER:** \_\_\_\_\_

**SIGNED BY:** \_\_\_\_\_

**PRINT NAME AND TITLE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**THIS CHECKLIST SHOULD BE INITIALED AND SIGNED WHERE  
INDICATED AND RETURNED WITH ALL DOCUMENTS.**

**ADDENDUM ACKNOWLEDGMENT**

**COUNTY OF OCEAN**

**ADDENDUM NO:** \_\_\_\_\_

**ADDENDUM NO:** \_\_\_\_\_

**ADDENDUM NO:** \_\_\_\_\_

**ACKNOWLEDGMENT**

**PROJECT ENTITLED:** \_\_\_\_\_

Acknowledgment is hereby made of the receipt of Addendum No. \_\_\_\_\_ containing information for the above referenced project.

**PROPOSER:** \_\_\_\_\_

**BY:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NOTE: WHEN AN ADDENDUM IS ISSUED, THIS ACKNOWLEDGMENT MUST BE ENCLOSED WITH THE PROPOSAL AT THE TIME OF PROPOSAL SUBMISSION. FAILURE TO DO SO WILL RESULT IN PROPOSAL REJECTION.**

*Ocean County*  
*Youth Services Commission*  
Department of Juvenile Services

**Applicant Instructions**  
**Proposal for Funding**

Please submit the original and eight (8) copies of this proposal to the Youth Services Commission as directed in the front of this proposal form. All proposals must be submitted by the deadline indicated in the request for competitive contract (RFCC) letter. Proposals received after this deadline will not be considered for funding. Each proposal received by the deadline is considered to be in its final form. Technical Assistance is available only at the scheduled workshop time (stated in the RFCC letter).

Each applicant being considered for funding will be given the opportunity to make a ten minute presentation to the Ocean County Youth Services Commission Proposal Review Committee. This time may be used to present information about your agency, about the proposal submitted and to answer any questions the committee may have regarding your submission.

The funding recommendations of the Proposal Review Committee are reported to the Youth Services Commission (YSC) at the next scheduled meeting. The funding recommendations of the YSC are presented to the Ocean County Board of Chosen Freeholders for final approval.

Agencies submitting proposals not selected for funding will be notified regarding the Appeals Process. Agencies submitting proposals selected for funding will be contacted regarding contracting procedures.

All service contracts will include the pertinent information presented in the proposal. All contracts are monitored annually by the Youth Services Commission Monitoring Committee. Funding is provided for the contract period based upon submission of required reports, positive monitoring, and approval of each year's contract by the YSC and Freeholder Board; and the availability of funding.

If the RFCC letter indicated that proposals are being requested from non-profit agencies to provide a service, the agency must be registered as exempt under Section 501(c)(3) of U.S. IRS Code of 1954 by the proposal submission date. The agency's Federal Employer's Identification Number must be presented on the proposal form. Agencies must have non-profit status and a Federal Identification Number at the time of proposal submission in order to be considered for funding when the RFCC letter specifies non-profit agencies.

## Project Description

### Outpatient Substance Abuse Treatment Services

**Please submit the following information:**

- I. Basic Agency Data:
  - a. Agency Name
  - b. Agency Address
  - c. Agency Phone Number
  - d. Agency Director/Administrator
  - e. Contact person for this Proposal
  - f. Federal Employer's Identification Number
  - g. Corporation type (profit, non-profit, other) (if other please specify)
  - h. Is the agency exempt under Section 501(c)(3) of the IRS Code of 1954?
  - i. Total Funding requested and fee per service rate.
  - j. Title of service to be provided
  
- II. Required Attachments
  - a. Statement of Ownership
  - b. Non-Collusion Affidavit
  - c. Affirmative Action Questionnaire
  - d. Copy of New Jersey Business Registration Certificate in compliance with N.J.S.A. 52:32-44 OR Copy of IRS letter granting tax exempt status under Sec. 501(c)3
  - e. Acknowledgement of Receipt of Addenda or Revisions (if issued)
  - f. Computed Budget Proposal and Project Description
  - g. Signature Page
  - h. Certificate of Insurance
    - i. Agency shall provide and pay for Professional Liability and Comprehensive General Liability, each of which shall be in the amount of \$1,000,000.00 per occurrence with an aggregate limit of \$3,000,000.00. Agency shall name the County as an additional insured on the Comprehensive General Liability policy.
    - ii. Agency shall maintain Statutory Workers Compensation Insurance to the extent required by law. Agency shall maintain such insurance in full force until the final completion or termination of all work and services hereunder. Agency shall submit an insurance certificate to the County consistent with the provisions of this paragraph.
  - i. Current List of Board of Directors and Organizational Chart
  - j. One (1) original and eight (8) copies of proposal
  
- III. Background Information
  - a. Mission Statement of Agency
  - b. History of Agency
  - c. Current Services Provided by Agency
  - d. Resumes and biographies for each staff providing direct services to the participants.
  - e. List of trainings required for staff annually
  - f. List of trainings attended/participated by staff in the last year
  - g. Does your agency actively participate on the Youth Services Commission? If Yes, please explain
  - h. What is the agency's funding history with the Youth Services Commission?
  - i. If your agency was funded in the last five years, include monitoring results

- j. Confirmation that staff providing direct services have passed a criminal background check. Attach a copy of the agency's policy.
- k. Chain of command for direct service staff.

IV. Description of Service

- a. Which target population(s) will be served?
- b. Provide a data analysis to support the services you intend to provide.
- c. How many youth does the program intend to serve?
- d. Will all Ocean County residents meeting eligibility criteria be considered for this service?
- e. Define/Describe the goal(s) of the service.
- f. Describe the specific objectives of the service.
- g. Describe the specific activities that will be performed to effectively achieve the operational objectives listed above.
- h. Describe the qualifications and skills required of staff providing the service and the ratio of staff to prospective program participants.
- i. Describe the method(s) of internal evaluation regarding the quality of service to be provided.
- j. Describe the measurable outcomes for services as well as measurement tools to be used.
- k. Describe how Trauma Informed and Trauma Responsive Care are incorporated into your agency and the services you provide.
- l. Describe if and how virtual platforms will be used to provide services to youth and families

V. Accessibility of Service

- a. Describe hours and days when service will be made available to the participants.
- b. List the location(s) where the service will be provided to participants.
- c. Describe transportation options for participants to obtain this service.
- d. Describe the referral process and include any referral form(s) information required
- e. Describe the methods used to determine participant eligibility.
- f. Will this service be accessible to those requiring bilingual services? Please explain.
- g. Will this service be accessible to the handicapped? Please explain.

VI. Family Engagement

- a. What does Family Engagement mean to your agency?
- b. How will you include Family Engagement to increase the success of the youth in your program services?
- c. What has been the agency's history with Family Engagement, and what success has the agency had with implementing family engagement?

VII. Community Engagement

- a. What does Community Engagement mean to your agency?
- b. How will you include Community Engagement to increase the success of the youth in your program services?

VIII. Computed Budget Proposal

- a. Please provide a fee per service or unit cost for **each** service provided, to be billed monthly by line item fee per service.
- b. Budget should be comprehensive and include line items for things such as: client specific needs, training, family engagement, community engagement, etc.
- c. 5% of the total contract ceiling can be utilized for General and Administrative costs. (Please explain how this number was calculated), and any in-kind, if applicable.

- d. The successful vendor(s) is expected to leverage and not supplement or supplant other sources of funding for services for which a youth may be eligible, such as Medicaid, Medicare, private health insurance, and reimbursement from the State Department of Children and Families. The successful vendor(s) is expected to assist or refer youth and families to other organizations that assist with access to health care coverage. This includes pursuing certification to determine presumptive eligibility for Medicaid and acting as or coordinating with Certified Application Counselors and Health Insurance Navigators that assist consumers with Medicaid and Health Insurance Marketplace enrollment. Youth Services Commission grant funds may be applicable to direct service costs, unless otherwise disallowed by Federal or State law.

If you have questions regarding any of the information requested above please attend the Technical Assistance meeting.

Ocean County  
Youth Services Commission Proposal Review

**Appeals Process**

- Proposal Review Committee makes a recommendation for awarding of funds.
- Recommendations are presented to the Youth Services Commission.
- On the day following the Youth Services Commission meeting, letters are sent to the agencies NOT being considered for funding. The letters will indicate the date written request for appeal must be filed; the date on which the Appeals Committee will meet and the date on which final decisions on appeals will be announced.
- An appeal of the selection process will be heard only if it is alleged that the Youth Services Commission has violated a statutory or Regulatory provision in the awarding of a grant. An appeal will not be heard based on the challenge to the evaluation of a proposal.
- Agencies have three (3) working days to notify the Youth Services Commission Administrator in writing that they wish to appeal the YSC's decision.
- The Appeals Committee of at least (3) YSC members not on the Proposal Review Committee, will hear the appeal. The chair of the Proposal Review Committee will be present but will not vote. The Commission may also choose to hear the appeal as a "Committee of the Whole."
- Those agencies involved in the appeal or potentially affected by the appeal will be notified and permitted ten (10) minutes each to make a presentation.
- The Committee will either uphold the Proposal Review Committee's recommendation or propose an alternate-funding plan specifying agencies to receive funding adjustments. These recommendations will be presented to the Commission for action unless the Commission acted as a "Committee of the Whole."
- A final recommendation is made to the Board of Chosen Freeholders.



# PROPOSAL EVALUATION FORM 2020

FOR:

**REQUIRED ATTACHMENTS:**

YES [  ]

NO [  ]

**CRITERIA:** The following criteria and point system are being used to rank submitted proposals. **All proposals must meet an average score of 80 to be considered for funding.** The proposal receiving the highest number of points is the proposal recommended to the Full Youth Services Commission for approval.

<b>1. Agency's Mission Statement and/or Program History</b>			<b>Technical SCORE (max 10pts)</b>
0-3	4-7	8-10	
None to Poor Statement & History	Average Statement & History	Good to Excellent Statement & History	

<b>2. Description of Experience &amp; Qualifications</b>			<b>Management SCORE (max 30pts)</b>
0-10	11-20	21-30	
None to Poor Experience & Qualifications	Average Experience & Qualifications	Good to Excellent Experience & Qualifications	

<b>3. Description of tasks outlined in Scope of Work</b>			<b>Technical SCORE (max 30 pts)</b>
0-10	11-20	21-30	
None to Poor Description of Tasks	Average Description of Tasks	Good to Excellent Description of Tasks	

<b>4. Proposed Budget/Cost Proposal/Unit Cost Proposal</b>			<b>Cost SCORE (max 30 pts)</b>
0-10	11-20	21-30	
None to Poor Budget/Cost or Unit Cost Proposal	Average Budget/Cost or Unit Cost Proposal	Good to Excellent Budget/Cost or Unit Cost Proposal	

**TOTAL POINTS**