REQUEST FOR PROPOSAL
RFP #24-0051
JUVENILE SERVICES

July 8, 2024

Sedgwick County, Kansas (hereinafter referred to as “county”) is seeking a firm or firms to provide Juvenile Services. If your firm is interested in submitting a response, please do so in accordance with the instructions contained within the attached Request for Proposal. Responses are due no later than 1:45 pm CDT, August, 6, 2024.

All contact concerning this solicitation shall be made through the Purchasing Department. Proposers shall not contact county employees, department heads, using agencies, evaluation committee members or elected officials with questions or any other concerns about the solicitation. Questions, clarifications and concerns shall be submitted to the Purchasing Department in writing. Failure to comply with these guidelines may disqualify the Proposer’s response.

Sincerely,

Lee Barrier
Purchasing Agent

LB/ch
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I. About this Document
This document is a Request for Proposal. It differs from a Request for Bid or Quotation in that the county is seeking a solution, as described on the cover page and in the following Background Information section, not a bid or quotation meeting firm specifications for the lowest price. As such, the lowest price proposed will not guarantee an award recommendation. As defined in Charter Resolution No. 68, Competitive Sealed Proposals will be evaluated based upon criteria formulated around the most important features of the product(s) and/or service(s), of which quality, testing, references, service, availability or capability, may be overriding factors, and price may not be determinative in the issuance of a contract or award. The proposal evaluation criteria should be viewed as standards that measure how well a vendor’s approach meets the desired requirements and needs of the county. Criteria that will be used and considered in evaluation for award are set forth in this document. The county will thoroughly review all proposals received. The county will also utilize its best judgment when determining whether to schedule a pre-proposal conference, before proposals are accepted, or meetings with vendors, after receipt of all proposals. A Purchase Order/Contract will be awarded to a qualified vendor submitting the best proposal. Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service(s) and/or product(s) which best meets its required needs, quality levels and budget constraints.

The nature of this work is for a public entity and will require the expenditure of public funds and/or use of public facilities, therefore the successful proposer will understand that portions (potentially all) of their proposal may become public record at any time after receipt of proposals. Proposal responses, purchase orders and final contracts are subject to public disclosure after award. All confidential or proprietary information should be clearly denoted in proposal responses and responders should understand this information will be considered prior to release, however no guarantee is made that information will be withheld from public view.

II. Background
Sedgwick County, located in south-central Kansas, is one of the most populous of Kansas’ 105 counties with a population estimated at more than 514,000 persons. It is the sixteenth largest in area, with 1,008 square miles, and reportedly has the second highest per capita wealth among Kansas’ counties. Organizationally, the county is a Commission/Manager entity, employs nearly 2,500 persons, and hosts or provides a full range of municipal services, e.g. – public safety, public works, criminal justice, recreation, entertainment, cultural, human/social, and education.

In 2016, Kansas passed the Juvenile Justice Reform Bill, a Bill intended to improve the way in which the state works with and assists the youth served by the juvenile justice system. As part of this reform, the Evidence-Based Programs Fund was developed to provide for reinvestment in community programs and practices. Research that led to the creation of the Bill found that communities lacked evidence-based programs, that services were costly and that, often, lengthy waitlists existed.

In keeping with one of the goals of the initial workgroup, to “improve outcomes for youth, families, and communities in Kansas,” this document outlines how agencies or organizations may propose to receive funds from the Evidence-based Programs Fund through the Kansas Department of Corrections (KDOC) in order to provide support for juvenile offenders and their families.

Preference for funding is given to evidence-based model programs or programs demonstrating a strong research basis showing positive effects reducing participant’s risk for future juvenile delinquency. To be considered an evidence-based model program, programs must meet the rigorous research standards as defined by Blueprints for Violence Prevention (refer to http://www.blueprintsprograms.com/programs).

Programs other than Blueprint model programs may be considered evidence-based if they meet or exceed the level of research the Blueprint model program uses in their determination (see for Blueprint research requirements). Evidence-based practices (such as Motivational Interviewing, Cognitive Social Learning, etc.) are also given consideration.
All programs and services funded through Kansas Department of Corrections funds are expected to target the risk factors and include measurable goals and outcomes towards this purpose. All expenditures must be used to develop and implement evidence-based community programs and practices for juvenile offenders, juveniles experiencing mental health crisis and their families by community supervision offices including, but not limited to, juvenile intake and assessment, court services, community corrections and juvenile crisis intervention centers.

Programs should be offered by experienced qualified organizations or individuals and provide services that are designed to serve juvenile justice system-involved youth and preclude further involvement in the system.

Organizations may have an opportunity to give presentations to clarify proposed services if requested by the grant review committee.

III. Project Objectives

Sedgwick County, Kansas (hereinafter referred to as “county”) is seeking a firm or firms to provide evidence-based practice for the following services to youth and families in Sedgwick County:

- Mentoring Services
- Family Support Services
- Empowering Youth Voices
- Employment Services

The county requires the most thorough and professional services available. The following requirements are listed to assist proposers in understanding the objectives and in submitting a thorough response. All proposals must speak to the ability to meet the following requirements. Please note a copy of an annual audit or financial statement (if no audit is available) must be included with proposal. If it is your belief a mandatory requirement does not apply to your agency, this must be noted on the attached check-off sheet. Any proposals that do not satisfactorily meet the mandatory requirements will not be considered for funding. The successful proposer shall:

1. Acquire program services meeting the parameters, conditions, and mandatory requirements presented in the document.
2. Establish contract pricing with the vendor that has the best proven “track-record” in performance, service, and customer satisfaction.
3. Acquire program services with the most advantageous overall cost to the county.
4. Agree to abide by the terms and conditions of any Federal/State/County contract provisions and guidelines.
5. Have the capability of entering into a written agreement with the county, setting forth the specific terms and conditions with which the proposer must comply.
6. Provide the agency's most recent annual audit, including any single Audit Act Reports that are required of the agency (OMB A-133 or Title 2 Part 200 Uniform Guidance); or financial statement prepared by a professional accountant or accounting firm if no audit is available.
7. Assure the county that grant funds will not be used to supplant existing resources, including earned income. Grant funding can be used to expand an existing program or to create a new program but may not be used in place of current funding. Provider may not charge participants for services, and program revenue may not be generated as a result of this grant-funded activity.
8. Ensure that quarterly status reports and information is provided documenting, service delivery location(s), progress toward meeting goals or risk loss of remaining funds.
9. Identify direct, measurable participant outcomes and methods of measurement (see outcomes under Proposal Content Section below).
10. Appropriately fill out the Proposal Response Form, following the directions and ensuring the narrative [which includes the statement of problem and community need, proposed service location(s), use of evidence-based practice(s) (EBP), the management plan and outcomes] is no longer than ten pages with at least one inch margins and font no smaller than 12 pt. The Proposal Response Form should provide complete information on the program. Unrequested information, such as brochures, newspaper articles and videotapes, will not be reviewed or considered as part of the proposal.

11. Evidence-Based Program Funding is available for any community organization that applies and meets all of the requirements set forth in this RFP. During this RFP, Sedgwick County would like to encourage organizations that could provide services to address Juvenile Offenders, Juveniles experiencing mental health related crisis, and their families to consider applying for the Evidence Based Program funding.

IV. Submittals
Carefully review this Request for Proposal. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate with an electronic response, the RFP number must be entered in the subject line and email the entire document with supplementary materials to:

    Purchasing@sedgwick.gov

Should you elect to participate with a physical response, the response must be sealed and marked on the lower left-hand corner with the firm name and address, bid number, and bid due date. Submit one (1) original AND one (1) electronic copy (.PDF/Word supplied on a flash drive) of the entire document with any supplementary materials to:

    Lee Barrier
    Sedgwick County Purchasing Department
    100 N. Broadway, Suite 610
    Wichita, KS 67202

SUBMITTALS are due NO LATER THAN 1:45 pm CDT, TUESDAY, August 6, 2024. If there is any difficulty submitting a response electronically, please contact the Purchasing Technicians at purchasing@sedgwick.gov for assistance. Late or incomplete responses will not be accepted and will not receive consideration for final award. If you choose to send a hard copy of your proposal, Sedgwick County will not accept submissions that arrive late due to the fault of the U.S. Postal Service, United Parcel Service, DHL, FedEx, or any other delivery/courier service.

V. Scope of Work
All proposals must speak to the agency's ability to meet the following desired criteria. Responses must reflect in detail the degree to which they can be provided (address both in the narrative and on the check-off sheet). The ability to provide these components will factor heavily in determining award(s). Applicant agencies should:

A. Provide demonstration of knowledge and experience in providing a community-based Evidence based program practices to handle the needs of Sedgwick County juvenile justice system-involved youth and their families. The selected programs should demonstrate ability to identify and sustain an adequate referral base capable of referring youth in the target population.

B. Provide culturally proficient services, which may include: multilingual services; multilingual staff; culturally sensitive services including racial and ethnic disparity, gender and trauma informed services; cross-cultural capacity; translation services; multi-cultural services or capacity, etc. Programs must be prepared to observe and respond to cultural barriers.

C. Understand the program must utilize a risk assessment process and be consistent with evidence based practices (see Background and Objectives above) and the targeted population should include juvenile offenders, juveniles experiencing a mental health crisis, and their families. Program description must include procedures for differentially responding to risk levels and planned dosage for interventions.
D. As part of creating outcomes, the Contractor must also track client’s demographic data, recidivism, housing conditions, education status, and employment status.

E. Provide quality control mechanisms for data provision, fidelity of assessment practices and evidence based practices, and outcomes. Quality control and fidelity are key in providing good services.

F. Demonstrate past or present collaborative efforts.

VI. Sedgwick County’s Responsibilities

- Provide information, as legally allowed, in possession of the county, which relates to the county’s requirements or which is relevant to this project.
- Designate a person to act as the County Contract Manager with respect to the work to be performed under this contract.
- County reserves the right to make inspections at various points of the project. Contractor agrees to openly participate in said inspections and provide information to the county on the progress, expected completion date and any unforeseen or unexpected complications in the project.

VII. Proposal Terms

A. Questions and Contact Information

Any questions regarding this document must be submitted via email to Lee Barrier at Lee.Barrier@sedgwick.gov by 5:00 pm CDT, July 22, 2024. Any questions of a substantive nature will be answered in written form as an addendum and posted on the purchasing website at https://www.sedgwickcounty.org/finance/purchasing/requests-for-bid-and-proposal/ under the Documents column associated with this RFP number by 5:00 pm CDT, July 26, 2024. Firms are responsible for checking the website and acknowledging any addenda on their proposal response form.

B. Minimum Firm Qualifications

This section lists the criteria to be considered in evaluating the ability of firms interested in providing the service(s) and/or product(s) specified in this Request for Proposal. Firms must meet or exceed these qualifications to be considered for award. Any exceptions to the requirements listed should be clearly detailed in proposer’s response. Proposers shall:

1. Have a minimum of two (2) years’ experience in providing services similar to those specified in this RFP.
2. Have an understanding of industry standards and best practices.
3. Have experience in managing projects of comparable size and complexity to that being proposed.
4. Have knowledge of and comply with all currently applicable, and as they become enacted during the contract term, federal, state and local laws, statutes, ordinances, rules and regulations. All laws of the State of Kansas, whether substantive or procedural, shall apply to the contract, and all statutory, charter, and ordinance provisions that are applicable to public contracts in the county shall be followed with respect to the contract.
5. Municipal and county government experience is desired, however, the county will make the final determination based on responses received and the evaluation process.
6. Have the capacity to acquire all bonds, escrows or insurances as outlined in the terms of this RFP.
7. Provide project supervision (as required) and quality control procedures.
8. Have appropriate material, equipment and labor to perform specified services.
9. Park only in designated areas and display parking permit (if provided).
10. Wear company uniform or ID badge for identification purposes.
C. **Evaluation Criteria**

The selection process will be based on the responses to this RFP. County staff will judge each response as determined by the scoring criteria below. Purchasing staff are not a part of the evaluation committee.

<table>
<thead>
<tr>
<th>Component</th>
<th>Points</th>
</tr>
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<tbody>
<tr>
<td>a. Overall Project Plan/Agency Capability to implement effective program</td>
<td>20</td>
</tr>
<tr>
<td>b. Evidence Based Practice(s) model and applicability to target population</td>
<td>20</td>
</tr>
<tr>
<td>c. Ability to apply &amp; comply with Risk-Need-Responsivity criteria</td>
<td>20</td>
</tr>
<tr>
<td>d. Ability to conduct assessment and address youth needs</td>
<td>15</td>
</tr>
<tr>
<td>e. Relevant Measurable Outcome(s)</td>
<td>15</td>
</tr>
<tr>
<td>f. Data Collection Methods and reporting requirements</td>
<td>10</td>
</tr>
</tbody>
</table>

| Total Points | 100 |

Assume the following cost proposals *(examples only)*

A. $50,000.00  
B. $38,000.00  
C. $49,000.00  

Company B with a total price of $38,000.00 is the low offer. Take the low offer and divide each of the other offers into the low offer to calculate a percentage. This percentage is then multiplied by the number of points available for the cost. In this case, 10 points are allocated to cost.

A. $38,000.00 divided by $50,000.00 =.76  
B. $38,000.00 divided by $38,000.00 =1.00  
C. $38,000.00 divided by $49,000.00 =.77  

A. .76*10  7.6 points  
B. 1.00*10  10 points  
C. .77*10  7.7 points  

Any final negotiations for services, terms and conditions will be based, in part, on the firm’s method of providing the service and the fee schedule achieved through discussions and agreement with the county’s review committee. The county is under no obligation to accept the lowest priced proposal and reserves the right to further negotiate services and costs that are proposed. The county also reserves the sole right to recommend for award the proposal and plan that it deems to be in its best interest.

The county reserves the right to reject all proposals. All proposals, including supporting documentation shall become the property of Sedgwick County. All costs incurred in the preparation of this proposal shall be the responsibility of the firm making the proposals. Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service which best meets its required needs, quality levels and budget constraints.

D. **Request for Proposal Timeline**

The following dates are provided for information purposes and are subject to change without notice. Contact the Purchasing Department at (316) 660-7255 to confirm any and all dates.

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distribution of Request for Proposal to interested parties</td>
<td>July 8, 2024</td>
</tr>
<tr>
<td>Questions and clarifications submitted via email by 5:00 pm CDT</td>
<td>July 22, 2024</td>
</tr>
<tr>
<td>Addendum Issued by 5:00 pm CDT</td>
<td>July 26, 2024</td>
</tr>
<tr>
<td>Proposal due before 1:45 pm CDT</td>
<td>August 6, 2024</td>
</tr>
<tr>
<td>Evaluation Period</td>
<td>August 6, 2024 - August 19, 2024</td>
</tr>
<tr>
<td>Board of Bids and Contracts Recommendation</td>
<td>August 22, 2024</td>
</tr>
<tr>
<td>Board of County Commission Award</td>
<td>September 4, 2024</td>
</tr>
</tbody>
</table>
E. **Contract Period and Payment Terms**
A contractual period will begin following Board of County Commissioners (BoCC) approval of the successful firm(s) and continue for a period ending on June 30th, 2025.

County may cancel its obligations herein upon thirty-day (30) prior written notice to the other party. It is understood that funding may cease or be reduced at any time, and in the event that adequate funds are not available to meet the obligations hereunder, either party reserves the right to terminate this agreement upon thirty (30) days prior written notice to the other. Payment will be remitted following receipt of monthly detailed invoice.

Payment and Invoice Provisions
[https://www.sedgwickcounty.org/media/55477/payment-and-invoice-provisions.pdf](https://www.sedgwickcounty.org/media/55477/payment-and-invoice-provisions.pdf)

F. **Insurance Requirements**
Liability insurance coverage indicated below must be considered as primary and not as excess insurance. If required, contractor’s professional liability/errors and omissions insurance shall (i) have a policy retroactive date prior to the date any professional services are provided for this project, and (ii) be maintained for a minimum of three (3) years past completion of the project. Contractor shall furnish a certificate evidencing such coverage, with county listed as an additional insured including both ongoing and completed operations, except for professional liability, workers’ compensation and employer’s liability. **Certificate shall be provided prior to award of contract.** Certificate shall remain in force during the duration of the project/services and will not be canceled, reduced, modified, limited, or restricted until thirty (30) days after county receives written notice of such change. All insurance must be with an insurance company with a minimum BEST rating of A-VIII and licensed to do business in the State of Kansas (must be acknowledged on the bid/proposal response form).

**NOTE:** If any insurance is subject to a deductible or self-insured retention, written disclosure must be included in your proposal response and also be noted on the certificate of insurance.

It is the responsibility of contractor to require that any and all approved subcontractors meet the minimum insurance requirements.

<table>
<thead>
<tr>
<th>Workers’ Compensation:</th>
<th></th>
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<tbody>
<tr>
<td>Applicable coverage per State Statutes</td>
<td></td>
</tr>
<tr>
<td><strong>Employer’s Liability Insurance:</strong></td>
<td><strong>$500,000.00</strong></td>
</tr>
<tr>
<td><strong>Commercial General Liability Insurance (on form CG 00 01 04 13 or its equivalent):</strong></td>
<td></td>
</tr>
<tr>
<td>Each Occurrence</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
<tr>
<td>General Aggregate, per project</td>
<td><strong>$2,000,000.00</strong></td>
</tr>
<tr>
<td>Personal Injury</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
<tr>
<td>Products and Completed Operations Aggregate</td>
<td><strong>$2,000,000.00</strong></td>
</tr>
<tr>
<td><strong>Automobile Liability:</strong></td>
<td></td>
</tr>
<tr>
<td>Combined single limit</td>
<td><strong>$500,000.00</strong></td>
</tr>
<tr>
<td><strong>Umbrella Liability:</strong></td>
<td></td>
</tr>
<tr>
<td>Following form for both the general liability and automobile</td>
<td></td>
</tr>
<tr>
<td>**Required / **Not Required</td>
<td></td>
</tr>
<tr>
<td>Each Claim</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
<tr>
<td>Aggregate</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional Liability/ Errors &amp; Omissions Insurance:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>**Required / **Not Required</td>
<td></td>
</tr>
<tr>
<td>Each Claim</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
<tr>
<td>Aggregate</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Pollution Liability Insurance:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>**Required / **Not Required</td>
<td></td>
</tr>
<tr>
<td>Each Claim</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
<tr>
<td>Aggregate</td>
<td><strong>$1,000,000.00</strong></td>
</tr>
</tbody>
</table>
Special Risks or Circumstances:

Entity reserves the right to modify, by written contract, these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

IF CONTRACTOR IS PROVIDING CONSTRUCTION SERVICES:

In addition to the above coverages, contractor shall also provide the following:

| Builder’s Risk Insurance: | In the amount of the initial Contract Sum, plus the value of subsequent modifications and cost of materials supplied and installed by others, comprising the total value for the entire Project on a replacement cost basis without optional deductibles. Entity, contractor, and all Subcontractors shall be included as named insured’s. |

G. **Indemnification**

To the fullest extent of the law, the provider, its subcontractor, agents, servants, officers or employees shall indemnify and hold harmless Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, from any and all claims brought by any person or entity whatsoever, arising from any act, error, or omission of the provider during the provider’s performance of the agreement or any other agreements of the provider entered into by reason thereof. The provider shall indemnify and defend Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, with respect to any claim arising, or alleged to have arisen from negligence, and/or willful, wanton or reckless acts or omissions of the provider, its subcontractor, agents, servants, officers, or employees and any and all losses or liabilities resulting from any such claims, including, but not limited to, damage awards, costs and reasonable attorney’s fees. This indemnification shall not be affected by any other portions of the agreement relating to insurance requirements. The provider agrees that it will procure and keep in force at all times at its own expense insurance in accordance with these specifications.

H. **Confidential Matters and Data Ownership**

The successful proposer agrees all data, records and information, which the proposer, its agents and employees, which is the subject of this proposal, obtain access, remains at all times exclusively the property of Sedgwick County. The successful proposer agrees all such data, records, plans and information constitutes at all times proprietary information of Sedgwick County. The successful proposer agrees that it will not disclose, provide, or make available any of such proprietary information in any form to any person or entity. In addition, the successful proposer agrees it will not use any names or addresses contained in such data, records, plans and information for the purpose of selling or offering for sale any property or service to any person or entity who resides at any address in such data. In addition, the successful proposer agrees it will not sell, give or otherwise make available to any person or entity any names or addresses contained in or derived from such data, records and information for the purpose of allowing such person to sell or offer for sale any property or service to any person or entity named in such data. Successful proposer agrees it will take all reasonable steps and the same protective precautions to protect Sedgwick County's proprietary information from disclosure to third parties as with successful proposer's own proprietary and confidential information. Proposer agrees that all data, regardless of form that is generated as a result of this Request for Proposal is the property of Sedgwick County.
I. Proposal Conditions

https://www.sedgwickcounty.org/media/31338/proposal-terms-conditions.pdf

General Contract Provisions
https://www.sedgwickcounty.org/media/31337/general-contractual-provisions.pdf

Mandatory Contract Provisions
https://www.sedgwickcounty.org/media/31336/mandatory-contractual-provisions.pdf

Independent Contractor
https://www.sedgwickcounty.org/media/54780/independent-contractor-addendum.pdf

Sample Contract
https://www.sedgwickcounty.org/media/39236/sample-contract.pdf

Federal Certifications Addendum Sedgwick County

Suspension and Debarment
https://www.sedgwickcounty.org/finance/purchasing/suspension-and-debarment/

VIII. Required Response Content

The information provided in the proposal will be carefully reviewed and used in making a determination; providing specific information on how your organization meets the criteria will assist the reviewers in making a better informed decision. Proposal pages should be numbered, single sided and secured with a single clip or rubber band; proposals should not include staples or binding (this includes audits). Narrative pages must have a margin of at least one inch and font of no smaller than 12 pt. Please be concise and reference sources as required.

PROPOSAL RESPONSE FORM should be the first page of the proposal so the firm name and contact are clearly visible.

1) Cost Information (Un-allowed costs include construction and fund raising).
   a) State the total amount requested to provide the described services in meeting ALL Mandatory Requirements, Specific Program Components and Conditions listed in this Request for Proposal.

A. Management Plan:

   1. Why is your program needed? Describe in detail the specific service your program will provide, including individual characteristics of population to be served. Where can the information about need be found? Be very specific as to program details of the service you provide.

   2. What steps does your organization plan to take to make sure the program offered is of good quality? Answering this question will require detailing staff assignments and experience, internal evaluation, relationships with sources of evidence-based programs, etc. If you have previously offered evidence-based programs, you may want to offer a letter of reference from that organization. Please include a time-line and staffing patterns. If the provider anticipates a gearing-up effort, indicate when the program will be operating at full capacity. Job descriptions of relevant staff should be attached as Appendix b.

   3. What reviews does the provider intend to conduct internally related to achieving the amount of services provided in accordance with the funding? Will the provider periodically assess their ability to meet target numbers? Funding reductions may occur if programs indicate they will be unable to reach their target goal of numbers served. Please explain how funding was determined based on the target number to be served.
B. Outcomes:
Describe program/service goals as related to the stated problem and need. Define measurable outcomes of the proposed program/service and describe how the outcomes will be measured (pre-and post-test, survey, etc.). Quantitative data is preferred over qualitative data. Please note, developing measurable outcomes should begin with identifying a goal (what you expect the program will accomplish) and then formulating how to measure your success at achieving this goal. Outcomes are changes in attitude, behavior, skills or knowledge; program inputs (number served, hours of service provided, or brochures printed, etc.) are not outcomes.

1. All programs must include the following Outcomes in addition to Outcomes set by the provider.
   A. 80% of youth will successfully complete the program.
   B. 100% of youth will be living at home at completion of program.
   C. 90% of youth will be currently attending school or working at completion of the program.
   D. 80% of youth who successfully complete the program will show no new arrests after six (6) months of completing the program, as measured by Sedgwick County Department of Corrections. Arrest information will be requested from Sedgwick County Department of Corrections, which will include JIAC record checks.
   E. 70% of youth who successfully complete the program will show no new arrests after 12 months of completing the program, as measured by Sedgwick County Department of Corrections. Arrest information will be requested from Sedgwick County Department of Corrections which will include JIAC record checks.

A good outcome measurement system should not rely completely on self-report, but should, ideally, contain information from several sources including official records (i.e. school, Juvenile Intake and Assessment Center, etc.). Programs should include an outcome such as contact with the Juvenile Intake and Assessment Center (JIAC). An outcome template has been provided and should be completed and attached as Appendix F.

C. Appendices:
1. Appendix A: Budget Template (provided) with Budget Narrative (Note: if the program has other funding sources, these sources should be included in the budget. The budget should clearly identify the totality of the program funding and what piece the requested Sedgwick County funds would provide. If the program was funded through Kansas Department of Corrections funds last year, the budget should distinctly identify what any additional funding requested would provide, i.e. increase number served, expand to new site, cost of living increase, etc.).
2. Appendix B: Job descriptions and resumes of key staff
3. Appendix C: Letters of support (should not be older than three (3) months)
4. Appendix D: Copy of Independent Audit
5. Appendix E: Copy of state certificate of tax clearance (may be obtained online)
   http://www.ksrevenue.org/taxclearance.html, and copies of any licenses, permits, and certificates necessary to provide services in the State of Kansas, if applicable.
6. Appendix F: Outcomes Template (provided)
All proposal submissions shall include the following Miscellaneous Agency information:

1. Firm profile: the name of the firm, address, telephone number(s), contact person, year the firm was established, and the names of the principals of the firm.
2. The firm’s relevant experience, notably experience working with government agencies.
3. At minimum, three (3) professional references, besides Sedgwick County, with email addresses, telephone numbers, and contact persons where work has been completed within the last three (3) years.
4. A disclosure of any personal or financial interest in any properties in the project area, or any real or potential conflicts of interest with members of the Sedgwick County Board of County Commissioners or county staff.
5. A description of the type of assistance that will be sought from county staff, including assistance required from the county to lessen the costs of this project.
6. Proof of insurance meeting minimum insurance requirements as designated herein.
7. Those responses that do not include all required forms/items may be deemed non-responsive.
IX. **Response Form**

**REQUEST FOR PROPOSAL**
**RFP #24-0051**
**JUVENILE SERVICES**

The undersigned, on behalf of the proposer, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a proposal on the same project; (2) it is in all respects fair and without collusion or fraud; (3) the person whose signature appears below is legally empowered to bind the firm in whose name the proposer is entered; (4) they have read the complete Request for Proposal and understands all provisions; (5) if accepted by the county, this proposal is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted proposal will be their responsibility.

**NAME**
_______________________________________________________________________________________________

**DBA/SAME**
___________________________________________________________________________________________

**CONTACT**
__________________________________________________________________________________________

**ADDRESS**
__________________________________________________________________________________________

**CITY/STATE**
____________________________

**ZIP**
__________________________

**PHONE**
__________________________

**FAX**
__________________________

**HOURS**
__________________________

**STATE OF INCORPORATION or ORGANIZATION**
__________________________________________________________________________________________

**COMPANY WEBSITE ADDRESS**
____________________________

**EMAIL**
________________________________

**NUMBER OF LOCATIONS**
__________________________

**NUMBER OF PERSONS EMPLOYED**
__________________________

**TYPE OF ORGANIZATION:**
Public Corporation ________   Private Corporation ________    Sole Proprietorship ________
Partnership ________    Other (Describe): ____________________________________________________________________

**BUSINESS MODEL:**
Small Business ________     Manufacturer ________     Distributor ________     Retail ________
Dealer ________    Other (Describe): ____________________________________________________________________

**Not a Minority-Owned Business:** ______

**Minority-Owned Business:**
(Specify Below)

___ African American (05)    ___ Asian Pacific (10)    ___ Subcontinent Asian (15)    ___ Hispanic (20)
___ Native American (25)    ___ Other (30) - Please specify

**Not a Woman-Owned Business:** ______

**Woman-Owned Business:**
(Specify Below)

___ Not Minority -Woman Owned (50)    ___ African American-Woman Owned (55)    ___ Asian Pacific-Woman Owned (60)
___ Subcontinent Asian-Woman Owned (65)    ___ Hispanic Woman Owned (70)    ___ Native American-Woman Owned (75)
___ Other – Woman Owned (80) – Please specify

**ARE YOU REGISTERED TO DO BUSINESS IN THE STATE OF KS:**
____ Yes ______ No

**UEI (UNIQUE ENTITY IDENTIFIER) NO.**
__________________________________________________________________________________________

**INSURANCE REGISTERED IN THE STATE OF KS WITH MINIMUM BEST RATING OF A-VIII:**
____ Yes ______ No

**ACKNOWLEDGE RECEIPT OF ADDENDA:** All addendum(s) are posted to our RFB/RFP web page and it is the vendor’s responsibility to check and confirm all addendum(s) related to this document by going to www.sedgwickcounty.org/finance/purchasing.asp.

**NO.**        DATED ______________;        **NO.**        DATED ______________;        **NO.**        DATED ______________

In submitting a proposal, vendor acknowledges all requirements, terms, conditions, and sections of this document. Proposal submission format should be in order in which sections are listed throughout the document. All minimum and general requirements should be specifically addressed and detailed in proposer’s response. **Exceptions to any part of this document should be clearly delineated and detailed.**

**Signature**
__________________________________________________________________________________________

**Title**
__________________________________________________________________________________________

**Print Name**
__________________________________________________________________________________________

**Dated**
__________________________________________________________________________________________

---

**RFP #24-0051**
**Sedgwick County… Working for you**
Consistent with the guidance provided in Section 1 of this Request for Proposal, Sedgwick County is subject to the Kansas Open Records Act (K.S.A. 45-215 et seq.). As such, portions, and potentially all, of your proposal may become accessible to the public through records requests even if it is not awarded the contract.

If you are claiming some of the submitted documentation should not be disclosed, indicate the associated information and the basis for such claims of privilege in the spaces below. In the event records requests are submitted for information identified as privileged, proprietary or confidential, Sedgwick County may attempt to coordinate a response and would expect for you to be available to defend your claims in court. Failure to provide information in the spaces below shall constitute a waiver of any claims of violation of privileged, proprietary or confidential information resulting from the production of these records, regardless of other language or claims within your Response.

<table>
<thead>
<tr>
<th>PRIVILEGE LOG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Page and/or Section of Information Not Subject to Disclosure</td>
</tr>
<tr>
<td>--------------</td>
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<tr>
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<tr>
<td></td>
</tr>
</tbody>
</table>

RFP #24-0051
Sedgwick County... Working for you
# APPENDIX A
## BUDGET SHEET

### Evidence Based Program Annual Budget

<table>
<thead>
<tr>
<th>Name of Organization:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Program:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Evidence Based Program Annual Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/1/24 – 6/30/25</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ANNUAL COUNTY CONTRACT BUDGET</th>
<th>ANNUAL OTHER CONTRACT BUDGET</th>
<th>TOTAL PROGRAM BUDGET FY 24-25</th>
</tr>
</thead>
<tbody>
<tr>
<td>REVENUE SOURCES</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EXPENSES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personnel Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facility Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Supplies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training / Travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Expenses</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CERTIFICATION: I certify that to the best of my knowledge and belief, this report is true in all respects and that all disbursements have been made for the purpose and conditions of the grant agreement.

Preparer's Name

Signature of Authorized Official
APPENDIX F
OUTCOMES TEMPLATE
Sedgwick County Evidence-Based Practices

QUARTERLY OUTCOMES REPORT

_________ Quarter_________ Year

<table>
<thead>
<tr>
<th>Organization:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Name:</td>
<td></td>
</tr>
</tbody>
</table>

**Contact Information**

<table>
<thead>
<tr>
<th>Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td></td>
</tr>
</tbody>
</table>

**Target Population:**

(Include age, race/ethnicity, gender, risk level, dosage plan and expected treatment/program length)

<table>
<thead>
<tr>
<th>Target number to be served annually:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Number served this quarter:</th>
<th></th>
</tr>
</thead>
</table>

| Total number served year to date:  |                                           |
### GOAL 1:

#### OUTCOME 1:

**MEASUREMENT TOOL:**

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year to Date</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ACTUAL RESULTS**

**RESULTS DISCUSSION:**

### GOAL 2:

#### OUTCOME 2:

**MEASUREMENT TOOL:**

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year to Date</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ACTUAL RESULTS**

**RESULTS DISCUSSION:**

### GOAL 3:

#### OUTCOME 3:

**MEASUREMENT TOOL:**

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th Quarter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year to Date</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ACTUAL RESULTS**

**RESULTS DISCUSSION:**
**GOAL 4:**

**OUTCOME 4:**

**MEASUREMENT TOOL:**

<table>
<thead>
<tr>
<th>1st Quarter</th>
<th>2nd Quarter</th>
<th>3rd Quarter</th>
<th>4th Quarter</th>
<th>Year to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number:</td>
<td>Number:</td>
<td>Number:</td>
<td>Number:</td>
<td>Number:</td>
</tr>
<tr>
<td>Percentage:</td>
<td>Percentage:</td>
<td>Percentage:</td>
<td>Percentage:</td>
<td>Percentage:</td>
</tr>
</tbody>
</table>

**OUTCOME REPORT SUMMARY:**
Please summarize your outcomes and results for the quarter.

**FIDELITY ACTIVITIES:**
If you are operating an evidence-based program or using an evidence-based practice, please describe those activities, trainings, etc. you, your team, or your agency have participated in this quarter to ensure fidelity to the program model.

**EXAMPLE:**

**GOAL 4: Increased knowledge of harm caused by alcohol and substance abuse**

**OUTCOME 4: 90% of youth will demonstrate an increase in knowledge regarding the harm caused by alcohol and drug abuse, as measured by pre- and post-tests.**

**MEASUREMENT TOOL:** Pre- and post-tests administered at the first and last sessions of the program, respectively

<table>
<thead>
<tr>
<th>1st Quarter</th>
<th>2nd Quarter</th>
<th>3rd Quarter</th>
<th>4th Quarter</th>
<th>Year to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number: 45/50</td>
<td>Percentage: 90%</td>
<td>Number: 45/50</td>
<td>Percentage: 90%</td>
<td>Number: 45/50</td>
</tr>
</tbody>
</table>

**RESULTS EXPLANATION:** While there were, fifty-five children served in the program this quarter, 5 of those students did not complete either the pre- or post-test, precluding them from being counted in the results. Of the remaining 50 students, 45 of those demonstrated an increase in knowledge.

**QUARTER SUMMARY:**
Please include any pertinent information regarding any program activities and/or developments that Sedgwick County should know, including program accomplishments, challenges, changes, etc.