



# COUNTY OF LOS ANGELES PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242  
(562) 940-2728



**ADOLFO GONZALES**  
Chief Probation Officer

October 17, 2022

## **REVISED ADDENDUM NUMBER ONE - REQUEST FOR PROPOSALS (RFP) #6402203 TO PROVIDE COMPREHENSIVE SERVICES TO THE ASSEMBLY BILL (AB) 109 POPULATION**

This Revised Addendum Number One is made to the Request for Proposals (RFP) for Comprehensive Services to the Assembly Bill (AB) 109 Population (RFP # 6402203), which was released on September 8, 2022. For ease of reading, stricken text indicates deleted language and bold and underlined text indicates added language to the RFP.

1. RFP, Section 3, Page 2, Subsections 3.1.1 and 3.1.2, page 3, are amended in their entirety to read as follows:

~~3.1.1 The Proposer must attend the Virtual Mandatory Proposers' Conference scheduled for **Monday, September 26, 2022, at 10:00 a.m., PT.**~~

3.1.2 The Proposer must submit a proposal by ~~Thursday, October 20, 2022, at 12:00 p.m., PT.~~ **Thursday, November 3, 2022, at 12:00 p.m., PT.**

2. RFP, Section 7.3, Subsection 7.3.1, page 24 is amended in its entirety to read as follows:

7.3.1 The timetable for this RFP is as follows:

- Release of RFP..... **September 8, 2022**
- Request for a Solicitation Requirement Review  
Due.....**September 19, 2022, 12:00 p.m., PT**
- Written Questions Due **September 19, 2022, 12:00 p.m., PT**

- R.S.V.P. for the Virtual Mandatory Proposers' Conference.....~~September 19, 2022, 12:00 p.m., PT~~  
October 5, 2022, 12:00 p.m., PT
- Virtual Mandatory Proposers' Conference.....~~September 26, 2022, 10:00 a.m., PT~~ October 12, 2022, 10:00 a.m., PT
- **Proposals due by** .....~~October 20, 2022, 12:00 p.m., PT~~  
November 3, 2022, 12:00 p.m., PT

3. RFP, Section 7.7, page 26, Subsections 7.7.1 and 7.7.2, pages 26-27, are amended in their entirety to read as follows:

**7.7 Virtual Mandatory Proposers' Conference**

7.7.1 A Virtual Mandatory Proposers' Conference will be held to discuss the RFP on ~~Monday, September 26, 2022, at 10:00 a.m., PT.~~ Wednesday, October 12, 2022, at 10:00 a.m., PT. The County staff will respond to questions from potential Proposers. All ~~potential Proposers must attend this conference or their proposals will be rejected as non-responsive (disqualified) without review and eliminated from further consideration.~~

7.7.2 Prospective Proposers who plan to attend shall R.S.V.P. to the contract analyst identified in 7.5.1 on or before ~~September 19, 2022, 12:00 p.m., PT.~~ October 5, 2022, 12:00 p.m., PT. The Proposers must provide the name, title, e-mail address, and phone number of the representatives who will be attending the Virtual ~~Mandatory~~ Proposers' Conference. The County will be using Microsoft Teams live steaming video conferencing platform for this event. Prospective Proposers who R.S.V.P. for the conference will receive an emailed invitation with the Microsoft Teams meeting URL.

4. RFP, Section 8.1, Subsection 8.1.1, pages 35-36, is amended in its entirety to read as follows:

8.1.1 The County reserves the sole right to judge the contents of the proposals submitted pursuant to this RFP and to review, evaluate and select the successful proposal(s). The selection process will begin with receipt of the proposal on ~~October 20, 2022, 12:00 p.m., PT.~~ November 3, 2022, 12:00 p.m., PT.

Evaluation of the proposals will be made by an Evaluation Committee selected by the Department. The Committee will evaluate the proposals and will use the evaluation approach

described herein to select a prospective Contractor. All proposals will be evaluated based on the criteria listed below. All proposals will be scored and ranked in numerical sequence from high to low. The County may also, at its option, invite the Proposers being evaluated to make a verbal presentation or conduct site visits, if appropriate. The Evaluation Committee may utilize the services of appropriate experts to assist in this evaluation.

After a prospective Contractor has been selected, the County and the prospective Contractor(s) will negotiate a Contract for submission to the Board of Supervisors for its consideration and possible approval. If a satisfactory Contract cannot be negotiated, the County may, at its sole discretion, begin the Contract negotiations with the next qualified Proposer who submitted a proposal, as determined by the County.

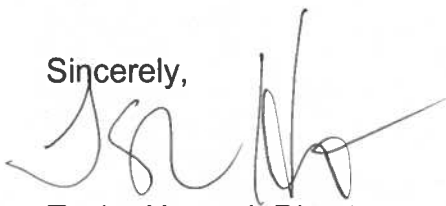
The recommendation to award a Contract will not bind the Board of Supervisors to award a Contract to the prospective Contractor.

The County retains the right to select a proposal other than the proposal receiving the highest number of points if the County determines, in its sole discretion, another proposal is the most overall qualified, cost-effective, responsive, responsible and in the best interest of the County.

5. Appendix D, Required Forms Exhibit 1, Proposer's Organization Questionnaire/Affidavit, is deleted and replaced in its entirety as attached.
6. Appendix D, Required Forms Exhibit 11, Pricing Sheet, is deleted and replaced in its entirety as attached.

**Proposals are due on Thursday, November 3, 2022, 12:00 p.m., Pacific Time. No late proposals will be accepted.** We look forward to receiving your proposal.

Sincerely,



Tasha Howard, Director  
Contracts & Grants Management Division

**REQUIRED FORMS - EXHIBIT 1**  
**PROPOSER'S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT**

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**Please complete, sign and date this form. The person signing the form must be authorized to sign on behalf of the Proposer and to bind the applicant in a Contract.**

1. Is your firm a corporation or limited liability company (LLC)?  Yes  No

If yes, complete:

Legal Name (found in Articles of Incorporation) \_\_\_\_\_

State \_\_\_\_\_ Year Inc. \_\_\_\_\_

2. If your firm is a limited partnership or a sole proprietorship, state the name of the proprietor or managing partner: \_\_\_\_\_

3. Is your firm doing business under one or more DBA's?  Yes  No

If yes, complete:

<b>Name</b>	<b>County of Registration</b>	<b>Year became DBA</b>
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4. Is your firm wholly/majority owned by, or a subsidiary of another firm?  Yes  No

If yes, complete:

Name of parent firm: \_\_\_\_\_

State of incorporation or registration of parent firm: \_\_\_\_\_

5. Has your firm done business as other names within last five (5) years?  Yes  No

If yes, complete:

Name \_\_\_\_\_ Year of Name Change \_\_\_\_\_

Name \_\_\_\_\_ Year of Name Change \_\_\_\_\_

6. Is your firm involved in any pending acquisition or mergers, including the associated company name?

Yes  No If yes, provide information:

\_\_\_\_\_

\_\_\_\_\_

**REQUIRED FORMS - EXHIBIT 1**  
**PROPOSER'S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT**

The Proposer acknowledges and certifies that firm meets and will comply with the Proposer's Minimum Qualifications as stated in Paragraph 3 of this Request for Proposal, as listed below.

Check the appropriate boxes:

- n/a**      **n/a**    Subparagraph 3.1.1    Intentionally omitted
- Yes**    **No**   Subparagraph 3.1.2    The Proposer must submit a proposal by **Thursday, November 3, 2022, 12:00 p.m., PT.**
- Yes**    **No**   Subparagraph 3.1.3    The Proposer must demonstrate a minimum of three (3) years' experience within the past five (5) years working with high-risk adult probationers and/or parolees.
- Yes**    **No**   Subparagraph 3.1.4    The Proposer must demonstrate a minimum of three (3) years' experience within the past five (5) years administering and/or providing housing and supportive services in a lead capacity in the State of California.
- Yes**    **No**   Subparagraph 3.1.5    The Proposer must demonstrate a minimum of two (2) years' experience within the past three (3) years in administering Federal, State, County or City Contracts.
- Yes**    **No**   Subparagraph 3.1.6    The Proposer must have an administrative business office located within the County of Los Angeles. The address to the administrative business office must be included below.

**The address to the administrative business office located within the County of Los Angeles must be listed here:**

Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Zip Code: \_\_\_\_\_

**REQUIRED FORMS - EXHIBIT 1**  
**PROPOSER'S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT**

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Yes  No Subparagraph 3.1.7

If the Proposer's compliance with a County Contract has been reviewed by the Department of the Auditor-Controller within the last 10 years, the Proposer must not have unresolved questioned costs identified by the Auditor-Controller, in an amount over \$100,000.00, that are confirmed to be disallowed costs by the contracting County department, and remain unpaid for six months or more from the date of disallowance, unless such disallowed costs are the subject of current good faith negotiations to resolve the disallowed costs, in the opinion of the County.

**REQUIRED FORMS - EXHIBIT 11  
PRICING SHEET**

**COMPREHENSIVE SERVICES TO THE AB 109 POPULATION  
FOR COUNTY OF LOS ANGELES PROBATION DEPARTMENT**

The undersigned offers to provide all labor and supplies necessary to provide Comprehensive Services to the Assembly Bill (AB) 109 population as set forth in this RFP #6402203.

Said work shall be done for the period prescribed and in the manner set forth in said specifications, and compensation therefore shall be on a fixed-fee basis as provided upon the hereinafter proposal fixed rates. I agree that if the County Board of Supervisors accepts my proposal, I will commence services immediately following the Contract execution.

I agree to provide the specified services for the County of Los Angeles - Probation Department in accordance with Attachment A (Statement of Work).

**I PROPOSE A FIXED RATE/FEE FOR THE REQUIRED SERVICES IN THE FOLLOWING:**

Systems Navigator	Hourly	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Housing Case Manager	Hourly	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
<b>HOUSING</b>			
Welcome Center Housing	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Transitional Housing	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Transitional Housing with Children	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Sober Living Environment	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Recuperative Care	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Board and Care	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Skilled Nursing	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)
Medically Fragile	Per Day	_____	\$ _____
		(Write out dollar amount in full)	(Figure amount)

**REQUIRED FORMS - EXHIBIT 11  
PRICING SHEET**

Emergency Shelters and Homeless Shelters	Per Day	_____	\$	_____
		(Write out dollar amount in full)		(Figure amount)
Sex Offender Housing	Per Day	_____	\$	_____
		(Write out dollar amount in full)		(Figure amount)
Adult Residential Facilities	Per Day	_____	\$	_____
		(Write out dollar amount in full)		(Figure amount)

<b>PRINT NAME AND TITLE OF PERSON AUTHORIZED TO SUBMIT PROPOSAL:</b>	
<b>SIGNATURE OF PERSON AUTHORIZED TO SUBMIT PROPOSAL:</b>	<b>DATE:</b>