



**REQUEST FOR PROPOSAL (RFP) ANNOUNCEMENT**

**May 17, 2023**

**Communication Access for Clients of Kern  
Regional Center**

**KERN REGIONAL CENTER (KRC)  
FOR FISCAL YEAR 2022-2023**

KRC is a private non-profit agency under contract to the State Department of Developmental Services to provide services to persons with developmental disabilities in Kern, Inyo and Mono Counties. Developmental disabilities include mental retardation, cerebral palsy, autism, epilepsy, and other neurological conditions.

**Consistent with the Lanterman Developmental Disabilities Services Act and the promotion of community-based services for those people with Developmental Disabilities, Kern Regional Center is currently accepting proposals for funding communication access to these individuals. All applications, including those that propose innovative approaches to the resource needed will be considered. Proposals submitted after the indicated timelines and/or are not complete per this RFP will not be considered.**

Hard copies of the RFP can be available for in-person pick up at KRC's main office in Bakersfield, upon request.

There will be an **RFP Orientation** on **May 23, 2023** to provide applicants with an opportunity to ask questions specifically in reference to the RFP and RFP process. *This is voluntary and not required in order to submit a proposal.* To register please submit a request to participate to [ashley.fontes@Kernrc.org](mailto:ashley.fontes@Kernrc.org).

**RECEIPT OF PROPOSAL DEADLINE**

Documentation: Five (5) copies of the application, proposal and all applicable attachments must be received by **June 2, 2023 by 5:00pm** at:

**Kern Regional Center  
Attn: Ashley Fontes Deaf and Hard of Hearing specialist  
3200 N. Sillect Ave.  
Bakersfield, California 93308**

**Proposals received after the above stated date and time will not be considered. Proposals may be submitted in person or via email. If proposals are sent via email, please send the proposal to Ashley Fontes at [Ashley.fontes@kernrc.org](mailto:Ashley.fontes@kernrc.org)**

## **SUBMITTING AND REVIEWING OF THE PROPOSAL**

All proposals must be completed and organized in accordance with Exhibit B, Exhibit C, Exhibit D, Exhibit E, Exhibit F, Exhibit G, and Exhibit H. Proposals that do not follow any of these above-referenced attachments are considered by the committee to be incomplete and will not be considered. KRC reserves the right to award one proposal as well as not award any proposals as determined by the KRC RFP review committee.

All proposals will be scored for the written and oral presentations in accordance with Exhibit B. **If after review of the written proposal, it is noted by the committee that the applicant cannot meet licensing or other minimum professional criteria specific to the project applied for, the proposal will be rejected at that time.** KRC will appoint a five-member committee to score each proposal and conduct interviews with each approved applicant. The decision made by the review committee is final. Interviews for all approved applicants are anticipated to take place on **June 8, 2023 and, if needed, on June 9, 2023.**

## **RESERVATION OF RIGHTS**

Kern Regional Center reserves the right to request or negotiate changes in a proposal, to accept all or part of a proposal, or to reject any or all proposals. KRC may, at its sole and absolute discretion, select no provider for these services if, in its determination, no applicant is sufficiently responsive to the need.

Kern Regional Center reserves the right to withdraw this Request for Proposal (RFP) and/or any item within the RFP at any time without notice. Kern Regional Center reserves the right to disqualify any proposal which does not adhere to the RFP guidelines. This Request for Proposal is being offered at the discretion of KRC. It does not commit KRC to award any grant.

## **TIMELINES:**

Request for Proposal: Announcement Release & Posting	May 17, 2023
General briefing meeting on RFP Process, timeline, and Q&A session.	May 23, 2023  *Orientation will be held by Kern Regional Center Via Zoom at 1:00pm.  To register please submit a request to participate to <a href="mailto:Ashley.fontes@kernrc.org">Ashley.fontes@kernrc.org</a>
Deadline for receipt of Proposals (5 copies of each proposal)	June 2, 2023 by close of business day (5:00pm). Proposals received after said date and time <u>will not</u> be considered.

Interviews and oral presentations	If your proposal is selected, you will be contacted and invited to an in-person interview at the Kern Regional Center on June 8, 2023 or June 9, 2023, time, TBD.
Notice of Selection sent	June 14, 2023

**PROJECT I.D. #2223-2: Communication Access for clients of Kern Regional Center**

**Service Need:** Assistive Technology and Augmented Alternative Communication consultation and assessment services, equipment trial, equipment loan and reuse, and support in learning how to use assistive technology equipment.

**Service Area:** Kern, Inyo, and Mono Counties

**Number of Consumers:** TBD

**Funding:** **Negotiated rate for ongoing services.** Maximum (median rate) will be possibly based on service code 117, and following rate will be set as determined by DDS standards.

**Start-up funding:** **\$200,000**

**Proposal Deadline:** **June 2, 2023 by 5:00pm**

Consistent with the Lanterman Developmental Disabilities Services Act and the promotion of community based services for people with Developmental Disabilities, Kern Regional Center (KRC) is currently looking to enhance the supports provided to its clients with communication needs, to include clients who are diagnosed with hearing loss.

KRC is looking to contract with a provider who can provide Assistive Technology and Augmented Alternative Communication consultation and assessment services, equipment trial, equipment loan and reuse, and support in learning how to use assistive technology equipment. Service provider will also assist with advocacy services to assist clients in securing the needed equipment through generic resources (i.e. school districts, health insurance companies, etc.).

**EXHIBIT B**

**PROPOSAL AFFIRMATION**

**I affirm that the information presented in this proposal is true and that this proposal was developed and authored by the person(s) indicated. I understand that any falsification of information or failure to disclose any history of deficiencies or abuse will be cause for immediate disqualification. I also understand that failure to meet minimum qualifications as stated in the RFP, late proposal submissions, facsimile proposal submissions, any missing information (e.g., sections), will also be cause for disqualification. I also understand that in the event that my proposal is selected for development, further discussion for final agreement may be required.**

\_\_\_\_\_  
\_\_\_\_\_

**SIGNATURE**

\_\_\_\_\_  
\_\_\_\_\_

**DATE**

\_\_\_\_\_

**SIGNATURE**

\_\_\_\_\_

**DATE**

**PROPOSAL FORMAT AND PROPOSAL SCORING CRITERIA**

**A. Content of Proposal**

**APPLICANT INFORMATION:** Applicant(s) must complete and attach EXHIBIT D (Proposal Coversheet) with the submitted proposal.

- 1) Program Description: Does the proposal clearly address the population to be served? Does the proposal clearly identify all items required in the program design per Title 17, Sections 56710 through 56756? Does the proposal demonstrate a clear understanding and utilization of Person-Centered Planning?
  
- 2) Education and Experience: The proposal should clearly provide evidence that the applicant(s) possesses the education and/or experience necessary to complete a project of this scope. The applicant should clearly demonstrate an ability to manage and house the technology, staffing, and training successfully. Applicant should include letters of reference and resumes.
  
- 2) Program Development: Does the proposal clearly describe proposed timelines for development and completion of the proposed project?
  
- 3) Budget and Finance: The program budget should clearly display all costs associated with the proposal. The applicant(s) must demonstrate the ability to keep adequate fiscal records in accordance with all State and local requirements. Applicant must include Exhibit F.

**B. Oral Presentation Scoring Criteria**

- 1) Program Description: Applicant clearly demonstrates a working knowledge of their program plan and the ways in which they will implement the program description as related to the needs of the clients.

- 2) Client Needs: Applicant demonstrates knowledge of client's needs as related to current Request For Proposal.
- 3) Budget and Finance: Applicant demonstrates an understanding of operating the service requested in the most cost-effective manner.
- 4) Experience: Applicant clearly articulates pertinent experience for themselves, staff and consultants pursuant to this Request For Proposal.
- 5) Overview Summary: Applicant is able to field questions from the panel about the program in a concise and articulate manner.

## Scoring

**Submitted proposals will be scored per the following scoring guidelines by each of the members of the Review Panel in each of the areas above. Applicant's oral presentation will also be scored using the same criteria.**

- 0 (Zero) Criteria not addressed at all
- 1 Minimal Response: Subject area is mentioned; however, applicant has not included any narrative or any supporting documentation that demonstrates an understanding of this particular proposal requirement.
- 2 Some supporting documentation and/or narrative discussion; however, the responses are not clearly articulated.
- 3 Good supporting documentation and/or narrative discussion; responses are more clearly articulated.
- 4 Maximum Response: Full supporting documentation and/or narrative discussion with exceptionally clear articulation making it readily apparent that applicant understands all aspects of the program development process.

The written proposal and presentation can achieve a maximum score of 48 points per member. (Written proposal= 28 points; Oral presentation= 20 points)

**KRC RFP 2022-23 PROPOSAL COVERSHEET**

Must be submitted by **May 26, 2023** with all required attachments

DATE: \_\_\_/\_\_\_/\_\_\_

APPLICANT / AGENCY NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WEBSITE ADDRESS: \_\_\_\_\_

**If the applicant is a corporation, please attach a separate sheet of paper listing all principal members of the corporation.**

Please indicate the identification number and description of the project(s) in which you are submitting.

I.D.# \_\_\_\_\_ Project Description: \_\_\_\_\_

Name of person authorized to sign a binding contract with Kern Regional Center:

NAME: \_\_\_\_\_

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

I am able to meet all qualifications as described by the RPF.

X \_\_\_\_\_

Signature / Date



**CONFLICT OF INTEREST AND EXCLUSION VERIFICATION**

**CONFLICT OF INTEREST**

According to Title 17 Regulations, Section 54314, the following individuals and entities shall not be vended:

1. Any officer or employee of the state of California;
2. Any applicant in which an officer or employee of the State of California has a financial interest, as defined in the Government Code, Section 87103, except as permitted by Public Contract Code, Section 10430 (g), effective January 1, 1992;
3. Employees and board members of any regional center with a conflict of interest pursuant to Title 17, Sections 54500 through 54525, unless the conflict is eliminated or a waiver is obtained pursuant to Title 17, Sections 54522 through 54525;
4. Any applicant in which the regional center employee or board member has a relationship which creates a conflict of interest pursuant to Title 17, Section 54500 through 54525, unless the conflict is eliminated or a waiver is obtained pursuant to Title 17, Sections 54522 through 54525;
5. Regional Center Clients to provide services for, or to, themselves except to provide transportation or serve as their own Supported Living Services Vendor;
6. Except as specified in Section 54318 of these regulations, any applicant located outside the state;
7. Any applicant that has been determined to be an excluded individual or entity as defined in Section 54302 (b)(1).

**I have read the above information and declare:**

**No present or potential barriers to becoming a vendor exist.**

**A current or potential barrier to becoming a vendor exists.**

**EXCLUSION VERIFICATION**

“Excluded Individuals or Entities means those individuals and entities that have been placed on either the U.S. Department of Health and Human Services Office of Inspectors’ General (OIG) List of Excluded Individuals/Entities or the Department of Health Care Services (DHCS) Medi-Cal Suspended and Ineligible Provider List of persons, or individuals and entities that have been convicted of a criminal offense related to involvement in any program under Medicare, Medicaid or the Title XX services program, or those individuals and entities that meet the criteria included in Title 17, Section 54311 (a)(6).

Pursuant to the Applicant/Vendor Disclosure Statement, all applicants and co-applicants are required to provide verification that the applicant and/or co-applicants are not listed on the State of California or the Federal Office of Inspector General databases for Ineligible Providers and Excluded Providers. **As a requirement of this RFP, please screen all applicants/co-applicants using one the databases listed below. Please include a screen print of your results with your written proposal.**

The State of California Suspended and Ineligible Provider List can be found at:

[Medi-Cal: Publications](#)

The Federal Office of Inspector General “exclusions database” can be found at:  
<http://exclusions.oig.hhs.gov>

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

**EXHIBIT F**

**FINANCIAL STATEMENT**

AS OF \_\_\_\_\_, 20\_\_\_\_

**NAME AND ADDRESS OF APPLICANT(S)**

**ASSETS**

Cash on hand. . . . .	\$ _____
Cash in commercial accounts. . . . .	_____
Savings accounts. . . . .	_____
Time deposits. . . . .	_____
Notes and receivables . . . . .	_____
Inventory. . . . .	_____
Life Insurance (cash value) . . . . .	_____
Stocks and Bonds (at market value) . . . . .	_____
Land. . . . .	_____
Buildings and Improvements. . . . .	_____
Equipment, furniture and furnishings. . . . .	_____
Other Investments or Assets (describe):	_____
_____	_____
_____	_____
A. Total Assets	\$ _____

**LIABILITIES**

Accounts Payable (include installment contracts) (balance due) . . . . .	\$ _____
Salaries and Wages Payable. . . . .	_____
Payroll Taxes Payable. . . . .	_____
Real Estate Taxes Payable. . . . .	_____
Notes Payable (include personal notes) (balance due):	_____
_____	\$ _____
_____	_____
Real Estate Loans or Mortgages (balance due):	_____
_____	_____
Other debts (describe):	_____
_____	_____
_____	_____
B. Total Liabilities	\$ _____

**OWNERSHIP (Equity)**

C. Total Ownership (difference between A and B)	\$ _____
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I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS ON THIS FORM AND ANY ACCOMPANYING ATTACHMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE.

COMPLETED BY	TITLE	DATE

**EXHIBIT G**

**REVISED  
START-UP BUDGET  
Submitted to KRC for Approval**

**Allowable Items**  
**\*Purchase of IPADS**

**Projected Cost**

\_\_\_\_\_

**Total Requested Funds**  
**(not to exceed contract award)**

\_\_\_\_\_

**\*Additional responsibilities are associated with these items. Please review Contracts and Exhibits carefully.**