



**BOARD OF STATE AND COMMUNITY CORRECTIONS**

**SENATE BILL 81, ROUND TWO**

**LOCAL YOUTHFUL OFFENDER REHABILITATIVE**

**FACILITY CONSTRUCTION FUNDING PROGRAM**

**PROPOSAL FORM**

*This document is not to be reformatted.*

**SECTION 1: PROJECT INFORMATION**

|                                                                                                                                                                                                                           |                                                                                            |                                                                                   |                                                                                   |                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------|
| <b>A: APPLICANT INFORMATION AND PROPOSAL TYPE</b>                                                                                                                                                                         |                                                                                            |                                                                                   |                                                                                   |                            |
| COUNTY NAME                                                                                                                                                                                                               |                                                                                            | STATE DOLLARS REQUESTED                                                           |                                                                                   |                            |
|                                                                                                                                                                                                                           |                                                                                            | \$                                                                                |                                                                                   |                            |
| SMALL COUNTY<br>(200,000 OR UNDER GENERAL COUNTY<br>POPULATION) <input type="checkbox"/>                                                                                                                                  | MEDIUM COUNTY<br>(200,001 - 700,000 GENERAL COUNTY<br>POPULATION) <input type="checkbox"/> | LARGE COUNTY<br>(700,001 + GENERAL COUNTY<br>POPULATION) <input type="checkbox"/> |                                                                                   |                            |
| TYPE OF PROPOSAL – PROGRAM SPACE PROPOSAL <u>OR</u> BEDS AND PROGRAM SPACE PROPOSAL<br>PLEASE CHECK ONE (ONLY):                                                                                                           |                                                                                            |                                                                                   |                                                                                   |                            |
| PROGRAM SPACE <input type="checkbox"/>                                                                                                                                                                                    |                                                                                            | BEDS AND PROGRAM SPACE <input type="checkbox"/>                                   |                                                                                   |                            |
| <b>B: BRIEF PROJECT DESCRIPTION</b>                                                                                                                                                                                       |                                                                                            |                                                                                   |                                                                                   |                            |
| FACILITY NAME                                                                                                                                                                                                             |                                                                                            |                                                                                   |                                                                                   |                            |
| PROJECT DESCRIPTION                                                                                                                                                                                                       |                                                                                            |                                                                                   |                                                                                   |                            |
| STREET ADDRESS                                                                                                                                                                                                            |                                                                                            |                                                                                   |                                                                                   |                            |
| CITY                                                                                                                                                                                                                      |                                                                                            | STATE                                                                             | ZIP CODE                                                                          |                            |
| <b>C. SCOPE OF WORK – INDICATE FACILITY TYPE <u>AND</u> CHECK ALL BOXES THAT APPLY.</b>                                                                                                                                   |                                                                                            |                                                                                   |                                                                                   |                            |
| FACILITY TYPE DESCRIPTION<br>(camp, hall, special purpose<br>hall, etc...)                                                                                                                                                | <input type="checkbox"/> NEW STAND-ALONE<br>FACILITY                                       | <input type="checkbox"/> RENOVATION/<br>REMODELING                                | <input type="checkbox"/> CONSTRUCTING BEDS OR OTHER<br>SPACE AT EXISTING FACILITY |                            |
| <b>D. BEDS CONSTRUCTED – Provide the number of BSCC-rated beds and non-rated special use beds that will be subject to construction as a result of the project, <u>whether remodel/renovation or new construction.</u></b> |                                                                                            |                                                                                   |                                                                                   |                            |
|                                                                                                                                                                                                                           | <b>A. MINIMUM SECURITY<br/>BEDS</b>                                                        | <b>B. MEDIUM SECURITY<br/>BEDS</b>                                                | <b>C. MAXIMUM SECURITY<br/>BEDS</b>                                               | <b>D. SPECIAL USE BEDS</b> |
| Number of<br>beds<br>constructed                                                                                                                                                                                          |                                                                                            |                                                                                   |                                                                                   |                            |
| <b>TOTAL<br/>BEDS<br/>(A+B+C+D)</b>                                                                                                                                                                                       |                                                                                            |                                                                                   |                                                                                   |                            |

**E: APPLICANT'S AGREEMENT**

By signing this application, the authorized person assures that: a) the County will abide by the laws, regulations, policies and procedures governing this financing program, and b) certifies that the information contained in this proposal form, budget, narrative and attachments is true and correct to the best of his/her knowledge.

**PERSON AUTHORIZED TO SIGN AGREEMENT**

|                               |       |
|-------------------------------|-------|
| NAME                          | TITLE |
| AUTHORIZED PERSON'S SIGNATURE | DATE  |

**G: DESIGNATED COUNTY CONSTRUCTION ADMINISTRATOR**

This person shall be responsible to oversee construction and administer the state/county agreements. (Must be county staff, not a consultant or contractor, and must be identified in the Board of Supervisors' resolution.)

**COUNTY CONSTRUCTION ADMINISTRATOR**

|                |                  |          |                |
|----------------|------------------|----------|----------------|
| NAME           | TITLE            |          |                |
| DEPARTMENT     | TELEPHONE NUMBER |          |                |
| STREET ADDRESS |                  |          |                |
| CITY           | STATE            | ZIP CODE | E-MAIL ADDRESS |

**H: DESIGNATED PROJECT FINANCIAL OFFICER**

This person is responsible for all financial and accounting project related activities. (Must be county staff, not a consultant or contractor, and must be identified in the Board of Supervisors' resolution.)

**PROJECT FINANCIAL OFFICER**

|                |                  |          |                |
|----------------|------------------|----------|----------------|
| NAME           | TITLE            |          |                |
| DEPARTMENT     | TELEPHONE NUMBER |          |                |
| STREET ADDRESS |                  |          |                |
| CITY           | STATE            | ZIP CODE | E-MAIL ADDRESS |

**I: DESIGNATED PROJECT CONTACT PERSON**

This person is responsible for project coordination and day-to-day liaison work with BSCC. (Must be county staff, not a consultant or contractor, and must be identified in the Board of Supervisors' resolution.)

**PROJECT CONTACT PERSON**

|                |                  |          |                |
|----------------|------------------|----------|----------------|
| NAME           | TITLE            |          |                |
| DEPARTMENT     | TELEPHONE NUMBER |          |                |
| STREET ADDRESS |                  |          |                |
| CITY           | STATE            | ZIP CODE | E-MAIL ADDRESS |

## SECTION 2: BUDGET SUMMARY

### BUDGET SUMMARY INSTRUCTIONS

Definitions of total project costs for purposes of this program (state reimbursed, county cash contribution and county in-kind contribution) can be found in the Project Costs, State Reimbursement and County Contribution (Match) section of the Request for Proposals (RFP). The county cash and in-kind contributions are collectively the county contribution. Those defined costs in the RFP shall be the guide for accurately completing this budget summary section.

In the Budget Summary Table that follows in part B of this section, indicate the amount of state financing requested and the amount of cash and/or in-kind contributions allotted to each budget line-item, in total defining the total project costs. It is necessary to fully include each eligible project cost for state-reimbursed, county cash and county in-kind contribution amounts.

The in-kind contribution line items represent only county staff salaries and benefits, or current fair market value of land. An appraisal of land value will be required after conditional award and only if land value is included as part of the county's contribution.

The total amount of state financing requested cannot exceed 90 percent of the total project costs. The county contribution must be a minimum of 10 percent of the total project costs (unless the applicant is a small county petitioning for a reduction in the county contribution amount). County contributions can be any combination of cash or in-kind project costs. Small counties that petition for a reduction in the contribution amount must provide a minimum of five percent contribution of the total project costs. Small counties requesting a reduction in county contribution must state so in part A of this section.

State financing limits (maximums) for all county proposals are as follows, for proposed regional facility projects, the size of the lead county determines the maximum amount of funds to be requested for the entire project:

- **\$17,500,000** for large counties;
- **\$12,500,000** for medium counties; and
- **\$9,600,000** for small counties.

**A. SMALL COUNTY PETITION FOR REDUCTION IN CONTRIBUTION**

A small county may petition the BSCC Board for a reduction in its county contribution. This proposal document will serve as the petition and the BSCC Board's acceptance of the county's contribution reduction, provided the county abides by all terms and conditions of this SB 81 RFP process and receives a conditional award. Small counties requesting the reduction must still provide a minimum of five percent contribution that may be any combination of cash and/or in-kind contribution. If requesting a reduction in match contribution, check the box below to indicate the county's petition.

- This proposal includes a petition for a county contribution reduction request as reflected in the proposal budget.**

**B. MANDATORY PREQUALIFICATION AFADAVIT**

In order to attest that the county has the readiness to proceed with the proposed project the county has the matching funds identified and will be used for the county match funding for this project.

- This proposal includes a Board of Supervisor's Resolution that includes the language that assures the funding is available and is attached.**

**C. California Environmental Quality Act (CEQA compliance)**

**Has the county completed the CEQA compliance for the project site.**

- Yes. If so, include documentation evidencing the completion.**
- No. If no, describe the status of the CEQA certification.**

**BUDGET SUMMARY TABLE (Report to nearest \$1000)**

| BUDGET CATEGORY                                         | STATE REIMBURSED | CASH CONTRIBUTION | IN-KIND CONTRIBUTION | TOTAL    |
|---------------------------------------------------------|------------------|-------------------|----------------------|----------|
| 1. Construction (No moveable Equipment/Furnishings)     | \$ [ ]           | \$ [ ]            | \$ [ ]               | \$ [ ]   |
| 2. Architectural                                        | [REDACTED]       | \$ [ ]            | \$ [ ]               | \$ [ ]   |
| 3. CEQA                                                 |                  | \$ [ ]            | \$ [ ]               | \$ [ ]   |
| 4. Construction Management                              |                  | \$ [ ]            | \$ [ ]               | \$ [ ]   |
| 5. State Agency Fees                                    |                  | \$ [ ]            | \$ [ ]               | \$ [ ]   |
| 6. Audit of Grant                                       |                  | \$ [ ]            | \$ [ ]               | \$ [ ]   |
| 7. Site Acquisition (Cost or Current Fair Market Value) |                  | \$ [ ]            | \$ [ ]               |          |
| 8. Needs Assessment                                     |                  | \$ [ ]            | \$ [ ]               |          |
| 9. County Administration                                |                  | \$ [ ]            | \$ [ ]               |          |
| 10. Transition Planning                                 |                  | \$ [ ]            | \$ [ ]               |          |
| TOTAL PROJECT COSTS                                     |                  | \$ [ ]            | \$ [ ]               | \$ [ ]   |
| PERCENT OF TOTAL                                        | [ ] %            | [ ] %             | [ ] %                | 100.00 % |

Provide an explanation below of how the dollar figures were determined for each of the budget categories above that contain dollar amounts. Every cash contribution (match) line item shall be included with a reporting of the full amount budgeted, unless a line item is not an actual cash contribution project cost for the county. (In that case, indicate so below.) For each budget category explanation below, include how state financing and the county contribution dollar amounts have been determined and calculated (be specific).

1. **Construction (No moveable Equipment/Furnishings):**
2. **Architectural:**
  - a) Describe the county’s current stage in the architectural process:
  - b) Given the approval requirements of the SPWB and associated state reimbursement parameters, define which portions/phases of the architectural services the county intends to seek state dollar reimbursement:
  - c) Define the budgeted amount for what is described in b) above:
  - d) Define which portion/phases of the architectural services the county intends to cover with county contribution dollars:
  - e) Define the budgeted amount for what is described in d) above:
3. **CEQA:**

4. **Construction Management - Describe which portions/phases of the construction management services the county intends to claim as:**
  - a) Cash
  - b) In-Kind
5. **State Agency Fees – Counties should consider an approximate cost of \$35,000, to be captured in the county cash contribution (match)**
6. **Audit - Define whether the county is intending to use independent county auditor (in-kind) or services of contracted auditor (cash) and amount budgeted:**
7. **Site Acquisition - Describe the Cost or Current Fair Market Value):**
8. **Needs Assessment - Define whether work is performed by county staff (in-kind) or consultant (cash) :**
9. **County Administration:**
10. **Transition Planning – Define whether work is performed by county staff (in-kind) or consultant (cash):**

## SECTION 3: PROJECT TIMETABLE

Prior to completing this timetable, the county must consult with all appropriate county staff (e.g., county counsel, general services, public works, county administrator) to ensure that dates are achievable. Please consult the State Capital Outlay/Board of State and Community Corrections Process Details and Timing Requirements section of the RFP for further information. Complete the table below indicating start and completion dates for each key event, including comments if desired. Note the required timeframes for specific milestone activities in this process. The BSCC Board intends to make conditional awards at a March 2015 meeting.

| KEY EVENTS                                                                                                                                                    | START DATES | COMPLETION DATES | COMMENTS |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------|----------|
| Site assurance/comparable long-term possession <u>within 90 days of award</u>                                                                                 |             |                  |          |
| Real estate due diligence package submitted <u>within 120 days of award</u>                                                                                   |             |                  |          |
| State Public Works Board meeting – Project Established <u>within 18 months of award</u>                                                                       |             |                  |          |
| Schematic Design with Operational Program Statement <u>within 24 months of award</u> (design-bid-build projects)                                              |             |                  |          |
| Performance criteria or performance criteria and concept drawings with Operational Program Statement <u>within 30 months of award</u> (design-build projects) |             |                  |          |
| Design Development (Preliminary drawings) with Staffing Plan                                                                                                  |             |                  |          |
| Staffing/Operating Cost Analysis approved by the Board of Supervisors                                                                                         |             |                  |          |
| Construction Documents (Working drawings)                                                                                                                     |             |                  |          |
| Construction Bids                                                                                                                                             |             |                  |          |
| Notice to Proceed <u>within 42 months of award</u>                                                                                                            |             |                  |          |
| Construction (maximum 3 years to complete)                                                                                                                    |             |                  |          |
| Staffing/Occupancy <u>within 90 days of completion</u>                                                                                                        |             |                  |          |

## SECTION 4: NARRATIVE

**PLEASE ADDRESS EACH OF THE FOLLOWING ITEMS. IF AN ITEM IS NOT APPLICABLE, PLEASE STATE AND DESCRIBE WHY IT IS NOT APPLICABLE.**

Attach up to the maximum number of 35 pages of double-spaced narrative (no smaller than 12 point font with 1" margins) ordered in the subject areas indicated within the proposal type. If it can be written in less than the maximum pages, please do so (avoid "filler"). Up to 10 additional pages of essential appendices may be included at the discretion of the applicant. Appendices cannot be used to give required narrative information. Pictures, charts, illustrations or diagrams are encouraged in the narrative or appendices to assist reviewers in fully understanding the proposed scope of work. Data sources must be identified.

If the project is for a regional facility (must meet the requirements outlined in the Regional Facilities section of the RFP), clearly indicate so. Include the names of the partnering counties and their individual data which supports the project and responds to the requested narrative points.

### **1. WHAT IS YOUR PROPOSED PROJECT?**

Applicants must clearly describe their proposed use of SB 81 Round Two funds by addressing the following questions listed below. Objectives should be clear, measurable, researched informed, and in line with best practices.

- A. Describe project eligibility and how your proposal meets the intent of Welfare and Institutions Code Sections 1700-1778 in that it proposes renovation or construction of facilities in line with the legislative goal to enhance the rehabilitation of youthful offenders through support service spaces or program space; renovation of existing space; new stand-alone facility or replacement facility; and addition of beds.
- B. Provide a description of programming needs and how they will be supported through, and aligned with, specific facility changes and design.

### **2. WHY IS THE NEW FACILITY OR PROGRAM CHANGE NEEDED?**

Applicants must clearly demonstrate the need for a new facility or facility renovation by addressing the following:

- A. Include a clear and detailed description of how the proposed new facility or facility change will support the County's vision for rehabilitating youth and providing a continuum of care and overall improvement of its juvenile justice system.



- B. Describe and provide both quantitative and qualitative data which supports the need and enhances the case for the project plan. Qualitative data may include results of interviews and focus groups with youth, families and community stakeholders.
- C. Describe how this project will support and enhance the county's overall approach to juvenile justice, in light of existing services, programs and facilities.

**3. HOW WILL THIS PROJECT HELP THE COUNTY PROMOTE THE REHABILITATION OF YOUTHFUL OFFENDERS?**

Applicants must clearly describe how this project will help the county promote the rehabilitation of youthful offenders, by addressing the questions below. Objectives should be clearly informed by research and best practices in facility design and programming / treatment model.

- A. How do rehabilitation purposes integrate into project objectives and facility design, including how new construction or renovation will contribute to goals such as: more effective treatment and service delivery, provision of detention alternatives, gender-specific programming and reduction of racial and ethnic disparity.
- B. How do program plans address alignment with key county departments and community based organizations that provide an integrated treatment model, including family involvement, education, health, and mental health services for youth.
- C. How do program plans address need for and alignment with institutional and community partners around family support and involvement, re-entry planning and transitions to school, employment, and community.
- D. Include a description of how new design or facility change will contribute to improved results (e.g., rehabilitation, education, family support), along with a plan for tracking and evaluating change.

**4. IS THE PROJECT PLAN COST EFFECTIVE AND FISCALLY SUSTAINABLE?**

The proposal must represent a cost-effective request of state funds and the county must demonstrate that the plan is fiscally sustainable. In addition to the budget category descriptions that you provided in the Budget Summary Table, include in your discussion, at a minimum, the following points:

- A. Include a clear rationale for how the expected benefits are worth the costs to be incurred in this project.

- B. Budget proposal reflects effective utilization of state funds, as well as county cash and in-kind match. Address the potential for future funding for design and construction, as well as for design and delivery of new programming, if applicable.
- C. The project plan provides a convincing rationale for proposed utilization of state and county funds.
- D. How will the county support ongoing operational costs? Board item may be attached to support response.

**5. COUNTY’S READINESS TO MOVE FORWARD WITH PROPOSED PROJECT**

Applicants must clearly describe their readiness to move forward with the proposed project, by addressing the questions below.

- A. Construction elements are clearly described (i.e., site identified, ownership of construction site, site planning, utility services, etc.).
- B. Address your ability to meet the June 30, 2017 deadline, as required by SB 81 legislation.

**6. DESCRIBE THE ADMINISTRATIVE WORK PLAN AND HOW IT ALIGNS WITH PROJECT OBJECTIVES?**

The proposal must provide a clear and comprehensive administrative work plan for designing, performing, and managing the proposed project. The project timeline must be thorough, reasonable and clearly articulated. Include in your discussion, at a minimum, the following points:

- A. Describe the current stage of the planning process, plan for project design, reasonable project timeline and connection of work inputs to desired project objectives.
- B. Provide a description of project administration and staff, including roles of other county departments and/or non-county partner entities.
- C. The work plan describes elements of “green” construction, if being used.
- D. The work plan describes necessary support for information technology.

## **7. OVERALL EVALUATION**

- A. Overall, how does the proposal address evidence based and promising practices/programs and best practices for the county's juvenile justice program?
  
- B. Overall, how does the proposal demonstrate the organizational need and readiness for the programmatic changes?

## SECTION 5: BOARD OF SUPERVISORS' RESOLUTION

All counties applying for SB 81, Round Two financing must include a Board of Supervisors' resolution with the proposal submittal. The resolution must include the requisite components as outlined below. For counties submitting multiple proposals (which requires participation in a regional facility as described in the RFP), separate resolutions for each proposal, with the necessary language contained in each resolution, are required.

**For all counties, except as otherwise noted below, the Board of Supervisors' resolution for the project shall be attached to the original proposal and contain the following:**

- Names, titles and positions of County Construction Administrator, Project Financial Officer and Project Contact Person.
- Authorization of appropriate county official to sign the Applicant's Agreement and submit the proposal for funding.
- Assurance that the County will adhere to state requirements and terms of the agreements between the County, the Board of State and Community Corrections, and the State Public Works Board in the expenditure of state funds and county match funds.
- Assurance that the County has appropriated, or will appropriate after conditional project award but before state/county funding agreements, the amount of match identified by the County on the funding Proposal Form submitted to the Board of State and Community Corrections; identifies the source of cash match when appropriated as \_\_\_\_\_ in the sum of \$\_\_\_\_\_, and assures that state and cash matching funds do not supplant (replace) funds otherwise dedicated or appropriated for construction activities.
- Assurance that the County will fully and safely staff and operate the facility that is being constructed (consistent with Title 15, California Code of Regulations) within ninety (90) days after project completion.
- All projects: Provide the following site assurance for the county facility at the time of proposal or not later than ninety (90) days following the Board of State and Community Corrections's notice of Intent to Award: Assurance that the County has project site control through either fee simple ownership of the site or comparable long-term possession of the site, and right of access to the project sufficient to assure undisturbed use and possession of the site, and will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site of facility subject to construction, or lease the facility for operation to other entities, without permission and instructions from the Board of State and

Community Corrections, for so long as State Public Works Board Lease-Revenue Bonds secured by the financed project remain outstanding.

- Attestation to \$\_\_\_\_\_ as the site acquisition land cost or current fair market land value for the proposed new or expanded facility. This can be claimed for on-site land cost/value for new facility construction, on-site land cost/value of a closed facility that will be renovated and reopened, or on-site land cost/value used for expansion of an existing facility. It cannot be claimed for land cost/value under an existing operational facility. (If claimed as in-kind match, actual on-site land cost documentation or independent appraisal value will be required as a pre-agreement condition).
- Regional Facility Projects Only: A Board of Supervisors' resolution from the lead county in the regional partnership containing the items identified above, along with a Memorandum of Understanding (MOU) or Joint Powers Agreement (JPA) between each of the partner counties. Please consider the information about regional facilities for the purposes of this funding program as described on page 13 of the RFP before developing these documents. If preliminary MOUs and JPAs are submitted, final documents must be submitted within 90 days following the notification to the lead county of conditional Intent to Award state funds.

## SECTION 6: PROPOSAL CHECKLIST

- a. Page 1 of the Proposal Form is the first page of your proposal. Please use standard copy paper. Do not use heavyweight, card stock or glossy paper. Covers, table of contents, introductory letters, tabs or dividers are not allowed.
- b. The formal proposal includes the Proposal Form, narrative and appendices as a combined document.
- c. Provide one original proposal with assurance statement signed by proper authority.
- d. In addition to the original, provide 16 copies of the proposal and electronic copies (read only). The electronic versions should be an Adobe Acrobat file (pdf) on a standard CD ROM.
- e. Three-hole punch on the left side and two-hole punch the top of the original and all copies of the proposal.
- f. Use a clip to secure each of the proposals. (Do not put proposals in binders or use staples.)
- g. The font used for the proposal and the appendices can be no smaller than 12 point.
- h. The abstract (Section 4, A) is limited to one page and may be single-spaced with 1" margins.
- i. The narrative (Section 4, B through H) must be double-spaced.
- j. The narrative (Section 4, A through H) cannot exceed 35 pages.
- k. Up to 10 additional pages of essential appendices may be included at the discretion of the applicant. Appendices cannot be used to give required narrative information. Pictures, charts, illustrations or diagrams are encouraged in the narrative or appendix to assist reviewers in fully understanding the proposed scope of work.
- l. Attach to the original proposal one Board of Supervisors' resolution (original or copy), fully executed, containing the language cited in Section 5 of the Proposal Form. Please include an additional copy of the resolution.
- m. Provide one copy of a needs assessment study (as described previously in this RFP) if the county intends to build a new facility or add bed space to an existing facility. Projects for renovation and program space only are not required to submit a separate needs assessment study, but are required to comprehensively document the need for the project in the proposal.
- n. For regional facilities, provide one copy of the Memorandum of Understanding or Joint Powers Agreement and the Board of Supervisors' resolution.
- o. No other attachments are allowed.