

Request for Proposals (RFP)
NLACRC Community Placement Plan (CPP)
FY 2025-2026

Community Placement Plan (CPP)
Fiscal Year 2025-2026
Request for Proposals

Service Provider for New
Enhanced Behavioral Supports Homes (EBSH) for Adults

Project #: NLACRC-2526-1 and NLACRC-2526-3

Published Date: November 14, 2025

Closing Date: January 11, 2026, 11:59 p.m. (PST)

North Los Angeles County Regional Center (NLACRC) received approval for Community Placement Plan (CPP) funding by the Department of Developmental Services (DDS) for Fiscal Year 2025-2026. NLACRC is seeking proposal submissions for the operators of two (2) Enhanced Behavioral Supports Homes (EBSH) for Adults with intellectual disabilities and/or severe behavioral challenges needing community placement or deflection from Porterville Developmental Center, Canyon Springs, IMDs, or other restrictive setting. The applicant selected will serve adults with challenging service needs in an EBSH setting owned by a pre-selected Housing Development Organization (HDO). All interested applicants must have demonstrable experience supporting adults with developmental disabilities and have a physical business office located within NLACRC's catchment area.

The purpose of EBSHs is to reduce the institutionalization of people with developmental disabilities and prevent the dislocation of these same individuals from their home communities. EBSH homes are designed to (i) provide intensive behavioral services and supports to adults or children with developmental disabilities; (ii) provide complex behavioral support needs and/or intensive services and supports needs; and (iii) serve consumers who are at risk of institutionalization or out-of-state placement, or are transitioning to the community from a developmental center, other state-operated residential facility, institution for mental disease, or out-of-state placement. (WIC §4684.80(a) and (b)).

NLACRC-2526-1: Service Provider for Enhanced Behavioral Supports Home for Adults (Male)

Start Up Funds: \$250,000 (Subject to DDS approval)

This home will be a 4-bed (2 ambulatory, 2 non-ambulatory) Community Care Licensed EBSH located in the Antelope Valley for adult male individuals with intellectual disability and/or severe behavioral needs needing community placement or deflection from Porterville Developmental Center, Canyon Springs, IMDs, or other restrictive setting. This home will serve individuals with challenging service needs to remain in the community or to be transitioned to a less restrictive setting. Challenging behaviors include but are not limited to physical aggression, sexually

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inappropriate behaviors, substance abuse, verbal aggression, trauma, and property destruction requiring specialized services and positive behavior supports. Individuals may also require forensic services such as competency training, recidivism prevention, mental health supports, and counseling.

Please Note: The provider selection for this project will be expedited (see Selection Timetable below). Applicants responding to this RFP need to have the resources and infrastructure to being operating with home by no later than July 1, 2026.

NLACRC-2526-3: Service Provider for Enhanced Behavioral Supports Home for Adults

Start Up Funds: \$300,000 (Subject to DDS approval)

This home will be a 4-bed (2 ambulatory, 2 non-ambulatory) Community Care Licensed EBSH located in the Antelope Valley for adult individuals with intellectual disability and/or severe behavioral needs needing community placement or deflection from Porterville Developmental Center, Canyon Springs, IMDs, or other restrictive setting. This home will serve individuals with challenging service needs to remain in the community or to be transitioned to a less restrictive setting. Challenging behaviors include but are not limited to physical aggression, sexually inappropriate behaviors, substance abuse, verbal aggression, trauma, and property destruction requiring specialized services and positive behavior supports. Individuals may also require forensic services such as competency training, recidivism prevention, mental health supports, and counseling.

Please note: Plans are underway for the construction of Accessory Dwelling Unit (ADU) (2-bed) to be licensed as an Adult Residential Facility (ARF) (Service Level 7) with Delayed Egress/Secured Perimeter. It is preferred that the service provider selected for the EBSH project also be willing and able to provide services for the individual(s) residing in the ADU. Provider start-up funding for the Service Level 7 ARF to be considered for approval at a future date.

Definition of Terms from the California Code of Regulations, Title 17, Division 2, Chapter 3, Subchapter 24. Enhanced Behavioral Supports Homes.

"**Enhanced Behavioral Services and Supports**" is the additional staffing, supervision, and supports that are needed to address a consumer's challenging behaviors that are beyond what is available in a typical community living arrangement.

"**Enhanced Behavioral Supports Home**" is an adult residential facility or a group home certified by the State Department of Developmental Services (DDS) and licensed by the State Department of Social Services (DSS) that provides 24-hour non-medical care to individuals with developmental disabilities who require enhanced behavioral supports, staffing, and supervision in a homelike setting, as defined in Section 4684.80 of the Welfare and Institutions Code. Enhanced Behavioral Supports Home shall have a maximum capacity of four.

"**Individual Behavior Supports Plan**" is a plan that identifies and documents the behavior and intensive support and service needs of a consumer, details the strategies to be employed and services to be provided to address those needs, and includes the entity responsible for providing those services and timelines for when each identified individual behavior support will commence. (Refer to

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Section 59054 of the Title 17 Regulations for detailed requirements of the Individual Behavioral Supports Plan.)

"Individual Behavior Supports Team" are individuals who contribute to the development, revision and monitoring of the Individual Behavior Supports Plan for consumers residing in an Enhanced Behavioral Supports Home. The teams shall, at a minimum, be composed of all four of the following individuals: (1) Consumer and, where appropriate, his or her conservator or authorized representative; (2) Regional center service coordinator and other regional center representatives, as necessary; (3) Licensee's qualified behavior modification professional; (4) Enhanced Behavioral Supports Home administrator; (5) Regional center clients' rights advocate, unless the consumer objects on his or her own behalf to participation by the clients' rights advocate; (6) any other individuals deemed necessary by the consumer, or where applicable, his or her conservator or authorized representative, if any, for developing a comprehensive and effective individual behavior supports plan.

"Planning Team" refers to the planning team defined in subdivision (j) of Section 4512 of the Welfare and Institutions Code, which develops and reviews a consumer's IPP through the planning process described in Sections 4646 and 4646.5 of Welfare and Institutions Code.

"Qualified Behavior Modification Professional" (QBMP) is an individual with a minimum of two years' experience in designing, supervising, and implementing behavior modification services and who is one of the following: (1) An Assistant Behavior Analyst certified by the National Behavior Analyst Certification Board as a Certified Assistant Behavior Analyst; (2) A Behavior Analyst certified by the National Behavior Analyst Certification Board as a Certified Behavior Analyst; (3) A Licensed Clinical Social Worker, pursuant to Sections 4996-4998.5 of the Business and Professions Code; (4) A Licensed Marriage and Family Therapist, pursuant to Sections 4980-4984.7 of the Business and Professions Code; (5) A psychologist, licensed by the California Board of Psychology; or (6) A licensed professional with California licensure, which permits the design of behavior modification intervention services.

"Registered Behavior Technician" (RBT) is an individual who is recognized by the National Behavior Analyst Certification Board as a certified Registered Behavior Technician.

LICENSURE REQUIREMENTS

The Enhanced Behavioral Supports Homes will be licensed for no more than four (4) beds (2 ambulatory, 2 non-ambulatory) by the Department of Social Services of the State of California as an Adult Residential Facility in accordance with Health and Safety Code section 1567.62(a). Each resident must have their own room. A certificate of program plan approval issued by DDS shall be a condition of licensure for the Enhanced Behavioral Supports Home. An Enhanced Behavioral Supports Home must have an operable automatic fire sprinkler system approved by the State Fire Marshal or local fire department as a condition of certification. DDS may decertify any Enhanced Behavioral Supports Home that does not comply with program requirements. Upon decertification of an Enhanced Behavioral Supports Home, DSS shall revoke the license of the Enhanced Behavioral Supports Home that has been decertified.

PURPOSE & SCOPE

The selected applicant(s) will be required to develop and operate the respective Enhanced Behavioral Supports Home for no more than four (4) adults who require intensive services and supports due to intellectual disabilities and/or severe behavioral needs. The individuals need community placement or deflection from Porterville Developmental Center, Springs, IMDs, or other restrictive setting. The homes will be located within the NLACRC catchment area. In addition, the homes will be located in a typical residential neighborhood having sufficient indoor and outdoor space for resident activities.

ENHANCED BEHAVIORAL SUPPORTS HOME SPECIFICATIONS

The Enhanced Behavioral Supports Home shall meet all requirements of California Code of Regulations, Title 17, Sections 59050 – 59072, and shall meet all applicable regulations contained in Welfare and Institutions Code, Section 4648.1, (c) (2) & (3); Division 2, Title 17 of the California Code of Regulations (CCR); and Division 6, Title 22 CCR. The selected service provider is required to abide by the Residential Services and Quality Assurance Regulations in Title 17, Division 2, Chapter 3, Subchapter 4. Sections 56001 to 56003, 56018 to 56033, 56040 to 56057; Subchapter 6. Section 56917; and Subchapter 24. Sections 59050 to 59072 as they apply to the operation, reporting, access, payment and monitoring requirements for residential facilities.

The following specifications are required of the EBSH:

- Private bedroom for each resident (no more than four residents)
- Fenced yard
- Highly structured program services, including night component with at least two awake staff
- Providing assistance to residents in accessing mental health resources, medical resources, other generic resources, or community treatment groups
- The home administrator, licensee, qualified behavior modification professional, the regional center service coordinator, and other regional center representatives, as necessary, the individual receiving services and his or her authorized representatives are required to comprise the Individual Behavior Supports Team and contribute to the individual behavior supports plan.
- The regional center Clients' Rights Advocate will participate in the Individual Behavior Supports Team meeting unless the resident objects on his or her own behalf to participation by the Clients' Rights Advocate.
- The regional center will conduct at least quarterly quality assurance visits using a format prescribed by DDS in addition to a minimum of quarterly face-to-face, onsite case management visits with each resident.
- A regional center qualified behavior modification professional shall visit with or without notice, the resident, in person, at least monthly in the Enhanced Behavioral Supports Home, or more frequently if specified in the resident's individual behavior supports plan.
- DDS shall conduct onsite visits to all the Enhanced Behavioral Support Homes at least every six months.

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- The administrator is responsible for coordinating the development and subsequent updating of each resident's Individual Behavior Supports Plan.
- The initial behavior supports plan shall be developed within one week of the individual's admission. The Individual Behavior Supports Team members shall provide their input for inclusion in the Individual Behavior Supports Plan within 30 days of the individual's admission, review the plan monthly and provide updated information as necessary.
- The Individual Behavior Supports Plan must be function-based, evidence-based, and target functionally equivalent replacement behaviors. Refer to Title 17 § 59060 for detailed requirements of Individual Behavior Supports Plan.
- Prior to vendorization, the vendoring regional center and the vendor shall execute a contract (service agreement).
- An Enhanced Behavioral Supports Home must have an operable automatic fire sprinkler system approved by the State Fire Marshal or local fire department as condition of certification.
- Required State Developmental Center Transition Program participation is facilitated by the Regional Center State Developmental Center Liaison and the Regional Resource Development Project at State Developmental Center.
- The selected service provider is required to coordinate and collaborate with the Regional Resource Development Project which will introduce the State Developmental Center Transition Team.
- The State Developmental Center Transition Team is composed of at the minimum of a physician, psychologist, and direct care staff who are most familiar with the individuals being referred to the EBSH.

APPLICANT QUALIFICATIONS

Applicants to this RFP must be able to demonstrate prior experience providing services and supporting individuals with developmental disabilities, such as a diagnosis of autism, and moderate to severe intellectual disabilities, severe behavioral needs, and mental health issues. Experience to include:

- Supporting individuals with intellectual and developmental disabilities;
- Supporting individuals with developmental disabilities with co-occurring mental health diagnoses;
- Supporting individuals with intellectual and developmental disabilities who may exhibit severely challenging behaviors, including assaultive behavior.
- Owning or operating a Level 7 Adult Residential Facility (ARF), formerly known as Specialized Residential Facility (SRF), or Enhanced Behavioral Supports Home (EBSH);
- Working with social service community-based agencies and resources;
- Working with individuals with intellectual and developmental disabilities who are in crisis, require hospitalization, or are at risk of frequent hospitalization;
- Working with and arranging services for people with intellectual and developmental disabilities; and
- Successfully providing 24/7 care, support, and supervision.

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The service provider must be able to work collaboratively with regional centers, mental health systems, day program services, consultants, etc., for the successful support of the individuals residing in the home.

PERSONNEL QUALIFICATIONS

ADMINISTRATOR: Have a minimum of two years of prior experience providing direct care or supervision to individuals with developmental disabilities; and be one of the following: (A) A Registered Behavior Technician (B) A licensed psychiatric technician (C) A qualified Behavior Modification Professional. Have possession of ARF Administrator certification, DSP I, DSP II, & NLACRC Residential Services Orientation certificates prior to provision of services to consumers.

DIRECT CARE LEAD STAFF: Have one-year prior experience providing direct care or supervision to individuals with developmental disabilities; and become a Registered Behavior Technician within 60 days of initial employment; or, be either: (A) A licensed psychiatric technician; or (B) A Qualified Behavior Modification Professional.

DIRECT CARE STAFF (DSP): Have six months prior experience providing direct care or supervision to individuals with developmental disabilities; and become a registered Behavior Technician within twelve months of initial employment. Have familiarity with charting, medication administration and side effects, collection of behavioral data, and positive behavior support. The DSP will have the ability to speak English and at least one DSP on duty will have the ability to speak the primary language of consumers. Direct care staff should possess skills and expertise to effectively manage assaultive behaviors and implement restricted health care plans, if indicated.

CONSULTANT HOURS: The administrator shall assign a qualified behavior modification professional to each consumer. A minimum of 6 hours per month of behavior consultation, which includes review, implementation, and training of direct care staff on behavior assessments and behavior interventions must be provided to each consumer by a Qualified Behavior Modification Professional. This time must be documented in the consumer file.

In addition to the hours required above, the facility administrator shall ensure provision of a minimum of 6 consultant hours per month per consumer, which must be appropriate to meet individual consumer service needs.

STAFF TRAINING

On-site Orientation – Within the first 40 hours of employment, the administrator shall ensure that direct care staff complete a minimum of 32 hours of on-site orientation. Refer to Title 17 § 59057 for the required training topics. Staff who have not completed the on- site training must work under the supervision of a fully trained direct care lead staff.

Emergency Intervention Training – In addition to the on-site orientation, the administrator shall ensure that direct care staff receive a minimum of 16 hours of emergency intervention training, which includes the techniques the licensee will use to prevent injury and maintain safety regarding consumers who are a danger to themselves or others and must emphasize positive behavioral supports and techniques that are

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alternatives to physical restraints, pursuant to Title 22 § 85165(c), including training on the emergency intervention techniques of Title 17, Sections 59060.1 through 59060.5. A direct care staff person may not implement restraints prior to successfully completing the emergency intervention training. Direct care staff's emergency intervention training is required to be renewed annually.

All staff, including the administrator, shall complete the Direct Support Professional competency-based trainings, segments I and II and pass the competency tests.

Continuing Education – A minimum of 25 hours of continuing education on an annual basis covering, but not limited to, the subjects specified in Title 17 § 59057(a), on-site orientation. The administrator shall require additional continuing education, as necessary, to ensure the continued health and safety of each consumer. CPR and First Aid certification shall be current at all times and CPR certification must be renewed annually.

RESIDENT PROFILE

- Adults
- Diagnosis of mild to profound intellectual mental disability
- May have dual diagnosis (developmental disability and mental illness)
- Autism Spectrum Disorder
- Ambulatory or non-ambulatory
- May require physical restraints during behavioral outbursts
- May require 2:1 staffing
- May have assaultive behaviors resulting injury to others
- May have severe self-injurious behaviors requiring medical attention
- May have judicial involvement
- May require Restricted Health Care Plan

Medical – Stable conditions including but not limited to seizure disorder, diabetes, insulin dependence, assistance with monitoring glucose levels, g-tube dependent, weight monitoring, and vitamin supplemental intake regimens.

Mental Health – Dual diagnosis (intellectual disability and mental illness), including depression, anxiety disorder, psychotic disorder, obsessive compulsive disorder, and neurotic disorder.

Self-Help – Capable of performing some of self-help skills with assistance. However, consumers may not be cooperative, or allow staff to perform activities of daily living.

Significant History/Services – May have an array of behavior challenges including the following behaviors: inappropriate sexual behaviors, physical aggression, frequent psychiatric hospitalizations, elopement, severe self-injurious behaviors, property destruction, and disruptive sleep patterns.

Individuals identified for an Enhanced Behavioral Supports Home may have history of placement at mental health institution(s), out-of-state placement(s) or unsuccessful placements in Service Level 6 (formerly Service Level 4I) Adult Residential Facilities and Specialized Residential Facilities (Service Level 7).

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History of physical aggression (running into others, head butting, hitting, pushing, kicking and scratching), self-injurious behavior (SIB) (biting, throwing self against hard surfaces, more severe forms of SIB), and lack of safety awareness. Both physical aggression and self-injurious behavior may cause severe physical injury which requires a physician's attention to the consumer or to others.

Recreational/Leisure – The identified vendor shall provide opportunities for structured, supervised leisure activities to promote socially appropriate behavior and release frustration and tension. Opportunities for water usage as a therapeutic venue (pool, Jacuzzi) will be provided by the vendor if it is determined by the planning team to be beneficial and preferable.

Supports Needed

- Behavioral intervention services, socialization skills and interpersonal relationship training, community inclusion services, crisis intervention, day programming, dietary services, support of consumers that are employed, recreation/leisure activities, and consistent medical services.
- 2:1 staffing during programming hours if needed
- Advocacy services
- Development and implementation of restricted health care plans, as necessary, and as specified in Title 22 Community Care Licensing Regulations.
- Acquisition and maintenance of adaptive equipment, if necessary
- Day Opportunities:
 - Resident(s) may be without a regional center funded day program for indefinite periods of time depending on individual choice and preference, or due to behavioral challenges.
 - A wide variety of community integration activities to include support of individuals in vocational services.
 - Provide appropriate approved services throughout the day when the resident(s) chooses not to attend day program(s), or is not accepted into a day program, or an appropriate day program is not available.
 - Center-based or community-based component depending on individual preference. Mental health day treatment service if appropriate.
 - May require close supervision while out in the community.

Applicants must adopt a non-reject policy toward individuals who meet the entrance criteria who are referred for services and a commitment for modifying supports to ensure continued stability.

VENDORIZATION PROCESS

Vendorization is the process for identification, selection, and utilization of service providers based on the qualifications and other requirements necessary in order to provide services to individuals. The vendorization process allows regional centers to verify, prior to the provision of services, that an applicant meets all of the requirements and standards specified in regulations and statutes.

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All material and information provided herein is for the sole use of the applicants applying for this RFP.

In addition to the qualifications outlined in the RFP below, all applicants must demonstrate familiarity with California Code of Regulations, Title 17 general provisions and be eligible for vendorization by NLACRC. All applicants must also demonstrate that they possess the necessary relevant professional experience and organizational capacity to create and sustain the provision of this service. Further, the facility described in this RFP is owned by a non-profit Housing Development Organization (HDO). Interested applicants are required to provide copies of audited financial statements to demonstrate financial ability to lease the facility directly from the HDO.

NLACRC invites all interested parties, meeting the qualifications described below, to review the information listed herein and submit a proposal to NLACRC for consideration. NLACRC appreciates your interest in responding to this RFP to meet the unique needs of adults in need of residential services.

RFP TIMELINE

November 14, 2025	Request for Proposals release date
November 20, 2025, 10:00 a.m.	Applicants' Conference Information Session
January 11, 2026, 11:59 p.m. (PST)	Deadline for receipt of proposals
January 12 – 30, 2026	Evaluation of proposals by selection committee
February 9 – 13, 2026	Interviews with highest ranking applicants, if applicable
February 27, 2026	Notice of selection emailed to applicants
March 31, 2026	Start-up contract signed

APPLICANTS' CONFERENCE INFORMATION SESSION

Applicants' Conference

An Informational Meeting to answer questions about this
RFP will be held on

Monday, November 20, 2025, at 10:00 a.m.

Join Zoom Meeting

<https://us06web.zoom.us/j/85209619688?pwd=PK8TUsatQV4AaNpd7lkWaFgtgt8M8.1>

Meeting ID: 852 0961 9688

Passcode: 154546

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PROPOSAL SUBMISSION DEADLINE

The deadline for submission of proposals is January 11, 2026, at 11:59 p.m. (PST).

All interested parties are invited to submit a proposal to NLACRC in accordance with the specifications contained in this Request for Proposal (RFP) for the development and operation of the EBSH.

A. BACKGROUND OF NLACRC

NLACRC is a private, nonprofit corporation, which contracts with the State of California's Department of Developmental Services (DDS), to provide services and supports to persons with developmental disabilities and their families in the San Fernando, Santa Clarita, and Antelope Valleys. Developmental disabilities include intellectual disabilities, epilepsy, autism, and cerebral palsy. The Internal Revenue Services (IRS) has established NLACRC as a 501(c)(3) corporation.

NLACRC serves more than 40,000 individuals within its catchment area. Services and supports provided by NLACRC include diagnostic, evaluation, case management, and early intervention services. In addition, NLACRC purchases services from over 1,500 entities or individuals in NLACRC's catchment area. The purchased services include, but are not limited to, out-of-home residential services, community-based day programs, transportation, independent living services, supported living services, Early Start services for children under the age of 3 years, family supports, such as day care or respite, and behavioral intervention services.

NLACRC's funding from DDS includes funding for both the operations of the regional center and the services purchased to support the individuals we serve. NLACRC's allocation from DDS for the most recently published fiscal year, 2023-2024 is \$ 834,980,751 of which \$ 98,349,464 is for regional center operations and \$736,631,287 is for Purchase of Services. NLACRC anticipates similar funding from DDS in future years.

B. RATE OF REIMBURSEMENT

The Department of Developmental Services established a rate methodology for Enhanced Behavioral Supports Homes that includes a Facility Component (Service Code 900) and an Individualized Services and Supports Component (service code 901) based on each consumer's needs as determined through an individual program plan process. Refer to CCR Title 17 § 59072 for additional information about the establishment of rates for an EBSH.

For the facility rate, the service provider selected shall submit DDS form DS 6023 to the regional center for review and written approval. The facility rate may not exceed the maximum rate of reimbursement to be determined by the DDS. The monthly facility rate is prorated based on the licensed capacity of the facility. The portion of the monthly facility rate due to vacancies is paid through a contract between the selected provider and the regional center. Prior to the facility reaching licensed capacity, the facility monthly rate is paid based on the licensed capacity of the facility. At six months from the initial placement in the facility, and at each subsequent 30 days, the

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vendor and regional center shall meet to determine if the portion of the facility rate funded through the contract due to vacancies will continue. Once the facility reaches maximum capacity, the facility monthly rate is paid based on the licensed capacity of the facility, despite temporary consumer absences or subsequent temporary vacancies, with vacancies funded through the contract.

"Temporary vacancy" here means a vacancy of 60 days or fewer. At 60 days of temporary vacancy, and at each subsequent 30 days, the vendor and regional center shall meet to determine if the portion of the facility rate funded through the contract due to the temporary vacancy will continue. The established facility rate is prorated for a partial month of service when a consumer is discharged from the facility.

For the individual rate, the service provider selected shall submit the completed DDS form DS 6024 to the regional center for review and written approval prior to a consumer's admission to the Enhanced Behavioral Supports Home. A consumer's Individual Behavior Supports Team shall review the consumer's individual costs within 60 days of initial placement, and at least annually thereafter, and submit an updated DDS form DS 6024 to the regional center within 30 days, for review and written approval. The monthly individual rate may not exceed the maximum rate of reimbursement to be determined by DDS. When a consumer is temporarily absent from the facility 14 days or less per month, the individual rate may be paid by the regional center for the full month. When the consumer's temporary absence is due to the need for inpatient care in a health facility, the regional center may continue to pay the established individual rate as long as no other consumer occupies the vacancy created by the consumer's temporary absence or until the individual behavior supports team has determined that the consumer will not return to the facility. Individualized services and supports funded by the regional center during a consumer's temporary absence shall be approved by the acting regional center director and shall only be approved in 14-day increments.

(Subject to DDS approval)

C. START-UP FUNDING

Start-up funds are awarded with the intent of defraying the cost to develop new services. Therefore, commitments in the form of hard (dollar) and/or soft (in-kind) contributions are necessary for each applicant receiving an award.

The maximum amount of start-up funding available for the project is in the project description at the beginning of this RFP. It is understood that the actual cost to complete the start-up of the facility may exceed this amount. Any additional costs will be the responsibility of the applicant. Payment of claims submitted to the regional center is contingent upon the provision of acceptable documentation including, but not limited to, invoices, receipts, and cancelled checks. Awardee is expected to operate the facility for a minimum of six (6) years. It is understood if the vendored ongoing service developed through the start-up contract is terminated before six (6) years of service, the Contractor shall pay back a portion of the start-up funds received for that service as follows: One sixth ($1/6^{\text{th}}$) of the total start-up funds received for the service will be forgiven for each year of service, and partial years of service will be prorated to a full year. For example, if Contractor terminates service two (2) years and three (3) months from the agreed upon start date of the services, the amount to be forgiven shall be calculated as three (3) years, inclusive of rounding partial year. Therefore, in this example, three

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(3) years equaling 3/6th or 50% of the total start-up payment shall be due from Contractor within seven (7) business days from the last day of service provision. Contractor's final payment for services shall not be released until repayment in full of any outstanding amount due to NLACRC resulting from termination prior to completion of six (6) years of service.

D. ELIGIBLE APPLICANTS

Both non-profit and proprietary organizations are eligible to apply. Employees of Regional Centers are not eligible to apply. Applicants must disclose any potential conflicts of interest per Title 17, Section 54314. Applicants, including members of the governing board, must be in active status in regard to all services vendored with any regional center and be financially solvent. Applicants that have been sanctioned in the last 12 months will not be eligible for vendorization.

E. APPLICANT PARTNERSHIPS AND MATERIALS SUBMITTED

Applicants who apply as partners must have full knowledge of the proposal packet and must demonstrate commitment to the project during start-up and ongoing operations. However, if a partner's sole purpose is to provide financial backing to the project, the financial backer need only show financial commitment. If the partner's role is only to provide technical support (e.g., drafting the RFP response), the applicant receiving such support is responsible for all language contained in the RFP and the eventual program design.

F. SELECTION PROCEDURES

All proposals received by the deadline will be reviewed and scored by the Proposal Selection Committee selected by NLACRC. Proposals will be reviewed for timeliness, completeness, quality, experience and fiscal stability of applicant, reasonableness of costs, ability of applicant to identify and achieve individual outcomes, and the ability of the applicant to respond to the identified needs of the proposed project. After preliminary review and scoring, an interview with the finalists will be scheduled.

Interviews for project NLACRC-2526-1 will be scheduled on weekdays between January 26 – 30, 2026, during the hours of 9:00 a.m. – 5:00 p.m.

Interviews for project NLACRC-2526-3 will be scheduled on weekdays between February 9 –13, 2026, during the hours of 9:00 a.m. – 5:00 p.m.

In addition to evaluation on the merit of the proposal, applicants will be evaluated and selected based on previous performance, including the timely completion of projects, a history of cooperative work with the regional center or other funders, ability to complete projects within budgeted amounts, and a record of accomplishment consistent with established timelines for development.

The final decision of the Proposal Selection Committee shall be approved by the Executive Director and is not subject to appeal. All applicants will receive notification of NLACRC's decision regarding their proposal.

G. RESERVATION OF RIGHTS

NLACRC 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. NLACRC 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. NLACRC reserves the right to withdraw this Request for Proposal (RFP) and/or any item within the RFP at any time without notice. NLACRC reserves the right to disqualify any proposal which does not adhere to the RFP guidelines. This RFP is being offered at the discretion of NLACRC. It does not commit the regional center to award any grant. Please note applicants must be in active status with NLACRC and other Regional Centers and may be disqualified for any of the following: receipt of Correction Action Plan (CAP), Sanction or Immediate Danger findings, failure to disclose any history of deficiencies or confirmed reports of abuse, previous failure to perform, or unwillingness to comply with Title 17 and NLACRC best practices.

H. COSTS FOR PROPOSAL SUBMISSION

Applicants responding to the RFP shall bear all costs associated with the development and submission of a proposal.

I. INQUIRIES/REQUEST FOR ASSISTANCE

All additional inquiries regarding this application or requesting technical assistance for this RFP only should be directed to resourcedevelopment@nlacrc.org. Technical assistance is limited to information on the requirements for preparation of the application packet. Applicants are expected to prepare the documentation themselves or retain someone to provide such assistance. If an applicant chooses to retain assistance from another party, the applicant must be able to thoroughly address all sections of the proposal during the interview process and/or demonstrate that the party assisting with the application will have a continuing role in the ongoing operation of the program.

J. PROPOSAL PREPARATION GUIDE

NLACRC PROPOSAL WRITING GUIDELINES

The applicant is required to submit an electronic copy in a **PDF format**. An applicant will be disqualified from consideration for failure to follow instructions, complete documents, submit required documents or meet the submission deadline. All proposals submitted must adhere to the following requirements:

- Format proposal to print on 8 ½" x 11" paper
- Proposal must be typed using a standard font (12 point).
- Every page must be numbered consecutively.
- Proposal Title Page must be the first page of the proposal.
- A Table of Contents that corresponds to the proposal must be included
- All items in section K. INFORMATION TO INCLUDE IN PROPOSAL must be addressed in the proposal

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The following information is provided to assist the applicant in preparing their proposal:

- Program Design Requirements ([Appendix 1](#))
- Sample Service Development Agreement ([Appendix 2](#))
- NLACRC Board of Trustees Service Provider Insurance Policy ([Appendix 3](#))
- NLACRC Board of Trustees Request for Proposals Policy ([Appendix 4](#))
- Statutes and Regulations ([Appendix 5](#))

K. INFORMATION TO INCLUDE IN PROPOSAL

1. Proposal Title Page ([Attachment A](#))
2. Table of Contents
3. Statement of Services, Developments, and Timeline
 - a. Include a brief description of services to be provided
 - b. Indicate whether you are currently in development of a residential facility with any other regional center with or without start-up grants
 - c. Provide a projected timeline to implement the project
4. Service Provider Experience & Qualifications
 - a. Provide an overview of the applicant's business, including an overview of services provided, business philosophy, business location(s), business hours, number of staff, mission statement, business history, etc.
 - b. Detail your company's experience in providing services and supports to individuals with developmental disabilities, complex behavior support needs and/or psychiatric comorbidities. Provide the typical profile of the people you have served with developmental disability(s), challenging behavioral and/or psychiatric comorbidities.
 - c. Describe the behavioral techniques and mental health interventions used to support individuals with challenging behavioral and/or psychiatric comorbidities.
 - d. Describe your experience operating a residential facility for adults.
 - e. Provide your process to recruit and retain quality staff.
 - f. Discuss commitments you will make to ensure staff continuity, including your staff turnover experience in the last three years.
 - g. Discuss how you will ensure that each employee has not been convicted of a crime involving fraud or abuse within ten years immediately preceding and during employment.
 - h. Provide information on your company's HIPAA security and privacy program.
5. Program Design Requirements (Refer to [Appendix 1](#))
6. Applicant/Vendor Disclosure Statement (Form DS 1891) ([Attachment B](#))
7. Statement of Obligation ([Attachment C](#))
8. Start-up Budget ([Attachment D](#))
 - a. The start-up budget amount should not exceed amount specified per project.
 - b. Additionally, specify the total start-up budget amount required which may exceed the funds available with hard (dollar) and/or soft (in-kind) commitments.
9. Facility Cost Statement – DS 6023 ([Attachment E](#))

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10. Organization Chart that maps the supervisory hierarchy including governing boards, advisory boards, as well as other programs or facilities operated by the organization, as applicable.
11. Resumes of Management and Consultants
12. Three (3) references with addresses and phone numbers, including permission for NLACRC to contact them
13. Business Entity Documents - business license, articles of incorporation, articles of organization, DBA, etc.
14. Independent audit report or review report, income tax, profit and loss statements, and balance sheets for the last three (3) years

L. SELECTION TIMETABLE

Project # NLACRC-2526-1

1. Applicants' Conference Information Meeting on Thursday, November 20, 2025, at 10:00 a.m., via Zoom
<https://us06web.zoom.us/j/85209619688?pwd=PK8TUsatQV4AaNapd7lkWaFgtgt8M8.1>
2. Proposals due to NLACRC no later than Sunday, January 11, 2026, by 11:59 p.m. (PST)
3. Interviews January 26 – 30, 2026, between the hours of 9:00 a.m. – 5:00 p.m.
4. Selection by February 2, 2026
5. Finalize vendorization/contract paperwork: Friday, February 3, 2026
6. The service provider awarded contract should be executed by Monday, March 2, 2026

Project # NLACRC-2526-3

7. Applicants' Conference Information Meeting on Thursday, November 20, 2025, at 10:00 a.m., via Zoom
<https://us06web.zoom.us/j/85209619688?pwd=PK8TUsatQV4AaNapd7lkWaFgtgt8M8.1>
8. Proposals due to NLACRC no later than Sunday, January 11, 2026, by 11:59 p.m. (PST)
9. Interviews February 9 – 13, 2026, between the hours of 9:00 a.m. – 5:00 p.m.
10. Selection by February 27, 2026
11. Finalize vendorization/contract paperwork: Friday, March 27, 2026
12. The service provider awarded contract should be executed by Tuesday, March 31, 2026

M. SUBMISSION OF PROPOSALS

All proposals must conform to the attached Proposal Writing Guidelines and Content Requirements. The applicant must submit the completed proposal to NLACRC at resourcedevelopment@nlacrc.org. Submissions that are too large to submit in one email may be sent in multiple parts, but must be clearly labeled as such (e.g., Part 1/3, Part 2/3, etc.). Proposals that are faxed, mailed, or dropped off at NLACRC reception will not be accepted. No proposals will be accepted after the submission deadline.

DEADLINE FOR SUBMISSION OF PROPOSALS

Sunday, January 11, 2026, 11:59 p.m. (PST)

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N. EVALUATION CRITERIA

The Proposal Selection Committee will use the criteria below to rate proposals submitted by potential providers. Each proposal shall be organized according to section K. INFORMATION TO INCLUDE IN PROPOSAL above. The scoring of proposals will determine which finalists will move forward to the interview process. Each section of the submitted proposal will receive a maximum score as follows:

Proposal Section	Maximum Score
Fiscal Responsibility	30 points
Budgets – Start-up and Facility Rate	10 points
Agency/Individual Experience and Background	10 points
Agency Organization and Program Staffing	10 points
Start-up Activities/Objectives and Milestones	10 points
Program Design	30 points
Total Maximum Points	100

O. TIMELINE FOR DEVELOPMENT

For project # NLACRC-2526-1, it is anticipated that the applicant awarded start-up funds through this RFP will be operating the facility by July 1, 2026. For project # NLACRC-2426-3, it is anticipated that the applicant awarded start-up funds through this RFP will be operating the facility within one (1) year after the contract has been executed.

P. SELECTION PROCEDURES

All proposals received by the deadline will be reviewed and scored by the Proposal Selection Committee established by NLACRC. The Proposal Selection Committee shall be comprised of at least four (4) members, the majority of whom shall have experience in evaluating, procuring, or providing CPP/CRDP services. Proposals will be reviewed for completeness, experience, qualifications, fiscal stability of applicant, reasonableness of costs, and the ability of applicant to identify and achieve individual outcomes, and the ability of the proposed project to address identified needs of NLACRC. The Proposal Selection Committee will conduct interviews of finalist applicants as determined by the proposal scoring criteria.

Q. AWARD PROCESS

Upon selection of EBSH service provider, NLACRC will issue an Award Letter to the applicant selected for the provision of residential services. The award letter will provide instructions for completing the contracting process. The applicant selected will be expected to complete and submit all required documentation to complete the contracting process by March 31, 2026.

R. PROTEST PROCEDURE

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Within thirty (30) days of selecting the applicant, NLACRC shall post on its website the intent to award notice to include the applicant selected and the contract award date. All unsuccessful applicants shall be notified by NLACRC in writing ten (10) days prior to posting the intent to award notice on NLACRC's website. All unsuccessful applicants have the right to protest NLACRC's notice of intent to award the contract. Unsuccessful applicants shall have ten (10) days upon receipt of intent to award notice to protest the intent to award the contract ("Protest"). If the unsuccessful applicant does not submit the written Protest within the ten (10) day period, NLACRC shall deny such Protest and the Intent to Award notice shall be deemed final. Protests shall be in writing and shall state the grounds(s) for the protest. All Protests must be mailed, emailed, or faxed to the following address:

Arshalous Garlanian, Community Services Director
North Los Angeles County Regional Center
9200 Oakdale Avenue, Suite 100
Chatsworth, CA 91311
agarlanian@nlacrc.org

NLACRC shall take one of the following steps below, within thirty (30) days upon receipt of a written Protest:

- 1) Not award the contract until the protest has been withdrawn or the regional centers has resolved the protest; **OR**
- 2) Terminate the CPP process by notifying all bidders in writing within ten (10) days after the decision to terminate the contract award process; and correct the disputed items and rebid the contract.