



JUSTIFICATION FOR EXCEPTIONS TO COMPETITIVE PROCUREMENT

It is the policy of the Board that the County conduct an open, fair and full competitive solicitation process for the procurement of goods and/or services, with exemptions for certain goods, services and classes of procurement, and case-by-case exceptions, subject to a detailed review and approval process. The residents of Santa Clara County are best served when sound business decisions are made through a full and open competitive bidding processes. There may be certain instances when exceptions are warranted and justifiable. When a County agency/department recommends that competitive bidding is not practicable or in the best interest of the tax payers, appropriate justification supporting an exception must be submitted to the Procurement Department. Should you have any questions, please do not hesitate to contact: Matthew Hada, Director of Procurement at (408) 491-7401.

Date of Submission:	12/20/2023
Submit Document via Requisition	Refer to the Contact and Commodity Assignment List for buyer code guidance.

SECTION I

Proposed Contractor/ Consultant:	Community Health Partnership				
Total Estimated Value of the Award:	\$ 1,935,000.00	Start Date:	03/01/2023	End Date:	08/31/2028
Description of Good/Service:	Overdose Prevention through Community Health Clinics				
User Budget Unit - Agency/Dept:	0410 - Public Health	Agency/Dept Abbreviation:	PHD		
Name of Requestor:	Sara Stahlberg	Phone #:			

SECTION II

Mark appropriate box for Contract's Signature Authority

<input checked="" type="radio"/>	Board of Supervisors
<input type="radio"/>	Delegated to Department Head or designee
<input type="radio"/>	Director of Procurement

SECTION III

Pursuant to Board Policy 5.6.5.1 (D)(2), the following are **EXCEPTIONS** to competitive bidding. Select the appropriate exception. *Agencies/ Departments requesting an Exception must provide documentation to establish there is only one source or it is otherwise in the County's best interest to waive the required bidding procedures.*

<input type="radio"/>	Sole Source: Pursuant to Board Policy 5.6.5.1 (D)(2)(a)(i) a Sole Source Procurement is a sourcing method used to procure a service without competition when it has been determined that there is only one source for the required service that is capable of meeting the requirements of the acquisition as defined in the Scope of Work or specification.
<input checked="" type="radio"/>	Single Source: Pursuant to Board Policy 5.6.5.1 (D)(2)(a)(ii) a Single Source Procurement is a sourcing method used to procure a service from one source, without soliciting competition, even though there are other vendors that can provide the service as defined in the scope of work or specification.

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SECTION III (cont.)



Patent Rights: Pursuant to Board Policy 5.6.5.1(D)(2)(b), competition is precluded because of the existence of patent rights, copyrights, secret processes, control of the basic raw material(s) or similar circumstances, and there is no equivalent item or service.



Absolute Compatibility: Pursuant to Board Policy 5.6.5.1(D)(2)(c), the following are Exceptions to Competitive Procurement for Goods/Professional Services. Select the appropriate exception:

(i) Replacement parts or components for equipment – performs the same function in the equipment.

(ii) Replacement parts or components for equipment – prevent compromise of safety or reliability of product or void or invalidate manufacturer’s warranty or guarantee.

(iii) Upgrades, enhancement or additions to hardware or software - compatibility

SECTION IV

PURPOSE OF THE PURCHASE - Please describe the minimum requirements and the benefits of making the acquisition.

In September 2023, the County was awarded a five-year cooperative agreement from the Centers for Disease Control and Prevention (CDC) for Overdose Data to Action (OD2A). Deliverables, to be implemented through August 2028, are focused on overdose prevention via strategies for linkage to and retention in care, harm reduction, stigma reduction, promotion of clinical best practices, and development of a data surveillance system. All strategies are expected to be completed in healthcare, community, and public safety settings. PHD allocated the \$1,935,000 total (across five years) budget towards working directly with and within community health clinics on all strategy areas.

PHD requires the services of a local community health clinic consortium that has relationships and access to a variety of community health centers within the county to:

- Provide patient education on harm reduction resources and tools, such as Fentanyl Test Strips and Naloxone for overdose reversal.
- Serve as a central coordinating body for promoting quality improvement, clinical best practices, and guideline concordant care for treating substance use disorder across community-based health centers.
- Hiring and placing peer mentors / navigators in clinics to support linkage to treatment and social services.
- Distribution of harm reduction educational materials and supplies via community health centers.

Although there are a few health centers and organizations in Santa Clara County that serve community, PHD requires the support of a contractor that has specific experience supporting a consortia of community health centers through centralized coordination, quality improvement activities, provider education / training infrastructure, and a diversity of clinical settings throughout the county. Without the services of such an organization, PHD will be unable to fulfill key deliverables in the cooperative agreement with the CDC.

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SECTION V

MARKET RESEARCH - Please describe your market research and the results thereof. This should include a description of similar sources or products available in the market, if any, and why they are not acceptable.

A search for organizations providing technical assistance, support, and coordination specifically for community health clinics in Santa Clara County identified 3 organizations that appear most qualified to coordinate overdose prevention activities in community health settings. However, further review of their services and scope eliminated all but one based on centralized infrastructure, clinical relationships, and populations served.

- Bay Area Community Health (BACH): BACH provides health and social services in Santa Clara and Alameda Counties, primarily for low-income families and individuals. BACH operates a dozen clinics, including school-based health centers, in Santa Clara County. These clinics provide a range of services - including medical, behavioral health, and specialty healthcare. BACH also provides support programs for specific areas such as women's health, teen wellness, HIV care, linkages for people experiencing homelessness, and support for transgender patients. BACH is currently contracted by the PHD Harm Reduction Program to provide low-barrier medication assisted treatment (MAT) referrals for a program called Bay Area Medication Assisted Treatment (BAMAT). This is a service available to clients who visit the County's mobile harm reduction vehicles and is in operation through June 2024.

- Roots Community Health Center (Roots): Roots provides support for medical and behavioral health care, health navigation, workforce development, outreach, and advocacy. Roots' mission is centered on uplifting the African/African- Ancestry communities that have been impacted by systemic inequities and poverty. As an organization, they provide clinical services, outreach and transitional care, training for healthcare providers, and community capacity-building. In terms of direct services, they provide both medical and behavioral healthcare, navigation, and case management. Most of Roots' programs and services support Oakland and the broader East Bay. Of their 12 health center locations, only two are within Santa Clara County.

- Community Health Partnership (CHP): CHP is a consortium of federally qualified health centers and other community health clinics providing accessible and culturally competent healthcare, particularly to uninsured and under-insured communities, via over thirty (30) health clinics throughout Santa Clara County. CHP centrally provides coordination, leadership, training, and quality improvement activities to support member health centers and clinics. CHP also oversees an opioid disorder project that uses a population health approach for identifying and managing patients with potential opioid use disorder and to reduce the rate of opioid prescriptions for patients of CHP member health centers. The program assists health centers by providing training, technical assistance, and support to health centers with developing workflows to create patient registries and team-based approaches to management.

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SECTION VI

BEST INTEREST OF THE COUNTY – Please provide a detailed description as to why a waiver of formal bidding is in the County’s best interest (e.g. product standardization, compatibility, proprietary access or distributorship and the consequences of not doing so. NOTE: A lack of advance planning, loss of funding, or insufficient time are not an acceptable justification for exceptions.)

A review of organizations providing services in community health settings yielded just one that has the network, capacity, and expertise needed to effectively and expansively implement overdose prevention activities across multiple community health center settings. That organization is Community Health Partnership (CHP).

Waiving formal bidding and working with CHP as a single-source contract, will allow the organization to work with the Public Health Department and their member community health clinics to plan, implement, and evaluate overdose prevention strategies. The consequence of not waiving formal bidding will delay implementation of this work, which may not be in the County's best interest due to the limited number of organizations that have the capacity, experience, network, and interest in doing this kind of work. A formal RFP or ICP would also likely result in a panel recommending the County award a contract to CHP based on their capacity and existing relationships and partnerships.

SECTION VII

FUTURE PLANS - Please describe the actions the department/agency will take to overcome the present barriers to competition prior to any future purchases of this product or service if this exception is approved.

Future contracts with organizations implementing activities in and with community health centers may have different scopes - which could allow for a broader number of organizations to participate in a bidding process. Future work may not necessarily require that organizations operate a network / consortium of clinics in quite the same way, and may not involve overdose prevention as a specific aim.



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SECTION VIII

SCOPE OF WORK/SPECIFICATIONS - Please provide all scopes of work or stated specifications. Use an attachment for additional pages. SOW must include these elements: Objective (well-defined, quantifiable expected results include any significant deliverables & milestones) and Scope (what the work should or should not include; brief description of services desired; location of work). Do not include contract language vendor information or pricing.

Program Coordination

- Represent the consortium of community health centers at program planning meetings and coalitions with PHD and other County agencies on a monthly basis
- Provide feedback to PHD regarding outreach materials, services, and best practices
- Distribute educational and outreach materials via community health centers (CHCs)
- Assess impact of all strategies through close collaboration with PHD internal evaluation and epidemiology teams by facilitating data collection / sharing

Linkage to and Retention in Care

- In at least two sub-contracted health center locations, facilitate linkage to treatment or additional social services either within or outside of the clinical setting as indicated by need (e.g. shelters, food pantries, financial assistance, and other social services)
- Utilizing peer navigators and other outreach staff, identify and support patients who may not yet be connected to services
- Where appropriate, receive referrals for Medication Assisted Treatment (MAT) from clients to the Harm Reduction program

Clinical Best Practices

- Report monthly to the CHP Medical Directors regarding programs, services, and resources that the County and others are developing and/or implementing to ensure saturation
- Provide backbone support and logistics for coordinating clinical best practice trainings for healthcare providers

Harm Reduction

- Facilitate harm reduction education and outreach via peer mentors / navigators
- Develop and implement plans to make naloxone available via vending machines or another distribution method at all community health center locations
- Sub-contract with two (2) community health centers serving high need populations to facilitate access to medication assisted treatment (MAT), routine testing, counseling, and support for clients experiencing opioid or stimulant use disorder (OUD / StUD)
- Through sub-contracted clinics, hire and train 2.0 FTE peer mentors to support naloxone distribution, availability of fentanyl test strips
- Train patients and community members on self-administration and other harm reduction practices

Stigma Reduction

- In at least two sub-contracted health centers, client facing staff to participate in stigma reduction trainings offered by SCCPHD
- Post / distribute stigma reduction campaign materials and/or educational resources in client-facing settings

Data / Surveillance / Evaluation

- Evaluate efficacy of strategies via quantitative and qualitative data collection, analysis, and sharing with the PHD team
- Share intervention and patient outcome data with PHD on a quarterly basis
- Participate in quality improvement exercises and program

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SECTION IX

Requesting Agency/Department Contracts Manager:	Print Name: Kassie Quiroz
	Signature: DocuSigned by: <i>Kassie Quiroz</i>
	Phone: 669-260-2966 <small>20E12FA6D5114A2...</small>
	Email: kassie.quiroz@phd.sccgov.org
Requesting Agency/Department Director:	Print Name: Sarah L. Rudman, MD
	Signature: DocuSigned by: <i>S. L. Rudman</i>

SECTION X

Decision and Required Steps Following Decision (to be completed by OCCM or Procurement)

<input type="radio"/>	Approved	<input type="radio"/> Attach to Legislative File <input type="radio"/> Attach to Delegation of Authority Coversheet <input type="radio"/> Attach to Service Agreement Checklist <input type="radio"/> Attach to PO/Contract File
<input checked="" type="radio"/>	Approved with Conditions	Comments: Approval is contingent upon department receiving FERC approval before execution of contract. Department to pursue Board approval once MFO crosses DOP signature threshold of \$200K per FY or \$1M. over 5 years.
<input type="radio"/>	Additional Information Required	Comments:
<input type="radio"/>	Denied with Recommended Action	Comments:

SECTION XI

Office of Countywide Contracting Management/Procurement Department Signature

DocuSigned by: <i>Matthew Hada</i> <small>CEA090A27EB84EA...</small>	Date: 1/19/2024
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