



Board of County Commissioners

Health/Human Services/Education Committee

**RESOLUTION AWARDING RENEWAL CONTRACTS FOR PROVIDING DRUG AND ALCOHOL TREATMENT SERVICES-REBID FOR THE SALEM COUNTY ALCOHOL AND DRUG SERVICES OFFICE**

**WHEREAS**, the Salem County Purchasing Agent as authorized Contracting Agent for the Board of County Commissioners of the County of Salem requested, received, and opened sealed proposals on April 7, 2020, at 11:00 AM prevailing time for Drug and Alcohol Treatment Services for the Salem County Alcohol and Drug Services Office; the receipt of which proposals was duly advertised in accordance with the law and in such case made and provided; and

**WHEREAS**, the Salem County Board of Chosen Freeholder awarded contract for several services on April 15, 2020 by Resolution 2020-137; and

**WHEREAS**, no proposals were submitted for Halfway House Services; Outpatient/Intensive Outpatient Services; Evaluation Services and Inter and Intra County Transportation Services; and

**WHEREAS**, the Salem County Purchasing agent as authorized Contracting Agent for the Board of County Commissioners of the County of Salem, requested, received and opened sealed proposals on May 27, 2020 at 11:30 AM prevailing time for Drug and Alcohol Treatment Services-REBID for the Salem County Alcohol and Drug Services Office; the receipt of which proposals was duly advertised in accordance with the law and in such case made and provided; and

**WHEREAS**, the Salem County Board of Chosen Freeholder awarded contract for several services on June 3, 2020 by Resolution 2020-194; and

**WHEREAS**, all proposal results and recommendations for contract award are on file in the office of the Purchasing Agent, 110 5<sup>th</sup> Street, Suite 400 in the County of Salem, Salem, New Jersey, as required by law; and

**WHEREAS**, both parties to these contracts wish to exercise a one-year renewal option of said contract; and

**WHEREAS**, Daytop Village of NJ, Inc. has been acquired by Acenda Integrated Health who has agreed to assume the said contracts (3) with the same terms and conditions; and

**WHEREAS**, the Salem County Treasurer has certified that the funding for these contracts shall be encumbered in accordance with N.J.A.C. 50:30-5.4 and this agreement shall further be contingent upon the availability and appropriation of sufficient funds for this purpose in the County's 2021 Temporary Budget of the County of Salem under the item Alcohol Comprehensive Grant G-02-41-701-21C-303.

**NOW, THEREFORE, BE IT RESOLVED** by the Board of County Commissioners of the County of Salem as follows:

- 1. The Board of County Commissioners of the County of Salem hereby awards the following contracts commencing, retroactively on January 1, 2021 and terminating December 31, 2021 with three (3) additional one (1) year renewal options available pursuant to N.J.S.A. 40A:11-4.2 as follows:

1) Education/Prevention Services	EduCare	\$20,000.00
2) Sub-Acute Detoxification Services	New Hope Integrated Behavioral Healthcare	\$15,000.00
3) Short Term Residential Services	New Hope Integrated Behavioral Healthcare	<u>\$12,000.00</u>
	<b>TOTAL NEW HOPE</b>	<b>\$27,000</b>
4) Sub-Acute Detoxification Services	Maryville, Inc.	\$15,000.00
5) Short Term Residential Services	Maryville, Inc.	\$8,000.00
6) Sober Living/Recovery Housing Services	Maryville, Inc.	<u>\$20,000.00</u>
	<b>TOTAL MARYVILLE</b>	<b>\$43,000</b>


7) Outpatient/Intensive Outpatient Services	Acenda Integrated Health	\$10,000.00
8) Evaluation Services	Acenda Integrated Health	\$2,000.00
9) Halfway House Services	Acenda Integrated Health	<u>\$9,581.00</u>
	<b>TOTAL ACENDA</b>	<b>\$21, 581.00</b>
10) Halfway House Services	The Hendricks House Group	\$10,000.00
11) Intra-Inter County Transportation Services	B. R. Williams. Inc.	\$15,000.00

**Grand Total** **\$136,581.00**

2. The Freeholder Director and the Clerk of the Board shall be authorized to execute said contracts upon compliance by the bidder with bond and insurance requirements of the specifications.

  
 \_\_\_\_\_  
 GORDON J. OSTRUM, JR., County Commissioner  
 Chair, Health/Human Services/Education Committee

I hereby certify the foregoing to be a true resolution adopted by the Salem County Board of County Commissioners on January 20, 2021.

  
 \_\_\_\_\_  
 STACY L. PENNINGTON  
 Clerk of the Board

RECORD OF VOTE

COMMISSIONER	RESOLUTION MOVED	RESOLUTION SECOND	AYE	NAY	ABSTAIN	ABSENT
G. Ostrum, Jr.	✓		✓			
E. Ramsay			✓			
L. Ware		✓	✓			
R.S. Griscom			✓			
B. Laury			✓			

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$20,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Education/Prevention Drug and Alcohol Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	Lori T. Singley

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$15,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Adult Detoxification Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	New Hope Foundation

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$12,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Adult Residential Drug and Alcohol Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	New Hope Foundation

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$15,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Adult Detoxification Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	Maryville, Inc.

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan, Treasurer** of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$8,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Adult Residential Drug and Alcohol Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	Maryville, Inc.

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$20,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Sober Living/Recovery Housing
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	Maryville, Inc.

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**



## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan, Treasurer** of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$10,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Intensive Outpatient and Outpatient Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	ACENDA, Inc.

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$2,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Evaluation Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	ACENDA, Inc.

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$9,581.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Halfway House Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	ACENDA, Inc.

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan, Treasurer** of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$10,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Halfway House Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	Hendricks House

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan**, Treasurer of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$15,000.00
<b>ACCOUNT NAME:</b>	Alcohol and Drug Comprehensive Grant
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Transportation Services
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	B.R. Williams

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**

## CERTIFICATION OF AVAILABILITY OF FUNDS

**NOTE TO COUNTY DEPARTMENTS:** This form is to be prepared by each department entering into a contract with a vendor when a resolution is required to be adopted by the Board of Chosen Freeholders of the County of Salem.

This form must accompany the resolution, and must be submitted with the resolution to the Finance Officer for approval by the Finance Officer at least one week prior to the Freeholder meeting at which it will be presented for adoption.

The contract/agreement between the County and the vendor shall be further contingent upon availability and appropriation of sufficient funds for this purpose in the County's Temporary and Permanent Budget. *If grant funds are utilized, this contract/agreement is further contingent upon the grants funds availability during the appropriate grant period.*

---

I, **Kelly Hannigan, Treasurer** of the County of Salem, hereby certify in accordance with **Section 5:34-5 of the Local Public Contracts Guidelines and Local Public Contracts Regulations** that adequate funds for the contract listed below are available.

I further certify that the funds are contained in the **OFFICIAL BUDGET** of the County of Salem under the item listed below.

<b>AMOUNT:</b>	Not to exceed \$ 20,569.00
<b>ACCOUNT NAME:</b> Alcohol and Drug Comprehensive Grant	
<b>ACCOUNT #:</b>	G-02-41-701-21C-303
If this is an extension of a grant, the letter from the grantor agency approving the extension must be attached to this form in order for this to be approved by the Treasurer.	
<b>FOR:</b>	2021 Alcohol and Drug Comprehensive Grant Matching Funds
<b>DATE:</b>	January 20, 2021
<b>VENDOR:</b>	County of Salem

  
\_\_\_\_\_  
**KELLY HANNIGAN, TREASURER**