

ADDENDUM #006

Solicitation Number: FDC ITN-17-112
Solicitation Title: In-Prison Substance Abuse Treatment Services
Opening Date/Time: June 15, 2017 at 2:00 p.m., Eastern Time (ET)
Addendum Number: 006

Failure to file a protest within the time prescribed in Section 120.57(3), Florida Statutes, or failure to post the bond or other security required by law within the time allowed for filing a bond shall constitute a waiver of proceedings under Chapter 120, Florida Statutes.

Please be advised that the changes below are applicable to the original specifications of the above referenced solicitation. Added or new language to the ITN is highlighted in **yellow**, while deleted language has been struck.

This Addendum includes the Department's answers to written questions received.

This Addendum also includes the following revisions:

Change No. 1:

A change to Section 2.7 to revise the below:

2.7 Pricing Methodology

The Department is seeking pricing that will provide the best value to the State; therefore, interested Vendors must submit a Cost Reply, utilizing the Price Information Sheet, Attachment III. Vendors are encouraged to submit a Cost Reply in such a manner as to offer the most cost effective and innovative solution for services and resources, as cost efficiency for the State will be a consideration in determining best value. Vendors must provide the Cost Reply in accordance with the instructions in Sections 4.8 and 4.9.

The awarded Vendor(s) shall be compensated at a fixed price, per **diem rate, per participant**, ~~staff position~~ for the provision of substance abuse services. ~~The Department will pay the Vendor by position, for the number of approved Vendor staff positions on an hourly basis, for the provision of substance abuse services,~~ as established in Attachment III, Price Information Sheet.

Change No. 2:

A change to Section 3.4.1, C., to revise the General Program Requirements (GPR) No.'s GPR-012, GPR-035, GPR-036, GPR-038, and GPR-039 below:

General Program Requirements (GPR)	
No.	Requirement
GPR-012	Each Vendor shall maintain at least one administrative office in the State of Florida and sufficient administrative staff shall have a minimum of one regional Program Administrator and one regional Clinical Administrator to manage operations within the awarded region in Florida. The administrative staff shall have the ability to travel, meet, and work directly with the Department's Contract Manager, Local Contract Coordinator, Quality Assurance Manager and Local Quality Assurance Manager.

General Program Requirements (GPR)

GPR-035

The Vendor shall provide the following positions:

Program Director/Clinical Supervisor/Qualified Professional: A minimum one position per program. The **Program Director/Clinical Supervisor/ Qualified Professional** shall provide oversight of all substance abuse services, prevention through aftercare, and provide clinical supervision to substance abuse program staff.

Counselors: A minimum number of positions as deemed necessary to maintain clinical staff levels as authorized by the Department.

Program Type	Counselor to Client Ratio Shall Not Exceed
Prevention	1:50 4:75
Outpatient	1:50
Intensive Outpatient	1:25
Residential Therapeutic Community	1:15
Aftercare	1:50

Clinical Support: A minimum number of one position per 68 clients in a Residential Therapeutic Community.

Prevention Specialist Counselor: A minimum of one position per 50 Prevention clients.

Clerical: A minimum of one Clerical position ~~per 85 clients.~~ **for up to 136 treatment slots, and one-half (½) position for each additional 68 treatment slots.**

In addition, the Vendor may establish any other additional positions deemed necessary to meet the requirements of any contract as a result of this ITN.

GPR-036

The Vendor shall employ only highly trained and qualified staff who possess the minimum qualifications outlined below for each position, inclusive of interim staff. The Vendor shall provide the Department with a copy of the staff's resumes.

Program Director/Clinical Supervisor/Qualified Professional

The Vendor shall ensure that the Program Director/Clinical Supervisor/**Qualified Professional** designated for this project meets the standards of a "Qualified Professional", in accordance with Chapter 397, FS. In addition, Program Directors/Clinical Supervisors in Long-term Residential Therapeutic Communities shall have either (A) Two years' experience in a therapeutic community (TC) setting; or (B) Two years of management experience as a Program Director/Clinical Supervisor and successfully complete a TC experiential training prior to assuming the position as Program Director/Clinical Supervisor.

General Program Requirements (GPR)

Counselor/Aftercare Counselor

The Vendor shall employ only qualified counselors who possess the following minimum qualifications:

- A Bachelor's Degree from an accredited college or university in any of the social sciences; and six months of professional experience in chemical addiction counseling and/or mental health counseling; or
- A Bachelor's Degree from an accredited college or university in any unrelated area of study; and one year of professional experience in chemical addiction counseling and/or mental health counseling; or
- A Master's Degree from an accredited college or university in any of the social sciences; and six months of professional experience in chemical addiction counseling and/or mental health counseling; or
- A Master's Degree from an accredited college or university in any unrelated area of study; and one year of professional experience in chemical addiction counseling and/or mental health counseling; or
- A Ph.D. from an accredited college or university in chemical addiction counseling and/or mental health counseling; or
- A Ph.D. from an accredited college or university in any unrelated area of study; and one years of professional experience in chemical addiction counseling and/or mental health counseling; or
- Certified Addictions Professional (CAP), Certified Criminal Justice Addictions Professional (CCJAP), Certified Associate Addictions Professional (CAAP), Certified Criminal Justice Associate Addictions Professional (CCJAAP); or
- An Associate's Degree from an accredited college or university and four years of professional experience in chemical addiction counseling and/or mental health counseling; or
- A High School diploma/GED and six years of professional experience in chemical addiction counseling and/or mental health counseling.

Prevention Specialist Counselor

- High School diploma or its equivalent, and minimum two years' experience working in a counseling or chemical addictions field; or
- An Associate's degree or Bachelor's degree in any unrelated area of study from an accredited academic institution and one year of experience in the counseling or chemical addictions field; or

General Program Requirements (GPR)

- A Bachelor’s degree from an accredited academic institution in any of the social sciences and six months experience working in the counseling or chemical addictions field.

Clinical Support

- High School diploma or its equivalent, and minimum two years’ experience working in a counseling or chemical addiction field; or
- An Associate’s degree or Bachelor’s degree in any unrelated area of study from an accredited academic institution and one year experience in the counseling or chemical addictions field; or
- A Bachelor’s degree from an accredited institution in any of the social sciences.

Clerical

High School Diploma or G.E.D. and minimum one year clerical work experience.

The Department may grant an education/experience waiver in extraordinary circumstances if a prospective candidate for employment possesses exceptional qualifications. In such cases, the Vendor shall submit a waiver request specifically documenting the exceptional qualifications in writing to the Local Contract Coordinator, who will forward the request to the Contract Manager for review and approval. Waiver request packets shall include the prospective employee’s resume and all documentation in support of the request, including an individual training plan. The Contract Manager will provide a written response to each request within five business days of receipt of a complete waiver request packet. It is the position of the Department that waivers will be granted only in exceptional circumstances. Requests for waivers will not be granted for Program Director/Clinical Supervisor/Qualified Professional positions with regard to the Qualified Professional requirement.

GPR-038

The weekly work period is defined as 40 hours per week.

When an absence in a position in excess of 14 continuous calendar days, the Vendor shall provide a qualified interim staff member who meets the minimum qualifications for that position. ~~If no interim member is provided, the Vendor shall prorate the bill for every hour the position remains vacant.~~

Under most circumstances, temporary/interim staff may not occupy positions for longer than 30 consecutive calendar days. However, the Vendor may request that a qualified interim staff member be permitted to occupy a position for up to 180 consecutive calendar days in cases where permanent staff will be absent for an extended time period (e.g., sickness, maternity, paternity, family, or military leave, etc.). The Vendor shall submit such requests in writing, with supporting documentation, to the Department’s Local Contract Coordinator for written approval. If approved, such position will not be considered vacant.

Shifting of an approved, permanent employee to an interim staff position is prohibited.

Any position with a permanent employee who is absent for a consecutive period of more than 80 hours shall be deemed a vacant position, unless an extended period of

General Program Requirements (GPR)	
	<p>absence has been previously approved by the Department. The Vendor shall still be required to fill this position with a qualified full-time interim counselor.</p> <p>Absence from the work site for purposes of non-Departmental sponsored meetings/training shall be requested and approved in advance by the Department's Contract Manager or designee.</p>
GPR-039	<p>In addition to the above, a position is considered vacant if:</p> <ol style="list-style-type: none"> 1) The position has never been filled; 2) Staff occupying position resigns; 3) Staff occupying position is terminated; 4) Staff abandons position; or 5) The position has been filled by an interim staff for more than 30 consecutive calendar days without written approval by the Department. <p>The following applies to invoice proration for vacant staff positions:</p> <ol style="list-style-type: none"> 1) 30 days after Contract execution the Vendor shall provide the Department's Contract Manager, or designee, the base hourly rate for all positions specified in this ITN. This information shall be updated annually. 2) The Vendor shall pro-rate the hourly salary related to any vacant position, not filled with a qualified interim staff member, and continue to pro-rate until filled with a full-time qualified interim/permanent staff member.

Change No. 3:

A change to Section 3.4.1, D., General Program Performance Measures, to revise the below:

Performance Measures (PM)				
No.	Description	Expectation	Measurement Duration	Amount at Risk
PM-001	Ensure that inmates remain drug-free while enrolled in substance abuse treatment programming through a review of each inmate's monthly substance abuse urinalysis results.	Achievement of outcome must meet or exceed 95%	Quarterly	One quarter percent (.25%) of the annual contract value in the month following the end of the quarter. These months are October, January, April, and July.
PM-002	Ensure that inmates are engaged in their substance abuse treatment and programming through a review of each successful inmate's CEST TCU ENG Form assessment instrument at the	Achievement of outcome must meet or exceed 95 80%	Quarterly	One quarter percent (.25%) of the annual contract value in the month following the end of the quarter. These months are October, January, April, and July.

	beginning of programming and at program completion. Engagement is determined by an increase in the scale score. Participants are deemed engaged when their scale score is greater than the mean.			
PM-003	All inmates that score 38 or higher on criminal rationalization and successfully complete substance abuse programming demonstrate a 2-point reduction in anti-social thinking-criminal rationalization through a review of each successful inmate's CEST TCU CTS Form assessment instrument at the beginning of criminal thinking intervention programming and at criminal thinking program completion.	Achievement of outcome must meet or exceed 75 70%	Quarterly	One quarter percent (.25%) of the annual contract value in the month following the end of the quarter. These months are October, January, April, and July.
PM-004	All inmates that successfully complete substance abuse programming demonstrate a reduction in anti-social behavior through a review of each successful inmate's disciplinary history, which will be a comparison of six months before treatment to six months after treatment. Only Major Violations as defined in Rule 33-601.301, F.A.C. will be considered for this measure.	Achievement of outcome must meet or exceed 85%	Quarterly	One quarter percent (.25%) of the annual contract value in the month following the end of the quarter. These months are October, January, April, and July.
PM-005	All inmates admitted to substance abuse programming shall be successfully discharged, as evidenced by a review of each inmate's admission date, discharge	Achievement of outcome must meet or exceed 75%	Quarterly	One quarter percent (.25%) of the annual contract value in the month following the end of the quarter. These months are

	date, and discharge reason.			October, January, April, and July.
PM-006	The Vendor shall have each position filled with a permanent or interim staff person for a total of 2080 2,008 hours per contract year, evidenced through review of the required staff vacancy reports and monthly timesheets for hours worked.	Achievement of outcome must meet 90% compliance for all listed vacancies	Monthly	If the Vendor fails to meet this Performance Measure, for more than 30 continuous days, the Department will impose financial consequences beginning on the 31st day, and for each day thereafter, in the amount of \$30.00 per business hour, until the vacancy is filled.

Change No. 4:

A change to Section 3.4.1, E., to revise the General Program Deliverables DEL-GPR-002 and DEL-GPR-003 below:

Deliverable	Due Date	Description (with cross-reference to Requirement(s), as applicable)
DEL-GPR-002 Proposed Transition Plan Draft Transition Plan	15 days from the date of Contract execution Within 10 days of the date of Contract execution	Final Plan, Submit the Final Transition Plan to the Department for approval to ensure an efficient and seamless transition from the current Vendor. (Section 2.5) Meet with the Department to present a Proposed Transition Plan. Specific to Transition activities, developed to ensure seamless transition in the provision of substance abuse program services from the current to new Vendor. Should provide a greater level of detail than the Overall Statewide Implementation Plan (Section 2.5)
DEL-GPR-003 Final Transition Plan	15 days from the date of Contract execution 10 days from the date of Contract execution Within 3 days of the date of Contract execution	Final Plan, Submit the Final Transition Plan to the Department for approval to ensure an efficient and seamless transition from the current Vendor. (Section 2.5) Final Plan, Submit the Final Transition Plan to the Department for approval to ensure an efficient and seamless transition from the current Vendor. (Section 2.5)

Change No. 5:

A change to Section 4.8.e to revise as follows:

- e) The Vendor must be able to demonstrate its ability to meet the Performance Bond requirements. Prior to execution of prospective contract, Respondent will deliver to the Department a Performance Bond or irrevocable letter of credit in the amount equal to the lesser of \$1.5 million dollars, per region, ~~or the average annual price of the Contract (averaged from the initial five year Contract term~~

pricing). The bond or letter of credit will be used to guarantee at least satisfactory performance by Respondent throughout the term of the Contract (including renewal years).

Change No. 6:

A change to Section 4.9 to revise as follows:

4.9 Submission of Replies

Replies shall be prepared simply and economically, providing a straightforward, concise delineation of the Vendor's capabilities to satisfy the requirements of this ITN. Elaborate bindings, colored displays, and promotional material are not desired. Emphasis in each reply shall be on completeness and clarity of content.

Vendors are responsible for submitting their replies to this ITN to the Procurement Officer by the date and time specified in Timeline of this solicitation. The Department will not consider late replies.

In Reply to this ITN, each Vendor shall:

- a) **Submit a separate Reply for each Region.**
- b) Submit the Technical Reply and the Cost Reply in separately sealed packages. **Each package shall be marked with the Region for which the Reply is being submitted or Statewide, as appropriate.**
- c) Submit one signed original plus ten hardcopies of the Technical Reply, sealed separately from the Cost Reply.
- d) Submit one signed original plus ten hardcopies of the Cost Reply, sealed separately from the Technical reply.
- e) Submit ten searchable PDF copies of the Technical Reply on CD-ROMs. In the event of differences between the information contained on the CD-ROM and the original written version, the written version will prevail.
- f) Submit ten searchable PDF copies of the Cost Reply on a CD-ROM separate from the Technical Reply. In the event of differences between the cost information provided on the CD-ROM and the original written version, the written version will prevail.
- g) If the Vendor believes its Technical Reply contains information that is confidential, trade secret, or otherwise not subject to disclosure, Vendor shall submit one redacted electronic version of the Technical Reply, provided on a CD-ROM. The information contained on the CD-ROM shall be formatted in such a way that redactions provided on the pages of the electronic document cannot be removed. The reason for this requirement is that in the event the Department receives a public records request for this information the Department will be able to respond to such request by providing a copy of redacted electronic version of the document(s) provided by the Vendor. The Department will rely upon the Vendor submitting the redacted version to ensure the redacted version satisfies this requirement. If a redacted version is not submitted, the Department is authorized to produce the entire documents, data, or records submitted by Vendor in answer to a public records request for these records.
- h) Sealed packages to be delivered shall be clearly marked with the solicitation number, company name, due date and time, **the Region for which the Reply is being submitted (or Statewide)**, and identify which package(s) contains the Technical Reply and Cost Reply.

- i) Submitted hardcopies contained in the sealed packages are to be clearly marked on the front cover of both the original and copies, with the Vendor's company name, solicitation number, **the Region for which the Reply is being submitted (or Statewide)**, and whether it is the Technical or Cost Reply. Hardcopies should be numbered one-ten, in sequential order for ease of tracking.

Change No. 7:

A change to Section 4.10, **TAB B**, a) to revise the below:

a) References

Using **Attachment V** to this ITN, Vendors shall provide three references from businesses, or government agencies, for which it has provided services of similar scope and size to the services identified in the ITN.

References shall pertain to current and ongoing services, or those that were completed within the last five years. References shall not be given by:

- Persons employed by the Department within the past three years.
- Persons currently or formerly employed or supervised by the Vendor or its affiliates.
- Board members within the Vendor's organization.
- Relatives of any of the above.

~~References shall be signed by the person providing the reference.~~ The Procurement Officer reserves the right to contact the Vendor's references ~~to verify the information was actually provided by the reference~~ and the negotiation team may elect to contact the references to obtain further information regarding the Vendor's performance. In addition, the negotiation team reserves the right to contact and consider references other than those provided by the Vendor when making its best value determination.

Change No. 8:

A change to Section 4.10, **TAB H**, to revise the below:

TAB H Completed Forms

Vendors shall complete the following forms and submit them to the Department in **TAB H** of its Reply:

- **VENDOR'S CONTACT INFORMATION**
- **CERTIFICATION OF DRUG-FREE WORKPLACE PROGRAM (IF APPLICABLE)**
- ~~NOTICE OF CONFLICT OF INTEREST~~
- ~~NON-COLLUSION CERTIFICATION~~
- ~~STATEMENT OF NO INVOLVEMENT~~
- **SUBCONTRACTING FORM (IF APPLICABLE)**

Change No. 9:

A change to Section 5.22, to revise the below:

5.22 Financial Specifications

1. **Funding Source**

This project is funded by federal grant funds and general revenue and is contingent upon annual appropriation by the federal government and the state legislature.

2. **Invoicing and Payment of Invoice**

The Contracts resulting from this ITN will be at a fixed-rate hourly **per diem** rate. The Department will compensate the Vendor for services, as specified in Attachment III, Price Information Sheet. All charges must be billed in arrears, in accordance with Section 215.422, F.S.

The Department requires a single invoice, on a monthly billing cycle, for services provided. Invoices must be submitted in detail sufficient for a proper pre-audit and post-audit thereof. Invoices must be accompanied by the required monthly program reports, as outlined in Section 3.8, General Reporting Requirements, and shall be submitted to the Department's Contract Manager, or designee.

The Vendor's invoice shall include its name, mailing address, tax identification (ID) number (FEIN), Contract number, and dates of service.

Change No. 10:

Attachment III, Price Information Sheet, is hereby replaced in its entirety and attached hereto.

Change No. 11:

Attachment IV, Pass/Fail Requirement Certification and Non-Collusion Certification, is hereby replaced in its entirety and attached hereto.

Change No. 12:

A list of the Contracts being replaced by this ITN, and the number and type of seats awarded to each location is hereby added as Exhibit I, and attached hereto.

Change No. 13:

A list of the estimated seats per service, per location, is hereby added as Exhibit II, and attached hereto.

Change No. 14:

The sign-in sheets from the Mandatory Pre-Bid Conferences/Site Visits is hereby added as Exhibit III, and attached hereto.

Change No. 15:

A staffing report for each of the sites included in this ITN is hereby added as Exhibit IV, and attached hereto.

**FDC ITN-17-112
In-Prison Substance Abuse Treatment Services
Questions and Answers**

Question 1	We currently have more than a 1:25 ratio in the Intensive Outpatient Programs. Please clarify if this ratio of counselor to client listed in the ITN is going to prevail or if it will actually be 1:29 which is current practice.
Answer 1	The required ratio for the Intensive Outpatient Program is 1:25.
Question 2	If one contract is awarded to a vendor for multiple regions, will the Performance Bond requirement for each region be issued for the contract and not each region?
Answer 2	Per Section 5.36 of the ITN, a Performance Guarantee shall be furnished, per awarded region, on an annual basis, for a time equal to the term of the Contract.
Question 3	<p>Part A: In 2.4.1, there are three mentions of cost – alignment of costs with services, lower the cost of substance abuse treatment services, and ensure cost effective pricing throughout the term of the contract. Please clarify this as there is a lot of emphasis on cost mentioned here that does not align with quality of services and outcomes. Currently, pricing is at a low overall with very rigid requirements contractually. Is it the Department’s intent to have more flexibility in programming that results in targeted services and better outcomes at a competitive cost which is not necessarily the lowest cost?</p> <p>Part B: In 2.7, there is again language suggestive that pricing is the overall consideration. Please clarify whether the Department under this section is looking for competitive pricing that provides innovative solution for services and resources or whether they are looking at lowest cost for innovative solution for services and resources.</p>
Answer 3	Vendors are encouraged to submit a Cost Reply in such a manner as to offer the most cost effective and innovative solution for quality services and resources, as both cost efficiency and quality of services will be a consideration in determining best value.
Question 4	Under 3.3.3 Service Times, it is indicated that the vendor shall ensure access to services 24 hours per day, 7 days per week, and 365 days per year. Please consider no longer including this on Christmas, the Thanksgiving Holiday (Thurs & Fri), and New Year’s Day. This would help with staff retention and stability as well as the fact that most institutions are not running programs on these days and it is disruptive to have program staff there with the visitation and other security concerns coming through the Control Room.
Answer 4	Vendors are encouraged to include ideas to minimize costs or improve delivery of services in TAB D and/or TAB G of their Reply, per Section 4.10 of the ITN.
Question 5	For residential programming that includes dormitory living, will there be one designated officer per shift to act as liaison between programs and security? Can at least one of the officers responsible for the dormitory report to Division of Readiness instead of local institution as a liaison for contractual compliance from the security side of programming?
Answer 5	No, this is not feasible with the Department’s current staffing.
Question 6	Under GPR-014, please provide the sites that require off-site in-service training and where the off-site training occurs so that appropriate costing can take place for this function. How many days is the off-site training for in-service? Please indicate if all staff will receive New Employee Orientation and whether there is a set plan for program staff. Currently, the New Employee Orientation is different from site-to-site and does effect the overall adjustment or integration of staff. If the Department could include this as a contractual requirement with a detail of the type of training to occur, it would help solidify a consistent introductory training statewide.

Answer 6	Mandatory in-service training and New Employee Orientation is typically provided at the institution's training building. In-service training for non-security staff is 40 hours and New Employee Orientation is 40 hours. All staff will receive New Employee Orientation, which is standardized statewide.
Question 7	Since the Department currently does first aid and CPR training for all FDC staff, can this service be negotiated for vendor staff? It is difficult at times to get trainers to rural areas and it results in closing programming services to train the entire staff where it could be done in in-service training.
Answer 7	Vendors are encouraged to include ideas to minimize costs or improve delivery of services in TAB D(g) and/or TAB G of their Reply, per Section 4.10 of the ITN.
Question 8	GPR-027 talks about positive reinforcement contingencies for pro-social behavior. Typically, we are unable to provide additional privileges for reinforcement of pro-social behavior without the cooperation of the local institution. Will the Department consider setting standard privileges for implementation at all sites that offer cognitive-behavioral programs such as the Residential Therapeutic Community?
Answer 8	Vendors are encouraged to include ideas to minimize costs or improve delivery of services in TAB D(g) and/or TAB G of their Reply, per Section 4.10 of the ITN.
Question 9	GPR-035 states "In addition, the Vendor may establish any other additional positions deemed necessary to meet the requirements of any contract as a result of this ITN". There is not any indication that this is available on the Price Information Sheet. Can a line be added to Attachment III – Price Information Sheet labeled Other under category?
Answer 9	Attachment III has been replaced in its entirety. Please see Change No. 10 of this Addendum.
Question 10	The Price Information Sheet, Attachment III indicates a line item for Academic Teacher. Is this an option or a requirement as the General Program Requirements under GPR-035 and GPR-036 does not indicate any minimum qualifications for an academic teacher and does not indicate "shall provide the following positions".
Answer 10	Please see Change No. 10 of this Addendum.
Question 11	GPR-038, indicates that "when an absence in a position in excess of 14 continuous calendar days" we would need to provide interim coverage. Does this mean if a staff member is absent 5 days that we do not have to prorate the bill for every hour?
Answer 11	GPR-038 has been revised, and Attachment III has been replaced in its entirety. Please see Change No. 2 and Change No. 10 of this Addendum.
Question 12	On the performance measures, it is unclear as to whether the measurement is being done for the entire contract or per site. If per site, is the amount at risk then per the annual site contract value or the entire contract value?
Answer 12	Per Page 27 of the ITN, all performance measures are for the entire contract, and the amount at risk is the annual Contract value. The Department intends to award one Contract per Region, as per Section 2.3 of the ITN.
Question 13	Does the Department have current outcomes on CEST assessments that indicate that PM-002 is achievable? What are the current stats for this measurement? If the statistics today are not indicating achievable, please adjust to something that the Department is already meeting and we can duplicate. If this statistic has no track record of viability, consider adjusting financial risk.

Answer 13	PM-002 has been adjusted to reflect mean and normed data based on validation studies conducted by Texas Christian University. The Expectation for PM-002 has been revised. Please see Change No. 3 of this Addendum.
Question 14	Does the Department have current outcomes on the Criminal Thinking Scales that support that PM-003 is achievable? What are the current stats for this measurement and how did this expectation develop? The concern is if we are being held to a particular standard, that the standard actually have been proven as something we can accomplish long-term over different inmate populations. (i.e. community versus medium or dual diagnosis population). Again, if this statistic has no track record of viability, consider adjusting financial risk.
Answer 14	No, the Department does not have current outcomes for Florida’s population regarding the Criminal Thinking Scales. PM-003 has been adjusted to reflect mean and normed data based on validation studies conducted by Texas Christian University. The Expectation for PM-003 has been revised. Please see Change No. 3 of this Addendum.
Question 15	The wording of PM-004 needs to be considered. PM-004 is convoluted in its present form and creates a measurement that is contingent on the handling of the individual’s behavior by the security personnel, i.e. verbal warning versus corrective consultation versus disciplinary report. Typically, some site’s program participants are expected to conform to a higher standard of behavior and are therefore held more accountable when behavior does occur. Additionally, in the present form, it allows the local site to have monetary impact on the success of the vendor’s programming regarding disciplinary reports. Please consider this as something that could cause a rift between the vendor staff and the local institution. An alternative is to measure disciplinary history while engaged in active programming where the treatment program has the ability to impact the outcome which should correlate to long-term gains in anti-social behavior.
Answer 15	PM-004 has been revised. Please see Change No. 3 of this Addendum. Vendors are allowed to submit suggested revisions to the Performance Measures in TAB D of their Reply, in accordance with Section 4.10 of the ITN.
Question 16	PM-006 indicates 2080 hours which would include holiday hours. Can this be changed to 2008 which is the current figure used? Additionally, the measurement indicates 90% compliance, but the amount at risk is only enforced after 30 continuous days of vacancy at \$30 per business hour. Does the 30 continuous days start over with each vacancy or is it remain in noncompliance for the entire year so that when a person is gone one day you are charged? Please clarify for costing purposes.
Answer 16	PM-006 has been revised. Please see Change No. 3 of this Addendum.
Question 17	<p>Part A: IOT-007 requires a minimum of 12 counselor supervised hours of programming activities per week per program participant. This exceeds 65D-30 requirements of “each client shall receive at least nine hours of services per week, in accordance with subsection 65D-30.0091(1), F.A.C., including counseling”. The 12 counselor supervised hours of programming activities has been the standard for Department of Correction’s operated programs. Would it not be more conducive to staff retention and institutional needs to lower the number of hours to the Department of Children and Families requirement of nine hours weekly, allowing for more individualized clinical staffing’s and targeted re-entry planning? Given that the awarded vendor would not be lowering standards of care with the change, but raising the individualized treatment and the transition services, can this change be made to the ITN IOP Requirements?</p> <p>Part B: If Part A is approved, further adjustments to IOT-008 through IOT-012 so that it equals 9, not 12 and allows the vendor to provide optional services in their proposal.</p>

Answer 17	At this time, the Department is seeking a minimum of 12 counselor-supervised hours of program activities per week, per program participant, occurring a minimum of four (4) days per week. Vendors are encouraged to include ideas to minimize costs or improve delivery of services in TAB D(g) and/or TAB G of their Reply, per Section 4.10 of the ITN.
Question 18	AT-002 indicates a successful client will be enrolled in aftercare until the inmate leaves the facility. At what point would this client be enrolled in alumni versus aftercare? Why are their provisions for both types of services if an aftercare client will remain enrolled until he/she leaves the site? Is this just in the instance where there is one type of service at the site versus the other? In other words, are there going to be sites that only has one of these as an option and that is why both are included?
Answer 18	Aftercare services are licensed and staff led. Alumni services are not licensed and are often peer-led. When possible, a client should remain in Aftercare until they leave the facility. However, if Alumni groups are available, a client may be transitioned from Aftercare to Alumni. Alumni may also be utilized when Aftercare is not available.
Question 19	Since AS-009 is to be offered on weekends during visitation, we would like to point out that often this service should occur outside of visitation because generally this activity requires security personnel and you cannot do it in the visitation park with the rest of visitation going on. This does not include the potential HIPAA issues with doing family counseling in a substance abuse setting in an open area. If we truly want to be able to provide family counseling, the awarded vendor needs the support of the Department to provide this during hours outside of visitation. Is this possible?
Answer 19	Vendors are encouraged to submit ideas such as this to improve delivery of services in TAB D(g) and/or TAB G of their Reply, per Section 4.10 of the ITN.
Question 20	AS-021 indicates one individual, face to face interview of one hour duration with each counselor to discuss clinical problems, program issues, and training needs. For a counselor that has been in the field for any duration, meeting with them every month for one hour of supervision on an individual basis is not always necessary. Many of the experienced counselors do not need that type of guidance monthly. An auditor would read this language and expect documentation that indicates each counselor was met with for the full duration of an hour in an individual session. Please consider rewriting this requirement to something like "A minimum of one hour of supervision with each counselor to discuss clinical problems, program issues, and training needs which can be provided in staff meetings, clinical staffing's or individual, face-to-face interview or any combination of the three."
Answer 20	The Department requires each Counselor to receive one individual, face to face interview of one hour duration with each counselor to discuss clinical problems, program issues, and training needs. Vendors are encouraged to include ideas to minimize costs or improve delivery of services in TAB D(g) and/or TAB G of their Reply, per Section 4.10 of the ITN.
Question 21	The Attachment V, Business Reference Form, does not include an area for the signature of the person providing the reference. Are you asking for the names of individuals/businesses on Attachment V that can verify your business experience and then, additionally, requesting a letter of support be included? I'm trying to clarify the language in the ITN that states, "References shall be signed by the person providing the reference." On page 54 of 110.
Answer 21	Clarification is provided. Please see Change No 7.
Question 22	When replying to multiple regions, the cost proposals have to be sealed separately than the technical reply, but since the size of one cost proposal is not "box worthy" can you include multiple sealed envelopes for different regions in the same box for the cost proposal?

Answer 22	Yes, this is allowable, as long as each Cost Reply is clearly labeled with the Region to which it should be associated.
Question 23	Under 4.9 h), it does not indicate that the Technical Reply is clearly marked with the region submitting a reply for. For purposes of the opening and determining proposals received, would it not be appropriate to include under h) to label the technical reply box with the region you are submitting a reply for?
Answer 23	Yes, each sealed package shall also be marked with the Region for which the Reply is being submitted or Statewide, as appropriate. Please see Change No. 6 of this Addendum.
Question 24	Can the FDC address and send an updated list with each center that are currently operating a program to include all modules including prevention and current staffing levels for each site.
Answer 24	Please see Exhibit II and Exhibit IV of this Addendum.
Question 25	As discussed in tours, please clarify that each vendor when applying must adhere to the staffing levels provided in the ITN, but if asked to negotiate may provide different staffing levels according to 65D-30 rule which allows up to 50 cases to 1 counselor for any outpatient program including intensive outpatient services?
Answer 25	Initial Replies should conform to the requirements included in the ITN. Vendors are encouraged to include ideas to minimize costs or improve delivery of services in TAB D(g) and/or TAB G of their Reply, per Section 4.10 of the ITN.
Question 26	Is the cost of the performance bond billable to the contract?
Answer 26	No, it is not billable to the Contract, as its intent is to protect the Department against the awarded Vendor's non-performance during the term of the Contract.
Question 27	If the Vendor is a subsidiary of a national organization, may the Vendor use its national experience to meet Pass/Fail Mandatory Responsiveness Requirement B (provision of licensed SA treatment services for an aggregate patient population of, at least 1,000 inmate patients . . .)?
Answer 27	Yes, all experience of the Vendor, including parent companies, may be included.
Question 28	If the Vendor is a subsidiary of a national organization, may the Vendor use references that can speak to the Vendor's national experience?
Answer 28	Please see the Answer to Question #27.
Question 29	Regarding Pass/Fail Mandatory Responsiveness Requirement F, is a Vendor required to submit a separate Reply Bond for each Region the Vendor is responding to?
Answer 29	Vendors shall submit a Reply Bond of \$500,000 per response, whether that response is for one region or for multiple regions.
Question 30	The Department has provided a chart of estimated treatment slots/seats per region. Can the Department provide an estimated list of Therapeutic Community, Intensive Outpatient, Outpatient, Aftercare, and Prevention slots/seats by site?
Answer 30	Please see Exhibit II of this Addendum.
Question 31	The ITN appears to list/discuss staff positions that are not included in Attachment III-Price Information Sheet (i.e., Prevention Specialist). A) Can the Department clarify the required staff positions? B) Can the Department clarify the positions to include on Attachment III-Price Information Sheet?

Answer 31	The Price Information Sheet has been revised. Please see Change No. 10 of this Addendum.
Question 32	Can the Department clarify if all costs required for the Vendor to provide the services must be factored into the staff positions listed in Attachment III-Price Information Sheet?
Answer 32	Please see Change No. 10 of this Addendum. All costs should be incorporated into the per diem rate.
Question 33	Can the Department clarify the Staff/Inmate ratios it desires for the five (5) service types?
Answer 33	Please see Change No. 2 of this Addendum.
Question 34	The ITN discusses a Prevention Specialist to provide a minimum of one position per 50 Prevention clients. However, Attachment III does not include a Prevention Specialist, only a Prevention Counselor. Can the Department clarify the required positions?
Answer 34	Please see Change No. 2 and Change No. 10 of this Addendum.
Question 35	Will the Department supply computers for the Vendor's staff to utilize?
Answer 35	Yes, the Department will supply computers for the Vendor's staff to utilize.
Question 36	What equipment will the Department provide?
Answer 36	The Department will supply office space, office furniture, telephone(s) and computers for key staff, and a multifunctional device (printer/scanner/copier machine) per location.
Question 37	Will the Department extend the submission deadline for the ITN?
Answer 37	Addendum 003, revising the Timeline, was posted to the Vendor Bid System.
Question 38	The ITN reads that the Department will provide assistance with educational/vocational training to inmates. Does the Department expect the Vendor to provide any aspects of educational/vocational training? Attachment III (Price Sheet) includes Academic Teacher(s) being provided by the Vendor. Can the Department clarify?
Answer 38	Academic and Career/Technical training are typically provided by the Department. However, there are three sites that are being replaced by the ITN where Academic services are provided as part of the Residential Therapeutic Community. Attachment III has been revised. Please see Change No. 10 of this Addendum.
Question 39	Is a draft of a Transition Plan required with the response or after selection of Vendor(s)? The ITN notes that Tab E is to contain a Transition Plan. However, on page 29, the ITN notes that a Draft Transition Plan is due 15 days from the date of Contract execution. Please clarify when the Draft and Final Transition Plans are due?
Answer 39	Section 3.4.1.E, DEL-GPR-002 and DEL-GPR-003 have been revised. Please see Change No. 4 of this Addendum.
Question 40	The ITN instructs the Vendor to include Attachment IV in Tab A. Attachment IV includes a NON-COLLUSION CERTIFICATION. The ITN also instructs the Vendor to include a NON-COLLUSION CERTIFICATION in Tab H. Does the Department want the same certification in both Tabs? Please clarify what is to be included in Tabs A-H.
Answer 40	The completed Attachment IV, Non-Collusion Certification, should be included in Tab A. Section 4.10, TAB H, has been revised. Please see Change No. 8 of this Addendum.

Question 41	If a selected Vendor and the Department cannot reach an agreement during the negotiations, will that Vendor's Reply Bond be forfeited to the Department?
Answer 41	No, please refer to Section 4.7 of the ITN.
Question 42	Tab A is to include a cover letter that is to include a description of the Vendor's Proposed Cost, however, in the same paragraph the Vendor is cautioned not to include any information about Pricing in the cover letter. Can the Department clarify what cost information it desires in the cover letter?
Answer 42	The Executive Summary should include a description of the Vendor's approach to cost, including main contributing factors and an overview of any proposed cost savings measures. Actual pricing information should be submitted in accordance with Section 4.10 of the ITN.
Question 43	On page 54 of the ITN it reads, "References shall be signed by the person providing the reference," however, Attachment V only contains a place for the Vendor's authorized representative to sign. Can the Department please clarify?
Answer 43	Please see the Answer to Question #21.
Question 44	For Prior Work Experience in Tab B, will the Department except some of this information provided in a chart rather than all info in narrative form?
Answer 44	It is at a Vendor's discretion how to present the information required in Section 4.10 of the ITN. The Vendor is advised to make it clear and ensure that the requirement is thoroughly met, whether in a chart, image, table, or narrative format.
Question 45	If a Vendor does not propose to use subcontractors, does the Vendor need to include Attachment VI in its response or can it omit the form altogether?
Answer 45	The form is only required if the Vendor intends to utilize subcontractors. Please see Change No. 8 of this Addendum.
Question 46	In regards to Tab F, is it accurate that the Vendor should include a physical Tab F with no contents, because the contents of Tab F will be in a separate sealed envelope?
Answer 46	Yes, the Reply should include a Tab F for the Price Information Sheet to be inserted after the Cost Reply is opened.
Question 47	Vendors are instructed to include a STATEMENT OF NO INVOLVEMENT and NOTICE OF CONFLICT OF INTEREST forms in Tab H. Where are these 2 forms in the ITN?
Answer 47	Section 4.10, TAB H, has been revised, and Attachment IV, Pass/Fail Requirement Certification and Non-Collusion Certification, has been revised and replaced to include a Statement of No Conflict of Interest. Please see Change No. 8 and Change No. 11 of this Addendum.
Question 48	Does the Vendor need to certify/attest that it has received and read the addenda in its response?
Answer 48	No, attestation that addenda has been viewed is not required, but it is recommended that Vendors check VBS and view any addenda that are posted as it may have updates to the Timeline or other requirements. Vendors will be held to requirements identified in any Addenda to the ITN, in accordance with Section 4.19 of the ITN.
Question 49	Does the Department have any requirements regarding font type, font size, spacing, margins, color vs. b&w, page numbering, etc.?
Answer 49	No. Please refer to Section 4.9 and 4.10 of the ITN.

Question 50	Does the Vendor need to sign and submit Attachment IX in its response?
Answer 50	No, Attachment IX is not required to be signed and submitted with the Reply; however, it will be executed by the awarded Vendor(s) at the time of Contract execution.
Question 51	In the ITN, GPR-036, notes a Program Director/Clinical Supervisor is required. Attachment III (Price Sheet) lists these as 2 separate positions. Does the Department expect a Program Director and a Clinical Supervisor or can the positions be combined?
Answer 51	The positions may be combined. Each program is required to have a Qualified Professional, as defined by Chapter 397, Florida Statutes (F.S.).
Question 52	Can the Department provide staff turnover statistics for each of the sites included in the ITN?
Answer 52	Yes, please see Change No. 15 of this Addendum.
Question 53	Are temporary staff allowed to ensure a Vendor maintains staffing levels?
Answer 53	Please refer to Requirement GPR-038.
Question 54	Are there certain sites included in the ITN that exclusively service inmates with co-occurring conditions?
Answer 54	No, there are not currently sites that exclusively service inmates with co-occurring conditions.
Question 55	Will the Department or the Vendor be responsible for the costs of UAs?
Answer 55	The Department will be responsible for the cost of urinalysis (UA) tests.
Question 56	Can the Department provide an estimate of the number of UAs that will be needed by site, per year?
Answer 56	This is not material, as the Department will be responsible for the cost.
Question 57	Can the Department publish the sign-up sheets from the bidder's conferences/site visits?
Answer 57	The sign-in sheets from the Site Visits have been attached to this Addendum as Exhibit III.
Question 58	Must the Performance Bond be maintained for the duration of the contract?
Answer 58	Yes, see Section 5.36 of the ITN.
Question 59	How many academic teachers are in each region?
Answer 59	Currently, there is one Academic Teacher at Jackson CI, one Academic Teacher at NWFRC Annex, and two Academic Teachers at Marion CI that are part of current treatment contracts.
Question 60	Does the Vendor pay for inmate assessments?
Answer 60	The Vendor pays for the required Texas Christian University Client Evaluation of Self and Treatment and Criminal Thinking Scales scantron forms. The Department is responsible for the Spectrum assessment.
Question 61	What staff training is the responsibility of the Vendor and for the Department?

Answer 61	The Department will provide its New Employee Orientation Training (40 hours) and Annual In-Service Training (40 hours). Regarding First Aid and CPR training, please see the Answer to Question #7. All other training is the responsibility of the Vendor.
Question 62	Will the Vendor's employees be able to get access to the Vendor's intranet site to use our Electronic Health Record and other systems owned and operated by the Vendor? What access to the Vendor's systems will the Department desire?
Answer 62	Internet accessible sites for business use will not be blocked by the Department. Intranet access may be permitted pending IT Security review. The Department does not anticipate needing access the Vendor's system at this time.
Question 63	Will the Vendor's employees be able to get access to the Vendor's internet email site to use the Vendor's email system?
Answer 63	Please see the Answer to Question #62.
Question 64	<u>Staffing</u> : Per the temporary/interim staff requirement on page 26, are we able to subcontract temporary staff from an external staffing agency?
Answer 64	Yes, provided they meet the staffing requirements and receive security clearance by the Department for entry into the facility. All anticipated subcontractors should be included in the Vendor's Reply, as described in Section 4.10 of the ITN.
Question 65	<u>Staffing</u> : Section 3.4.1 General Program Requirements, C. General Program Service Areas, GPR- 033, p. 23 states, " <i>The Vendor shall ensure that all qualified staff, including Program Directors/Clinical Supervisors are utilized to provide services to program participants in accordance with allowable counselor-program staffing ratios.</i> " Does this statement allow Program Directors/Clinical Supervisors to carry a caseload, particularly during a staff absence or vacancy?
Answer 65	Program Directors/Clinical Supervisors/Qualified Professionals may carry a caseload, permanently or temporarily.
Question 66	<u>Budget</u> : If the vendor is proposing positions that are not included on Attachment III-Price Information Sheet, how do we display them in the budget? Or do we not account for them in the budget at this stage of the ITN?
Answer 66	Please see the Answer to Question #32.
Question 67	<u>Budget</u> : Does the Department want a fully itemized budget or budget narrative in addition to Attachment III?
Answer 67	This is not a requirement of the ITN Reply; however, it would be very helpful to the Department in evaluating the cost factors in the Vendor's Reply.
Question 68	<u>Budget</u> : Can the Department please clarify who is responsible for purchasing the following items (the vendor or FDC provides): <ul style="list-style-type: none"> i. Computers ii. Printers iii. Copiers
Answer 68	Please see the Answer to Question #36.
Question 69	<u>Data Monitoring and Oversight</u> : Will vendors be allowed to implement a web-based Electronic Health Record?
Answer 69	Yes, Vendors will be allowed to implement a web-based Electronic Health Record for tracking their information, subject to Department approval.

Question 70	<u>Programming</u> : On page 23, it indicates that the counselor to client ratio for Prevention services is 1:75; however, on page 24, it states 1:50. Could the Department please clarify?
Answer 70	The correct Counselor ratio for Prevention Services is 1:50. Please see Change No. 2 of this Addendum.
Question 71	<u>Programming</u> : What is the typical length of time an offender is in the motivation/readiness classes?
Answer 71	The typical length of time is two (2) – four (4) weeks.
Question 72	<u>Programming</u> : Will TC treatment participants be required to have institutional jobs? If so, how many hours per day are required?
Answer 72	Therapeutic Community (TC) clients do not have institutional jobs outside of the TC. They may be assigned different positions within the TC housing unit or program building.
Question 73	<u>Information Technology</u> : Is there an existing phone switch at each location or will the contractor be expected to implement a phone switch system at each location? i. If not, will the site provide POTS (plain old telephone service) lines for key individuals for each physical location or is it the expectation that the contractor provide POTS (plain old telephone service) lines for key individual employees for each physical location?
Answer 73	Please see the Answer to Question #36.
Question 74	<u>Information Technology</u> : Is there internet or network (LAN) connectivity at each location? Do the various facilities connect with each other as a WAN? i. If not, will the department allow the contractor to provide internet connectivity for the PC's located within the institutions? ii. If so, will the department allow the contractor to access the internet? iii. If so, will the Department allow the computers on the Department's LAN/WAN the ability to use virtual private network services to remotely access contractor's servers and file systems? iv. If so, will the Department allow the contractor to install a server for LAN/WAN access to data? v. If not, will the department allow contractor to provide internet connectivity to the computers of the director and office admin located within the institutions for administrative tasks? vi. If the Department does allow for internet connectivity, will all vendor staff (administrative and clinical) be able to access it? This will enable the vendor to offer a web-based EHR and data tracking system.
Answer 74	The Department will ensure connectivity is available.
Question 75	<u>Information Technology</u> : P. 82 5.27 Rights to Examine, Audit and Administer Resources " <i>Right to Audit: The Vendor will permit and facilitate both physical and virtual access to the mainframe, servers, intrusion prevention system, firewalls, routers and switches by the Department's authorized audit staff or representatives. Such access may include both internal and external security scans of those resources.</i> " Does this apply to only Technology used under the Florida Contract(s) or to all of the vendor's information technology regardless of use by the Florida Locations?
Answer 75	The requirement only applies to technology used under contract(s) resulting from this ITN.

Question 76	<u>Other</u> : Will the Department consider posting responses to questions prior to the date listed in the ITN timeline? The date given currently leaves very little time for vendor to incorporate responses.
Answer 76	Addendum 003, revising the Timeline, was posted to the Vendor Bid System.
Question 77	<u>Other</u> : Given how large the submissions will be, would the Department consider allowing a single statewide submission for vendors who intend to apply for all 4 regions?
Answer 77	Vendor's shall only submit one Reply, and the Reply must be clearly labeled with the Region(s) included, or that the Reply is Statewide.
Question 78	<u>Other</u> : With regards to the Performance bond, does the State have a bond form that vendors should utilize?
Answer 78	No, the Department does not have a specific Performance Bond form.
Question 79	<u>Other</u> : Will the Department accept an annually renewable performance bond to cover the five year term of the contract or does the Department require that the initial bond cover the entire five year period?
Answer 79	The Performance Guarantee may be renewed on an annual basis. Please see Section 5.36 of the ITN.
Question 80	Page 2, Section 3.4.1(a): Will the Department please provide the expected amount of treatment slots per Service Type per Facility? Due to the required Staff to Client Ratios, is it difficult to determine how many personnel per facility will be required without knowing the number of treatment slots that will need to be serviced.
Answer 80	Yes. Please see Change No. 13 of this Addendum.
Question 81	Page 6, Section 1 – Definitions: Can the Department please provide a list of State Holidays?
Answer 81	State holidays are listed on the Department of Management Services (DMS) website, at http://www.dms.myflorida.com/workforce_operations/human_resource_management/for_state_personnel_system_hr_practitioners/2017_state_holidays and are revised annually.
Question 82	Page 11, Section 2.2, Statement of Purpose: Does the Department anticipate individuals with mental health disorders or mental health needs to be included in the referred population? If so, will the Department provide mental health or dual diagnosis resources or will the Vendor bear the cost of specialized treatment?
Answer 82	Yes, the Department anticipates that individuals with mental health disorders/needs will be referred to the treatment program. Mental health services will be provided by the Department through other contractual arrangements. Communication between the Department's staff, Contracted Mental Health Services staff, and the awarded Vendor(s)' staff will be necessary. The Vendor is not responsible for mental health treatment.
Question 83	Page 12, Section 2.2.1, Service Types: For service types listed A-E in this section, does the Department anticipate that the full range of services is to be provided at each individual site listed in this RFP? For example, might Site A only require Prevention, Outpatient SA Treatment, and Intensive Outpatient SA Treatment, while Site B only requires Prevention Services and Aftercare? Should Vendors assume that the full range will need to be available and staffed at all locations?
Answer 83	No, the Department does not anticipate that a full range of services will be available at every site; however, the Department is looking to maximize the service type offerings at each site and is looking for innovative solutions from interested vendors. Please

	refer to the listing of anticipated service types by location included with this Addendum. Please see Exhibit II of this Addendum.
Question 84	Page 13, Section 2.2.2, Additional Services: May Vendors provide recovery and support group services through partnerships with nonprofits, religious organizations, or other social services providers from the local community? Are recovery and support group facilitators required to be employees of the Vendor?
Answer 84	Yes, Vendors may provide recovery and support group services through partnerships. No, recovery and support group facilitators are not required to be employees of the Vendor; however, they would be considered subcontractors and subject to the requirements of subcontractors. Additionally, the Vendor would be ultimately responsible for all services provided under their Contract, including those provided by subcontractor(s).
Question 85	Page 14, Transition Plan: What is the transitional Roll Out Expectation? 30 days? 60 Days? 90 Days? The contractor would like to verify the DOC's requirements to properly identify the transition plan steps.
Answer 85	Per Section 2.5, of the ITN: The Vendor must have the ability to implement service delivery, as described herein, on a date agreed upon by both the Vendor and the Department. As part of its Reply to this ITN, each Vendor must provide an Overall Regional Implementation Plan, including a timeline for transition at each institution, and a detailed description of the transition plan for delivery of in-prison substance abuse treatment services. The Department would like to implement services as soon as possible, but there is not a defined number of days for implementation.
Question 86	Page 14, Transition Plan: When will the "Roll Out" Commence?
Answer 86	Please see the Answer to Question #85.
Question 87	Page 15, Term of Contract: When is the expected Start Date of the Contract?
Answer 87	The Department will begin drafting contracts upon award of this solicitation. We do not have an exact date for contract start.
Question 88	Page 16, Section 3.2, Overview of Services: What type of supplies and equipment will the FDC provide so this can be factored into our bid? Phones, internet, internet cables, computers, printers, desks, etc.?
Answer 88	Please see the Answers to Question #36 and Question #74.
Question 89	Page 17, Section 3.4.1.B, How Service is Provided Today: <i>Most in-prison treatment programs (secure locations) do not provide licensed aftercare.</i> Question: Do any of the program locations listed in Attachment II currently provide licensed aftercare? Are those programs operated by the Department or by a Vendor?
Answer 89	No, there are no current programs listed in Attachment II providing licensed Aftercare services.
Question 90	Page 19, Section 3.4.1.C, General Program Service Area: Will Vendors be expected to attain licenses for the full range of treatment service types (prevention, outpatient, intensive outpatient, residential and aftercare) at each individual site (5 potential licenses per site)? Or will program referrals/placements only be for certain services at certain sites? If possible, could the Department provide a list of which services should be anticipated at which sites?
Answer 90	Please see the Answer to Question #83.

Question 91	Page 20, GPR-007: Do inmates have the right to refuse treatment after they are referred into the program? In other words, is program participation voluntary or mandatory?
Answer 91	Treatment is mandatory. An inmate may refuse treatment with consequences (loss of gain time, disciplinary report, and permanent loss of community release center eligibility).
Question 92	Page 20, GPR-011: <i>The Vendor shall be responsible for providing and regularly updating all program materials...this shall include materials for inmates with exceptional educational or disability needs.</i> Question: Will the Department please clarify the approximate number of placements by program location and/or by Region which might require special accommodation for educational or disability needs?
Answer 92	As of March 6, 2017, there are 434 inmates that have an identified need for substance abuse treatment, which would likely require a special accommodation for educational or disability needs. Below is the identified need per Region: Region I – 63 Region II – 182 Region III – 148 Region IV – 41
Question 93	Page 20, GPR-012: <i>Each Vendor shall maintain at least one administrative office in the State of Florida and sufficient administrative staff to manage operations within the awarded region in Florida.</i> Question: May Vendors locate administrative and/or support staff in offices on location at program locations within a Region? Must a Vendor maintain a separate physical address for administrative and support staff? Will this need to be a brick and mortar building or legal address in Florida? Please clarify.
Answer 93	The Vendor must maintain sufficient administrative staff in Florida to manage operations within the awarded region. Those staff may work remotely, from a location within the State of Florida, or may work at a “brick and mortar” building. They may not work from one of the Department’s correctional institutions. Location of staff should be included in the Vendor’s Reply.
Question 94	Page 20, GPR-013: Will FDC still provide and maintain a BIZHUB that is accessible by Vendor?
Answer 94	Please see the Answer to Question #36.
Question 95	Page 20, GPR-013: Will all sites negotiated be wired for BIZHUB so no desktop printers are necessary?
Answer 95	Please see the Answer to Question #36.
Question 96	Page 20, GPR-012: What type of staff positions does the department expect the vendor to have in their administrative office?
Answer 96	Please see Change No. 2 of this Addendum.
Question 97	Page 21, GPR-015: Will Vendor employees be excluded from First-Aid and CPR education during NEO and annual trainings FDC requires?
Answer 97	Please see the Answer to Question #7.
Question 98	Page 22, GPR-023: Regarding CEST, how much cost is it per site per year so this expense can be accurately factored into our bid?
Answer 98	In FY15-16, the Department paid \$.013 per form, plus shipping.

Question 99	Page 23, GPR-035: Will the Department please verify the staff ratios? The FDC requirement for the Intensive Outpatient Program is 1:50 and the DOC is requiring 1:25. Is this the only ratio discrepancy in the FDC regulations compared to the ITN requirements?
Answer 99	Please see the Answer to Question #33.
Question 100	Page 23, GPR-035: Will staff be allowed to treat residents across the program types when working with a fluid population? For instance, if the DOC has 50 OP residents and 25 IOP residents that transition into 49 OP residents and 26 IOP residents, will a treatment counselor from the OP program be allowed to transition into the IOP counselor role if properly certified to fulfill the staff to client ratio?
Answer 100	Yes, this will be allowable.
Question 101	Page 23, GPR-035: Are there any mandatory staff positions required per facility? If yes, what are they?
Answer 101	Please see Change No. 2 of this Addendum.
Question 102	Page 23, GPR-035: Does each facility need to have staff to serve all of the program types? i.e. If the Cross City C.I. does not have a Therapeutic Community, will the contractor still need to maintain at least one counselor at the site in case a resident is assigned to the facility?
Answer 102	No, please refer to the listing of anticipated service types by location included with this Addendum. Please see Exhibit II of this Addendum.
Question 103	Page 23, GPR-035: Does there need to be a Program Director at each facility? For instance, the Columbia C.I., Columbia Annex and Columbia Work Camp are all located at the same address, does each facility need to have a Program Director?
Answer 103	There must be a Program Director for each parent facility (such as Columbia CI), to provide oversight of all satellite facilities (such as Columbia Annex and Columbia Work Camp).
Question 104	Page 23, GPR-035: Does the DOC require the Contractor to employ a Clinical Supervisor/Qualified Professional for each program at each site? For instance, the Columbia C.I., Columbia Annex and Columbia Work Camp are all located at the same address, does each facility need to have a Clinical Supervisor or will one be sufficient for all sites at the same location/address?
Answer 104	Please see the Answer for Question #103.
Question 105	Page 23, GPR-035: Are teacher positions required for the Therapeutic Community program? If yes, how many?
Answer 105	Please see the Answer for Question #59.
Question 106	Page 24, GPR-035: The ITN states that the Clerical position ratio is 1:85. Is this ratio per site, per program or for the entire population that the contractor is bidding on? Is this a full time or part time position?
Answer 106	Please see Change No. 2 of this Addendum.
Question 107	Page 23/24, GPR-035: On page 23 the Prevention Counselor ratio is 1:75. On page 24 the Prevention Specialist ratio is 1:50. Are these the same position? Please clarify as the Attachment III does not have a separate line item for the Prevention Specialist.
Answer 107	Please see the Answer to Question #34.

Question 108	Page 26, GPR-038: 'The base hourly rate for all position specified in this ITN.' Is this the 'hourly rate' the calculation of total hours available per month x 12 months = annual rate per position?
Answer 108	GPR-038 and GPR-039 have been revised. Please see Change No. 2 of this Addendum.
Question 109	Page 27, PM-001: Will the Department be administering the Urinalysis tests? If yes, what is the cost of the test and is the Vendor responsible for reimbursement? Will the Vendor only be required to maintain the results of the test in the participant's clinical file?
Answer 109	The Department will administer and bear the cost of the UA. The Department will record the results in the Offender Based Information System (OBIS), and the Vendor will be responsible for recording the results retrieved from OBIS in the inmate's clinical file.
Question 110	Page 27, PM-001: What is the approximate number of inmates enrolled in program who test positive for K2 in any given month?
Answer 110	In FY15/16, Jefferson CI, Taylor CI, and Sago Palm Re-Entry Center each had one program client test positive for K2.
Question 111	Page 28, PM-004: What is the current percentage of inmates that increase in anti-social behavior after treatment?
Answer 111	In FY 14/15, 10% of inmates that completed treatment showed an increase in anti-social behavior.
Question 112	Page 28, PM-006: Clarification on how outcome is measured: 90% of 2080 hours; 90% of Staff; 90% of total staff hours?
Answer 112	Please see the Answer to Question #16.
Question 113	Page 30, PS-006: Is a clinical record to be kept on Level I Prevention participants?
Answer 113	No, this is not a requirement of the ITN, but an individualized treatment plan must be maintained, in accordance with PS-006.
Question 114	Page 37, AT-001: Can participants who completed a SA program be in aftercare with other participants from a different SA program? For example, IOP graduates with OP graduates?
Answer 114	Yes, this is allowable.
Question 115	Page 44-47 & 87, Program Locations: Can the Department please clarify which facilities are included in each region pertaining to the ITN? There is some discrepancy between the locations listed in Section 3.8 vs Attachment II. There are 8 sites in Region I which are present on 3.8 or Attachment II and not the other, 8 in Region II, 2 in Region III, and 3 in Region IV.
Answer 115	Yes, please refer to the listing of anticipated service types by location included with this Addendum. Please see Exhibit II of this Addendum.
Question 116	Page 50, Reply Bond: Does the Department require that the Vendor submit a \$500,000 Reply Bond per Region (if bidding more than one region)? Or will one \$500,000 per Vendor suffice for the entire submission?
Answer 116	Please see the Answer to Question #29.

Question 117	Page 53, TAB A: Does the Department require the contractor to provide the Dun & Bradstreet report or only the score?
Answer 117	The Vendor must provide a report from Dun & Bradstreet (D&B) which includes the Vendor's Financial Stress Score.
Question 118	Page 58, Completed Forms: Will the Department please provide the following Forms that are required for Tab H as they were not included in the ITN: - Notice of Conflict of Interest - Non-Collusion Certification - Statement of No Involvement
Answer 118	Please see the Answer to Question #47.
Question 119	Addendum 2: Based on the Addendum 2 list of Vendors and Contracts, will the Department provide what Vendors provide services at which facilities currently?
Answer 119	Yes. Please see Exhibit I of this Addendum.
Question 120	General Question: If additional clarity is required upon FDC responses to these inquiries, will the Department accept additional questions or clarifications?
Answer 120	Vendors are permitted to submit questions or requests for clarifications after the deadline for questions has passed; however, the Department is not obligated to answer or respond.
Question 121	General Question: Can the Department confirm that this contract is intended to significantly expand the services currently provided by Vendors?
Answer 121	It is the intent of the Department to maximize the service offerings at each site and is looking for innovative solutions from interested vendors. In order to accomplish this, some services types may be reduced, in order to increase other types. It is the intent of the Department to enhance its ability to match each client's needs with the appropriate level of available service. There is also expected to be a net increase in clients receiving treatment as different service levels are added. Please refer to the listing of anticipated service types by location included with this Addendum. Please see Exhibit II of this Addendum.
Question 122	General Question: What is the anticipated funding amount available for the contract term, by Region?
Answer 122	Funding is appropriated to the Department annually. For information on the funding of current contracts, please refer to the link to current contracts in the Florida Accountability Contract Tracking System (FACTS) provided in Addendum 002.
Question 123	General Question: Are there any plans to include inmates with an RI of 2 so that more of the inmate population can be included in services?
Answer 123	All inmates with an identified need for substance abuse treatment services, based on initial screening, will be eligible for referral to a treatment program. It will be up to the Vendor's clinical team to validate the referral and choose the appropriate level of service.
Question 124	General Question: What is the vendor's responsibilities to find community links concerning reentry transition?
Answer 124	Community transition is the responsibility of the Department; however, Vendors are encouraged to include ideas to minimize costs or improve delivery of services in TAB D and/or TAB G of their Reply, per Section 4.10 of the ITN.

Question 125	General Question: Does the Department already have a list of preferred or set local community providers at each FDC institutional site? Are there any organizations with whom the Department partners with on a statewide level which would be considered preferred community providers? Is it the responsibility of the Vendor to seek out and network with local providers at each institutional site?
Answer 125	Please see the Answer to Question #124.
Question 126	General Question: Were there any questions asked and answered during the site visits (1/4 – 1/11)? If so, will the Department please provide written confirmation of what those questions were and the official answer given?
Answer 126	The Department will issue a written response only to those questions submitted in writing, in accordance with Sections 4.18 and 4.3 of the ITN. All questions submitted in writing prior to the deadline provided in the Timeline are included in this Addendum.
Question 127	Reference ITN page 11, Section 2.2 Statement of Purpose: <i>1. Service Types. For the purposes of this solicitation, institutional substance abuse services are separated into five distinct service types...</i> a. Could the Florida Department of Corrections (the Department) please estimate the current population in need of substance abuse services at each facility by level of care (PS, OST, IOT, TC, Aftercare)?
Answer 127	Please refer to the listing of anticipated service types by location included with this Addendum. Please see Exhibit II to this Addendum.
Question 128	Reference ITN page 11, Section 2.2 Statement of Purpose: <i>The Department shall maintain discretion for placement of program participants into each treatment type, and will provide management, housing, care (including medical), and security for program participants.</i> a. How will the Department determine which program participants are placed into in order to assure the appropriate treatment type? b. Is the determination of treatment type made at the regional reception center or once the program participant arrives at a facility? c. If assessment tools are used, could the Department please provide details as to which tools are used? d. Will Vendors have access to assessment results?
Answer 128	a. Please see the Answer to Question #123. b. The level of service or treatment type decision will be made by the clinical staff at the treatment location. If a client is in need of a different service type than what is available at the location, the Vendor's staff will refer the client back to Classification at the facility for appropriate handling. c. The Department utilizes the Drug Simple Screening Instrument (DSSI) and Spectrum, in conjunction with an interview by trained staff during reception by the Department, to determine need and initial referral to program. d. Yes, the awarded Vendor(s) will have access to the assessment results.
Question 129	Reference ITN page 14, 2.5 Transition and Service Implementation: a. What information are incumbents required to submit to awarded Vendors? For example, will incumbents provide the awarded Vendor with discharge summaries for all participants in a substance abuse program?
Answer 129	All incumbent vendors will be required to provide clinical charts to the Department upon expiration of the Contract. The Department, in turn, will make the information available to the awarded Vendor(s), as appropriate.

<p>Question 130</p>	<p>Reference ITN page 14, Section 2.5 Transition and Service Implementation:</p> <p><i>As part of its Reply to this ITN, each Vendor must provide an Overall Regional Implementation Plan, including a timeline for transition at each institution, and a detailed description of the transition plan for delivery of in-prison substance abuse treatment services.</i></p> <p>And</p> <p><i>The Overall Regional Implementation Plan, which includes a list of all major transition activities, with responsible parties and timelines, must be submitted at least 30 calendar days prior to the transition begin date.</i></p> <p>a. Please confirm the Overall Regional Implementation Plan is due 30 calendar days prior to the transition begin date.</p>
<p>Answer 130</p>	<p>This is confirmed.</p>
<p>Question 131</p>	<p>Reference ITN page 16, Overview of Services:</p> <p><i>The Vendor’s services, training curriculum, staff, and supplies must be fully identified, described, and documented within the Vendor’s Reply. All staff, supplies, equipment, and other required components of this ITN will be included in the submitted price.</i></p> <p>a. Please confirm office furniture and computers are Department provided.</p> <p>b. For pricing purposes, please provide the program staff turnover at each program facility.</p>
<p>Answer 131</p>	<p>a. Please see the Answer to Question #36.</p> <p>b. Please see Exhibit IV of this Addendum.</p>
<p>Question 132</p>	<p>Reference ITN page 17, Section 3.3.3 Service Times:</p> <p><i>The Vendor shall ensure access to services, as required, within Section 3, Scope of Work, 24 hours per day, 7 days per week, and 365 days per year.</i></p> <p>a. Could the Department please define “access to services”?</p> <p>b. Please confirm that the Department does not anticipate Vendors will provide programming on holidays.</p> <p>c. Please confirm it is the Department’s intent for Vendors to provide substance abuse treatment services from 8:00 a.m. to 5:00 p.m. Eastern Time, excluding weekends and state holidays.</p>
<p>Answer 132</p>	<p>a. “Access to services” means that the clients are able to partake in programming in accordance with the requirements set forth in this ITN.</p> <p>b. Whether the Vendor provides services on holidays is dependent on the type of services the Vendor is proposing. Residential TC programs operate over extended hours, seven days per week. See Requirement TC-008 of the ITN. Please see the Answer to Question #4.</p> <p>c. See answer (b) above.</p>
<p>Question 133</p>	<p>Reference ITN page 19, General Program Requirements:</p> <p>a. Please confirm that the Department will give preference to Vendors who also deliver the COMPASS 100 program.</p> <p>b. Could the Department please provide the number of program group rooms and private offices (for individual counseling sessions) available for programming under this ITN at each facility?</p>
<p>Answer 133</p>	<p>a. Vendors are encouraged to include Value-Added Services, described in Section 4.5 of the ITN, with their Reply. Value-added services, such as the delivery of Compass 100, will be evaluated with the Description of Offering in Section 4.11 of the ITN.</p>

	<p>b. The Department cannot provide this information at this time. Office space and program space will be determined by the type(s) of service provided at each location. Office and programming space was available for view at the Site Visits and provided Vendors a representative view of space available.</p>
Question 134	<p>Reference ITN page 23 and 24, GPR-035:</p> <p>a. GPR-035 on page 23 states a 1:75 Counselor to Client ratio is required for the Prevention service area; however, on page 24 in the same section it states "Prevention Specialist: A minimum of one position per 50 Prevention Clients". Could the Department please provide the desired Counselor to Client ratio for Prevention?</p>
Answer 134	<p>Please see the Answer to Question #34.</p>
Question 135	<p>Reference ITN page 24, General Program Requirements, GPR-036:</p> <p><i>The Vendor shall provide the Department with a copy of the staff's resumes.</i></p> <p>a. Please confirm that Vendors may provide job descriptions, including qualifications, in lieu of resumes for required staff positions yet to be filled.</p>
Answer 135	<p>Job descriptions, with required and preferred knowledge, skills, and abilities, are permissible in lieu of resumes for vacant positions, as long as qualifications and education are included, as would be found on a resume.</p>
Question 136	<p>Reference ITN page 27, D. General Program Performance Measures:</p> <p>a. In past procurements, Performance Measure penalties have been negotiated between the agency and chosen Vendor post contract award. Does the Department intend to establish Performance Measure penalties with Vendor(s) in the competitive range once negotiations commence?</p> <p>b. Have incumbent Vendors incurred any penalties due to staff vacancies?</p> <p>c. Could the Department please provide Vendors with historical dollar values for each of the Performance Measures penalties levied in the past?</p>
Answer 136	<p>a. The Department did not include "penalties" in this ITN. Financial Consequences are associated with each of the Performance Measures to incentivize positive vendor performance and associated service outcomes. Vendor Replies should be developed based on the Performance Measures and Financial Consequences outlined in the ITN. Any proposed revisions should be included in TAB D, in accordance with Section 4.10 of the ITN.</p> <p>b. No Financial Consequences have been assessed to date.</p> <p>c. See answer to (b) above.</p>
Question 137	<p>Reference ITN page 27, D. General Program Performance Measures, PM-001:</p> <p>a. Could the Department please clarify if this performance requirement means 95% of inmates enrolled in substance abuse treatment services tested in the quarter or 95% of all UAs taken in the quarter by program participants?</p>
Answer 137	<p>95% of all urinalyses, taken in a quarter, by program participants. Each program participant is expected to be tested at a minimum of once per month while enrolled in treatment.</p>
Question 138	<p>Reference ITN page 27, D. General Program Performance Measures, PM-002:</p> <p><i>Ensure that are inmates are engaged in their substance abuse treatment and programming through a review of each successful inmate's CEST assessment instrument at the beginning of programming and at program completion.</i></p> <p>a. In order for Vendors to assure they meet PM-002, could the Department please provide the definition of the term "engaged"?</p>

Answer 138	Engagement is determined by an increase in the TCU ENG Form scale score. Participants are deemed “engaged” when their scale score is greater than the mean. Please see Change No. 3 to this Addendum. For more information, please visit: https://ibr.tcu.edu/forms/client-evaluation-of-self-and-treatment-cest/
Question 139	Reference ITN page 37, 3.4.6 Aftercare Treatment Services Service Area Requirements, AT-002: <i>Aftercare Treatment Services shall include one 60 - 90 minute process group, one time per week, depending on individual clinical need, for a minimum of eight weeks and one 45 minute individual counseling session, one time per month until the inmate leaves the facility.</i> a. Please confirm graduates of the awarded Contractor’s Therapeutic Community will remain in the same facility, or the same region, to receive Aftercare.
Answer 139	The Department cannot guarantee that all inmates will remain at the same facility or the same region after they complete the TC program.
Question 140	Reference ITN page 39, Additional Services and Other Requirements, AS-010: Urinalysis: <i>Vendor staff shall obtain a “Urinalysis Consent Form” (DC5-710) for each inmate, record urinalysis results in the inmate’s clinical file, and monitor the frequency of testing to ensure inmates are tested in accordance with Department procedures.</i> a. Please confirm the Department conducts UAs. b. Please confirm the Department provides testing kits.
Answer 140	The Department confirms both a and b, above.
Question 141	Reference ITN page 44, Section 3.8, Program Locations: a. In order to design a responsive system of services, we respectfully request the Department provide Vendors the approximate amount of funding available indicated by level of care (PS, OST, IOT, TC, Aftercare) in each region. b. Does the Department anticipate the Vendor to provide the five distinct services (PS, OST, IOT, TC, Aftercare) at all 111 facilities? There are multiple facilities that have satellite locations throughout the regions. For example, the Columbia CI has a central facility, a work camp, and an annex. i. If the answer to Question 2.C is “no”, please confirm the Department anticipates Vendors will provide all services at the main facility. Using the above referenced example, this would mean Vendors provide all five services at the Columbia CI central facility only.
Answer 141	a. Please see the Answer to Question #122. b. Please see Change No. 13 to this Addendum.
Question 142	Reference ITN page 53, Section 4.10 Contents of Reply Submittals, TAB A: <i>The executive summary will describe the technical solution, proposed cost, and operational model the Vendor proposes in a concise and meaningful manner. No pricing information is to be included in the executive summary.</i> a. Please confirm no pricing information is to be included in the executive summary. b. If pricing information is to be included in the executive summary, could the Department please provide further guidance on what information Vendors shall include?
Answer 142	Please see the Answer to Question #42.

Question 143	<p>Reference ITN Attachment V, Business Reference Form, and page 54, Section 4.10 Contents of Reply Submittals, TAB B Experience and Ability to Provide Services:</p> <p><i>Using Attachment V to this ITN, Vendors shall provide three references from businesses, or government agencies, for which it has provided services of similar scope and size to the services identified in the ITN.</i></p> <p>And</p> <p><i>References shall be signed by the person providing the reference.</i></p> <p>a. As the provided Attachment V has only one signature line, please confirm that it is the Department's intent that the signature provided should be that of an Authorized Representative of the Vendor.</p> <p>i. If no, please provide a revised Attachment V, with a separate page and signature line for each proposed reference.</p>
Answer 143	Please see the Answer to Question #21.
Question 144	<p>Reference ITN page 56, TAB D Service Area Detail Solution:</p> <p><i>In TAB D, for each of the seven Service Areas, the Vendor shall:</i></p> <p><i>a) Acknowledge acceptance of each requirement.</i></p> <p>a. Please confirm Vendors are to accept and acknowledge the requirements specific to each service area. For example, for General Program Requirements, Vendors shall accept and acknowledge GPR001-GPR039.</p>
Answer 144	Yes, Vendors shall acknowledge acceptance of each requirement or include proposed revisions, as specified in Section 4.10, TAB D of the ITN.
Question 145	<p>Reference ITN page 57, TAB G, Additional ideas for improvement or cost reduction, and other supplemental materials:</p> <p>a. Will the Department evaluate any supplemental materials presented as attachments or appendices in Tab G?</p>
Answer 145	Information and attachments included in TAB G of the Vendor's Reply will not be evaluated, but will be reviewed and considered during the negotiation process.
Question 146	<p>Reference ITN page 57, TAB E, c) Work environment and technology set-up:</p> <p>a. Are Vendors permitted to use propriety web based systems?</p> <p>i. If yes, will Vendors be able to use propriety web based systems without being blocked by the Department's firewall security system?</p>
Answer 146	As long as it is web based and internet accessible.
Question 147	<p>Reference ITN page 58, TAB H, Completed Forms:</p> <p><i>Vendors shall complete the following forms and submit them to the Department in TAB H of its Reply:....</i></p> <p><i>... STATEMENT OF NO INVOLVEMENT...</i></p> <p>a. There is no associated attachment or other reference to the <i>Statement of No Involvement</i> elsewhere in the ITN. Could the Department please provide guidance to Vendors on how to properly fulfill this requirement?</p>
Answer 147	Section 4.10, TAB H, has been revised. Please see Change No. 8 of this Addendum.
Question 148	<p>Reference ITN page 60, Item B. Cost Reply Evaluation Score:</p> <p>a. The ITN does not specify how many inmates each vendor must serve. As such, a Vendor proposing an hourly rate that includes operating costs for services to two</p>

	inmates could feasibly submit the lowest cost proposal (vs. a vendor proposing an hourly rate that includes operating costs for services to two hundred inmates). Will the Department please provide clarity on how it will ensure that price proposals are evaluated based on the number of inmates each vendor proposes to serve?
Answer 148	Please refer to the listing of anticipated service types by location included with this Addendum. Please see Exhibit II to this Addendum.
Question 149	Reference ITN page 67, Mandatory Site Visits and Pre-Bid Conferences: a. Could the Department please provide Vendors with a copy of the sign in sheet for each site visit?
Answer 149	Please see the Answer to Question #57.
Question 150	Reference ITN page 70, Section 4.21 State Licensing Requirements: <i>All entities defined under Chapters 607, 617 or 620, F.S., seeking to do business with the Department shall be on file and in good standing with the State of Florida Department of State.</i> a. Please confirm Vendors are required to furnish proof of a <i>Florida Business License</i> and letter of good standing with their reply?
Answer 150	Proof of a Florida Business License and letter of good standing are not required as part of a Vendor's Reply, but the Department will review each Vendor's status with the Florida Department of State, prior to award, to ensure the requirement is met.
Question 151	Reference ITN Cover Page and Addendum #002 Cover Page: a. The solicitation title in the original ITN is <i>In-Prison Substance Abuse Treatment Services</i> ; however, the solicitation title in Addendum #002 is <i>In-Patient Substance Abuse Treatment Services</i> . Further, during the mandatory Site Visits the ITN was termed <i>In-Prison Substance Abuse Treatment Services</i> . In order for Vendors to provide an accurate response, please confirm the official title of this ITN is <i>In-Prison Substance Abuse Treatment Services</i> ?
Answer 151	The official title of this ITN is In-Prison Substance Abuse Treatment Services. The title included in Addendum 002 was a typographical error.
Question 152	Reference Addendum #002. Change No. 1: A change to the Timeline Due Date: <i>Sealed Replies are due by February 23, 2017 at 2:00 p.m., Eastern Time.</i> a. The Department intends to respond to Vendor questions by Tuesday, February 14, 2017. In order to ensure the timely delivery of proposal responses by Thursday, February 23, Vendors would need to ship Tuesday, February 21— just three business days after receiving agency answers (Monday, February 20 is a Federal Holiday). In order for vendors to have sufficient time to revise their proposals based on agency responses and ensure an accurate, competitive, and timely submittal, we respectfully request the Department extend the proposal deadline from February 23, 2017 to March 8, 2017 (or a minimum of fifteen (15) business days after the agency answers vendor questions).
Answer 152	Please see the Answer to Question #76.
Question 153	Reference Addendum #002. Change No. 2: a. There are no current Estimated Therapeutic Community Seats in Regions II and IV. Is the Department opposed to Therapeutic Communities in Regions II and IV?
Answer 153	While the Department is not opposed to TC seats in Region II or Region IV, for the purpose of their Reply, Vendor's should refer to the listing of anticipated service types

	by location included as Exhibit II to this Addendum. Service types and locations will be finalized during the Negotiation phase.
Question 154	Page 16, Section 3.2, Overview of Services: Can the vendor assume that with the new requirements requiring vendor purchase of office supplies, curriculum and training (previously provided by the Dept.) that the new contracts will exceed the previous contracts in place per region?
Answer 154	Curriculum and training are currently provided by the Vendors, and office supplies are provided by the Vendor in at least one of the existing contracts. The Department anticipates that pricing received in Replies will be competitive with the pricing currently available in the marketplace to similarly sized customers.
Question 155	Page 16, Section 3.2, Overview of Services: Please confirm that the Department will provide all computers for these services. Can you also please state how many will be provided?
Answer 155	Yes, the Department will supply computers for the Vendor's staff to utilize. The number of computers will depend on the agreed upon staff. Typically Program Directors, Clinical Supervisors, Counselors, and Clerical Staff have computers.
Question 156	Page 17, Section 3.3, Service Locations and Service Times: Please confirm the expected hours for TC staff? 3.3.3 states access to services should be 24 hours per day.
Answer 156	Please see the Answer to Question #132.
Question 157	Page 18, Section B: How Service is Provided Today: Does the Department currently administer a risk, need assessment resulting in a risk to recidivate score (low, moderate, high) as part of institutional or diagnostic intake prior to or upon transfer to the institution?
Answer 157	Yes, the Department currently administers a risk need assessment during the reception process.
Question 158	Page 20, GPR-011: GPR- 011 states that vendors are responsible for Dept. curriculum. Could you specify what DOC curriculum will be required by the Dept in addition to what the vendor proposes?
Answer 158	GPR-011 – states that “the Vendor is responsible for providing and updating all program materials, including Department-approved curriculum, audiovisual materials...” This means if the Vendor chooses to utilize a Department-approved curriculum that the Vendor will bear responsibility for reproducing it and all costs associated therewith. The Department currently has its own Parenting, Anger Management, and Compass 100 course. If the Vendor elects to utilize these curricula, the Department would provide the necessary materials on a CD to the Vendor.
Question 159	Page 20, GPR-012: Regarding the State office – is a bidder to submit a State office for each Region or will one State Office be sufficient Region 1, 2, 3 and/or 4 operations?
Answer 159	Please see the Answer to Question #93. The Vendor should provide sufficient staff to provide oversight to their operations under the resulting Contract(s). For Vendors awarded more than one (1) region, the Department would anticipate that additional staff would be required to oversee operations, commensurate with the number of awarded regions.
Question 160	Page 20, GPR-012: Will the Department please provide what staff positions if any are to be located at Vendor's proposed State Office?
Answer 160	Please see the Answers to Question #93 and #159.

Question 161	Page 20, GPR-012: Does the Department have a preference for the location of a State Office?
Answer 161	Please see the Answer to Question #93.
Question 162	Page 22, GPR-023: Does the Department expect vendor to administer CEST battery once during the course of treatment or are pre-post administrations required?
Answer 162	Pre-test/post-test format is required for all assessments included in CEST.
Question 163	Page 22, GPR-023: What specific assessment instruments are required for each phase of the continuum of care? GPR-023 states the TCU CEST and TCU TRMAForm must be utilized, but as a pre/post for all levels of service (Preventative, Outpatient, Intensive Outpatient and Long Term Residential)? Or are specific assessments required dependent upon the level of care, to mitigate outcome bias caused by repeated use of instruments throughout the continuum of care?
Answer 163	<p>The Department uses the following assessment instruments:</p> <p><u>CEST:</u></p> <p>ENGFORM - Includes 36 items from 4 scales representing: Treatment Participation, Treatment Satisfaction, Counseling Rapport, and Peer Support.</p> <p><i>Planned administration at the beginning of month 4 and discharge from the Therapeutic community.</i></p> <p>PSYFORM - Includes 33 items from 5 scales representing: Depression, Anxiety, Self-esteem, Decision Making, and Expectancy.</p> <p><i>Planned administration at the beginning of treatment and discharge from Outpatient, Intensive Outpatient, and Residential Therapeutic Community.</i></p> <p>SOCFORM - Includes 36 items from 4 scales representing: Hostility, Risk-taking, Social Support, and Social Desirability.</p> <p><i>Planned administration at the beginning of treatment and discharge from Outpatient, Intensive Outpatient, and Residential Therapeutic Community.</i></p> <p>MOTFORM - Includes 36 items from 5 scales representing: Problem Recognition, Desire for Help, Treatment Readiness, Treatment Needs Index, and Pressures for Treatment Index.</p> <p><u>CTS:</u></p> <p><i>Planned administration at the beginning of Residential Therapeutic Community.</i></p> <p>CTSFORM - Includes 36 items from 6 scales representing: Entitlement, Justification, Power Orientation, Cold Heartedness, Criminal Rationalization, and Personal Irresponsibility.</p> <p><i>Planned administration at the beginning of Outpatient, Intensive Outpatient, Residential Therapeutic Community, and Prevention which includes T4C or other cognitive-behavioral intervention and at the end of T4C or other cognitive-behavioral intervention.</i></p> <p><u>TRAUMA:</u></p> <p>TRMAFORM – Contains 17 symptom-severity items representing post-traumatic stress disorder (based on PTSD civilian version).</p> <p><i>Planned administration at the beginning of Residential Therapeutic Community services and at the completion of any trauma-informed intervention.</i></p>
Question 164	Page 22, GPR-023: Are the CEST forms required for all levels of care?

Answer 164	The CEST assessments include the top four (4) assessments in the Answer to Question #163. The Vendor is required to complete these forms when providing Outpatient, Intensive Outpatient, Residential Therapeutic Community, and Prevention services.
Question 165	Page 22, GPR-030: GPR-030 describes assessing various inmate characteristics. Are specific assessments required to gauge stages of change, participation capacity and learning style? All other characteristics appear to be captured in the CEST and TRMAForm assessments.
Answer 165	No specific assessments are required other than those described in the Department's Answer to Question #163.
Question 166	Page 23, GPR-033: Does the Department expect a Director at each site or can they be shared between sites?
Answer 166	Please see the Answer to Question #103.
Question 167	Page 23, GPR-035: Will the Department please clarify what staff positions may be shared between site location within a Region, if any?
Answer 167	Staff may be shared if the requirements (including ratios) set forth in this ITN are met.
Question 168	Page 23, GPR-035: How are staff to client ratios calculated? Is it based on the average daily census for the month to the number of vacancies on the last day of the month, or is it calculated each day based on the daily census and the number of active staff on that day and then averaged for the month?
Answer 168	Staff ratios are calculated by the number of seats in a given program and the service type. For instance, if you have a 45-seat Residential TC, the ratio is 1:15, you must maintain three (3) Counselors.
Question 169	Page 23, GPR-035: Please specify the difference between the director mentioned in GPR-033 and the Clinical Supervisor mentioned in GPR-035?
Answer 169	The Program Director typically handles operational issues and the Clinical Supervisor handles clinical supervision, charts, etc. Please see the Answer to Question #51.
Question 170	Page 23, GPR-032: Can the "back up staffing plan" included qualified interim staff members as referred to in GPR-038
Answer 170	Yes, this is allowable.
Question 171	Page 24, GPR-036: What are the qualifications and experience required for the trainer for the TC experiential training?
Answer 171	Qualifications are up to the Vendor who is responsible for hiring the trainer. GPR-036 states that in lieu of two years of TC experience, candidates may have two years of management experience as a Program Director or Clinical Supervisor and successfully complete a TC experiential training.
Question 172	Page 28, PM-004: PM-004 requires tracking of disciplinary history prior and post-treatment. How is this information gathered for reporting as it is outside the scope of service delivery? What is its source?
Answer 172	Disciplinary history is recorded and retrieved from the Department's OBIS. Vendors will have access to view this system. All disciplinary reports are entered in OBIS with an incident date, as are treatment enrollments.
Question 173	Page 29, PS-003: Please confirm that prevention staff must be onsite from 8Am to 9 PM while OP/IOP staff must be onsite from 8AM to 5PM (OST-006)?

Answer 173	The purpose for this section is to allow for flexibility of programming and evening programming. The Department requires that the Vendor have the ability to provide staff within those hours, who may or may not be required to work all of those hours.
Question 174	Page 38, AS-004: How does the Department contemplate offering alumni services...? Will graduates be cleared to return to facility or should existing CEC alumni from other jurisdictions introduce groups/support etc. to those who have completed, but remain incarcerated?
Answer 174	Alumni services are to be provided by and for inmates already at the current facility.
Question 175	Page 38, AS-002: What facilities within the each Region hold "special populations"
Answer 175	Each facility has its own page with specific population and program information, which can be accessed through the regional links below. Region I: http://www.dc.state.fl.us/facilities/region1/index.html Region II: http://www.dc.state.fl.us/facilities/region2/index.html Region III: http://www.dc.state.fl.us/facilities/region3/index.html Region IV: http://www.dc.state.fl.us/facilities/region4/index.html
Question 176	Page 41, AS-022: <i>The Vendor shall also meet individually and in-person with the Department's Program Manager monthly to address program operations, quality assurance measurement of program objectives, training needs and compliance with standards established by the appropriate program licensing authority.</i> Where does the Department require these monthly meeting to take place?
Answer 176	The monthly meetings should be held at the program location (location where services are provided).
Question 177	Page 51, Pass/Fail Requirements: <i>The Vendor has a minimum of three years' experience, within the last 5 years, in providing licensed substance abuse treatment services</i> Can the FDC please clarify that this licensed substance abuse treatment services required as pass/fail must be for an in-prison/in-custody environment similar to those locations being proposed under this ITN?
Answer 177	Experience in licensed substance abuse treatment services with a criminal justice-involved client is required, but experience may be community-based or services provided behind a secure perimeter.
Question 178	Page 51, Pass/Fail Requirements: <i>The Vendor has a minimum of three years' experience, within the last 5 years, in providing licensed substance abuse treatment services</i> Will the Department also clarify what is considered to be a licensed substance abuse treatment program?
Answer 178	This is a Program that treats individuals diagnosed with a substance use disorder that is governed and/or credentialed by the state regulatory board. In Florida, these programs are licensed by the Department of Children and Families with licensing standards set forth in Chapter 397, F.S. and Rule 65D-30, F.A.C.
Question 179	Page 51 & 85, Performance Bond: Please clarify the Performance Bond requirement. In Section 4.8.e it states "Respondent will deliver to the Department a Performance Bond or irrevocable letter of credit in the amount equal to the lesser of \$1.5 million dollars, per region, or the average annual price of the Contract (averaged from the initial five year Contract term pricing)." and Section 5.36 states "The Vendor shall furnish the Department with a Performance Guarantee in the amount of \$1,500,000,

	per region, on an annual basis, for a time frame equal to the term of the Contract." Which statement is correct as the values of the Performance Bonds would be drastically different if required annually versus the average annual price of the Contract?
Answer 179	Section 4.8.e has been revised. Please see Change No. 5 of this Addendum.
Question 180	Page 51, Performance Bond: Does the Department require a \$1,500,000 Performance Bond per region (if bidding more than one region)? Or will a single \$1,500,000 Bond suffice if accompanied by a Letter of Credit for the entire amount (\$6,000,000)?
Answer 180	Please see the Answer to Question #2. Additionally, per Section 4.8 of the ITN, the Vendor should provide either a bond or a letter of credit in the amount of \$1,500,000.
Question 181	General Question: May a bidder submit a proposal for Statewide as well as a proposal submission for each region?
Answer 181	Please see the Answer to Question #77.
Question 182	General Question: What is considered a successful program completion? What category are people placed into that have successfully performed in their treatment episode, but are released for non-disciplinary reasons, such as medical, mental, sentence expiration, or reclassification?
Answer 182	A successful completion one where the client has completed all goals and objectives on his/her Individual Services Plan and the requirement of the program. A client who performs well, but is released prior to completion is an Administrative Discharge. Administrative Discharges do not count for or against the Vendor in regards to successful completion rates. Please see Requirement GPR-016 of the ITN.
Question 183	General Question: On a daily basis, Is there data available to download or transfer electronically from the Department's electronic systems for migration into the vendor's database to ease data entry requirements and maintain data consistency between the redundant systems? Examples may be custody dates and locations, expected release dates, convicted crime and other offender demographics?
Answer 183	Data exchanges may be available. Vendors should include requests for information in the relevant sections of TAB D of their Reply.
Question 184	General Question: Are electronic records required for the treatment services, if so, will vendors have access to the internet?
Answer 184	No, electronic records are not required. Yes, Vendors will have access to the internet.
Question 185	General Question: What is the average length of time left on an inmate's sentence before entering treatment? What is the maximum time before the end of sentence that someone can be enrolled in treatment?
Answer 185	The average amount of time on an inmate's sentence before entering treatment is approximately 14 months. Inmates may not participate in treatment prior to 50 months from date of release.
Question 186	General Question: Will the Department consider extending the period of time between when the answers to questions are released and the due date of the submission?
Answer 186	Please see the Answer to Question #76.
Question 187	General Question: Can IOP and OP clients be comingled in group?
Answer 187	Yes, Intensive Outpatient and Outpatient clients can be co-mingled in group counseling sessions.

Question 188	In review of the list of scheduled visits as required by the ITN, it did not include Charlotte Correction Center and/or Lee County. Are the only facilities participating in the ITN the one's on the site visit list?
Answer 188	No, site visits included a representative sample of sites where services will be provided. Please see list of anticipated services and location included with this Addendum. Please see Exhibit II of this Addendum.
Question 189	To thoroughly understand and evaluate this opportunity (FDC ITN-17-112), especially from a staffing perspective, it would be helpful for potential bidders to know expected volumes per facility as soon as practical. Thank you.
Answer 189	Please see list of anticipated services and location included with this Addendum. Please see Exhibit II of this Addendum.
Question 190	I am writing in regards to the performance bond requirements for FDC ITN-17-112. Is there a bond form that the State or the Department of Corrections requires? The underwriters need a copy of the form in order to develop their cost estimates. We have located bond forms for other contract types on myFloridamarketplace but were uncertain which form to use in this instance.
Answer 190	Please see the Answer to Question #78.

REVISED

**ATTACHMENT III-PRICE INFORMATION SHEET
FDC ITN-17-112**

For the Price Sheet, Vendors shall provide a per diem rate, per participant, per service type, required to provide all services in this ITN.

Region Included in Reply: _____
(If Statewide, please indicate that here)

Per Diem Rate for In-Prison Substance Abuse Treatment Services (Unit Price)

SERVICE TYPE	Prevention	Aftercare	Outpatient	Intensive Outpatient	Residential Therapeutic Community	TOTAL PRICE
ORIGINAL CONTRACT TERM (Five Years)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
RENEWAL CONTRACT TERM (Up to Five Years)	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

GRAND TOTAL PRICE \$ _____
(TOTAL of ORIGINAL CONTRACT TERM and RENEWAL CONTRACT TERM)

VENDOR NAME

FEIN #

PRINTED NAME OF AUTHORIZED REPRESENTATIVE

SIGNATURE OF AUTHORIZED REPRESENTATIVE

DATE

REVISED

**ATTACHMENT IV – PASS/FAIL REQUIREMENT CERTIFICATION
AND NON-COLLUSION CERTIFICATION
FDC ITN-17-112**

1. Business/Corporate Experience

The Vendor has a minimum of three years' experience, within the last five years, in providing licensed substance abuse treatment services. The Vendor has experience in the provision of licensed substance abuse treatment services for an aggregate patient population of, at least 1,000 inmate patients at any one time in prison, jail or other comparable substance abuse treatment services setting.

2. Prime Vendor

This is to certify that the Respondent will act as the prime Contractor to the Department for all services provided under the Contract that results from this ITN.

3. Performance Bond

This is to certify that the Respondent is able to demonstrate their ability to meet the performance bond requirements prior to execution of a Contract, the Respondent will deliver to the Department a performance bond or irrevocable letter of credit in the amount of \$1.5 million, per region. The bond or letter of credit will be used to guarantee at least satisfactory performance by Respondent throughout the term of the Contract (including renewal years).

4. Reply Bond

This is to certify that the Respondent will deliver to the Department a Reply bond or check in the amount of \$500,000 dollars. The check/bond ensures against a Vendor's withdrawal from competition subsequent to their submission of a Reply.

5. Meets Legal Requirements

This is to certify that the Respondent's proposed offering and all services provided under the Contract will be compliant with all laws, rules and other authority applicable to providing the services including, but not limited to, Florida's Open Government laws (Article I, Section 24, Florida Constitution, Chapter 119, F.S.).

6. MyFloridaMarketPlace Registration and Transaction Fee

Respondent is registered, or will agree to register, in MFMP before execution of the prospective Contract. SEE PUR 1000, SECTION 14. The 1% transaction applies to this Contract and is detailed in PUR 1000.

7. Financial Stability

This is to certify that the Respondent attests to its positive financial standing and that the Respondent's current Dun & Bradstreet (D&B) Financial Stress Score has a Financial Stress Class of 1, 2, 3 or 4.

8. Statement of No Inducement

This is to certify that no attempt has been made or will be made by the Vendor to induce any other person or firm to submit or not to submit a Reply with regard to this ITN. Furthermore this is to certify that the Reply contained herein is submitted in good faith and not pursuant to any agreement or

discussion with, or inducement from, any firm or person to submit a complementary or other non-competitive Reply.

9. Statement of Non-Disclosure

This is to certify that neither the price(s) contained in this Reply, nor the approximate amount of this Reply have been disclosed prior to award, directly or indirectly, to any other Vendor or to any competitor.

10. Statement of Non-Collusion

This is to certify that the prices and amounts in this Reply have been arrived at independently, without consultation, communications, or agreement as to any matter relating to such prices with any other Vendor or with any competitor and not for the purpose of restricting competition.

11. Statement of No Conflict of Interest

For the purpose of participating in this solicitation process and complying with the provisions of chapter 112, of the Florida Statutes, the undersigned corporate officer hereby discloses the following information to the Department of Management Services:

1. Identify all corporate officers, directors or agents of the Respondent who are currently employees of the State of Florida or one of its agencies, were employees of the State of Florida or one of its agencies in within the last two years, or are currently a spouse, parent or sibling such of an employee of the State of Florida or one of its agencies:

2. For all persons identified in section 1 above, please identify if they own an interest of ten percent (10%) or more in the company/entity named above:

Dated _____ day of _____ 2016.

Name of Organization: _____

Signed by: _____

Print _____

Being duly sworn deposes and says that the information herein is true and sufficiently complete

Subscribed and sworn _____ day of _____ 2016.

Personally _____ OR Produced _____ Type of Identification _____

Notary Public: _____

My Commission Expires: _____

EXHIBIT I
Current In-Prison Substance Abuse Treatment Service Contracts

Contract	Vendor	Location	Current Seat Type	Current Seats
C2330	The Unlimited Path	Century CI	Therapeutic Community; Prevention	136
C2330	The Unlimited Path	Jefferson CI	Therapeutic Community; Prevention	68
C2330	The Unlimited Path	Gulf CI Annex	Intensive Outpatient; Prevention	110
C2330	The Unlimited Path	NWFRC	Intensive Outpatient; Prevention	85
C2331	Community Education Centers	Lawtey CI	Intensive Outpatient; Prevention	85
C2331	Community Education Centers	Madison CI	Intensive Outpatient; Prevention	85
C2331	Community Education Centers	Mayo CI	Intensive Outpatient; Prevention	110
C2331	Community Education Centers	Taylor CI	Intensive Outpatient; Prevention	85
C2331	Community Education Centers	Hernando CI	Intensive Outpatient; Prevention	60
C2332	The Unlimited Path	Lowell Annex	Therapeutic Community	165
C2332	The Unlimited Path	Lowell Main	Prevention/Aftercare	50
C2332	The Unlimited Path	Avon Park CI	Intensive Outpatient; Prevention	85
C2332	The Unlimited Path	Lake CI	Intensive Outpatient; Prevention	85
C2334	Community Education Centers	Everglades CI	Intensive Outpatient; Prevention	110
C2334	Community Education Centers	Okeechobee CI	Intensive Outpatient; Prevention	110
C2334	Community Education Centers	Sago Palm	Intensive Outpatient; Prevention	110
C2417	SMA Behavioral	Columbia CI	Intensive Outpatient	118
C2752	The Unlimited Path	Franklin CI	Therapeutic Community	85
C2752	The Unlimited Path	Jackson CI	Therapeutic Community; Education	68
C2752	The Unlimited Path	NWFRC Annex	Therapeutic Community; Education	136
C2752	The Unlimited Path	Marion CI	Therapeutic Community; Education	266
			TOTAL	2,212

EXHIBIT II
Program Estimated Seats per Service, per Location

Facility	Therapeutic Community	Intensive Outpatient	Outpatient	Aftercare	Prevention
Century	68	50	100	25	50
Franklin	68	0	50	25	50
Gulf Annex	0	50	100	25	50
Jefferson	68	0	50	25	50
Jackson	68	0	50	25	50
NWFRC	0	50	50	25	50
NWFRC Annex	68	50	100	25	50
Region I - Total	340	200	500	175	350
Columbia Annex	0	75	50	25	25
Lawtey	0	50	50	25	25
Madison	0	50	50	25	25
Mayo Annex	0	50	100	25	25
Taylor Annex	0	50	50	25	25
Florida State Prison	0	0	100	25	25
Region II - Total	0	275	400	150	150
Lowell Annex	69	50	175	100	50
Marion	136	100	225	100	75
Avon Park	0	50	50	25	25
Lake	0	50	50	25	25
Region III - Total	205	250	500	250	175
Everglades	0	50	100	25	50
Okeechobee	0	50	100	25	50
Sago Palm	0	50	100	25	50
Homestead	0	50	50	25	25
Region IV - Total	0	200	350	100	175



EXHIBIT III

Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 4, 2017 at 2:00 p.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Jefferson CI

Name	Company	Email Address
R. Lisa Jackson	WestCare	lisa.jackson@westcare.com
Kasey Faulk	FDC	
Maggie Agerton	FDC	
David Cooper	GEO	dcooper@geogroup.com
Armanda Ralph	FDC	
Keyanna Chambers	FDC	
Chris Brannon	FDC	
John Thurston	GEO	jthurston@geogroup.com
Dawn Ruzich	Gateway Foundation	druzich@gatewayfoundation.org
Mayli Clark	UPI	mayli@valmulelpath.com
Steven Alford	TTTF	Stevena@thetransitionhouse.org
MELISSA WEGLARZ	CEC	MELISSA.WEGLARZ@CECINTL.COM
Paul Wilder	CEC	Paul.wilder@cecintl.com



Florida Department of Corrections

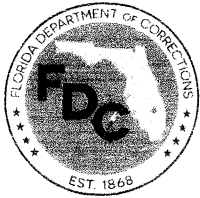
In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 5, 2017 at 9:00 a.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Taylor CI

Name	Company	Email Address
David Cooper	GEO	dcooper@geogroup.com
John Thurston	CEO	jthurston@geogroup.com
Maggie Agerton	FDC	
Kasey Faulk	FDC	
Steve Alford	TTHI	StevenA@the transition house.org
Gus MAZORRA	BRIDGES of Florida	GMAZORRA@BRIDGESofAMERICA.org
DAVID HARRIS	" "	DHARRIS@BRIDGESofAMERICA.org
Shannon VARNES	Taylor CI	
Franwood	Taylor CI	
Robert Surles	Taylor CI	
Michael Mitchell	Taylor CI	
Mitchell L. Keen	Taylor CI Annex	
Dawn Ruzich	Gateway	druzich@gatewayfoundation.org
Paul Wilder	CEC	paul.wilder@cecintl.com
MELISSA WEGLARZ	CEC	MELISSA.WEGLARZ@CECINTL.COM
Lisa Jackson	Westcare	Lisa.Jackson@westcare.com



Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 5, 2017 at 9:00 a.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Taylor CI

Name	Company	Email Address
Mayli Clark	The Unlimited Path	Mayli@unlimitedpath.com
Andrew Williams	SMA Behavioral Health Services	awilliams@smabehavioral.com



Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 5, 2017 at 1:00 p.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Mayo Annex

Name	Company	Email Address
Kasey Faulk	FDC	
Maggie Agerton	FDC	
Steve Alford	TTHI	Stevenc@thetransitionhouse.org
Gus MAZORRA	BRIDGES	GMAZORRA@BRIDGESOFAMERICA.ORG
DAVID HARRIS	BRIDGES	DHARRIS@BRIDGESOFAMERICA.ORG
John Thurston	GEO	Jthurston@geogroup.com
MELISSA WEGLARZ	CEC	MELISSA.WEGLARZ@CECINTL.COM
Paul Wilder	CEC	Paul.wildere@cecintl.com
Mayli Clark	UPI	MayLi@unlimitedpath.com
Andrew Williams	SMA	awilliams@smahealthcare.com
Keith Pollaci	FDC	Keith.Pollaci@
Dawn Ruzich	Getway	druzich@getwayrehab.com
Lisa Jackson	WestCare	Lisa.Jackson@westcare.com



Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 6, 2017 at 9:00 a.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – North Florida Reception Center Annex

Name	Company	Email Address
Kasey Faulk	FDC	
Maggie Agerton	FDC	
BERTRAND Randolph	The Unlimited Path, Inc	shelia@unlimitedpath.com
R Lisa Jackson	West Care	lisa-jackson@westcare.com
Dawn Ruzich	Gateway	druzich@gatewayfoundation.org
DAVID COOPER	GEO	dcooper@geogroup.com
Paul Wilder	CEC	paul.wilder@cecintl.com
MELISSA WEGLARZ	CEC	MELISSA.WEGLARZ@CECINTL.COM
John Thurston	GEO	jthurston@geogroup.com
Mike Dunehead-Cobett, Mgr	FDC	
Steven Alford	TTI	Stevena@tetransitionhouse.org



Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 10, 2017 at 10:00 a.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Lowell Annex

Name	Company	Email Address
Kasey Faulk	FDC	
Naggie Agerton	FDC	
Paul Wilder	CEC	Paul.Wilder@cecintl.com
MEUSSA WEGLARZ	CEC	MEUSSA.WEGLARZ@CECINTL.COM
Steve Doherty	Gateway Foundation	sdoherty@gatewayfoundation.org
BERT RANDOLPH	UPI	SHIELIA@UNLIMITEDPATH.COM
GUS MAZORRA	BRIDGES	GMAZORRA@BRIDGESOFAMERICA.ORG
James McClelland	Bridges	jmcclelland@bridgesofamerica.org
J.D. Wannwright	The Transition House	jeffw@thetransitionhouse.org
Tammie Strickland	DPC	Tammie.Strickland@fdcmvflorida.com
Leslie Balowick	Westcare	leslie.balowick@westcare.com
MATT WIETNER	GEU	Matt MWietner@GEUgroup.com
Rebecca Peuk	AEO	rpeuk@geocareinc.com



Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 10, 2017 at 1:00 p.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Marion CI

Name	Company	Email Address
Kasey Faulk	FDC	
Maggie Agerton	FDC	
Tammie Strickland	FDC	
BERT Randolph	UPI	Shelia@UnlimitedPath.com
J.D. Wainwright	TTIT	jeffw@thetransitionhouse.org
Gus MAZORRA	BRIDGES	GMAZORRA@BRIDGESOFAMERICA.ORG
James McClelland	BRIDGES	JMcClelland@BRIDGESOFAMERICA.ORG
Leslie BALONICK	Westcare	leslie.balonick@westcare.com
Stephen Osherty	Gateway Foundation	sdoherly@gatewayfoundation.org
MELISSA WEGLARZ	CEC	MELISSA.WEGLARZ@CECINTL.COM
Paul Wilder	CEC	Paul.wilder@cecintl.com
MATT WIRTNER	GEO	MWIRTNER@GEOGROUP.COM
Rebecca Peck	GEO	rpeck@geocoreinc.com
Jeff HONEN	FDC	



Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 11, 2017 at 9:00 a.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Sago Palm Re-Entry Center

Name	Company	Email Address
Kasey Faulk	FDC	
Maggie Agerton	FDC	
Major Hickman	FDC	
Melissa Weglarz	CEC	MELISSA.WEGLARZ@CECINTL.COM
Paul Wilder	CEC	paul.wilder@cecintl.com
Brett Akost	TT#	brett@thetransitionhouse.org
Gus Mazorro	BRIDGES	GMazorro@BRIDGESofAMERICA.org
David Harris	BRIDGES	DHARRIS@BRIDGESofAMERICA.org
Angela Lewis	The Unlimited Path	Angela.CalderonLewis@UPC.org
Matt Wirtner	GEO	MWirtner@GEOgroup.com
Leslie Balovick	Westcare	leslie.balovick@westcare.com
Stephen Doherty	Gateway Foundation	sdoherty@gatewayfoundation.org
Briet Randolph	UPI	Shristia@UnlimitedPath.com
David Meehan	GEO	dmeehan@geocareinc.com



Florida Department of Corrections

In-Patient Substance Abuse Treatment Services

FDC ITN-17-112

January 11, 2017 at 2:00 p.m., E.T.

Mandatory Pre-Bid Conference/Site Visit – Okeechobee CI

Name	Company	Email Address
GUS MAZORRA	BRIDGES	GMAZORRA@BRIDGESOFAMERICA.ORG
DAVID HARRIS	BRIDGES	DHARRIS@BRIDGESOFAMERICA.ORG
Leslie BALONICK	Westcare	leslie.balonick@westcare.com
MELISSA WEGLARZ	CEC	MELISSA.WEGLARZ@CECINTL.COM
MATT WIRTNER	GEO	MWIRTNER@GEOGROUP.COM
BRETT D'AROST	TTH	brett@thetransitionhouse.org
Angela Lewis	The Unlimited Path	Angela.CaldwellLewis@fdc.com
BERT RANDOLPH	UPI	SHELIA@UNLIMITEDPATH.COM
Paul Wilder	CEC	paul.wilder@cecintl.com
Stephen Doherty	Gateway Foundation	sdoherby@gatewayfoundation.org
Kasey Faulk	FDC	
Maggie Agerton	FDC	

EXHIBIT IV
RTC Staffing Report

Work Site Contract C2752	Position Title & Number	Staff Name	Position Startup Date	Hire Date	Vacancy Date	Projected TBF Date	Comments
Marion CI	Program Director	Birch, Charles	01/29/14	01/29/14	06/13/14		transfer to Lowell CI
		Dozier, Michael		10/01/14	10/12/14		Interim
		McDaniel, Deborah		10/13/14	12/23/14		terminated
		Dozier, Michael		12/24/14	01/19/15		interim
		Nelson, Juan		01/20/15	03/11/16		resign
		Alim, Sabir		03/28/16			
	Clinical Supervisor #1	Shelton, Jacqueline	01/29/14	01/29/14	12/23/2014		terminated
		Clapp, Patricia		12/30/14	2/27/2015		interim
		Giordano, Scott		03/02/15	4/25/2015		
		Byrd, Erma		04/29/15			
	Clinical Supervisor #2	Clark, Virginia	07/01/14	07/01/14	8/13/2014		Moved to CN
		Roberts, Leslie		08/14/14			
	Counselor #1	Day, Andrew	01/29/14	02/10/14	6/27/2014		transfer from Lowell CI
		Byrd, Erma		07/01/14	4/28/2015		promotion to Clin. Supervisor
		Sherry Shivers		05/26/15	10/8/2015		resigned
		O'Loughlin, Julie		11/09/15	07/07/16		transfer to FWRC
		Truss, Arlene		08/03/16			
	Counselor #2	Kahl, Lisa	01/29/14	01/29/14	3/9/2014		Quit
		Tyson, Carol		11/03/14	7/11/2016		
		Cooper, Jennifer		08/29/16			
	Counselor #3	Day, Sarah	01/29/14	01/29/14	07/29/16		resigned
		Megan Erp		10/17/16			
	Counselor #4	Dillion, Robert	01/29/14	01/29/14	04/25/14		walked
		Lomax, Glenn		10/06/14			
	Counselor #5	Farr, Duane	01/29/14	01/29/14	03/11/14		Quit
		Myers, Steve		05/19/14	10/10/14		terminated
		Davis, Charles		10/13/14	10/15/14		Float
		Medina, Hector		11/17/14	01/07/15		Resigned
		Owens, Marcelline		02/01/15	02/06/15		float
		Kelley, Lakeisha		02/09/15	11/02/15		maternity leave
Markofski, Michael			11/03/15	12/31/15		Float	

RTC Staffing Report

	Kelley, Lakeisha		01/04/16	02/12/16		resigned
	Levay, Mary Ann		03/07/16	04/28/16		resigned w/o notice
	Markofski, Michael		04/29/16	05/13/16		float
	Markofski, Michael		05/16/16	08/19/16		transfer to float CN
	Malone, Patrick		08/22/16	09/06/16		resigned
	Jane Dipaolo		09/28/16	10/07/16		resigned w/o notice
	Bashlin, Yvonne		10/10/16	01/03/17		resigned
	Soto, Kassandra					waiver
Counselor #6	Olver, Thomas	01/29/14	01/29/14	08/28/15		Resigning
	Rivera, Sylvia			09/28/15	12/07/16	Transfer to Lowell
	DeMonte, Lucas		01/03/17			
Counselor #7	Schofield, Larry	01/29/14	01/29/14	11/26/14		Quit
	Owens, Marcelline			12/01/14	12/14/14	Interim
	Lawson, Tshwanda			12/15/14	09/25/15	resigned
	Ebot, Augustine			10/05/15	12/17/15	resigned w/out notice
	Markofski, Michael			01/01/16	01/18/16	Float
	Hicks, Melissa			01/19/16		
Counselor #8	Sanctious, Syliva	01/29/14	02/03/14	10/27/15		
	DelKeidra Modican			10/27/15	12/01/15	Float
	Saoud, Samira			12/02/15	02/03/16	resigned
	Caiazzo, Christine			02/08/16	12/13/16	transfer to Lowell IOP
	Stephens, April					Level II
Counselor #9	Lomeland, Louise	01/29/14	02/04/14	07/02/14		Quit
	Charlot, Elisabeth			09/02/14	12/09/14	Quit w/o notice
	Trowers, Kathryn			12/29/14		
Counselor #10	Dawkins, Eunice	07/01/14	07/01/14			
Counselor #11	Yates, Maureen	07/01/14	07/01/14	03/24/15		resigned
	Baker, Daniel			04/27/15	05/08/15	Float
	Burton, Frank			05/11/16		resigning 6-15-16
	Bright, Chris			07/05/16		

RTC Staffing Report

Counselor #12	McAndrew, Barry	07/01/14	07/01/14	09/15/15	resigned
	Lomeland, Louise		09/21/15	09/30/15	quit w/out notice
	Cohen, Tiwana		11/09/15	07/14/16	resigned
	Gotay, Carolyn		07/06/16	10/31/16	resigned w/o notice
	Izquierdo, Peter		11/28/16	12/27/16	resigned
	Morman, Trevorblack				Level II, Quals
Counselor #13	Taylor, Latesha	07/01/14	07/01/14	07/31/14	Quit w/o notice
	Franklin, James		09/02/14	03/20/15	transfer to BRE 3/23/15
	Baker, Daniel		03/21/15	04/26/15	Float
	Caddell, Deborah		04/27/15	06/16/16	resigned
	Karmen Pearson		07/13/16	11/10/16	resigned
	Smith, Debra		01/18/17		
Counselor #14	Owens, Derrick	07/01/14	07/07/14	07/10/14	Quit
	Ashbrook, Alice		07/28/14	01/23/15	quit w/no notice
	Baker, Daniel		01/24/15	03/01/15	float
	Grinnell, Kevin		03/02/15	08/10/15	walked by DOC
	Lindsay, Mark		08/31/15	10/08/15	resigned w/o notice
	Thomas, Trudy		10/13/15		
Counselor #15	Rivera, Cesar	07/01/14	07/08/14	10/28/14	Leave of Absence
	Daniel Baker		11/17/14	12/28/14	Float
	Larry, Rosalind		12/29/14	07/15/16	resigned
	Sandra Marquez		09/22/16		
Counselor #16	Cucchiara, Jason	07/01/14	07/21/14	07/27/14	Quit
	Clark, Virginia		08/14/14		
Counselor #17	Spivie, Angel	07/01/14	07/28/14	08/29/14	Quit
	Caiazzo, Christine		10/01/14	08/21/15	Resigned
	Jabbar, Kevin		09/21/15		
Counselor #18	Matthews, Myrna	07/01/14	07/14/14	05/13/16	trans. To Float
	Matthews, Myrna		05/16/16	05/24/16	Float
	Morris, Pamela		05/25/16		

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Academic Teacher 1	DeJesus, Yaraliz	01/29/14	01/29/14	8/8/2014		Quit
	Lucas, Robert		09/08/14	7/30/2015		resigned
	Marchese, Lisa		08/10/15	10/6/2016		resigned
	Marchese, Lisa		12/12/16			
Academic Teacher 2	Wilkerson, Debra	07/01/14	07/14/14	11/26/2014		resigned
	FitzRandolph, Stephanie		12/01/14	2/10/2015		quit w/out notice
	George, Mayre Jo		03/16/15	3/24/2015		quit w/out notice
	Owens, Marcelline		04/06/15	3/25/2016		resigned
	Dey, Josephine		04/11/16			
Clinical Support #1	Kemp, Robert	01/29/14	03/07/14	06/29/14		Quit
	Trowers, Kathryn		07/09/14	12/26/14		promoted to counselor 12-29-14
	Cohen, Tiyana		01/20/15	11/06/15		promoting to counselor
	Blando, Allyson		11/23/15	09/09/16		resigned
	Collins, Marla		10/03/16			
Clinical Support #2	Henriques, Melissa	01/29/14	03/27/14	06/10/14		walked
	Lawson, Tshwanda		07/09/14	12/12/14		promoted to counselor 12-15-14
	Owens, Marcelline		12/15/14	01/31/15		Float
	Cesar Rivera		02/02/15	02/06/15		terminated
	Flores, Elvia		03/02/15	07/08/15		resigned
	Spikes, Torey		07/09/15	07/24/15		float
	Carter-Smith, Carol		07/27/15	10/30/15		resigned
	Bowen, Edmund		11/23/15	03/16/16		resigned w/o notice
	James-Dean, Brittany		04/18/16	09/15/16		resigned
	Miranda Hunt		10/24/16			
Clinical Support #3	Kelley, Lakeisha	07/01/14	07/11/14	02/09/15		Promoted
	Cochran, Heather		02/09/15	08/30/15		resigning 8-30-15
	Nieves, Mercedes		09/14/15	10/02/15		quit
	Carter, Cecily		11/09/15	11/10/15		quit w/out notice
	Modican, Delkeidra		11/11/15	12/31/15		Float
	Gotay, Carolyn		01/04/16	07/05/16		promoting to CN
	Jay, Tessa		07/06/16	11/03/16		resigned w/o notice
	DelCastillo, Becky		12/19/16	01/13/17		trans. To Lowell
	Kathleen Goodhue					Level II, stmt
Clinical Support #4	West, Melissa	07/01/14	07/14/14	07/14/14		Quit w/o notice

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		Spencer, Marcharie		09/02/14	10/31/14		
		Kielbon, Lisa		11/19/14	12/21/14		Quit
		Leach, Lakeria		01/10/15	02/07/15		walked by DOC
		Owens, Marcelline		02/09/15	04/03/15		float
		Zilai, Erich		04/13/15	04/26/15		quit w/out notice
		Baker, Stephanie		05/11/15	11/14/16		resigned
		Barker, Mercedes				01/23/17	
	Clerical Support #1	Paul, Debbie	01/29/14	03/31/14	07/25/14		Quit
		Canning, Naquia		08/04/14	12/24/14		Terminated
		McIntosh, Tricia		01/05/15			
	Clerical Support #2	Gordon, Narobi		12/08/14			
	Float	Baker, Daniel		11/17/14	07/30/15		promoted to PD at Lake CI
		Modican, Delkeidra		10/20/15	05/25/16		Resigned
		Bashlin, Yvonne		05/26/16	10/07/16		to CN
		Denard, Deborah		10/31/16			
	Float	Owens, Marcelline		12/01/14	04/03/15		promoted to Academic Teacher
		McCrae, William		05/11/15	05/29/15		quit w/out notice
		Spikes, Torey		06/29/15	07/31/15		transfer to Lake CI
		Markofski, Michael		10/26/15	05/13/16		trans. To CN 5/16/16
		Matthews, Myrna		05/16/16	06/23/16		resigned
		Markofski, Michael		06/24/16			
Work Site	Contract	Position Title	Staff	Position	Hire	Vacancy	Projected
C2752	C2752	& Number	Name	Startup	Date	Date	TBF
				Date	Date	Date	Comments
Jackson CI	Program Director	Gatewood, Constance		01/29/14	1/29/14	07/28/15	transfer to NWFRC IOP
		Bishop, Amie			7/29/15	09/07/15	interim
		Dozier, Michael			9/8/15	09/11/15	interim
		Laster, Sherri			9/14/15	09/19/16	terminated
		Taylor, Taundra			9/22/16		
	Clinical Supervisor	Baker, Rufus		01/29/14	1/29/14	10/17/2014	transferred to NWFRC Annex
	Counselor #3	Horton, Jennifer		01/29/14	1/29/14	05/02/14	did not work out notice
		Russell, Ayesha			5/19/14	07/22/15	resigned w/o notice
		Brantley, Mandy			9/15/15	06/05/16	resigned w/o notice
		Waters, Olivia			6/20/16	08/28/16	resigned w/o notice
		Spikes, Anthony			8/29/16	11/03/16	resigned w/o notice
		Saffold, April			11/28/16	12/09/16	transfer to Gadsden

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	Marketa Clay		1/3/17			
Counselor #4	Rogers, Karlicia	01/29/14	1/29/14	07/17/15		resigned w/o notice
	English, Demetria		8/31/15	02/19/16		terminated
	Cross, Heather		2/24/16	04/15/16		resigned
	Gibbs, Andrea		4/25/16	05/20/16		terminated
	Keyton, Ericka		5/23/16	09/06/16		terminated
	Lemuel Driskell		9/26/16	10/31/16		resigned w/o notice
	Cecillia Hardy		1/3/17	01/06/17		resigned w/o notice
Counselor #5	Thompson, Jamie	01/29/14	1/29/14	02/16/14		resigned/wants interim
	Dandridge, Michelle		4/21/2014	7/22/2015		walked
	Bishop, Amie		9/7/2015	9/11/2015		interim
	Chavers, Jessica		9/14/2015	12/21/2015		walked
	Newsome, Monika		12/14/2015	3/4/2016		terminated
	Bonds, Shamika		4/4/2016	9/8/2016		resigned w/o notice
	Williams, Bradley		10/10/2016			
Counselor #6	Williams, Sheena	01/29/14	1/29/14	5/16/2014		transfer to Gadsden 5/19/2014
	Frost, Nicole		6/9/2014	05/28/15		resigned
	Wilson, Kellie		6/1/2015	06/24/16		resigned
	Leggett, Rakia		7/11/2016			
Counselor #9	Sowell, Robert	01/29/14	2/6/14	03/07/14		walked
	Bell, Calvin		9/11/14	07/13/15		promoted to PD at Gulf
	Whitfield, Monica		7/27/15	09/09/16		resigned
	Bonacrews, Cortney		10/10/16			
Academic Teacher	Rogers, Phillip	01/29/14	1/29/14	07/11/14		Quit
	Teel, Thomas		8/4/14	08/04/14		Quit w/o notice
	Abbott, Staci		10/1/14	12/15/2015		Resigned
	Gulley, Cynthia		1/19/16			resigning 1/3/16
	Tomeka Bankston		1/3/17			
Clinical Support #1	Baker-Williams, Janice	01/29/14	3/4/14	05/07/14		quit, no notice
	Wilson, Kellie		5/27/14	06/01/15		promo to CN
	Cynthia Griffin		6/1/15	06/08/15		quit, no notice
	Hicks, Ashley		7/27/15	07/17/16		resigned
	Shaw, Brittaney		8/29/16			
Clinical Support #2	Chavers, Jessica		2/23/15	09/11/15		promote to CN

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		Shanetha Beachum		10/5/15	04/01/16		to Clerical	
		Ramona Smith		4/6/16				
	Clerical Support	Smith, Marilyn	01/29/14	1/29/14	2/25/2014		quit without notice	
		Calloway, Kytia		4/7/14	7/24/2014		Quit	
		Bell, Calvin		7/28/14	8/4/2014		Float	
		Barnes, Ravan		8/5/2014	8/23/2016		resigned	
		Shanetha Beachum		4/4/2016	10/4/2016		terminated	
		Renee Eisenman		10/26/2016				
	Counselor/Sub Teacher	Amy Martin		12/1/15				
Work Site Contract C2752	Position Title & Number	Staff Name	Position Startup Date	Hire Date	Vacancy Date	Projected TBF Date	Comments	
Polk CI	Program Director	Martin, Eric	01/29/14	01/29/14	09/03/14		moved from Avon Park CI	
		Harmon, Terry		09/16/14		TBD	promoted to Asst. Reg. Director	
		Emanuel, Tchaiko					TBD	
	Clinical Supervisor	Agelidis, Steven	01/29/14	01/29/14	10/24/14			Quit
		Thomas, Gregory		11/17/14	03/04/16			Interim
		Regal, Amber		03/07/16	4/8/2016			resigned
		Emanuel, Tchaiko		05/23/16				promote to PD
		Crump, Andre					TBD	trans. From Avon Park
	Counselor #1	Wilcox, Bill	01/29/14	01/29/14	4/15/2016			transfer to Float
		Horne, Belinda		04/18/16				
	Counselor #2	Cutting, Elizabeth	01/29/14	01/29/14	7/8/2014			Quit
		Hessic, Deborah		08/04/14	06/26/15			Resigning 6-26-15
		Carlucci, Wendy		07/06/15	08/19/16			Resigned
		Booker, Constance		08/29/16				
	Counselor #3	Harmon, Terry	01/29/14	02/04/14	09/15/14			Promoted to PD
		Antonio Coles		10/13/14	10/17/14			Float
		Chance, Greg		10/20/14	05/27/15			quit, no notice
		Horne, Belinda		05/28/15	06/26/15			float
		Barcello, Dennis		06/29/15				
	Counselor #4	Bakieva, Mariela	01/29/14	01/29/14	2/28/2014			resigned
		Marshall, Ann		4/1/2014	6/16/2014			transferred to Lake

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	Richberg, Solomon		6/17/2014	11/15/2014		
	Dick, William		12/2/2014	2/26/2015		resigned
	Harris, Kimberley		3/23/2015	6/8/2015		quit w/o notice
	Horne, Belinda		6/29/2015	7/10/2015		float
	Cruz, Helen		7/13/2015			
Counselor #5	Haynes, Errol	01/29/14	01/29/14			
Re-Entry Specialist	Nelson, Shantana	01/29/14	01/29/14	12/26/14		promoted to Academic Teacher
	Coles, Antontio		12/29/14			
Re-Entry Specialist	Lion, Terry	01/29/14	01/29/14	05/02/14		quit to move out of area
	Drake, Shannon		5/16/2014			
Academic Teacher	Dick, William	01/29/14	01/29/14			
	Nelson, Shantana		12/29/14	3/11/2016		resigned
	Timms, Anne		04/20/16	5/12/2016		resigned w/out notice
	Shiple, Mark		06/08/16	10/12/2016		resigned w/out notice
	Sullivan, Sharon		10/28/16			transfer
Prevention Specialist	Williams, Don	01/29/14	01/29/14	04/09/15		resigned
	Horne, Belinda		04/10/15	04/20/15		Float
	Jennings, Robert		04/21/15	04/22/16		resigned
	Spikes, Torey		05/16/16	09/30/16		resigned
	Quinones, Jorge		11/07/16			
Prevention Specialist	Drake, Shannon	01/29/14	01/29/14	05/15/14		Promoted to CN
	Gayle, Lutchia		06/30/14	10/11/14		Quit
	Coles, Antontio		10/20/14	12/12/14		Float
	Austin, Judy		12/15/14			resigned 1/11/16
	Medina, Iris		01/25/16	01/26/16		Quit w/o notice
	Horne, Belinda		01/27/16	03/04/16		float
	Reid, Tamika		03/07/16	11/15/16		resigned
	Exavier, Shanadeur		12/19/16			
Prevention Specialist	Dyer, Elizabeth	01/29/14	03/17/14	04/06/14		Leave of Absence
	Coles, Antontio		09/11/14	10/12/14		Float
	Hurst, Dorothy		10/13/14	02/15/15		quit w/out notice 2/15
	Morales, Wanda		04/13/15	04/24/15		quit w/out notice
	Bruce Beaulieu		06/01/15			
Clerical Support	Landry, Donna	01/29/14	2/17/2014	5/10/2016		resigned
	Alexander, Stacy		6/6/2016			
Float	Horne, Belinda	01/29/14	01/29/14	4/15/2016		transfer to CN position
	Willcox, Bill		04/18/16			
Work Site			Position			Projected

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Contract C2752	Position Title & Number	Staff Name	Startup Date	Hire Date	Vacancy Date	TBF Date	Comments
NWFRC - Annex	Program Director Position 1	Natira Screen	09/01/12	09/04/12	12/20/13		transfer to Gadsden
		Cassandra Mazcyk		07/28/14	02/27/15		
		Curtis Christy		03/02/15	06/30/15		resigned
		Sherri Laster		07/10/15	09/13/15		
		Bert Randolph		09/14/15	09/29/15		Interim
		Amie Bishop		09/30/15	10/29/15		
		Bert Randolph		10/30/15	11/20/15		Interim
		Sabir Alim		11/23/15	03/25/16		transfer to Marion CI 3/28/16
		Nancy Lauzun		03/28/16	03/31/16		Interim
		May-li Clark		04/01/16	04/28/16		Interim
		Nancy Lauzun		04/29/16	08/26/16		Interim
		Greg Thomas		08/29/16	10/05/16		Interim
		Bell, Calvin		10/06/16			
	Clinical Supervisor Position 2	Constance Gatewood	09/01/12	09/04/12	03/31/13		transfer to Lowell CI
		Rosalind Townsend		2/14/2014	11/7/2014		Promoted to PD at Jefferson
		Rufus Baker		11/12/2014	2/1/2015		
		Larry Dandridge		2/2/2015	10/15/2015		transfer to Century
		Taundra Taylor		10/16/2015	9/21/2016		promotion to PD at Jackson CI
		Jennifer Marlow		9/22/2016			
	Counselor #1 Position 3	Daniel Adkins	9/1/2012	9/4/2012	7/16/2014		Walked
		Aisha Freeman		09/03/14	07/15/15		resigned
		Ron DelBianco		07/13/15	09/23/16		transfer to PCWRC
		Cynthia Wilhelm		10/03/16			
	Counselor #2 Position 8	Rosalind Townsend	09/01/12	09/04/12	02/13/14		Promoted to C Super
		Larry Dandridge		06/03/14	06/22/14		Float
		Latavia Williams		06/23/14	12/02/14		transferred to Jefferson CI
		Shane Sconyers		01/05/15	09/23/16		terminated by UPI
		Brooke Fenn		10/10/16			
	Counselor #3 Position 6	Manda Stoekel	09/01/12	09/04/12	12/28/12		Called in & Resigned
		Brian Murray		07/07/14	08/29/14		Quit
		Larry Dandridge		09/03/14	10/12/14		Float
		Sarah Powe		10/13/14	08/03/15		transferred to NWFRC IOP
		Amie Bishop		09/14/15	09/29/15		transfer
		Shantrell Brown		09/30/15			
	Counselor #4 Position 5	Patricia McAdams	09/01/12	09/04/12	12/13/14		resigned

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Position 5	McDowell, Janell		12/30/14		
Counselor #5 Position 4	Karen Dick	09/01/12	09/04/12	02/01/13	Transferred to IOP
	William Sanders		02/04/13	08/15/14	Trans to Gulf
	Amber Finley		08/18/14	05/22/15	resigning as of 5-22-15
	Maria Paula Del Carlo		06/22/15	12/17/15	resigned
	Rhonda Blankenship		12/21/15	02/19/16	Float
	Pamela Rae Arnold		02/22/16	03/25/16	resigned no notice
	Blankenship, Rhonda		03/25/16	04/01/16	Float
	Jennifer Marlow		04/04/16	09/21/16	promote to Clinical Supervisor
	L'Zandra Works		10/10/16		
Counselor #6 Position 7	Kevin Morris	09/01/12	09/07/12	12/03/12	NCNS
	Georgie Day		03/03/14		transfer from Walton CI
Counselor #7 Position 9	Linda West	09/01/12	10/01/12	01/15/14	terminated UPI
	Staci Abbott		02/01/14	09/30/14	transferred to Jackson
	Tierra Belser		10/13/14	07/03/15	resigned
	Deedra DeKemper		07/04/15	2/18/2016	resigned
	Rhonda Blankenship		12/19/19	03/24/16	Sub Teacher/Float
	Marsha Anglin-Greene		03/25/16	7/22/2016	Resigned
	Beverly Brennon-Misch		08/22/16	9/1/2016	Terminated
	Tisha Jackson		10/10/16		
Counselor #8 Position 10	Derrick Cook	09/01/12	10/15/12	10/25/12	Quit w/o notice
	Bobbie Frenton		11/08/12		
Counselor #9	Ray McNeil	09/01/12	10/22/12	10/18/13	Quit
	Sharon Holman		3/19/2014	10/30/14	LOA
	Taundra Taylor		11/3/2014	10/15/15	promotion to Clinical Supervisor
	Shalona Brown-Bowick		10/16/2015	11/03/15	float, transferred for personal
	Ayanna Conyers		11/23/2015		promotion from Clin. Support
Teacher #1 Position 12	Cassy Roberts	09/01/12	09/24/12	09/25/12	Quit
	Gloria Medina		11/01/12	11/21/14	
	Moses, Destra		11/21/14	10/23/15	terminated
	Rhonda Blankenship		11/17/15	12/18/15	Sub Teacher/Float
	Maria Preis-Rogowski		12/21/15	06/10/16	resigned
	Hope Harrell		07/12/16	08/03/16	resigned w/no notice
	Anetra Freeman		08/24/16		
Clinical Support #1 Position 14	Rebecca Schultz	09/01/12	09/04/12	10/13//2013	moved to Gulf as CN
	Kristi Srichan		5/14/2014	10/19/2014	Quit
	Larry Dandridge		10/20/2014	10/24/2014	Float
	Moses, Destra		10/27/2014	11/20/2014	

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		Dandridge, Larry		11/21/2014	2/1/2015		Float	
		Baker, Rufus		2/2/2015	5/15/2015		Float	
		Christy Harrison		5/18/2015	5/26/2015		Quit w/out notice	
		Deedra DeKemper		5/27/2015	7/3/2015		Interim	
		Ayanna Conyers		7/27/2015	11/20/2015		promoting to CN	
		Lauren McSwain		11/23/2015	12/29/2015		Quit w/o notice	
		Ramona Smith		2/9/2016	4/3/2016		transfer to Jackson CI	
		Rhonda Blankenship		4/4/2016	5/13/2016		float	
		Edward Wesley		5/16/2016	8/29/2016		resigned	
		Britney Devita		10/17/16	10/31/16		terminated	
		Kayla Bryars		11/28/16				
	Clinical Support #2 Position 13		Kristi Brown	09/01/12	09/04/12	11/13/12		Quit
			McDowell, Janell		6/30/2014	12/26/2014		promoted to counselor
			Shantrell Brown		2/2/2015	9/29/2015		promoted to counselor
			Brown-Bowick, Shalona		9/30/2015			transfer to Franklin
			Mary Paul		10/12/2015	7/12/2016		promote to Float CN
			Davis, Lori		7/12/2016	7/12/2016		quit without notice
			Melissa Holston		8/30/2016			
	Clerical Position 15		Valerie Larson	9/1/2012	9/4/2012	9/5/2012		Trans to Admin
			Daveda Cupp		5/16/2014	9/12/2014		LOA
			Phoenix, Erain		10/13/2014			
	Float		Baker, Rufus		2/2/2015			medical leave
			Brown-Bowick, Shalona		9/21/2015	11/3/2015		transfer to Franklin
			Rhonda Blankenship		11/17/2015	5/24/2016		walked by DOC
		Mary Paul		7/12/2016			promotion	
Franklin CI	Program Director		Sanders, William	11/10/2014	11/10/2014	6/10/2015	terminated	
			Bishop, Amie		6/11/2015	7/17/2015	Interim	
			Cooke, Longino		7/20/2015	11/1/2016	transfer to Baker CI	
			Screen, Natira		10/24/2016			
	Counselor #1		Wolff, Kimberly	11/17/2014	11/17/2014	3/8/2016		terminated
			Coppola, Roland		4/5/2016			
	Counselor #2		Pritchett, Latonya	11/17/2014	11/17/2014			
	Counselor #3		Spivie, Angel	11/17/2014	12/17/2014	3/23/2015		left prior to notice given
			Murphy, Idella		4/6/2015	4/27/2016		terminated
			Ruel, Kathleen		1/25/2016	5/4/2016		float
			Knight, Brenda		5/5/2016	7/6/2016		resigned

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	Ruel, Kathleen		9/26/2016	10/14/2016		quit w/o notice
	Starks, Tierney		11/16/2016	12/21/2016		walked by DOC
	Knight, Brenda		1/3/2017			
Counselor #4	Mann, John	11/17/2014	1/20/2015	1/20/2015		
	Cannon, Sarah	11/17/2014	1/20/2015	2/5/2016		transferring to Gadsden
	Ellow, Joseph		2/8/2016			
Counselor #5	Barry Asble	11/17/2014	1/12/2015	2/20/2015		interim
	Winchester, Selina		5/4/2015	10/31/2016		terminated
	Jackson, Tiffany		11/22/2016			
Clinical Support #1	Cannon, Sarah	11/17/2014	12/1/2014	1/16/2015		promote to Counselor
	Allard, Stephanie	11/17/2014	2/16/2015	8/22/2015		quit w/out notice
	Knight, Brenda		10/5/2015	5/4/2016		promoted
	Ruel, Kathleen		5/5/2016	6/3/2016		float
	Reeder, Teri		6/6/2016	10/6/2016		
	Jackson, Tiffany		9/26/2016	11/21/2016		promote to CN
	Andrews, Pamela		11/28/2016			
Clinical Support #2	Coppola, Roland	2/2/2015	3/2/2015	4/4/2016		promoted to CN
	Butta, Marissa		4/11/2016	10/31/2016		terminated
	Lattimore, Clarissa		11/28/2016			
Clerical	Long, Donna	11/17/2014	11/17/2014	10/23/2015		
	Imel, Claire		11/9/2015	6/30/2016		resigned
	Webster, Angela		7/27/2016			
Float Counselor	Brown-Bowick, Shalona		11/5/2015	12/8/2015		quit w/out notice
	Ruel, Kathleen		1/25/2016	9/23/2016		transfer to CN position
	Reeder, Teri		9/26/2016	10/6/2016		walked by DOC