

ADDENDUM #001

Solicitation Number: FDC RFP-18-004

Solicitation Title: Substance Abuse Counselors at Department-Operated Community Release Centers (CRC)

Opening Date/Time: September 12, 2017 at 5:00 p.m. (Eastern Time)

Addendum Number: 001

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 RFP is highlighted in yellow, while deleted language has been struck.

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

Change No. 1:

A change to the Statement of Purpose:

- 1.2 The Department is requesting Proposals from qualified Vendors who have a minimum of three (3) years of business/corporate experience, within the last five (5) years, in the provision of licensed aftercare treatment for substance use disorders and dynamic readiness programming, within a justice system-involved ~~population at designated Department-operated Community Release Centers (CRC) throughout Florida.~~ Aftercare services provided must be licensed in accordance with Chapter 65D-30, Florida Administrative Code (F.A.C.), and any subsequent revisions.

A Vendor may submit a Proposal, for one or more locations, for any of the CRC's; However, if submitting a Proposal for multiple locations, a separate Cost Proposal Sheet must be submitted for each location with the Vendor's Proposal. The Department intends to enter into multiple Contracts, by CRC location, based upon funding, availability, and the Department's determination of service needs. The Department does not guarantee a minimum number of referrals under any resultant Contract.

Change No. 2:

A change to Section 2.12.1, General Staffing Requirements:

- 2.12.1 The Vendor shall have direct oversight, be responsible for, and monitor the performance of, all staff providing ~~outpatient substance abuse treatment~~ **aftercare** services in support of any resultant Contract.

The Vendor shall maintain a written job description for all staff providing services under any resultant Contract. In addition, the Vendor shall maintain on file a current application, and/or resume of all staff providing services under any resultant Contract, and shall provide a copy to the Department's Contract Manager, or designee, upon request.

The Vendor's staff shall be helpful, congenial and professional with Department staff, and other vendors working with the Department.

Change No. 3:

A change to Section 3.2, Vendor Inquiries, Procurement Officer:

- 3.2 Questions related to this RFP must be received, in writing via email, by the Procurement Officer listed below, within the time indicated in the Timeline. Oral inquiries, or those submitted after the period specified in the Timeline, will not be acknowledged.

Responses to questions will be posted on the Vendor Bid System (VBS), on or about the date referenced in the Timeline. The VBS is located at http://vbs.dms.state.fl.us/vbs/main_menu.

Procurement Officer Contact Information

Allegra Small ~~Pamela McLean~~, Procurement Officer
Bureau of Procurement
Florida Department of Corrections
Email: purchasing@fdc.myflorida.com

Between the release of the solicitation, and the end of the seventy-two (72) hour period following posting of notice of intention to award (the seventy-two (72) hour period excludes Saturdays, Sundays, and State holidays), Vendors responding to this solicitation, or persons acting on their behalf, may not contact any employee, or officer, of the executive, or legislative branches of government, concerning any aspect of this solicitation, except in writing to the Procurement Officer as provided in the solicitation documents. Violation of this provision may be grounds for rejecting a response, Section 287.057(23), F. S.

Any person requiring special accommodation in responding to this solicitation, because of a disability, should call the Bureau of Procurement, at (850) 717-3700, at least five days prior to any pre-solicitation conference, solicitation opening or meeting. If you are hearing or speech impaired, please contact the Bureau of Procurement by using the Florida Relay Service, which can be reached at 1-800-955-8771 (TDD).

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**Responses to Written Questions
FDC RFP-18-004
Substance Abuse Counselors at Department-Operated Community Release Centers (CRC)**

Question Number	Question	Answer															
1	Are there current services being provided at these centers and if so can we have a list of the providers made available?	<p>Yes, the current providers are:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Provider Name</th> <th style="text-align: center;">Contract Number</th> <th style="text-align: center;">Link to FACTS</th> </tr> </thead> <tbody> <tr> <td>Bridges Correctional Treatment</td> <td style="text-align: center;">C2729</td> <td>https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=700000&ContractId=C2729</td> </tr> <tr> <td>The Unlimited Path of Central Florida, Inc.</td> <td style="text-align: center;">C2727</td> <td>https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=700000&ContractId=C2727</td> </tr> <tr> <td>Westcare Florida, Inc.</td> <td style="text-align: center;">C2728</td> <td>https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=700000&ContractId=C2728</td> </tr> <tr> <td>GEO ReEntry Services, LLC</td> <td style="text-align: center;">PO1455473</td> <td>https://facts.fldfs.com/Search/PurchaseOrderDetails.aspx?AgencyId=700000&PONo=PO1455473</td> </tr> </tbody> </table>	Provider Name	Contract Number	Link to FACTS	Bridges Correctional Treatment	C2729	https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=700000&ContractId=C2729	The Unlimited Path of Central Florida, Inc.	C2727	https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=700000&ContractId=C2727	Westcare Florida, Inc.	C2728	https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=700000&ContractId=C2728	GEO ReEntry Services, LLC	PO1455473	https://facts.fldfs.com/Search/PurchaseOrderDetails.aspx?AgencyId=700000&PONo=PO1455473
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2	On page 14 of 65 Section 2.10.1 states activities should coincide with employment scheduling which is between 8:00am and 9:00pm. If there is only one counselor for a site covering 50 clients, how is the agency expected to cover 6 days a week with one employee @ 40 hours a week?	The Counselor is not required to cover all hours between 8:00 a.m. and 9:00 p.m., six (6) days a week. The requested flexible hours are based on the population need (i.e. some evenings, some Saturdays).															

Question Number	Question	Answer
3	<p>At 50 to 1 case load and only after care services, how is one employee expected to cover all dynamic readiness classes listed, aftercare group in the time frame allotted?</p> <p>Can there be a full-time supervisor as well to cover this?</p>	<p>It is expected that the Counselor will serve a combination of inmates needing dynamic readiness and aftercare services up to a ratio of 50:1. Not 50 inmates in aftercare and then additional inmates in dynamic readiness.</p> <p>The Department does not anticipate a need for a full-time supervisor.</p>
4	<p>How many aftercare inmates are expected to be at each site, considering its about 5-10 at each center in our facilities we operate?</p>	<p>The Department expects the number of aftercare inmates to increase over time. However, the Vendor is only required to serve a 50:1 ratio at any given time.</p>
5	<p>On page 18 of 65 section 2.12.1, first paragraph states vendor shall monitor the performance of "all staff providing outpatient substance abuse treatment services", is this aftercare and outpatient or just aftercare?</p>	<p>This requirement is referring to aftercare. Please reference Change No. 1 of this Addendum.</p> <p>Please reference Change No. 2 of this Addendum.</p>
6	<p>Will the department be able to transfer all treatment files to the center so the counselor can accurately provide an aftercare plan suitable to the offender needs?</p>	<p>Pursuant to Procedure 507.402, the treatment file should transfer with the inmate. Please reference Exhibit 1 of this Addendum.</p>
7	<p>On performance measure #1: is this 95% percent of active offenders in aftercare and/or dynamic readiness at each site?</p>	<p>Performance Measure #1 refers to active inmates in aftercare at the site. Dynamic Readiness is not part of this measure.</p>
8	<p>Do we have to provide separate responses for each center we plan on bidding or can we provide one rfp with the appropriate budget attachment for each center?</p>	<p>Per Section 1.2 (2nd paragraph) of the RFP, a Vendor may submit a Proposal, for one or more locations, for any of the CRC's; However, if submitting a Proposal for multiple locations, a separate Cost Proposal Sheet must be submitted for each location with the Vendor's Proposal.</p>
9	<p>On performance measure #2: how do you measure successful discharge for dynamic readiness, is it treatment?</p>	<p>Dynamic readiness will be measured by either Prevention Level I or Intervention. The percentage of successful discharges will be calculated by the following formula:</p> $\frac{\text{Successful Discharges}}{\text{Successful Discharges} + \text{Unsuccessful Discharges}} \times 100\%$

Question Number	Question	Answer
10	<p>In Section 1.2 Statement of purpose (p. 5), it states, <i>“The Department is requesting Proposals from qualified Vendors who have a minimum of three (3) years of business/corporate experience within the last five (5) years, in the provision of licensed aftercare treatment for substance use disorders and dynamic readiness programming, within a justice system-involved population at designated Department-operated Community Release Centers (CRC) throughout Florida.”</i></p> <p>Could the Department affirm that the Vendor must only have 3 years of experience in the last five (5) years in the provision of licensed treatment for substance use disorders for justice involved populations and that the experience is not limited to the provision of such services at a CRC or the aftercare level of care only?</p>	<p>Affirmed, experience is not limited to the provision of such services at a CRC or the aftercare level of care only.</p> <p>Please reference Change No. 1 of this addendum.</p>
11	<p>In Section 1.2 Statement of purpose (p. 5), it states, <i>“The Department intends to enter into multiple Contracts, by CRC location, based upon funding, availability, and the Department’s determination of service needs.”</i></p> <p>Does the Department anticipate the potential for a single statewide award and would there be any preference for a statewide award to guarantee continuity of care?</p> <p>a. If a statewide award is possible, would the Department allow for clinical management to be billed directly to the contract such as a clinical supervisor or program manager?</p>	<p>It is possible that a Statewide award can be made to one (1) Vendor. However, the Department has no preference for statewide or multiple Contract awards, as long as it obtains best value.</p> <p>Clinical Supervision should be calculated into the proposed cost.</p> <p>Any proposed Clinical Supervision must be included in the Vendor’s hourly rate on Attachment I, Cost Proposal Sheet.</p>
12	<p>The services described herein are designed to provide licensed aftercare and dynamic readiness programming to inmates in Department-operated CRC’s, as required in this RFP.</p> <p>Question: this RFP appears to be focusing on Aftercare services with the inclusion of dynamic readiness programming. Will outpatient or intervention services no longer be offered to those inmates who have not been through any programming prior to coming to the CRC?</p> <p>Page 9, Section 2.2</p>	<p>Yes, this RFP is focusing on aftercare services with the inclusion of dynamic readiness programming. It is anticipated that inmates sent to the CRC will have already completed substance use treatment, or do not need substance use treatment.</p>

Question Number	Question	Answer
13	<p>At the request of the Department's Contract Manager, or designee, the Vendor shall be required to provide a maximum of 40 hours of substance abuse training for Department staff. Training topics, time allocations, and the number of staff to be trained will be determined mutually by the Vendor and the Department's Contract Manager, or designee.</p> <p>Question: Is there a typo error in who will be providing the training?</p> <p>Page 11, Section 2.6.4</p>	<p>No, Page 11, Section 2.6.4 is accurate as written.</p>
14	<p>For all program discharges (successful, administrative, and unsuccessful) the Vendor shall complete the DC5-704 form and forward (electronically preferred) the completed form to Classification no later than three (3) calendar days from discharge. The three calendar days begin the day after the discharge date. The Vendor shall retain a copy of the completed form in the inmate's clinical file. Classification staff will review the form and ensure the data is entered into the Department's Offender Based Information System (OBIS) within two (2) business days subsequent to the date of receipt from the Vendor.</p> <p>Question: In the past the Status Change Sheets were kept as a separate file. Where are these going to be put in the chart? What happens as in the case with some of the site there is no classification on staff and they come once a week?</p> <p>Page 12, Section 2.7.5</p>	<p>The form shall be filed in Section 6 of the clinical chart.</p> <p>The DC5-704 form may be scanned and emailed to the appropriate Department Staff in the Classification Office, should that person not be onsite within the required timeframe.</p>

Question Number	Question	Answer
15	<p>Aftercare plans which must be reviewed every 30 days, and updated as necessary. The Aftercare Plan shall correspond to and be inclusive of the needs identified in the psychosocial assessment, and the inmate's most recent Department risk and needs assessment.</p> <p>Question: The current Aftercare Plan (form DC5-717) does not allow for customization outside of goal #7. Will this form be updated so that counselors can personalize the aftercare plan to the identified needs of the inmate as determined by the Psycho-social Assessment and risk and needs assessment?</p> <p>What happens if the substance abuse clinical file does not follow the inmate transferring from another facility to Aftercare?</p> <p>Page 13, Section 2.9.1.2</p>	<p>Yes, the Aftercare Plan Form (DC5-717), is presently being updated.</p> <p>In the event the clinical file does not arrive with the inmate and cannot be located; the previous clinical team will email the discharge summary and any other electronic information required.</p>
16	<p>The Vendor is required to administer the Texas Christian University Inmate Evaluation of Self and Treatment (CEST). The CEST scales provide a baseline for monitoring inmate performance and psychosocial changes during treatment, both at the inmate level and the overall program level. Besides motivation, psychological, and social functioning, inmate self-ratings are also obtained on treatment needs, services received, treatment satisfaction, counseling rapport, treatment participation, peer support, and social support (family, friends, etc.), all representing indicators related to outcomes during and following treatment. Repeated assessments, over time, provide a basis for monitoring inmate change and case planning.</p> <p>Question: Who will be responsible for scoring the CEST once administered?</p> <p>Page 14, Section 2.10.2</p>	<p>The Department's CEST Coordinator will be responsible for scoring the CEST, once administered.</p>

EXHIBIT 1

PROCEDURE 507.402



JULIE L. JONES
SECRETARY

PROCEDURE NUMBER: 507.402

PROCEDURE TITLE: SUBSTANCE ABUSE CLINICAL RECORD
TRANSFER-INSTITUTIONS

RESPONSIBLE AUTHORITY: OFFICE OF RE-ENTRY

EFFECTIVE DATE: DECEMBER 1, 2015

INITIAL ISSUE DATE: JUNE 1, 2000

SUPERSEDES: NONE

RELEVANT DC FORMS: DC5-704, DC5-707, AND DC6-210

ACA/CAC STANDARDS: 4-4096

STATE/FEDERAL STATUTES: SECTIONS 119.07(1), 945.10, F.S., 42 C.F.R., PART II, 45 C.F.R. PART 160 & 164, AND CHAPTER 397, F.S.

FLORIDA ADMINISTRATIVE CODE: RULES 33-507.001-.002 AND 33-507.401; AND CHAPTER 65D-30, F.A.C.

PURPOSE: To provide a guide for the transfer of inmates' substance abuse records between institutions and the proper completion of forms whenever an inmate leaves a substance abuse program.

DEFINITIONS:

- (1) **Confidentiality**, where used herein, refers to restricted access of the clinical records kept by substance abuse service providers which applies to the identity, diagnosis, and prognosis of and service provision to any individual inmate. Access to these records is restricted in accordance with chapter 397, F.S., 42 C.F.R., Part II, 45 C.F.R. Part 160 & 164 and 65D-30, F.A.C. Further, these records are exempt from the provisions of section 119.07(1), F.S., and Art. I, section 24(a), Florida Constitution. These records will not be disclosed without:
 - (a) the written consent of the inmate to whom the records pertain; or
 - (b) a court order addressing such release, or as otherwise noted in applicable federal and state statutes.
- (2) **Institutional Substance Abuse Programs** refers to any program operated and managed within the Department which offers substance abuse services including:
 - (a) psycho-educational groups (Prevention Services, Level 1 or 2),
 - (b) screening for substance abuse problems, and
 - (c) outpatient, aftercare, or residential services to inmates specifically designed to address substance abuse issues.
- (3) **Substance Abuse Clinical Record**, where used herein, refers to Department property that holds written documents and records, including all Department forms which are compiled to detail an inmate's current or past substance abuse history. These forms include:
 - (a) results of assessments,
 - (b) urinalysis,
 - (c) program participation,
 - (d) progress notes,
 - (e) individualized service plans, prevention plans, aftercare plans, and
 - (f) discharge summaries. (The Substance Abuse Clinical Record is confidential and stored in a secure location within substance abuse programs or the classification department.)

SPECIFIC PROCEDURES:

- (1) The Substance Abuse Clinical Records are the property of the Department. These records:
 - (a) will be kept confidential in accordance with 42 C.F.R. Part II, 45 C.F.R. Part 160 & 164, chapter 397, F.S., and chapter 65D-30, F.A.C;

- (b) are also exempt from the provisions of section 119.07(1), F.S., and Art. I, section 24(a), Florida Constitution, and will not be disclosed without the written consent of the inmate to whom the records pertain except as noted in applicable federal and state statutes; and
 - (c) will be kept at the inmate's current location in a secure area within a substance abuse program department or classification department.
- (2) For inmates enrolled in substance abuse programs, the Substance Abuse Program Director, Clinical Supervisor, or designated counselor will make sure that:
- (a) existing Substance Abuse Clinical Records are retrieved from classification, if available; or
 - (b) a Substance Abuse Clinical Record is created in accordance with "Substance Abuse Program Admissions-Institutions," Procedure 507.202.
- (3) The Substance Abuse Program Director, Clinical Supervisor, or designated counselor will review the institutional transfer list provided by the Classification Supervisor.
- (a) All staff will make sure that the institutional transfer list is kept confidential and maintained in a secure location.
 - 1. Whenever an inmate is transferred from an institution, the Substance Abuse Program Director, Clinical Supervisor, or designated counselor will make sure that substance abuse staff at the current institution remove all clinical documents from the clinical file (including the removal of all staples and paper clips) and place all clinical documents from the clinical file inside a manila envelope clearly labeled on the outside of the envelope with the following information:
 - a. DC number;
 - b. inmate name;
 - c. Substance Abuse Services File; and
 - d. "Confidential Alcohol and Drug Abuse Inmate Record Protected under HIPAA and 42 Code of Federal Regulations, Part II."
 - 2. The clinical file will be placed inside a clear plastic bag and securely sealed.
 - 3. The information listed on the outside of the manila envelope should be visible through the clear plastic bag.
 - 4. Substance abuse staff will deliver the sealed record to the classification department before the inmate's transfer.
 - (b) At no time will an inmate handle or have access to any inmate record.
- (4) The Classification Supervisor at the sending institution will make sure the sealed Substance Abuse Clinical Record is included with the institutional record when the inmate is transferred.
- (5) Classification staff will receive the sealed record at the inmate's destination facility. The following steps will be completed by the receiving institution:
- (a) If the facility has an Institutional Substance Abuse Program, the sealed records will be forwarded by records staff to the Substance Abuse Program Director, Clinical Supervisor, or designated counselor.
 - (b) If there are no substance abuse program services at the receiving institution, the Substance Abuse Clinical Record will:
 - 1. remain sealed, and

2. be kept with the inmate's institutional record until the inmate is transferred again.
 - (c) In the event that a record is received unsealed, the employee receiving the record will:
 1. seal the record; and
 2. complete an "Incident Report," DC6-210, describing the condition of the envelope when received in accordance with "Incident Reports – Institutions," Procedure 602.008, describing the condition of the envelope when received.
 - (d) When the review of a DC6-210 suggests there may be a problem with records transfers originating from particular location(s), the Warden of the identifying institution will inform the sending facility of the incident(s).
- (6) The substance abuse clinical treatment file shall accompany the inmate throughout her/his incarceration, to include transfer to work release or an inmate community-based program.
 - (7) In the event that the Substance Abuse Clinical Record or any portion of it (e.g., "Discharge Summary," DC5-707, completed after the inmate has been transferred) cannot be transferred with the institutional record, the Substance Abuse Program Director, Clinical Supervisor, or designated counselor will make sure that the Substance Abuse Clinical Record documents or unfiled clinical documents are sealed in an envelope labeled as "Substance Abuse-Confidential," with the inmate's name and DC number. The envelope will be forwarded to the Classification Supervisor at the receiving institution.
 - (a) Any such records received in the institutional mailroom will be forwarded to the Classification Supervisor unopened.
 - (b) The Classification Supervisor will forward the sealed record to the institution's substance abuse program staff or, in facilities without a substance abuse program, make sure that the record is filed with the inmate's Substance Abuse Clinical Record being secured by classification.
 - (8) The DC5-707 will be completed whenever an inmate is permanently discharged from a substance abuse program. The DC5-707 will be completed no later than ten (10) business days after the inmate is discharged or terminated from the substance abuse program.
 - (a) If an inmate is discharged, the counselor will complete and ensure that the DC5-707 is placed in the clinical record.
 1. The program staff will note the discharge on the "Substance Abuse Program Daily Status Change Sheet," DC5-704.
 2. The Classification Supervisor will make sure that the Offender Based Information System (OBIS) is updated.
 - (b) For inmates who have been released from the Department, the Substance Abuse Program Director, Clinical Supervisor, or designated counselor will make sure that the completed DC5-707 is:
 1. sealed in an envelope labeled "Confidential," and
 2. forwarded to the Inmate Records Custodian, as designated by the Secretary pursuant to section 119.011, F.S., and defined in "Institutional Inmate Records," Procedure 601.220, to be included in the inmate's archived file(s).
 - (9) For inmates released from institutions without substance abuse programs, the sealed Substance Abuse Clinical Record will be:

- (a) kept with the institutional file; and
- (b) archived with the file upon the inmate's release from the Department.

Chief of Staff