

Residential Bidders Conference Questions

What is the funding mechanism (MCO)?

The VT DOC has some monies from the General Fund for this program. We have initiated discussion with Department of Health, Division of Alcohol and Drug Abuse Programs to support pursuit of medicaid eligibility and/or MCO.

Will these offenders be furloughed to be Medicaid eligible?

The inmates furloughed from a correctional facility will be Medicaid eligible.

Will we be doing lifer skills programs?

The VT DOC would support the consideration of inclusion of life skills in the program curriculae.

Will the DOC accept proposals of less than 50 beds?

Yes.

Is there a minimum amount of beds that have to be bid on?

There is not a minimum number of beds but the VT DOC has an interest in considering that capacity needs are considered in the vendors proposal.

Does a facility have to be sited for a proposal to be submitted?

A facility does not have to be sited for a proposal to be submitted but the proposals should demonstrate evidence of specific site/s costs considerations.

Is the DOC seeking ADAP and CARF accreditation?

Yes.

What accreditation category under CARF should the facility be accredited for?

Transitional housing for long term participants.

How long does the facility have to get accredited?

Two years

Will the local DOC office supervise the offenders?

The local probation and parole office will provide guest supervision.

Will participants come from both prison and parole violators?

Yes.

How did the DOC arrive at the idea of a minimum of 25 beds?

Based upon current budget capacity.

What is the necessary staff to client ratio?

Vendors should consider that target population and consider a minimum of two overnight staff.

Will everyone that comes to the program meet the appropriate ASAM criteria?

Yes.

Does DOC have enough offenders that fall into the appropriate category to supply the program?

VT DOC believes that based upon the current wait lists for male offenders, the chronicity of the disorder that there are adequate numbers of male offenders to refer to the program.

What is the DOC policy on medically assisted therapy?

VT DOC recognizes the need for some individuals to participate in medically assisted therapy. However, VT DOC also recognizes that the population has a

characteristic of misrepresentation of chemical history and compliance and expects to be consulted in the consideration of any decision to place or continue a participant on MAT.

Who is responsible for medication management?

Participants in the program are expected to take any prescribed medication as prescribed under the observation of the program staff. All prescribed medication will be centrally secured in the program.

Could offenders be on EM?

The VT DOC could consider electronic monitoring for some participants in the program based upon it criteria for placing offenders on electronic monitoring.

How long from the signing of the contract does the contractor have to get the program up and running?

The VT DOC would like to see the program initiated within four months of the signing of the contract.

What is the CPC?

The Correctional Program Checklist is a correctional program evaluation tool from the University of Cincinnati.

Should the budget be annual or on a per bed basis?

Annual.

Can the participants work within food service at the program?

Yes.

Can the participants work at a job in the community?

Consideration of development of vocational training and skills within the program is advised, however, participants who hold employment in the long term phase of the program are likely to request remaining in that community, which is likely to present some challenges with the community and DOC.

Will the program help with finding the offenders housing?

Yes, for long term participants.

What is the breakdown in time frames for the participants?

A similar model to the current Tapestry program which is 30 days to 90 days for phase 1, 90 days to 150 days for phase 2 and six to twelve months for phase 3. Emphasis on phase 1 and phase 3.

Do all beds need to be in one location?

VT DOC would consider multiple locations in a proposal which was otherwise competitive in design and capacity.

Would a DOC representative attend community meetings about the program?

The program would be managed centrally and would likely have input from the local field office.

Is there a floor space formula?

No, but the program should meet standards for accreditation.

What are the staff credential criteria?

The program director should be have graduate degree in relevant field of study. Staff should be minimally apprenticed.

Will DOC determine who is program eligible?

Yes.

Are there any psychiatric exclusion?

Participants need to be able to function and benefit from the program structure and model.

How is length of stay determined?

A combination of ASAM criteria and sentencing criteria. Treatment furloughed participants have a minimum length of stay prior to release eligibility.

Who is responsible for offender transportation?

The VT DOC and the program will share transportation to the program. Transportation from the program for early termination or behavioral issues will be provided and arranged by the VT DOC.

Can people be lodged in on location and program in another?

The VT DOC will consider proposals in which participants are lodged in one location and program in a different location. The proposers should identify strategies for managing the movement between the two locations and any associated costs.

Is there startup money for contractors?

Proposals may submit implementation costs in the first year budget.