

RESPONSE PACKET
710-23-0006

RESPONSE SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION			
Company:			
Address:			
City:		State:	
		Zip Code:	
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Public Service Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Nonprofit		
Minority and Women Owned Designation*:	<input type="checkbox"/> Not Applicable <input type="checkbox"/> American Indian <input type="checkbox"/> Service-Disabled Veteran <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Women-Owned <input type="checkbox"/> Asian American <input type="checkbox"/> Pacific Islander American		
	AR Certification #: _____ * See <i>Minority and Women-Owned Business Policy</i>		
PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for solicitation related matters.</i>			
Contact Person:		Title:	
Phone:		Alternate Phone:	
Email:			
CONFIRMATION OF REDACTED COPY			
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Solicitation Terms and Conditions for additional information.</i>			
ILLEGAL IMMIGRANT CONFIRMATION			
By signing and submitting a response to this <i>Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants and shall not employ or contract with illegal immigrants during the term of a contract awarded as a result of this solicitation.			
ISRAEL BOYCOTT RESTRICTION CONFIRMATION			
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel and shall not boycott Israel during the term of a contract awarded as a result of this solicitation. <input type="checkbox"/> Prospective Contractor does not and shall not boycott Israel.			

An official authorized to bind the Prospective Contractor to a resultant contract shall sign below.

The signature below signifies agreement that any exception that conflicts with a Requirement of this *Solicitation* **may cause the Prospective Contractor's response to be rejected.**

Authorized Signature: _____ **Title:** _____

Printed/Typed Name: _____ **Date:** _____

PROPOSED SUBCONTRACTORS FORM

• **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

☐ **PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

SECTIONS 1 – 9: VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____

Use Ink Only.

Printed/Typed Name: _____ Date: _____

INFORMATION FOR EVALUATION

- *Provide a response to each item/question in this section. Prospective Contractor may expand the space under each item/question to provide a complete response.*
- **Do not** include additional information if not pertinent to the itemized request.

	Maximum RAW Score Available
E.1 GENERAL INFORMATION	
A. Describe how your organization will address DYS core beliefs and treatment model as described in the RFP.	5 Points
B. Describe your organization's history and experience serving the following populations of juveniles: 1. ages 18-20 2. ages 10-17	5 Points
C. Describe your organization's history and experience serving the following populations of juveniles: 1. with a full-scale IQ below sixty-five (65); 2. with other developmental disabilities (e.g., to autism spectrum disorder, traumatic brain injury, and fetal alcohol spectrum disorder) 3. with physical, neurological, or sensory disabilities requiring special accommodations 4. with disabilities that impact learning (e.g., attention deficit-hyperactivity disorder, intellectual disability, dyslexia, dyscalculia, and dyspraxia) 5. for whom English is not their native language	5 Points
D. Describe your organization's history and experience serving the following populations of juveniles: 1. with moderate to severe psychological disorders; 2. with moderate to severe medical disorders or conditions; and 3. Severely behaviorally challenged, including youth presenting serious risk of harm to themselves and others	5 Points
E. Describe the methods and practices your organization proposes to use to rehabilitate juveniles in each of the target populations identified in the RFP. Include any information on research informed in evidenced-based practice you plan to use to rehabilitate youth in DYS custody.	5 Points
F. Describe your organization's past success in rehabilitating juveniles within six (6) to twelve (12) months.	5 Points
G. Describe your organization's history and experience in securing and maintaining accreditation under ACA, CARF, and PREA.	5 Points
H. Describe your organization's methods and practices to meet or exceed the standards set by the ACA, CARF, and PREA. Provide a plan that includes timelines and benchmarks to achieve accreditation if not already in place.	5 Points
I. Describe your organization's data collection and reporting methods regarding your programs and the juveniles you serve including: 1. measurements of program integrity 2. effectiveness 3. compliance with treatment plans 4. outcome measurements 5. client/stakeholder satisfaction 6. any others	5 Points
E.2 FACILITY USAGE	

A. Describe the proposed use of facility space, buildings, and grounds for programming purposes such as specialized programming for sex offenders, gender specific programming or housing, female offenders, etc.	5 Points
B. Describe your organization's experience and methods in complying with and adapting to changes in facility maintenance standards, including: <ol style="list-style-type: none"> 1. the Division of Building Authority (DBA) 2. Commission on Accreditation of Rehabilitation Facilities (CARF) 3. American Correctional Association (ACA) 4. Prison Rape Elimination Act (PREA) 5. any applicable state or national standards 	5 Points
E.3 SAFETY AND SECURITY	
A. Describe in detail your organization's experience, practice, and methodology in establishing and maintaining safety and security of the physical site.	5 Points
B. Describe your organization's past practice and methods with respect to positive behavior supports, discipline, incentives, and similar interventions with juvenile clients.	5 Points
C. Describe your organization's methods of root cause analysis and response in the case of each of the following:	
1. Seminal incidents, including but not limited to any incidents resulting in or creating substantial risk of client escape, serious injury, or death	5 Points
2. Substantiated reports of child maltreatment	5 Points
3. Criminal investigations resulting in probable cause finding and/or conviction	5 Points
4. Findings of substantial or widespread noncompliance with contractual, statutory, or regulatory requirements	5 Points
D. Provide a sample copy of a juvenile handbook which your organization has used or disseminated in other facilities or programs	5 Points
E. Provide current policies and procedures regarding the grievance process for juveniles served in the facility	5 Points
F. Provide current policies and procedures for the following: bullying, sexual harassment, sexual assault, discrimination based on sex, race, ethnicity, and gender identity.	5 Points
G. Provide policies and procedures regarding juvenile access to fair, reasonable, and appropriate access to programs and services. <ul style="list-style-type: none"> • Include an explanation of circumstances in which access to programs and services may be limited or restricted. 	5 Points
H. Provide policies and procedures regarding juvenile's access to making and receiving phone calls to family members and legal counsel.	5 Points
I. Describe your organization's policies, procedures, and practices for suicide prevention including, without limitation, screening instrument(s), screening setting, observation, incident controls, and resources.	5 Points
E.4 EDUCATION	
A. Describe your organization's methods and practices proposed to implement a comprehensive learning environment that is shared and supported by local stakeholders	5 Points
B. Describe the proposed plan to ensure a nurturing and sustaining school culture for the following: <ol style="list-style-type: none"> 1. safe environment conducive to teaching and learning 2. policies and procedures to meet all ADE standards, policies, and practices and current DYS educational policies and procedures 3. usage of designated educational space at each facility (library and classroom) including in person and virtual instruction 4. current policies, procedures, and actual practices for managing student classroom behavior 	5 Points
C. Describe the proposed plan for developing, implementing, and monitoring quality curriculum and programs that maximize teaching and learning opportunities.	5 Points

D. Describe your organization's policies, procedures, and practices to provide individualized learning experiences.	5 Points
E. Describe your organization's policies, procedures, and practices for educating all juveniles including those that require special education, 504 plans, dyslexia, and other accommodations.	5 Points
F. Describe your organization's experiences, methodologies, and strategies to provide vocational education and career readiness opportunities.	5 Points
G. Describe your organization's experiences, methodologies, and strategies in providing education curriculum for both in person and virtual learning environments.	5 Points
E.5 THERAPY AND TREATMENT	
A. Provide current policies and procedures for providing therapeutic milieu utilizing research and evidence-based services that addresses individual, family, and group therapy. Include the following: 1. Practices for incorporating a trauma-informed care and therapeutic positive behavior environment in a secure setting 2. Current practices used to implement positive support and behavior modification practices. 3. Current practices utilizing a youth centered individualized treatment programming approach that incorporates positive reinforcement. 4. Identify current curriculum or practices for an evidence- based family therapy and engagement.	5 Points
B. Describe the proposed gender-specific programming required in the RFP including programs for males and females.	5 Points
C. Provide current policies, procedures, and practices regarding reentry and discharge planning with community- based partners as well as a sample of the current progress report and discharge plan.	5 Points
D. Describe your organization's history and capacity to enter partnerships with community organizations to provide program enhancements for youth in the facility.	5 Points
E. Provide a current intake assessment and a copy of an individualized treatment plan focusing on strengths and protective factors and identify risk factors.	5 Points
F. Describe your organization's experience, practice, and methodology for promoting family engagement in achieving goals and outcomes specified in the juvenile's master treatment plan.	5 Points
G. Provide evidence to support the use of the psychological assessment instruments identified in this solicitation.	5 Points
H. Provide current policies and procedures and treatment models currently used to treat specialized populations to include sex offenders, and substance abuse moderate to severe mental health, and sex trafficking victims.	5 Points
E.6 STAFFING	
A. Provide a staffing plan for each facility which include a replacement factor that accurately accounts for staff training, foreseeable vacancies, staff vacation, family and medical leave, and other absences. Provide your replacement factor used to determine the following staffing plans, direct care workers (include number of floaters per shift) and allows for a 1:8 staff to youth ratio from 6 A.M. - 9 P.M., seven (7) days a week and 1:16 staff to youth ratio from 9 P.M. - 6 A.M., shift supervisors twenty-four (24) hours a day, seven (7) days a week and nursing coverage, seven (7) days a week from 7 A.M. to 9 P.M. .	5 Points
B. Provide a hiring plan that include hiring ethnically, racially, culturally and gender diverse staff and administrators. Provide a written job descriptions and job requirements, including minimum qualifications for all positions in each of the facilities.	5 Points
C. Provide your proposed pre-service new hire and annual in-service training schedule which outlines the requested training hours and skill sets for essential and nonessential personnel.	5 Points
D. Provide a work schedule for each facility. This shall include shifts times, how the shifts rotate the work schedule is swing or wheel schedule for direct care workers. Provide a work schedule for all other employees, i.e., case managers,	5 Points

teachers & paraprofessionals, administration, trainer, mental health therapist, Control center or front reception, etc.,	
E.7 IMPLEMENTATION	
A. Provide an implementation plan and timeline, identifying key roles, dates, and other pertinent information that shows how your organization will ensure an efficient and complete transition of all facility operations and management including an explanation of how current employees will be affected by the transition.	5 Points
E.8 SPECIALIZED TREATMENT	
A. Describe your organization's experience operating a specialized mental health treatment unit for male youth who have chronic mental health problems along with a history of treatment non-compliance, medication non-compliance, and a history of aggressive acting out behavior toward other juveniles and staff.	5 Points
B. Describe your organization's experience with using Dialectical Behavior Therapy (DBT) with this specific population.	5 Points