

**DOC-1202MENTAL**  
**Addendum # 6**  
**DDOC Mental Health Services RFP Compiled Questions**  
**April 19, 2012**

**Question**

**RFP page 3, §II.A:** “Approximately 28,000 offenders are admitted for incarceration and 28,000 released each year.”

Of these 28,000 admissions, how many are typically participating in each of the following programs?  
Mental health programming/treatment

**Answer**

- a. MH Programs: **1, 468 the average number of offenders on MH Caseload per month for all sites together for 2011**

HRYCI: 257  
PCCC: 31  
WCCC: 9  
BWCI: 175  
HDPWTF: 40  
JTVCC: 499  
CVOP: 57  
MCCC: 36  
SCI: 268  
SCCC/SVOP: 96

- a. Sex offender programming/treatment:

**Answer: Sex offender program started July 2012 and is still being developed. At present we have approximately 39 inmates participating in sex offender programming.**

- b. Substance abuse programming/treatment:

**Answer: SA Programs: 4,301 (The total number of offenders who were in the SA programs for 2011.)**

The total number of offenders who participated in each SA Program per site for 2011.

KEY NORTH: 225  
KEY Village: 100  
KEY SOUTH: 245  
CREST NORTH MEN: 190  
CREST NORTH Women: 136  
CREST VOP: 635  
CREST CENTRAL: 219  
CREST SOUTH: 230  
6 for 1: 1,610  
YCOP: 28  
BOOT CAMP: 204  
AFTER CARE NORTH: 266  
AFTER CARE CENTRAL: 87  
AFTER CARE SOUTH: 126

- c. DUI programming:

**Answer: At present we do not have a DUI program. We expect the start-up to be around Jan. 2013.**

**Question**

**RFP page 6, §f:** “In the event of a positive response to a question on the mental health portion of the receiving screening, qualified mental health professionals, including psychiatrists, psychiatric nurse practitioners, psychologists, psychiatric nurses, mental health clinicians or psychiatric social workers will perform further mental health evaluation within 24 hours.”

Please provide the DDOC’s minimum education and licensing requirements for the “mental health clinician” and “psychiatric social worker” positions.

**Answer**

**Mental health Clinicians are required to be licensed in the state of Delaware or licensed in another State in the process of receiving reciprocity in DE.**

**Social Workers are required to have their LCSW in the state of Delaware or in another State and in the process of receiving reciprocity in DE.**

**Psychologist, Psychiatrist and Nurse Practitioners, and Psychiatric Nurses are required to be licensed in the State of Delaware.**

**Question**

**RFP page 7, §h:** “The Vendor is responsible for all mental health related training for DDOC as well as medical and mental health services providers. DDOC and medical staff will require training in topics such as mental health awareness, suicide prevention, and special needs population. Mental health clinical staff will be required to have on-going training on topic such as; treatment planning, behavior plans, suicide risk assessment, evaluation and treatment. The PCO observers will be required to have additional training prior to assuming their position. All training programs shall be submitted and approved in advance by the DDOC Bureau of Correctional Healthcare Services.”

Please provide the DDOC’s minimum education and licensing requirements for the “PCO observer” position.

**Answer**

**PCO observers are required to be a high school graduate, they are not required to be licensed. The DOC expects them to be trained appropriately by the vendor prior to assume the responsibility of PCO observer.**

**Question**

**RFP page 20, §Sex Offender Programming:** “The vendor will be responsible for providing a comprehensive sex offender programming at all facilities (Level 5 and Level 4) that is compliant with the State of Delaware’s Sex Offender Monitoring Board (SOMB) standards (see SOMB Standards, Appendix G).”

What is the current number of offenders receiving sex offender treatment, by facility?

**Answer**

**Sex offender program started July 2011 and is still being developed. At present Sex Offender Programming is being offered at the Level 5 facilities. The numbers are as follows.**

**Total number of Sex offenders presently in Programming: 39**

**BWCI: 8; HRYCI: 10; JTVCC: 12; SCI: 9**

**The number of inmates receiving sex offender treatment does not reflect the number of inmates in our system that should be receiving sex offender programming. At present, we have over a thousand sex offenders in our system.**

**Question**

**RFP page 21, Middle of Page:** “Requested written evaluations are completed within 30 days of referral and shall include the following...Evaluation method (4<sup>th</sup> sub-bullet).”

Is the plethysmograph used as an evaluation method in the sex offender program? If so, how many annual exams are conducted, and at what cost to the vendor?

**Answer**

**At present the plethysmograph is not implemented by the vendor in the assessment/evaluation of sex offenders for programming.**

**Question**

**RFP page 23, Third complete paragraph:** “The Vendor will adhere to SOMB standards regarding that include a sex offense risk assessment tool, at least one cognitive distortion scale, and a scale test that addresses motivation and amenability to treatments (see SOMB Standards, Appendix G).”

Please identify (a) the cognitive distortion scale and (b) the test to address motivation and amenability to treatment currently utilized in the DDOC sex offender treatment program.

**Answer**

**The current vendor implements the following assessment tools with sex offender clients: STATIC-99, the STABLE 2007, and the ACUTE 2007. The BUMBY Cognitive Distortion Scale, and the Sexual Offender Treatment Needs and progress Scale. When court ordered the ABLE is completed. The DDOC is open to discussing and implemented other assessment tools.**

**Question**

**RFP page 31, §6:** “Facilities and Resources-Vendor must ensure that the space and supplies be adequately maintained to meet the health care needs of the institutional population. Dangerous or unsanitary physical equipment can lead to violations of the Constitution. Vendor(s) are responsible for equipment under \$500.00.”

- a. Please provide an inventory of office equipment (e.g., PCs, printers, fax machines, copiers) currently in use at the DDOC and identify which equipment will be available for use by the selected vendor.

**Answer: Attachment A**

- b. Please provide an inventory of medical equipment (e.g., blood pressure cuffs, ultrasound, x-ray machines, etc.) currently in use at the DDOC and identify which equipment will be available for use by the selected vendor.

**Answer: Attachment B**

**Question**

**RFP page 40, §33:** “The Vendor is required to obtain and/or maintain NCCHC and ACA accreditation for each and every current and future facility in whole and as to each part in the DDOC.” For each facility that is currently accredited by the National Commission on Correctional Health Care (NCCHC), please provide the most recent accreditation date.

**Answer:**

**JTVCC – 6/30/10; SCI – 6/29/10; BWCI – 3/16/11; HRYCI – 3/16/11; Morris – 6/30/10; PCCC – 3/16/11; Webb Com. – 3/16/11; SVOP – 6/29/10; CVOP – 6/30/10.**

**Question**

**RFP page 73, §i:** “Other forms of security may be acceptable but are subject to DDOC’s discretion.”

Please indicate the type and amount of performance guaranty provided by the incumbent mental health services contractor under the current contract.

**Answer**

**Upon notification of receiving the contract award the vendor is required to obtain a Performance Bond or other accept form of security in the about of 25% of the negotiated contract.**

**Question**

**RFP page 75, §n:** “Penalties-The DDOC may include in the final contract penalty provisions for non-performance, such as liquidated damages. Any factually or legally applicable penalty or liquidated damage shall not be the exclusive remedy available for breach of contract.”

- c. Please provide (by year) the amounts and reasons for any paybacks, credits, and/or liquidated damages the DDOC has assessed against the incumbent vendor(s) over the term of the current contract.

**Answer: There are no paybacks, credits, and/or liquidation damages assessed with the incumbent vendor.**

- d. Are any of the DDOC facilities currently subject to any court orders or legal directives? If "yes," please provide copies of the order/directive.

**Answer: There are no existing court orders or consent decrees relating to DDOC’s prison facilities. DDOC is a party to an out of court agreement with the United States Department of Justice which can be viewed at the DOC internet website.**

- e. With regard to lawsuits pertaining to inmate mental health care at the DDOC facilities (frivolous or otherwise), how many have been filed against the State and/or the incumbent medical provider in the last three years? How many have been settled in that timeframe?

**Answer: As with any correctional system, there are many lawsuits filed in relation to correctional healthcare standards and practices. DDOC aggressively defends such allegations through its counsel at the State of Delaware Department of Justice. DDOC does not maintain a compilation of the aggregate number of such litigations or the number of claims settled. Proposing parties are encouraged to access the United States District Court for the District of Delaware’s electronic docket (CM/ECF) and contact the relevant State of Delaware Courts to determine whether such information may be available.**

**Question**

**RFP page 77, §u:** “In the event there is any discrepancy between any of these contract documents, the following order of documents governs so that the former prevails over the latter: contract, DDOC’s RFP, Vendor’s response to the RFP any supplemental documents and purchase order.”

Please indicate the order of precedence among the *solicitation* documents (e.g., the RFP, initial responses to questions, subsequent responses to questions, exhibits and attachments, etc.) so that in case of contradictory information among these materials, bidders know which of the conflicting data sets to use to create their narratives and calculate their prices.

**Answer**

**The question and answer process is the opportunity for proposing parties to request clarifications to any and all perceived inconsistencies. The portion of the RFP referenced in this question relates to the terms of the eventual contract, not the RFP. If a proposing party identifies any inconsistency between the RFP**

and any other “solicitation document” it is the obligation of the proposing party to identify such inconsistencies now and seek clarification prior to submission of a proposal. The failure to timely identify such inconsistencies shall be deemed a waiver by the proposing party.

**Question**

**RFP pages 87-104, Appendices D and E:**

- a. Does the mental health staffing listed in Appendix E include the sex offender treatment clinicians? If not, please provide a staffing plan (by facility) for sex offender staff.

**Answer: The mental health staffing plan in Appendix E does not include sex offender treatment staff. See attached sex offender treatment staff.**

- b. Please provide the DDOC’s minimum education and licensing requirements for the “Activity Technician” position.

**Answer: Activity Technicians should have a Bachelors Degree if Human Service Field and/or certification or credentialing as an Activity Technician.**

- c. Please provide a listing of the current health service vacancies, by position, for the DDOC facilities.

**Answer: Staff Vacancy by site for Mental Health**

**Sussex Correctional: 1 psychiatrist; 2 clinicians, 1 observer**

**James T Vaughn: 2 psychiatrists, 1 clinician, 1 nurse practitioner**

**Howard R Young: 1 psychiatrist, 1 MH director, 1 clinician,**

**Baylor Women’s: 1 MH supervisor, 2 clinicians, 2 observers**

**Staffing Vacancy by site for substance abuse programming:**

**Sussex Correctional: 1 counselor**

**Howard R Young: 3 counselors**

- d. Are any members of the current mental health workforce unionized? If yes, please provide the following.

- A copy of each union contract
- Complete contact information for a designated contact person at each union
- The number of union grievances that resulted in arbitration cases over the last 12 months

**Answer: Mental Health/Substance abuse Vendor staff is not unionized.**

- e. Please provide current wage/pay/reimbursement/seniority rates for incumbent mental health staff.

**Answer: Estimated Salaries:**

**Licensed MH Clinician starting salary \$47,000**

**Licensed MH clinical Supervisor \$52,000**

**Licensed MH Director \$55,000**

**Nurse Practitioner F/T \$120,000**

**Psychiatrist \$215,000**

**Substance Abuse Program Director \$54,000**

**Substance Abuse Clinical Director \$42,000**

**Substance Abuse Sr. Counselor \$32,000**

**Substance abuse Jr. Counselor \$28,000**

- f. Please indicate (a) the age and (b) the source of this salary/rate information, e.g., State records, data from incumbent vendor, etc.

**Answer: These salaries are not based on state records, it was provided by the vendor 4/2012.**

- g. Please confirm that the time mental health staff members spend in orientation, in-service training, and continuing education classes will count toward the hours required by the contract.

**Answer: The vendor is required to provide 40 hours of orientation to all new employees and will count toward contract requirements. DOC requires initial Suicide Prevention Training, Sexual Harassment, and CPR training and yearly refresher, which also count toward the contract training requirements. Continuing education units is a licensing requirement and is negotiated by the vendor with staff.**

# **APPENDIX A**

**APRIL 2012**

**OFFICE EQUIPMENT INVENTORY LIST FOR CREST  
NORTH FOR WOMEN**

**OFFICE EQUIPMENT INVENTORY LIST FOR CREST  
SOUTH AND AFTERCARE SOUTH**

**OFFICE EQUIPMENT INVENTORY LIST FOR CREST  
CENTRAL**

	<b>DOC EQUIPMENT</b>	<b>MHM EQUIPMENT</b>	<b>OTHER (EQUIPMENT AND/OR FURNITURE DONATED TO THE PROGRAM)</b>
Ricoh Copier Aficio 2851 ID# 12821		1	
Brother Fax Machine Serial #: U56577M4J198397 Model#: 2800		1	
Staples Shredder Serial #: 085237550 Model #: SPL-TXC15A		1	
Brother Laser Printer Serial #: U60964D5J836890 Model #: HL-51		1	
Computer Stands		2	
Desks	9		
Desk Chairs	18		
Dell Hard Drive Service Tag #: BGMDV51	1		
Dell Hard Drive Service Tag #: GDMDV51	1		
Dell Hard Drive Service Tag#: 1FDXHF1		1	
Dell Hard Drive Service Tag #: 6703091		1	
Dell Hard Drive Service Tag #: 5J22V91		1	
Dell Keyboard Serial #: CN-OJ4628-71616-487-OPI9 Model #: SK-8115		1	

	<b>DOC EQUIPMENT</b>	<b>MHM EQUIPMENT</b>	<b>OTHER (EQUIPMENT AND/OR FURNITURE DONATED TO THE PROGRAM)</b>
Dell Keyboard Serial #: CN-OJ4628-71616-482-OPO8	1		
Dell Keyboard Serial #: CN-OW7658-37172-62M-OJWJ		1	
Dell Keyboard: Serial #: CN-OJ4628-71616-5A5-OXIY		1	
Dell Monitor Serial #: CN-02Y315-71618-490-AEPC	1		
Dell Monitor Serial #: CN-02Y315-71618-494-ABNH Model #: 030673-11	1		
Dell Monitor Serial #: CN-0N8176-47606-5CS-FWBT		1	
Dell Monitor Serial #: CN-0N8176-47609-59R-FQT3		1	
Planar Monitor: P/N: 997-2796-00		1	
Dell Printer: Serial #: CN-0N4387-48730-57E-AWIA Service Tag #: HH62171		1	
Dell Printer: Service Tag #: 4DJFN71		1	
Dell Printer: Service Tag #: HSJT7D1			
Hewlett Packard Printer: Serial #: CNBC68129J Model#: BO1SB-0409-00		1	
Dell Printer:		1	

Tag #: 4PJ1171			
Filing Cabinets	2		

Crest South Inventory

Item Description	Brand/Make	Model/Color	Serial #	DOC – CEC – Donated
Director's Office				
Monitor	DELL	AX510	CNoC730C71623 OAQ0410	DOC
Tower	DELL	Optiplex	F4C38P1	DOC
Keyboard	DELL	SK8115	CN0DJ331716160A70CAM	DOC
Printer	HP	P2055dn	CNB9339361	DOC
Fax Machine	Brother	2800	U56577C3J287531	MHM
Furniture	(1) File cabinet	HON		MHM
	(1) metal desk			DOC
	(1) sm fax stand			MHM
	(2 small wooden case			DOC
Chair	(1) rolling			MHM
Chairs	(1			DOC
Shredder	GBC	SC80	RA14000H	MHM
Vacuum	Eurek			?
Secretary's Office				
Monitor	DELL	XPRO	CN0FP8167426181HOM7U	DOC
Tower	DELL	Optiplex	2XVYQF1	DOC
Keyboard	DELL	SK8115	CNODJ3117161681F06J2	DOC
Printer	DELL	P1500	17Y599	MHM
Shredder	Universal	UNV38251		MHM
Desk	(2) metal			DOC
Chair	Rolling			MHM

Chair	Plastic			DOC
File Cabinets	(2) 4-draw	HON		MHM
File Cabinet	(1) 5-draw	HON		DOC
Air conditioner	Whirlpool			DOC

### Crest Central Inventory List

DOC EQUIPMENT	MHM SERVICES	OTHER
<b>6 DOC COMPUTERS (WORKING)</b>	<ul style="list-style-type: none"> <li>• 2 - HP LASER JET PRINTERS P2035</li> </ul>	<ul style="list-style-type: none"> <li>• 1 HP- LASERJET 2100 PRINTER</li> </ul>
<ul style="list-style-type: none"> <li>• 1N2FWR1-(DELL)/WITH DELL MONITOR</li> </ul>	<ul style="list-style-type: none"> <li>• 1- DELL COPIER/PRINTER 2335DN</li> </ul>	<ul style="list-style-type: none"> <li>• 1-HP-722C PRINTER</li> </ul>
<ul style="list-style-type: none"> <li>• 1N4BWR1-(DELL)/WITH DELL MONITOR</li> </ul>	<ul style="list-style-type: none"> <li>• 2- BLACK PORTABLE CHART TROLLEY'S</li> </ul>	<ul style="list-style-type: none"> <li>• 1-SHARP COPIER-AL-2030</li> </ul>
<ul style="list-style-type: none"> <li>• 1WRM451-(DELL)/WITH DELL MONITOR</li> </ul>		<ul style="list-style-type: none"> <li>• 1- SHREDDER</li> </ul>
<ul style="list-style-type: none"> <li>• 5QWHW41-(DELL)/WITH SHARP MONITOR</li> </ul>		<ul style="list-style-type: none"> <li>• 1- MICROWAVE</li> </ul>
<ul style="list-style-type: none"> <li>• FTJXW21-(DELL)/SCEPTRA MONITOR</li> </ul>		<ul style="list-style-type: none"> <li>• 2 COFFEE POTS</li> </ul>
<ul style="list-style-type: none"> <li>• 10B6G81-(DELL)/WITH DELL MONITOR</li> </ul>		<ul style="list-style-type: none"> <li>• 1- PORTABLE PLASTIC STAND</li> </ul>
<ul style="list-style-type: none"> <li>• CTJXW21-DELL/WITH SCEPTRE MONITOR**<b>NW</b>**</li> </ul>		<ul style="list-style-type: none"> <li>• 1 BROTHERS MFC FAX MACHINE***<b>NW</b>**</li> </ul>
<ul style="list-style-type: none"> <li>• 7- PANASONIC OFFICE PHONES</li> </ul>		<ul style="list-style-type: none"> <li>• 1 DELL PRINTER-1720/ ***<b>NW</b>***</li> </ul>
<ul style="list-style-type: none"> <li>• 9- DOC OFFICE DESK</li> </ul>		<ul style="list-style-type: none"> <li>• 1-BOOKCASE PURCHASE/BY STAFF</li> </ul>
<ul style="list-style-type: none"> <li>• 11- DOC OFFICE FILE CABINETS</li> </ul>		<ul style="list-style-type: none"> <li>• 1 -LARGE SILVER COFFEE(FOR THE COMMUNITY)</li> </ul>
<ul style="list-style-type: none"> <li>• 4 - DOC BOOKCASES</li> </ul>		
<ul style="list-style-type: none"> <li>• 1-SMALL REFRIGARATOR (DOC)</li> </ul>		
<ul style="list-style-type: none"> <li>• 11-DOC OFFICE CHAIRS</li> </ul>		
<ul style="list-style-type: none"> <li>• 1-DOC PORTABLE STAND</li> </ul>		
<ul style="list-style-type: none"> <li>• 2- DOC VACUUM CLEANERS</li> </ul>		

Note: \*\*NW\*\* indicates not working

**APPENDIX B**

**APRIL 2012**  
**MEDICAL INVENTORY**

BWCI	MEDICAL - TAWANNA BARKSDALE - RM 1	DUAL CORE E2180	BPW8QH1
BWCI	MEDICAL - LAB	PENT-D 925	92BGVC1
BWCI	MEDICAL INTAKE OFFICE (Connected to PC 9MP6K81)		CNBJS06221
BWCI	MEDICAL - DENTAL OFFICE	PENT-D 925	D2DVBD1
BWCI	MEDICAL - DIRECTOR OF NURSING - RM 4	DUAL CORE E2180	DPW8QH1
BWCI	MEDICAL - EXAM RM 2	PENT-D 925	C2DVBD1
BWCI	MEDICAL - OLD ARCHIVE OFFICE	PENT-D 925	52DVBD1
BWCI	MEDICAL - Health Services Administrator		CNG1T00971
BWCI	MEDICAL - INFIRMARY -EXAM ROOM 1	DUAL CORE E2180	CPW8QH1
BWCI	MEDICAL - RECORDS	PENT-D 925	32BGVC1
BWCI	MEDICAL - MEDITATION ROOM FOR MH PSYCHIATRIST	DUAL CORE E2180	9PW8QH1
BWCI	MEDICAL INTAKE ROOM	DUAL CORE E2180	8PW8QH1
BWCI	MEDICAL - CMS PURCHASED FOR TIME CLOCKS (T3)	Dual Core E2 160	JZLSCD1
BWCI	MEDICAL HALLWAY		CNRXY25128
BWCI	MEDICAL	PENT-3.00GIV	9MP6K81
CVOP	MEDICAL - RITA MANIGAULT	PENT-4.00GHZ	3LTV3C1
CVOP	MEDICAL	PENT-D 925	G2BGVC1
CVOP	MEDICAL- CMS PURCHASED FOR TIME CLOCKS(T3)	Dual Core E2 160	50MSCD1
CVOP	MEDICAL	PENT-2.26GIV	96LVL11
CMS	REGIONAL OFFICE-CMS PURCHASED FOR TIME CLOCKS	Dual Core E2 160	70MSCD1
BWCI	CMS - DANA BAKER - ADMIN OFFICE		GJCV951
BWCI	CMS - JEN WOODIN - DOC. OFFICE		H7DV951
BWCI	CMS - TINA EDWARDS - MENTAL HEALTH OFFICE		6NDV951
BWCI	CMS - DANA BAKER - ADMIN OFFICE	PENT-2.80GIV	7985T71
BWCI	CMS - TINA EDWARDS - MENTAL HEALTH OFFICE	PENT-2.80GIV	B985T71
CVOP	CAROL MARVEL	PENT-2.80GIV	7X62281
JTVCC	LEEANNE DUNN - CMS	PENT-2.80GIV	DF72281
JTVCC	CMS - HOFFECKER - MENTAL HEALTH OFFICE	PENT-2.80GIV	8785T71
JTVCC	CMS - DONNA PLANTE - DOC. OFFICE	PENT-2.80GIV	H885T71
JTVCC	CMS - DIANE MILLER	PENT-2.80GIV	D785T71
JTVCC	CMS - DANYAE MEGGETT - MU/MEDICAL OFFICE	PENT-2.80GIV	5785T71
JTVCC	CMS - CHRIS MALANEY - ADMIN. OFFICE	PENT-2.80GIV	4685T71
JTVCC	CMS - CHRIS MALANEY - ADMIN. OFFICE		CKCV951
JTVCC	CMS - CHRIS KEMP - ADMIN ASST.		28DV951
JTVCC	CMS - DONNA PLANTE - DOC. OFFICE		DKCV951
JTVCC	CMS - MATHALIANA WRIGHT - SHU/MEDICAL OFF.		64CV951
JTVCC	CMS - MATHALIANA WRIGHT - SHU/MEDICAL OFF.	PENT-2.80GIV	9685T71
JTVCC	CMS - HOFFECKER - MENTAL HEALTH OFFICE		8KCV951
JTVCC	CMS - DANYAE MEGGETT - MU/MEDICAL OFFICE		7XCV951
JTVCC	JEREMY WILKERSON - MEDICAL	PENT-2.80GIV	CYLW871
HRYCI	CMS - DENISE GALLIER - HAS OFF. FRONT ROOM		JWCV951
HRYCI	CMS - DON NAPOLINO - MENTAL HEALTH		FJDV951
HRYCI	CMS - DON NAPOLINO - MENTAL HEALTH	PENT-2.80GIV	2885T71
HRYCI	CMS - DENISE GALLIER - HAS OFF. FRONT ROOM	PENT-2.80GIV	D685T71
HRYCI	CMS - LINDA HUNTER - HAS OFFICE	PENT-2.80GIV	3G72281
HRYCI	CMS - DEBORAH HOLLOWAY - DIRECTOR OF NURSING	1700N	5KDV951
HRYCI	MEDICAL INFIRMARY	PENT-2.80GIV	4H7ML61
HRYCI	MEDICAL INFIRMARY	PENT-2.80GIV	5F7ML61

HRYCI	CMS - BERNADETTE MONTGOMERY - DIRECTOR OF NURSING	PENT-2.80GIV	1985T71
HRYCI	CMS - TRACY BOLANDER - MENTAL HEALTH DIRECTOR	PENT-2.80GIV	8F72281
HRYCI	CMS - LINDA HUNTER - HAS OFFICE		24TY071
HRYCI	CMS - TRACY BOLANDER - MENTAL HEALTH DIRECTOR		26TY071
MCCC	CMS - WILLIAM BROWN - NURSES OFFICE		5NDV951
MIS	MIS STORAGE - CMS		D6TY071
MIS	MIS STORAGE - CMS		B6TY071
MIS	MIS STORAGE	PENT-2.80GIV	6VJBG81
PLUMMER	CMS - KRISTIN HEMANDEZ - MEDICAL	PENT-2.80GIV	1785T71
PLUMMER	CMS - KRISTIN HEMANDEZ - MEDICAL		24CV951
SCI	CMS - JENNIFER COX - ADMIN OFFICE	PENT-2.80GIV	D885T71
SCI	CMS - AMY BRAEUNINGER - ADMIN OFFICE	PENT-2.80GIV	B885T71
SCI	CMS COUNSELOR		USCB728306
SCI	CMS - RICHARD CULPEPPER - MENTAL HEALTH OFFICE		38DV951
SCI	CMS - KEMMIE STOCK - PRE TRIAL	PENT-2.80GIV	5885T71
SCI	CMS - JENNIFER COX - ADMIN OFFICE		48DV951
SCI	CMS - AMY BRAEUNINGER - ADMIN OFFICE		DJCV951
SCI	CMS - SUESANN RICKARDS - MEDICAL OFFICE	PENT-2.80GIV	5985T71
SCI	CMS - SUESANN RICKARDS - MEDICAL OFFICE		74CV951
SVOP	CAROLYN THOMPSON	PENT-2.26GIV	8CLVL11
SWRC	CMS - DEBBIE KELLY - MEDICAL RECORDS	PENT-2.80GIV	8885T71
SWRC	CMS - DEBBIE KELLY - MEDICAL RECORDS		7KCV951
WEBB	CMS - BEVERLY ANDERSON - MEDICAL		53CV951
WEBB	CMS - BEVERLY ANDERSON - MEDICAL	PENT-2.80GIV	G785T71
WTC	WOMENS TREATMENT CENTER	PENT-4.00GIV	C685T81
WTC	WOMENS TREATMENT CENTER		3G24171
JTVCC	MEDICAL		SFOC1214Z17V
JTVCC	MEDICAL K BLDG.	PENT-4.00GIV	G7QH3B1
JTVCC	MEDICAL - D BLDG DEBBIE RODWELLER	PENT-2.26GIV	99LVL11
JTVCC	MEDICAL DELTA EAST BLDG.	DUAL CORE E2180	6H04SH1
JTVCC	MEDICAL DELTA EAST BLDG.	DUAL CORE E2180	7H04SH1
JTVCC	MEDICAL - D-BLDG MENTAL HEALTH RM 1 - w/pc JM6T5D1		CNBJL50942
JTVCC	MEDICAL - B-ANNEX - w/pc 12BGVC1		CNBJL50937
JTVCC	MEDICAL - SHU MENTAL HEALTH - w/pc - FN6T5D1		CNBJM50442
JTVCC	MEDICAL - SHU MENTAL HEALTH	PENT-D 925	FN6T5D1
JTVCC	MEDICAL RECORDS		CNBJN75526
JTVCC	MEDICAL - RECORDS	PENT-D 925	CM6T5D1
JTVCC	SHU - MAIN MEDICAL ROOM	DUAL CORE E5200	GGX0WH1
JTVCC	SHU - MAIN MEDICAL ROOM	DUAL CORE E5200	GGX1CK1
JTVCC	MEDICAL MHU	PENT-2.26GIV	F8LVL11
JTVCC	SHU - MAIN MEDICAL ROOM/BACK CUBICLE	DUAL CORE E5200	GGX0CK1
JTVCC	MEDICAL - B ANNEX	PENT-D 925	12BGVC1
JTVCC	MEDICAL DELTA EAST BLDG.		CNG1X18637
JTVCC	MEDICAL - D-BLDG MENTAL HEALTH RM 1	PENT-D 925	JM6T5D1
JTVCC	MEDICAL - CMS PURCHASED FOR TIME CLOCKS (T3)	Dual Core E2 160	80MSCD1
JTVCC	MEDICAL BOOKING & RECEIVING	DUAL CORE E2180	7PW8QH1
JTVCC	MEDICAL RECORDS - MHU BLDG. 24	DUAL CORE E2160	D4WQKF1

JTVCC	DIANE MILLER, MEDICAL ADMIN		CNB9R38571
JTVCC	MEDICAL - MHU BLDG	PENT-2.26GIV	F6LVL11
JTVCC	MEDICAL RECORDS - w/pc CM6T5D1		CNBJM50450
JTVCC	MEDICAL - W BLDG	PENT-2.26GIV	79LVL11
JTVCC	MEDICAL - OUTSIDE CONSULTANTS	PENT-2.26GIV	97LVL11
JTVCC	MEDICAL - MENTAL HEALTH MHU	PENT-2.26GIV	B7LVL11
JTVCC	MEDICAL - BRENDA - MEDICAL	PENT-2.26GIV	J8LVL11
JTVCC	MEDICAL - MEDICAL RECORDS LEEANN DUNN	PENT-2.26GIV	6BLVL11
JTVCC	MEDICAL - FRONT DESK	PENT-2.26GIV	H8LVL11
HRYCI	OLD MEDICAL RECORDS ROOM		CNBJS33580
HRYCI	MEDICAL-CMS PURCHASED FOR TIME CLOCKS(T3)	Dual Core E2 160	GZLSCD1
HRYCI	MEDICAL - LAB ROOM	DUAL CORE E2160	2LBG7F1
HRYCI	THIS PC HAS BEEN REPLACED AND LEFT WITH MEDICAL	PENT-2.80GIV	1XDH41
HRYCI	MEDICAL - X-RAY ROOM	DUAL CORE E2160	CKBG7F1
HRYCI	MEDICAL - DENTAL OFFICE	DUAL CORE E2160	FKBG7F1
HRYCI	MEDICAL - EXAM ROOM	PENT-2.26GIV	H6LVL11
HRYCI	MEDICAL - INFIRMARY	PENT-4.00GIV	76XRQB1
HRYCI	ROOM S20 - FRONT STATION - MEDICAL	DUAL CORE E5300	7HP50L1
HRYCI	ROOM S20 - EXAM ROOM LEFT - MEDICAL	DUAL CORE E5300	8HP50L1
HRYCI	MEDICAL -BOOKING & RECEIVING INTAKE-SARAH CARTER	DUAL CORE E2160	84GXZF1
HRYCI	ROOM S20 - EXAM ROOM CENTER - MEDICAL	DUAL CORE E5300	DHP50L1
HRYCI	MEDICAL ROOM F209	DUAL CORE E2160	4WVYQF1
HRYCI	MEDICAL - INFIRMARY - DR. WALLACE'S OFFICE	DUAL CORE E2160	B3GXZF1
HRYCI	THIS PC HAS BEEN REPLACED AND LEFT W/ MEDICAL	PENT-2.80GIV	9WDHW41
HRYCI	MEDICAL	PENT-2.26GIV	28LVL11
HRYCI	MEDICAL	PENT-2.26GIV	68LVL11
HRYCI	MEDICAL	PENT-2.26GIV	B8LVL11
HRYCI	MEDICAL	PENT-2.26GIV	BBLVL11
MCI	MEDICAL - CMS PURCHASED FOR TIME CLOCKS (T3)	Dual Core E2 160	40MSCD1
MCI	MEDICAL	PENT-4.00GIV	H7QH3B1
MCI	MEDICAL - ANDREW GALLAHER	DUAL CORE E2160	H9J19F1
MCI	ANDREW GALLAHER - MEDICAL		CND998LB09
BWCI	BWCI	PENT-2.26GIV	J7LVL11
MIS	STORAGE for Admin Medical Rm 711	DUAL CORE E2160	4VYQF1
PLUMMER	MEDICAL	PENT-2.26GIV	C9LVL11
SCCC	MAX BUILDING-CMS PURCHASED FOR TIME CLOCKS(T3)	Dual Core E2 160	CZLSCD1
SCI	MEDICAL MAX	DUAL CORE E2160	8TVYQF1
SCI	MEDICAL DIRECTOR OF NURSING'S OFFICE	DUAL CORE E2160	5F8M3H1
SCI	PRETRIAL MEDICAL	DUAL CORE E2160	4F8M3H1
SCI	PRE TRIAL MEDICAL BACK OFFICE		CNBJS06207
SCI	KATHERINE BARTH - MEDICAL	PENT-2.80GIV	2FMDV51
SCI	BOOTCAMP MEDICAL - RM 120b	DUAL CORE E2160	HTVYQF1
SCI	BOOTCAMP MEDICAL - RM 120	DUAL CORE E2160	FVYQF1
SCI	BOOTCAMP MEDICAL - RM 120a	DUAL CORE E2160	9VYQF1
SCI	MEDICAL/DENTAL BLDG.	DUAL CORE E5300	5KXQDK1
SCI	MEDICAL - MAX	PENT-3.00GIV	4RFRV81
SCI	SCI MEDICAL MAX BLDG	PENT-4.00GIV	8DXRQB1
SCI	MEDICAL - PRE-TRIAL	PENT-2.26GIV	5CLVL11

SCI	MEDICAL - MENTAL HEALTH	PENT-2.26GIV	3BLVL11
SCI	MEDICAL - PRE-TRIAL	PENT-2.26GIV	59LVL11
SCI	MEDICAL - DR OFFICE	PENT-2.26GIV	J9LVL11
SCI	MEDICAL - BERNARD QUINTON	PENT-2.80GIV	HJFHW41
SCI	MEDICAL - MAX	PENT-2.26GIV	1CLVL11
SWRC	MAIN MEDICAL		CNBJN66663
SWRC	MAIN MEDICAL OFFICE - CMS	DUAL CORE E2160	6X70XG1
SWRC	MEDICAL - CMS PURCHASED FOR TIME CLOCKS(T3)	Dual Core E2 160	HZLSCD1
SWRC	PRE-TRIAL MEDICAL-CMS PURCHASED FOR TIME CLOCKS-T3	Dual Core E2 160	20MSCD1
SWRC	MEDICAL	DUAL CORE E2160	2PSBBG1
SWRC	PAT MORRISON - CMS	DUAL CORE E2160	4X70XG1
SWRC	MEDICAL OFFICE		CNBJL33581
SWRC	MEDICAL		USCD084938
WTC	MEDICAL	PENT-D 925	D1BGVC1

## BWCI

Inventory Control #	Location	Item	Description	Model #	Serial #
0206	Exam Room 5	Portable Stool	Maroon		
0207	Lab	Blood Drw Table	schooldesk		
0253	Exam Room 1	File Cabinet	2 drawer		
0265	Records Room	Comp Table	Gray		
0266	Records Room	Portable Chair	Maroon w/arms,whls		
0267	Dental	Steam Incubator	Attest		117103
0268	Dr. Galloway	Desk	Beige metal bottom		
0269	Dental	AutoClave	MidMark	M-903	CZ009216
0270	Dental	Ultrasonic Cleaner	Whaladent		941042978
0271	HSA Office	Desk	Tan metal		
0272	HSA Office	chair	blu cloth w/arm		
0273	Dental	X-ray Machine	Gendex	GX-770	1265103dp
0274	Dental	X-ray Developer	Peri-Pro III		16960
0275	HSA Office	Chair	Blue w/arms, clth/wd		
0302	Outside Rm 3111	Refrigerator - meds	Hair 3.0		
0303	Outside Rm 3111	Cart w/whls	3 shelf		
0304	Storage Area	Suction machine	Schuo vac	5711-130	1085894
0305	Exam Room 1	Exam Table	Hamilton Brn		
0306	Exam Room 5	Desk	Tan/met 2 drw		
0307	hallway	Credenza	Tan metal/brn top		
0308	outside 3109	storage cabinet	tan, lockable		
0309	Exam Room 1	Chair	Blue		
0310	Exam Room 2	Otoscope	Welch ALlyn	Wall unit	
0311	Med. Records	fan	white, pedastal		
0312	Exam Room 1	Chair	Blue		
0313	Exam Room 1	Baumanometer			
0314	Records Room	B/PGauge	300 Wall Unit		
0314	Room	Portable Chair	Blue		
0328	Dental	Dental Exam Chair	Adec		
0329	Dental	Dent. Asst Chair			
0331	Dental	Dentist Chair			
0332	Across 3111	Healthometer			
0332		Scale	h/w		

0333	Dental	Small Desk	Beige w/woodgrain top		
0334	Dental	X-ray ill.	Dentsply	670400	19673
0336	Across 3111	ECG	Spacelab		57745
0413	Dental	Applicator Machine	Capmix Photac-fil		430396
0414	Dental	Coltolux 3 Curing Light		C-7910	9408529
0416	Office	Chair	black		
0507	Exam Room 4	Refrigerator	Hair 5.ocf		
0508	Outside 3109	Cabinet on wheels	vert/tan		
0514	Records Room	File Cabinet	Blk 4 drawer lat		
0515	Records Room	Storage Cabinet	Black Bottom		
0516	Records Room	File Cabinet	Tan 5-drawer		
0517	Break Room	Table	Woodgrain top		
0518	Exam Room 3	Desk	Blk Metal		
0519	Exam Room 2	BookCase	Tan 3-sh		
0520	Exam room 3	Medical Cart	PCI Transaid green	21500	
0521	Pharmacy Room	Refrigerator	Hair 4 cu.ft.		
0522	Pharmacy Room	Storage Bin	4 shelf wire		
0530	Exam Room 6	Microscope Zeiss	Standard 25		49503P
0531	Exam Room 2	Mayo Stand			
0532	Exam Room 2	File Cab	Blk 2 drw/whe		
0533	hallway	File Cab	Tan lockhels. 1 drw		
0535	Across 3111	Rolling cart	tan		
0537	Exam Room 6	Desk	Beige w/wg top 6drw		
0539	Exam Room 2	Gooseneck lamp	Welch Allyn		
0540	Exam Room 2	Colposcope	Gynet		
0541	Across 3111	Privacy screen	white		
0543	Exam room 1	Refrigerator	Haier 4 cu.ft.		
0544	Exam Room 2	Chair	Blue		
0545	Exam Room 2	Chair	Brn Exec.		
0554	HSA Office	File Cab	5 sh		
0556	Outside Office	Scale	Seca W only		
0557	Records Room	Desk L-shaped	Beige bottom		
0561	Outside Office	Med Cart	Trans ad		

0562	Outside Office	BookCase	Brn slotted		
0683	Lab	Gooseneck lamp	JG111		
0743	Physicians Office	File Cabinet	Tan 2 drawer		
0744	Physician Office	File Cabinet	Grey, 4 drawer		
0745	M/h Dir Office	File Cabinet	Tan 2 drawer		
0746	Physician Office	Comp Desk	Woodgrain		
0951	Exam room 1	Desk	Tan metal/brn top		
0953	Exam Room 6	Gooseneck lamp	Welsh Allyn		
0954	Storage Area	Portable I.V pump	Baxter Flo-gard	6201	5102464
0971	Dental	Port Dental cart w/wh	Alabama lav.		
2225	Across 3111	Bed	wood fran	twin	
2226	Across 3111	Bed	manual	invacare	
2227	outside 3109	desk	tan, 2 drw		
2228	Across 3111	chair	blue/metal frame		
2228	hallway	chair	blue, stationary		
2229	Across 3111	stretcher			
2230	outside 3109	chair	blk, w/arms, wheels		
2231	Across 3111	Table	brn wood		
2232	hallway	side bed table	healthometer		
2234	Across 3111	stool	metal		
2235	dental 3111	chair	blue stationary		
2236	hallway	tall chair	blk w/arms		
2237	Med. Records	Cart w/whls	grey plastic		
2238	hallway	Cart w/whls	metal		
2239	hallway	nebulizer	Pulmo-aid	5650d	D361673
2240	hallway	nebulizer	Pulmo-aid	5650d	D398907
2241	hallway	table	brn top		
2242	hallway	chair	blu stationary		
2243	hallway	chair	blu stationary		
2244	hallway	chair	blu stationary		
2245	hallway	chair	maroon plastic		
2246	hallway	cart	wht metal on wheels		
2247	hallway	cart on wheels	on wheels		
2248	hallway	scale	detecto, wt only		
2249	Pharmacy Room	Medical Cart	PCI Transaid	21500	
2250	file/break	chair	blue stationary		

	room				
2253	Exam room 5	chair	blue stationary		
2254	file/break room	chair	blue stationary		
2255	file/break room	refrigerator	aficionado		
2256	Records Room	chair	blue		
2257	Exam room 2	stool	grey		
2258	Dental	Cavitron	Dentsply		
2259	Dental	chair	blk w/arms,wheels		
2260	Across 3111	Cloth Chair	Blu, stationary		
2262	HSA Office	chair	grey		
2264	Physicians Office	Chair	blue stationary		
2265	Physicians Office	chair	blk w/arms,wheels		
2266	M/h Dir Office	BookCase	tan 4 shelf		
2267	Exam Room 2	sterilizer	petton crane	validator plus	ad-1419
2268	Exam Room 2	Chair	blue stationary		
2269	Exam Room 6	Baumnaometer	Wall unit		a25801
2270	Exam Room 6	stool	blk w/wheels		
2271	Exam Room 1	chair	grey n/arms		
2272	Exam Room 1	chair	blue stationary		
2296	hallway	scale	healthometer		
2493	Across 3111	chair	blue/metal frame		
2494	Across 3111	bed table			
2495	Across 3111	storage cabinet	tan/lockable		
2497	Dental	wiggle bug	crescent		
2498	Exam Room 2	Exam Table	brewer		
2499	Med. Records	chair	lt.maroon w. wood armrest and wheels		
2500	Med. Records	chair	lt.maroon w. wood armrest and wheels		
2517	Med. Records	desk	wood/old/4drawer		
2518	Med. Records	Credenza	tan w. wood top		
2602	Exam Room 1	storage cabinet	beige/ lockable		
2603	Exam Room 1	otoscope	Welch Allyn/ wall mounted		
2604	Exam Room 1	file cabinet	beige/ 4 drawer		
2605	Exam Room 1	Exam Table	Brewer Access		
2606	Exam room 5	otoscope	Welch Allyn/ wall mounted		
2607	Exam room 5	chair	blue w/ arms and wheels		

2608	Exam room 5	Exam Table	Brewer Access	
2609	Exam room 5	BookCase	black 3 shelves w/wheels	
2610	Dr. Galloway	BookCase	woodgrain top/ 2 shelves	
2611	Dr. Galloway	chair	gray w/wheels	
2612	Dr. Galloway	chair	black w/arms and wheels	
2613	Dr. Galloway	Exam Table	Hamilton Brn	
2614	Exam room 4	chair	green / wood legs	
2615	Hallway	BookCase	black/ 3 shelves, with wheels	
2616	Exam room 4	chair	black w/arms and wheels	
2617	Exam room 4	small desk	woodgrain top/ 2 drawer	
2618	Exam room 4	BookCase	beige/ 6 shelves	
2619	Exam room 4	Exam Table	beige pad/ wood legs	
2620	Exam room 6	refrigerator	white/ 3.0 cf	
2621	Exam room 6	mayo stand		
2622	Exam room 6	chair	black w/arms and wheels	
2623	Exam room 6	otoscope	Welch Allyn/ wall mounted	
2624	dental	storage cabinet	Craftsman/ 12 drawer	
2625	hallway	medical cart	PCI TransAid/ beige 4 drawer	
2626	Exam Room 2	chair	blue w/arms and wheels	
2627	Exam Room 2	desk	beige/ 4 drawer	
2628	Exam Room 2	otoscope	Welch Allyn/ wall mounted	
2629	Exam Room 2	spot vital signs	Welch Allyn/ portable	
2629a	Exam Room 2	ophthamology chair	Reliance w/phropter & slit lamp	109802
2630	Exam Room 2	exam table	Brewer Access	
2631	Exam Room 3	otoscope	Welch Allyn/ wall mounted	
2632	Exam Room 3	chair	blue w/arms and wheels	
2633	Exam Room 3	File cabinet	beige/ 2 drawer	
2634	Exam Room 3	exam table	Brewer Access	
2635	M/H Dir Office	bookcase	gray/ 5 shelves	
2636	M/H Dir Office	file cabinet	beige/ 4 drawer	
2637	M/H Office	file cabinet	beige/ 4 drawer	
2638	M/H Office	desk	woodgrain/ 2 drawer	
2639	M/H Office	chair	green w/wooden arms	
2640	M/H Office	chair	blue w/wheels and arms	
2641	M/H Office	chair	black w/wheels and arms	
2642	M/H Office	bookcase	beige/ 5 shelves	
2643	M/H Office	file cabinet	gray/ 5 drawer	
2644	M/H Office	desk	wooden/ 2 drawer	
2645	Pharmacy Room	storage cabinet	beige/ lockable	

2646	Pharmacy Room	storage cabinet	beige/ lockable	
2647	Pharmacy Room	storage cabinet	beige/ lockable	
2648	File/Brk room	Spot vital sign	Welch Allyn/portable Oximax	
xxxx	Across 3111	backboard	Orange w/ wheels	
xxxx	Across 3111	Ice Machine	Manitowac	Series 200
xxxx	Across 3111	IV Stand		
xxxx	bathroom	walker	grey	
xxxx	Dental	lead apron	pink	
xxxx	Dental	Leaded Vest		
xxxx	INF. Rm. 3111	Ferno Stretcher	Orange w/ wheels	
xxxx	INF. Rm. 3111	Infirmery bed	Joerns 2100 w/ assist devices	
xxxx	INF. Rm. 3111	IV Machine	TRAVENOL	
xxxx	INF. Rm. 3111	Medical Bed	trandelen burgs elec	
xxxx	INF. Rm. 3111	Overbed table	straight top	
xxxx	INF. Rm. 3111	Overbed table	straight top	
xxxx	INF. Rm. 3111	Recliner Chair	old blood draw	
xxxx	INF. Rm. 3111	Wheelchair	Guardian EC2000	
xxxx	Rm 3109 Bathroom	Wheel Chair	Everest Jennings	
xxxx	Rm 3109 Bathroom	Wheel Chair	Everest Jennings	

## CVOP

Inventory Control #	Location	Item	Description	Model #	Serial #
0000	Office	2 wooden bookcase; 4 shelf			
0083	Office	File cabinet	Puttyhor, 3 drawer		
0085	Rm 178	Mobile BP Unit	Omron	hem-739a6	37053426
0086	Rm 176	Pulse oximeter	bci		
0087	Rm 178	Mobile BP Unit	Omron	hem-739a6	324017797
0090	Rm 179	Goose Neck Lamp			
0102	Office	Stool	tan Ritter		
0103	Office	File cabinet	Puttyhor, 3 drawer		
0105	Rm 179	Stainless Steel Cart			
0106	Rm 179	Mayo Stand			
0107	Office	Chair	grey swiv n/a		
0108	Rm 179	Exam table	tan Ritter		
0109	Rm 179	Storage cab	tan Ritter		
0110	Office	Rolling cart	2 drw/blk, lock		
0111	Rm 179	EKG Machine	SpaceLab	Ecl850	92300-003859
0112	Rm 178	Privacy Screen	White		
0113	Rm 179	Goose Neck Lamp Otoscope Head Welch			
0114	Rm 179	Allyn	wall mtd		
0117	Rm 176	Vert file	tan 5 dr		
0118	Rm 176	Vert file	tan 4 dr		
0119	Rm 176	Vert file	tan 4 dr		
0120	Rm 176	Vert file	tan 4 dr		
0121	Lobby	Vert file	tan 4 dr		
0127	Rm 176	Refrigerator	Holiday		
0128	Office	Refrigerator	Holiday		sn07339265eg
0129	Office	Rolling cart	black/open		
0130	Rm 176	File cabinet	putty, 2 drawer		
0131	Office	File cabinet	putty, 2 drawer		
0133	Office	Brother copier/printer			056579f2j431299
0166	Rm 178	Nebulizer DeVil	Pulmo Aid	5650D	D3669457
0215	Rm 178	Refrigerator	Hair white		
0357	Dental	Desk	wood, 2 drwr		
0358	Dental	Asst. Chair	brown		sc08153
0359	Dental	Dentist Chair	grey dentsply	64652	24981
0361	Dental	X-Ray Illuminator	star	de 100bg	112568

0362	Dental	3 hand piece over the patient	estrada	e-300	0400-4559
0363	Dental	Pelton-Crane Light	white		
0364	Dental	Amalgamator DS-801	south dental	caan215	9359
0401	Rm 179	Haz Waste Container	red		
0402	Rm 178	Haz Waste Container	red		
0404	Storage	Suction Machine Port		2014A	8544
0405	Rm 176	Swivel Chair	Blue cloth n/a		
0406	Rm 179	Stool	tan		
0408	Rm 179	Chair	blue cloth swiv		
0409	Office	Chair	blue cloth swiv		
0410	Office	Desk	grey l-shaped		
0411	Office	Desk	grey l-shaped		
0422	Dental	Coltolux III Curing Light	coltene	whaledentc7910	200918953
0423	Dental	Cavitron Teeth clean	ultra-sonic	sps scaler	119-29440
0424	Dental	Alabama cart	blue		
0425	Dental	Mayo Stand	metal		
0426	Dental	Swivel Task Chair	Blue n/a		
0427	Dental	Swivel Task Chair	Blue, n/a		
0428	Dental	Swivel Task Chair	Blue, n/a		
0429	Dental	Cabinet	Putty 2 drawer		
0430	Dental	Cabinet	Putty 2 drawer		
0431	Dental	Microwave	magichef	mcd770rw	dj30866826
0432	Dental	Refrigerator	Sanyo 3.0	sr-1730w	10836132
0433	Dental	Wooden Desk	3 drawer		
0434	Dental	Used Marco Ophthalmology Chair	Blue		7073
0435	Dental	Copeland	attached katy0100		ct9nlo1533
0436	Dental	Autoclave Sterilizer	validator plus	ad	ad-09697
0437	Dental	X-Ray Film Processor	air technics	peri-pro	52730
0438	Dental	Ultra Sonic Cleaner	whaledent	biosonic vc100	991220964
0439	Dental	X-Ray Unit	gendex gx-770	46-4-4600G	770-1296157
0440	Dental	Dental "J" Chair	den-ta-lez	pl-2000	39131
0614	Dental	cabinet	2 dr putty		
0615	Dental	cabinet	2 dr putty		
0620	Office	Storage Cab	Tan Ritter		
0621	Rm 178	File Cab cart	2 drw./ lock		
0622	Rm 179	Privacy Screen	White		
0906	Rm 178	Otoscope Head Welch	wall mtd		

		Allyn		
997	Dental Office	motor	in cabinet	
2186	Rm 179	Port. B/P monitor	BCI	706518417
2187	Rm 179	IV Pole		
	Waiting Room			
2188	Room	Scale	H/W healthometer	
2189	Dental	Shelving unit	grat metal	
2681	Office	Storage cabinet	beige, 2 door, lockable	
2682	Office	File cabinet	beige, 2 drawer	
2683	Office	File cabinet	beige, 4 drawer	
xxxx	Dental	lead apron		
xxxx	Rm 178	Wheelchair		
xxxx	Rm 179	Stretcher		

## HRYCI

Inventory Control #	Location	Item	Description	Model #	Serial #
0112	<b>F208 - EXAM ROOM</b>	Nebulizer	Pulmo-Aid	5650D	D3856484
0208	<b>East Side</b>	Exam Bed	MidMark 404		
0210	<b>Rm. F208 Exam rm</b>	File Cabinet	Beige; portable w/wheels		
0211	<b>West Side</b>	Mayo Stand			
0212	<b>Rm. F217 (Dental)</b>	Curing Light	Colfolux!!	GX-770	
0213	<b>Rm. F217 (Dental)</b>	Wig-I-bug	Crescent Wig-L-Bug		
0252	<b>Rm. F208 Exam rm</b>	Suction pump	Shuco Inc.	S 130	12000060566
0256	<b>supply closet f212</b>	Hyfrecator 2000	Conmed		
0257	<b>Pharm. Room</b>	Med Cart	Trans aid		
0258	<b>Pharm. Room</b>	Med Cart	Trans aid		
0259	<b>Pharm. Room</b>	File Cabinet	5 drw beige		
0260	<b>Pharm. Room</b>	Refrigerator	Haier 4.0 cf		
0262	<b>Mental Health Room</b>	Desk	wooden 2 drw		
0263	<b>East side</b>	Chair	Blk clth, w/wh		
0264	<b>Mental Health Room</b>	File Cabinet	2 drawers beige		
0299	<b>Rm. F214</b>	Illuminaotr	Streamliner III		
0300	<b>nurses station</b>	Chair	Blk Clth, w/wh		
0301	<b>Mental Health Room</b>	Exam Bed	Grey top, metal legs		
0315	<b>Rm. F217 (Dental)</b>	Cavitron	Dentsply		11934119
0316	<b>Rm. F217 (Dental)</b>	Sterilizer	Midmark eltra clave		
0317	<b>Rm. F217 (Dental)</b>	developer	Peri-pro	Excellance	
0318	<b>Rm. F217 (Dental)</b>	Incubator	Patterson pa4 unltrasonic		
0319	<b>Rm. F217 (Dental)</b>	File Cabinet	Blk 2 drw		
0320	<b>Rm. F217 (Dental)</b>	Desk	wood grain		
0321	<b>Rm. F217 (Dental)</b>	Chair	Blk cloth, w/wh		
0322	<b>Rm. F217 (Dental)</b>	XRAY illiminators			
0325	<b>Rm. F217 (Dental)</b>	File Cabinet	Beige 5 drw		
0326	<b>Rm. F214</b>	XRAY Devloper	Brandwine	srx-101a	105216584
0327	<b>Rm. F214</b>	Shelving Unit	Metal 5 sh		
0508	<b>Rm. BV Waiting Area</b>	Detecto Scale			
0509	<b>Rm. F216</b>	File Cart	Beige w/wh		
0511	<b>Rm. F216</b>	Desk	Beige w/ woodgrain top		
0512	<b>Rm. F208 Exam rm</b>	Chair	Black w/wheels; no/arms		
0513	<b>Rm. F216</b>	Cabinet	Beige, 2 dr lock		
0523	<b>Supply Closet</b>	Plastic shelf	grey, push cart		

0525	Rm. F208 Exam rm	File Cabinet	Black; 2 drawer		
0526	Rm. F208 Exam rm	Privacy Screen	White w/metal		
0534	supply rm., inf F199	IV Stand			
0535	Rm. F208 Exam rm	Exam Light	Welch Allyn	44200	
0546	Rm. F216	Exam Bed	Ritter 100		
0547	Rm. F217 (Dental)	Dentist Chair	Blue pads		
0548	Rm. F217 (Dental)	Dental Stool	Blue pads		
0549	Rm. F217 (Dental)	chair			
0553	Rm. F217 (Dental)	XRAY	Gendex 770		35547
0565	F215	table	woodgrain top		
0684	Main Hallway	Chair	Blk Cloth		
0952	Main Hallway	Chair	Gry Cloth		
1000	Main Hallway	Chair	Gry Cloth		
2419	Nurses station	Push Cart	tan plastic		
2420	Pharm. Room	bookcase 5shelf	tan 5 shelf		
2421	Pharm. Room	bookcase 5shelf	tan 5 shelf		
2422	Pharm. Room	bookcase 5shelf	tan 5 shelf		
2423	Pharm. Room	med cart	tan		
2424	Pharm. Room	stool	tan		
2425	nurses station	Chair	Blk no/arms, wheels		
2427	RM 200 (DON)	bookcase	tan 5 shelf		
2428	RM 200 (DON)	desk	w/grain top		
2429	RM 200 (DON)	Chair	grey arm/wheels		
2430	RM 200 (DON)	stool	grn		
2431	RM 213	bookcase	tan 6 shelf		
2432	Rm. 199	infusion pump	Flo guard		
2433	Rm. 199	infusion pump	Baxter 6201		
2434	Rm. 199	IV pole			
2437	Rm. F208 Exam rm	EKG Machine	Compu med	system507	597121
2438	R	stool	blx		
2439	Rm. F208 Exam rm	Nebulizer	Pulmo-Aid	M 5650D	D3856483
2441	Rm. 207	desk	wood grain		
2442	Rm. 207	Chair	blk leather		
2443	Rm. 207	Bookcase	tan metal 6 shelf		
2444	F215	table	wood grain top		
2445	F215	ice machine	manitowac series 260		
2446	F215	med cart	tan plastic		
2447	F215	ref/freezer	white Frigudaire		
2448	F215	Chair	grey n/arms		
2449	F215	Chair	wooden 2 drw		

2450	F215	Chair	brn desk
2451	Rm. S142 A	scale	
2452	Rm. S142 A	B/P unit, portable	
2453	Rm. S142 A	b/p stand	
2454	Rm. S142 A	Hoyer lift	
2455	Rm. S142 A	Mini exam able	brn desk
2456	Rm. S142 A	Med Cart	
2457	Rm. S142 A	Med Cart	
2458	Rm. S142 A	Med Cart	
2459	Rm. S142 A	Mayo Stand	
2460	Rm. S142 A	Chair	blk cloth stationary
2461	Rm. S142 A	rolling file cart	lockable
2462	Rm. S142 A	geriatric chair goose neck lamp	
2463	West Side		
2464	F213	Chair	blu clth, n/arms, wheels
2465	H.S.A. office	desk	blk, w'grain top
2466	H.S.A. office	chair	grey stationary
2467	H.S.A. office	File Cabinet	blk lat 3 drw
2468	H.S.A. office	Chair	blk cloth stationary
2469	H.S.A. office	Cabinet	tan lockable
2470	H.S.A. office	Push Cart	tan plastic
2504	F155 B/R	desk	wood, 4 drawer
2505	F155 B/R	File Cabinet	3 drawer, beige
2506	F155 B/R	bookshelf	metal, 6 shelves, beige
2507	F155 B/R	chair	black cloth
2508	Rm. F216	Otoscope	Welch Allyn
2509	F155 B/R	Refrigerator	Hair 3.0
2510	F155 B/R	Otoscope	Welch Allyn
2511	F208	exam table	hausmann
2512	F208	File Cabinet	2 drawer, black
2513	Rm. F208 Exam rm	Otoscope	Welsh Allyn Wall mts.
2519	F08 Don Office	Desk	woodgrain 4 drawer
2520	F08 Don Office	fridge	cool spot 5.0
2521	F08 Don Office	bookshelf	5 shelves
2522	F08 Don Office	five cabinet	2 drawers beige
2523	F08 Don Office	five cabinet	3 drawer, black
2524	F08 Don Office	bookshelf	woodgrain 4 shelf
2525	F08 Don Office	bookself	5 shelves, beige
2526	F06 H.S.A. Office	desk	4 drawer, black, woodgrain top

2527	F06 H.S.A. Office	storage cabinet	black, lockable	
2528	F06 H.S.A. Office	file cabinet	black, 2 drawer	
2529	F06 H.S.A. Office	storage cabinet	black, lockable	
2530	F06 H.S.A. Office	fridge	whirlpool 4.0	
2531	F06 H.S.A. Office	File Cabinet	black, 3 drawer	
2532	East Side	file cabinet	4 drawer, black	
2534	East Side	scale detecto		
2535	East Side	File Cabinet	2 darwer, black	
2536	East Side	fridge	3.0	
2537	East Side	desk	2 drawer, woodgrain top	
2538	East Side	Otoscope	Welch Allyn	
2539	East Side	exam table	hausmann	
2540	East Side	File Cabinet	black, 3 drawer	
2541	East Side	desk	beighe, 4 drawer	
2548	Upstairs Rm. S13A	Chart Projector	Reichert	17180
		Opthamology		
2549	Upstairs Rm. S13A	Chair	Marco	
	Rm. Beside Waiting			
2550	Area	file cabinet	2 drawer black	
2551	Upstairs Rm. S13A	Slit-Lamp	Topcon	635461
2552	Upstairs Rm. S13A	Phoropter	Topcon	362778
	Rm. Beside Waiting			
2553	Area	Otoscope	Welch Allyn	
	Rm. Beside Waiting			
2554	Area	exam table	hausman	
2555	East Side	file cabinet	3 drawer, black	
2563	Upstairs Rm. S13A	Lensmeter Microscope		31398
			Black	
2564	Upstairs Rm. S13A	Stool	w/wheels;	
			no/arms	
2701	Mental Health Room	File cabinet	black, 4	
			drawer	
2702	Mental Health Room	File cabinet	black, 5	
			drawer	
2703	Mental Health Room	Desk	wood, 4	
			drawer	
2704	Mental Health Room	Chair	black cloth w/arms and	
			wheels	
2705	Mental Health Room	Table	wood top,	
			metal legs	
2706	Mental Health Room	Chair	gray, w/arms	
			and wheels	
2707	Mental Health Room	Refrigerator	Hair 3.0	

2708	Mental Health Room	Refrigerator	Hair 4.0
2709	Mental Health Room	Desk	wood, 4 drawer
2710	Mental Health Room	Chair	black cloth w/arms and wheels
2711	Mental Health Room	Desk	metal, 6 drawer
2712	Mental Health Room	Chair	black cloth w/arms and wheels
2713	Mental Health Room	File cabinet	black, 2 drawer
2714	Mental Health Room	Desk	metal, 2 drawer
2715	Mental Health Room	Chair	black cloth w/wheels
2716	Mental Health Room	Desk	wooden 4 drw
2717	Mental Health Room	Desk	wooden 4 drw
2718	Mental Health Room	Chair	black cloth w/arms and wheels
2719	Mental Health Room	chair	black cloth w/wheels
2720	Mental Health Room	Desk	wooden 4 drw
2721	Mental Health Room	Chair	black cloth w/wheels
2722	Mental Health Room	File Cabinet	beige, metal, 5 drawer
2723	West Side	Scale	Detecto
2724	West Side	Blood drawing chair	
2725	West Side	chart rack	black black metal, 2 drawer
2726	West Side	File Cabinet	
2727	West Side	Refrigerator	Sanyo 2.0 cf black metal, 2 drawer
2728	West Side	File Cabinet	
2729	West Side	Privacy Screen	
2730	West Side	exam table	Winco, blue pad Welch Allyn, wall
2731	West Side	Otoscope	mounted metal, 2 drawer
2732	West Side	Desk	

2733	West Side	Vital sign taker	Welch Allyn, Dynamap gray, w/wheels and door		
2734	West Side	storage cabinet			
2735	West Side	EKG Machine	Welch Allyn metal, 2 drawer		10008054
2736	West Side	Desk			
2737	West Side	Exam table	gray black metal, 2 drawer		
2738	West Side	File Cabinet			
2739	West Side	Refrigerator	Sanyo 2.0 cf computer style		
2740	West Side	Desk			
2741	West Side	Pulmo Aide		565ob	D6003224
2742	West Side	Pulmo Aide		565ob	D4143524
2743	West Side Records	storage cabinet	black, 2 door		
2744	West Side Records	storage cabinet	black, 2 door black metal, 2 drawer		
2745	West Side Records	File Cabinet	black metal, 2 drawer		
2746	West Side Records	File Cabinet	black metal, 2 drawer metal, 2 drawer		
2747	West Side Records	Desk	green w/ arms		
2748	West Side Records	Chair	gray cloth w/arms		
2749	West Side Records	Chair	wood, small, 1 drawer		
2750	West Side Records	desk			
2751	West Side Records	Chart rack	black, rolling metal, 2 drawer		
2752	West Side Records	Desk			
2753	West Side Records	storage cabinet	gray, rolling metal, 2 drawer		
2754	West Side Records	Desk			
2755	West Side Records	Chair	purple cloth, w/arms and wheels mauve, w/arms and wheels		
2756	West Side Records	chair			
2757	West Side Records	Refrigerator	sanyo 5.0 cf		
2758	West Side Records	bookcase	5 shelves		
2759	East Side	Blood pressure taker	Omron		2009070150AF
2760	East Side	portable chart rack	black metal		

2761	East Side	chair	gray cloth w/wheels		
2762	East Side	Refrigerator	Fridgepro, 5.0 cf		
2763	East Side	chair	gray cloth w/wheels		
2764	East Side	storage cabinet	black plastic, 2 door		
2765	East Side	portable chart rack	beige, metal detecto,		
2766	East Side	portable scale	black		
2767	F216	Rolling Chart rack	black metal		
2768	F216	Exam Table	Hausmann		
2769	F216	Chair	black cloth w/arms and wheels		
2770	Hallway	Scale	Heathometer		
2771	F214	Exam table	wood frame Welch Allyn wall		
2772	F214	otoscope	mounted		
2773	F214	Med. Cart	Alabama		
2774	Rm. F217 (Dental)	Refrigerator	cool spot 5.0		
xxxx	F212	crutches (11 pr)	aluminum		
xxxx	Infirmary	12 new beds			
xxxx	Infirmary	13 old beds (some boats)			
xxxx	Rm. F216	Back Board	Plastic, lime grn		
xxxx	Rm. S142 A	backboard			
xxxx	Rm. S142 A	stretcher			
	Main Hallway	Refrigerator	GE St. St. Portable w/wheels	TB12slb	618255
	Rm. F208 Exam rm	Cart			
	Rm. F208 Exam rm	EKG Machine	Spacelab	Eclipse850	10670003134

## JTVCC (MHU/SHU)

Inventory Control #	Location	Item	Description	Model #	Serial #
0217	MHU Dental Room	asst chair	aqua		
0218	MHU Dental Room	j dental chair	aqua, dentech Autoclave	endurance	
0316	MHU Dental Room	Sterilizer	Midmark		N9-ultraclave
0696	MHU Dental Room	dental asst. cart	white		
0874	MHU Dental Room	x-ray film processor	Air Technus	Peripro III	14182
0972	MHU Dental Room	file cabinet	tan, lat 5 drwr		
2003	SHU Medical Office	Lateral File Cabinet	Tan (5 drawer)		
2004	SHU Medical Office	Wire Shelves	4 shelves		
2005	SHU Medical Office	Lateral File Cabinet	Tan (6 drawers)		
2006	SHU Medical Office	Lateral File Cabinet	Tan (6 drawers)		
2009	SHU Medical Office	Vertical File Cabinet	Tan (4 drawers)		
2010	SHU Medical Office	Table Stand on Wheels			
2016	MHU Medical Office	Back board	Wood (in hall)		
2021	SHU Mental Health Office	Fridge		Haier 3.2	
2026	SHU Mental Health Office	Chair	Blue w/wheels and arms		
2027	SHU Bldg. 17 Medical Room	Scale	Seca H/W		
2028	SHU Bldg. 17 Medical Room	Alabama Cart	4 drawer	Transworld Whirlpool	21488
2029	SHU Bldg. 17 Medical Room	Refrigerator	White	4.3cf Model:	
2030	SHU Bldg. 17 Medical Room	Air Suction Unit	S-Scort Duet White w/Black Top	2014A	8562
2031	SHU Bldg. 17 Medical Room	Exam Table			
2032	SHU Bldg. 17 Medical Room	Lat. File Cabinet Wall Mounted B/P Unit	Tan (2 drawer)		
2033	SHU Bldg. 17 Medical Room	Wall Mounted Otoscope		Baum Co.	
2034	SHU Bldg. 17 Medical Room			Welch Ally.	
2035	SHU Bldg. 17 Medical Room	File Cabinet	Tan (2 drawer)		
2036	SHU Bldg. 17 Medical Room	Exam Light Gooseneck			
2038	SHU Bldg. 17 Medical Room	Stool	Gray w/wheels		

2042	SHU Bldg. 18 Medical Room	Alabama Cart	4 drawer		
2043	SHU Bldg. 18 Medical Room	Refrigerator		Whirlpool 4.3cf	
2044	SHU Bldg. 18 Medical Room	Air Suction Unit	S-Scort Duet	Model: 2014A	8569
2045	SHU Bldg. 18 Medical Room	Refrigerator		Haier 3.0	
2046	SHU Bldg. 18 Medical Room	Pulmo-Aide Nebulizer		Model: 5650D	D3655803
2047	SHU Bldg. 18 Medical Room	File Cabinet	Tan (2 drawer) White w/Black Top		
2048	SHU Bldg. 18 Medical Room	Exam Table			
2049	SHU Bldg. 18 Medical Room	Lat. File Cabinet Wall Mounted B/P Unit	Tan (2 drawer)		
2050	SHU Bldg. 18 Medical Room	Wall Mounted Otoscope		Baum Co.	
2051	SHU Bldg. 18 Medical Room	Exam Light Gooseneck		Welch Ally.	
2052	SHU Bldg. 18 Medical Room				
2054	SHU Bldg. 19 Medical Room	stool			
2055	SHU Bldg. 19 Medical Room	Alabama Cart	4 drawer		
2056	SHU Bldg. 19 Medical Room	Exam Light Gooseneck			
2057	SHU Bldg. 19 Medical Room	Refrigerator		Whirlpool 4.3cf	
2058	SHU Bldg. 17 Medical Room	Pulmo-Aide Nebulizer		Model: 5650D	D3655804
2059	SHU Bldg. 19 Medical Room	Exam Table	White w/Black Top		
2060	SHU Bldg. 19 Medical Room	Lat. File Cabinet Wall Mounted B/P Unit	Tan (2 drawer)		
2061	SHU Bldg. 19 Medical Room	Wall Mounted Otoscope		Baum Co.	
2062	SHU Bldg. 19 Medical Room			Welch Ally.	
2063	SHU Bldg. 19 Medical Room	File Cabinet	Tan (2 drawer) Red w/wheels no arms		
2064	SHU Bldg. 19 Medical Room	Chair			
2065	SHU Bldg. 19 Medical Room	Stool	Gray w/wheels		

	<b>Medical Room SHU Bldg. 17</b>				
2066	<b>Medical Room SHU Bldg. 19</b>	suction machine		2014A	8553
2067	<b>Medical Room</b>	Back board	Mesh		
2068	<b>SHU Medical Office</b>	Small Med. Cart			
2069	<b>MHU Medical Office</b>	Desk	Tan w/Brn Top (2 Drw)		
2070	<b>MHU Medical Office</b>	Lateral File Cabinet	5 Drawer Woodgrain Top (2 Drw)		
2071	<b>MHU Medical Office</b>	Desk			
2072	<b>MHU Medical Office</b>	Refrigerator		Haier 3.2cf	
2073	<b>MHU Medical Office</b>	Metal Wire Shelves	4' shelves w/Wheels		
2075	<b>MHU Records Office</b>	Desk	Tan w/O/h (S 3dr)		
2076	<b>MHU Records Office</b>	Lateral File Cabinet	Tan (5 drawers)		
2077	<b>MHU Records Office</b>	Lateral File Cabinet	Tan (5 drawers)		
2078	<b>MHU Records Office</b>	Lateral File Cabinet	Tan (4 drawers)		
2079	<b>MHU Records Office</b>	Lateral File Cabinet	Tan (4 drawers)		
2080	<b>MHU Records Office</b>	cart	gray		
2082	<b>MHU Kitchen</b>	Refrigerator		Holiday 5.0cf	
2083	<b>MHU Hallway</b>	Cart	Gray, plastic (2 shelves)		
2085	<b>MHU Hallway</b>	Cart	Gary, plastic (2 shelves)		
2086	<b>MHU Bldg. 22</b>	records cart			
2087	<b>MHU Hallway</b>	Stretcher	Orange, Collapsable		
2088	<b>MHU Bldg. 21</b>	Medicine Cart	Alabama		
2089	<b>MHU Bldg. 21</b>	Refrigerator		Whirlpool 5.0cf	
2090	<b>MHU Bldg. 21</b>	Lamp	Gooseneck		
2091	<b>MHU Bldg. 21</b>	Exam Table			
2092	<b>MHU Bldg. 21</b>	Lateral File Cabinet	2 Drawers		
2093	<b>MHU Bldg. 21</b>	Scale	Seca		
2095	<b>MHU Bldg. 21</b>	Stool	Gray		
2096	<b>MHU Bldg. 21</b>	Wall Mounted Otoscope		Welch Aller	

2097	MHU Bldg. 21	Wall Mounted B/P Unit		Baumanometer	
2098	MHU Bldg. 22	Medicine Cart	Alabama		
2099	MHU Bldg. 22	Refrigerator		Whirlpool 5.0cf	
2100	MHU Bldg. 22	Refrigerator		Summit 3.2 cf	
2101	MHU Bldg. 21	Nebulizer		Model: 5650D	D3660879
2102	MHU Bldg. 22	B/P Unit	Digital Omron	M#:H3M739 HC	3404706L
2103	MHU Bldg. 22	Exam Table			
2104	MHU Bldg. 22	Lateral File Cabinet	2 Drawers		
2105	MHU Bldg. 22	Scale	Seca		
2106	MHU Bldg. 22	Lamp	Gooseneck		
2107	MHU Bldg. 22	Wall Mounted B/P Unit		Baumanometer	
2108	MHU Bldg. 22	Wall Mounted Otoscope		Welch Aller	
2109	MHU Bldg. 22	Stool	Gray		
2110	MHU Bldg. 23	Medicine Cart	Alabama		
2111	MHU Bldg. 23	Refrigerator		Whirlpool 5.0cf	
2112	MHU Bldg. 23	Lamp	Gooseneck		
2113	MHU Bldg. 23	Air Suction Unit	Scort Duet	Model: 2014A	8572
2114	MHU Bldg. 23	Exam Table			
2115	MHU Bldg. 23	Lateral File Cabinet	2 Drawers		
2116	MHU Bldg. 23	Scale	Seca		
2117	MHU Bldg. 23	Wall Mounted B/P Unit		Baumanometer	
2118	MHU Bldg. 23	Wall Mounted Otoscope		Welch Aller	
2119	MHU Bldg. 23	Chair	Blue (w/wheels, no arms)		
2120	MHU Bldg. 23	Floor Scale	Secca	Model: 761	
2121	MHU Mental Health Room	Desk	Gray/Wood Top		
2122	MHU Mental Health Room	Desk	Putty/Woodgrain Top		
2123	MHU Mental Health Room	File Cabinet	Putty (2 drawers)		
2124	MHU Mental Health Room	Table	Plastic Legs/Woodgrain		

			Top		
2125	MHU Mental Health Room	File Cabinet	Putty (5 drawers)		
2126	MHU Mental Health Room	Refrigerator		Summit 3.2 cf	
2127	MHU Mental Health Room	Chair	Blue w/arms & wheels		
2128	MHU Mental Health Room	Chair	Blue w/arms & wheels		
2129	MHU Mental Health Room	Chair	Blue w/arms & wheels		
2181	MHU Nursing Office	bookcase	beige, 2 shelves		
2190	MHU Dental Room	amalgamator	silamat plus	typesio-o	601474
2191	MHU Dental Room	dentist chair	tan leather		
2192	MHU Dental Room	chair	blk no/arms, wheels		
2193	MHU Dental Room	stool	blk no/arms, wheels		
2194	MHU Dental Room	light	pelton crane		
2195	MHU Dental Room	3 hand pc over patient			
2197	MHU Dental Room	x-ray unit	x-genus	m-xgt	30241
2199	MHU Dental Room	desk	grey 10' w/drw		
2200	MHU Dental Room	cavitron teeth cleaner	ultra sonic	sps scaler whaledent 7910	119-24440
2201	MHU Dental Room	curing light	coltulox III		201018995
2202	MHU Dental Room	air compressor	westinghouse		317P856
2887	SHU Medical Office	chair	Blue w/wheels		
2888	SHU Medical Office	chair	Blue w/wheels		
2889	SHU Medical Office	File cabinet	black, 2 drawer		
2890	SHU Medical Office	cart	metal wire		
2891	SHU Medical Office	chair	blue		
2892	SHU Medical Office	lateral file cabinet	beige, 4 drawer		
2893	SHU Medical Office	lateral file cabinet	beige, 4 drawer		
2894	SHU Medical Office	narcotics cabinet			
2895	SHU Medical Office	narcotics cabinet			
2896	SHU Medical Office	chair	blue w/arms		
2897	SHU Medical Office	chair	blue w/arms		
2898	SHU Medical Office	chair	blue w/arms		
2899	SHU Medical Office	chair	blue w/arms		
2900	SHU Medical Office	cart	metal wire		
2901	SHU Medical Office	Refrigerator	sanyo		

2902	SHU Bldg. 17 Medical Room	scale	floor	
2903	SHU Bldg. 17 Medical Room	nebulizer	pulmo-aid	D3655781
2904	SHU Bldg. 18 Medical Room	scale	Healthometer	
2905	SHU Bldg. 19 Medical Room	scale	Healthometer	
2906	MHU Medical Office	File Cabinet	beige, 4 drawer beige, 2 door, lockable	
2907	MHU Medical Office	Storage cabinet	beige, 2 door, lockable	
2908	MHU Medical Office	Storage cabinet	beige, 2 door, lockable	
2909	MHU Medical Office	Storage cabinet	beige, 2 door, lockable	
2910	MHU Medical Office	Storage cabinet	lockable	
2911	MHU Mental Health Office	chair	Blue w/wheels and arms	
2912	MHU Mental Health Office	chair	Blue w/wheels and arms	
2913	MHU Mental Health Office	chair	Blue w/wheels and arms	
2914	MHU Mental Health Office	chair	Blue w/wheels and arms rubbermaid, gray plastic	
2915	MHU Medical Office	cart	rolling, metal	
2916	MHU Medical Office	cart	wire metal	
2917	MHU Medical Office	File Cabinet	beige, 5 drawer	
2918	MHU Medical Office	cart	wire chart cart	
2919	MHU Medical Office	File Cabinet	beige, 5 drawer	
2920	MHU Medical Office	chair	blue	
2921	MHU Medical Office	Storage cabinet	beige, 2 door, lockable	
2922	MHU Nursing Office	chair	blue	
2923	MHU Nursing Office	chair	blue	
2924	MHU Nursing Office	chair	blue	
2925	MHU Nursing Office	File Cabinet	black, 2 drawer	
2926	MHU Nursing Office	File Cabinet	black, 2 drawer	
2927	MHU Nursing Office	wire records cart		
2928	MHU Physician Office	Storage cabinet	2 door, lockable	
2929	MHU Physician	chair	blue	

	<b>Office</b>				
	<b>MHU Physician</b>				
<b>2931</b>	<b>Office</b>	Chair	blue		
<b>2932</b>	<b>MHU Bldg. 21</b>	chair	blue		
<b>2933</b>	<b>MHU Dental Room</b>	ultra sonic cleaner			6056775
<b>2934</b>	<b>MHU Dental Room</b>	desk	wooden w/ shelves		
<b>xxxx</b>	<b>MHU Hallway</b>	Wheelchair			Invacare, Tracer IV
<b>xxxx</b>	<b>MHU Dental Room</b>	lead apron	dentsply		

## MCCC

Inventory Control #	Location	Item	Description	Model #	Serial #
0456	Main Room	otoscope	Welch Alyn, W/M		
0457	Main Room	Chair	Grey cloth, n/ar, w/wh		
0458	Main Room	Chair	Grey Cloth, n/a		
0459	Main Room	desk	wooden		
0460	Main Room	Desk	Wooden		
0665	Back room	storage cabinet	wooden, glass doors Ritter 304 - Sand		
0924	Main Room	Exam Table	Grey		
0925	Back room Hall	Filing Cabinet	Putty, 5 drawer		
0927	Back room Hall	Filing Cabinet	Putty, 5 drawer		
0980	Back room Hall	File Cabinet	Putty, 5drawer		
0982	Main Room	Refrigerator	4.5 cu. ft.	AVANTI	
0983	Back room	Nebulizer	Sunrise	5650D	123616731
0984	Back room Hall	File Cabinet	Putty, 5drawer		
0985	Back room Hall	File Cabinet	Putty, 5drawer		
0986	Back room Hall	File Cabinet	Putty, 5drawer		
0988	Back room Hall	File Cabinet	Putty, 5drawer		
0990	Main Room	Scale			
0991	Main Room	Privacy Screen	green		
0992	Back room	EKG Spac	Eclipse 850		92300-03207
0994	Main Room	Exam Light	Gooseneck		
0995	Main Room	Refrigerator	3.0 cf Haier		
0996	Back room	shelving unit	gray metal, 5 shelves		
2479	Back Room	desk	4 drawer/ top hutch		
2480	Back Room	chair	black cloth w. wheels		
2481	Back room	Med Cart	Pci Trans Aid		
2482	Back Room	file cart	portable/black		
2483	Main Room	Refrigerator	sanyo 3.0		
		Storage			
2595	Back room Hall	cabinet	grayish blue/ lockable		
2596	Main Room	HP Laser Jet Printer		CM2320fxi	CND998LB09
2597	Back Room	AED	Lifepak/Medtronics		35165890
		Storage			
2598	Back room Hall	cabinet	grayish blue/ lockable		
8080	Main Room	Portable Cart	3 shelves, metal		
		Storage			
8082	Back room	cabinet	metal, lime		
xxxx	Main Room	File Cabinet	blk on wheels		

xxxx  
xxxx

**Main Room**  
**Main Room**

stretcher  
wheelchair

## NCCWRC

Inventory Control #	Location	Item	Description	Model #	Serial #
2273	Hallway	Scale	Seca h/w	7001121009	40523
		stand on			
2274	TX Room 3	wheels	tan/aqua, 2 drw		
2275	TX Room 3	exam table	Ritter	304	
2276	TX Room 3	ecg machine	welch alyn	cpxx	1.1E+11
2277	TX Room 3	mayo stand			
2278	Office	chair	grn w/arms, wheels		
2279	TX Room 1	stool	grn ritter		
2281	TX Room 2	chair	tan/grn dots		
2282	TX Room 2	chair	tan/grn dots		
2283	TX Room3	chair	tan/grn dots		
2284	TX Room 2	chair	tan/grn dots		
2285	TX Room 2	chair	tan/grn dots		
2286	TX Room 2	chair	tan/grn dots		
2287	TX Room 2	desk	tan l-shaped		
2288	TX Room 1	otoscope	portable	Heinen NT200	
2289	TX Room 1	exam table	ritter	304	
2290	TX Room 1	File cabinet	tan lat, 3 dr		
		goose neck			
2291	TX Room 1	lamp	white Hlth care ligh	15100	4740
2292	TX Room 1	cart on wheels	wh, 3 shelf		
2293	TX Room 1	stool	Ritter		
2294	TX Room 3	chair	grn, w/arms,wheel		
2295	TX Room 1	desk	tan 2 drw		
2296	TX Room 1	chair	tan/grn dots		
2297	office	chair	tan/grn dots		
2298	office	chair	tan/grn dots		
2299	office	chair	tan/grn dots		
2300	office	refrigerator	santo, 3 cf		
2301	office	refrigerator	santo, 3 cf		
	<b>Storage</b>				
2502	Room	alabama cart			
2503	TX Room 2	File cabinet	black, 2 drawer		
2514	TX Room 3	stool	green with wheels		
2515	TX Room 3	cart on wheels	plastic, 3 shelve		
2516	TX Room 3	desk	tan, 2 darwer, wood top		

## PLUMMER

Inventory Control #	Location	Item	Description	Model #	Serial #
0003	Medical Unit	Chair	w/arm rests, maroon		
0013	Medical Unit	Exam table	Midmark, lt. brown pad	104	
0015	Medical Unit	Chair	w/armrests, maroon		
0016	Medical Unit	Desk	2 drawer, beige		
0019	Medical Unit	Stool	swivel		
0673	Medical Unit	Desk	Black, Metal, 5 drawer		
0674	Medical Unit	Printer	Hewitt Packard laserjet Black, Portable, 2	4100	
0675	Medical Unit	Filing Cabinet	drawer	Oxford	
0679	Medical Unit	Exam Lamp	Goose neck		
0680	Medical Unit	Filing Cabinet	HON, 5 drawer, Beige		
0940	Medical Unit	EKG Machine		EK10	56871
2206	Medical Unit	Medication Cart	PCI Trans Aid		21498
2207	Mental Health	Desk	Wooden, 5 drawer		
2208	Mental Health	file cabinet	blk vert. 2-drawer		
2209	Medical Unit	Refrigerator	Awanti, 3 cu. ft.		
2210	Medical Unit	Refrigerator	Summit, 3 cu. ft.		
2211	Mental Health	file cabinet	blk vert. 5-drawer		
2212	Mental Health	file cabinet	blk vert. 5-drawer		
2213	Mental Health	file cabinet	blk vert. 5-drawer		
2220	Mental Health	chair	black w/arms		
2221	Mental Health	chair	black w/arms		
2222	Mental Health	Chair	black w/arms		
xxxx	Mental Health	Quick Response Bag	orange		
xxxx	Mental Health	Scale	Healthometer w/w		402B003562

## SCI

Inventory Control #	Location	Item	Description	Model #	Serial #
179	Medical Office Boot camp	cart	alabama		
186	Medical Office Boot camp	exam table	green pad		
200	M/H 2nd fl MSB	File cabinet	4 drawer		
446	Medical Office Boot camp	file cabinet	beige, 4 drawer		
604	Medical Office Boot camp	file cabinet	beige, 4 drawer		
605	Medical Office Boot camp	file cabinet	beige, 4 drawer		
667	Medical Office Boot camp	file cabinet	beige, 5 drawer		
668	Medical Office Boot camp	file cabinet	beige, 5 drawer		
0689	Medical Office Boot camp	Portable Blood Pressure	Welsh Allyn		JA011726
2331	MH/Dental rm 103A	File Cabinet	tan lockable		
2332	MH/Dental rm 109	File Cabinet	blk 4 drw		
2333	MH/Dental rm 109	File Cabinet	tan 5 drw		
2334	MH/Dental rm 109	file cabinet	tan 5 drw		
2335	MH/Dental rm 109	File Cabinet	tan 5 drw		
2338	Medical Office Boot camp	desk	beige, 5 drawer, woodgrain top		
2340	Medical Office Boot camp	desk	dark beige/woodgrain top		
2350	Medical Office Boot camp	Refrigerator/Freezer	Large upright		B443337080
2351	MH/Dental waiting rm	scale	Detecto h/w		
2356	MH/Dental rm 101	Exam Table	Sand Grey	Ritter 304	
2357	MH/Dental rm 101	Otoscope	Welch Allyn Wall mtd		
2358	MH/Dental rm 101	Gooseneck lamp			
2359	MH/Dental rm 101	Gooseneck lamp			
2360	MH/Dental rm 101	hyfrecator	Bircher	M733 w/m	
2361	MH/Dental rm 101	ECG machine	Welch Allyn	CP20	1.04213E+11
2362	MH/Dental rm 101	mayo stand			
2363	MH/Dental rm 101	cart	grey 1 shelf		
2364	MH/Dental rm 101	File Cart	grey 3 drw, locking		
2365	MH/Den. Pharmacy	Refrigerator	GE 4cf		
2367	MH/Dental rm 103A	File Cabinet	Grey vet, 5 drw		
2368	MH/Dental rm 103A	File Cabinet	Grey vet, 5 drw		
2369	MH/Dental rm 103A	File Cabinet	Grey vet, 5 drw		
2370	MH/Dental rm 103A	File Cabinet	Grey vet, 5 drw		
2371	MH/Dental rm 103A	File Cabinet	Grn vert, d drw		
2372	MH/Dental rm 103A	File Cabinet	Grn vert, d drw		
2373	MH/Dental rm 103A	File Cabinet	Grn vert, d drw		

2374	MH/Dental rm 103A	File Cabinet	Grn vert, d drw		
2375	MH/Dental rm 103A	File Cabinet	Grn vert, d drw		
2376	MH/Dental rm 103A	File Cabinet	Grn vert, d drw		
2377	Dental Room	mobile cabinet	orange		
2378	Dental Room	Asst chair	mauve		
2379	Dental Room	Curing Light	Coltoluz II		40721503
2380	Dental Room	Cavitron	Dently	M3000	11020001
2381	Dental Room	Asst chair	mauve		
2382	Dental Room	Denatal chair	mauve		
2383	Dental Room	Exam Chair	Mauve	ADEC H5-33	61-1287-00
2384	Dental Room	X-ray Machine	single shot	Gendex 770 Dental EZ SDP- 18	770-1672858D  2414
2385	Dental Room	Exam Chair	Grey w/light	n/arms, w/wheel	
2387	Dental Room	desk chair	Grey w/light		
2388	Dental Room	Small Desk	Beige w/woodgrain top		
2389	Dental Room	Film Processor	Peri-Pro	Air Techniques M- 9000dl Whaledent	A32966 30938566
2390	Dental Room	Ultra-sonic Cleaner	Biosonic		
2391	Dental Room	Autclave	Midmark	M-m9-03	CZ009431
2392	Dental Room	Grinder	Red Wing	M-26	81622486
2393	Dental Room	Vibrator			X3823259V
2398	MH/Dental	chair	grey cloth whees		
2399	MH/Dental rm 108A	chair	grey cloth whees		
2401	MH/Dental rm 101	file cart	blk rolling, lockable		
2402	MH/Dental rm 106	cart	blk rolling, lockable		
2406	MH/Dental rm 103A	Desk	woodgrain		
2409	Medical Office Boot camp	Med cart	tan on wheels		
2412	X Ray Room-MSB	X-Ray Unit	Collimaster C	M105-1	18627
2413	X Ray Room-MSB	stool	green		
2414	X Ray Room-MSB	chair	blk, wheeks		
2415	X Ray Room-MSB	desk	blk formica top		
2416	X Ray Room-MSB	X-Ray illuminator	XMA		
2417	X Ray Room-MSB	X-Ray Film Developer	Konica	SRY- 101A	105216583
2418	X Ray Room-MSB	stool	tan		

2541	Medical Office Boot camp	desk	gray/5drawer
2542	Medical Office Boot camp	scale	detects
2543	Medical Office Boot camp	desk	beige, woodgrain top, 2 drawer
2544	Medical Office Boot camp	chair	purple/blue cloth w/ wheels
2545	Medical Office Boot camp	file cabinet	black, 2 drawer
2546	Medical Office Boot camp	lateral file	beige, 4 drawer
2547	Medical Office Boot camp	lateral file	4 drawer, beige
2590	Medium Sec. Bldg	scale	Detecto
2649	M/H Director - MSB	chair	black cloth w/wheels and arms
2650	M/H Director - MSB	chair	gray cloth w/wheels
2651	M/H Director - MSB	desk	woodgrain top, metal, 4 drawer
2652	M/H Director - MSB	desk	woodgrain top, metal, 4 drawer
2653	M/H Director - MSB	desk	woodgrain top, metal, 4 drawer
2654	M/H 2nd fl MSB	desk	wooden, old
2655	M/H 2nd fl MSB	storage cabinet	black, 2 door
2656	M/H 2nd fl MSB	Desk	metal. Old
2657	M/H 2nd fl MSB	File cabinet	2 drawer
2658	MSB Sick Call	Refrigerator	Sanyo 3.0 cf
2659	MSB Sick Call	Med cart	4 drawer
2660	MSB Sick Call	exam table	beige pad, metal legs
2661	MSB Sick Call	Med cart	
2662	MH/Dental rm 108A	cabinet	wooden, 3 drawer
2663	MH/Dental rm 108A	cabinet	wooden, 3 drawer
2664	MH/Dental rm 108A	cabinet	wooden, 3 drawer
2665	MH/Dental rm 108A	Refrigerator	Sanyo 4.0 cf
2666	MH/Dental rm 108A	Narcotics cabinet	2 door/ lockable
2667	MH/Dental rm 103A	Desk	wooden, 5 drawer
2668	MH/Dental rm 101	cart	black w/wheels
2669	MH/Dental rm 101	Desk	gray top, black, 4 drawer
2670	MH/Dental rm 101	storage cabinet	beige/ 2 door
2671	MH/Dental rm 101	x-ray illuminator	
2672	MH/Dental rm 101	exam table	beige pad, wood legs
2673	MH/Dental rm 101	otoscope	Welch Allyn, wall mounted
2674	MH/Dental rm 101	chair	red cloth, w/wheels
2675	MH/Dental rm 106	Desk	gray, small
2676	MH/Dental	storage cabinet	beige/ 2 door
2677	MH/Dental rm 109	Desk	woodgrain top, black, 2 drawer
2678	MH/Dental	Desk	gray, u-shaped
2679	Medical Office Boot camp	Med cart	beige/ 4 drawer
2684	M/H Director - MSB	chair	bluish/black w/wheels

2685	M/H Director - MSB	chair	black cloth w/wheels and arms	
2686	M/H Director - MSB	table	wooden	
2687	M/H Director - MSB	file cabinet	gray, 2 drawer	
2689	Key South Bldg	portable exam table	black pad, wood legs	
2690	Medium Sec. Bldg	portable exam table	black pad, wood legs	
2691	Medium Sec. Bldg	Med cart	beige, 4 drawer	Harloff
2692	Minimum Sec. Bldg	Med cart	beige, 4 drawer	Harloff
2693	Minimum Sec. Bldg	portable exam table	black pad, wood legs	
2694	Key South Bldg	scale	Detecto	
2695	Key South Bldg	Med cart	beige, 4 drawer	Harloff
2696	Merit Bldg	scale	Detecto	
2697	Merit Bldg	Med cart	beige, 4 drawer	Harloff
2698	Merit Bldg	portable exam table	black pad, wood legs	
2700	Minimum Sec. Bldg	scale	Detecto	
XXXX	Dental Room	Leaded Vest		
XXXX	Medical Office Boot camp	backboard	wooden	
XXXX	Medical Office Boot camp	stretcher	aluminum	

## SCI PRETRIAL

Inventory Control #	Location	Item	Description	Model #	Serial #
0175	Rm 248	Resusitator	Black case portable		
0176	Rm 248	Refrigerator	White 2.5 cu.ft.	GE	
0177	Rm 248	Storage Container	Metal wall-mounted		
	<b>Receiving</b>				
0179	Room	Storage Unit	Red portable		
0181	Rm 244	Exam Light	Healthcare		
0182	Rm 245	Small Desk	Beige w/wood-grain top		
0183	Rm 245	Blood Pressure Guage	Tyco		
185	Rm. 244	Stool	green		
0189	Entrance room	File Cabinet	Beige 4 drawer vertical		
0197	Rm 245	Chair	Gray Metal Legs		
0201	Rm 244	Chair	Gray Metal Legs plastic		
	<b>Receiving</b>				
0398	Room	File Cabinet	Beige 5 drawer		
	<b>Receiving</b>				
0445	Room	File Cabinet	Beige 5 drawer		
	<b>Receiving</b>				
0447	Room	Refrigerator	3.0 cu. ft.	HAIER	
	<b>Receiving</b>				
0448	Room	Blood Pressure Monitor	Omron	IntelSensor	
	<b>Receiving</b>				
0449	Room	Refrigerator	3.0 cu. ft.	Summit	
	<b>Receiving</b>				
0462	Rm 244	Pulmo-Aide Nebulizer	DeVilbiss	5650D	D3246330
0463	Rm 244	ECG	SpaceLab	Eclipse 850	92300-003184
0464	Rm 244	Portable cart	Metal 1shelf/2 drawer		
0466	Rm 244	Otoscope	Welsh Allyn wall-mounted		
0467	Rm 244	Small Desk	Beige w/wood-grain top		
0468	Rm 244	Exam Bed	Green	Ritter 104	
0469	Rm 244	Privacy Screen	white		
0475	Rm 245	Chair	Maroon w/wheels, arms		
	<b>Outside Rec.</b>				
0602	Room	File Cabinet	Beige 4 drawer		
	<b>Outside Rec.</b>				
0603	Room	File Cabinet	Tan 5 drawer		
	<b>Outside Rec.</b>				
0606	Room	File Cabinet	Beige 4 drawer		

0666	Receiving Room	File Cabinet	Beige 5 drawer	
0669	Receiving Room	Chair	Grey Metal plastic top	
0671	Rm 247	Refrigerator (meds)	white 2.5 cu. ft.	GE
0677	Rm 244	Chair	Maroon w/wheels no arms	
685	Hallway	scale	detecto	
0686	Rm 248	IV Stand		
0803	Outside Rec. Room	File Cabinet	Beige 4 drawer	
0908	rm 245	Otoscope	welch alyn, w/m	
0928	Receiving Room	Detecto Scale		
0929	Outside Rec. Room	File Cabinet	Beige 4 drawer	
0930	Outside Rec. Room	File Cabinet	Beige 4 drawer	
0943	Rm 245	Computer Table	Wood Grain	
0973	Rm 244	File Cabinet	blk, 5 drw	
0975	Entrance room	gooseneck lamp	white	
975	Rm. 244	lamp	gooseneck	
0977	room 245	Chair	Black w/wheels, no arms	
0979	Receiving Room	Chair	Grey w/wheels, no arms	
0980	Receiving Room	Exam Bench	Wood Brown Pad	
0981	Outside Rec. Room	File Cabinet	Beige 4 drawer	
2317	Room 243	File Cabinet	Beige 5 drawer vertical	
2318	Room 243	File Cabinet	Beige 5 drawer vertical	
2319	Room 243	File Cabinet	Beige 5 drawer vertical	
2320	Room 243	File Cabinet	Beige 5 drawer vertical	
2321	rm 244	Privacy Screen		
2322	rm 244	b/p unit, wall-mtd	Typos	
2323	rm 245	File Cabinet	blk covered, wheels	
2324	Entrance room	File Cabinet	blk covered, wheels	
2325	Entrance room	Stool	grn	
2325	Rm 245	Stool	Green	
2326	rm 248	File Cabinet	black, hanging, 2 tirs	
2327	Entrance room	chair	blk cloth w/wheels, n/arms	
2329	Receiving Room	Stool	grn	

	<b>Receiving</b>		
2330	<b>Room</b>	Desk	woodgrain
2363	<b>Room 245</b>	cart	plastic, 2 shelves
2688	<b>Room 244</b>	Mayo Stand	
2699	<b>Room 245</b>	cart	metal, 3 shelves, 2 drawer
9026	<b>Rm 248</b>	File Cabinet	Tan open w/wheels
<b>No Inv. #</b>	<b>Rm 243</b>	Crutches	Aluminum
<b>No Inv. #</b>	<b>Rm 243</b>	Crutches	Aluminum
<b>No Inv. #</b>	<b>Rm 243</b>	Crutches	Aluminum
<b>No Inv. #</b>	<b>Rm 243</b>	Crutches	Aluminum
<b>No Inv. #</b>	<b>Rm 243</b>	Crutches	Aluminum
<b>No Inv. #</b>	<b>Rm 243</b>	Crutches	Aluminum
<b>No Inv. #</b>	<b>Rm 243</b>	Wheel Chair	
<b>No Inv. #</b>	<b>Rm 243</b>	Wheel Chair	

## SVOP

Inventory Control #	Location	Item	Description	Model #	Serial #
0052	Medical Records	File Cabinet	Putty 5 drawer vertical		
0053	Medical Records	File Cabinet	Tan 5 drawer vertical		
0220	Exam Rm 178	Blood Pressure	Portable/ADC		
0221	Main Office	stool	blk on wheels		
0222	Storage Area Rm 176	Stretcher	Aluminum	Ferno	
0223	Main Office	Gurney	(activity room)	Midmark 900	
0224	Main Office	Storage Closet	Grey lockable		
0225	Storage Area Rm 176	Refrigerator	5.0 cu ft	GE	
0227	Exam Rm 178	Desk	Beige wall mtd. Lockable		
0228	Exam Rm 178	Storage Unit	Metal lockable wall-mounted		
0229	Exam Rm 178	Storage Cablnet	Lt. Brown heavy plastic		
0230	Exam Rm 178	Storage Cablnet	Lt. Brown heavy plastic		
0231	Exam Rm 178	X-Ray Light	Wall Mounted		21104
0233	exam rm 179	Storage Unit	Metal wall-mounted lockable		
0234	Main Office	Chair	Black Metal w/arms		
0234	Storage Area Rm 176	Shelving Unit	Grey slotted		
0235	Main Office	stool	grey on wheels		
0236	exam rm 179	Flip desk	Beige wall-mounted lockable		
0237	exam rm 179	Portable Cart	Metal 2 shelves/2 drawers		
0242	Main Office	File Cabinet	Tan 3 drawer lateral		
0243	Main Office	File Cabinet	Tan 3 drawer lateral		
0244	Main Office	Desk w/side attch.	Green		
0245	Medical Records	Desk	Green		
0248	Medical Records	File Cabinet	Beige 4 drawer vertical		
0250	Medical Records	File Cabinet	Beige 5 drawer vertical		
0441	Exam Rm 178	Microscope	Seiler WestLab		
0443	exam rm 179	ECG	Welsh Allyn on cart	CP 20	104213097163
0444	exam rm 179	Otoscope	Welsh Allyn wall-mounted		
0476	Exam Rm 178	EKG	Spacelab	EK-10	57459
0477	Exam Rm 178	Otoscope	Welsh Allyn wall-mounted		
0478	waiting room	Scale	Detecto H/W		

0479	Storage Area Rm 176	Goose Neck Lamp		
0480	Main Office	File Cabinet	Putty 5 drawer vertical	
0481	Medical Records	File Cabinet	Grey 4 drawer vertical	
0607	waiting room	File Cabinet	Black locking w/wheels	
0611	Medical Records	File Cabinet Medication	Putty 4 drawer vertical	
0624	Main Office	Cabinet	Grey 3 shelf lateral	
0626	exam rm 179	Chair	Grey/Blk w/arms, wheels	
0636	Medical Records	File Cabinet	Putty 5 drawer vertical	
0637	Medical Records	File Cabinet	Putty 5 drawer vertical	
0638	Medical Records	File Cabinet	Putty 4 drawer vertical	
0670	waiting room	File Cabinet	Black open w/wheels	
0672	Medical Records	File Cabinet	Grey 4 drawer vertical	
0764	Medical Records	File Cabinet	Grey 4 drawer vertical	
0795	Medical Records	Table Storage	Green w/ 2 pedestal legs	
0798	Main Office	Cabinet	Black 6 shelf	
0809	Records - DK	File Cabinet	Black 2 drawer Black cloth w/arm, wheels	
0810	Main Office	Chair		
0813	Medical Records	File Cabinet	Grey 4 drawer vertical	
0931	Medical Records	File Cabinet	Putty 5 drawer vertical	
0932	Medical Records	File Cabinet	Putty 5 drawer vertical	
0933	Medical Records	File Cabinet	Putty 5 drawer vertical	
0934	Medical Records	File Cabinet	Putty 5 drawer vertical	
0935	Medical Records	File Cabinet	Putty 5 drawer vertical	
0936	Waiting Room	Chair	Green w/arms, wheels	
0944	Storage Area Rm 176	Shelving Unit	Grey slotted	
0945	Main Office	Refrigerator Medication	3.0 cu ft	Haier
0947	Medical Records	Cabinet	Grey 3 shelf lateral	
0974	Waiting Room	File Cabinet	Black 2 drawer lateral	
0976	Waiting Room	File Cabinet	Black 2 drawer laterall	
2302	Main Office	File Cabinet	blk rolling/lock	
2303	Exam Room 178	lamp	goose neck	
2304	exam rm 179	Exam Table	Hamilton	E Series
2305	exam rm 178	mayo stand		
2307	Main Office	Table	grn top/2 legs	
2308	Main Office	chart cart	metal basket	
2309	Main Office	stool	grn on wheels	

2310	Medical Records	File Cabinet verticle	putty		
2311	Exam Room 178	File Cabinet verticle	blk w/whl, lockable		
2312	waiting room	open top File Cabinet	blk mesh		
2313	waiting room	File Cabinet	blk locking w/ wh		
2314	exam rm 179	Refrigerator suction	Hair 4.0 cf	BC76	00004767
2315	exam rm 179	machine	schuco inc	m-130	069800035376
2347	Medical Records	cart	plastic/ black / 3 shelves		
2471	Medical Records	file cabinet	4 drawer		
2472	Medical Records	file cabinet	2 drawer		
2473	Medical Records	file cabinet	2 drawer		
2475	Medical Records	file cabinet	2 drawer		
2476	Medical Records	storage cabinet	gray		
2477	Exam Room 178	chair	blue cloth		
2593	Medical Records	File cabinet	beige / 4 drawer		
2594	Medical Records	File cart	black w/ lid and wheels		
2599	Medical Records	File cart	black w/ lid and wheels		
2600	Medical Records	File cabinet	beige / 4 drawer		
2601	Medical Records	chair	blue w/ arms and wheels		
xxxx	exam rm 178	fetal heart monitor	Duplex mod FDIT		

## WEBB

Inventory Control #	Location	Item	Description	Model #
0030	Medical room	Exam Table	Midmark 404	
0033	Medical room	Refrigerator	Awanti Brown 2 cu.ft.	
0034	Medical room	Desk 2 Drawer	Ivory/Woodgrain	
0036	Medical room	Baumanometer	Blood Pressure	
0037	Medical room	Otoscope	Welch Allyn	
0039	Medical room	Centrituge	Damon	
0040	Medical room	Healthometer	Scale	
0041	Medical room	Glove Dispencer	Disposable Glove/Needle	Sage
0042	Medical room	Swivel Chair	Maroon w/arms	
0043	Medical room	Chair	Black Plastic	
0044	Medical room	Metal Lock Box	Wall Mounted	
0045	Medical room	Swivel Chair	Maroon w/arms	
0559	Medical room	File Cabinet	Gray Metal 4 Drawer	

**Question**

Page 5, section B: How many evaluations per year should we plan for?

**Answer:**

**Mental health assessments are completed on every offender that is referred to mental health upon intake. This varies by institution. Approximately 1,468 inmates are presently receiving mental health services as a result of an initial evaluation. Competency evaluations are not as frequent but are necessary occasionally. Approximately 38,000 offenders are admitted and released each year.**

**Question**

Page 5, section E1: How many inmates are currently placed on individual mental health caseloads in BWCI, HRYCI, JTVCC and SCI?

**Answer**

**HRYCI: 257  
PCCC: 31  
WCCC: 9  
BWCI: 175  
HDPWTF: 40  
JTVCC: 499  
CVOP: 57  
MCCC: 36  
SCI: 268  
SCCC/SVOP: 96**

**Question**

Page 6, section E3: How many groups are being run in seg. units, by facility?

**Answer**

**There are no groups presently being offered in segregated housing. However, DDOC expects proposals to include groups in segregated housing.**

**Question**

Page 6, section E3: What groups are provided in general pop., in what number, per facility?

**Answer**

**The following is an example of groups that are presently being offered in DDOC facilities: Anger management, Grief and Loss, Victims Empathy, Anxiety Reduction, Stress Management, Work Release Group, Thinking for Change, Coping with Incarceration, Choices, and Man's Search for meaning. This is not a comprehensive list.**

**Question**

General info: What is the total population number that should be used to develop cost per inmate? (ADP)

**Answer**

**There are approximately 5,548 Level V offenders and 1,068 Level IV offenders in our facilities**

**Question**

Page 21, s.o. tx.: What are the estimated number of brief and full sex offender written evals, who receives/views them?

**Answer**

**An evaluation will be conducted prior to being placed in sex offender programming. Therefore, every inmate that is classified to sex offender programming will be evaluated prior to participation. Evaluation may also be court ordered; in that case the evaluation will be provided to the court. There are approximately 1,000 sex offenders incarcerated in DDOC.**

**Question**

What would trigger such a request for a written eval.?

**Answer**

**Court ordered or program requirement.**

**Question**

Page 20, s.o.tx.: What are the current number of groups being provided at each Level 4 facility?

**Answer**

**The current groups being provided at Level IV facilities are presently being provided by a grant and not by the present vendor. However, the vendor will be responsible for providing one group per week at all level four facilities.**

**Question**

**RFP Section number: II**

**Paragraph number: A**

**Page number: 3**

**Text of passage being questioned: Overview/ACA Accreditation**

**What stage is the DDOC in with regards to receiving ACA accreditation?**

**Answer**

**DDOC is in the planning stage for ACA accreditation. We are reviewing requirements and updating Policies and procedures to meet ACA standards.**

**Question**

**RFP Section number:** II

**Paragraph number:** B.2.b

**Page number:** 5

**Text of passage being questioned:** Mental Health Services/Evaluations

Is the Vendor expected to conduct competency evaluations or functional capacity evaluations?

**Answer**

**There have been a few occasions where the mental health vendor completed a competency evaluation.**

**Question**

**RFP Section number:** II

**Paragraph number:** B.2.b

**Page number:** 5

**Text of passage being questioned:** Mental Health Services/Mental Health Assessments

Please provide the average number of Mental Health Assessments that have been completed on a monthly basis for the past 3 years.

**Answer**

**The average number of mental health evaluations differs per site. The data below is based on a monthly average**

<b><u>LEVEL 5</u></b>	<b><u>Level 4</u></b>
JTVCC 26	Morris 6
SCI 104	SVOP 34
HRYCI 195	Webb 2
BWCI 106	CVOP 8
	HDP 3
	Plummer 2

**Question**

**RFP Section number:** II

**Paragraph number:** B.2.b

**Page number:** 5

**Text of passage being questioned:** Mental Health Services/Case Management

Please provide the average number of inmates who have required case management services on a monthly basis for the past 3 years according to the following classifications:

**Answer**

**Based on the case sort data – which is inmates that are on the mental health roster the following data was obtained.**

- **Serious mental illness – 80% (based on NCCHC definition of SMI)**
- **Adjustment difficulties – 20%**
- **De-compensation - 20%**
- **Aggressive behavior and/or victimization – 20%**
- **Suicidal/homicidal ideation – 25%**
- **Dementia - 15%**

**Question**

**RFP Section number:** II

**Paragraph number:** B.2.e

**Page number:** 5

**Text of passage being questioned:** Mental Health Programming/Groups

What groups are currently being run in general population, special needs units and pre-trial at each facility?

**Answer**

**The following is an example of groups that are presently being offered in DDOC facilities:**

**Groups presently being offered are: Anger management, Grief and Loss, Victims Empathy, Anxiety Reduction, Stress Management, Work Release Group, Thinking for Change, Coping with Incarceration, Choices, Man's Search for meaning**

**Question**

**RFP Section number:** II

**Paragraph number:**

**Page number:** 6

**Text of passage being questioned:** On-call staff must be available 24/7 for those identified during initial screening to require immediate mental health evaluation: Withdrawal

Does medical or BH currently manage alcohol/substance withdrawal from a pharmaceutical standpoint?

**Answer**

**Medical manages the withdrawal protocol at all facilities**

**Question**

**RFP Section number:** II

**Paragraph number:** B.2.h

**Page number:** 7

**Text of passage being questioned:** Receiving Screening/Training

What trainings are currently provided to DDOC staff by the mental health vendor?

**Answer**

**The mental health vendor is responsible for providing Receiving Screening Training to all nurses assigned to intake.**

**Question**

**RFP Section number:** II

**Paragraph number:** B.2.h

**Page number:** 7

**Text of passage being questioned:** Receiving Screening/Training for PCO Observers

What is the nature of the additional training required of PCO observers prior to assuming their positions? What are the minimum qualifications and specific duties for the Observer positions? How are the observer positions scheduled?

**Answer**

**PCO observers are required to be trained appropriately by the vendor prior to assume the responsibility of PCO observer. The vendor is responsible for creating the observer curriculum for training. In addition the**

observers should be trained in Suicide prevention, CPR, Sexual Harassment in the Work Place, and DOC Protocol.

**Question**

**RFP Section number:** II

**Paragraph number:** B.2.j

**Page number:** 7

**Text of passage being questioned:** Psychiatric Nursing Services/Mental Health Labs

Will the medical vendor nursing also be responsible for drawing and documenting mental health labs?

**Answer**

**Yes, the medical vendor is responsible for drawing labs. After they are ordered by the NP or Psychiatrist. Labs. are received and reviewed by the treating practitioner.**

**Question**

**RFP Section number:** II

**Paragraph number:** 7

**Page number:** 13

**Text of passage being questioned:** Treatment Vendor Staffing and Work Shift

Could you clarify "if possible and appropriate"?

**Answer**

**Staffing is based on the needs of the facility. Level V facilities staffing needs may differ from level IV staffing needs and therefore staffing needs are based on that is appropriate for the facility. However, Level V clinicians must be available to provide services at Level IV facilities on an as needed bases**

**Question**

**RFP Section number:** II

**Paragraph number:** Sex Offender Programming

**Page number:** 20

**Text of passage being questioned:** Sex Offender Programming/Groups in Pre-trial

How many groups are currently being offered in pre-trial at each facility for sex offenders?

**Answer**

**Presently, there are no Sex Offender Groups being offered in Pre-Trial. However, it will be expected that the vendor will provide sex offender groups to sentenced offenders housed in pre-trial at an average of one group per week.**

**Question**

**RFP Section number:** II

**Paragraph number:** b

**Page number:** 24

**Text of passage being questioned:** Segregation

Are mental health staff to come in after hours to conduct a mental health evaluation or can a trained nurse complete the evaluation with follow up the next morning from a licensed clinician?

**Answer**

**When an inmate is placed in segregation they are seen by medical prior to placement into segregation. The mental health staff has 24 hours in which to conduct a face to face evaluation once the inmate is placed in segregation.**

**Question**

**RFP Section number:** II

**Paragraph number:** N/A

**Page number:** 27-28

**Text of passage being questioned:** Summary of Service Provision Time Requirements/Services provided will include but are not limited to the following: Mental Health Evaluation and Treatment Services, Emergent and Non-emergent Sick Call,

Boot Camp Evaluations , Mental Health Education, Discharge Planning , Medical/Mental Health Meetings and Reviews , Sex Offender Treatment ,Substance Abuse Treatment ,DUI Programming , Parole Evaluations

Can webcasting or telemedicine be used to provide these services?

**Answer**

**Yes, it is recommended that tele-broadcasting and telemedicine be utilized when possible.**

**Question**

**RFP Section number:** II

**Paragraph number:** C.1

**Page number:** 29

**Text of passage being questioned:** Communications of Sick Call System

Please confirm that trained healthcare staff will triage mental health requests for services, not mental health professionals.

**Answer**

**Medical is responsible for collecting all sick call request and triaging to mental health provider. The mental health provider has 24 hours from triage to respond to sick calls.**

**Question**

**RFP Section number:** II

**Paragraph number:** 9

**Page number:** 32

**Text of passage being questioned:** Disabled Offenders

What current mental health accommodations are being provided to inmates?

**Answer**

**The DDOC has a Structured Care Unit for those inmates that have been identified as seriously mentally ill and cannot function well in general [population. The DDOC also has a unit at the Delaware Psychiatric Hospital (The Mitchell Building) for those inmates that are identified as needing additional care or stabilization.**

**Question**

**RFP Section number:** II

**Paragraph number:** C.11

**Page number:** 33

**Text of passage being questioned:** Mental Health and Veteran Court

Can you provide more clarification on the Vendor's responsibility?

**Answer**

**The Veteran's court is similar to the Mental Health Court. The vendor is expected to have open communication regarding diagnosis, medication, programming and discharge planning.**

**Question**

**RFP Section number: II**

**Paragraph number: 15**

**Page number: 34**

**Text of passage being questioned:** Emergency Services and Maintenance of Automatic Electronic Defibrillators

The Vendor is responsible for assuring adequate response to medical/mental health emergencies consistent with NCCHC and ACA Standards and DDOC policy.

What is the current DDOC policy for BH and their response to emergency situations?

**Answer**

**The mental health vendor as part of the crisis response team is expected to respond to all emergency situations including debriefing after a crisis. The medical vendor is responsible for maintaining medical equipment, such as the Electronic Defibrillator**

**Question**

**RFP Section number: II**

**Paragraph number: 23**

**Page number: 37**

**Text of passage being questioned:** Tele-Psychiatry Expansion

At which facilities is tele-psychiatry currently being conducted?

**Answer**

**Tele-psychiatry is not currently being conducted.**

**Question**

**RFP Section number: II**

**Paragraph number: 5**

**Page number: Work Hours Required On Site**

**Text of passage being questioned:**

If a licensed person has to be on-site as specified in the RFP, can the vendor utilize unlicensed staff as long as there is a licensed staff member on the premise as mandated in the RFP?

**Answer**

**No, all mental health providers are required to by license in the state of Delaware.**

**Question**

**RFP Section number: II**

**Paragraph number: C.**

**Page number: 23**

**Text of passage being questioned:** Tele-Psychiatry Expansion

Does the DDOC currently have a tele-psychiatry LAN/WAN connectivity and equipment that the vendor could utilize within each facility? In the interest of compatibility with new solutions, if there is equipment already in place, what are the makes/models in use?

**Answer**

**We have LAN/WAN connections in an Office at WWRTC and at SCI Pretrial for the psychiatrist to use video conference with an inmate in our other video conference areas throughout the different facilities.**

**Question**

**RFP Section number:** II

**Paragraph number:** C.

**Page number:** 23

**Text of passage being questioned:** Tele-Psychiatry Expansion

Does the DDOC have any existing network connectivity to hospitals or other medical providers that could be leveraged for tele-psychiatry purposes by the vendor?

**Answer**

No.

**Question**

**RFP Section number:** C

**Paragraph number:** 1

**Page number:** 29

**Text of passage being questioned:** The RFP states that the DDOC is "implementing the Electronic Medication Administration Record (EMAR) and the Electronic Health Record (EHR)".

Which EMAR and EHR products is the DDOC implementing? Please also outline the timeframe for such implementations.

**Answer**

**The EMAR and EHR system is being implemented by the DDOC and the medical vendor. The present EMAR system has been implemented at Sussex Correctional Institution and Howard R Young Correctional Institution. EMAR is expected to be implemented at all facilities by midsummer. EHR is expected to be implemented by late fall of 2012. This is a proprietary system owned by the Correct Care Solutions.**

**Question**

**RFP Section number:** C

**Paragraph number:** 4

**Page number:** 30

**Text of passage being questioned:** The RFP states "The Vendor must coordinate with the potential EHR Vendor to assure conversion and maintenance of the paper record to an electronic record."

Medical record conversions can be labor/cost intensive depending on the approach taken, active vs. inactive inmates included in conversion, and volumes of data to enter or scan. Is the Mental Health vendor expected to assist with data entry of existing paper records into the new EHR, or just use the EHR moving forward once it is live? Does DDOC anticipate the Medical Vendor to provide additional staffing to assist with the medical record conversion? If so, can DDOC provide additional information on the conversion approach and volumes to help the Mental Health Vendor estimate the cost associated with conversion of Mental Health related medical records?

**Answer**

**The Mental Health Vendor will be responsible for all MH entries to EHR moving forward once it is live. There will be minimum scanning of existing records.**

**Question**

**RFP Section number:** B

**Paragraph number:** e

**Page number:** 18

**Text of passage being questioned:** Offender Tracking System: The Vendor shall establish their own offender tracking system for follow up/aftercare services in a community residential centers and/or community agency.

Will DDOC consider including the offender tracking for follow up/aftercare services in the DACS or proposed EHR solution? IF DDOC prefers a stand-alone solution separate from the DACS and EHR solution to be supplied by the Mental Health services vendor, will community residential centers and/or community agencies need to have access to the system?

**Answer**

**The DDOC will consider proposals that include offender tracking within the community into the proposed EHR. However, the vendor will be responsible for all cost for software development.**

**Question**

**RFP Section number: D**

**Paragraph number: 5**

**Page number: 45**

**Text of passage being questioned: Work Hours Required On-Site**

How many positions are currently allocated by facility and by shift?

**Answer:**

**Please see Appendix E for mental health staffing.**

**Question**

**RFP Section number: II**

**Paragraph number:**

**Page number: 13 & 41**

**Text of passage being questioned: Re-Entry Program/Discharge Planning**

What are staff resource implications?

**Answer**

**Mental Health staff are responsible for discharge planning to assist with a smooth transition back to the community and to reduce recidivism. Staff are required to be knowledgeable of community resources to facilitate re-entry into the community.**

**Question**

**RFP Section number: II**

**Paragraph number:**

**Page number: 48 & 49**

**Text of passage being questioned: Reporting Requirements**

What are staff resource implications?

**Answer**

**Mental health Staff are required to implement DAC and the ERH once it is operational. Performance measure reporting is based on the CQI matrix and NCCHC/ACA standards. Performance measures are based on simple data collection.**

**Question**

**RFP Section number: Urinalysis Testing**

**Paragraph number: 9**

**Page number: 13**

**Text of passage being questioned: "If an offender has a dirty UA, sanctions will be imposed.**

Please describe for whom the sanctions are imposed and what sanctions will be applied.

**Answer**

**Sanctions are outlined in the Substance Abuse Program Handbook and are developed by the vendor with input from the DDOC. All offenders are aware of the sanction procedure.**

**Question**

**RFP Section number:** Reporting

**Paragraph number:** i

**Page number:** 25

**Text of passage being questioned:** “Reports: The Vendor shall provide an internet secure web-based integrated reporting system for DDOC use that provides up-to-date data (previous day’s orders must be viewable) on all pharmaceuticals ordered for DDOC utilization management. This system shall provide for reporting by dates(s), cost, facility, prescriber, offender, drug or drug category utilization or any combination thereof, as well as those prescriptions needing to be refilled. In addition, monthly reporting of drug returns, and prescription errors shall be provided.”

As this procurement does not include pharmacy services, please advise if this requirement falls on the medical vendor? If it applies to the mental health vendor, please advise what agreements are currently in place for the medical vendor to provide this information directly or through their subcontracted pharmacy service.

**Answer:**

**This procurement applies to the medical vendor not the mental health vendor. However, the mental health vendor will be responsible for assisting in the tracking of mental health prescriptions by the mental health vendor staff.**

**Question**

**RFP Section number:** Pricing and Payment

**Paragraph number:** j

**Page number:** 26

**Text of passage being questioned:** “Management fee per offender per month: Management fee will include the cost of the entire program e.g. equipment, overhead, distribution, labor, taxes. (All proposals must include this option). “The pricing form in Appendix C does not include any reference to Management fee per offender per month. Could the DDOC clarify how they would like this information presented on the pricing form as noted in Appendix C?”

**Answer:**

**Please see revised page 86, Appendix C.**

**Question**

**RFP Section number:** Pricing and Payment

**Paragraph number:** j

**Page number:** 26

**Text of passage being questioned:** “Service Fee per offender: Service fee will include the cost of the entire program e.g. equipment, overhead, distribution, labor, taxes. Other costs may be proposed separate from the actual procurement of product and ongoing service of the contract (i.e. one-time start-up costs).“

The pricing form in Appendix C does not include any reference to Service fee per offender per month. Could the DDOC clarify how they would like this information presented on the pricing form as noted in Appendix C?

**Answer**

**Please see revised page 86, Appendix C**

**Question**

**RFP Section number:** Pricing and Payment

**Paragraph number:** j

**Page number:** 26

**Text of passage being questioned:** “Any rebates or discounts will not be shared, but must be identified as part of the pricing structure.”

The pricing form in Appendix C does not include any reference to rebates or discounts. These terms are generally used in reference to procurements that include pharmaceuticals. Could the DDOC clarify what rebates and discounts to which they refer? Could the DDOC clarify how they would like this information presented on the pricing form as noted in Appendix C?

**Answer**

**This information does not need to be included as this is not a pharmaceutical request.**

# **APPENDIX C**

**APRIL 2012**

**REVISED PAGE 86 OF THE RFP**

**DDOC, BCHS RFP**

**Vendor Name:** \_\_\_\_\_

**Mental Health AND Substance Abuse**

**Based on 7,000 Average Daily Population (ADP)**

<b>Fixed Costs</b> <i>(should not include mark-up percent)</i>	
Dr./PA/CRNP (Mid-Level Practitioners and Above)*	\$
Line Staff *	\$
Performance Bond	\$
Professional Liability/Malpractice Insurance	\$
<i>Subtotal</i>	\$
<b>Management Costs</b> <i>(should not include mark-up percent)</i>	
Senior Management	\$
Administrative Overhead	\$
Office Space	\$
Indirect Costs	\$
<i>Subtotal</i>	\$
<b>Variable Costs</b> <i>(should not include mark-up percent)</i>	
Outside Consults, Medications (if applicable), Laboratory Tests, Medical Supplies & Equipment, Gross Profit, G & A, Legal Representation, Performance Bond, Professional Liability / Malpractice Insurance.	\$
<i>Subtotal</i>	\$
<b>Mark-up</b>	
Service Fee	%
Management Fee	
Profit over Costs	
<i>Subtotal</i>	\$
<b>Annual Base Total</b>	<b>\$</b>
Year 1 Performance Incentive Potential	\$
<b>Potential Year 1 Not to Exceed Total</b>	<b>\$</b>

<b>Cost Price Inflation Not To Exceed Total</b>	
Year 2**	\$
Year 3**	\$
Year 4**	\$

**Question**

**RFP Section number:** Communication of sick call system

**Paragraph number:** 4

**Page number:** 29

**Text of passage being questioned:** “In addition the DDOC is implementing the Electronic Medication Administration Record (EMAR) and the Electronic Health Record (EHR). The vendor will be responsible for entering all mental health documentation into the appropriate system. “

Could the DDOC more fully describe what responsibilities the mental health vendor will have in entering documentation into the Electronic Medication Administration System (EMAR)?

**Answer**

**The mental health provider (psychiatrist/NP) will enter all medication orders into EMAR as well as checking on expiration and change in medications.**

**Question**

**RFP Section number:** Disabled Offenders

**Paragraph number:** 9

**Page number:** 32

**Text of passage being questioned:** “The Vendor must have a system for identifying and providing accommodations to disabled offenders. Offenders who cannot walk may be entitled to wheelchairs or necessary prostheses and/or braces. Offenders with impaired hearing or vision may be entitled to accommodations.”

The accommodations listed in this section generally reflect medical conditions, which are generally the responsibility of the medical vendor. Could the DDOC more fully describe the mental health vendor’s responsibility in this section with respect to obtaining and/or being financially responsible for these accommodations?

**Answer**

**The Mental Health Vendor will be responsible for providing mental health, substance abuse, sex offender, and DUI services to all offenders in the DDOC system including those with disabilities.**

**Question**

**RFP Section number:** Offender insurance

**Paragraph number:** 27

**Page number:** 38

**Text of passage being questioned:** “The Vendor will seek and obtain payments and reimbursement from third party insurers for those offenders who are covered by health insurance including Medicaid.

The Vendor shall gather the information needed to process claims and retain such information for auditing and inspection by DDOC. The Vendor will credit the DDOC 100% of Medicaid costs. These credits will be included with the Vendor’s basic medical monthly services invoice/credits and will be clearly noted. The Vendor is invited to propose alternative methods, subject to the approval of the Department, for retrieving and accounting for insurance re-imbursements provided to cover offender healthcare services.”

The RFP requirements generally related to offsite medical services costs (inpatient hospitalization, outpatient specialty services, emergency room, etc. Could the DDOC please clarify what the mental health vendor’s specific role will be in gathering this information and providing payment for these types of services? If there are other offsite services that the DDOC are including in this procurement, could you please clarify?

**Answer**

**The mental health vendor is not responsible for collecting 3<sup>rd</sup> party payments unless the offender’s health insurance includes those services for which the vendor is responsible.**

**Question**

**RFP Section number:** Transition Plan between Existing and New Vendor

**Paragraph number:** 28

**Page number:** 38

**Text of passage being questioned:** “The Vendor must outline timetables and personnel that will be assigned to supervise and monitor the transition, and detailed plans, including offender medical file transfer, for the transition from the DDOC’s system to your system on an institution-by-institution basis which will include timetables for completion.”

Could the DDOC provide more information on what DDOC system(s) are referenced within this paragraph that will need to be transitioned to the new vendor’s system(s)?

**Answer**

**The transition plan for mental health vendor will involve the recruitment of new staff as well as the retention of current staff, an outline of subcontracting, if applicable, orientation of staff and training in DAC, and the purchase or rental of equipment as needed.**

**Question**

**RFP Section number:** Discharge Planning

**Paragraph number:** 36

**Page number:** 42

**Text of passage being questioned:** “In these cases, the Vendor is expected to develop a discharge plan that includes linkages to community providers and to provide 30 days of prescription medication for those offenders taking medications. For offenders being released to another residential setting, the Vendor is responsible for arranging appropriate transportation, as appropriate.”

As this procurement does not include pharmacy services, is the mental health vendor sole responsibility for ensuring that a 30 day prescription is written and provided to the pharmacy provider? Is the mental health vendor responsible for transportation only in cases where the additional residential setting is solely related to their mental health diagnosis? Does this language also include that the mental health vendor is financially responsible for those costs?

**Answer**

**Linkage to community provider does not involve transportation or arranging transportation. The mental health provider in cooperation with the medical provider is to assure that a 30 day supply of medication is ordered prior to release, that community resources have been identified and the client has the community resource information. An initial appointment should be schedule with community resources prior to release**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

Our staff would need access to our Employee Portal for such things as Kronos based timekeeping, and our Learning Management System (a video based system for training/certification).Can this be done over the existing DDOC network? If so, what level of bandwidth is available, and does the DDOC leverage technology like QOS?

**Answer**

**The Vendor will be responsible for all costs associated with KRONOS.**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

Can you provide the number of mental health encounters including PCO numbers for each facility for the last six months?

**Answer**

The following information is an average for the last six months based on facility.

**Total # of mental health clinical visits**

**JTVCC – 517; SCI – 289; HRYCI – 415; BWCI – 173; CVOP – 58; MCCC – 36; SVOP – 52; Webb – 8; PCCC – 38; WWRTC – 36.**

**Total # of PCO's**

**JTVCC – 18; SCI – 15; HRYCI – 42; BWCI – 25. PCO's are not housed at Level IV facilities**

**Total # of Psychiatrist/NP visits**

**JTVCC – 274; SCI – 139; HRYCI – 239; BWCI – 138; CVOP – 21; MCCC – 34; SVOP – 100; WEBB – 4; PCCC – 21; WWRTC – 24**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

How many offenders are typically on suicide watch daily?

**Answer**

This answer would depend on the facility.

As reported by the Site for 2011 (average per month) – JTVCC - 76; SCI – 23; HRYCI – 48; and BWCI -30;

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

How many staff are needed to provide suicide watches? What does this staff do when there is no one on suicide watch?

**Answer**

**It is recommended that there be a minimum of two F/T observers at each site for each shift. There should also be P/T observers and PRN observers to assist when there are Level I PCO inmates. The recommended staffing is in Appendix E. In addition there should be a pool of PRN observers to cover call outs and vacation. When observers are not observing they should be assisting the administrative assistant with filing, data entry, transporting charts etc.**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

How many licensed mental health providers are needed to be assigned on Saturday and Sundays on the day shift as well as overlapping shifts to provide coverage until 8:00 p.m. Monday-Friday?

**Answer**

**Saturday and Sunday usually has one licensed staff on the day time shift. Overlapping shifts are usually covered by staff taking turns coming in later one day a week and staying until 8:00pm.**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

Are the current mental health, sex offender and substance abuse employees covered under a collective bargaining agreement? If so, please provide a copy of the most recently executed agreement covering these employees.

**Answer**

**No, they are not covered under a collective bargaining agreement.**

**Question**

**Page 36- Section C. Standards – Paragraph 23**

“The proposal must be consistent with Department of Technology and Information Requirements”

Where can vendors find the Department of Technology and Information Requirements, and which sections specifically apply to videoconferencing?

Specifically where within this site can vendors find policies or requirements about videoconferencing?

<http://dti.delaware.gov/information/standards-policies.shtml>

Website for DDOC policies.

**Answer**

**<http://www.doc.delaware.gov/information/policyManual6.shtml>**

**Question**

**2. Page 37 – Section C. Standards – Paragraph 23**

“The Vendor is encouraged to include a severable proposal for enhanced state-wide Tele-psychiatry capability and usage...”

What is meant by a “severable proposal” in this context?

**Answer**

**“Several proposal” in this context means a proposal regarding telepsychiatry that is separately priced as an “add on” service package that may either be selected or rejected at the sole discretion of DOC during the contract negotiation**

**Question**

Could a separate contract be negotiated and awarded just for telepsychiatry?

**Answer**

**While DOC's 2010 RFP permitted "a la carte" proposal, the present RFP seeks a vendor to provide all of the services listed in the RFP. If you are a vendor that specializes in one area it is recommended that you consider teaming with another vendor to provide a complete proposal. Incomplete proposals are subject to rejection for non-responsiveness.**

**Question**

Would only the winning prime contractor be eligible for this severable telepsychiatry contract?

**Answer**

**Yes, if that option is selected at the sole discretion of DOC.**

**Question**

What is meant by "enhanced state-wide Tele-psychiatry capability and usage?"

**Answer**

**Enhanced state-wide Tele-psychiatry capability refers to Tele-psychiatry to all of DDOC facilities.**

**Question**

Would proposals be welcomed that offer models of telepsychiatry programs that extend collaboration and psychiatric care outside of DOC facilities and into the larger community of Delaware's inpatient and outpatient health care system?

**Answer**

**Yes**

**Question**

If yes, what would be the funding mechanism for such proposals and what would be the contracting mechanism for a program that includes (but also extends beyond) the DOC?

**Answer**

**No additional funding mechanism beyond the negotiated fee for services as contemplated by the RFP. If a vendor wishes to subcontract, such subcontracts shall be subject to the requirements of the RFP.**

**Question**

**Page 51 - Section E. 2. General Evaluation Requirements:**

This section asked for information which is not applicable to the scope of services in the current RFP; i.e. admission rates and ALOS to infirmaries and hospitals and chemical dependency withdrawal rates and average lengths of withdrawal periods. Can the DDOC confirm that the Vendor need only respond to the Mental Health hospital admission rates and ALOS?

**Answer**

**Yes, they only need to respond to Mental Health and ALOS**

**Question**

**Page 85 – Appendix C Pricing; Section I.A.:**

Please clarify whether the hourly submitted for each position is to be the actual rate of pay or a loaded rate to include benefits and other costs. If it is to be a loaded rate, please specify which benefits and other costs should be included, e.g. health benefits; paid leave; 401k or pension benefits, payroll taxes paid by the employer; mal-practice coverage; etc.

**Answer**

**Actual rate of pay and benefits packages should be included. All benefit financial information should be included in the proposal submitted.**

**Question**

Should the vendor budget for office furniture, furnishings, computers/IT equipment, etc. in its start-up costs budget?

**Answer**

**Office furniture and computers are provided by the DDOC. The vendor is responsible for copy/scanner/fax machines that can be rented or purchased. The vendor is also responsible for their telephone usage bill.**

**Question**

Is the Vendor responsible for facility costs such as space (rent, utilities, etc.)?

**Answer**

**The vendor does not pay for space in the facilities. The vendor may find it necessary to acquire additional office space other than in the facilities. The costs for such additional office space shall be borne entirely by the vendor.**

**Question**

In regards to Appendix E; Recommended MH Staffing

Does this recommended staffing include designated sex offender treatment staff?

**Answer**

**The Appendix E staffing is mental health staffing only. Sex offender staff is separate.**

**Question**

How many providers are currently designated as sex offender treatment staff?

**Answer**

**There are presently 3 staff providing sex offender programming with the present vendor**

**Question**

**RFP Section number:** E (Required Information) & J (Insurance)

**Paragraph number:** E.1 & J.3

**Page number:** 50

**Text of passage being questioned:** Professional Liability minimum limit of \$5,000,000

Under section E the limit is listed as \$5,000,000 but in section J it is listed as \$3,000,000/\$5,000,000. Our primary professional insurance policy has a limit of \$1,000,000/\$3,000,000 per insured. We would ask that our limits, which are considered to be industry standard, suffice the state's requirements.

**Answer**

**The requirements with regards to Insurance and Bond will not be modified.**

**Question**

**RFP Section number:** H (Bonds & Insurance Company Qualifications)

**Paragraph number:** H

**Page number:** 72

**Text of passage being questioned:** Insurance must be issued by companies which are A rated or higher by AM Best & CO, have a record of successful continuous operation, are licensed, admitted and authorized to do business in the state of Delaware

Our primary Professional Liability and General Liability policies are both considered to be non-admitted. We chose to structure our policies this way so our underwriter could be more flexible in terms and conditions. Due to the nature of our industry it is difficult to find an insurance carrier who will write an admitted policy with the terms and conditions we require. In both cases we are with A rated carriers by AM Best.

**Answer**

**The requirements with regards to Insurance and Bond will not be modified.**

**Question**

**RFP Section number:** H (Bonds & Insurance Company Qualifications)

**Paragraph number:** H

**RFP Section number:** H (Bonds & Insurance Company Qualifications)

**Paragraph number:** H

**Page number:** 73

**Text of passage being questioned:** The insurance policies must provide 30 days advance written notice of cancellation, termination or failure to renew any policy.

We would ask that the state allow the contractor to commit to this notice of cancellation. It is no longer industry standard for the insurance companies themselves to provide this notice.

**Answer**

**The requirements with regards to Insurance and Bond will not be modified.**

**Question**

**RFP Section number:** I

**Paragraph number:** I

**Page number:** 25

**Text of passage being questioned:** Pharmaceutical System

This RFP requirement references a pharmaceutical system; however, the RFP does not include a pharmacy component. Please advise if the mental health vendor is to provide this system?

**Answer**

**No, the mental health provider is not responsible for the pharmaceutical system.**

**Question**

**RFP Section number:** Appendix D

**Paragraph number:** Appendix D

**Page number:** 87-100

**Text of passage being questioned:** Staffing Patterns for Substance Abuse Programs

Please clarify the staffing levels for each of the programs. The schedule hours are 12 hours on weekends and 13 hours during the week. Do each of the positions listed work eight hours and overlap coverage? If not, please clarify how many hours each position works on each day.

**Answer**

**Yes. For sites that require staffing for more than 8 hours, there are generally 2 shifts, i.e., 8:00 am to 4:30 pm and 11:30 am to 8:00 pm. A full substance abuse staff shift is considered to be 8 ½ hours, with a ½ hour lunch included in that 8 ½ hours. Vendors may be flexible in how they cover a site as long as they meet the mandatory hours per day for staff coverage and required programming for that site.**

**Question**

**RFP Section number:** Appendix E

**Paragraph number:** Appendix E

**Page number:** 101-104

**Text of passage being questioned:** Staffing Patterns for Mental Health Department

Please provide the actual hours per week each of the part time and PRN positions work for each of the facility groupings provided. Please provide a schedule for each of the facilities that details the hours by position and by shift so that vendors can determine current staffing patterns for evening and weekend coverage.

**Answer**

**Depending on the position part time hours vary. For example, Part Time hours for an observer that is working weekend would be between 18 and 24 hours but can increase if they are covering for a call off. Part time clinicians vary from 24 to 32 hours per week depending on the needs of the site. An estimated schedule of P/T and PRN has been added to Appendix E.**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

What is the total mental health population served at each facility by the mental health staff?

**Answer**

**This question was answered previously. Answer provided:**

**MH Programs: 1, 468 the average number of offenders on MH Caseload per month for all sites together for 2011**

**HRYCI: 257**

**PCCC: 31**

**WCCC: 9**

**BWCI: 175**

**HDPWTF: 40**

**JTVCC: 499**

**CVOP: 57**

**MCCC: 36**

**SCI: 268**

**SCCC/SVOP: 96**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

Can like programs be consolidated under one Program Director and one Administrative Assistant. For example, can the Key North, 6 for 1 and YCOP program at Henry Young C.I. share a single Program Director and single Administrative Assistant? Same question for the CREST Program, the programs at Baylor Women's, Sussex etc.

**Answer**

**Vendors can propose that smaller programs share a position, such as Director or Administrative Assistant, with BCHS approval. Example: There is currently 1 Program Director and 1 Administrative Assistant that cover both Crest/Aftercare North for Men and Crest/Aftercare North for Women, with a Clinical Supervisor at each site. Other sites in Kent and Sussex Counties share Director and Administrative Assistant positions. Larger programs or programs with high offender turnover, such as Key North and 6 For 1, should have their own Director. Currently, Key North, 6 For 1 and YCOP have their own Directors; Key North has 1 full-time Administrative Assistant while 6 For 1 and YCOP Administrative Assistant positions are part-time.**

**Question**

**RFP Section number:** N/A

**Paragraph number:** N/A

**Page number:** N/A

**Text of passage being questioned:** N/A

**Question:** Clarification is needed on credentials for positions such as counselors, observers, clinical supervisors, clinicians, activity technicians, etc.

**Answer**

**There is a difference between counselors and clinicians. Counselors usually work in substance abuse and clinicians are licensed mental health clinicians.**

**Mental Health Staff Credentials are as Follows:**

**Psychiatrist – Licensed in the state of Delaware**

**Psychologist – licensed in the state of Delaware**

**Clinicians – Licensed LPCMH or LCSW in the state of Delaware**

**Clinical Supervisors – For mental health are also LPCMH or LCSW with significant experience in supervising licensed clinical staff.**

**Activity Technicians – Should have a Bachelors Degree in a related field and either certified as an activity technician or working on certification.**

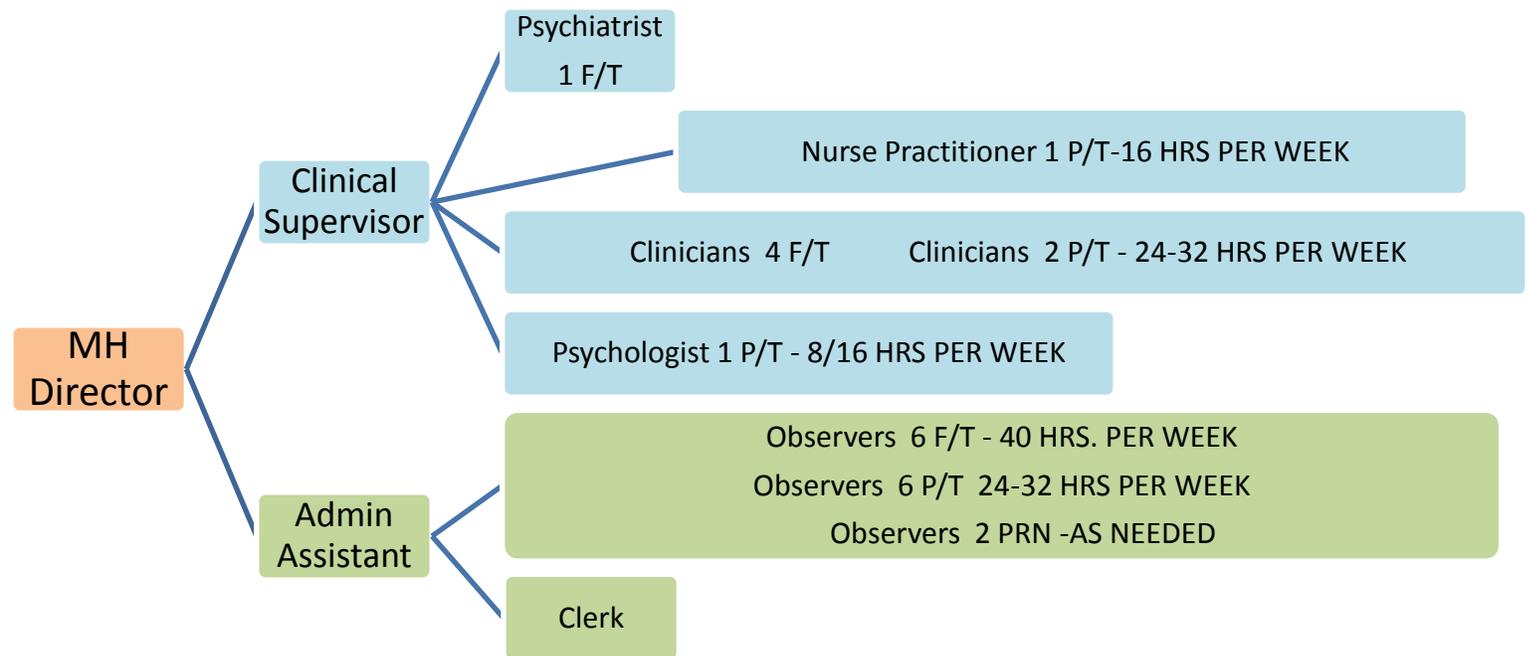
**Observers – are high school graduates with preferably some college or experience and trained by the vendor to provide observation of PCO inmates.**

# APPENDIX E

## UPDATED ORGANIZATIONAL CHART BWCI, WTC, PLUMMER, WEB AND HRYCI

APRIL 2012

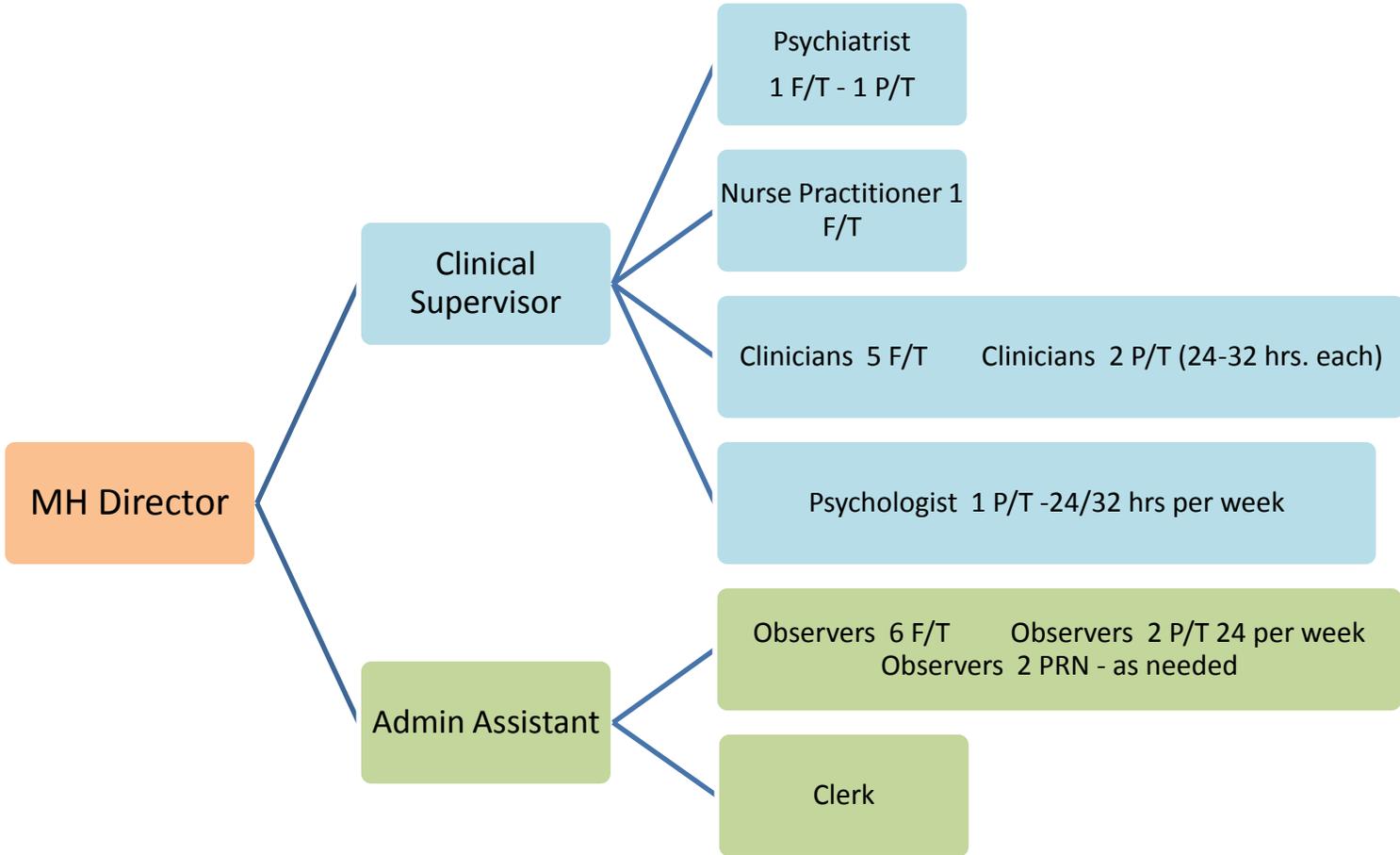
BWCI - WTC - PLUMMER - WEB MENTAL HEALTH DEPARTMENT



F/T = FULL TIME  
P/T = PART-TIME (16-20  
HRS)  
PRN = AS NEEDED

TIME 24-32 HRS PER WEEK  
FOR CALL OFF AND VACATION TIME

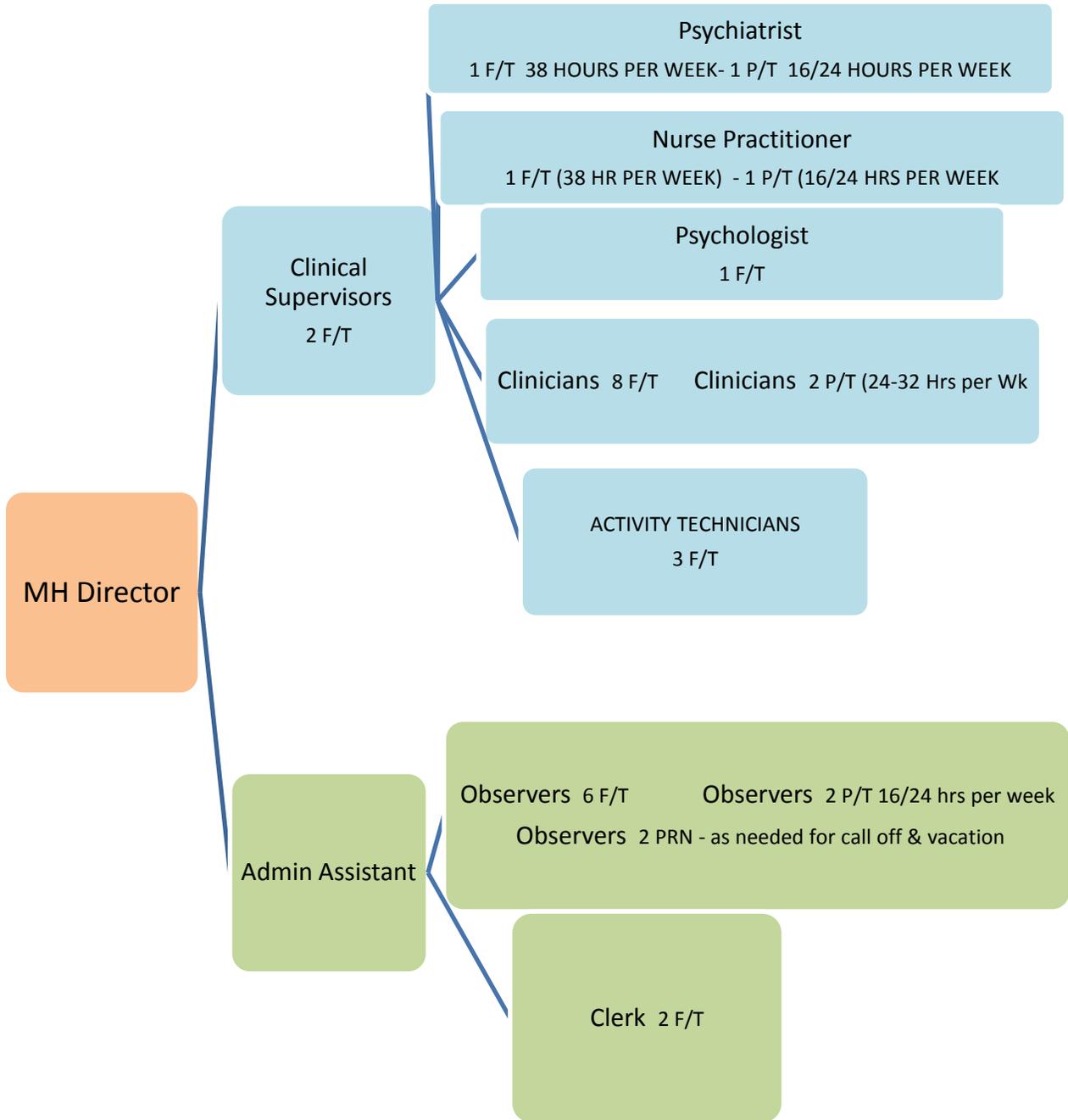
# HRYCI MENTAL HEALTH DEPARTMENT



F/T = FULL TIME  
P/T = PART TIME  
PRN = AS NEEDED

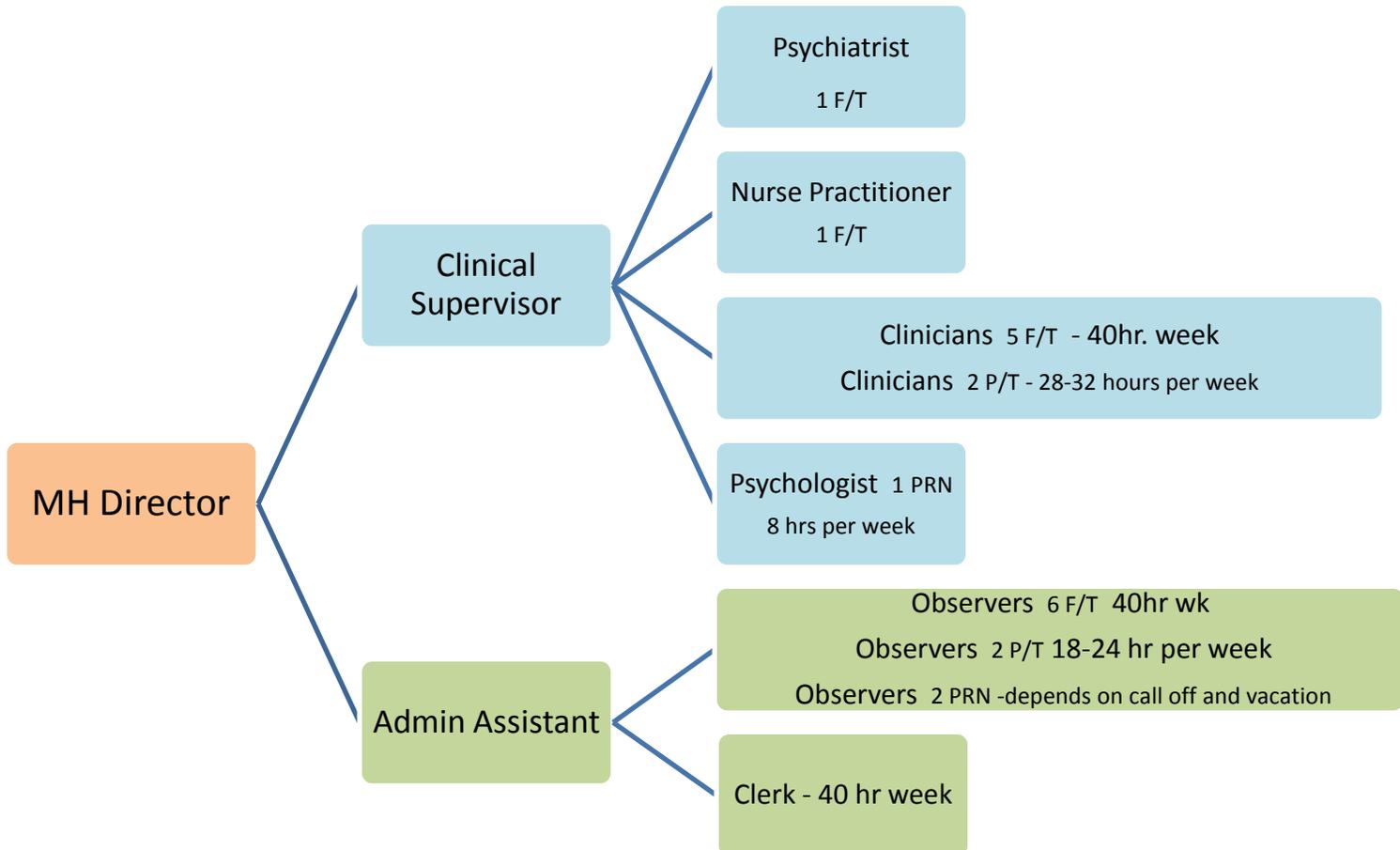
For Call offs and vacation  
time

# JTVCC-MORRIS-CVOP



F/T = FULL TIME  
P/T = PART TIME  
PRN = AS NEEDED

## SCI / SCCC MENTAL HEALTH DEPARTMENT



\* This is an estimated staffing needs

F/T = FULL TIME

P/T = PART TIME

PRN = AS NEEDED

**Question**

**RFP B.2.h.; page 7** – in regards to training for DDOC and medical staff

Can you outline how much training is being provided for the medical and DDOC staff by the current mental health vendor?

**Answer**

**At the present time the current vendor has provided Suicide prevention Training and Trauma Informed Care to medical and DOC staff. Additional training responsibility will be expected by the vendor that includes mental health awareness, Co-Occurring disorders, and trauma informed care.**

**Question**

Can a copy of the current mental health training curricula be provided?

**Answer**

**Vendor curriculum not available. DDOC Suicide Prevention Training attached.**

**Question**

**RFP Suicide Prevention; page 34** - in regards to PCO watches

What level of provider is currently responsible for PCO watches?

**Answer:**

**Clerk-Observers are responsible for PCO watch and are employed by the vendor.**

**Question**

Is there data available regarding the average number of offenders on PCO watch by facility?

**Answer**

**As reported by the Site for 2011 (average per month) – JTVCC - 76; SCI – 23; HRYCI – 48; and BWCI -30**

**Question**

Where is telepsychiatry currently being conducted?

**Answer**

**Telepsychiatry is not being implemented by the current vendor.**

**Question**

What telehealth equipment exists currently in DDOC facilities?

**Answer**

**There is currently an interactive monitor system for tele health at SCI and Women’s work release. They have not been used in two years.**

**Question**

How many crisis negotiation teams are there currently in the DDOC?

**Answer**

**There are four crisis negotiation teams, one located at each Level 5 facility.**

**Question**

What is the average stay of a sex offender in the doc? Is it consistent with the overview provided for the general population at the bidder's conference?

**Answer**

**The average is between 1-5 years. The DOC would like treatment to be focused on those being released within three years and flexible enough to address offenders who are serving 6 months to a year.**

**Question**

The RFP notes that the minimum requirement of sex offender treatment calls for three (3) 90 minute groups, co-facilitated, to be held at each of the four level 5 institutions.

What is the expected frequency for each weekly group, once per week, twice weekly?

**Answer**

**Frequency is one time per week per group.**

**Question**

The RFP states that the vendor will also be responsible for providing groups at all level 4 institutions.

Are these resources for level 4 institutions just those not currently being utilized in level 5 institutions or additional resources?

**Answer**

**We are not sure we understand the question. With that said, Level 4 and Level 5 facilities are separate treatment services and have distinct separate requirements. However, there is no requirement that clinicians assigned to Level 5 facilities cannot also work at Level 4 facilities.**

**Question**

If additional resources, how many groups are expected to be facilitated in each level 4 institutions?

**Answer**

**Presently, we are estimating one group per week for each Level 4 facility.**

**Question**

Are comprehensive sex offender evaluations expected on all incarcerated sex offenders or just those who agree to enter treatment?

**Answer**

**A comprehensive sex offender evaluation would be required for all those in sex offender treatment groups and any offenders in our custody who are court ordered to a sex offender evaluation.**

**Question**

While the RFP does not mention the use of polygraphs as part of the treatment requirements, the state's sex offender management board supports their use as part of the treatment process. Can they be used as part of the institution treatment program?

**Answer**

**Yes, polygraph testing can be used as part of the treatment process for sentenced offenders. We would have to work out the logistic with each institution**

**Question**

The RFP states that vendor must retain counselors that meet SOMB qualifications and certified to conduct an ABEL assessment. While we will look for available local providers who meet these standards, in the event we cannot find them, will the vendor be given time to certify our own staff under the SOMB?

**Answer**

**If the vendor does not have a counselor certified in administering the ABEL, the vendor will be given time to certify their staff. From past experience, the procedure does not take long to complete.**

**Question**

**RFP Sec. 2, Paragraph #1, page 59** – A primary Vendor may not participate in more than one proposal in any form. Sub-contracting Vendors may participate in multiple joint venture proposals. Is it possible for a primary vendor to bid on the substance abuse treatment and DUI services only?

**Answer**

**While the DOC's 2010 RFP permitted "a la carte" proposal, the present RFP seeks a vendor to provide all of the services listed in the RFP. If you are a vendor that specializes in one area it is recommended that you consider teaming with another vendor to provide a complete proposal. Incomplete proposals are subject to rejection for non-responsiveness.**

**Question**

**RFP Appendix B, 4<sup>th</sup> Line, page 82** – Under Mental Health: CPR: staff maintain CPR certification. Are substance abuse treatment staff also required to be CPR trained/certified? If so, who is responsible for providing the training?

**Answer**

**Yes. The DDOC provides CPR training to all vendor staff.**

**Question**

**RFP Appendix D, page 87-100** – Sample Staffing Patterns. Does the Department prefer or require that these staffing patterns be maintained as shown?

**Answer**

**These are generally minimum requirements.**

**Question**

**Pre-Bid Meeting Questions, page 3** – The DUI Program is currently in the developmental stage and is not scheduled to open until sometime in 2013. Should we price our DUI services for six months in the first year?

**Answer**

**We anticipate starting the DUI program around 01/01/13. However, the hiring process for DUI Program staff will need to begin prior to the start of the program.**

**Question**

**RFP Sec. m, Paragraph #2, page 75** – The DDOC will require a payment schedule based on defined and measurable milestones. Payments for services will not be made in advance of work performed. What method of reimbursement will be used under this contact?

**Answer**

**Payments are not made in advance. The vendor submits an invoice at the end of each month to BCHS Accounting. The BCHS issues a payment check monthly.**

**Question**

**Pre-Bid Meeting Questions** – At the pre-bid meeting, we were told that \$300,000 is allocated to the YCOP and the majority of this funding is designated for mental health services. According to the sample staffing pattern provided for substance abuse treatment at the YCOP in Appendix D, the majority of this funding would be needed for substance abuse staff salaries. Please clarify.

**Answer**

**YCOP utilizes both Substance Abuse and Mental Health staff. However, it is under the category of Substance Abuse for staffing, supervision, etc.**

**Question**

**Pre-Bid Meeting Questions** – \$4.8 million in funding was identified in the PowerPoint presentation. Does this include DUI services and/or YCOP?

**Answer**

**Yes.**

**Question**

**Will the sex offender contractor be allowed access to the official criminal records at Central Administration (currently not allowed) for evaluation and treatment purposes? To be a valid evaluation, an accurate review of the official records is required.**

**Answer**

**The sex offender treatment provider will be able to access the DOC six point file that includes sentencing information, presentence reports, treatment notes, and other case management data.**

**Question**

Can the sex offender evaluators/therapists get DELJIS training and access? (currently not allowed)

**Answer**

**The vendor may have access to review DELJIS records after completing training. They will not be given access to the system itself.**

**Question**

Can the vendor get access to the official files at EVERY Level V and IV? (some allow, some do not)

**Answer**

**The Sex Offender Treatment Provider should have access to both Level 4 and Level 5 offender file when conducting and evaluation of treatment.**

**Question**

Will victim statements be provided for more effective treatment and evaluations?

**Answer**

**When available, the sex offender provider may have access to the presentence report which includes a victim statement and the official police report.**

**Question**

Please be clear, the last answer regarding bidding on just the sex offender portion of the work was still vague. Can or cannot a contractor bid solely on the sex offender portion (without partnering) of the RFP?

**Answer**

**While DOC's 2010 RFP permitted "a la carte" proposal, the present RFP seeks a vendor to provide all of the services listed in the RFP. If you are a vendor that specializes in one area it is recommended that you consider teaming with another vendor to provide a complete proposal. Incomplete proposals are subject to rejection for non-responsiveness.**

**Question**

Will timelines of implementation be allowed in a vendor's proposal?

**Answer**

**Yes, agreed upon timelines will be allowed.**

**Question**

Are timelines on DOC be imposed upon the contractor with an expansion of the work required?

**Answer**

Yes.

**Question**

How many level IV institutions are to be offered sex offender therapy? Please specifically name all the level IV's that a sex offender group is expected to be conducted.

**Answer**

**The Level IV facilities that will be receiving sex offender programming are:**

- Plummer Community Correctional Center**
- Webb Community Correctional Center**
- Morris Community Correctional Center**
- Sussex Community Correctional Center**
- Hazel D. Plant Women's Correctional Center**

**Question**

Can addresses and phone numbers of those present at the pre-bid meeting be provided so partnerships be facilitated?

**Answer**

**Pre-Bid attendance is posted on the [bids.delaware.gov](http://bids.delaware.gov) website. Addresses and phone numbers will not be provided by DDOC.**

# Delaware Department of Correction

## Suicide Intervention and Prevention

PRESENTER: Vinnie Fabber, LPC, NBCC, CHCC  
Treatment Services Administrator

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After completing this training you  
will be able to:

- Explain the extent of the suicide problem nationally in correctional facilities.
- Name two obstacles to preventing suicides in a correctional environment.
- Identify several factors in a pro-active stance toward neutralizing litigation.
- Outline at least five myths and accompanying facts about suicide.
- List at least five characteristics in a “typical profile” of inmates who committed suicide as documented in national jail suicide research and compare to Delaware.

continued.....

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- Name at least four situational factors which can have an impact on suicidal behavior.
- List at least six periods of high risk for suicides occurring in jails.
- Name at least 10 signs and symptoms of potentially suicidal behavior in inmates.
- Identify at least eight signs and symptoms of depression.
- Outline at least three symptoms of agitation.
- Explain the difference between a low risk and high risk suicidal inmate.
- Explain the recommended system for housing both low and high risk suicidal inmates.

continued.....

- 
- Explain the recommended system for supervising both low risk and high risk suicidal inmates.
  - Name at least 10 of the 26 principles of good discipline and inmate management which can have an impact on suicidal prevention.
  - List at least three bridges to communicating with suicidal inmates.
  - List at least three barriers to communicating with suicidal inmates.
  - Describe two critical factors in dealing with manipulative inmates.
  - Identify at least two risk factors present in one of the case studies discussed.

continued.....

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- Identify three key components of the DE DOC suicide policy.
- Identify the three levels of housing used for inmates on suicide watch.

---

## 1. SUICIDE: A Leading Cause of Death in Prisons and Jails

- Third leading cause of death in U.S. prisons and 2<sup>nd</sup> in jails.
- High in jails due to the high volume of inmates who pass through.
- Unacceptable high number of premature deaths nationally.

## B. Overcoming Obstacles to Prevention

- Attitudes impede prevention locally and universally.
  - Local attitudes:
    - “We did everything we could to prevent this death, but he showed no signs of suicidal behavior;”
    - “There’s no way you can prevent suicides unless you have someone sitting watching the prisoner all the time, and no one can afford to be a baby-sitter;”
    - “We didn’t consider him suicidal, he was simply being manipulative and I guess it just went to far;”
    - “We aren’t mind readers not trained to be psychiatrists;”
    - “If someone really wants to kill themselves, there’s generally nothing you can do about it;”
    - “Suicide prevention is a medical problem...it’s a mental health problem....it’s not our problem.”
- 

- Universal Attitudes:
    - “Statistically speaking, suicide in custody is a rare phenomenon, and rare phenomena are notoriously difficult to forecast due to their low base rate. We cannot predict suicide because social scientists are not fully aware of the casual variables involving suicide;”
    - “Demographically profiles of custodial suicide victims are of little value for prediction because they often mirror the characteristics of typical jail inmates;”
    - “Even those skilled mental health professionals, who have the time for extensive personal interaction with troubled individuals, either cannot forecast suicide or are unable to prevent patient suicide even if it had been somewhat anticipated;”
    - “Jail suicides are extremely difficult to predict due to their spontaneous nature.”
-

## C. Many Correctional Suicides Can Be Prevented

- Liability related to successful attempts.
  - Establishing a “pro-active” prevention policy.
  - *Canton v. Harris – “the inadequacy of police training may serve as a basis for Section 1983 liability only where failure to train in a relevant respect amounts to a deliberated indifference to the constitutional rights of person with whom the police come into contact.”*
  - Equip correctional staff , mental health/medical personnel with basic understanding of correctional suicide behavior.
- 

## 2. Facts and Fiction of Suicide

**MYTH**: People who make suicidal statements or threaten suicide don't commit suicide.

- **FACT**: Most people who commit suicide have either made direct or indirect statements indicating their suicidal intentions.

**MYTH**: Suicide happen suddenly and without warning.

- **FACT**: Most suicidal acts represent a carefully thought out strategy for coping with various personal problems.
-

**MYTH**: People who attempt suicide have gotten it out of their systems and will not attempt it again.

- **FACT**: Any individual with a history of one or more prior suicide attempts is at much greater risk than those who have never made an attempt.

**MYTH**: Suicidal people are intent on dying.

- **FACT**: Most suicidal people have mixed feelings about killing themselves. They are ambivalent about living, not intent on dying, and most suicidal people want to be saved.

---

**MYTH**: Asking about and probing inmates about suicidal thoughts or actions will cause them to kill themselves.

- **FACT**: You cannot make someone suicidal when you show your interest in their welfare by discussing the possibility of suicide.

**MYTH**: All suicidal individuals are mentally ill.

- **FACT**: Although the suicidal person is extremely unhappy, he is not necessarily mentally ill.
-

**MYTH**: Inmates who are really suicidal can be easily distinguished from those who hurt themselves but are just being manipulative.

- **FACT**: Manipulative goals as a motive for self-injury are not useful in distinguishing more lethal attempts from less lethal attempts.

**MYTH**: If someone really wants to kill him/herself, there's generally nothing we can do about it.

- **FACT**: As will be shown throughout this training session, often, correctional suicides can be prevented.

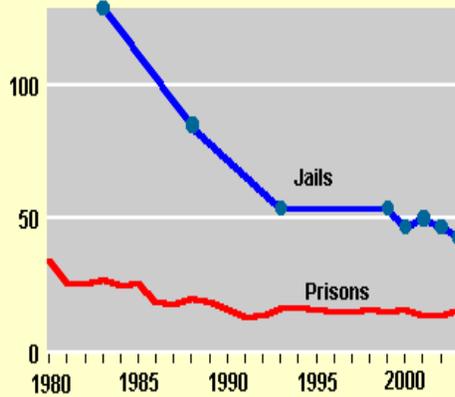
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### 3. National and Local Prison and Jail Suicide Research

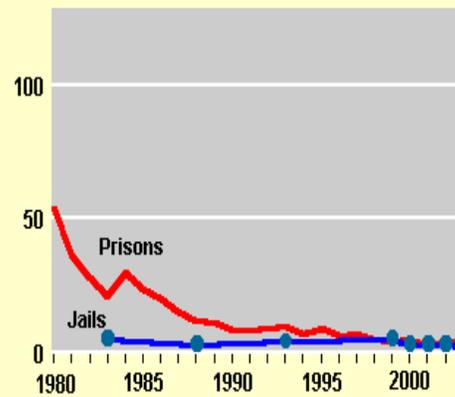
- In 1983 suicide accounted for the majority of jail deaths (56%), but by 2002, the most common cause of jail deaths was natural causes, including AIDS (52%), well ahead of suicides (32%).
- Prison suicide rates showed wide variation at the State level.
- In most State prison systems, suicides were rare events.

# Suicide and Homicide Rate

**Suicide rate, 1980-2003**  
Suicides per 100,000 inmates



**Homicide rate, 1980-2003**  
Homicides per 100,000 inmates



**Table 1. State prison jurisdictions: Number of prisoner deaths, suicides, and homicides, and mortality rates, per 100,000 prisoners in custody, 2001-02**

Region and jurisdiction	Number of prisoner deaths, 2001-02			Average annual mortality rate (2001-02) per 100,000 prisoners held at midyear		
	All causes	Suicide	Homicide	All causes	Suicide	Homicide
<b>U.S. total*</b>	5,815	337	87	244	14	4
<b>Northeast</b>	897	46	0	257	13	0
Connecticut	60	9	0	162	24	0
Maine	13	1	0	370	28	0
Massachusetts	49	3	0	239	15	0
New Hampshire	11	0	0	224	0	0
New Jersey	129	3	0	225	0	0
New York	360	21	0	264	15	0
Pennsylvania	248	16	0	327	28	0
Rhode Island	11	2	0	155	28	0
Vermont	6	1	0	217	36	0
<b>Midwest</b>	1,057	77	11	221	16	0
Illinois	158	20	2	178	22	0
Indiana	97	6	3	246	15	0
Iowa	20	3	0	123	18	0
Kansas	43	4	0	248	23	0
Michigan	227	11	1	231	11	0
Minnesota	28	2	0	215	15	0
Missouri	122	6	1	210	11	0
Nebraska	15	0	0	190	0	0
North Dakota	4	0	0	192	0	0
Ohio	229	8	2	254	9	0
South Dakota	15	4	0	262	7	0
Wisconsin	99	13	0	245	32	0
<b>South</b>	2,717	121	40	267	12	4
Alabama	172	22	1	342	4	0
Arkansas	73	6	2	322	36	0
Delaware	31	4	0	222	28	0
Florida	365	11	0	251	8	0
Georgia	199	10	4	217	11	4
Kentucky	77	1	1	325	4	4
Louisiana	150	2	0	381	5	0
Maryland	141	13	6	293	27	12
Mississippi	69	2	0	228	7	0
North Carolina	128	6	2	197	12	0
Oklahoma	115	22	4	260	5	0
South Carolina	116	22	3	267	5	0
Tennessee	112	2	0	317	7	0
Texas	804	49	10	273	17	3
Virginia	140	4	1	227	6	0
West Virginia	25	1	0	357	14	0
<b>West</b>	1,154	93	31	213	17	6
Alaska	22	3	0	263	36	0
Arizona	139	6	1	247	11	0
California	625	52	21	198	16	7
Colorado	94	5	2	268	14	6
Hawaii	20	2	0	195	19	0
Idaho	26	3	0	243	28	0
Montana	11	1	0	199	19	0
Nevada	52	3	0	260	15	10
New Mexico	26	4	2	221	34	17
Oregon	57	5	0	259	23	10
Utah	14	4	1	170	48	12
Washington	60	4	2	192	13	6
Wyoming	8	1	0	260	33	0

Note: All mortality rates are calculated based on custody populations for June 30.  
\*Excludes 9 total prisoner deaths reported by the District of Columbia in 2001. None of the 9 deaths was a suicide or homicide. The District of Columbia transferred all prisoner custody operations to the Federal Bureau of Prisons during 2001.

Suicide rates in the Nation's 50 largest jail jurisdictions half that of all other jails.

- Over 3,300 local jails operated by county/municipal jurisdictions nationwide.
- Jails typically house un-sentenced inmates, sentenced w/less than a year or those waiting for transfer to State prison.
- Most every State prisoner has been through a period of jail confinement.
- Mortality rates varied widely among the top 50 jurisdictions.
- Inmate suicides accounted for 17% of all deaths in the 50 largest jurisdiction but were the cause of 41% of the deaths in all other jails.

---

During 2002 the Nation's smallest jails had a suicide rate 5 times that of the largest jails.

- On an average day in 2002, over 40% of the nation's jails housed fewer than 50 inmates, while 2% housed at least 1,500 inmates.
- Rates of inmate suicide are closely related to jail size, smallest facilities reporting the highest rates, largest facilities recorded the lowest rates.

## Males and white inmates had the highest rate of suicide in jails.

- In terms of deaths from all causes, male inmates had a higher death rate than female inmates.
- Gender was a strong factor in suicides, males were 56% more likely to commit suicide than females.
- Inmates age 18-24 were least likely to commit suicide; this rate increased 24% for inmates age 25-34, and 39% for inmates 35-44. The oldest inmates, age 55 and over, had the highest rate among adult inmates.
- Jail inmates were the exception, those under 18 had the highest rate in local jails.

Characteristic	Average annual mortality rate, per 100,000 inmates					
	Local jail inmates, 2000-02			State prison inmates, 2001-02		
	All causes	Suicide	Homicide	All causes	Suicide	Homicide
<b>All inmates</b>	148	48	3	244	14	4
<b>Gender</b>						
Male	150	50	3	251	14	4
Female	130	32	0	140	10	0
<b>Age</b>						
Under 18	138	101	0	52	52	0
18-24	60	38	3	34	14	3
25-34	99	47	2	63	14	3
35-44	179	53	4	182	14	4
45-54	349	52	7	571	13	3
55 or older	694	58	0	2,019	13	4
<b>Race/Hispanic origin</b>						
White, non-Hispanic	219	96	3	327	22	5
Black, non-Hispanic	118	16	3	207	8	2
Hispanic	98	30	3	243	18	7

Note: Jail inmate mortality rates are per 100,000 inmates held, based on average daily population (ADP). Inmate populations of various demographic subgroups are estimates based on the Annual Survey of Jails and the 2002 Survey of Inmates in Local Jails. State prison rates are per 100,000 inmates held in custody on June 30. Prisoner demographic subgroups are estimates based on the June 30 National Prisoner Statistics custody counts and demographic data from the National Corrections Reporting Program.

Black inmates had the lowest suicide and homicide rates in State prisons.

- White inmates had the highest suicide rate of all State prisoners, 22% higher than Hispanics. (Whites were 3 times more likely to commit suicide than Hispanics).
- Black inmates had the lowest suicide rate of all State prisoners.
- Blacks are about a third as likely as whites to commit suicide in State prison and less than half as likely as Hispanics.

---

Violent offenders committed suicide at nearly triple the rate of nonviolent offenders in jails.

- The death rate of violent offenders in local jails was 75% higher than that of nonviolent offenders, but this difference was larger in cases of suicide.
  - The suicide rate of violent jail inmates was nearly triple that of nonviolent offenders.
  - Kidnapping offenders had the highest rate of suicide followed by those inmates held for rape or homicide.
  - Drug offenders were found to have the lowest rate of mortality, particularly suicide.
  - Violent offenders were 5 times more likely to commit suicide than drug offenders, and public-order offenders were more than twice as likely to commit suicide.
-

Drug offenders had the lowest suicide and homicide rates of all State prisoners.

- Compared to violent offenders in local jails, the suicide rate of violent offenders in State prison was much lower.
- Violent offenders in State prisons were more than twice as likely to commit suicide than nonviolent offenders.
- Kidnappers had the highest rate followed by offenders held for homicide and sexual assault.

**Table 5. Average annual State prison inmate mortality rates, by most serious current offense, 2001-02**

Current offense	Number of State prison inmate deaths, 2001-02			Average annual mortality rate, per 100,000 State prison inmates, 2001-02		
	All causes	Suicide	Homicide	All causes	Suicide	Homicide
<b>All offenses</b>	5,824	337	87	244	14	4
<b>Violent offenses</b>	3,691	229	53	312	19	4
Homicide*	1,295	89	16	417	29	5
Kidnaping	151	5	5	454	36	15
Rape	344	14	1	299	12	1
Other sexual assault	803	36	8	523	23	5
Robbery	552	28	11	171	9	3
Assault	485	44	11	217	20	5
<b>Property offenses</b>	904	58	18	184	12	4
Burglary	447	36	9	177	14	4
Larceny/theft	199	10	4	209	10	4
Arson	35	2	2	277	16	16
Fraud	128	6	0	209	10	0
<b>Drug offenses</b>	853	33	11	166	6	2
Possession	278	10	5	224	8	4
Trafficking	485	21	6	188	8	2
<b>Public-order offenses</b>	319	13	4	184	7	2
Weapons	36	2	1	67	4	2
Obstruction of justice	53	2	1	381	14	7
Driving while intoxicated <sup>b</sup>	123	2	0	263	4	0
Violation of parole/probation <sup>c</sup>	32	3	2	194	18	12

Note: All mortality rates were calculated using June 30 custody prisoner counts from the National Prisoner Statistics program and 2002 offense distribution estimates from the National Corrections Reporting Program.  
<sup>a</sup>Includes murder and manslaughter.  
<sup>b</sup>Includes driving while intoxicated and driving under the influence of drugs or alcohol.  
<sup>c</sup>Includes parole or probation violations, escape, AWOL, and flight to avoid prosecution.

Nearly half of jail suicides occurred in the first week of custody.

- Jail suicides were heavily concentrated in the first week spent in custody.
- Almost a quarter of all jail suicides took place either on the date of admission to jail or the following day.
- However, more jail suicides took place after the 60<sup>th</sup> day in jail than in the first two days.
- Frequency slowed after the first week.
- Females spent less than half as much time in jail prior to committing suicide.
- Hispanic inmates spent over twice as long as white inmates, nearly 4 times as long as black inmates prior to committing suicide.

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<u>Time served after admission</u>	<u>Percent of jail inmate suicides, 2000-02</u>
Same day	13.7%
Next day	9.0
2-7 days	24.9
8-14 days	9.6
15-30 days	7.7
31-60 days	10.6
61-180 days	14.0
181 days or more	10.4

- Off all offender groups, public-order offenders spent the shortest time in custody prior to committing suicide, half taking place in the first 3 days.
- Property and drug offenders served a median time of about a week prior to suicide.
- Violent offenders spent the longest time in custody prior to suicide, half after serving three weeks.

## 7% of State Prison suicides took place during the first month.

- In State prison, suicides were less concentrated around admission.
  - Most State prison suicides took place after the inmate's first year of confinement.
  - 33% occurred after the inmate served at least 5 years in prison.
  - Male and Female State prisoners spent almost identical amounts of time in prison before committing suicide.
  - Half of all suicides by white inmates occurred in the first 21 months of custody, blacks 40 months, Hispanics 49 months.
  - Violent State prisoners more time in custody.
  - Drug offenders served at least a year, followed by property and public-order offenders.
- 

At least 80% of suicides in prison and jail occurred in the inmate's cell; time of day not a factor.

- The vast majority of both local jail and State prison inmate suicides took place within the inmate's cell or room.
  - Temporary holding areas were the next most common location for suicide.
  - Common areas such as libraries, recreation areas, cafeterias were the scene of very few suicides.
  - Suicide events in jails and prisons showed very little relationship to the time of day.
-

**Table 6. Time served since admission by jail inmates and State prisoners committing suicide, by selected characteristics**

Characteristic	Median time served since admission*	
	Local jail inmate suicides, 2000-02	State prisoner suicides, 2001-02
All inmates	9 days	30 months
<b>Gender</b>		
Male	10 days	30 months
Female	4	29
<b>Race/Hispanic origin</b>		
White, non-Hispanic	9 days	21 months
Black, non-Hispanic	6	40
Hispanic	23	49
<b>Current offense</b>		
Violent	20 days	45 months
Property	7	10
Drug	8	18
Public-order	3	9

\*The median time served is that length of time at which half of the inmates spent less time in custody, and the other half spent more.

**Table 7. Time of day and location of suicide events in local jails and State prisons**

	Percent of inmate suicides	
	Local jail inmates, 2000-02	State prisoners, 2001-02
<b>Time of day</b>		
Overnight (midnight-6 a.m.)	28.0%	24.7%
Morning (6 a.m.-noon)	19.5	19.9
Afternoon (noon-6 p.m.)	24.1	30.4
Evening (6 p.m.-midnight)	28.4	25.0
<b>Location of suicide event</b>		
Inmate's cell/room	80.8%	86.6%
Temporary holding area	9.6	4.0
Common area <sup>a</sup>	6.1	3.0
Outside of the facility <sup>b</sup>	2.3	3.0
Elsewhere	1.1	3.4
<b>Number of suicides<sup>c</sup></b>	918	337

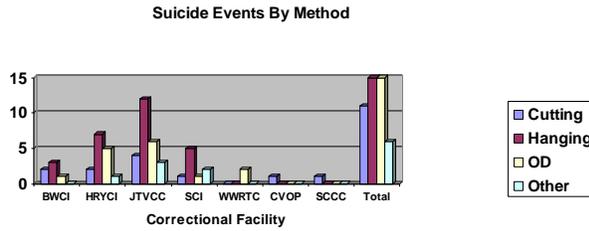
<sup>a</sup>Includes cafeteria, exercise yard, library, day room, recreational area, and workshops.  
<sup>b</sup>Includes inmates on work details or work release, under community supervision by the jail/prison, or in transit to/from the facility.  
<sup>c</sup>Time of day was not reported for 12 jail and 41 prison suicides; location was not reported for 6 jail and 39 prison suicides.

## Suicide in Delaware DOC

- 2000-2006, 12 inmates died of suicide in Delaware Correctional Facilities, 6 sentenced, 6 un-sentenced.
- 7 were white, 4 were black, 1 was Hispanic.
- DE consistent with national data however, national is separated between sentenced & un-sentenced, DE has both.
- Ages ranged from 18-58 with a mean of 34. Three were under age 21, 8 were over 30.
- 7 were serving less than a year, 1 died day of incarceration.

# Delaware -Method

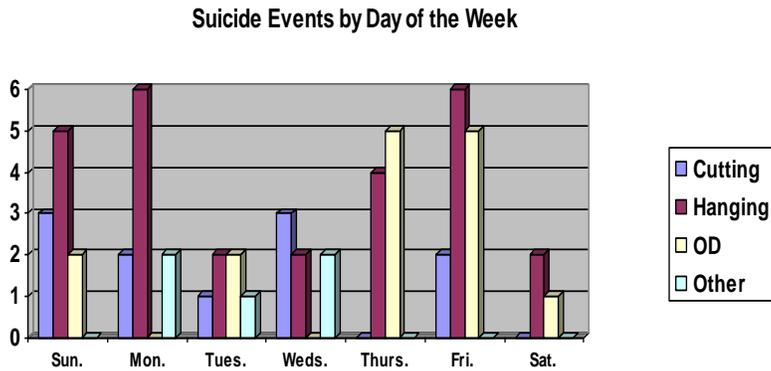
4 Level 5 facilities



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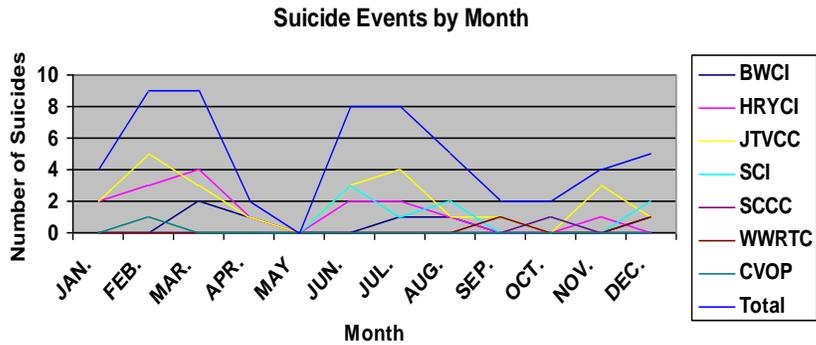
## Day of the Week

- 4 Level 5 facilities



# Suicide Event By Month

- Level 5 & 4 Facilities



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## Suicide Event 2010

- 20 Serious Suicide Attempts Occurred
  - 5 at HRYCI
    - » 3 attempted hanging
    - » 2 attempted overdose
  - 4 at SCI
    - » 2 attempted overdose
    - » 1 attempted hanging
    - » 1 jumped from tier
  - 6 at JTVCC
    - » 3 attempted hanging
    - » 2 attempted overdose
    - » 1 cut wrist
  - 1 at BWC
    - » 1 attempted hanging

# Completed Suicides 2010

- 4 Completed Suicides in 2010
    - 2 JTVCC – within 3 hours of time in PT
      - » Both by hanging from the wall hook
      - » 36 and 30 years of age
      - » Both African American
    - 1 HRYCI – Hanging from bunk – 24 years old
      - » Caucasian
    - 1 SCI Hanging from bunk – 19 years old
      - » Caucasian
- 

# Completed Suicides 2011

- 3 Completed Suicides in 2011
    - 2 at JTVCC
      - 1 Overdose: 45 years of age. Caucasian
      - 1 Hanging: 21 years of age. Caucasian
    - 1 at HRYCI
      - Hanging: 19 years of age. Caucasian
-

## Recommendation

- Training of staff - emphasizing recognizing at-risk population
  - Communication between custody staff and mental health provider
  - Vigilance over weekends and off hours
  - Report concerns immediately
  - Once identified do not leave the inmate alone
- 

### 4. Why Correctional Environments are Conducive to Suicidal Behavior

- A. Authoritarian environment.
  - B. No apparent control over the future, including fear and uncertainty over the legal process.
  - C. Isolation from family, friends and community.
  - D. The shame of incarceration.
  - E. Dehumanizing aspects of incarceration.
  - F. Fears
  - G. Officer and other staff insensitivity to the arrest and incarceration phenomenon; "Victim of the environment."
-

## 5. Pre-disposing Factors of Suicidal Behavior

- A. Recent excessive drinking and/or use of drugs.
  - B. Recent loss of stabilizing resources.
  - C. Severe guilt or shame over the offense.
  - D. Same-sex rape or threat of it.
  - E. Current mental illness.
  - F. Poor health or terminal illness.
  - G. Approaching an emotional breaking point.
  - H. History of self-harm/prior suicide attempts.
- 

## 6. High Risk Suicide Periods

- A. The first 24 hours of confinement.
  - B. Intoxication/withdraw.
  - C. Waiting for trial.
  - D. Sentencing.
  - E. Impending release.
  - F. Holidays.
  - G. Darkness.
  - H. Decreased staff supervision.
  - I. Bad news of any kind.
  - J. Admission of special housing unit.
-

## Situational Risk Factors of Suicidal Behavior

- A. Minor or insignificant arrest history.
- B. Juvenile (anyone under 18, whether or not waived to adult court).
- C. Person with high status in community.
- D. Prior suicide by close family member or loved one.
- E. Previously imprisoned and facing serious charges and long prison term; victims of same sex rape during prior incarceration can be high suicide risks.
- F. Prior suicide attempt in jail or community, particularly of a recent nature; “copycat.” Caution: an attempt or completed suicide can trigger other incidents within the facility. Extra precautions should be taken with vulnerable inmates.

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## 7. Signs and Symptoms of Suicidal Behavior

- A. Expresses or displays, hopelessness or helplessness.
- B. Current depression or paranoia.
- C. Anxiety, particularly on entry into prison or just before release.
- D. Expresses or evidences strong guilt and/or shame over offense.
- E. Talks about or threatens suicide; makes statements that are death-related and/or are of finality nature, e.g., “I’ve had it. I can’t take it anymore.”
- F. Under influence of alcohol/drugs; depression sets in when sobering up; fear of going through withdrawal again.

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- G. Officer's knowledge of previous suicide attempts and/or history of mental illness. Although all prior history is important, recent prior history is a critical sign of potentially suicidal behavior.
- H. Severe agitation or aggressiveness (if the latter occurs when the inmate is sober, it, too, can indicate a suicide problem).
- I. Expresses unusual or great concern over what will happen to them, i.e.; "What will my wife say?" and "What will my employer say?"
- J. Noticeable mood and/or behavior changes.
- K. May act very calm once decision is made to kill self.

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- L. Speaks unrealistically about getting out of jail.
  - M. Has increasing difficulty relating to others.
  - N. Does not effectively deal with present – preoccupied with past.
  - O. Begins packing belongings.
  - P. Start giving away possessions.
  - Q. May try to hurt self: "attention – seeking" gestures. Regardless of how many times an inmate exhibits deliberate self-harm, each gesture must be considered as the first real attempt.
  - R. Paranoid delusions or hallucinations.
-

# Common Signs and Symptoms of Depression:

- A. Feelings of inability to go on – hopelessness or helplessness. (Arresting, booking and supervising officers can pick up on these key signs or symptoms by observing and talking with inmates.)
- B. Extreme sadness and crying.
- C. Withdrawal or silence.
- D. Loss or increase of appetite and/or weight.
- E. Pessimistic attitudes about future.
- F. Insomnia or awakening early; excessive sleeping.
- G. Mood and/or behavior variations.

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- H. Tenseness.
  - I. Lethargy – slowing of movements or non-reactive.
  - J. Loss of self-esteem.
  - K. Loss of interest in people, appearance or activities.
  - L. Excessive self-blaming.
  - M. Strong guilt feelings.
  - N. Difficulty concentrating or thinking.
-

- Agitation frequently precedes suicide; its symptoms are;
    - High Level of tension.
    - Extreme anxiety.
    - Strong emotions:
      - guilt
      - rage
      - wish for revenge
  
  - Psychotic Conditions – Their impact on Suicides
- 

## 8. Housing and Supervising Suicidal Inmates

- A. Low Risk Suicidal Inmates
  - B. High Risk Suicidal Inmates
  - C. Other Issues:
    - 1) All suicidal inmates placed on suicide precautions should be housed in suicide-resistant, protrusion-free cells, that provide full visibility to staff.
    - 2) Inmates placed on suicide precautions will have only those items allowed according to their level of observation as determined by mental health staff. The higher the level the greater the restrictions.
-

- 3) In most stances, constant observation status should not necessitate the need to apply restraints or to utilize forced medications. The use of physical restraints and removal of clothing should be utilized only as a last resort for periods which the inmate is physically engaging in self-destructive behavior.
  - 4) As required by national correctional standards, audio monitoring and/or closed circuit TV should be utilized as a supplement, and never as a substitute for staff observation.
  - 5) Placement on suicide observation does not automatically necessitate placement in an infirmary setting or isolation. Housing locations appropriate for suicide observation may differ from facility to facility and should be identified in advance by security and mental health staff at each facility.
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#### D. Downgrade/discharge from suicide precautions.

- 1) All inmates placed on suicide precautions should be assessed on a daily basis by a qualified mental health professional.
- 2) Multi-disciplinary case management meetings including correctional, mental health, and medical personnel, should be held on a weekly basis. Information from these meetings should be included in assessment of future suicide watch needs.
- 3) Following an assessment, inmates originally placed under constant observation should be stepped down to close observation status for a reasonable period of time prior to being discharge.

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- 4) Following an assessment, inmates on close watch status should be removed from suicide precautions and housed in general population (unless safety or security concerns dictate otherwise).
  - 5) Inmates discharged from suicide precautions should be reevaluated within 24 hours by mental health.
  - 6) The mental status of any given inmate may vary greatly from day-to-day and sometimes from hour-to-hour; therefore, it is imperative that staff have good observational skills and knowledge of signs and symptoms to look for. If any staff member has reason to feel that a person who is already on a precaution level should be moved to higher level of precaution, the medical department should be notified, and the physician and/or psychiatrist again consulted.
- 

## 9. Managing Suicidal Inmates

### A. General Principles

- > Human interaction – supportive staff
- > Golden Rule
- > Appropriate attitude

### B. Characteristics of Professional Correctional Staff

- 1) Exhibits fairness.
- 2) Shows no favoritism.
- 3) Keeps promises.
- 4) Uses authority and power constructively.
- 5) Admits mistakes.
- 6) No put-downs or is not condescending.

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- 7) No washing of dirty linen – no open criticism of staff.
- 8) Answers questions.
- 9) Asks, not always orders that something be done.
- 10) Consistency.
- 11) Talks with us.
- 12) We look up to them.
- 13) Are team workers.
- 14) Self-confident, not arrogant.
- 15) Demonstrates sincerity and honesty.
- 16) Gives credit when credit is due.
- 17) Accepts constructive criticism; is not defensive.

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- 18) They have open minds.
  - 19) Doesn't keep threatening.
  - 20) Leaves personal problems at home.
  - 21) No yelling or swearing.
  - 22) They are patient.
  - 23) Doesn't give up easily.
  - 24) Doesn't preach.
  - 25) They care.
-

## C. Communicating and interacting with suicidal inmates.

### **YOU SHOULD –**

- 1) Listen patiently.
- 2) Trust your own judgment.
- 3) Maintain contact and conversation.
- 4) Try to keep the inmate's sense of the future positive.
- 5) Stay with the suicidal inmate.
- 6) Take all threats seriously and make the immediate referral.

### **YOU SHOULD NOT –**

- 1) Offer solutions or give advice.
- 2) Become angry, judgmental or threatening to the inmate.
- 3) Act sarcastic or make jokes about the situation.
- 4) Placate the inmate by making promises that you can't keep.
- 5) Challenge the inmate to make good on his/her threat.
- 6) Ignore the suicidal risk or threat.

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## D. Dealing with manipulative inmates.

1. Utilize preventative steps to discourage manipulative behavior.
  2. Avoid isolation as a response to manipulative behavior – it could escalate the behavior and result in more serious gestures.
  3. Determining whether an inmate is manipulative or actually suicidal is not your responsibility. You should simply observe and document the behavior.
  4. Refer the inmate to mental health/medical personal for assessment.
  5. Avoid use of the term “manipulative” in written documentation because, once recorded, it will be utilized by other staff involved in the inmate's care.
-

## E. Suicide assessment and mental health referral.

- When you believe an inmate is suicidal, mental health should be contacted immediately.
- Mental health are required to conduct an assessment of the inmate as soon as possible, not to exceed 24 hours from the time the inmate is placed on watch.

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## THE END

- QUESTIONS?
  
  - THANK YOU!
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