



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
245 MCKEE ROAD
DOVER, DELAWARE 19904

TO: All Offerors

FROM: Craig Fetzer
Purchasing Services Administrator

SUBJECT: Addendum to Professional Services Request for Proposal (RFP)
Contract No. DOC20200-KEYCREST

**ADDENDUM #1 – March 16, 2020
CONSOLIDATED QUESTIONS & ANSWERS**

Section: III

Paragraph number: A.1.

Page number: 3

Text of passage being questioned: "Provide Delaware license(s) and/or certification(s) necessary to perform services as identified in the scope of work."

Question: Are you saying that the contractor or subcontractor has or must have a degree or certificate in performing evaluations for the department of corrections or just a certificate or a degree in....What type of certificate or degree would qualify?

Answer: A Master's degree or higher in a field relevant to the scope of work would qualify.

Section: V

Paragraph number: D.1.

Page number: 3

Text of passage being questioned: "The term of the contract between the successful bidder and the State shall be for one (1) year."

Question: Does the State expect the work to take one calendar year stretching over 2 fiscal years?

Answer: DDOC requires the work to be completed within one (1) year from the date the contract is awarded. This may span across fiscal years depending on the effective award date.

Appendix B

Page number: 45

Paragraph number: Bottom two paragraphs

Text of passage being questioned: "The State of Delaware Department of Correction seeks proposals to facilitate an evaluation of the Key/Crest residential treatment program.... Services under this contract shall include an outcome (recidivism/drug use) evaluation of the Key/Crest program."

Question: Is the primary aim of the Evaluation to produce an official baseline or historical recidivism/drug use rate for KEY/CREST? Specifically,

- a. With the move of DOC to new CBT approaches for behavioral health treatment, how will this historical evaluation of Key/Crest outcomes for programming in 2015-2017 be used?

Answer: This program evaluation is not intended to be a program fidelity assessment. While participant interviews are permitted to inform the study, the focus should be on recidivism and sobriety outcomes post-release. The outcomes of the program evaluation (recidivism and sobriety) will serve as a baseline against which future program outcomes will be measured. The working hypothesis is that with the implementation of more CBT-focused program approaches and a redesign of drug treatment programming, an improvement in program outcomes would be observed.

- b. It should be possible to get some recidivism data from public records, assuming we can match SBID numbers from clients and DELJIS; however, we see no good means of getting drug use measures for clients 2 years post program. Given that we cannot find clients and get their self-report or retrospective drug tests, how does the DOC suggest drug use be measured?

Answer: Applicants should suggest methods for recruiting formerly incarcerated program participants to interview them about drug use post-release. If DOC involvement will be needed for that, the extent and nature of DOC assistance should be detailed (for example, sending recruitment letters to last known address on file with DOC for 2015-2017 program completers who were subsequently released). Participation incentives should be included in the budget, if applicable. If post-release probation records will be needed to assess for substance use (positive drug screens, probation violations for substance use, etc.), the applicant should describe those methods and data required to perform such an analysis.

- c. Will DOC provide post program arrest data from DELJIS?

Answer: The applicant should detail the proposal for data needed. DOC will assist the selected evaluator in coordinating data requests with DELJIS for data that DOC cannot supply but which is necessary for the evaluation.

- d. Will DOC allow access to historical drug testing data from probation or from the vendor conducting testing?

Answer: If the applicant desires to include this type of data in the evaluation plan, it is advised to detail that proposal. Negotiation about data elements provision will occur in detail post-award.

Appendix B

Page number: 46

Paragraph number: Bottom paragraph

Text of passage being questioned: "The program evaluation research design must be supportive of the program goals."

Question: Would you provide us with or point us to the official statement of the KEY/Crest program goals?

Answer: See Key/Crest Overview below.

Appendix B

Page number: 46

Paragraph number: Bottom paragraph

Text of passage being questioned: "The research design must include pre and post testing."

Question: How is it possible to do pre and post testing on the treatment cohorts in 2015-2017? Do you mean that outcome data from official records will be the post data and the record data on clients participating will be the pre data?

Or, does DOC anticipate that a current cohort will be used to conduct pre and post test assessments? and does DOC anticipate post-release contact (very expensive), or by pre-post testing does DOC mean a pre-assessment at the beginning of treatment and post-assessment at the end of treatment while still incarcerated?

Answer: Reference to pre and post testing was erroneous in the RFP. Applicants may disregard this reference.

Appendix B

Page number: 47

Paragraph number: paragraph 1

Text of passage being questioned: "Participants who completed Key and/or Crest and were released in 2015, 2016, and 2017 from a Department facility will be the targeted population for quantified recidivism measures. Recidivism outcome measures will include a 2-year post release tracking period" and that "The Evaluator will partner with the Department to obtain criminal offense data (such as arrests, violations of probation, drug screen results, etc.) to be used for outcome measures."

Question: Please explain how this partnership will work? Specifically,

- a. Will a DOC representative be assigned to the project to assist the Evaluators in obtaining access to the required program data from 2015-2017 and the subsequent 2 year outcome data?

Answer: The selected evaluator will work with a designee from DOC to review the data elements being requested and to fashion data requests for data sets that will be furnished by DOC and requested from DELJIS.

- b. Will the Evaluators be provided lists of program participants with an SBID number and any existing process evaluation data and records by participant that may have been collected by the former program Contractor, Connections? Are there other sources of data for relevant participants, and, if so, where will those data come from?

Answer: Program participant lists will be provided with identifying information by DOC.

- c. If participant data are not readily available, will DOC support and facilitate the Evaluators having access to and DACS data? Will these sources include probation information?

Answer: DOC envisions providing data sets to the evaluator once it is determined what data is being requested and what information can be made available. This will include probation information. Access to DACS will be considered post-award if compelling reasons are given for needing limited access for performing the scope of work.

- d. If needed for data access, will DOC facilitate the cooperation of SAC with the Evaluators in obtaining data?

Answer: DOC will negotiate requests to DELJIS for recidivism data for study subjects on behalf and in partnership with the successful bidder.

Appendix B

Page number: 47

Paragraph number: paragraph 2

Text of passage being questioned: "Qualitative research may be conducted on current and past Key/Crest participants."

Question: Does this mean that some interviews are expected with clients? Assuming it does:

- a. What are the expectations in regards to sample size and composition for the interviews, given the limited size of the contract?

Answer: Applicants should describe how interviewing current program participants will enhance the study design. Proposals for sample size and composition of the interviews should be clearly explained by the applicant.

- b. Does the DOC have guidelines or limits on what would be appropriate incentives to offer to respondents of the qualitative interviews, and should the incentives vary for incarcerated versus non incarcerated respondents?

Answer: Incentives for incarcerated individuals may consist of small monetary incentives deposited into an inmate's commissary account, or refreshments served during the interview. Incentives for non-incarcerated respondents can be any variety of things.

- c. Will DOC insure that the Evaluators have access to current clients with the transition to the new treatment Contractor, Centurion?

Answer: Yes, DOC will ensure access to program participants.

- d. If interviews with former clients are requested, will DOC help to provide the means for selection of and contact information for such clients?

Answer: Applicants should detail their proposed plan for contacting former clients. If DOC assistance is needed, that should be detailed. DOC will consider reasonable requests, such as furnishing contact information for program participants who have been released or sending letters to the last known address of released program participants.

General Questions

Question: How many clients will be evaluated?

Answer: During 2015 to 2017 there have been 1,134 clients who have successfully completed the Key Program and 2,609 clients have completed the Crest Program.

Question: What prison sites are the evaluations?

Answer: This is listed on p. 46 of the RFP. The program has run at three Key locations: Key North (HYRCI); Key Village (BWCI); or Key South (SCI); and at four Crest sites: Crest North for Men (PCCC); Crest North for Women (HDP); Crest Primary/Central (MCCC); or Crest South (SCCC).

Question: When does the contract start and finish?

Answer: The start date will be determined as part of executing the contract award. DDOC requires the work to be completed within one (1) year from the date the contract is awarded.

Question: Are you supplying the questions that are to be answered?

Answer: Questions to be addressed in the evaluation plan are addressed on p. 47 of the RFP. The proposal bid should clearly explain the research methods to be utilized to address those questions. The two outcomes the Delaware DDOC deems necessary to measure are participant drug use after completion of the program and discharge from the facility (relapse), and recidivism after prison release. Recidivism measures must include, at a minimum, re-arrest. Measurements of post release drug use must also be identified and collected. The Evaluator should include other outcome variables for additional measurements as they consider necessary for providing as much information about participant outcomes as possible. The Evaluator will partner with the Department to obtain criminal offense data (such as arrests, violations of probation, drug screen results, etc.) to be used for outcome measures. The Department recommends participant interviews, and interview completion incentives to be used by the Evaluator for most optimal participations.

KEY/CREST OVERVIEW

The Key program is a modified therapeutic community (TC), and is the primary program for substance use treatment within Level 5 facilities. Key programs offer treatment to both male and female offenders at respective sites, to encourage and foster gender-responsive and trauma-informed care modalities for offenders with a history of substance use and or drug related criminal histories. The Key program includes a length of stay for a minimum of ten months that includes orientation to treatment and (approx. 30 days) and no less than 9 months of core treatment.

The Crest Program is the secondary portion of continuum to the Key-Crest residential treatment program and is designed to continue to provide substance use treatment for incarcerated offenders at Level 4, who have history of substance use or charges that involve substance use, while focusing on implementation and application of the skills learned while at Key, toward sustaining treatment for reintegration. Much like the Key, the Crest Program is designed as a modified TC, in which the length of stay in treatment includes a minimum of six months.

Residents of the Key-Crest Program are involved in treatment services seven days a week as they are part of a treatment milieu in the TC operation. Full- day program involvement, including semi-private segregation from the general inmate population sets the residential substance use treatment programs apart from the rest of their respective correctional facilities. Successful completion is based on the individual performance, behaviors, and completion of outlined phases for each client.

Key Programs

- There are three Key Programs throughout the state:
 - Key North – HRYCI
 - Key South – SCI
 - Key Village – BWCI
- The Key Programs are considered a Modified Therapeutic Community for sentenced offenders
- Average length of stay is approximately 9 – 10 months (advancement through the program is performance based)
- Services are provided in the form of individual counseling sessions, individual treatment plans and a combination of process and didactic group interactions.
- Core curriculum is comprised of evidenced based Cognitive Behavioral Interventions:
 - University of Cincinnati Cognitive Behavioral Interventions – Core Curriculum CBI-CC
 - Supplemented by:
 - University of Cincinnati Cognitive Behavioral Interventions for Substance Abuse CBI-SA
 - Anger Management (SAMHSA)
 - Seeking Safety
 - SMART Recovery

Crest Programs:

- There are five Crest Programs throughout the state:
 - Crest Primary – formerly at CVOP, recently relocated to MCCC
 - Crest Central – MCCC
 - Crest South – SCCC
 - Crest North/Men – PCCC
 - Crest North/Women – HDP (participants from southern Delaware transfer to SCCC for the final phase of treatment for reintegration to their respective communities)
- The Crest Programs are considered a Modified Therapeutic Community for sentenced offenders with a focus on re-entry to society. Affording opportunities for participants to obtain employment, reestablish relationships and build a foundation for productive citizenship, while employing cognitions and coping skills introduced in the therapeutic process.
- Average length of stay is approximately 6 – 9 months (advancement through the program is performance based)
- Services are provided in the form of individual counseling sessions, individual treatment plans and a combination of process and didactic group interactions.
- Core curriculum is comprised of evidenced based Cognitive Behavioral Interventions:
 - Texas Christian University Institute of Behavioral Research Mapping Interventions (TCU)
 - Supplemented by:
 - University of Cincinnati Cognitive Behavioral Interventions for Offenders Seeking Employment (CBI-EMP)
 - Anger Management (SAMHSA)
 - SMART Recovery