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**Amendment #1 to Request for Proposals (RFP)
DPSCS Inmate Mental Health Care Services
Solicitation No. Q001002014
January 13, 2012**

This Amendment is being issued to amend and clarify certain information contained in the above named RFP. All information contained herein is binding on all Offerors who respond to this RFP. Specific parts of the RFP have been amended. The following changes/additions are listed below; new language has been double underlined and marked in bold (ex. **new language**) and language deleted has been marked with a strikeout (ex. ~~language deleted~~).

1. The Attachment lists found on pages "v" and 108, incorrectly lists Attachment F Instructions for Completing Price Form and Attachment F-1 Price Proposal Form – Mental Health Services. The list should read Attachment F Price Proposal Form. The instructions for completing the Price Proposal Form are found in Section 4.5.5 (see #2 of this Amendment #1 for the corrected subsection from 4.5.7)
2. AMEND 4.5.7 **5** Attachment F is the Offeror's Proposed Price per Contract Year for the first three Contract Years...
3. Attachment B Bid Proposal Affidavit is incorrectly labeled as Attachment A Bid Proposal Affidavit. See corrected Attachment **B** Bid Proposal Affidavit attached to this Amendment #1.
4. AMEND Section 4.4 Tab A Transmittal Letter #3 "Statement that the proposal is in response to **RFP # DPSCS ~~Q0012014~~ Q001002014**, Inmate Mental Health Care Services".
5. AMEND Section 3.10.1.2.6 At minimum, new hire (**within 30 days of hire**) and annual training shall be held in each of the following areas:...
6. AMEND 1.2.56 "**Mental Health Professional**" means a **the following types of** licensed mental health provider whom the Department accepts as qualified to perform a mental health service; ~~typically~~ a Psychiatrist, Mental Health Nurse Practitioner, Psychologist, Psychiatric Nurse, Psychiatric Physicians Assistant, Licensed Practical Nurse (LPN), Licensed Mental Health Counselor, **Licensed Certified Social Workers-Clinical (LCSW-C)** or Registered Nurse (RN). **All Mental Health Professionals shall only work within the scope of their license. (See Section 3.2.5).**

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7. AMEND Section 3.6.3.1 last sentence...(See Attachment O) and the Specialist Staffing Positions in Attachment X (the CCC)).
8. ADD NEW SUBSECTION **3.10.5** TO SECTION 3.10

3.10.5 Before being permitted to work at any Department facility, any Staff (see 1.2.85) that has not previously received any formal orientation instruction must have a minimum of 30 minutes of basic orientation which consists of security (e.g., emergency plans, Inmate movement, basic rules of the Institution) time keeping, etc. Any facility specific regulations may also be provided by the Institution's Administration as applicable. This requirement specifically applies to any Staff that is a Non-Permanent Employee (see 1.2.95), including Per Diem personnel (see 3.6.1.3), personnel that are employed by the Contractor or a subcontractor, or an individual that acts as a subcontractor, consultant or specialist which have not previously worked On-site, that the Contractor seeks to use to maintain required staffing levels due to Staff absences or vacancies, or for any other On-site purpose.

3.10.5.1 The basic orientation training described in 3.10.5 must be taken by Non-Permanent Employees within the first hour of commencement of work activity. Documentation that Non-Permanent Employees have received such training shall be provided as per Section 3.10.4.

3.10.5.2 Any Non-Permanent Employee who has not entered a facility for more than 40 days, must repeat the required basic orientation training. In addition, a Non-Permanent Employee entering a facility where he/she has not worked in the past 40 days, will be required to be oriented on the specific regulations of that facility, if any.

3.10.5.3 As per Section 3.16.2.1, the Contractor must provide a finalized version of this Non-Permanent Employee basic orientation training for review and approval.

9. ADD NEW ITEM **D** TO Section 4.4.Tab D 9 **D. Include an outline, and preferably at least draft content, of the Non-Permanent Employee basic orientation training in accordance with section 3.10.5.**
10. ADD TO SECTION 3.10.1.2 Develop and maintain a comprehensive competency based orientation plan/program for new staff. The orientation program shall include a review of Departmental Policies and Procedures (P & P) and how to access Department P & P manuals, EHR training (See §3.37), HIPAA and Confidentiality training, CPR training, basics of working in a prison setting and a review of the limits of the scope of responsibility; **which at a minimum will include the topics listed in Sections 3.10.1.2.5 and 3.10.1.2.6.**
11. REPLACE SECTION 3.17 WITH THE FOLLOWING

3.17 Emergency **and Critical Incident Response** Psychiatric Care

Emergency situations are defined as situations in which there is imminent danger of severe harm to self, others, or property.

3.17.1 In emergency situations involving Inmates, the Contractor shall provide emergency psychiatric care. Emergency psychiatric care may include talking to the

Inmate to de-escalate the situation and/or ordering emergency medication to ensure the safety of the Inmate or others. If emergency medication is administered, the Inmate shall be moved to a location where there are nurses providing 24 hour care.

3.17.2 Following a Critical Incident (See Section 1.2.96), the Contractor shall provide psychiatric support to Inmates, State employees, employees of any On-site Contractor (e.g. Other Healthcare Contractors, food service, drug testing and various maintenance contractors) and visitors. The Mental Health Professional shall provide emergent psychiatric support to State employees, employees of any other On-site Contractors and visitors as appropriate. Providing Critical Incident support does not imply the establishment of a therapeutic relationship; it is simply support and referring the individual for further mental health treatment as appropriate.

3.17.3 All emergencies and Critical Incidents shall be reported as required in Section 3.32.2.

12. ADD NEW DEFINITION **1.2.96 “Critical Incident” means any incident that disrupts the secure and orderly running of the correctional Facility.**
13. ADD NEW DEFINITION **1.2.97 “Outpatient Services” means mental health services provided to any Inmate who is not in an IMHTU.**
14. ADD NEW DEFINITION **1.2.98 “Critical Results” means that detected levels of the item(s) being tested are such that an intervention is required urgently but not emergently, i.e. the detected level is above the normal range but not so much so as to be considered toxic.**
15. AMEND Section 3.25.4 The Contractor shall deliver psychiatry services to a **64 bed** State run mental health Step Down/ Transition Unit (**32 beds for each of the Step Down and Transition functions**) run by State Mental Health Professionals at Patuxent. **The Contractor’s responsibility in this regard shall consist of seeing each Inmate at a minimum of every 90 days (as per 3.23.4.3) and responding to referrals from State Staff as per Sections 3.22.1.1 and 3.22.3**
16. AMEND Section 3.2.6 The Contractor is responsible for the timely payment of all claims by those providing specialty care to State Inmates pursuant to referral by the Mental Health Professional, ~~and in emergency cases.~~
17. AMEND Section 3.5.2.1 ... The Contractor’s Contract Manager shall notify the Department’s Contract Manager via email every time a federal Inmate has any ~~inpatient Admission~~ **Off-site hospitalization.**
18. ADD SUBSECTION 3.7.1.1 to Section 3.7.1 **3.7.1.1 The Department expects persons in administrative positions to devote sufficient time to complete their associated duties. To the extent the Contractor believes that a particular administrator with valid credentials can both satisfactorily perform his/her administrative duties and perform clinical requirements, with the written permission of the Director of Mental Health Services this individual will be permitted to satisfy clinical hour requirements. However, this permission to allow appropriately credentialed administrators to also**

perform clinical duties may be rescinded by the Director of Mental Health Services any time it is perceived that either administrative or clinical activities are not being properly performed due to the attempt by any individual to perform dual administrative and clinical roles.

19. AMEND Section 3.22.1.1 The Contractor shall primarily provide services to Inmate with SMI and MI diagnosis. The Contractor shall provide services to Inmates with Mental Health (~~MH~~ **MH**) diagnosis upon request of Department Mental Health Staff.
20. AMEND Section 3.22.7.5 All ~~critical laboratory results~~ **laboratory Critical Results** shall be brought to the attention of the Statewide Mental Health Director the same day the results are received. If the **Contractor's** Statewide Mental Health Director is absent the results shall be brought to the attention of the On-call Psychiatrist or Mental Health Nurse Practitioner for that facility. Upon receipt, the Mental Health Professional shall review and make a notation in the EHR regarding those ~~eCritical r~~Results and the plan for care subsequent to the results. Inmates shall be scheduled to review ~~critical lab results~~ **laboratory Critical Results** with a Mental Health Professional within two (2) **days of receipt of those results.**
21. AMEND Section 3.21.1.1.1 The following Mental Health equipment and items are required, at a minimum:
 1. Regional Psychological Evaluation Tests
 2. Software and administrations for scoring of ~~physiological~~ **psychological** evaluations.
22. AMEND Section 3.9.1 The Department will conduct a criminal history check on all prospective employees of the Contractor and subcontractors. To facilitate this process, the Contractor shall obtain and retain documentation regarding the employment screening of all potential employees including those of subcontractors. For each prospective employee, the Contractor shall provide the information noted below to the Warden or designee of the facility at which the employee is expected to be assigned. The Contractor shall obtain where applicable by licensure or Departmental requirement, at a minimum:
 - (1) The employee's social security number, date of birth, fingerprints and any other data which the Department requires to conduct a criminal history check.
 - ~~(2) A criminal history check prior to employment or at any other time it is requested by the Department's Contract Manager or appropriate ACOM. This requirement applies to any potential employee of the Contractor, including a person who was employed by the State, Contractor Staff, or Other Healthcare Contractors that has a gap in employment of over 60 days.~~
 - (2) All medical information required for employees that meet minimal standards of health such as (tuberculosis) TB and Hepatitis C screening.
 - (3) Any screening deemed necessary to assure safety and for the prevention of disease or for cause that relates to drug and alcohol tests in accordance with DPSCS policies.

23. AMEND TAB L #5 First Bullet Three (3) years experience in the delivery of correctional ~~medical~~ mental health care within a correctional system;
24. AMEND Section 3.2.1 The Department has delegated responsibility for the management of the delivery of Inmate mental health care to the DPSCS ~~Deputy Secretary~~ Director ~~for~~ of the Office of Programs and Services and, concomitantly, to Healthcare Administration and Clinical Services.
25. AMEND Section 3.2.11 The Contractor must respond to Custody “Use of Force” (See § 1.2.93) and similar incidents to evaluate and provide mental health treatment for mental health Inmates and State staff, as necessary. Contractor Mental Health Professionals shall not be required to participate in the act of extraction, ~~or in potential forensic issues.~~
26. ADD NEW DEFINITION 1.2.95 “Permanent Employees” are Staff (See 1.2.85) that are anticipated to be employed for more than 30 days and that are expected to work On-site (See Section 1.2.66) as any part of their work assignment. Permanent Employees includes any Staff which typically work in or from an administrative office, including a district, regional or home office, which is expected to make On-site visitations.
- Any Staff that does not fit within the above definition of Permanent Employees shall be considered a “Non-Permanent Employee”.
27. AMEND Section 3.10.3.1, Security orientation and training for up to forty (40) hours within no more than forty (40) days after Contract Commencement for ~~p~~Permanent ~~e~~Employees of the Contractor or subcontractor(s). ~~Permanent employees are individuals anticipated to be employed for more than 30 days. Permanent employees of the Contractor or subcontractor(s) include specialists who may be employees of the Contractor, subcontractor(s) or functioning as an independent subcontractor and who routinely provide On-site (See § 1.2.66) consultant or other recurring Inmate healthcare services.~~
28. REVISED Attachment O – Mental Health Staffing Matrix is attached with this Amendment #1

Attachments: Attachment B- Bid/Proposal Affidavit
Attachment O – REVISED Mental Health Staffing Matrix
Attachment List

Issued and authorized by

<signed>
Patti Tracey
Procurement Officer