



Office of the Administrative Director – Financial Services Department

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Date: May 17, 2022

To: All Interested Providers

From: Terri Gearon, Financial Services Director /s/ Terri Gearon
The Judiciary, State of Hawaii

Subject: **Request for Information for Health & Human Services (103F, HRS) for
The Judiciary, Second Circuit
RFI J24002**

The Judiciary, State of Hawaii issues this Request for Information (RFI) pursuant to Chapter 103F, Hawaii Revised Statutes, to seek information and recommendations from interested providers for the planned purchase of Health and Human Services for The Judiciary, Second Circuit. The following draft service specifications are attached to this RFI for your review:

- 2.1 Adult Substance Abuse Treatment Services
- 2.2 Assessment and Treatment of Adult Sex Offenders
- 2.5 Domestic Violence Intervention Services
- 2.6 Residential Services
- 2.7 Juvenile Sex Offender Treatment Services
- 2.8 Shelter Services
- 2.10 Juvenile Substance Abuse Treatment Services
- 2.12 In-Community Services
- 2.19 Maui Drug Court Services, Adult Substance

Written comments in response to the RFI shall be emailed to the program contact person specified within each service specification.

The deadline for the receipt of comments is 12:00 p.m., HST, on Friday, June 17, 2022.

Input received in response to this RFI may be incorporated into the specifications and be used in a formal Request for Proposals, tentatively scheduled for October 2022.

Note: Participation in this RFI is optional, and is not required to respond to any subsequent procurement announcements. Neither Judiciary nor any interested parties responding has any obligations under this RFI. Contracts resulting from the RFP will be for the periods indicated in the service specifications.

SECTION TWO – SERVICE SPECIFICATIONS

2.0.1 Introduction

A. Background

The Judiciary, State of Hawaii, provides support, intervention, and/or rehabilitative services to juveniles, adults and families through its Adult Client Services (aka Adult Probation Divisions), Juvenile Client and Family Services (aka Family Courts), Children’s Justice Centers, and Drug Courts in each judicial circuit. It also provides mediation services through its Center for Alternative Resolution. In carrying out their goals for these areas, all circuits utilize community resources on a purchase Health and Human Services basis.

The following provides the specifications for organizations wishing to provide services to the Judiciary for the period July 1, 2023 through June 30, 2027. Upon evaluation and acceptance of proposals, when practicable and upon mutual agreement, contracts may be negotiated on a statewide basis, making services available to children, youth, adults and families in all circuits. **The initial contract term will be for the period July 1, 2023 through June 30, 2025, and may be extended for the period July 1, 2025 through June 30, 2027.**

1. Juvenile Services

The Family Courts in Hawaii believe that there is promise in all youth and families who are involved in our system. Beginning with the Juvenile Detention Alternative Initiative (JDAI) in 2009, juvenile justice reform efforts have been underway for several years in Hawaii, using current research and information on best practices for justice involved youth and their families. Holding youth accountable for their actions is important. In doing so, we must also increase community capacity to provide youth opportunities to heal, develop pro-social skills, and build on their strengths.

Research shows the unnecessary use of detention/incarceration to be harmful to youth. Through collaborative community effort there has been a reduction in the use of detention and incarceration for non-violent youth in Hawaii, without an increase in youth crime, demonstrating that community safety has not been compromised. Efforts to create meaningful alternatives to detention are ongoing and continue to be needed.

Most youth in our juvenile justice system are non-violent offenders who are best served in the community. Recent studies have found that youth who do not pose a public safety risk have better outcomes in nonresidential programs using evidence based practices, close to their own neighborhoods, and integrated into generally pro-social groups (U.S Attorney General. National Task Force on Children Exposed to Violence: Rethinking Our Juvenile Justice System, December 2012). By connecting justice involved youth with their communities, while holding them accountable for their behavior, we hope to divert them from deeper involvement in the justice system, and thereby promote better long-term life outcomes. Youth involved in the deeper end of the justice system tend to have poorer outcomes.

The federal Office of Juvenile Justice and Delinquency Prevention (OJJDP) reports a meta-analysis of community-based programs found that effective programs: 1) concentrate on changing behavior and improving prosocial skills, 2) focus on problem solving with both juveniles and their families, 3) have multiple modes of intervention, and 4) are highly structured and intensive.

We know and understand that exposure to violence and trauma is pervasive in the population we serve. Compelling research conducted in the past twenty years informs us that trauma is more prevalent than previously known, and that complex and multiple exposure to traumatic events is closely linked to detrimental medical, psychological, and social outcomes. Research on brain development now reveals that the human brain is not fully developed until a person is in their mid twenties, and that exposure to childhood traumatic violence can delay and derail brain development. Fortunately, youth are resilient and evidence based effective treatments and approaches have been developed. People heal and transformation occurs. In order for this to happen, environments conducive to healing, and people committed to being part of the healing process are needed. The courts cannot do this alone and need the support of our community.

The Judiciary is seeking qualified community providers to be part of our reform efforts, by creating places of healing for youth and families, through a continuum of care, using evidence based practices. Consideration will be given to proposals that reflect an alignment with:

- **JDAI:** Juvenile Detention Alternatives Initiative (JDAI): provides the framework for Hawaii's juvenile justice reform effort. JDAI is driven by a vision that seeks to change the odds for court-involved youth, and increases their chances of growing out of their delinquent behavior and leading productive lives. If juvenile justice reform can improve the life chances of court-involved youth, then we all benefit. Public safety will be

improved, families will remain intact, and fewer tax payer dollars will be spent on secure confinement and corrections. For more information on JDAI go to jdaihelpdesk.org

- **Family Strengthening Youth Development:** Family involvement in juvenile justice is a central principle of Hawaii’s juvenile justice system reform. Research shows that family strengthening programs can curb crime and delinquency, and that family-focused approaches have demonstrated outcomes that are positive and enduring. The family strengthening youth development framework presents an evolution of positive youth development approaches that recognizes the importance of grounding work with youth within the context of family and community. Its basic premises include; the family plays a critical role in youth development and various community resources are needed to assist the family as it endeavors to provide supports and opportunities for its young people. Proposals need to include strategies to outreach, engage, and involve parents/caregivers.
- **Trauma Informed Care:** The Substance Abuse and Mental Health Services Administration (SAMHSA) defines a trauma informed organization as: A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for healing; recognizes the signs and symptoms of trauma in staff, clients, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, practices, and settings.
- **Prison Rape Elimination Act (PREA):** The PREA prohibits sexual violence and abuse in all custodial correctional facilities operated by Federal, State or local governments and their contracted providers of residential services. It also established a set of standards to prevent, reduce, and sanction sexual violence in a custodial and/or residential setting. All organizations providing residential services to court involved youth must demonstrate a commitment to be compliant with the PREA Juvenile Facility Standards. The standards are available at: <https://www.bja.gov/Programs/PREA-JuvenileFacilityStandards.pdf>
- **Motivational Interviewing (MI):** Prospective youth serving agencies should be familiar with and practice MI skills in their interaction with youth. MI is a collaborative, goal-oriented method of communication that pays attention to the language of change. It is designed to strengthen personal motivation and commitment to a specific goal by eliciting and exploring one’s reasons for change within an environment of acceptance and compassion (Miller and Rolnick, 2012). Enhancing behavioral change through MI is vital to our juvenile justice reform efforts. It is recognized as an evidence based practice by the National Institute of

Corrections and SAMHSA. MI is recognized for its ability to lessen resistance, increase offender motivation, and promote positive behavioral change.

- **Lesbian, Gay, Bisexual, Transgender, or Questioning (LGBTQ) Support:** Providers must demonstrate an understanding of the factors contributing to the disproportionate numbers of LGBTQ youth in the system and adopt policies to improve the quality of care provided to these youth. Like all young people, they have the right to be safe and protected. Environments of care must be safe, accepting, and affirming for all youth
- **Cultural and Linguistic Competency:** The extent to which services and treatments are culturally sensitive may determine a youth and family's acceptance or rejection of those services. Culturally sensitive services need to be individually tailored with voice and input from the youth and family. Service providers must be conscious of the dynamics involved when cultures interact and must have strategies to effectively communicate with a diverse client population.
- **Gender Responsive Services:** Prospective providers should demonstrate an understanding of gender responsive principles as it applies to youth they propose to serve. In Hawaii and nationally, there is a growing number of justice involved girls. Proposals should include a description of gender responsive considerations for services that will be provided.
- **Youth Assessment and Screening Instrument (YASI):**

All adjudicated youth are assessed using the Youth Assessment and Screening Instrument (YASI) by the Family Court. Criminogenic risk and need areas assessed include the following domains: Legal History, Family, School, Community and Peers, Substance Abuse, Mental Health, Aggression, Attitudes, Skills, and Employment/Free time. Proposals shall demonstrate applicant's capacity to individualize services based on identified needs. Proposals must include capacity to provide cognitive behavioral interventions to target criminogenic needs identified in the YASI assessment (as appropriate).
- **Commitment to Professional Development:** Prospective providers shall support and demonstrate an understanding of our juvenile justice reform efforts as it relates to the youth we service. Providers shall commit to ensure their staff are provided the necessary training needed to effectively work with our juvenile justice population.

B. Purpose or Need

The Judiciary purchases services in compliance with statutory mandates and orders from the courts. The greater public purpose in obtaining the

services is to: enhance public and victim safety; provide rehabilitative or intervention services to offenders; promote the welfare of families and children by protecting them from physical and psychological harm; and maintain a judicial process that helps to reduce the courts' workload while promoting fairness and prompt action.

Planning activities related to this RFP involved the issuance of Requests for Information (RFI). Tentative specifications and funding allocations were included with the RFIs, and comments and inputs on aspects of the specifications, such as objectives, target group(s), services and costs, were welcomed. Meetings and discussions were also offered. The views of service recipients and community organizations were considered on conditions affecting the achievement of mandated goals.

ADULT CLIENT SERVICES

2.1 SVC SPEC TITLE: Adult Client Services ACSA – Adult Substance Abuse Treatment Services

2.1.1 Introduction

A & B. – (SEE SECTION 2.0.1)

C. Description of the goals of the service

The goals of the requested service are: (1) To provide a comprehensive evidence-based, offender-oriented, continuum of substance abuse treatment services to adults with alcohol/and other drug problems, who are ordered or directed by the court to obtain treatment; and, (2) the goal of treatment will be to assist adult offenders, abusing or addicted to alcohol and/or other drugs with the acquisition and demonstration of effective strategies, skills and knowledge which will result in long-term abstinence and a reduction of their re-offending behaviors. The continuum includes Substance Abuse Assessment; Substance Abuse Education; Pre-Treatment/Motivational Enhancement Services; Outpatient, Intensive Outpatient, Day and Residential Treatment and Therapeutic Living Program treatment modalities.

D. Description of the target population to be served

The target population includes adult offenders and other adults referred to the Judiciary, age 18 or older, male and female, supervised by the Adult Client Services Branches in all circuits of the Judiciary and/or under the auspices of the Judiciary's drug and other specialty court programs. The target population will include, but shall not be limited to pregnant/parenting women with alcohol and/or other drug related problems and offenders with co-occurring disorders.

E. Geographic coverage of service

Second Circuit Islands of Maui, Lanai and Molokai

F. Probable funding amounts, source and period of availability

Probable funding amounts:

FY 2024 FY 2025 FY 2026 FY 2027

Probable funding amounts are not being stated at this time. Applicants shall propose funding amounts based on their best estimates for the cost of providing the services as described in the proposal.

Funding sources: State General Funds
 Federal Grants

State Special Funds

Period of availability: The Judiciary intends to award multi-term contracts. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027, subject to the appropriation and availability of funds, the fiscal soundness of the Applicant, and the Applicant's history with contract service performance. All State funds are contingent on appropriation, and all Federal funds are contingent on the awarding of grant applications. Funds are available for only the initial term of the contract which is for two (2) years.

A.1.2 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. The Applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
 - a. Residential programs must meet the requirements of the State of Hawaii, Department of Health's (DOH) Administrative Rules: Title 11, Chapter 98, pertaining to Special Treatment Facility. Programs must have a Special Treatment Facility license at the time of application and abide by applicable administrative rules governing accreditation of substance abuse treatment programs.
 - b. Therapeutic Living programs must meet the requirements of the State of Hawaii, DOH's Administrative Rules: Title 11, Chapter 98, pertaining to Special Treatment Facility as it pertains to Therapeutic Living. Programs must have an appropriate license to operate from the DOH, Office of Health Care Assurance (OHCA).
 - c. All applicants shall comply with the State of Hawaii, DOH's Administrative Rules: Title 11, Chapter 175, pertaining to Mental Health and Substance Abuse Systems.
 - d. The proposed services must meet all required state licensing or certification standards, provide assurances for fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverage and identification as applicable.
2. The Applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the Applicant's proposal. The Judiciary may request an oral discussion or

presentation in support of the proposal. On site visits may be made.

3. The Applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchase of Health and Human Services identified in SPO-H-201 (Effective 10/01/98) which can be found on the SPO website (See Section 5, Proposal Application Checklist, for the website address).
4. The Applicant shall have an accounting system in compliance with generally acceptable accounting principles.

B. Secondary Purchaser participation

(Refer to §3-143-608, HAR)

After-the-fact Secondary Purchases will be allowed.

C. Multiple or alternate proposals

(Refer to §3-143-605, HAR)

Allowed Not allowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interest of the Judiciary, and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (<2 years) Multi-term (>2 years)

A multi-term contract will be awarded if such awards are deemed to be in the best interests of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and the satisfactory performance of services by the provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g. July 1, 2019 to June 30, 2023. If it is determined that a multi-term contract is not in the best interest of the Judiciary, a single term contract will be awarded.

F. RFP Contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day

and time specified in Section 1.1 (Procurement Timetable) of this RFP.

For technical questions related to the Request for Proposals process, please call the following individual:

Judiciary Contracts and Purchasing Office
Kelly Kimura at (808) 538-5805 Fax: (808) 538-5802
Email: Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please call the following individuals:

Maui: Client Services Division, Second Circuit
David “Kawika” Ortiz at (808) 244-2792 Fax: (808) 244-2870
David.K.Ortiz@courts.hawaii.gov

2.1.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

1. Applicants will provide a comprehensive continuum of evidence-based offender-oriented treatment services to include Substance Abuse Assessments; Substance Abuse Education; Pre-Treatment/Motivational Enhancement Services; Outpatient, Intensive Outpatient, Day and Residential Treatment; Continuing/Aftercare and Therapeutic Living Program treatment modalities, to adults with alcohol and/or other drug related problems who are ordered or directed by the court to obtain such services. Applicants may propose the whole continuum or any part of the continuum.
 - a. Substance Abuse Assessments – Substance abuse assessments shall be completed or reviewed/approved by certified substance abuse counselors, program administrators certified pursuant to Section 321-193 (10), Hawaii Revised Statutes; or individuals who hold an advanced degree in a behavioral health science. Assessments shall be completed to determine the need for substance abuse treatment and provide a recommended level of service. Assessments will take into consideration client history of substance use; bio-medical conditions and complications; emotional, behavioral or cognitive conditions and complications; readiness to change; relapse, continued use or continued problem potential and recovery/living environment. If the client is incarcerated at the time of application, the Applicant shall

conduct the assessment in the institution(s) within their circuit, i.e., the state Community Correctional Center or Federal Detention Center. The Applicant must use a standardized substance abuse assessment application form as approved by the Judiciary. Assessments shall apply Diagnostic and Statistical Manual and the American Society of Addiction Medicine Patient Placement Criteria.

- b. Assessments for First-Time Drug Offender (Act 44/2004 Legislature or HRS 706-622.5) – Substance abuse assessments by certified substance abuse counselors shall be completed to determine the need for substance abuse treatment and shall provide a recommendation for services/treatment. The Diagnostic and Statistical Manual, Addiction Severity Index and the American Society of Addiction Medicine Patient Placement Criteria shall be applied to the assessment. These assessments shall be used for sentencing. If the client is incarcerated at the time of the referral, the Applicant shall conduct the assessment in the institution, i.e., the state Community Correctional Center or Federal Detention Center.
- c. Substance Abuse Education – Substance Abuse Education shall provide clients with information pertaining to the pharmacology of substance abuse, lifestyle consequences, emotions management, coping skills and problem-solving training using cognitive behavioral techniques, treatment process, relapse prevention and abstinence maintenance training.
- d. Pre-treatment/Motivational Enhancement Services – Pre-Treatment or Motivational Enhancement Services shall provide curriculum-based activities; cognitive-behavioral strategies to challenge thoughts, attitudes and beliefs; motivational interviewing techniques; goal setting; skill development; and establishing commitment to change behavior.
- e. Outpatient Treatment – An Outpatient Treatment Program shall provide non-residential comprehensive specialized services on a scheduled basis for clients with substance abuse problems. Professionally directed evaluation, treatment, case management, and recovery services shall be provided to clients with less problematic substance abuse related behavior than would be found in a Residential or Day treatment program.

An Outpatient Program shall provide between one (1) and eight (8) hours per client per week of face to face treatment with a minimum of one (1) individual counseling session per month.

- f. Intensive Outpatient Treatment – An Intensive Outpatient Program

shall provide a minimum of nine (9) hours per week of skilled treatment services. Such treatment usually operates for at least three (3) or more hours per day for three (3) or more days per week. Services may include individual and group counseling, medication management, family therapy, educational groups, employment, occupational and recreational therapy, and other therapies. Professionally directed evaluation, treatment, case management and recovery services shall be provided.

Intensive Outpatient Programs shall provide a minimum of nine (9) hours and up to a maximum of nineteen (19) hours per client per week of face to face treatment, with a minimum of one (1) individual counseling session per client per week.

- g. Day Treatment – A Day Treatment Program shall provide treatment activities offered in half-day or full-day increments, regularly scheduled for multiple sessions throughout the week. It includes a planned regimen of comprehensive outpatient treatment including professionally directed evaluation, treatment, case management, and other ancillary and special services. This level of care provides the offender with the opportunity to participate in a structured therapeutic program while being able to remain in the community.

Day Treatment shall provide a minimum of twenty (20) hours per week of face-to-face treatment and activities with a minimum of one (1) individual counseling session per week. The other nineteen (19) hours of face-to-face activities shall include, but not limited to group counseling, education, skill building, recreational therapy and family services.

- h. Residential Treatment – A Residential Treatment Program shall provide 24 hour per day non-medical, non acute care in a residential treatment facility that provides a planned regimen of professionally directed evaluation, treatment, case management, and other ancillary and special services. Observation, monitoring and treatment are available 24 hours a day, seven (7) days a week, with minimum of one (1) individual counseling session per week with each client.
- i. Continuing Care or After-Care – Continuing Care or After-Care is an organized service that shall provide treatment reinforcement services to the client who has completed treatment. Relapse prevention and recidivism prevention shall be focused on.
- j. Therapeutic Living – A Therapeutic Living Program shall provide structured residential living to individuals who are without appropriate living alternatives and who are currently receiving substance abuse

treatment in a Day, Intensive Outpatient, or Outpatient treatment program, or who have been clinically discharged from residential treatment. Therapeutic Living Programs shall provide fifteen (15) hours per week of face to face therapeutic rehabilitative activities. Activities can include, but are not limited to, needs assessment, service planning, individual and group skill building and practice, referral and linkage, employment, case management, client support and advocacy, monitoring and follow up.

The primary focus of this program is to provide the necessary support and encouragement to enable the client to complete treatment outside of a residential program, to adjust to a chemically abstinent lifestyle and to manage activities of daily living so that the individual can move towards independent housing and life management.

- k. Telehealth - The applicant shall have the capability and capacity to conduct services virtually for all level of services excluding residential, and Therapeutic Living services.

The applicant shall provide their written policies and procedures and describe the frequency, instruments and applications used to deliver such services.

2. Proposals shall delineate the following:

- a. Identification of target group(s) to be serviced by the Applicant, including any applicable admissions eligibility or exclusionary criteria.
- b. Identification and brief description of the distinguishing highlights for the evidence-based treatment model(s) to be used.
- c. Justification for the selection of the evidence-based treatment model(s).
- d. For Residential and Day treatment programs, the nature and amount of time the client will be involved in structured activities per week.
- e. (1) Identification of assessment instrument(s) to be used; (2) the purpose of the instruments; and (3) how the instruments will be implemented.
- f. Identification of training(s) to be provided to staff; the frequency of the training(s); and, supervisory oversight for quality assurance.
- g. Identification, description and references for the curriculum to be used.

- h. Identification of the program targets for change.
- i. Identification of the program's completion criteria for the clinical discharge of the client.
- j. Identification of the program's termination or discharge criteria.
- k. Description and length of Continuing/Aftercare services.
- l. Identification and description of a quality assurance program that involves client care and the delivery of services, the personnel who will implement the evaluation and review, and the procedures for corrective actions for problems identified.

(For those proposing to provide more than one modality of care, please describe how responses to the above listed items will differ, as applicable, across the continuum.)

- m. Provide evidence-based practice standards in the delivery services to include but not limited to cultural and gender appropriate services.
 - n. Incorporate the use of trauma informed care in the delivery of services.
3. Clients in any level of treatment shall meet the most current version of the American Society for Addiction Medicine Patient Placement Criteria (ASAM-PPC-2R) for admission, continuance and discharge and documentation shall be included in each client's clinical chart.
 4. The Applicant shall have the capability and capacity to conduct alcohol and drug testing that would include urine and/or blood.

The Applicant shall provide their written policies and procedures for such testing and shall describe the frequency and application of testing in treatment. Random and observed collection are required. The Applicant shall insure that chain of custody and confidentiality issues are addressed appropriately.

The Applicant shall identify instrumentation being utilized to conduct such testing and shall have the ability to do laboratory confirmation testing utilizing Gas Chromatography Mass Spectrometry or Liquid Chromatography Tandem Mass Spectrometry. Laboratories conducting such confirmation testing shall be Substance Abuse and Mental Health Services Administration and/or possess College of Addiction Pathologists – Forensic Urine Drug Testing certified. Confirmation testing at Limit of Quantitation levels is preferred.

Positive drug test results shall be reported immediately to the supervising agency/probation officer.

A summary of drug test results will be included in the required weekly and monthly reports for each client to drug and specialty courts.

5. Applicants shall provide written weekly progress reports for all drug or specialty court clients and/or as required by the coordinators of the respective courts. Written admission, monthly and discharge reports shall be provided to supervising probation officers. Written discharge reports shall be provided no more than ten (10) working days after a client's discharge or earlier upon request of the supervising officer, for court hearing purposes. Discharge reports shall include the dates of admission, treatment and termination; reasons for termination with explanation; discharge plans and recommendations (including recommendations for handling of client target behaviors, relapse prevention plans, possible sanctions, etc), when applicable. Applicants shall attach sample copies of report formats to be used for these purposes.
6. Programs shall notify the supervising officer or program of any prospective major change in a client's status (i.e. potential discharge or level of care change) occurring before the scheduled reporting cycle. Program staff will participate in team meetings with the Judiciary when it is determined to be in the best interest of the client's treatment and adjustment.
7. Applicants who provide Outpatient, Intensive Outpatient, Day and Residential treatment modalities shall develop and implement appropriate transition plans for each client prior to discharge. The plan shall address transition and recovery issues and relapse prevention, and shall be forwarded to the supervising officer.
8. Applicants shall provide treatment transition assistance to the client in the event that treatment funding is terminated, i.e. referral to another program, referral back to the supervising officer, etc.

B. Management Requirements (minimum and/or mandatory requirements)

1. Personnel

- a. Applicants shall possess and document knowledge, capacity, skills and experience in working with targeted population(s). Applicants shall describe the minimum qualifications for Program Director(s). The Program Director is defined as the person responsible for the overall management of the treatment program(s). The proposal shall include educational backgrounds and experience of any current program director(s).

At a minimum, applicants shall ensure that clinical supervision over

program activities is provided by certified substance abuse counselors (CSAC) or program administrators certified pursuant to Section 321-193 (10), Hawaii Revised Statutes; or hold an advanced degree in a behavioral health science, with at least one year experience working in the field of substance abuse addiction.

However, non-CSAC or non-master's level providers may be utilized as long as they are directly supervised by a CSAC or Master's level counselor, and are working toward certification.

Applicants shall describe its program for increasing clinical staff competencies in the acquisition of evidence-based, offender-oriented treatment. At a minimum, applicants shall demonstrate how direct care staff will be assisted in understanding and applying the risk-need-responsivity principles in their treatment of offenders, as well as the stages of change, motivating the client toward change and behavioral treatment.

- b. Therapeutic Living Programs shall be provided by staff knowledgeable in substance abuse problems and experience in case management activities.
- c. The applicant shall conduct a State and Federal fingerprint-based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who provides care or care placement services to vulnerable clients such as children, disabled individuals, and/or the elderly, or other program related vulnerable clients. In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or

elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.

- d. The Applicant shall submit an agency organizational chart which includes and identifies all programs that the agency /Applicant oversees/administers, inclusive of subcontractors and consultants.
- e. The Applicant shall have on the premises at least one person currently certified in First Aid and Cardiopulmonary Resuscitation (CPR).
- f. The Applicant shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest X-ray.
- g. The staff and volunteers, if used by the Applicant shall be under the supervision of the Program Director or his/her designee(s) and shall accordingly be trained in client confidentiality issues, ethics and program quality assurance requirements.

2. Administrative

- a. The Applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, group size, program content and methods of service delivery.
- b. Court testimony by an Applicant representative shall be provided as needed.

3. Quality assurance and evaluation specifications

- a. The Applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. Applicants shall allow the Program Specialist to undergo periodic onsite visits, scheduled and unscheduled with a program assessment and/or audit designed to assess applicant's implementation of effective practices in working with offenders with substance use problems and for contract monitoring purposes. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency,

an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.

- d. The Applicant shall allow the Judiciary access to all materials, files, and documents relating to the provision of services. In addition, the Judiciary may, at its discretion, observe individual, group, and educational sessions conducted by the Applicant for contract monitoring purposes.
- e. Applicants shall provide all program monitoring, assessments and/or evaluation reports completed within the last two years.

4. Output and performance/outcome measures

- a. Output: The Applicant shall record unduplicated clients served. The unduplicated count shall be recorded in the Applicants quarterly reports and aggregated Year-End Report.
- b. Outcome: The Applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any which may be developed and utilized by the Judiciary.

5. Experience

- a. The Applicant must have demonstrated competence or qualifications to perform the required services.
- b. The Applicant must have a minimum of one (1) year experience in the provision of substance abuse treatment services, or in the provision of Therapeutic Living Program services for substance abuse clients. In the absence of such experience, the Applicant shall provide supporting evidence why the one (1) year requirement should be waived.
- c. The Applicant shall have a minimum of one (1) year experience in the provision of services to offenders. In the absence of such experience, the applicant will provide supporting evidence why the one (1) year requirement should be waived.

6. Coordination of Service

- a. Programs shall describe their ability to collaborate with other appropriate services, including, but not limited to, health, mental health, social, educational, vocational rehabilitation and employment services.

- b. Programs intending to provide only part of the continuum shall also have and document appropriate linkages to other services in the continuum.

7. Reporting requirements for program and fiscal data

- a. The Applicant shall submit written Quarterly and Year-End reports summarizing output and outcome data, performance accomplishments, challenges and actual expenditures of funds. Quarterly reports are due 30 days after the end of the quarter. Year end reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the Applicant relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the Applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the applicant, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The Applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the Applicant's overall effort towards meeting the program goals and objectives, to include information on the outcome(s) of quality improvement activities engaged in. Furthermore, the Applicant shall furnish any additional reports or information that the Judiciary may from time to time require or request.
- d. Pursuant to HRS 601-21, the applicant shall comply with the requirements of the statewide substance abuse treatment monitoring program established under HRS 321-192.5. The Judiciary additionally requires that all programs which provide substance abuse treatment services, whether accredited or not accredited by ADAD, participate in the statewide data collection activities under the purview of ADAD.

8. Pricing or pricing methodology to be used

Negotiated unit of service or fixed price.

(If a proposal is submitted for fixed price, the Applicant shall also submit unit

of service rates for each service activity.)

9. Units of service and unit rate

Proposals shall include, as applicable, average expected lengths of stays proposed for each level of care; group sizes and frequency of services (i.e. number of sessions per week), as applicable; and provide fees for units of services as follows:

- a. Substance abuse assessments/Per Assessment. Applicant must indicate proposed unit rate applicable for both the in-custody or in-community offenders.
- b. Assessments for First-Time Drug Offenders/Per Assessment [A separate rate may be charged for assessments conducted on detained clients. If a separate rate is not listed, it will be assumed that the proposed fee applies to both in-community and in-facility offenders.]
- c. Substance Abuse Education/Per Hour/Per Individual
- d. Pre-Treatment -Motivational Enhancement/Per Hour/Per Individual
- e. Outpatient Treatment/Per Hour/Per Individual
- f. Intensive Outpatient Treatment/Per Hour/Per Individual
- g. Day Treatment/Per Hour/Per Individual
- h. Individual and Family Counseling for Non-Residential Programs/Per Hour/Per Individual/Per Family
- i. Residential/Per Bed Day/Per Individual
(To include allowances for individual and family counseling, as applicable)
- j. Continuing/After-Care/Per Hour/Per Individual
- k. Therapeutic Living/Per Bed Day/Per Individual

Initial screening and assessments for program acceptance shall be an imbedded cost. The rate shall cover one hundred percent (100 %) of treatment and housing (as applicable) costs for the client and shall also include provision of all workbooks and curricula material necessary to administer treatment services. Applicants may cite unit rates by the half or quarter hour as applicable.

10. Methods of compensation and payment

- a. The Applicant shall be required to submit monthly invoices to ensure accurate payments for services rendered. Information to be included shall be client's name, date of admission, date of discharge, reason for discharge, level of service provided and number of units provided with corresponding dates and service unit fee billed
- b. The Applicant shall maximize reimbursements of benefits for all levels of care through Hawaii Quest and Quest Net, the client's private insurance, the Department of Human Services or any other sources of payment made known to the Applicant by the client for treatment, housing or subsistence. Payments to the Applicant shall be reduced by received third party payments.

2.1.4 Facilities

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Applicants proposing to provide Residential Treatment and Therapeutic Living Program services shall describe and include in the proposals the following:
 1. How security and client accountability will be achieved.
 2. A site map of the facility designating all program locations, the location of each dwelling for Residential and/or Therapeutic Living Program, and the gender for each dwelling.
 3. A floor plan for each dwelling laying out each bedroom for clients and resident counselor(s), kitchen, dining area, living area, bathrooms and laundry area; the number of client beds per room; the number of resident counselor bed(s) per room; and the maximum capacity for each dwelling.
 4. The number of licensed beds for Residential and/or Therapeutic Living Program services by the Office of Health Care Assurance (OCHA), Department of Health, State of Hawaii.

**2.2 SVC SPEC TITLE: Adult Client Services
ACSO - Assessment and Treatment of Adult Sex Offenders**

2.2.1 Introduction

A & B.- (SEE SECTION 2.0.1)

C. Description of the goals of the service

Sex offender specific treatment services are needed to provide the Judiciary and the community with a comprehensive approach in dealing with adults who are sentenced or directed by the court to obtain sex offender treatment services.

D. Description of the target population to be served

Adults (male/female) referred for presentence assessment evaluations and convicted offenders who as a condition of court supervision require sex offender treatment.

E. Geographic coverage of service

Second Circuit -- Islands of Maui, Lanai, and Moloka'i

F. Probable funding amounts, source, and period of availability

Probable funding amounts:

<u>FY 2024</u>	<u>FY 2025</u>	<u>FY 2026</u>	<u>FY 2027</u>
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Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State general funds.

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027, subject to the appropriation and availability of funds and satisfactory contract performance. Funds are available for only the initial term of the contract which is for 2 years.

2.2.2 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated its competence or qualifications to perform the required services. The assessor and primary treatment therapist must hold a master's or doctoral degree in one of the disciplines related to human services, such as psychology, social work, nursing, counseling, and psychiatry and meet the academic training and work experience described in the Sex Offender Management Team (SOMT) qualifications guidelines.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverages as applicable.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201

(Effective 10/01/98), which can be found on the SPO website (See Section 5, ProposalApplication Checklist, for the website address).

B. Secondary purchaser participation

(Refer to §3-143-608, HAR)

After-the-fact secondary purchases are allowed.

C. Multiple or alternate proposals

(Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single-term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Judiciary Contracts & Purchasing Office
Kelly Kimura at (808) 538-5805 fax: 538-5802
Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please call the following individual:

Special Services Branch, Second Circuit
Alysha Stephenson at (808) 244-2772 fax: 244-2870
Alysha.R.Stephenson@courts.hawaii.gov

2.2.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

1. The applicant shall provide assessment services that follow the guidelines set forth by SOMT. The comprehensive evaluation reports will summarize the results of assessments conducted upon sex offenders. Components to be summarized include: a) a clinical interview; b) history; c) psychometric testing; d) penile plethysmograph testing or Abel Assessment; and e) polygraph examination.
2. The applicant shall provide sex offender treatment that follows the guidelines set forth by the SOMT. The treatment curriculum will combine Relapse Prevention, Behavior Modification, and Psychological components to sex offenders in groups consisting of no more than twelve. The goal of treatment is to increase the sex offenders' coping skills to manage their impulses to sexually assault.
3. New guidelines for the assessment and treatment of sex offenders may be developed by SOMT during the course of the contract and will be implemented upon negotiation to the satisfaction of both the contracting agency and the applicant.
4. Applicants shall incorporate evidence-based practices in sex offender treatment services by utilizing validated risk assessment instruments and effective interventions that target risk factors, criminogenic needs, and responsivity, such as motivational interviewing, cognitive behavioral therapy, and skill training with directed practice.
5. Applicants must be willing to undergo a program assessment and/or audit and develop an action plan to address corrective actions to improve identified areas.

The nature and scope of the services to be provided shall be performed in accordance with established clinical principles, clinical practices, and clinical ethics.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills, and experience in working with the targeted population.

Applicants shall describe its program for increasing clinical staff competencies in sex offense specific treatment and the acquisition of evidence-based, offender-oriented treatment. At a minimum, applicants shall demonstrate how direct care staff will be assisted in understanding and applying the risk-need-responsivity principles in their treatment of offenders, as well as the stages of change, motivating the client toward change and behavioral treatment.

- b. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly, or other program related vulnerable clients. In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.
- c. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.
- d. Applicants shall maintain documentation for each employee of an

initial and annual tuberculosis (TB) skin test or chest x-ray.

- e. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.

2. Administrative

- a. The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.
- b. Court testimony by an Applicant representative shall be provided as needed.

3. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. Applicants shall agree, by contract, to be willing to undergo a program assessment and/or audit designed to assess Applicant's implementations of effective practices in working with offenders. Based on the assessment/audit report, the Applicant will develop in concert with the contracting agency, an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.
- d. Contract compliance may be monitored by conducting site visits and reviews without prior notice.
- e. Applicants shall provide all program monitoring assessments and/or evaluation reports completed within the last two years.

4. Output and performance/outcome measurements

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

5. Reporting requirements for program and fiscal data

- a. The provider shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the provider relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the provider during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the provider, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the provider, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The provider shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the provider's overall effort towards meeting the program goals and objectives, to include information on the outcome(s) of quality improvement activities in which the program is engaged. Furthermore, the provider shall furnish any additional reports or information that the Judiciary may from time to time require or request.

6. Pricing or pricing methodology to be used

Negotiated unit of service or fixed price. If a proposal is submitted for

fixed price, the applicant shall also submit unit of service rates for each service activity.

7. Units of service and unit rate

Estimated units of service (per year)

Sex offender treatment: 25 clients

Psychosexual evaluations: 8

2.2.4 Facilities

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Facilities shall comply with all federal, state, and county laws, ordinances, codes, rules and regulations.

JUVENILE CLIENT AND FAMILY SERVICES

2.5 SVC SPEC TITLE: Juvenile Client and Family Services JCF25DVI - Domestic Violence Intervention Services

2.5.1 Introduction

A & B. - (SEE SECTION 2.0.1)

C. Description of the goals of the service

Domestic violence intervention services are requested that will provide evidence based, cognitive behavioral intervention services for adjudicated adult and juvenile offenders, services to children who are experiencing domestic violence in their families, and supportive services to victims and children of domestic violence. The overarching goals are for services to enhance victim, child, and community safety while holding offenders accountable for their battering behavior and reducing recidivism. Services should include but not be limited to providing offenders with the knowledge and skills needed to prevent further battering, and to offer alternative cognitive-behavioral skills training that will strengthen their ability to make different behavioral choices and take responsibility for their battering.

Experience in working with individuals and/or families involved in domestic violence in gender relevant ways is required. Applicants must evidence the ability to collaborate with other domestic violence agencies including, but limited to, active participation in and with domestic violence coalitions, task forces, criminal justice agencies, the Judiciary, and other relevant state agencies and private sector organizations which are involved in dealing with domestic violence.

D. Description of the target population to be served

Adults, juveniles, and children of either sex who have been adjudicated and/or referred by the court. Voluntary referrals may also be accepted.

E. Geographic coverage of service

Service areas include the following:
Second Circuit - Islands of Maui, Lanai and Molokai

F. Probable funding amounts, source, and period of availability

Probable funding amounts:

FY 2024

FY 2025

FY 2026

FY 2027

Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State general funds (all circuits); Federal funds (all circuits)

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027, subject to the appropriation and availability of funds and satisfactory contract performance. All State funds are contingent on appropriation, and all Federal funds are contingent on the awarding of grant applications. Funds are available for only the initial term of the contract which is for 2 years.

2.5.2 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated competence or qualifications to perform the required services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverages as applicable.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with Chapter 103F, HRS Cost Principles for

Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section 5, Proposal Application Checklist, for the website address).

7. The applicant shall incorporate and demonstrate their knowledge and use of best practices/evidence-based practices in domestic violence intervention services. Best practices/evidence-based practices are defined as a body of contemporaneous empirical research findings that produce the most efficacious outcomes for persons involved in domestic violence, has literature to support the practices, is supported by national consensus, has a system for implementing and maintaining program integrity, and conformance to ethical/professional standards. Best practices/evidence-based practices should reference the use of validated domestic violence risk assessments. Applicant to include how they intend to assess risk needs and target criminogenic needs, as well as the offender's level of risk. Any instrument(s) used to conduct assessments will be identified and described. Applicant to include evidence that the program staff properly utilize proven strategies that enhance motivation to change and retention of clients in services, such as motivational interviewing.
8. The applicant shall have the capability and capacity to conduct services virtually when necessary and provide written policies and procedures detailing the use of such platforms.

B. Secondary purchaser participation
(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

C. Multiple or alternate proposals
(Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded
(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interest of the Judiciary, and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single-term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Judiciary Contracts & Purchasing Office
Kelly Kimura at (808) 538-5805 fax: 538-5802
Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please call the following individual:

Program Specialist, Second Circuit
Alysha Stephenson at (808) 244-2772 fax: 244-2870
Alysha.R.Stephenson@courts.hawaii.gov

2.5.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

- A. Service Activities (Minimum and/or mandatory tasks and responsibilities)**
Applicant to provide curriculum that will be used in the following service activities that will be reflective of the use of evidence based, best practices. Each

circuit individually reserves the right to purchase only a component of any listed service activity based on availability of funds and need.

1. Batterers Intervention Programs (BIPs). Specific domestic violence intervention services must follow the guidelines of the current standards for Hawaii domestic violence intervention programs. All offender programs must utilize recognized effective “best-practice” interventions based on current knowledge and research, and be presented in culturally appropriate and gender relevant ways. The proposed services must describe how identification of criminogenic risk needs will be made, and addressed in the curriculum. Batterer groups should ideally have no more than 16 to 24 participants (unless otherwise designated or approved by the circuit) and be led by facilitators of each gender.

All BIPs must include a component to address the safety of the victim. This must include an assessment of risk, with appropriate action to be taken based on such assessment, and victim contact, for the purpose of providing program information, enhancing victim safety, and referral to victim support and other services, as needed.

2. Victim Support Services. Services to adult victims of domestic violence will include but not be limited to any of the following: support and trauma-informed counseling; preparation of restraining orders; assistance with other court related services; information and referral services regarding legal, criminal justice and other issues in domestic violence; legal assistance to include representation, preparation of temporary restraining orders and other related court actions; court advocacy, crisis counseling, outreach services, case management, safety planning, legal services, child care; and parenting programs. Applicants shall describe their appropriate linkages to other services (i.e., substance abuse evaluation/services, mental health evaluation/ services, child welfare services, etc.).
3. Services to Children Who Experience Domestic Violence. Domestic violence intervention services designed to assist children and adolescents who have/are experiencing domestic violence in their homes, adolescents charged with HRS 709-906, abuse of family and household members, and/or adolescents involved in dating violence.

Services to children may also include supervised child visitation centers in all circuits, (the counties of Hawaii, Maui, and Kauai). Proposed services must describe the following: a) the safeguards used to provided for the safety of children and parents during visits or exchanges, b) training and

minimum qualifications of staff, c) supervision of staff, and d) the provider's affiliation, or proposed affiliation, with a state and/or national supervised visitation network.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with targeted population(s). Applicants shall provide minimum qualifications for program director(s). Program director is defined as the person responsible for the overall management of the treatment program(s). Applicant shall provide educational backgrounds and experience of any current program director(s).

- b. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly , or other program related vulnerable clients . In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.

- c. The applicant shall submit organizational charts.
- d. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.
- e. Applicants shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest x-ray.
- f. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.
- g. The applicant must have sufficient and relevant training and staff development. Applicant is to provide verification of training and staff development plan.
- h. Applicants shall ensure that supervision over program activities and on-going training is provided to all employees and contract personnel that provide and/or supervise client services. Supervision of facilitators must include monthly documented assessment of adherence to the current Hawaii Batterers Intervention Program Standards, and quarterly monitoring of group sessions by supervisory personnel. At a minimum, applicants shall ensure that clinical supervision over BIPs facilitators is provided by someone with a graduate degree in social work, psychology, or any relevant behavioral health field, and have had at least one year of experience working in the domestic violence or related field. All supervisory or consultant personnel shall have training and experience in working with batterers, and/or adult and child victims of domestic violence. Programs shall assist clients with access to resources who are knowledgeable about the interface of domestic violence to mental health conditions, substance abuse, post-traumatic stress disorder (PTSD), suicidal and homicidal ideation, and other areas, as indicated.
- i. Applicants shall demonstrate and describe their collaboration with other appropriate service providers, including but not limited to those providing domestic violence shelters, victim services, BIPs, domestic violence coalitions and task forces, criminal and civil justice agencies, the Judiciary, and other relevant state agencies and private sector organizations.

2. Administrative

The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.

3. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, and if that mission is not specifically related to the family court domestic violence intervention services provided, then an appropriate “sub-mission,” i.e., what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. The quality assurance plan shall serve as procedural guidelines for staff, and will confer designated individuals and committees with the authority to fulfill their responsibilities in the areas of quality assurance.
- c. The quality assurance process shall serve as a source of information for parties interested in knowing how the program monitors and improves the quality of its services. Findings shall be integrated and reviewed by the quality assurance committee, and information shall be conveyed to the program administrator and the organization’s executive officer and governing body at least annually.
- d. The quality assurance system shall identify strengths and deficiencies, indicate corrective actions to be taken, validate corrections, and recognize and implement innovative, efficient, or effective methods for the purpose of overall program improvement.
- e. Program evaluation should reflect the documentation of the achievement of the stated goals of the program using tools and measures consistent with the best-practice standards of the disciplines involved in the delivery of services.
- f. Contract compliance may be monitored by conducting site visits

and reviews without prior notice.

- g. Applicants must be willing to undergo a program assessment and/or audit and develop an action plan to address corrective actions to improve identified areas.
- h. Applicants shall provide all program monitoring, assessments and/or evaluation reports completed within the last two years.

4. Output and performance/outcome measurements

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall indicate measurement tool(s) by which effectiveness of the services may be determined, as well as utilize the following by the Judiciary. It is strongly suggested that criteria for program completion be based on the achievement of measurable client performance outcomes rather than a participant attending a specific number of sessions. **If the percentages in the following are thought to be unreachable by the program, indicate the reasons why and present a counter proposal with justification.**
 - (1) _____percent (___%) of all clients completing batterer intervention services have remained violence free for no less than twenty (20) consecutive weeks prior to discharge. *Measured by client report, victim corroboration, review of police records, confirmation with probation officer, etc.*
 - (2) _____percent (___%) of all clients completing batterer intervention services have taken responsibility for their violent behavior; ceased to blame the victim for the violence; and recognized the adverse effects of their violent acts. *Measured by facilitator evaluation of client participation in group, completion of written assignments indicating such thinking and behavior verifiable by file records.*
 - (3) One hundred percent (100%) of all clients completing batterer intervention services will complete a written

individualized, practical plan to maintain non-violent behavior and will present that plan to the group for critique and feedback. *Verified by copy of plan in client file and facilitator written evaluation of the practicability of plan.*

- (4) Seventy-five percent (75%) of all clients completing batterer intervention services will improve their understanding of the nature and effects of domestic violence by 50%. *Measured by pre-post test and facilitator evaluation. Verified by test copies in client file and file records of facilitator evaluation.*
- (5) Sixty percent (60%) of all clients completing batterer intervention services will demonstrate the knowledge, skills and attitudes/values necessary for the maintenance of non-abusive behavior in intimate relationships which includes learning non-violent conflict resolution and non-aggressive communication skills. *Concepts that may be considered for measurement include: non-threatening behavior; respect; trust and support; honesty and accountability; shared responsibility; economic partnership; negotiation and fairness.) Measured by client participation/sharing in group, effectiveness in role playing; feedback to other clients; and facilitator written evaluation at program completion. Verified by curriculum content delivery dates of relevant sessions, notes in client file, group notes, etc.*
- (6) One hundred percent (100%) of all clients completing batterer interventions services will significantly increase their knowledge of the effects of domestic violence on children. *Measured by pre-post test; client participation in group, feedback to other clients; and facilitator evaluation. Verified by curriculum content delivery dates of relevant sessions, copy of pre-post test in client file; and copy of client self and facilitator written evaluation if client file.*
- (7) Eighty percent (80%) of all clients completing batterer intervention services will demonstrate an increase in their development of empathy for others affected by their violent behavior. *Measured by participation in group; written assignments; self and facilitator evaluation. Verified by case notes and client self and facilitator written evaluation in client file.*

5. Reporting requirements for program and fiscal data

- a. The provider shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the provider relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the provider during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the provider, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the provider, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The provider shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the provider’s overall effort towards meeting the program goals and objectives. Furthermore, the provider shall furnish any additional reports or information that the Judiciary may from time to time require or request.

6. Pricing or pricing methodology to be used

Negotiated unit of service or fixed price.

7. Units of service and unit rate

Estimated number of referrals:	
Batterers	225-600
Victims	400-700
Children/adolescents	25-100
Child visitation/Exchange	25-74
Families (visitation/exchange)	10-100

Proposals should describe the average length of treatment and/or intervention services for batterers, victims, and children, including any provisions for after care services.

**2.6 SVC SPEC TITLE: Juvenile Client and Family Services
JCFRS - Residential Services**

2.6.1 Introduction

A & B. - (SEE SECTION 2.0.1)

C. Description of the goals of the service

The goal of this service is to provide a safe, nurturing environment for minors who have been ordered by the court and/or referred to participate in a residential program. Programs shall provide clients with a safe, clean, supportive, well supervised environment in which minors can develop the tools and skills needed to function in society as young adults. Services should also be reflective of the court's balanced and restorative justice philosophy, and the juvenile justice reform effort with emphasis on best practices/evidence-based practices, collaboration and cultural competency. The goals of balanced and restorative justice are accountability, competency development, and public safety.

D. Description of the target population to be served

Juveniles between the ages of 12 to 17 years who are adjudicated or non-adjudicated for law violations and/or status offenses.

E. Geographic coverage of service

Second Circuit - Islands of Maui, Molokai, and Lanai

F. Probable funding amounts, source, and period of availability

Probable funding amounts:

<u>FY 2024</u>	<u>FY 2025</u>	<u>FY 2026</u>	<u>FY 2027</u>
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Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State General Fund

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027, subject to the appropriation and availability of funds and satisfactory contract performance. Funds are available for only the initial term of the contract which is for 2 years.

2.6.2 General Requirements

A. **Specific qualifications or requirements, including but not limited to licensure or accreditation**

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated its competence or qualifications to perform the required services and shall have a minimum one year experience in the provision of services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards and provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and proof of insurance coverages as applicable. Applicants must also demonstrate a commitment to be compliant with the PREA standards.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (see Section 5, Proposal Application Checklist, for the website address).

B. **Secondary purchaser participation**

(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

C. **Multiple or alternate proposals**

(Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interests of the Judiciary and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023, to June 30, 2027. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single-term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Judiciary Contracts and Purchasing Office
Kelly Kimura at (808) 538-5805 Fax: (808) 538-5802
Email: Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please call the following individual:

Special Services Branch, Second Circuit
Alysha Stephenson at (808) 244-2772 fax: (808) 244-2870
Alysha.R.Stephenson@courts.hawaii.gov

2.6.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

Services are being requested for a residential facility for youth who require a safe, monitored, and structured living environment. For First Circuit only, separate proposals shall be submitted for each service activity if applying for both.

Specific needs include but are not limited to:

1. Services for adjudicated minors who require residential placement with minimal supervision. Services are to include psycho-social assessment and evaluation, psycho-education training to counseling and training designed to prepare the older adolescent for self-sufficiency and independence, survival skills, personal skills, recreational activities, transportation, basic household and money management, employment, and related skills.
2. Services for adjudicated minors who require a highly structured residential placement to address chronic emotional and behavioral problems. Services are to include counseling and interventions to improve or enhance social, personal, or problem solving skills, counseling and interventions to increase self-discipline, responsibility and self control.

Applicants may submit proposals to do one or all of the above services.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills, and experience in working with the targeted population.
- b. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly, or other program related vulnerable clients. In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum

record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.

- c. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.
- d. The Applicant shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest X-ray.
- e. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.
- f. Applicants shall describe its program for increasing clinical staff competencies in the acquisition of evidence-based, offender-oriented treatment. At a minimum, applicants shall demonstrate how direct care staff will be assisted in understanding and applying the risk-need-responsivity principles in their treatment of offenders, as well as the stages of change, motivating the client toward change and behavioral treatment.

2. Administrative

- a. The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.
- b. Court testimony by an applicant representative shall be provided as needed.

3. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. Applicants shall agree, by contract, to be willing to undergo a program assessment and/or audit designed to assess applicant's implementation of effective practices in working with offenders. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency, an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.
- d. Applicants shall provide all program monitoring, assessments and/or evaluation reports completed within the last two years.
- e. Contract compliance may be monitored by conducting site visits and reviews without prior notice.

4. Output and performance/outcome measurements

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

5. Reporting requirements for program and fiscal data

- a. The applicant shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after

the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.

- b. Reports shall consist of a statement by the applicant relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the applicant, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the applicant's overall effort towards meeting the program goals and objectives, to include information on the outcome(s) of quality improvement activities in which the program is engaged. Furthermore, the applicant shall furnish any additional reports or information that the Judiciary may from time to time require or request.

6. Pricing or pricing methodology to be used

Negotiated unit of service or fixed price.

7. Units of service and unit rate

Estimated number of units of service:

90 bed days per year

2.6.4 Facilities

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Facilities shall comply with all federal, state, and county laws, ordinances, codes, rules and regulations.

**2.7 SVC SPEC TITLE: Juvenile Client and Family Services
JCFSO - Juvenile Sex Offender Treatment Services**

2.7.1 Introduction

A & B. - (SEE SECTION 2.0.1)

C. Description of the goals of the service

Juvenile sex offender specific assessment and treatment services are needed by the Judiciary for court adjudicated youth, to address and reduce their deviant, abusive behaviors (including any unresolved victimization trauma issues), and to improve community safety by preventing further victimization. Hereafter, juvenile sex offenders will be referred to as youth who have committed a sexual offense (YSO) or youth with sexualized misbehaviors.

D. Description of the target population to be served

Adjudicated juveniles and adults, up to the age of 18 and/or clinical discharge; males and females.

E. Geographic coverage of service

Second Circuit--Islands of Maui, Molokai and Lanai

F. Probable funding amounts, source, and period of availability

Probable funding amounts:

<u>FY 2024</u>	<u>FY 2025</u>	<u>FY 2026</u>	<u>FY 2027</u>
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Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State General Funds

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027, subject to the appropriation and availability of funds and satisfactory contract performance. Funds are available for only the initial term of the contract which is for 2 years.

2.7.2 General Requirements

A. **Specific qualifications or requirements, including but not limited to licensure or accreditation.**

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated competence or qualifications to perform the required services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverages as applicable.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made and requests will be made in advance.
6. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section 5, POS Application Checklist, for the website address).
7. The applicant shall have the capability and capacity to conduct services virtually when necessary and provide written policies and procedures detailing the use of such platforms.

B. **Secondary purchaser participation** (Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

C. **Multiple or alternate proposals** (Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interest of the Judiciary, and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single-term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Judiciary Contracts and Purchasing Office
Kelly Kimura at (808) 538-5805 Fax: (808) 538-5802
Email: Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please call the following individual.

Special Services Branch, Second Circuit

2.7.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

For youth with sexually abusive behaviors, specific treatment services are needed to provide the Judiciary and the community with a comprehensive approach in dealing with juveniles who are sentenced or directed by the court to obtain such treatment. Services will include but not be limited to psychosexual/victimization trauma evaluation and treatment, individual/group/family sessions, polygraph testing for assessment and treatment purposes, psycho-educational training, and an aftercare program. Applicants must demonstrate understanding and ability to adhere to the standards and guidelines of the Sex Offender Management Team (SOMT) as well as incorporate best practices/evidence-based practices in sexually abusive behaviors intervention services with youth. Best practices/evidence-based practices are defined as a body of contemporaneous empirical research findings that produce the most effective outcomes for youth involved in sexually abusive behaviors, has literature to support the practices, is supported by national consensus, has a system for implementing and maintaining program integrity, and conformance to ethical/professional standards.

New guidelines/standards for the assessment and treatment of youth with sexually abusive behaviors may be developed by Sex Offender Management Team (SOMT) during the course of the contract and will be implemented upon negotiation to the satisfaction of both the contracting agency and the applicant.

Services should also be reflective of the court's balanced and restorative justice philosophy and the guiding principles of Juvenile Detention Alternative Initiative (JDAI). The goals of balanced and restorative justice are accountability, competency development and public safety. The needs and interests of the offender, victim, and the community should be considered as part of the program. JDAI principles are complementary in that it can help shape and guide jurisdiction's practice through collaboration and a continuum of services that are culturally competent, relevant and accessible to the youth they serve.

Applicants shall ensure that clinical supervision over program activities and on-going training are provided.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population as noted in Section 2.7.3.A.
- b. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly, or other program related vulnerable clients. In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.
- c. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.
- d. The Applicant shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest X-ray.
- e. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and

shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.

- f. Applicants shall describe its program for increasing clinical staff competencies in sex offense specific treatment and the acquisition of evidence-based, offender-oriented treatment. At a minimum, applicants shall demonstrate how direct care staff will be assisted in understanding and applying the risk-need-responsivity principles in their treatment of offenders, as well as the stages of change, motivating the client toward change and behavioral treatment.

2. Administrative

- a. The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.
- b. Court testimony by an applicant representative shall be provided as needed.

3. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. Applicants shall agree, by contract, to be willing to undergo a program assessment and/or audit designed to assess applicant's implementation of effective practices in working with offenders. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency, an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.
- d. Applicants shall provide all program monitoring, assessments

and/or evaluation reports completed within the last two years.

4. Output and performance/outcome measurements

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

5. Reporting requirements for program and fiscal data

- a. The applicant shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the provider relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the provider during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the provider, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the provider, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the provider's overall effort towards meeting the program goals and objectives, to include information on the outcome(s) of quality improvement activities in which the program is engaged. Furthermore, the provider shall furnish any additional reports or information that the Judiciary may from time to time require or request.

6. Pricing or pricing methodology to be used

Negotiated unit of service or fixed price. If a proposal is submitted for fixed price, the applicant shall also submit unit of services rates for each service activity.

7. Units of service and unit rate

Estimated number of treatment slots (per year):

10-15 juveniles

Applicants are to include in their proposed funding the estimated time frame of assessment completion, amount per assessment, the average length of treatment/intervention services, the amount per unit per person and per group.

2.7.4 Facilities

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Facilities shall comply with all federal, state, and county laws, ordinances, codes, rules and regulations.

**2.8 SVC SPEC TITLE: Juvenile Client and Family Services
JCFSS-Shelter Services**

2.8.1 Introduction

A & B. - (SEE SECTION 2.0.1)

C. Description of the goals of the service

The goal of the service is to assist juveniles to resolve various problems and conflicts, help them learn socially acceptable behaviors and function in the community as law-abiding citizens. Services should also be reflective of the court's balanced and restorative justice philosophy, and the guiding principles of the Juvenile Detention Alternative Initiative (JDAI). The goals of balanced and restorative justice are accountability, competency development, and public safety. JDAI principles are complementary in that it can help shape and guide jurisdiction's practice through collaboration and a continuum of services that are culturally competent, relevant and accessible to the youth they serve and reduce the reliance on unnecessary confinement in secured detention.

D. Description of the target population to be served

Juveniles between the ages of 12 to 17 years who are adjudicated or non-adjudicated for law violations and/or status offenses.

E. Geographic coverage of service

Second Circuit - Island of Maui, Molokai, & Lanai

F. Probable funding amounts, source, and period of availability

Probable funding amounts:

<u>FY 2024</u>	<u>FY 2025</u>	<u>FY 2026</u>	<u>FY 2027</u>
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Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State General Funds.

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to

June 30, 2007, subject to the appropriation and availability of funds and satisfactory contract performance. Funds are available for only the initial term of the contract which is for 2 years.

2.8.2 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation.

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated competence or qualifications to perform the required services and shall have a minimum one year experience in the provision of services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards and provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and proof of insurance coverages as applicable. Applicant must also demonstrate a commitment to comply with PREA standards.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section 5, Proposal Application Checklist, for the website address).

B. Secondary purchaser participation (Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

C. Multiple or alternate proposals

(Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interest of the Judiciary and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single-term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Judiciary Contracts & Purchasing Office
Kelly Kimura at (808) 538-5805 Fax: 538-5802
Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please

call the following individual:

Special Services Branch, Second Circuit
Alysha Stephenson at (808) 244-2772 fax: (808) 244-2870
Alysha.R.Stephenson@courts.hawaii.gov

2.8.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

Services are being requested for a temporary shelter for youth who require a safe, culturally sensitive, monitored living environment while awaiting return to their own homes, placement in a substitute home, treatment program, or alternative living arrangement.

1. Specific needs include, but are not limited to:

- a. The ability to accept referrals within one (1) hour;
- b. Accommodation of juveniles up to thirty (30) days, with the possibility of extensions;
- c. A counseling component to address individual client needs as appropriate;

Oahu: Counseling component may include cognitive behavioral interventions, i.e. skill building, problem solving and decision making skills; and discharge planning involving minor, parent/caretaker and probation officer immediately upon admission into the shelter facility and subsequent follow-up with parties to ensure timelines.

- d. Transportation; education and medical needs.
 - e. Twenty-four (24) hour supervision by responsible adult staff at an appropriate level to minimize clients' unauthorized departure.
2. Family Court will retain sole authority to screen, determine admissibility, and to control placement.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population.
- b. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly. In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.
- c. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.
- d. The Applicant shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest X-ray.
- e. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and

program quality assurance requirements.

- f. The applicant must have sufficient and relevant training and staff development.

2. Administrative

The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.

3. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. Applicants shall agree, by contract, to be willing to undergo a program assessment and/or audit designed to assess applicant's implementation of effective practices in working with juvenile offenders. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency, an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.
- d. Applicants shall provide all program monitoring, assessments and/or evaluation reports completed within the last two years.
- f. Contract compliance may be monitored by conducting site visits and reviews without prior notice.

4. Output and performance/outcome measurements

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count

on the applicant's final report.

- b. Outcome: The applicant shall indicate measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

5. Reporting requirements for program and fiscal data

- a. The applicant shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the applicant relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the applicant, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.
- c. The applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the applicant's overall effort towards meeting the program goals and objectives, to include information on the outcome(s) of quality improvement activities in which the program is engaged. Furthermore, the provider shall furnish any additional reports or information that the Judiciary may from time to time require or request.

6. Pricing or pricing methodology to be used

Negotiated unit of service or fixed price.

7. Units of service and unit rate

Estimated number of units of service:

Maui: 365 bed days per year

**2.10 SVC SPEC TITLE: Juvenile Client and Family Services
JC125SA - Juvenile Substance Abuse Treatment Services**

2.10.1 Introduction

A. & B. - (SEE SECTION 2.0.1)

C. Description of the goals of the service

The goal of the service is to provide juvenile offenders with the skills and knowledge to effectively deal with their use of alcohol and drugs in order to eliminate re-offending behaviors. Services should also be reflective of the court's balanced and restorative justice philosophy, and the juvenile justice reform effort with emphasis on best practices/evidence-based practices, collaboration, and cultural competency. The goals of balanced and restorative justice are accountability, competency development, and public safety.

D. Description of the target population to be served

Juveniles between the ages of 12 to 17 years who are referred for law violations and status offenses and youth up to age 18 under the jurisdiction of Family Court.

E. Geographic coverage of service

Service areas include the following:

First Circuit -- Island of Oahu

Second Circuit -- Islands of Maui, Molokai, & Lanai

Fifth Circuit -- Island of Kauai

Separate proposals shall be submitted for each circuit.

F. Probable funding amounts, source, and period of availability

Probable funding amounts:

<u>FY 2024</u>	<u>FY 2025</u>	<u>FY 2026</u>	<u>FY 2027</u>
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Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State General Funds and Federal Funds.

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to

June 30, 2027, subject to the appropriation and availability of funds and satisfactory contract performance. All State funds are contingent on appropriation, and all Federal funds are contingent on the awarding of grant applications. Funds are available for only the initial term of the contract which is for 2 years.

2.10.2 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation.

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
 - a. Residential programs, in accordance with Title 11, Chapter 98, Special Treatment Facility, must have a Special Treatment Facility license at the time of application and abide by applicable administrative rules governing accreditation of substance abuse programs.
2. The applicant must have demonstrated competence or qualifications to perform the required services and shall have a minimum one year experience in the provision of substance abuse treatment services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverage as applicable.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section 5, Proposal Application Checklist, for the website address).
7. The applicant shall incorporate best practices/evidence-based practices in any substance abuse service. Best practices/evidence-based practices are defined as a body of contemporaneous empirical research findings that produce the most efficacious outcomes for persons with substance abuse problems, have a system for implementing and maintaining program integrity, and are in conformance to professional standards. For best practices in specific areas of substance abuse, the applicant may consult the Substance Abuse and Mental health Services Administration's (SAMHSA) Treatment Improvement Protocol Drug Addiction Treatment Improvement Protocol Series (TIPS) and the National Institute on Drug

Abuse (NIDA) Principles of Drug Addiction Treatment, and/or access the individual government agency websites.

B. Secondary purchaser participation
(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

C. Multiple or alternate proposals
(Refer to §3-143-605, HAR)

Allowed* Not allowed

*For the First Circuit only, multiple proposals are allowed for applicants who submit proposals for Outpatient/Intensive Outpatient services and Residential treatment services.

For the Second and Fifth Circuits, multiple and alternate proposals are **not** allowed.

D. Single or multiple contracts to be awarded
(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interests of the Judiciary, and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded
(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2019 to June 30, 2023. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single-term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Judiciary Contracts and Purchasing Office
Kelly Kimura at (808) 538-5805 Fax: (808) 538-5802
Email: Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please call the following individual:

Maui: Client Services Division, Second Circuit
David “Kawika” Ortiz at (808) 244-2824 fax: (808) 244-2870
David.K.Ortiz@courts.hawaii.gov

2.10.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

Applicants may provide a comprehensive continuum of evidence-based offender-oriented treatment services to include Substance Abuse Assessments, Substance Abuse Education, Outpatient, Intensive Outpatient, and Residential Treatment to adolescents with alcohol and/or other drug related problems that are ordered or directed by the court to obtain such services. Clients in any level of treatment shall meet the most current version of the American Society for Addiction Medicine Patient Placement Criteria (ASAM-PPC) for admission, continuance, and discharge and documentation shall be included in the client’s chart.

Applicants should also provide evidence of best practice standards in the delivery services to include but not limited to cultural and gender appropriate services. Must be able to demonstrate the ability to incorporate trauma informed care into the delivery of services, when deemed necessary.

Proposal must include demonstrated capacity in providing services to youth diagnosed with Fetal Alcohol Spectrum Disorders and youth with similar needs. Provider must be

knowledgeable about FASD and the implications for service delivery and needed supports for afflicted youth.

Selected provider shall work with the referring Judiciary staff to individualize services based on the Youth Assessment and Screening Instrument (YASI) conducted by the Family Court. Criminogenic risk and needs assessed include the following domains: Legal History, Family, School, Community and Peers, Substance Abuse, Mental Health, Aggression, Attitudes, Skills, and Employment/Free time. Provider shall demonstrate capacity to provide cognitive behavioral interventions with the goal of increasing social skills and prosocial attitudes, as specifically identified in the YASI assessment.

For the First Circuit only, a proposal for Outpatient/Intensive Outpatient service is to include substance assessments and substance abuse education as part of the program, and a separate proposal is to be submitted for Residential program. For the Second and Fifth Circuits, applicants may propose the whole continuum or any part of the continuum.

1. **Substance Abuse Assessments.** Substance abuse assessments shall be completed or reviewed/approved by certified substance abuse counselors, program administrators certified pursuant to Section 321-193 (10), Hawaii Revised Statutes; or individuals who hold an advanced degree in a behavioral health science. Assessments shall be completed to determine the need for substance abuse treatment and provide a recommended level of service. Assessments will take into consideration client history of substance use; bio-medical conditions and complications; emotional, behavioral or cognitive conditions and complications; readiness to change; relapse, continued use or continued problem potential and recovery/living environment. If the juvenile is incarcerated at the time, the Applicant shall conduct the assessment at the institution (i.e. Detention Center and/or Hawaii Youth Correctional Facility). Assessments shall apply Diagnostic and Statistical Manual and the American Society of Addiction Medicine Patient Placement Criteria.
2. **Substance Abuse Education.** Substance Abuse Education shall provide clients with information pertaining to the pharmacology of substance abuse, lifestyle consequences, emotions management, coping skills and problem-solving training using cognitive behavioral techniques, treatment process, relapse prevention and abstinence maintenance training. The alcohol education and counseling program shall be for eight (8) to ten (10) hours and may include topics on the effects of alcohol on the brain and body, legal and social consequences, triggers to using, etc. The applicant shall also provide a parent/guardian education and counseling program of not more than ten (10) hours.
3. **Outpatient/Intensive Outpatient Treatment.** Outpatient/Intensive Outpatient Treatment provides comprehensive non-residential services to adolescents with substance abuse problems. Program activities shall include professionally directed assessment, initial and updated treatment planning, crisis management plan, discharge plan, case management, individual and group counseling,

substance abuse education, family counseling and support services. Services also shall include, skill building, recreational therapy, and family counseling. On-site UA testing may also be offered as an additional service.

Outpatient services shall provide between one (1) and (8) hours per client per week of face-to-face treatment, including one (1) hour of scheduled and documented individual counseling per client per month. Intensive Outpatient services shall provide nine (9) or more hours per week of face-to-face treatment services, including one (1) hour of scheduled and documented individual counseling per client per week.

4. **Residential Program.** Residential program provides a planned regimen of professionally directed evaluation, treatment, individual and group counseling, skill building, recreational activities, family services, case management, and other ancillary and special services. Every client must have an initial treatment plan with a meeting to include all parties of the client's treatment team, updated treatment plans, crisis management plan and discharge plan. A discharge meeting with all parties of the client's treatment team shall be conducted prior to the client's planned discharge date. Observation, monitoring, and treatment are available twenty-four (24) hours a day, seven days (7) a week. Clients shall have access to a Department of Education approved appropriate grade-level academic program while in treatment. Academic programming shall be an integral part of the client's treatment plan. Programs are to have access, either as paid staff or on a consultative basis, to a licensed psychiatrist or psychologist who is trained in child development, family systems, and substance abuse treatment. The treatment services and living quarters must be separate and specific for adolescents only, with no intermingling of adults and juveniles. Services required on a long-term basis, generally for four months and up to a year.
5. Applicants shall establish and implement policies and procedures for the following:
 - a. Applicants for Outpatient/Intensive Outpatient and Residential Treatment services shall provide written weekly progress reports for all drug or specialty court clients and/or as required by the coordinators of the respective courts. Written admission, monthly and discharge reports shall be provided to supervising probation officers. Written discharge reports shall be provided no more than ten (10) working days after a client's discharge or earlier upon request of the supervising officer for court hearing purposes. Discharge reports shall include the dates of admission, treatment and termination; reasons for termination with explanation; discharge plans and recommendations (including recommendations for handling of client target behaviors, relapse prevention plans, possible sanctions, etc), when applicable. Applicants shall attach sample copies of report formats to be used for these purposes.

- b. The applicant shall have the capability and capacity to conduct alcohol and drug testing which may include urine, blood and/or hair sampling **(Applicable for Second and Fifth Circuits only)**.

The applicant shall provide their written policies and procedures for such testing and shall describe the frequency and application of testing in treatment. Random and observed collections are required. The applicant shall insure that chain of custody and confidentiality issues are addressed appropriately. The applicant shall establish written testing, chain of custody and confidentiality procedures.

The Applicant shall identify instrumentation being utilized to conduct such testing and shall have the ability to do laboratory confirmation testing utilizing Gas Chromatography Mass Spectrometry or Liquid Chromatography Tandem Mass Spectrometry. Laboratories conducting such confirmation testing shall be Substance Abuse and Mental Health Services Administration and/or College of Addiction Pathologists – Forensic Urine Drug Testing certified. Confirmation testing at Limit of Quantitation levels is preferred.

Positive drug test results shall be reported immediately to the supervising agency/probation officer, and a summary of drug test results shall be included in the required weekly and monthly reports for each client to drug and specialty courts.

- c. Programs shall notify the supervising officer or program of any prospective major change in a client's status (i.e. potential discharge or level of care change) occurring before the scheduled reporting cycle. Program staff will participate in team meetings with the Judiciary when it is determined to be in the best interest of the client's treatment and adjustment.
- d. Applicants who provide Outpatient, Intensive Outpatient, and Residential treatment modalities shall develop and implement appropriate transition plans for each client prior to discharge with a meeting with all parties involved to come up with the transition plan. The plan shall address transition and recover issues and relapse prevention, and shall be forwarded to the supervising officer.
- e. Applicants shall provide treatment transition assistance to the client in the event that treatment funding is terminated, i.e. referral to another program, referral back to the supervising officer, etc.
- f. Both residential and outpatient programs shall collaborate with other community agencies and resources, including but not limited to health,

mental health, social, educational, vocational rehabilitation, and employment services for coordination and linkages with other services as part of the continuum of care.

- g. The applicant shall have the capability and capacity to conduct services virtually for all level of services excluding residential services.

The applicant shall provide their written policies and procedures and describe the frequency, instruments and applications used to deliver such services.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population. Applicants shall ensure that clinical supervision over program activities is provided by Hawaii State certified substance abuse counselors (CSACs) pursuant to Section 321-193 (10), Hawaii Revised Statutes; or who hold an advanced degree in behavioral health science (clinical supervision).

CSACs and individuals who hold an advanced degree in behavioral health sciences preferably shall perform the following functions; however, non-CSACs or non-Masters level providers may be utilized as long as they are directly supervised* by a CSAC or Master level counselor and are working toward certification:

- Clinical evaluation
- Treatment planning
- Individual, group, and family counseling

*Direct supervision means a minimum of one hour supervision for every seven hours of performance. This involves teaching the supervisee about each core function of a substance abuse counselor, demonstrating how each core function is accomplished, the supervisee sitting in while the supervisor performs the function, the supervisee performing the function with the supervisor present, and finally, the supervisee performing the function independently, but with review and feedback from the supervisor. In addition, supervisees shall be required to attend ADAD-approved CSAC preparatory training when available.

Applicants shall describe its program for increasing clinical staff competencies in the acquisition of evidence-based, offender-oriented treatment. At a minimum, applicants shall demonstrate how direct care staff will be assisted in understanding and applying the risk-need-

responsivity principles in their treatment of offenders, as well as the stages of change, motivating the client toward change and behavioral treatment.

- b. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly , or other program related vulnerable clients . In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.
- c. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.
- d. The applicant shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest X-ray.
- e. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.

2. Administrative

- a. The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.

3. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. Applicants shall agree, by contract, to be willing to undergo a program assessment and/or audit designed to assess applicant's implementation of effective practices in working with offenders with substance use problems. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency, an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.
- d. Applicants shall provide all program monitoring, assessments and/or evaluation reports completed within the last two years.

4. Output and performance/outcome measurements

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary

5. Reporting requirements for program and fiscal data

- a. The applicant shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the applicant relating to the work accomplished during the reporting period and shall include statements of

the nature of the work performed, identification of persons served by the applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the applicant, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.

- c. The applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the applicant's overall effort towards meeting the program goals and objectives, to include information on the outcome(s) of quality improvement activities in which the program is engaged. Furthermore, the applicant shall furnish any additional reports or information that the Judiciary may from time to time require or request.
- d. The applicant shall comply with the requirements of the statewide substance abuse treatment monitoring program established under HRS 321-192.5. The Judiciary additionally requires that all programs which provide substance abuse treatment services, whether accredited or not accredited by the Department of Health, Alcohol and Drug Abuse Division (ADAD), participate in the statewide data collection activities under the purview of ADAD

6. Pricing or pricing methodology to be used

Negotiated unit of service or fixed price.

Additionally, for the Second Circuit, if a proposal is submitted for fixed price, the applicant shall also submit unit of service for each service activity including the cost for assessments conducted in-custody and in-community.

7. Units of service and unit rate

Estimated number of treatment slots (per month):

Maui:	1	Juveniles (Residential)
	11	Juveniles (Outpatient)
	12	Juveniles (Substance abuse education classes)

2.10.4 Facilities

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Applicants proposing to provide Residential Treatment services shall describe and include in the proposals the following:
 - 1. How security and client accountability will be achieved.
 - 2. A site map of the facility designating all program locations, the location of each dwelling, and the gender for each dwelling.
 - 3. A floor plan for each dwelling laying out each bedroom for clients and resident counselor(s), kitchen, dining area, living area, bathrooms and laundry area; the number of client beds per room; the number of resident counselor bed(s) per room; and the maximum capacity for each dwelling.
 - 4. The number of licensed beds for Residential services by the Office of Health Care Assurance (OCHA), Department of Health, State of Hawaii.

**2.12 SVC SPEC TITLE: Juvenile Client and Family Services, Second Circuit
JC2IC - In-Community Services**

2.12.1 Introduction

A. & B. - (SEE SECTION 2.0.1)

C. Description of the goals of the service

In-Community services are requested to provide therapeutic, supportive, and educational programs for minors and young adults. Services should include but not be limited to providing individuals with the tools and skills needed to prevent recidivism, to assess alternatives and make appropriate choices to help them learn socially acceptable behaviors to function in the community as law-abiding citizens. The referrals for minors may include status offenses or law violations. The in-community services for minors and adults provide alternatives to the traditional juvenile and criminal justice systems to assist the offender to make reparations to the victim and the community. Services should be reflective of the court's balanced and restorative justice philosophy which holds the offender accountable for his/her actions. All applicants should provide the clients with insight and understanding of their situation and resulting behaviors.

D. Description of the target population to be served

Juveniles between the ages of 6 to 17 and young adults who have been referred and/or ordered by the Court to participate in treatment.

E. Geographic coverage of service

Second Circuit -- Islands of Maui, Lanai and Molokai

F. Probable funding amounts, source, and period of availability

Probable funding amounts:

FY 2024 FY 2025 FY 2026 FY 2027

Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

Funding source: State general funds.

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to

June 30, 2027, subject to the appropriation and availability of funds and satisfactory contract performance.

2.12.2 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
2. The applicant must have demonstrated competence or qualifications to perform the required services.
3. The applicant must have an accounting system, with acceptable accounting practices and standards.
4. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverages as applicable.
5. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
6. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section 5, POS Application Checklist, for the website address).
7. The applicant shall have the capability and capacity to conduct services virtually when necessary and provide written policies and procedures detailing the use of such platforms.

B. Secondary purchaser participation (Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

C. Multiple or alternate proposals

Service Specs - JC21C

(Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interest of the Judiciary, and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years. Funds are available for on the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregated term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the requested services, please call the following individual:

Kelly Kimura, Contracts and Purchasing Office
Phone: (808) 538-5805 Fax: (808) 538-5802
Email: Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested

services, please call the following individual:

Alysha Stephenson, Program Specialist, Second Circuit

Phone: (808) 244-2772 Fax: 244-2870

Email: Alysha.R.Stephenson@courts.hawaii.gov

2.12.3 Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. **Service Activities (Minimum and/or mandatory tasks and responsibilities)**

Applicants shall provide therapeutic, supportive, and educational programs for minors and adults and alternatives to the traditional juvenile and criminal justice systems to assist offenders to make reparations to the victim and the community. Applicants may propose to provide all or any part of the following service activities:

1. **Anger Management.** Services for adjudicated and non-adjudicated minors who display aggressive or abusive behaviors, to include psycho-social assessment and evaluation; individual and group treatment dealing with anger and stress management; cognitive restructuring/behavior modification interventions that enhance both communication and problem solving skills.
2. **Outdoor Experience.** Services for adjudicated and non-adjudicated minors, to include interventions which provide physical and psychological challenges to improve/enhance a minor's effectiveness within group settings, and increase both community and environmental awareness.
3. **Diversion Services.** Services for adjudicated and non-adjudicated minors to be used as a dispositional alternative program designed to divert individuals from the justice system. Services to include supervision of minors as an alternative to confinement, and pro-social activities that provide for the minors interest and expose and create links for the minors within the community.
4. **Victim Impact Classes.** To provide an educational program to teach juvenile and adult offenders, in separate classes, how crime affects the victim, victim's family and the community. The classes provide victims with an opportunity to tell their personal stories to offenders about the social, emotional, physical, and financial impact of crime on their lives. Offenders have the opportunity to learn about the short and long-term trauma of victimization and develop an understanding and empathy for victims.

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5. **Victim-Offender Reconciliation.** To provide opportunities to bring together the victim and offender in a safe and structured face-to-face meeting, in the presence of trained facilitators. The crime victims have an opportunity to obtain answers to their questions about the crime and the person who committed it. The offenders have an opportunity to take responsibility for what they have done and learn the impact of their actions on others.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population.
- b. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly , or other program related vulnerable clients . In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.ehawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.

- c. The applicant shall have on the premises at least one person currently certified in First Aid and CPR.
- d. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.
- e. The applicant shall maintain appropriate supervision over staff and program activities, work collaboratively with other agencies, and provide on-going training for staff.
- f. The applicant must have sufficient and relevant training and staff development.
- g. The Applicant shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest X-ray.

2. Program

Applicants shall incorporate best practices/evidence-based practices in services for adjudicated and non-adjudicated minors. Best practices/evidence-based practices are defined as a body of contemporaneous empirical research findings that produce the most efficacious outcomes for persons involved services, has literature to support the practices, is supported by national consensus, has a system for implementing and maintaining program integrity, and conformance to ethical/professional standards.

3. Administrative

The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.

4. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures

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consistent with the professional standards of the disciplines involved in the delivery of services.

- c. Applicants must be willing to undergo a program assessment and/or audit to assess applicant's implementation of effective practices. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency, an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.
- d. Applicants shall provide all program monitoring, assessments and/or evaluation reports completed within the last two years.

5. Output and performance/outcome measurements

- a. Output: The applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the applicant's quarterly reports, culminating in a final unduplicated client count on the applicant's final report.
- b. Outcome: The applicant shall indicate measurement tool(s) by which effectiveness of the services may be determined, as well as utilize any provided by the Judiciary.

6. Reporting requirements for program and fiscal data

- a. The provider shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the provider relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of persons served by the provider during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the provider, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the provider, upon request, shall be required to meet with representatives of the Judiciary to discuss the

progress of the work required.

- c. The provider shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the provider's overall effort towards meeting the program goals and objectives. Furthermore, the provider shall furnish any additional reports or information that the Judiciary may from time to time require or request.

7. Pricing or pricing methodology to be used

Negotiated unit of service.

8. Units of service and unit rate

Estimated number of placement slots: 25-75

Applicants to include in their proposed funding amounts per unit, per person, and a per group rate.

**2.19 SVC SPEC TITLE: Maui Drug Court Services, Second Circuit
DR2MDC - Adult Substance**

2.19.1 Introduction

A. & B. - (SEE SECTION 2.0.1)

C. Description of the goals of the service

To provide a continuum of adult substance abuse treatment services, delivered in the drug court treatment modality, to male and female felony offenders with drug and/or drug and alcohol related problems who are voluntarily participating in the Maui Drug Court (MDC) Program in the Second Circuit Court, State of Hawaii. The goal of this treatment and compliance monitoring is to provide offenders with the skills and knowledge to effectively deal with their use of drugs and/or drugs and alcohol in order to eliminate their recidivism to criminal behavior.

D. Description of the target population to be served

Non-violent adult men and women (ages 18 and older) with drug and/or drug and alcohol related problems who are facing charges, are charged with, or are on probation, parole or furlough for felony offense(s), voluntarily participating in the MDC Program in the Second Circuit Court, State of Hawaii. The approximate number of clients anticipated to be serviced on the island of Maui as specified by this RFP is a static client population of approximately sixty (60) to one hundred twenty (120) clients in each of the two State fiscal years covered by this RFP.

E. Geographic coverage of service

Second Circuit –Island of Maui

F. Probable funding amounts, source, and period of availability

Funding source: State general funds

Other potential funding sources: Federal funds, public and private grants.

Probable funding amounts:

FY 2024 FY 2025 FY 2026 FY 2027

Period of availability: The Judiciary intends to award a multi-term contract. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027, subject to the appropriation and availability of funds and satisfactory contract performance. All State general funds are contingent on appropriation. Funds are available for only the initial term of the contract which is for 2 years.

NOTE: Funding amounts are not being stated at this time. Applicants should propose funding amounts in their proposals based on their best estimate of the cost of providing the services described in these specifications.

2.19.2 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. The applicant shall have licenses and certificates, as applicable, in accordance with federal, state and county regulations, and comply with all applicable Hawaii Administrative Rules.
 - a. Residential programs, in accordance with Title 11, Chapter 98, Special Treatment Facility, must have a Special Treatment Facility license at the time of application and abide by applicable administrative rules governing accreditation of substance abuse treatment programs.
 - b. Unless otherwise specified in this RFP, therapeutic living programs must meet the Department of Health, Alcohol and Drug Abuse Division's (ADAD) Therapeutic Living Program Requirements for Substance Abuse Treatment Services until applicable administrative and licensing rules are implemented by the Department of Health. Upon implementation of duly authorized administrative and licensing rules, programs must comply accordingly.
 - c. Sober Housing must meet applicable state and county codes, standards and zoning requirements.
 - d. All applicants shall comply with Title 11, Chapter 175, Mental Health and Substance Abuse System.
 - e. The proposed service must meet all required state licensing or certification standards, provide assurances of fair hearing and grievance procedures for clientele, civil rights compliance, information safeguarding practices, and provide proof of insurance coverages and identification as applicable.
2. The applicant must have an accounting system, with acceptable accounting practices and standards.

3. The applicant shall submit in a timely manner upon request by the Judiciary, any additional information needed by the Judiciary to make a decision on the applicant's proposal. The Judiciary may request an oral discussion or presentation in support of the proposal. On-site visits may be made.
4. The applicant shall comply with the Chapter 103F, HRS Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/01/98), which can be found on the SPO website (See Section Five, Proposal Application Checklist, for the website address).

B. Secondary purchaser participation

(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

C. Multiple or alternate proposals

(Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded

(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Multiple contracts may be awarded if such awards are deemed to be in the best interest of the Judiciary, and will be based on the highest ranked proposals.

E. Single or multi-term contracts to be awarded

(Refer to §3-149-302, HAR)

Single term (< 2 yrs) Multi-term (> 2 yrs.)

A multi-term contract will be awarded based on a determination that it is in the best interest of the Judiciary. The initial term of the contract shall be for two (2) years, from July 1, 2023 to June 30, 2025. Funds are available for only the initial term of the contract. The contract may be extended for another two (2) years, subject to appropriation and availability of funds and satisfactory performance of services by provider. Execution of a contract amendment is required to extend the contract for another term. The aggregate term of the contract shall not exceed four (4) years, e.g., July 1, 2023 to June 30, 2027. If it is determined that it is not in the best interest of the Judiciary to award a multi-term contract, a single-term contract will be awarded.

F. RFP contact persons

The individuals listed below are the points of contact from the date of release of this RFP until the selection of the winning provider or providers. Written questions should be submitted to the RFP contact person(s) and received on or before the day and time specified in Section 1.1 (Procurement Timetable) of this RFP.

If you have any technical questions regarding the RFP process, please call the following individual:

Kelly Kimura, Contracts and Purchasing Office
Phone: (808) 538-5805 Fax: (808) 538-5802
Email: Kelly.Y.Kimura@courts.hawaii.gov

If you have any programmatic questions regarding the requested services, please call the following individual:

David “Kawika” Ortiz, Program Specialist, Second Circuit
Phone: (808) 244-2792 Fax: (808) 244-2870
Email: David.K.Ortiz@courts.hawaii.gov

2.19.3. Scope of Work

Applicants may propose to provide the whole continuum of services or only a part of the continuum, i.e. In-Custody Substance Abuse/Chemical Dependency Services, In-Community Substance Abuse/Chemical Dependency Services, Residential Substance Abuse/Chemical Dependency Services. Applicants must clearly state the specific service activities they are proposing to provide.

NOTE: Proposals will be evaluated by service activity according to Section Four of this RFP and will be scored and ranked separately within the following categories: In-Custody Substance Abuse/Chemical Dependency Services, In-Community Substance Abuse/Chemical Dependency Services, and Residential Substance Abuse/Chemical Dependency Services.

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

To provide a continuum of evidence-based, offender-oriented substance abuse treatment services, delivered in the drug court treatment modality, to adult male and female felony offenders with drug and/or drug and alcohol related problems who are voluntarily participating in the MDC Program in the Second Circuit Court, State of Hawaii. Gender specific curriculum should also be incorporated

that addresses trauma informed care practices. As detailed below, services to be available for clients shall include assessment and substance abuse/chemical dependency treatment while incarcerated and in the community, Residential Substance Abuse/Chemical Dependency Treatment, Therapeutic Living Programs, and Sober Housing as needed.

Treatment services should incorporate supportive services including but not limited to the following areas: relationships, parenting, life skills, effective communication, and community resources.

Modifications to requirements for service delivery may be negotiated between the Judiciary and the selected provider(s) in response to changes in program needs during the contract period.

1. **In-Custody Substance Abuse/Chemical Dependency Services:** Through a collaboration between the Judiciary-MDC and the Department of Public Safety-Maui Community Correctional Center (MCCC), substance abuse treatment/chemical dependency services are to be provided to MDC referred participants while incarcerated at the MCCC. These participants have completed a program screening and have been set to be admitted to the MDC. The MDC In-Custody Treatment Program (ICTP) is an approximate ninety (90) day program intended to provide substance abuse/chemical dependency treatment for inmates from Maui, Molokai or Lanai who are incarcerated at MCCC and who have been assessed and admitted to the MDC. Participants are housed separately from the general population of MCCC inmates in two dorms: Dorm 3 houses up to twenty (20) males and Dorm 5 has a capacity of up to twelve (12) beds for women.

The partner agencies in this collaborative effort shall provide oversight and direction with regard to the service delivery of the MDC ICTP, including curricula, methodology of the treatment/services provided, case management, and other program activities. Further, the partner agencies shall review and approve the appropriateness of the service delivery prior to program implementation. Service delivery for the MDC ITCP shall be provided as follows:

- a. **Program Structure:** A minimum of twenty-one (21) hours of face-to-face activities per week shall be provided, which includes at least one (1) hour of individual counseling to be conducted with each client. Applicants shall provide a detailed description of the model(s) to be used within a ninety (90) day program, including the philosophical basis for treatment, and for dealing with incarcerated inmates who have a history of substance abuse/chemical dependency. Program components are as follows:

1) **Assessments:** Comprehensive substance abuse assessments shall be provided to those applicants who have been accepted by the MDC for assessment and admission to the program. Assessments shall be conducted or reviewed/approved by those with a current State of Hawaii, Substance Abuse Counselor Certificate. Assessments shall consist of gathering relevant history from the client, including but not limited to, alcohol and other drug abuse using appropriate interview techniques. Provider will obtain corroborative information from significant secondary sources regarding client's alcohol and other drug abuse and psycho-social history. Provider shall identify the appropriate assessment tools to be used and explain to the client the rationale for the use of assessment techniques in order to facilitate understanding. Assessments shall include developing a diagnostic evaluation of the client's substance abuse and any coexisting conditions based on the results of all assessments utilizing the American Society of Addiction Medicine (ASAM) criteria, and the Diagnostic Statistical Manual of Mental Disorders (DSM IV) in order to provide an integrated approach to treatment planning based on the client's strengths, weaknesses, and identified problems and needs.

2) **Group and Individual Counseling:** Initial and updated treatment planning, crisis intervention, individual and group counseling, substance abuse education, and skill building groups shall be provided. For each client, ongoing evaluation of treatment progress shall be provided which includes an assessment of the client's readiness for continued participation in the MDC Program.

MDC clients who are re-housed at the facility from the community and placed into the general population will receive one (1) hour per week of individual counseling to maintain treatment services.

3) **Drug Testing:** Random and observed urinalysis shall be administered throughout the duration of the program at a minimum of twice monthly per client and as needed.

4) **Collaboration with Partners:** Open and consistent communication shall be maintained between the prospective provider and the partner agencies based on a commonality of goals in the spirit of mutual support and collaboration.

- 5) **Residential Services:** Provides a planned regimen of professionally directed evaluation, treatment, case management, and other ancillary and special services. Observation, monitoring and treatment are available 24 hours a day, seven days a week. A minimum of twenty-four (24) hours per week of face-to-face treatment shall be provided, including a minimum of one (1) hour per week of individual counseling to be scheduled with each client. Programs shall develop and implement appropriate transition plans for each client in the final phases of treatment. The plan shall address transition and recovery issues and relapse/recidivism prevention.

2. **In-Community Substance Abuse/ Chemical Dependency Services:** In-community substance abuse/chemical dependency services shall consist of the following services (defined below) to be delivered in the drug court treatment modality to clients in an approximate 15-month drug court program. **(Please refer to Table of Recommended Minimum Services Per Week For In-Community Substance Abuse/Chemical Dependency Services as a guideline for service provision.)** Applicants shall provide a detailed description of the model to be used within a drug court program, including the philosophical basis for treatment and for dealing with criminal offenders with a history of substance abuse/chemical dependency. Curriculum used will be based on best practice standards demonstrating evidence based support.

The curriculum may be modified during the contract period with written approval and review by the MDC Administrator.

- a. **Program Structure:** Applicants must have the capability to complete assessments, provide initial and updated treatment planning, crisis intervention, individual and group counseling, substance abuse education, skill building groups. Group size shall not exceed thirty (30) participants for each session provided and the maximum facilitator to client ratio shall be 1:15 unless otherwise specified by the MDC. For each client, ongoing evaluation of treatment progress shall be provided which includes a regular review of the appropriateness of the level of care being provided to the client. Programs shall develop and implement appropriate transition plans for each client in the final phases of treatment and prior to entry into continuing care. The plan shall address transition and recovery issues and relapse/recidivism prevention. Program components are as follows:

- 1) **Comprehensive substance abuse assessments** shall be

provided to those applicants who have been accepted by the MDC for assessment and admission to the program. Assessments shall be conducted or reviewed/approved by those with a current State of Hawaii, Substance Abuse Counselor Certificate. Assessments shall consist of gathering relevant history from the client, including but not limited to, alcohol and other drug abuse using appropriate interview techniques. Provider will obtain corroborative information from significant secondary sources regarding client's alcohol and other drug abuse and psycho-social history. Provider shall identify the appropriate assessment tools to be used and explain to the client the rationale for the use of assessment techniques in order to facilitate understanding. Assessments shall include developing a diagnostic evaluation of the client's substance abuse and any coexisting conditions based on the results of all assessments utilizing the American Society of Addiction Medicine (ASAM) criteria, and the Diagnostic Statistical Manual of Mental Disorders (DSM IV) in order to provide an integrated approach to treatment planning based on the client's strengths, weaknesses, and identified problems and needs.

- 2) **Intensive Outpatient Treatment (Phase A)**: Provides non-residential specialized intensive services on a scheduled basis for individuals with substance abuse problems. Group treatment services shall operate for a minimum of two (2) hours per day for four (4) days per week. Services may include individual and group counseling, medication management, family therapy, educational groups, occupational and recreational therapy, and other therapies. Professionally directed evaluation, treatment, and recovery services shall be provided, for a minimum of nine (9) hours per client per week of face-to-face treatment, including at least one (1) hour per week of individual counseling.
- 3) **Outpatient Treatment (Phase B)**: Provides non-residential comprehensive specialized services on a scheduled basis for individuals with substance abuse/chemical dependency issues. Professionally directed evaluation, treatment, and recovery services shall be provided to clients appropriate for a lower level of substance abuse/chemical dependency related service. Treatment in this phase shall be for two (2) two (2) hour and one (1) one and one-half (1.5) hour of group

counseling sessions per client per week and one (1) hour of individual counseling per client every two (2) weeks.

4) **Continuing Care (Phase C):** Provides non-residential services to individuals with substance abuse/chemical dependency issues that are ready to transition to a lower level of services. Treatment in this phase shall be for one (1) two and one-half (2.5) hour of group counseling sessions per client per week and one (1) one (1) hour of individual counseling per client every two (2) weeks.

5) **Drug Testing:** Applicants must have the capability to provide frequent drug and alcohol testing. Drug testing shall include random and observed breath, urine, and hair analysis for all active MDC clients who are receiving or who have received treatment from the selected provider for In-Community Substance Abuse/Chemical Dependency Services as specified in this RFP.

6) **Friends and Family Groups:** Psycho-educational sessions shall be provided for all MDC referred program participant friends/families and for all MDC clients who are currently in Phases A - C. Sessions shall be focused on educational curricula to assist the participant in the group an understanding of substance abuse issues. Applicant must provide detailed description of proposed curriculum for the group.

3. **Residential Substance Abuse Services**

a. **Residential:** Provides a planned regimen of professionally directed evaluation, treatment, case management, and other ancillary and special services. Observation, monitoring and treatment are available 24 hours a day, seven days a week. A minimum of twenty-four (24) hours per week of face-to-face treatment shall be provided, including a minimum of one (1) hour per week of individual counseling to be scheduled with each client. Programs shall develop and implement appropriate transition plans for each client in the final phases of treatment. The plan shall address transition and recovery issues and relapse/recidivism prevention.

b. **Therapeutic Living:** Provides a less structured residential setting than that of a special treatment facility for those persons recovering from substance abuse. The program shall aid residents in meeting basic needs and provide supportive services through an

individualized recovery and discharge plan. The categories of Therapeutic Living Programs are as follows:

1) **Transitional Living Programs for Adults**

These programs provide residential living to residents who are currently receiving substance abuse treatment in a day or outpatient program or have been clinically discharged from treatment yet still are in need of supervision and a clean and sober living environment. All residents in the same transitional residential living program house shall be adults of the same gender. At a minimum, one direct services staff member with a current first aid certificate and CPR training shall be present in the program when residents are present. For non-therapeutic program hours, the program shall have sufficient staff, as approved by the department, to ensure the safety, health, and delivery of the services. A minimum of fifteen (15) hours per week of face-to-face supportive psycho-social services shall be provided to each resident each week.

2) **Transitional Living Programs for Parents with Children**

These programs provide residential living services to residents who are currently receiving substance abuse treatment in a day or outpatient program, or who have been clinically discharged from treatment yet still need supervision and a clean and sober living environment. All residents in the program shall be pregnant women or women with child(ren) or men with child(ren). All adults in the same transitional residential living program house shall be of the same gender. Staff shall be onsite twenty-four (24) hours per day, seven (7) days per week. For non-therapeutic program hours, the program shall have sufficient staff, as approved by the Department of Health, to ensure the safety, health, and delivery of services. A minimum of fifteen (15) hours per week of face-to face supportive psycho-social services shall be provided to each resident each week.

3) **Semi-supervised, independent but structured living arrangements for adults**

These programs provide a structured living arrangement for adults who need minimum professional or paraprofessional support in order to live in the community and avoid deterioration in functioning and a more restrictive level of care. Staff must be on site a minimum of twelve (12) hours

per day, and on call for twenty-four (24) hours per day, seven (7) days per week. At a minimum, one staff member shall be available for every fifteen (15) residents. All residents in the housing unit shall be adults of the same gender.

Further requirements are:

- a) At least ten (10) hours a week of case management shall be provided to assist residents in independent living skills.
- b) The program shall maintain scheduled services to facilitate accessibility to and attendance at employment, self-help groups, counseling, and vocational counseling.
- c) The program shall provide or arrange for educational services appropriate to the level of functioning and comprehension of the resident.
- d) The program shall provide residents with information about community resources and assist them in accessing those resources.
- e) The program shall facilitate peer group support and provide supervision in daily living skills and work.

- c. **Sober Housing:** Sober housing shall provide a sober living environment as part of transitional planning for recovering individuals who generally have completed appropriate substance abuse treatment services and who require a supportive, alcohol and drug-free residence that will reinforce sober and responsible behavior. Residents do not require twenty- four (24) hour supervision, rehabilitation, therapeutic services, or home care. Sober houses may be democratically managed and self-supporting, with limited, short-term Judiciary funding provided for eligible clients' rental fees and/or other program operations.

In its proposal, the applicant shall include its policies and procedures regarding the provision of Sober Housing. At a minimum, the policies and procedures must specify that residents may not possess or consume alcohol, illegal drugs, or non-medically prescribed medication on or off the premises.

- d. **Drug Testing:** Random and observed breath and urine testing shall be administered in all residential programs described above with the exception of sober housing.

- e. **Telehealth:** The applicant shall have the capability and capacity to conduct services virtually for all level of services excluding residential, and Therapeutic Living services.

The applicant shall provide their written policies and procedures and describe the frequency, instruments and applications used to deliver such services.

TABLE OF RECOMMENDED MINIMUM SERVICES PER WEEK FOR IN-COMMUNITY SUBSTANCE ABUSE/CHEMICAL DEPENDENCY SERVICES	Individual Counseling	Group Counseling	Alcohol and/or Urinalysis	APPROXIMATE TOTAL HOURS PER WEEK
PHASE A “Intensive Outpatient” (12 weeks minimum)	1 session (1.0 hr.)	4 sessions (2.0 hrs. each)	3	9.0
PHASE B “Outpatient Treatment” (12 weeks minimum)	1 session (1.0 hr.)	2 sessions (2 hrs. each) 1 session (1.5 hrs. each)	2	6.5
PHASE C “Outpatient Treatment” (12 weeks minimum)	1 session (1.0 hr.)	1 session (2.5 hrs. each)	1	3.5

- Note:
- Phase durations are approximate.
 - Individual sessions may be with the individual client alone and/or with the individual client and his/her family/support members.
 - In addition to above service provision, applicant must also provide family group psycho-educational counseling services as indicated in Section 2.4.3.A.2.(5) to all MDC referred program participant friends/families and those MDC clients that have completed Phases A-C.
 - Drug testing services shall be provided for all clients who are receiving or who have received treatment from the applicant.
 - A maximum of three (3) drug hair testings shall also be administered per client.
 - Matrix of services may be modified as needed.

Other Requirements Relating to Service Activities:

4. For service activities requiring drug testing, the testing materials, training and monitoring of service quality shall be provided by the applicant. The applicant shall provide their written policies and procedures for such testing and shall describe the frequency and application of testing in treatment. Collection shall be random with gender-specific observation. The applicant shall insure that chain of custody and confidentiality issues are addressed appropriately. The applicant shall identify instrumentation being utilized to conduct such testing and shall have the ability to do laboratory confirmation testing utilizing Gas Chromatography Mass Spectrometry or Liquid Chromatography Tandem Mass Spectrometry. Laboratories conducting such confirmation testing shall be Substance Abuse and Mental Health Services Administration and/or possess College of Addiction Pathologists – Forensic Urine Drug Testing certified. Confirmation testing at Limit of Quantitation levels is preferred.

Additional consideration shall be given to applicants with the capability of administering drug testing through a variety of methodologies. The applicant's proposal shall clearly identify the drug testing methodologies to be utilized and the reason for the selection of the specific methodologies, including all supportive information.

5. Applicants proposing to provide substance abuse/chemical dependency treatment services shall have the capability to provide treatment that is comprised of individual and group counseling coupled with psycho-educational training which addresses drug and alcohol education, understanding criminal behavior, anger and stress management, social and lifestyle skills development and relapse/recidivism prevention. Offenders will be trained in treatment sessions to identify antisocial thinking, attitudes, behaviors and beliefs; to recognize high-risk situations, places and people surrounding AOD use; and practice how to deal with them in a pro-social manner. Treatment shall take into consideration the psycho-social needs of the client, shall be cognitive and behavioral in approach and shall incorporate a cognitive-behavioral curriculum that addresses the interaction of criminal thinking and substance abuse/chemical dependency using a group treatment format.
6. Applicants proposing to provide substance abuse/chemical dependency treatment services shall delineate the following in their applications:
 - a. Identification of target group(s) to be serviced by the Applicant, including any applicable admissions eligibility or exclusionary criteria.

- b. Identification and brief description of the distinguishing highlights for the evidence-based treatment model(s) to be used.
- c. Justification for the selection of the evidence-based treatment model(s).
- d. For Residential and Day treatment programs, the nature and amount of time the client will be involved in structured activities per week.
- e. (1) Identification of assessment instrument(s) to be used; (2) the purpose of the instruments; and (3) how the instruments will be implemented.
- f. Identification of training(s) to be provided to staff; the frequency of the training(s); and, supervisory oversight for quality assurance.
- g. Identification, description and references for the curriculum to be used.
- h. Identification of the program targets for change.
- i. Identification of the program's completion criteria for the clinical discharge of the client.
- j. Identification of the program's termination or discharge criteria.
- k. Identification and description of a quality assurance program that involves client care and the delivery of services, the personnel who will implement the evaluation and review, and the procedures for corrective actions for problems identified.

(For those proposing to provide more than one modality of care, please describe how responses to the above listed items will differ, as applicable, across the continuum.)

- 7. Clients in any level of treatment shall meet the most current version of the American Society for Addiction Medicine Patient Placement Criteria (ASAM-PPC 2R) for admission, continuance and discharge.
- 8. Experience working with drug courts or in providing treatment and/or other appropriate services to criminal justice clients is preferred.
- 9. Additional consideration shall be given to applicants with the capability to

provide the following services:

- Psychological/Psychiatric Evaluations
- Support Services for Dually Diagnosed
- Medication Monitoring

10. Frequent status reporting to the drug court (in writing and in person) is also required. For example, written progress reports on each client's performance (e.g., drug testing results, counseling and meeting attendance, etc.) and recommended action must be provided prior to every drug court hearing; also, the provider is required to participate in weekly meetings with the judge and other members of the MDC Team to discuss all clients on the calendar for the next drug court hearing, any offenders applying for admission, any offenders to be invited for admission, and any other issues. Additionally, the provider must provide frequently updated statistics, including narratives, graphs and charts, on client demographics (e.g., age, race, drug of choice, drug use onset, prior treatment, prior convictions, pending offenses, employment, housing, etc.) and program outcomes (e.g., drug testing results, sanctions imposed, etc.)
11. Applicants will demonstrate compliance with the State Department of Health, ADAD rules and regulations for the provision of treatment.

NOTE: Because ADAD may not have promulgated rules and regulations with respect to the provision of the services requested in this RFP, the evaluation of any applicant's conformity to this RFP may consider definitional information and description of services set forth in ADAD RFP Number HTH 440-08-1 for Substance Abuse Treatment Services.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The applicant shall possess and document knowledge, capacity, skills and experience in working with the targeted population. Applicants shall provide its minimum qualifications for program director(s). Program director is defined as the person responsible for the overall management of the treatment program(s). Applicant shall provide educational backgrounds and experience of any current program director(s).

At a minimum, applicants shall ensure that clinical supervision over treatment activities is provided by certified substance abuse counselors (CSAC) or program administrators certified pursuant to Section 321-193 (10), Hawaii Revised Statutes; or hold an

advanced degree in behavioral health science, with at least one year experience working in the field of substance abuse addiction.

CSACs and individuals who hold an advanced degree in behavioral health services preferably shall perform clinical evaluation, treatment planning and individual, group and family counseling; however, non CSACs or non-master's level providers may be utilized as long as they are directly supervised by a CSAC or master's level counselor, and are working toward certification.

Facilitators of the family psycho-educational groups at minimum shall hold a Bachelor's degree and/or CSAC with experience in group facilitation and familiarity of substance abuse issues.

Applicants shall describe its program for increasing clinical staff competencies in the acquisition of evidence-based, offender-oriented treatment. At a minimum, applicants shall demonstrate how direct care staff will be assisted in understanding and applying the risk-need-responsivity principles in their treatment of offenders, as well as the stages of change, motivating the client toward change and behavioral treatment.

- b. For those service activities requiring drug testing of both female and male clients, staffing of substance abuse counselor positions shall be representative of both the female and male gender unless otherwise agreed upon by the applicant and the MDC.
- c. Therapeutic Living Program service activities shall be provided by staff knowledgeable in substance abuse problems and experience in case management.
- d. The applicant shall conduct a State and Federal fingerprint- based criminal history record check for any person, including, but not limited to any officer, employee, volunteer or subcontractor, who performs work or services which necessitates close proximity to or unsupervised access to vulnerable clients such as children, disabled, and/or the elderly , or other program related vulnerable clients . In addition, the applicant will conduct a search of the State and National Sex Offender Registries, <http://sexoffenders.hawaii.gov> (State Sex Offender Registry) and the www.nsopr.gov (National Sex Offender Public Registry). The minimum record check will be conducted once every four years for each person, and/or at the outset of the contract period if such checks have never been conducted. Further, the applicant will ensure the continued

suitability of any officer, employee, volunteer or subcontractor to work or provide services to vulnerable clients. Results of all criminal history record inquiries conducted shall be placed in the employee's or volunteer's personnel file and shall be available to Judiciary for review. The applicant further shall have a written plan for addressing any findings that result from a criminal history record check that may affect the treatment milieu (e.g. actively under the supervision of any criminal justice agency, convicted sex offenders). Prior to commencing any work or services on the contract, the applicant shall ensure that any officer, employee, volunteer or subcontractor is suitable to be performing work or services in close proximity to or with unsupervised access to children, disabled, and/or elderly clients will be of reputable and responsible character and will not pose a risk to the health, safety, security, or well-being of clients, staff and the general public.

- e. The applicant shall submit an agency organizational chart which includes and identifies all programs that the agency/applicant oversees/administers, inclusive of subcontractors and consultants.
- f. The applicant shall conduct Child Protective Services central registry checks on any administrative and program staff and volunteers working in positions which necessitate close proximity to children or adolescents.
- g. The applicant shall have on the premises at least one person currently certified in First Aid and CPR except for sober housing services.
- h. The Applicant shall maintain documentation for each employee of an initial and annual tuberculosis (TB) skin test or chest X-ray.
- i. The staff and volunteers, if used by the applicant, shall be under the supervision of the program director or his or her designee and shall, accordingly, be trained in client confidentiality issues and program quality assurance requirements.
- j. The applicant must have sufficient and relevant staff training and development. All direct service staff shall have training in and be familiar with current procedures and practices, intake, admission, and referral of residents.
- k. The applicant shall ensure that staff receive appropriate supervision

including clinical supervision and administrative direction.

2. Administrative

- a. The applicant shall establish and implement policies and procedures which clearly identify the target population for each type of service, the program content, and methods of service delivery.
- b. Court appearances and/or testimony shall be provided as needed.

3. Quality assurance and evaluation specifications

- a. The applicant shall have a quality assurance plan which identifies the mission of the organization, what services will be provided, how they are delivered, who is qualified to deliver the services, who is eligible to receive the services, and what standards are used to assess or evaluate the quality and utilization of services.
- b. Program evaluation should reflect the documentation of the achievement of the stated goals, using tools and measures consistent with the professional standards of the disciplines involved in the delivery of services.
- c. Applicants shall agree, by contract, to be willing to undergo a program assessment and/or audit designed to assess applicant's implementation of effective practices in working with offenders with substance use problems. Based on the assessment/audit report, the vendor will develop in concert with the contracting agency, an action plan to address areas which need improvement. There should be at least one quality improvement activity completed annually.
- d. Applicants shall provide all program monitoring, assessments and/or evaluation reports completed within the last two years.

4. Output and performance/outcome measurements

- a. Output: The Applicant shall record unduplicated clients served. The unduplicated client count shall be recorded in the Applicant's quarterly reports and aggregated Year-End Report.
- b. Outcome: The applicant shall propose measurement tools by which effectiveness of the services may be determined, as well as utilize any which may be developed and utilized by the Judiciary.

5. Experience

- a. The Applicant must have demonstrated competence or qualifications to perform the required services.
- b. The applicant must have a minimum of one (1) year of experience in the provision of substance abuse treatment services, or in the provision of Therapeutic Living Program and Sober Housing services for substance abuse clients. In the absence of such experience, the Applicant shall provide supporting evidence why the one (1) year requirement should be waived.
- c. The applicant must have a minimum of one (1) year of experience in the provision of services to offenders. In the absence of such experience, the applicant will provide supporting evidence why the one (1) year requirement should be waived.

6. Coordination of service

- a. Applicants shall describe their ability to collaborate with other appropriate services, including, but not limited to, health, mental health, social, educational, vocational rehabilitation and employment services.
- b. Applicants intending to provide only part of the continuum shall also have and document appropriate linkages to other services in the continuum.
- c. Applicants shall attach letters of collaboration with other community providers to offer a holistic treatment approach to clients participating in MDC services.

7. Reporting requirements for program and fiscal data

- a. The applicant shall submit written quarterly and year-end reports summarizing output and outcome data, performance accomplishments, challenges, and actual expenditures. Quarterly reports are due 30 days after the end of the quarter. Final reports are due 45 days after the end of each fiscal year and/or at the end of the contract period, as applicable.
- b. Reports shall consist of a statement by the applicant relating to the work accomplished during the reporting period and shall include statements of the nature of the work performed, identification of

persons served by the applicant during the reporting period, identification of any immediate problems encountered during the reporting period, and any recommendations deemed pertinent by the applicant, as well as a statement of what activities are proposed to be accomplished during the next reporting period. In addition to the written progress reports, the applicant, upon request, shall be required to meet with representatives of the Judiciary to discuss the progress of the work required.

- c. Pursuant to HRS 601-21, the applicant shall comply with the requirements of the statewide substance abuse treatment monitoring program established under HRS 321-192.5. The Judiciary additionally requires that all programs which provide substance abuse treatment services, whether accredited or not accredited by ADAD, participate in the statewide data collection activities under the purview of ADAD.
- d. The applicant shall, at the completion of the contract period, submit a final written report to the Judiciary. The report shall include documentation of the applicant's overall effort towards meeting the program goals and objectives, to include information on the outcome(s) of quality improvement activities engaged in. Furthermore, the applicant shall furnish any additional reports or information that the Judiciary may from time to time require or request.

8. Pricing or pricing methodology to be used

The applicant may submit a proposal based on a "Negotiated Unit of Service" pricing methodology and/or a "Fixed Price" pricing methodology, as further described in SECTION THREE of this RFP.

9. Units of service and unit rate

- a. Applicant's proposal shall be based on a "Negotiated Unit of Service" and/or "Fixed Rate" pricing methodology. For either pricing methodology proposed, applicant's proposal should reference average expected lengths of treatment proposed in each category and provide fees for units of services as follows:

Service Activity:

Unit of Service:

In-Custody Services:

Assessments	Per Assessment
Individual Counseling	Per Hour/Session
Group Counseling	Per Hour/Session

In Community Services:

Assessments	Per Assessment
Intensive Outpatient	Per Hour/Session
Outpatient	Per Hour/Session
Family Group	Per Hour/Session

Residential Services:

Residential	Per Bed Day
Therapeutic Living	Per Bed Day
Sober Housing	Per Bed Day

The rate shall cover one hundred percent (100%) of treatment and housing (as applicable) costs for the client and shall also include provision of all workbooks and curricula material necessary to administer treatment services.

10. Methods of compensation and payment

- a. The applicant shall provide monthly invoices. Information to be included shall be client's name, date of admission, date of discharge, reason for discharge, level of service provided and number of units provided with corresponding dates and service unit billed.
- b. The applicant shall maximize reimbursements of benefits for all levels of care through Hawaii Quest and Quest Net, the client's private insurance, the Department of Human Services or any other sources of payment made known to the applicant by the client for treatment, housing or subsistence. Payments to the applicant shall be reduced by received third party payments.

2.15.4. Facilities

- A. Applicants shall provide a description of its facilities and its conduciveness to the treatment being provided.
- B. Applicants proposing to provide Residential Treatment, Therapeutic Living, and Sober Housing services shall describe and include in the proposal the following:
 - 1. How security and client accountability will be achieved.
 - 2. A site map of the facility designating all program locations, the location of each dwelling for residential, therapeutic living programs, and sober housing, and the gender for each dwelling.
 - 3. A floor plan for each dwelling laying out each bedroom for clients and resident counselor(s), kitchen, dining area, living area, bathrooms and laundry area; the number of client beds per room; the number of resident counselor bed(s) per room and the maximum capacity for each dwelling.
 - 4. The number of beds licensed for residential and/or Therapeutic Living Program services by the Office of Health Care Assurance (OHCA), Department of Health, State of Hawaii.