



**Office of the Administrative Director – Financial Services Department**

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Date: September 15, 2022

To: All Interested Providers

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

Subject: **Request for Information for Housing for Mothers and their Children in Residential Programs, The Judiciary, State of Hawaii, First Circuit RFI J23183**

The Judiciary, State of Hawaii is publishing this Request for Information (RFI) pursuant to Chapter 103F, Hawaii Revised Statutes, to obtain comments and suggestions from interested providers for the planned purchase of Housing for Mothers and their Children in Residential Programs. Draft service specifications are attached to this RFI for your review.

Written comments in response to the RFI shall be emailed to:  
[Kathi.K.Fujii@courts.hawaii.gov](mailto:Kathi.K.Fujii@courts.hawaii.gov).

The deadline for the receipt of comments is 2:00 p.m., H.S.T., on September 23, 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 period indicated in the service specifications.

**2.1 SVC SPEC TITLE: Act 246: Housing for Mothers and their Children in Residential Programs.**

**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 residential substance abuse treatment services to mothers 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 mothers, abusing or addicted to alcohol and/or other drugs the opportunity to have their minor children reside with them while attending treatment. This is needed to reduce the trauma and mental health development for both mother and child. The overall goal is to provide effective strategies, skills and knowledge to the mothers which will result in long-term abstinence and a reduction of their re-offending behaviors. The continuum includes Community Based Furlough, Residential Drug Treatment, Therapeutic Community Programs, and Mental Health Residential Programs.

**D. Description of the target population to be served**

The target population includes adult women offenders, who have minor children, referred to the Judiciary, age 18 or older, and supervised by the Adult Client Services Branches in the First Circuit of the Judiciary. The target population shall be women that have custody of their minor children, with alcohol and/or other drug related problems and/or with co-occurring disorders.

**E. Geographic coverage of service**

Service areas include the following:  
First Circuit                      Island of Oahu

The applicant shall demonstrate actual capacity to provide the required services in the service areas for which it is applying.

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

Probable funding amounts:  
FY 2023

The funding for this amount totals \$200,000. 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

Period of availability: The contract term will cover the period during Fiscal Year 2023 from execution of the contract until June 30, 2023. Funds are only available for fiscal year 2023. 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 awards of grant applications.

## **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.
  - e. Must be accredited by the Alcohol and Drug Abuse Division (ADAD).

2. For this service specification, please submit four (4) sets (original plus 3 copies) of your completed proposal to the Financial Services Division.
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 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).
5. 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)

Funds are available for only the single term of the contract. The contract term will cover the period during Fiscal Year 2023 from execution of the contract until June 30, 2023. Subject to the appropriation and availability of funds.

**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 through the State of Hawaii Electronic Procurement System (HiePRO) before the day and time specified in HiePRO.

Buyer Information:

Judiciary Contracts and Purchasing Office  
Noreen Miyasato at (808) 538-5805  
Email: [Noreen.K.Miyasato@courts.hawaii.gov](mailto:Noreen.K.Miyasato@courts.hawaii.gov)

Specifications Contact Information:

Oahu Adult Client Services, First Circuit  
Kathi Fujii at (808) 539-4510 Fax: (808) 539-4559  
[Kathi.K.Fujii@courts.hawaii.gov](mailto:Kathi.K.Fujii@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 Community Based Furlough, Residential Drug Treatment, Therapeutic Community Programs, and Mental Health Programs Residential Treatment Programs, to mothers, with alcohol and/or other drug related problems, accompanied with their children, who are ordered or directed by the court to obtain such services. Applicants may propose parts of the continuum of treatment as listed below:
  - a. 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. This includes mothers who have co-occurring disorders.
  - b. Therapeutic Living – A Therapeutic Living Program shall provide structured residential living to mothers 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. This includes women who are attending a dual diagnosis program. 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 mother 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 mother can move towards independent housing and life management along with her minor children.

- c. Community Based Furlough- A Community Based Furlough Program shall provide female inmates who will be considered for participation that meets the Public Safety Department eligibility requirements for furlough. Community housing will help ensure mothers have a stable living environment to pursue employment opportunities and continue to have access to services in the community while working towards a successful re-integration upon release. This program must provide a clean and safe place for mothers to reside (with their children), develop and promote pro-social independent living, and create a drug free lifestyle model leading to reduced recidivism. The goal for this program is to monitor the mothers in a less-restrictive, non-clinical environment.

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 for mothers and children.
  - c. Justification for the selection of the evidence-based treatment model(s).
  - d. For Residential and Mental Health 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 for mothers and children; (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 the treatment 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. 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](http://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 or other program related vulnerable 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) for adults and children.
- 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 mothers 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 mothers with or without mental health issues. 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 mothers. 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 methodology to be used**

Negotiated unit of service.

**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. Residential/Per Bed Day/Per Individual  
(To include allowances for individual and family counseling, as applicable. Also include allowances for women who have co-occurring disorders).
- b. Therapeutic Living/Per Bed Day/Per Individual
- k. Community-Base Furlough Programs

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 women and children, 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 women 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 women and children, kitchen, dining area, living area, bathrooms and laundry area; the number of women/children beds 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.