

# STATE OF ALASKA

Department of Corrections  
Division of Health and Rehabilitation Services



## SEX OFFENDER MANAGEMENT PROGRAM INSTITUTIONAL & COMMUNITY SERVICES

RFP# 2023-2000-0039

### Amendment #1

ISSUE DATE: SEPTEMBER 30, 2022

**This amendment is being issued to answer questions from potential offerors.**

**Important Note to Offerors:** You must sign and return this page of the amendment document with your proposal. Failure to do so may result in the rejection of your proposal. Only the RFP terms and conditions referenced in this amendment are being changed. All other terms and conditions of the RFP remain the same.

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COMPANY SUBMITTING PROPOSAL

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AUTHORIZED SIGNATURE

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DATE

## **Questions submitted by potential offerors and answers from the state:**

### **Question 1:** Section 3.01 Scope of Work:

In paragraph one it states, "The contractor is projected to have a case load of up to 28 offenders." The Lemon Creek Correctional Center (LCCC) program serves 24 men (when at capacity), and currently the Mental Health Clinician III and I share the caseload. My concern/feedback is that we will never have 28 men in program, and even when we have 24, I would not have all of them on my caseload. In knowing this I don't want to misrepresent myself when detailing the scope of work in my proposal.

### **Answer:**

Case load of up to 28 offenders is based on the bed count available at LCCC. Potential offerors shall submit their proposal based on this count without misrepresentation.

### **Question 2:** Section 3.01 Scope of Work:

It states in paragraph two that "The contractor will work directly with, and receive clinical supervision from, the onsite Mental Health Clinician III (State employee) in charge of the LCCC treatment program." What does clinical supervision include? Prior to becoming a Level 1 Approved Provider I sought clinical supervision from Dr. Lazur which included monthly staffing. Is this what is intended, and is it for all levels of approved providers?

### **Answer:**

The contractor and MH Clinician III should be having case staffing's to ensure they are on the same page for those housed in the unit. If on a level that no longer requires supervision, it would not be needed, other than to receive it for licensing concerns.

**Question 3:** Sec. 3.01 (a) Program Participation, reads "Referrals will be made through the contractor's on-site clinical supervisor, the LCCC Mental Health Clinician III assigned to the program." I'm assuming this is for LCCC referrals only, and not field probation? And that it is in reference to how the MHIII Clinician divides the caseload, as currently all referrals come through the Criminal Justice Planner.

### **Answer:**

Yes, this refers to LCCC only. MH Clinician III will get referrals from the SOMP Criminal Justice Planner.

**Question 4:** Sec 3.01 (h) Association for the Treatment of Sexual Abusers (ATSA) Conference, (pg. 12) reads "Contractor will be required to take all recommended classes as prescribed by the department in order to be reimbursed." Who is it that will determine what classes are to be prescribed, and are those negotiable depending on past ATSA courses taken/or needs of the LCCC and community programs?

### **Answer:**

The department will leave it open as to what sessions can be taken. The contractor may choose which ones would be relevant to their practice.

**Question 5:** Sec 3.02 Contract Term and Work Schedule:

Page 13, first paragraph, reads "The agreement is projected to cover 28 offenders over 40 hours per month..." It's noted on page 12 that "50% of the time in the community. 50% of the time in the institution for a full 40 hours of work per week..." Can you clarify the difference?

**Answer:**

The former is referring to a monthly time requirement. The latter is showing that the weekly hours should be split relatively evenly.

### **Changes to the RFP:**

**Change 1:**

SEC 3.06 Prompt Payment for State Purchases is removed in its entirety.