**County of Winnebago**

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| **County Administration Building**  **404 Elm Street**  **Rockford, Illinois 61101** | **Ann Johns**  **Director of Purchasing**  **Phone: 815-319-4380**  **Fax: 815-319-4381** |

**July 16, 2018**

# ADDENDUM TWO

**INMATE HEALTH CARE SERVICES PROPOSAL NUMBER 18P-2140**

*Proposers are required to indicate on their Proposal Form 18P-2140 (Page 99) that they have received and acknowledged this* ***RFP Addendum #2*.**

Any questions should be directed to the Purchasing Department, 404 Elm Street, Room 202, Rockford, IL 61101 or by telephone 815-319-4380, or email Ann Johns at [purchasing@wincoil.us](mailto:purchasing@wincoil.us)

**THE FOLLOWING ATTACHED EXHIBITS ARE PART OF RFP ADDENDUM 2:**

* Exhibit A – JDC Current Health Care Contract
* Exhibit B – Jail Current Medical Contract
* Exhibit C – Jail Current Mental Health Contract
* Exhibit D – Jail Short-term PT Contact

**BELOW IS THE FIRST SET OF RFP QUESTIONS WITH ANSWERS**:

1. What is the current cost of Physical Therapy?

**Jail:** **They have been seeing around 40 inmates each month that is 4 weeks twice a week. Cost $4,400.00**

1. What does copies of contracts w/local hospitals mean?

**If you have copies of contract with local hospitals, please include including affiliation agreements. If you do not current have contracts with local hospitals, state that this is Non-Applicable.**

1. How many hours a week is the Physician time for inmates? **Jail:** **8 hours per week**
2. How is Mental Health covered?

**Services are contracted by separate contract with ACH for Jail. There is no resident or in-house provider for these services.**

1. Will there be an Addendum for the correct staffing plan. **Yes, See Addendum 1.**
2. Can Nursing Techs (CNA’s) or Medical Assistants be used to reduce the number of LPN or RN hours. **Yes, we are willing to look at that.**
3. How many hospital days are tracked? **Correctional staff tracks if someone is sent out for emergency related transports.**
4. Does the University handle the prescriptions? What Pharmacy is used? **Yes, Correct Rx**
5. Are we responsible for HIV treatment? **See revised section C44 in Addendum 1.**
6. Is Psychiatry currently provided by the same Vendor? If so, how many hours?

**Not at the Jail we have a different provider 2 hours per week**

1. Is there a capability for Tele-Psychiatry?

**Jail:** **Not at this time, however we are open to consideration.**

1. Who determines suicide watch at In-Take? **This both the nursing staff at intake and or the corrections officer assigned to property / booking**
2. How many hours are needed for dental? **8 hours per week**
3. Does the nursing staff for Juvenile come from the jail? **Yes, at times with current Contractor**
4. Is inmate insurance billed?

**Currently, Jail does not bill them. We would prefer the sleeted Proposer do this type of billing for the contract.**

1. Co-Pays- Who collects? Please clarify. **County collects**
2. Will you be providing a disaster plan? **Yes, after the Vendor is selected.**
3. Cam we ask subsequent questions after initial question deadline of July 12?

**Yes - 2nd round of questions deadline has been added of July 20th by 10:00 with answers being provided by July 25th by 2:00 pm.**

1. Is info in agenda considered bonding? **Yes, if included in Addendum #1.**
2. We note that the minimum qualification for a proposal for the Juvenile Detention Center is 3 years of experience at a similar facility and that 3 references are requested. Are you requiring that proposers have experience in a minimum of 3 similar juvenile detention centers?

**JDC: Experience with one juvenile detention center for a minimum of one year is adequate.  One reference specifically from a detention center is adequate.**

1. Please provide the current contract or agreement between the County and/or the Sheriff’s Office and the University of Illinois, College of Medicine under which juvenile detainee and inmate health care services are currently provided. **See Addendum 2 - Exhibits A to D**

1. Please confirm the schedules of the following staff members:
   1. Correctional Staff: **8 hours, 12 hours, or a combination of both**
   2. Health Care Staff: **8 hours, 12 hours, or a combination of both**
   3. Please provide a breakdown of the positions that work both if a combination exists. **Already provided.**
2. Please provide any special arrangements (formal or informal) or contracts with local hospitals and specialty providers regarding inmate services, along with any amendments and attachments.

**Jail: Jail doesn’t have any UIC does**

**JDC: Currently no special arrangements exist with any of the three local hospitals.  Mercy Hospital on Rockton Avenue is our preferred hospital because of its proximity to the facility.**

1. Please identify whether the following services are available on-site or off-site, the frequency (hours or visits per week/month), and who provides the services for:
   1. Dental  **Jail: Yes, 8 hours per week**
   2. Oral Surgery **Jail: None**
   3. Optometry **Jail: None**
   4. Laboratory **Jail: Yes – Lab draws are done 24x7. Sent to Univ. of Illinois Hospital for processing. Stat labs sent to Swedish American Hospital.**
   5. Radiology (specify mobile or fixed equipment) **Jail:** **Mobile X Available 24x7**
   6. Fluoroscopy **Jail & JDC: None**
   7. Mammography **Jail & JDC: None**
   8. Dialysis  **Jail: No patients sent to DaVita**
   9. Chronic Care Clinics (please specify which clinics and frequency)

**Jail: Chronic Care patients are reviewed monthly and scheduled to be seen as determined by medical necessity. Chronic Care includes patients with Diabetes, Hypertension, HIV, and Seizure Disorders.**

* 1. Specialty Clinics (please specify which clinics and frequency) **Jail: PT**
  2. OB/Prenatal care

**Jail: Routine OB/Prenatal Care provided internally. If patient identified as High Risk they are sent to Maternal Fetal Medicine at Swedish American Hospital**

**JDC: None of the listed services is currently available o site at JDC.  We do not know nor have access to the data requested in subgroup 1, 2, or 3.  We do not have any data on the events requested in subgroup 4 but would represent that they are infrequent and generally less than one per month**

1. Please provide the current employees’ hourly rates and/or salaries by discipline (MD, RN, LPN, etc.). Also, please provide years of service or hire dates. **Jail:** **Not available**
2. Please provide the amounts relating to staffing withholds or performance withholds incurred by the incumbent by year for the last three years. **Jail: Not available**
3. Please provide the DOLLARS spent on offsite services by year for the last three years by the categories below: **Jail**: **We have never kept records based on these categories**

* Hospitalization **NA**
* Emergency room visits **NA**
* Specialty visits **NA**
* Outpatient surgeries **NA**
* Diagnostics **NA**

1. Please provide the offsite EVENTS by year for the last three years by the categories below: **Jail:** **We have never kept records based on these categories**

* Hospital days **NA**
* Hospital admissions **NA**
* Emergency room visits **NA**
* Specialty visits **NA**
* Outpatient surgeries **NA**
* Diagnostics **NA**

1. Please provide the following by year for the last three contract years:

**Jail: Information not readily available and varies.**

1. Average monthly number of patients on HIV medications
2. Average monthly number of patients on psychotropic medications
3. Average monthly number of patients on hepatitis medications
4. Average monthly number of patients on blood products relating to hemophilia
5. HIV medications dollars
6. Psychotropic medications dollars
7. Hepatitis medications dollars
8. Blood products relating to hemophilia dollars
9. For each of the last three years, please provide the number of cases and total costs of cases exceeding $10,000, $25,000, and $50,000 associated with offsite services.

**We have never kept records based on these categories**

1. Will vendors be financially responsible for:

* prior to booking cases, **Jail:** **No**
* bedside bookings, **Jail:** **Yes**
* pre-existing conditions? **Jail:** **Yes, if it is needed**

**JDC: To the extent that the minor comes into the facility with a pre-existing condition the provider will be responsible for the continuation of care for that minor.**

1. Please provide the TOTAL dollars spend on pharmacy by year for the last three years.

**Jail: FY16 $147,000, FY17 $152,000, FY18 $156,000**

**JDC: None**

1. Please confirm that Vendor will be responsible for contracting with all specialty services providers for on-site and off-site services.

**Jail: Yes**

1. Will Vendor be responsible for contracting with an ambulance service, or will the vendor use a County system?

**Jail: This is open for offer to explain in their proposals.**

**JDC: We would anticipate using the services of the Rockford Fire Department for emergency medical transport.**

**Pharmaceutical:**

1. How many prescriptions per month on average are ordered for the inmates in your facility?

**Jail: Not available**

**JDC: Approximately 35% of the minors in the facility are on medications on any given day.  The provider is not responsible for prescription medications as they are brought in by the minor’s parent, probation officer or legal guardian.  The provider will be responsible for verifying, dosing, and distributing that medication.**

1. What percentage of your medications ordered each month is stock vs. patient-specific prescriptions?

**JDC: N/A**

**Jail: The majority of medications are patient specific. Stock only antibiotics and narcotics.**

1. What are the pricing terms of your current pharmacy agreement (i.e., average wholesale price less a discount, or acquisition cost plus a dispensing fee, etc.)?

**Jail: Unknown**

1. Please provide three (3) years of drug utilization preferably in an electronic format.

**Jail: Not available**

**JDC: N/A**

1. Of inmates receiving Hepatitis C treatment, what is the nature of the treatment?

**Jail: No Inmates have been on Hepatitis C Treatment**

**JDC: None**

1. How are current medication orders transcribed to pharmacy?

**Jail: Online ordering**

**JDC: The nurse calls and faxes orders to the local Walgreen’s pharmacy.  This pharmacy is chosen for the proximity to the Facility and their ability to assist in billing to the minor’s medical card.  We are open to alternative providers as long as we can obtain the medication from them in a timely manner.**

1. How are medications delivered and dispensed: patient-specific or stock/pill line?

**Jail: Pharmacy mails the medications and the nurses dispense in the Pods.**

**JDC: In general the parents, legal guardians, or probation officer drop the medication off after the minor is accepted into the facility.  Refills are brought in by those same individuals after the nurse notifies them that a refill is needed.  In some cases, if there are transportation issues for the parent, the Superintendent or Assistant Superintendent will make arrangements for a staff member to pick up a prescription at Walgreens.  This can only be done if the prescription does not have a co-pay.**

1. Is there a self-administration or “keep-on-person” (KOP) medication system? If so, please provide a list of KOP medications approved by facility.

**Jail: Yes, inmates are allowed to keep albuterol inhalers, anything they order from the commissary and creams or ointments**.

**JDC: Not allow for self administration due the age of the individuals**

1. Please provide the average number of prescriptions per inmate.

**Jail: Varies**

**JDC: Do not have this information other than approximately 35% of the population on any given day is on one or more prescription medications.**

1. Does your current pharmacy provider offer drug destruction for outdated/expired drugs? If so, please describe the destruction policy.

**Jail & JDC: No, handled internally and is rarely needed.**

1. Does your current pharmacy provider offer monthly/quarterly pharmacy consultation/inspection? If so, please describe?

**Jail: Yes, quarterly visits**

**JDC: N/A**

1. Does your facility have a DEA License? If so, whose name is under licensure?

**Jail: No**

**JDC: No**

1. Does your facility have a current state pharmacy license?

**Jail: No**

**JDC: No**

1. Where are inmate’s personal medications kept upon booking?

**Jail: Yes if the medication is going to be dispensed medical places it in the pharmacy. If it is a controlled substance and will not be given. it sealed in a plastic bag and released once the defend leaves. Over the county types are placed in private property.**

**JDC: If a minor comes in with their medication it is inventoried and then placed on the counter in the control room with the inventory sheet.  The nurse who comes in following the intake will verify the medication, inventory count, dosage, and then provide it to the minor according to the dosage schedule.  The provider will need to establish their own protocols for this process as well as how to handle the provision of asthma or other as needed emergency medications.**

1. Confirm that Correct Rx is the contracted pharmacy? Is this contract directly with the Sheriff’s Office? Please provide the contract with the current pharmacy vendor? Will proposers be required to use the current pharmacy vendor?

**We have no contract with any pharmacy, we want the Proposer’s to select.**

1. Please provide all terms and conditions regarding purchases, returns, and management fees that will be applied regarding pharmacy vendor. **N/A**
2. How are detainees screened for Risks and/or Mental Health Concerns at Intake?

**Jail: Nursing staff provider does a short screen consisting of: Whether you are thinking of hurting yourself? Whether you have ever attempted to hurt yourself in the past? Have you ever cut or mutilated yourself? If they answer yes to the questions we may decline the intake until they are cleared by a mental health professional at a hospital.  Most of the time the person is placed on suicide watch until they are evaluated by onsite mental health worker.**

**JDC: The detention center and our current mental health provider have a short screen consisting of: Whether you are thinking of hurting yourself? Whether you have ever attempted to hurt yourself in the past? and Have you ever cut or mutilated yourself? If the minor answers yes to the first question we decline the intake until they are cleared by a mental health professional at a hospital.  The other two questions will result in more probing questions and may lead to the minor being on suicide watch until they are evaluated by the onsite mental health worker.**

1. How are mental health patients identified/referred for services?

**Jail: Staff may refer them, or they may request to be seen. Sometimes we have court orders, but we diagnose them.**

**JDC: Staff may refer minors for services or minors may request to be seen. The provider will also be responsible for Court Ordered mental health assessments.**

1. Please provide the following Mental Health information:
2. Number of completed suicides in the last 24 months.
3. Number of attempted suicides in the last 24 months.
4. How many patients are placed on suicide precaution on average per month?
5. Are patients deemed suicidal kept on precaution at the jail?
6. Number of inmates placed in segregation in last 24 months. What role will the [Vendor/medical provider] take in segregations?
7. Are psychiatric restraint devices used at the facility? If so,
   * 1. Are these restraints beds or chairs?
     2. How often were restraints used in the last 24 months?
     3. Why were they used?
8. What role will the [Vendor/medical provider] take in detoxification?

**JDC answers below:**

**A.    No successful suicides in the last 24 months**

**B.   No suicide attempts which resulted in need for medical attention in last 24 mnths.**

**C.    We do not keep stats but on average approx. 2 minors on suicide precautions at any given time.**

**D.    Generally, minors who are actively suicidal are hospitalized outside of the facility.**

**E.     We do not use segregation for mental health issues**

**F.     No**

**G.    Our procedures, and State standards, require that all intoxicated minors be medically cleared at a hospital/ER prior to admission.  Once admitted, the provider will be expected to treat the minor for their ongoing medical needs.**

**Jail answers below:**

1. **One**
2. **2016 - 16 that were actual attempts, 2017 had 3, 2018 year-to-date had 3**
3. **2016 average of 84, 2017 average of 79, 2018 year-to-date average of 77**
4. **Yes**
5. **The Jail does not keep that statistic based on how many inmates were placed in Segregation. There would be no more contact with medical unless there was a medical need. However, the mental health staff would be required to see them once a week.**
6. **Yes**

**i. Chairs**

**ii. In 2016 we had 76 times we reported the use of restraints to DOC, in 2017 we had 54 times and 2018 year-to-date 14 times**

**iii. Inmate posing self-harm**

1. **Monitor and determine housing/on-camera and address appropriate medication and/or potential hospitalization**
2. Please provide the following information regarding psychotropic medications:
3. How many patients are currently on psychotropic medications?
4. How many patients were prescribed antipsychotic medications for the last 24 months, on average per month?
5. How many patients does the facility average per month on psychotropic medications?

**Jail: N/A medical may have this information**

**JDC: We attempt to avoid the use of psychotropic medication in the facility but we will do so if it is prescribed and deemed necessary by the minor’s outside doctor.  The number of minors on this type of medication is small.**

1. Please provide the five most frequently prescribed psychotropic medications? **Unknown**
2. Are patients deemed too acute to house in the jail sent to a public mental health facility or does the jail currently have a contract with a private mental health facility? If yes, how many mentally ill patients were sent to this jail's appropriate catchment mental health facility per month on average?

**Jail: We house the inmates we can. No contract with any mental health facility.**

**JDC: See 29D**

1. Does the facility provide and/or encourage group services?

**Jail: Not currently**

**JDC: We are open to these services and we have done them in the past.  Our current mental health staff prefers one-on-one sessions.**

1. How are medications currently made available to inmates on release from the correctional facilities?

**Jail: They take what they had provided to use. If they are going to another Facility we, may, provide them with 3-day supply.**

**JDC: If there is a planned discharge/release, the nurse will inventory the minor’s medication and leave it out for the staff to release to the responsible adult or agency which is picking up the minor.  If the release was not planned for the JDC staff completes the inventory and leaves the sheet for the nurse to file in the minor’s medical file.**

1. Does the County's standard operating policies provide that inmates who are receiving mental health or medical services encounter medical or mental health staff as they are released from facilities? Please describe the process. **Jail & JDC: No**
2. What is the percentage and number of inmates with estimated release dates? Are those inmates predominantly sentenced?

**Jail: See previous information**

**JDC: Everyone eventually leaves detention, so 100%. Average length of stay is 30 days.**

1. How many planned or predicted releases occur each day?

**Jail: We have about 4 to 6 predicted release each day. Some are time served, others are released to another agencies and some have met their bond based on category B offences.**

**JDC: Only about 1% of the minors in the facility are sentenced here for a determinate stay.  The minors generally leave as the result of court action, which takes place on the day of their release.**

1. Is the County open to alternatives to addressing the psychiatric needs of the juveniles?

**Jail: Yes, in some cases.**

**JDC: Detention is open to discussing alternatives such as tele-psych or something similar.  We have to be able to provide the minors with medication reviews/prescriptions as well as the Court with the reports and information they need.  If this can be done in a way other than through what we requested, we are open to the idea.**

1. Is the staffing stated in the RFP mandatory? In other words, can we propose an alternate staffing plan to meet facility needs?

**Jail: Yes, we are willing to consider alternatives.**

**JDC: Again, we are willing to consider alternatives. JDC staffing is minimal already so not certain how it could be modified further but we are willing to explore the possibilities.**

1. Please provide a breakdown of the Jail ADP. **90% male and 10% female**
2. Is the mental health services worker able to have a Master’s degree in a related field of mental health, or must it be an MSW?

**Jail: Must be a MSW**

**JDC: The level of education we are requesting is so the person can complete and sign the Mental Health Assessments for the Court.  This level is what our current provider indicates is required.  If a master’s Level person in a related field is qualified to be a counselor and make mental health assessments, then we would accept that.**

1. How long does the background check take, and what is required?

**Background check process has two steps.  The criminal background check is generally completed within 48 hours after submission.  The Child Abuse and Neglect Tracking System (CANTS) check can take as long as a month.  We cannot do the CANTS check locally.  They are run by DCFS in Springfield and we have had turnaround times of less than an hour to longer than 30 days.**

1. Who provides the ID badge for staff? (page 7, section e) **Jail & JDC: WCSO**
2. How many hours of orientation class (page 8, section h) are required? Please provide the agenda for that class.

**Jail: N/A**

**JDC: N/A**

1. Page 9, section o, discusses training of jail staff. Are we correct in that the proposer will provide training and jail staff must purchase their own card (i.e. CPR card)?

**Jail: We will provide the cards for staff.**

**JDC:** **We will provide the cards for staff.**

1. Is the county open to Continuous Quality Improvement meetings on a quarterly basis?

**Jail: No, we will need the meeting monthly for at least the first six months the drop down to every other month.**

**JDC: N/A  (We have no objections to quarterly meetings after the first six months.  Initially, we believe they will need to happen probably monthly.)**

1. Page 16, section G ii describes review of services. Who selects the reviewer, and who is expected to pay for the review? **N/A**
2. Who is the current pharmacy provider? Is the County open to switching pharmacies?

**Jail: Correct RX and yes, we open to switching**

1. Instead of audited financial statements (page 18, section m iii), can we provide a letter of credit from the bank to prove good financial standing? **Yes**
2. Please confirm psychiatry time per week is requested for the Jail. **2 hours per week**
3. Page 41, section A25, Financial Requirements, states that the proposer is responsible for the co-pay for health care services (g). Please elaborate on what is expected in that regard. **Disregard the Co-Pay requirement and section of the RFP**
4. The contract termination clauses seem to portray conflicting information. Please confirm what is expected for a termination clause.

**COUNTY: The Director of Purchasing could not locate a conflict in the information. See RFP - C48 for the details on Termination. Please elaborate in the next RFP Round of questions so we can clarify, if needed.**

1. On page 36, it has a statement, “Providers shall include a narrative and display of all applicable screens.” What is meant by “display of all applicable screens”? **COUNTY:** **Provide examples of any proposed software screen shots/features.**
2. May the EMR be implemented 3 months AFTER integration, not upon medical contract start up? **Yes, EMR is optional; startup can be negotiated with selected Proposer.**
3. Page 36 states “Proposer’s electronic recordkeeping system must be compatible (uploading and downloading) with other possible applications and the cost will be the responsibility of the selected Proposer.” What are the other possible applications? **Jail & JDC:** **Continue with current paper records and files.**
4. What are WCSO’s IT security requirements and standards that the EMR software must meet? **COUNTY:** **Unknown at this time, we will work with the selected Proposer.**
5. On page 42 A1 5. b., it states “Maintain a comprehensive and fully compliant electronic medical record keeping system.” What must be done to be “fully compliant”?

**COUNTY: The County would expect the select Proposer’s EMR has to comply with whatever requirement there is for electronic medical records for a correction facility.**

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# END OF ADDENDUM TWO