



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Solicitation

NUMBER
DJS130001

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
TARA LYLE 304-558-2544

VENDOR

RFQ COPY
 TYPE NAME/ADDRESS HERE

SHIP TO

DIVISION OF JUVENILE SERVICES
 SECOND FLOOR
 1200 QUARRIER STREET
 CHARLESTON, WV
 25301 304-558-6029

DATE PRINTED
06/17/2013

BID OPENING DATE: 06/27/2013 BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	1	LS	948-76	ADDENDUM NO. 1 SEE ATTACHED PAGES. END OF ADDENDUM NO. 1 PSYCHOLOGICAL & PSYCHIATRIC MENTAL HEALTH SERVICES		
***** THIS IS THE END OF RFQ DJS130001 ***** TOTAL:						

SIGNATURE		TELEPHONE		DATE
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE		

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

SOLICITATION NUMBER: DJS130001**Addendum Number: 1**

The purpose of this addendum is to modify the solicitation identified as DJS130001 ("Solicitation") to reflect the change(s) identified and described below.

Applicable Addendum Category:

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

Description of Modification to Solicitation: Responses to vendor questions and sign-in sheets from the mandatory pre-bid meeting attached. The bid opening remains 06/27/2013 at 1:30 pm.

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A

QUESTIONS:

- Q1: Page 19 -4.1.1. Staffing
Are psychological and therapeutic services expected to be provided on-site?
- A1: Yes, though there may be some exceptions in rare circumstances.
- Q2: Page 20 -4.1.1.2 Psychiatrist
When on-site visits to all juvenile facilities are conducted quarterly by the psychiatrist, what compliance standards are supposed to be followed?
- A2: NCCHC, PbS and ACA.
- Q3: Are there set procedures in place for this review?
- A3: We do not have set procedures at this time but these are being worked on.
- Q4: Will the psychiatrist's time be reimbursed for NCCHC, PbS, and ACA Audit preparation and participation?
- A4: The psychiatrist should not need to do anything extra for an audit; his reviews would be part of the medical record.
- Q5: It is stated that the Psychiatrist assigned to the Sex Offender Unit must have additional experience working with juvenile sex offenders. Additional experiences include the following: intensive inpatient unit services, residential correctional unit treatment, and sex offender specific assessments. Is this correct?
- A5: Yes, this is correct on additional experiences.
- Q6: Page 20 -4.1.1.3 Statewide Administrator
Currently, the Statewide Administrator position is reimbursed as a Full Time Employee (FTE). Since this will change to an hourly reimbursement, what is the process for reimbursement for hours over forty?
- A6: There will be a Blanket Release Order (WV-39) to authorize all hours over 40 at the standard hourly rate.

Q7: Are these hours required to be pre-approved?

A7: Yes, these hours should be pre-approved.

Q8: How will emergency consultations be reimbursed?

A8: In an emergency situation, the director of the facility will know the emergency existed and sign off on the release order upon their return to the facility.

Q9: Page 25 -4.1.2
Will PbS standards be applicable for all contract locations?

A9: Not in the Youth Reporting Centers but they are being integrated into DJS policies for the other centers.

Q10: Page 27 -4.1.2.10
Since this is an hourly based contract, the vendor is responsible for any leave benefits provided for their employees. Is this correct?

A10: Yes.

Q11: If yes, then should this cost be built into the hourly base rate per position?

A11: Yes.

Q12: Page 27 -4.1.2.11
The Youth Report Centers may not require services on WV State Holidays and other emergency situations. What is the definition of "emergency situations"?

A12: An example of an emergency situation would be inclement weather causing school to be cancelled or power outages in the center. An emergency would be a situation causing the center to be closed or to not have residents in attendance. Billable hours are for the residents.

Q13: What state holidays are observed?

A13: All state holidays are observed by staff in Youth Reporting Centers so they are closed on holidays. There are ten to fourteen holidays per year per year. A calendar of these holidays can be provided to the Vendor at the beginning of each year.

Q14: For clarification purposes, the vendor is responsible for planning staff to be available even though facility operations may not permit them to provide billable service hours. Is this correct?

A14: Yes, in an emergency situation that is beyond the control of the Agency.

Q15: Page 28 -4.1.2.12

Is the vendor responsible to submit pricing per position to include the cost of supporting continuing education for all staff?

A15: Yes, for all staff that must complete CEUs to maintain their licensure.

Q16: Page 32 -8. Travel

There are several positions in the contract that require a significant amount of travel. How will travel time be recovered by the vendor?

A16: In the hourly rate.

Q17: When the vendor is required by DJS to train and or attend training, are employee time and travel reimbursed?

A17: Time in training required by the Agency is covered as billable hours. Travel and travel time cannot be billed and is part of the hourly rate.

Q18: Should this cost be added in on the hourly rate per position?

A18: It is stated in Section 8 that any anticipated mileage or travel costs must be added to the flat fee or hourly rate on the Vendor's bid.

Q19: It is stated in section 8 that the vendor can charge mileage or travel costs to a flat fee, how is that expense to be submitted on the pricing page?

A19: This bid is not a flat fee bid so anticipated travel would have to be part of your hourly rate.

Q20: Is this supposed to be added in to the hourly rate per position based on the amount of travel required for that position?

A20: Yes.

Q21: Page 35 -Attachment #1

On attachment #1, there is a list of current facilities where services are being provided. Are there plans to change these locations?

A21: Population in these facilities is subject to change, requiring a change in the staffing needs. The only facility that may change physical location is Harriet B Jones.

Other Information:

1. The bid opening remains June 27, 2013 at 1:30 pm.
2. No additional questions will be accepted on this RFQ.

SIGN IN SHEET

Request for Proposal No. DJS 130001

PLEASE PRINT

Date: 6/14/2013

* PLEASE BE SURE TO PRINT LEGIBLY - IF POSSIBLE, LEAVE A BUSINESS CARD

FIRM & REPRESENTATIVE NAME	MAILING ADDRESS	TELEPHONE & FAX NUMBERS
Company: <u>Process Strategies</u>	<u>1418 A MacCormac Ave SW</u>	PHONE <u>304-348-1419</u>
Rep: <u>Sandy Mallory</u>	<u>Charleston, WV 25303</u>	TOLL FREE
Email Address: <u>smallory@highlandhosp.com</u>		FAX <u>304-348-1016</u>
Company: <u>West Virginia Behavioral Healthcare Providers Association</u>	<u>405 Capitol Street, Suite 900</u>	PHONE <u>304-343-0728</u>
Rep: <u>Dolores Lowe</u>	<u>Charleston, WV 25301</u>	TOLL FREE
Email Address: <u>dolores@wvbehavioralhealth.org</u>		FAX <u>304-343-0760</u>
Company: <u>PSIMED</u>	<u>P.O. Box 9569</u>	PHONE <u>304-344-8515</u>
Rep: <u>Rita Pawley</u>	<u>So. Clas. WV 25309</u>	TOLL FREE
Email Address: <u>rpawley@psimedinc.com</u>		FAX <u>304-344-8519</u>
Company: <u>WVDJS</u>	<u>1200 Quarrier St.</u>	PHONE <u>304-558-9800</u>
Rep: <u>Sheila Dolin</u>	<u>Charleston, WV 25301</u>	TOLL FREE
Email Address: <u>sheila.f.dolin@wv.gov</u>		FAX
Company: <u>WV DJS</u>	<u>1200 Quarrier St</u>	PHONE <u>304-558-9800</u>
Rep: <u>Jason Wright</u>	<u>Chas WV 2530</u>	TOLL FREE
Email Address: <u>jason.f.wright@wv.gov</u>		FAX

Tara Lyle
Senior Buyer
WV Purchasing Div.
Tara.L.Lyle@wv.gov

2019 Washington Street, E
Charleston, WV 25309

304-558-2544
304-558-4115 fax

SIGN IN SHEET

Request for Proposal No. DOS130001

PLEASE PRINT

Date: 6/11/2013

* PLEASE BE SURE TO PRINT LEGIBLY - IF POSSIBLE, LEAVE A BUSINESS CARD

FIRM & REPRESENTATIVE NAME	MAILING ADDRESS	TELEPHONE & FAX NUMBERS
Company: <u>PSIMED</u>	<u>1632 Kenewina Blvd. E Charleston WV 25311</u>	PHONE <u>304-344-8515</u>
Rep: <u>Terry Rusin, Trudi Blaylock, Margerita Pauley</u>		TOLL FREE <u>N/A</u>
Email Address: <u>trusin@psimedinc.com, tblaylock@psimedinc.com, rpauley@psimedinc.com</u>		FAX <u>304-344-8519</u>
Company: <u>DJS</u>	<u>1200 Quarrier</u>	PHONE
Rep: <u>Darlene Hovatter</u>	<u>Darlene Hovatter</u>	TOLL FREE
Email Address: _____		FAX
Company: <u>DJS</u>	<u>1200 Quarrier</u>	PHONE <u>558-9800</u>
Rep: <u>Debi Gillespie</u>	<u>[Signature]</u>	TOLL FREE
Email Address: _____		FAX
Company: <u>DJS</u>	<u>1200 Quarrier St.</u>	PHONE <u>558-9800</u>
Rep: <u>Sandra Woods</u>	<u>Sandra Woods</u>	TOLL FREE
Email Address: _____		FAX
Company: <u>DJS</u>		PHONE <u>304-556-9800</u>
Rep: <u>Rick Bostic</u>	<u>Rick Bostic</u>	TOLL FREE
Email Address: <u>Rick.D.Bostic@WV.gov</u>		FAX

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: DJS130001

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Company

Authorized Signature

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.