



State of Rhode Island
Department of Administration / Division of Purchases
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ADDENDUM # 1

RFP# 7565519

TITLE: Regional Discharge Planning Services to Improve Outcomes for Individuals Leaving Incarceration

Submission Deadline: NOVEMBER 15, 2017 at 11:00 AM (Eastern Time)

Addendum Description:

- A. Responses to Questions Received at 10/12/17 Pre-bid Conference,
- B. Responses to Questions Received via email by 10/17/2017 at 05:00 PM ET, and
- C. 10/12/17 Pre-bid Conference Sign-in Sheet & PowerPoint Presentation Slide Deck

A. Responses to Questions Received at 10/12/17 Pre-bid Conference

1. **Question:** Are regional discharge planning services currently in place?
Answer: Yes. The state is split into three regions: Northern/Western Rhode Island, Greater Providence, and Kent and South County.
2. **Question:** Can you speak to the agencies that are currently providing regional discharge planning services?
Answer: Yes. Community Care Alliance (CCA) and Comprehensive Community Action Program (CCAP) provide discharge planning services for Northern/Western Rhode Island. OpenDoors provides discharge planning services for Greater Providence. Initially, the award for Kent and South County was made to the Newport County Mental Health Center, but it was subsequently split, with CCA taking Kent County and OpenDoors covering South County and Newport.
3. **Question:** What was the total funding for these programs previously?

Answer: The previous contracts for these services totaled \$850,000, but they also included pre-release services, which is not included in the scope of work described in this RFP.

4. **Question:** Will vendors be expected to provide their own system for data collection, or will they be expected to use RIDOC's?

Answer: In all likelihood, data collection will involve both RIDOC's Transition from Prison to Community Data System (TPCDS) and the service provider's system. Providers will certainly be given access to TPCDS, and RIDOC is agnostic as to how data is collected, as long as it is collected and shared with the department.

5. **Question:** Is there a set funding level for this procurement?

Answer: Yes. The funding level is \$700,000 and is contingent on vendor performance and the availability of funds.

6. **Question:** Can you say anything about when the RFPs for specialized discharge planning services will be released?

Answer: No. These contracts are managed by separate units within RIDOC.

7. **Question:** Is there a set protocol for specialized discharge planning services interfacing with regional discharge planning services?

Answer: Yes. Once cases have been referred to specialized discharge planners, they will be responsible for the entire plan. There is no protocol for co-planning.

8. **Question:** Do you have any statistics available on the caseloads for the different specialized discharge planning services?

Answer: No.

9. **Question:** Will service providers have access to direct reports on the data that they've entered into RIDOC's data system?

Answer: Yes. RIDOC will share data that providers have entered into its data system.

10. **Question:** Does RIDOC have any baseline data on the metrics included in this RFP?

Answer: While RIDOC has monthly reports on discharge planning caseloads and the number of individuals that receive a discharge plan, it has not systematically collected data on the other metrics mentioned in this RFP. Therefore, the setting of performance benchmarks and targets around these metrics will be a collaborative process.

11. **Question:** Is RIDOC able to share the baseline data that it currently has?

Answer: No. The data is incomplete and – for that reason – would not be helpful.

12. **Question:** Can RIDOC share data related to the anticipated discharge planning caseload?

Answer: Yes. As page 11 of the RFP details, RIDOC expects roughly 250 individuals to be released every month: 60 to Northern Rhode Island, 100 to Providence and the East Bay, and 90 to Southern and Western Rhode Island.

13. **Question:** Can RIDOC share how many of these individuals received a discharge plan?
Answer: Roughly 85% – 90% of released individuals are assigned a discharge planner and receive some type of plan. This RFP is trying to account for the comprehensiveness of those plans and the success of the referrals contained within them.
14. **Question:** Are community transition coordinators now responsible for delivering exit packets to released individuals?
Answer: Yes. This is a recent policy change which is meant to ensure that exit packets reach released individuals and encourage coordination between community transition coordinators and probation and parole officers.
15. **Question:** We have tried to get ISBE bonus points as described in the RFP but have been unable to because it is impossible to receive certification as a non-profit. What can we do?
Answer: To be considered for any bonus points for ISBE, complete the ISBE form provided and per the instructions in Appendix A. For further information, visit the Office of Diversity, Equity & Opportunity's website, at <http://odeo.ri.gov/> and see R.I. Gen. Laws Ch. 37-14.1, R.I. Gen. Laws Ch. 37-2.2, and 150- RICR-90-10-1. The Office of Diversity, Equity & Opportunity may be contacted at, (401) 574-8670 or via email Dorinda.Keene@doa.ri.gov.
16. **Question:** Who can write reference letters to support proposals? Clients? State agencies? Other community-based organizations?
Answer: Any individual or organization can provide a reference letter provided that the letter speaks to your technical ability to meet the requirements laid out in the RFP, and that the discussion of that technical ability is in the context of a specific project and/or set of services delivered.
17. **Question:** For how long after an individual is released from ACI is a CTC expected to follow-up?
Answer: 60-90 days.
18. **Question:** Can you describe which sections of the technical proposal most directly address the three main goals for this RFP?
Answer: Yes. The goals and associated sections of the technical proposal are as follows:
- Seamless integration with RIDOC's case management system – 2.1.1, 2.1.2, 2.2, and 3.1.
 - Comprehensive discharge plans and successful service referrals – 1.1, 1.2, 1.3, 2.1.1, 2.1.2, 2.1.4, 2.2, and 3.1.
 - Collaborative effort to identify and collection performance data – 2.1.3, 2.2, 3.1, and 3.2.
 - Regular meetings on trends, successes and deficits, and new tactics – 1.2, 2.1.3, 3.1, and 3.3.

B. Responses to Questions Received via email by 10/17/2017 at 05:00 PM ET

- Question:** What are the RIDOC guidelines regarding how soon the CTC receives a referral from the PRU prior to the actual discharge date?

Answer: In general, RIDOC's expectation is that referrals will be made to CTCs at least 180 days prior to an individual's release date.
- Question:** What RI DOC department and administrator have responsibility to insure successful interface between the CTC program and the PRU, institutional and Probation and Parole units?

Answer: One of the key goals of this procurement is to ensure seamless integration across RIDOC's case management system. As referenced in the RFP, there is no single RIDOC department or administrator that has responsibility for the entire system, and so vendors must be prepared to work across different divisions within RIDOC.
- Question:** Can we please review any RI DOC policy/procedures that will govern the relationship between the CTC and the RIDOC units listed in the previous question?

Answer: All publicly available RIDOC policies can be found here: <http://www.doc.ri.gov/administration/policy/all.php>.
- Question:** Does RI DOC recommend caseload ratios for the CTC position?

Answer: No. RIDOC trusts that bidders will use their experience in providing comparable services to derive their own caseload ratios.
- Question:** Can you provide more detail about the level of service expected for inmates being discharged from the ISC as sentenced inmates. Does the number of releases in the RFP (108) account for inmates that are released directly from court (such as being sentenced to time served) or inmates that may be sentenced to a short period of incarceration such that they only have a few days or a week between their sentence date and release date? If not is this information available?

Answer: Inmates that are incarcerated for shorter amounts of time may be more difficult for CTCs to serve. Simultaneously, some of these inmates may have the highest need for quality discharge planning. RIDOC expects vendors to provide services that are as comprehensive as is possible to this population and these individuals will be included in the performance metrics and collaborative problem-solving conversations RIDOC plans to conduct with vendors on an ongoing basis.

The number of releases referenced in the RFP (108) includes any inmate sentenced to incarceration in ACI for any period of time.

6. **Question:** Can you provide more information about how risk level will be determined. Will all inmates be screened for risk using an assessment tool? Will this information be available to supervisors who are not located at the DOC but are primarily located in the community?

Answer: RIDOC determines risk level with the Level of Service Inventory Revised (LSI-R) risk-needs assessment. All inmates who are sentenced to more than six months of incarceration are screened using the LSI-R Screening Version. RIDOC is open to discussing the possibility of data-sharing agreements that would allow supervisors located outside of RIDOC facilities access to data like the LSI-R.

7. **Question:** The questions about quality control and performance management request a description for how data reports will be used in program administration. If the additional metrics described on the bottom of page 8 are going to be entered into RIDOC's data system, will the provider have access to reports on this data? In what manner will the data be accessible?

Answer: RIDOC is willing to share data that providers have entered into its data system. The precise way in which the data will be accessible is an issue that can be addressed with specific vendors, based upon their needs and the capacity of RIDOC's data system.

8. **Question:** How many Community Transition Coordinators (CTCs) are currently serving the program?

Answer: There are currently 12 CTCs performing regional discharge planning services. There is no reason why bidders should not feel to propose more or fewer CTCs.

9. **Question:** Are the CTCs employed by the Department or are they all contractors/employed by other agencies?

Answer: CTCs are all contractors.

10. **Question:** Is there a standard form or format for the discharge plans? If so, can you provide a sample discharge plan for review?

Answer: There is a standard format, although bidders should not consider it immutable. An example is attached.

11. **Question:** Is there a standard format for the needs assessment administered by the CTCs? If so, can you provide a sample for review?

Answer: CTCs do currently administer a needs assessment specific to discharge planning, but this document is not immutable. The current needs assessment covers housing, “basic needs” (including state ID, social security card, voter registration, healthcare sign-up, food stamps, and clothing vouchers), some assistance with employment and job training, and “professional services requested” (including mental health, medical and substance abuse for those not meeting criteria for specialized services).

12. **Question:** What is the current employee turnover rate for CTCs?

Answer: RIDOC does not track or store this information.

13. **Question:** Can you share the policies that govern case referral from regional CTCs to specialized CTCs as referenced on page 10 of the RFP?

Answer: No.

14. **Question:** What is the average number of follow-up appointments (in-person or telephonic) per discharge over the 90-day follow-up period?

Answer: RIDOC does not currently track this data.

15. **Question:** What is the average current caseload for CTCs?

Answer: Generally speaking, regional CTCs currently carry a caseload of roughly 25-35 individuals at one time. There is no reason why bidders’ proposals need hew to this number.

16. **Question:** What is the total annual funding available for this program?

Answer: The funding level is \$700,000 and is contingent on vendor performance and the availability of funds.

17. **Question:** Is the successful bidder required to document in the State’s case management data warehouse or will it be acceptable use our own data warehouse with reporting capabilities?

Answer: RIDOC is agnostic as to how data is collected, as long as it is collected and shared with the department.

18. **Question:** What are the minimum qualifications of the CTCs currently serving the program (e.g., bachelor’s level, master’s level, etc.)?

Answer: The current contract asked for BSW or equivalent experience. There are no minimum qualifications mandated in this RFP.

19. **Question:** Is information available regarding the percent of offenders that have active eligibility with health insurance on the day of discharge?
Answer: No.
20. **Question:** For offenders that do not have active health insurance on the day of discharge, what resources are made available to them by the RIDOC?
Answer: CTCs have information about how to access Healthsource RI and currently operating programs that connect community members seeking health care with health resources.
21. **Question:** How are individuals categorized as high or medium risk?
Answer: Individuals are categorized according to risk level based upon the LSI-R.
22. **Question:** Is there dedicated space at the RIDOC available to the successful bidder for offender engagement during the 180-day pre-discharge period?
Answer: Space for programming is limited, as are times for offender contact. Each of the 12 full time CTCs have desk space, telephone, and computer access; there is also a room for part-time and itinerant staff to have access to desk space and computer space.
23. **Question:** It is understood that the RFP states that all pricing will be firm and fixed but could RIDOC please clarify whether this would be considered a cost reimbursement funding structure?
Answer: Yes, payment will be processed in a cost-reimbursement funding structure.
24. **Question:** Please clarify the funding amount available per region?
Answer: RIDOC has not made a determination regarding the amount of funding available to each region.
25. **Question:** Please clarify the total funding amount for all three regions?
Answer: The funding level is \$700,000 and is contingent on vendor performance and the availability of funds.
26. **Question:** What would RIDOC define as an absconder from this type of service?
Answer: Individuals are free to refuse discharge planning services.
27. **Question:** What is the anticipated mechanism for probation to communicate to the provider(s) when a client does abscond? Currently, how does this get tracked?
Answer: There is no current mechanism for this form of communication. RIDOC anticipates that CTCs will have working relationships with the Probation Officers that cover their region, and will be able to communicate when a client absconds from community supervision. If

clients are not responsive to CTCs post-release, this is not defined as absconding, and so there is currently no mechanism for tracking this data.

28. **Question:** Please clarify whether inmates know that they will be assigned to CTCs for 90 days after their release from ACI?

Answer: Inmates will be informed of this aspect of discharge planning when they are introduced to the program 180 days prior to their release.

29. **Question:** What would the average case load be per staff?

Answer: RIDOC has not anticipated an average caseload. RIDOC trusts that bidders will use their experience in providing comparable services to derive their own appropriate caseload ratios.

30. **Question:** What would the average case load be per region?

Answer: As on page 11 of the RFP, RIDOC expects roughly 250 individuals to be released every month: 60 to Northern Rhode Island, 100 to Providence and the East Bay, and 90 to Southern and Western Rhode Island.

31. **Question:** Page 6, A. Purpose, third paragraph discusses the successful practices and challenges involving discharge planning operations. Could RIDOC please provide details on the successful practices?

Answer: While this RFP is largely focused on addressing challenges in discharge planning operations, it is important to recognize that these challenges exist in a larger context of successful practices, including the rigorous assessment of individual risks and needs; the assignment of programming based on those needs; the tracking and collection of data related to needs and programming; an array of productive partnerships with other state agencies and community-based organizations; and the policies and procedures established by the transitional services unit, including inter unit and interagency collaborative planning, resource sharing and - most importantly – post-release follow up and support.

32. **Question:** Does RIDOC have a list of existing service providers for the state of RI that currently serve RIDOC clients who (a) contract with directly and/or (b) receive services indirectly (i.e. DMV, social security office, or if clients are on Medicaid and receives services from Providence Hospital for substance abuse)?

Answer: RIDOC does not have a comprehensive list, but does maintain a “RedBook Listing” with the known service providers, as well as state and federal benefits and services.

33. **Question:** If there is an established list of existing service providers, would RIDOC provide the list for bidders/providers to use to contact and create relationships with? If there is not

an established list, could RIDOC direct bidders/providers to the appropriate place to obtain these listings?

Answer: This list will be shared with successful bidders after the award is made.

34. **Question:** Page 7, 2. Goal: Seamless integration with RIDOC's case management system, Second paragraph – discusses deep knowledge of resources and services available at ACI – Will RIDOC please provide a list of the community based service providers used?

Answer: This information will be shared with successful bidders after the award is made.

35. **Question:** Follow up to previous question: If there is an established list of community based service providers, can RIDOC please define what services are they contracted for including number of slots or beds?

Answer: This information will be shared with successful bidders after the award is made.

36. **Question:** Follow up to previous two questions, will RIDOC please provide a list of what is happening inside ACI for service provision? This information will be helpful in order for providers/bidders to know what the clients have been engaged in inside ACI so it is not repeated in the community or if only partially provided on the inside, for providers/bidders to refer to services within the community for continuation and completion of the services.

Answer: Each individual client needs differing levels of services provided inside the ACI and in the community; repetition is not an issue; individualized planning requires both.

37. **Question:** Does the RIDOC have current contracted services?

Answer: This information will be shared with successful bidders after the award is made.

38. **Question:** What is RIDOCs role in assisting clients with obtaining identification? What is RIDOCs expectation of the contractor to do with aiding in the identification process?

Answer: CTCs will only be expected to ensure the delivery of a complete exit packet, which includes identification if it has been obtained. Currently, the Pre-Release Unit (PRU) manages the process by which individuals can obtain identification. If limited time is available for planning because of short sentences, the vendor must be able to assist clients in obtaining identification.

39. **Question:** What funds are available to assist clients with obtaining identification?

Answer: There are no funds specifically devoted to assisting individuals with obtaining identification.

40. **Question:** It is our understanding that majority of the work will be done in the facilities, will DOC have office space available at the probation office for staff to use periodically?

Answer: Work must be done both in the community and the facilities. Each probation office makes its own arrangement with the regional staff.

41. **Question:** Will RIDOC provide space to vendor/provider in this contract or is the provider expected to have clients at the office space?
Answer: See answer above about space.
42. **Question:** Should providers budget for office space, furniture, and equipment?
Answer: Not for facility-based offices.
43. **Question:** Appendix B, Adult Counselors column – please clarify the expectation of providers access in the TPCDS system. Will providers only have access to the system or are providers expected to update this system and input data within TPCDS?
Answer: Vendors must provide information regarding assigned cases into the TPCDS system. This can be accomplished either through direct data entry, or the generation of regular reports from the vendor’s data system.
44. **Question:** Page 9, 6. Goal: Use data to continuously improve service, third paragraph, reentry councils and forums – can RIDOC please provide a list of those contact persons who are in charge of these prison reentry councils and forums?
Answer: Successful bidders will be provided with contact information for Prisoner Reentry Councils and Forums once a tentative award has been made.
45. **Question:** Page 9, 6. Goal: Use data to continuously improve service, third paragraph, reentry councils and forums “RIDOC intends to connect these indicators to outcomes of interest – such as arrests, probation, etc.” Please clarify how these indicators tie into RIDOCs outcomes. Please clarify how the reentry council and forums fit/tie into indicators or outcomes.
Answer: RIDOC seeks to use this RFP to establish a framework for gathering data related to both performance indicators and outcomes in order to establish which discharge planning strategies are most effective. RIDOC is interested in outcomes that are related to recidivism or the chance of recidivism, hence the list on page 9 of the RFP, which includes arrests, probation and parole violations, convictions, employment, and stable housing. The assumption underlying discharge planning services is that certain processes and services have a tangible effect on these outcomes. Through this performance data and performance management framework, RIDOC hopes to identify which processes, services, and strategies (including written discharge plans, complete written discharge plans, referrals, successful referrals, and coordination with probation, parole, and Prisoner Reentry Councils and Forums) improve individual outcomes.

46. **Question:** Page 10, last section before 3. Data: “The RIDOC maintains policies that govern...not solicit for specialized CTCs.” Can RIDOC provide any and all policies relative to the CTCs for regional CTCs?

Answer: No.

47. **Question:** Page 10 and 11, can RIDOC please clarify the math relative to referrals/new cases: how do the average new cases per month on page 11 feed into the number provided on page 10 of 1,461 offenders in 2016? Also, if there are roughly 255/month (based on average number provided in the bidders conference per month: Northern – 60-65, Providence/East Bay – 100, and Southern/Western – 90) it is unclear how the total referrals feeds into the average cases per month on page 11.

Answer: The numbers are not the same because they refer to slightly different populations. There are roughly 255 individuals released per month from RIDOC’s facilities. Average new cases on page 11 refers to only individuals who have a term of probation to serve (and, hence, are assigned to a specific probation office). This is why there are fewer of them. In 2016, there were 1,461 individuals released from sentenced status who had *an assessed risk level*. This simply reflects the fact that not every individual in 2016 had an assessed risk level.

48. **Question:** Page 17, ISBE bonus points – can providers receive the ISBE points if we provide an previously approved waiver form from two previous contracts that we have been approved by both the Office of Diversity, Equity and Opportunity (ODEO) and the Division of Purchases?

Answer: To be considered for any bonus points for ISBE, complete the ISBE form provided and per the instructions in Appendix A. Previous determinations from other solicitations will not be considered. For further information, visit the Office of Diversity, Equity & Opportunity’s website, at <http://odeo.ri.gov/> and see R.I. Gen. Laws Ch. 37-14.1, R.I. Gen. Laws Ch. 37-2.2, and 150- RICR-90-10-1. The Office of Diversity, Equity & Opportunity may be contacted at, (401) 574-8670 or via email Dorinda.Keene@doa.ri.gov.

49. **Question:** Appendix C, Cost Proposal Form, Please clarify in Column 1 (Total FTEs Required Yr1/Yr2) whether RIDOC wishes for providers/bidders to put the total amount of two years combined or only for annual FTEs? For example, year one we have 3 and year two we have 3 should providers put 6 in the first column or 3 in the first column?

Answer: Please only put the number that reflects the annual FTEs you will be employing. The two columns entitled “Projected Cost in Year 1” and “Projected Cost in Year 2” will allow bidders to detail how much the FTEs will cost in each year.

C. 10/12/17 Pre-bid Conference Sign-in Sheet & PowerPoint Presentation Slide Deck

See attached.

D. Sample Discharge Plan

See attached.

NO FURTHER QUESTIONS WILL BE ENTERTAINED AS OF THIS ADDENDUM.

Meredith Skelly
Interdepartmental Project Manager



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 Division of Purchases
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"NON-MANDATORY" PRE-BID CONFERENCE SIGN IN SHEET

BID NUMBER: 7565519
BID TITLE: Regional Discharge Planning Services to Improve Outcomes for Individuals Leaving Incarceration
PRE-BID DATE AND TIME: 10/12/2017 @ 03:00 P.M.ET

PHONE/WEBINAR

Purchasing Representative: MEREDITH SKELLY
Pre-bid START TIME: 3:00 PM
Pre-bid END TIME: 4:00 PM

COMPANY NAME	COMPANY REPRESENTATIVE	ADDRESS	CONTACT E-MAIL	CONTACT PHONE NUMBER	CONTACT FAX NUMBER	PROPOSAL SUBMITTED (For Purchasing Use Only)
Community Action	Peter McGrath					Webinar Name List
Open Doors	Nick Cor & Team					Chris Mansfield
West Bay Community Action	Paul Salera					Danielle Cerny
CPA	Chris Mansfield					Jillian Lombardi
CSI	Terri Williams					Mark Deasy
CSI	Jillian Lombardi					Patrick (Westfall)
Providence Center	Owen McLean					Paul Salera
Harvard Kennedy School	Jasper Frank					Stephen Martin
" " "	Danielle Cerny					Terri Williams
State of RI - Doc	Gina Garuolo					Beacon
" " "	Barry Weiner					Peter McGrath
" " "	Leslie Capese					Jasper Frank
" " "	Terry Foley					Meredith Skelly
" " "	Jeff Rausi					
State of RI - Purchases	Meredith Skelly					



RFP# 7565519: Regional Discharge Planning Services to Improve Outcomes for Individuals Leaving Incarceration

Pre-Bid Conference

Thursday, October 12, 2017

Objectives

- Background
- Procurement purpose and goals
- Questions

Background

RIDOC seeks to enhance and expand discharge planning services and supports to **improve offenders' ability to successfully transition from ACI to the community** and **reduce the chances of those offenders recidivating.**

As part of these efforts, RIDOC seeks vendors who can assist the Department in addressing three particularly prominent discharge planning challenges and their corresponding goals:

Challenges	Goals
<ul style="list-style-type: none">• Limited inter-unit case management	<ul style="list-style-type: none">• Seamless integration with RIDOC's case management system
<ul style="list-style-type: none">• Limited service plans and referrals	<ul style="list-style-type: none">• Comprehensive discharge plans and successful service referrals
<ul style="list-style-type: none">• Limited use of performance data and performance management	<ul style="list-style-type: none">• Collaborative effort to identify and collect performance data• Regular meetings that utilize data to identify trends, discuss successes and deficits, and formulate new tactics

Goal: Seamless integration with RIDOC's case management system

Challenge: Limited inter-unit case management. Case referral and information sharing is not seamless, meaning that offenders may not receive appropriate services, or case managers and providers may not have access to the data necessary to serve offenders.

Current progress: RIDOC is working to delineate the responsibilities of different employees, refine the processes and tools related to information sharing and case referral between units, and ensure that necessary resources reach offenders regardless of who is currently managing their case. This process involves reviewing and revising the Department's case management policy, and modifying TPCDS.

For vendors: Continuous and seamless case management requires the capacity to engage and build relationships with RIDOC staff, as well as connections with community-based service providers.

Goal: Comprehensive discharge plans and successful service referrals

Challenge: Limited service plans and referrals. Offenders may leave ACI with incomplete discharge plans, no referrals to services, or referrals that do not result in service.

Current progress: RIDOC is working to ensure that CTCs have the necessary access to incarcerated offenders prior to release.

For vendors: CTCs must be capable of making referrals that address all of a given individual's needs and result in service provision.

RIDOC believes that this capacity is built through staff qualifications, community engagement, and the accumulation of institutional experience (i.e. the minimization of staff turn-over).

Goal: Collaborative effort to identify and collect performance data

Challenge: Limited use of performance data. RIDOC does not consistently collect and monitor all data that might be useful in evaluating the success of discharge planning services.

Current progress: RIDOC is in the process of identifying metrics of interest and establishing data-sharing agreements with other state agencies, and is committed to modifying TPCDS to collect selected metrics.

For vendors: Offerors must have the capacity and willingness to collaboratively identify metrics that align with RIDOC's goals for discharge planning, as well as collect and/or enter data related to these metrics.

Goal: Regular meetings on trends, successes and deficits, and new tactics

Challenge: Limited use of performance management. RIDOC does not use performance data to manage discharge planning service contracts.

Current progress: RIDOC seeks to institute a framework for continuous quality improvement based upon the collection and collaborative discussion of performance metrics.

For vendors: Offerors must have the capacity and willingness to engage in regular meetings with RIDOC to discuss performance metrics and data trends, and implement new strategies or adjust service based upon what is working.

Questions

Inmate ID: [REDACTED]	Name: [REDACTED]	DOB: [REDACTED]
SSN: [REDACTED]	Citizen: [REDACTED]	Next Hearing Date: [REDACTED]
Race: [REDACTED]	P.C.: [REDACTED]	Security: [REDACTED]
Sex: [REDACTED]	BCI: [REDACTED]	FP#: [REDACTED]
Detainers: [REDACTED]	Scars/Marks: [REDACTED]	Ant. Release Date: [REDACTED]
Comments: [REDACTED]		

Incarceration#:			
Plan Date:	Planning Agency:		Phone:
Planner's Name:			
Offender Address:			
City:	State:	Zip Code:	
Plan Type:	Dates Attended	1:	
Release Type:		2:	
Spec. Cond.		3:	
Reviewed:		4:	
Housing			
Counselor Identified:	Planner Identified:	Service Is Not Available:	Client Refuses Service:
Comments:			
Employment			
Counselor Identified:	Planner Identified:	Service Is Not Available:	Client Refuses Service:
Comments:			
Medical			
Counselor Identified:	Planner Identified:	Service Is Not Available:	Client Refuses Service:
Comments:			
Basic Needs (food, clothing)			
Counselor Identified:	Planner Identified:	Service Is Not Available:	Client Refuses Service:
Comments:			
Documentation (ID's)			
Counselor Identified:	Planner Identified:	Service Is Not Available:	Client Refuses Service:
Comments:			

Financial Assistance

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Substance Abuse

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Spiritual / Social Support

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Mental Health

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Education

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Sex Offender

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Traffic Court

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Family / Parenting Issues

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Counseling

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service:

Legal Issues

Counselor Identified:
Comments:

Planner Identified:

Service Is Not Available:

Client Refuses Service: