



STATE OF ARKANSAS

Department of Human Services

Office of Procurement

700 Main Street

Little Rock, Arkansas 72201

RESPONSE PACKET

710-20-0028

CAUTION TO VENDOR

Vendor's failure to submit required items and/or information as specified in the *Bid Solicitation Document* **shall** result in disqualification.



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RESPONSE SIGNATURE PAGE

Type or Print the following information.

RESPONDENT'S INFORMATION			
Company:			
Address:			
City:	State:	Zip Code:	
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Corporation	<input type="checkbox"/> Public Service Corp <input type="checkbox"/> Nonprofit
Minority Designation: <i>See Minority Business Policy</i>	<input type="checkbox"/> Not Applicable AR Minority Certification #: _____	<input type="checkbox"/> African American <input type="checkbox"/> American Indian	<input type="checkbox"/> Hispanic American <input type="checkbox"/> Asian American Service Disabled Veteran Certification #: _____
		<input type="checkbox"/> Pacific Islander American <input type="checkbox"/> Service Disabled Veteran	

VENDOR CONTACT INFORMATION			
<i>Provide contact information to be used for bid solicitation related matters.</i>			
Contact Person:			Title:
Phone:			Alternate Phone:
Email:			

CONFIRMATION OF REDACTED COPY
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with vendor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), shall be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See Bid Solicitation for additional information.</i>

An official authorized to bind the vendor to a resultant contract must sign below.

The signature below signifies agreement that either of the following shall cause the vendor's response to be disqualified:

- Additional terms or conditions submitted in their response, whether submitted intentionally or inadvertently.
- Any exception that conflicts with a Requirement of this Bid Solicitation.

Authorized Signature: _____ Title: _____
Use Ink Only.

Printed/Typed Name: _____ Date: _____

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

- Any requested exceptions to items in this section which are NON-mandatory **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.
- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

SECTIONS 3, 4, 5 - VENDOR AGREEMENT AND COMPLIANCE

- Exceptions to Requirements **shall** cause the vendor's response to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Authorized Signature: _____

Use Ink Only.

Printed/Typed Name: _____ Date: _____

PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

VENDOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

VENDOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.

By signature below, vendor agrees to and **shall** fully comply with all Requirements related to subcontractors as shown in the bid solicitation.

Authorized Signature: _____
Use Ink Only.

Printed/Typed Name: _____ **Date:** _____

CONTRACT SELECTION

Please select the contract(s) for which bidder is proposing. A single bidder may only be awarded one of the three Therapeutic Group Home contracts. Bidders on a Therapeutic Group Home contract may also bid on the Residential Sex Offender contract.

Residential Group Homes - Males Only (one contract per bidder)

Sex Offender Group Home – Males Only

INFORMATION FOR EVALUATION

- Provide a response to each item/question in this section. Vendor may expand the space under each item/question to provide a complete response.
- **Do not** include additional information if not pertinent to the itemized request.

	Maximum RAW Score Available
E.1 MINIMUM QUALIFICATIONS (ALL Bidders)	
A. Provide a letter from DCCECE reflecting the contractor’s company current standing and any findings over the last three (3) years. 2.2A	5 points
B. Provide a copy of Bidder’s current table of organization. 2.2E	5 points
E.2 APPROACH TO SCOPE OF WORK (ALL Bidders)	
A. Provide a copy of Bidder’s proposed evidence-based ILS curriculum. The ILS must include, at a minimum, the following components: <ul style="list-style-type: none"> a. Money management; b. Food preparation; c. Nutrition; d. Health; e. Housekeeping; f. Parenting classes and g. Job skills, including at least: <ul style="list-style-type: none"> 1) Application completion; 2) Interview techniques; and 3) Work etiquette. 2.3B.4 	5 points
B. Provide a copy of Bidder’s proposed substance abuse curriculum. It should be a recognized, effective or promising practice model from the OJJPD Model Programs Guide. 2.3B.5	5 points
C. Provide a copy of Bidder’s proposed cognitive behavioral curriculum 2.3B.7b	5 points
D. Describe how Bidder shall provide for all the juvenile’s health needs, both mental health and physical health needs. 2.3C	5 points
E. Describe the Bidder’s daily on-site sick call protocol to address any minor medical complaints or concerns by juveniles. 2.3C.3	5 points
F. Provide a copy of the Bidder’s proposed suicide prevention protocol. 2.3C9	5 points
G. Describe the Bidder’s procedure for monitoring of dispensed medications (over the counter and controlled substances) to juveniles. 2.3C.10	5 points
H. Describe how Bidder shall ensure the educational needs of juveniles are met. 2.3E	5 points
I. Describe Bidder’s approach to providing aftercare planning. 2.3F	5 points
J. Describe Bidder’s proposed quality improvement process, including proposed personnel responsible for implementation. 2.3G	5 points
E.3 ORGANIZATION, STAFFING AND ACCREDITATION (ALL Bidders)	
A. Provide an organizational chart of all professionally licensed and clinically trained practitioners Bidder proposes to use in the providing of direct clinical services (assessment, individual and/or group treatment) to individuals. Chart must also identify proposed staff responsible for quality improvement processes. 2.4	5 Points
E.4 SPECIALTY MILIEU (For Bidders on Male Sex Offender Group Home Contract ONLY)	

A. Provide a copy of Bidder's sex offender treatment, milieu and program structure.2.6.2 (Male Sex Offender Only)	5 points
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