

**Northwest Crisis Care System (NCCS)
Request for Information (RFI)
Frequently Asked Questions (FAQs)
August 3, 2012**

1) From: Lower, Teresa [mailto:TLower@rosecrance.org]

Sent: Wednesday, August 01, 2012 11:04 AM

To: DHS.MH

Subject: Singer Reinvestment RFI Budget question

Hello:

Can you please clarify how to use the Annual Amount column and the Proposed Amount column on the Attachment B Proposed Budget worksheet?

Thank you, Teresa Lower

**Teresa Lower, CPA | Director of Accounting
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DMH response is as follows:

The monthly and annual amounts are for recurring costs, such as salary and benefits.

The Monthly Amount = 1/12 of the Annual Amount

The Annual Amount = The Amount for 12 Months

The Proposed Amount = Items that are **one-time costs** such as equipment, information technology, and any other costs that do not have a monthly recurring cost.

2) From: Steve Langley Sr. [mailto:sel@ssrinc.org]

Sent: Sunday, July 29, 2012 11:20 AM

To: Lopez, Amparo; Susan Schroeder; Joann Rossi; Candy O'Brien

Subject: RFI/NGRI

Stepping Stones is considering the NGRI population in our RFI. I was approached by the DMH folks about 3 – 4 years ago regarding this population but they were perhaps put off by my questions and did not call back, or, they realized that the population is very special and will cost more to bring back and stabilize not to mention the liability issues. I was not aware that they initiated a pilot anywhere else? However, as you might imagine, we have questions and concerns about this population none of which were ‘really’ discussed in our meetings. The issue seemed to be a part of the ‘they will be transferred to other SOF’s’ discussion.

Before any questions, an observation. We would expect collaboration and cooperation with the Forensic Bureau’s conditional release program or with any other involved State agency and the first part of that would be a meeting with the Forensic Bureau to hear what they do and have to say about our proposal (and perhaps questions). This would allow us to not include the NGRI release program in our proposal if the pieces do not fit right. I will be back from vacation on 8/6 and would gladly come at any time after that including the day I return. I also would be willing to go to Springfield or Chicago as necessary.

QUESTION THAT NEED TO BE ADDRESSED;

- What is the extent of this population? How many are ready, are any of them at Singer? Can any at Singer be placed now and counted as part of our 'clients served' in the RFI numbers? We can't move them all at once. What are their profiles. If my memory serves me correctly most of them were pedophiles and a strictly pedophile population would be very difficult to serve and sell to the community. I suspect that's why they need placements. Can we get a list of these folks that comprised those to be considered for placement with at least the same info we got on the client profiles for the Clinical Comt a couple of weeks ago.
- I assume that the DMH wants an ongoing program which magnifies the issues around penetration rates for program purposes or in regard to community penetration rates in general.
- Would additional security (staff, training, ankle bracelets) be considered by the RFI grants and would they pledge to remain as long as the program is in operation?
- A strong backup position would be needed with the Forensics people for temporary hospitalizations/incarcerations (?) for purposes of clients who may be temporarily a danger to others and as a means to increase compliance with residential requirements. There has to be a process for bringing these folks out, not an all at once proposition. One quick look at the problems with placement in the Williams report makes it clear that doesn't work well with those who have chronic illnesses and histories much less criminal histories. We might get a few out more quickly as we start only with those 'most ready'.
- I assume that the DMH wants an ongoing program relationship and this is not just for
- If we can not reach an agreement under the RFI rules is it possible to reach an agreement under a special grant in which the unique considerations can be played out?

Any help you can give me would be great. These are highly risky people and I need education and clarification as soon as possible if I am to make a reasonably competent effort in the RFI.

Thanks

DMH response is as follows: DMH is not requiring interested respondents to submit any narrative or budget information related to Section III G: The NGRI Community Conditional Release Program. Advising the DMH of your intent or interest in this program within your narrative for other "Services to be Purchased" or a separate letter on intent to this effect will be sufficient.

3) **From:** Hesselbacher, Kristin [mailto:KHesselbacher@rosecrance.org]

Sent: Wednesday, August 01, 2012 11:03 AM

To: Pelletier, Michael

Cc: Abate, Mary Ann

Subject: question re: Attachment C

Hello Michael,

For Attachment C, Community Substance Abuse section: Do we only need to fill in the data for those SA services we'll request funding for (similar to filling out the Rule 132 services section)?

Thanks,

Kristin Hesselbacher

Rosecrance

DMH response is as follows: DASA program code information is relevant and should be added across all columns for respondents who are co-funded by DMH and DASA. If you are not requesting funding in a particular program code area then there will be a "N/A" response for "Proposed new capacity" and "Proposed new cost". Access to existing service capacity is an essential factor in making funding determinations.

