

## REQUEST FOR QUOTE



**PASCO SHERIFF'S OFFICE  
AGENCY SERVICES  
19415 CENTRAL BLVD  
LAND O'LAKES, FLORIDA 34637**

**RFQ NO: 1 FY19  
DATE: 25 January 2019**

**AGENCY SERVICES:  
PHONE NO: (813) 235-6011  
FAX NO (813) 235-6016**

**RETURN RFQ NO LATER THAN: 25 February 2019 by 1:00 PM  
Local Time on a clock designated by Agency Services**

**OPENING DATE: 26 February 2019**

**OPENING TIME: 10:00 AM Local Time on a clock designated by  
Agency Services**

**RETURN RFQ TO:**

**PASCO SHERIFF'S OFFICE  
AGENCY SERVICES  
PURCHASING MANAGER  
19415 CENTRAL BLVD  
LAND O'LAKES, FLORIDA 34637**

### COMPREHENSIVE INMATE MEDICAL SERVICES DESCRIPTION

It is the goal of the Pasco Sheriff's Office (PSO) to select a jail medical contractor to provide comprehensive medical, mental health, dental, and pharmaceutical services to the inmate population of the Pasco Sheriff's Office (PSO) Detention Facility and Juvenile Assessment Center located at 20101 Central Boulevard in Land O'Lakes. These services shall be legally defensible and meet or exceed standards set by the National Commission on Correctional Health Care (NCCHC), Florida Corrections Accreditation Commission (FCAC), Florida Model Jail Standards (FMJS) for Health Services in Jail facilities, as well as all Federal, State, and local laws, statutes, and ordinances governing health care service.

The PSO decided to issue a Request for Quote for this contract, rather than an Invitation to Bid, as it is not practicable or fiscally advantageous to issue an Invitation to Bid, the nature of medical services does not lend itself to a bid, and the quality of services is more important than price.

**To respond to this RFQ, the requested forms shall be completed and submitted to the Purchasing Manager at the address listed above. One original and seven (7) copies must be submitted in response to this RFQ.**

**Companies responding hereby agree to furnish items and/or services, pursuant to all requirements and specifications contained in this solicitation document, and further agree the language of this document shall govern in the event of a conflict with a response.**

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## A. Introduction

1. The Pasco Sheriff's Office is requesting sealed quotes from qualified firms to provide comprehensive medical services to all persons in the custody of the PSO, the inmate population of the Pasco Sheriff's (PSO) Detention Facility, and Juvenile Assessment Center (JAC) located at 20101 Central Boulevard in Land O'Lakes, Florida. The specifications set forth are for informational purposes and to provide a general description of the minimum requirements. Contractors must submit a response which details their plan for each area addressed in the specifications. Contractors are also encouraged to include innovations or alternatives that would offer additional value to the intended purpose. This RFQ is issued to provide prospective contractors the data necessary for preparation of a competitive quote and a fair method of analyzing submitted quotes.
2. Contractors will be asked in the quote response to elaborate and expound upon their specific plan for providing services which shall reveal their experience and expertise. The contractor will provide all healthcare services shown, described, and required in this RFQ for all persons committed to the custody of the PSO, and assumes all legal, financial, and operational responsibility for the health care staff working under this RFQ.

## B. General Requirements

1. The purpose of this RFQ is to select the most competitive and qualified vendor capable of providing inmate healthcare services to the PSO on an ongoing contractual basis. Cost is not the main objective in this RFQ. Quality of care provided will be the main focus. Selected quotes shall meet the following objectives:
  - a. Deliver high quality inmate healthcare services compliant with all federal, state/local laws, and applicable standards.
  - b. Operate the healthcare program in a cost-effective manner with full reporting and accountability to the PSO.
  - c. Operate the health care program using only licensed, certified, and professionally trained personnel.
  - d. Implement and manage a written health care plan with clear objectives and site-specific policies and procedures.
  - e. Maintain an open and collaborative relationship with the PSO administration and detention staff.

## C. Scope of Services

1. **General Program Requirements**
  - a. The contractor shall be responsible for the administration of all health care services and payment for all health care costs for inmates detained at the Pasco Sheriff's Detention Facility. Health care services shall be provided to all persons in the custody of the PSO. Services include, but are not limited to, standard screenings and appraisals, treatment for pre-existing illnesses or injuries, treatment for illnesses or injuries suffered or contracted while detained, and treatment for injuries suffered during the course of arrest by any law enforcement agency for any detainee booked at the Pasco Sheriff's Detention Facility. Services at the Juvenile Assessment Center will be limited to a medical evaluation of a juvenile following a use of force incident during detention in the Juvenile Assessment Center and emergency medical services for the juvenile after a juvenile is accepted into the JAC for processing. The contractor will provide twenty-four (24) hour a day emergency and/or immediate medical services including, but not limited to, emergency transportation and acute hospital services.
  - b. The contractor shall obtain medical authorization for the treatment of a juvenile held at the Detention Facility or the Juvenile Assessment Center from the juvenile's parent or guardian. In the event a parent or guardian is unable or unwilling to sign a medical authorization form for a

juvenile detained at the Detention Facility or JAC, the contractor shall notify the Florida Department of Children and Families.

- c. The PSO shall develop policies and procedures necessary to specify the role of medical services in a jail setting and provide liaison between Medical staff and PSO detention personnel.

2. **Program Operational Requirements**

- a. The contractor will provide the following documentation of operational components:
  - i. Copies of clearly defined written agreements or memos of understanding with health care service providers such as hospitals, physicians, ambulance companies, and others for twenty-four (24) hour service. All subcontracts of every nature are subject to the approval of the PSO.
  - ii. Well defined written operational policies and procedures to include, at a minimum, those required by the NCCHC, FCAC, and FMJS, and in conjunction with PSO policies and procedures for service delivery.
  - iii. A comprehensive annual statistical report shall be forwarded to the PSO in accordance with NCCHC, FCAC, and FMJS standards. In addition, quarterly, monthly, and daily statistics are required by the PSO.

3. **Health Care Administrative Staffing Requirements**

- a. The contractor shall provide the following personnel and administrative services:
  - i. One full-time Health Services Administrator located on site, with the authority to oversee the administrative requirements of the health care programs, for ensuring the appropriateness and adequacy of inmate health care, recruiting, data gathering, financial monitoring, development of policies and procedures, review of contractual requirements, review of medical records, and other management services, as needed;
  - ii. Medical Director (physician);
  - iii. Director of Nursing;
  - iv. Sufficient clerical support staff;
  - v. The contractor will describe the title and qualifications of the management team who will be assigned authority to oversee the contract management aspects of program services; and
  - vi. Training/Education. Describe your company's initial and ongoing educational and training programs and staffing model.

4. **Non-Administrative Health Care Staff**

- a. The contractor will ensure professional health care providers are on-site seven days a week, 24-hours a day to deliver medical and psychiatric health care. Emergency services, including dental, shall be available seven days a week, 24 hours per day. All quote pricing shall be based on the minimum staffing requirements to efficiently operate the programs as proposed and to offer quality health care. The contractor shall provide a clear and detailed explanation of staffing requirements by job description, post assignment and shift schedule. Listings of all salaries and applicable benefits by category shall be attached to the quote.
- b. Final staffing for the delivery of health services will be as mutually agreed upon during contract negotiations. Minimum staffing requirements are as follows:
  - i. Nursing services shall be provided twenty-four hours a day, seven days a week, scheduled in 12 hour shifts coinciding with detention staff schedules.

Nursing services shall include, but not be limited to, the following:

- Coverage of Medical Inmate Housing at all times;
  - Screening of all inmates at time of booking;
  - Health Appraisals;
  - Medication distribution as prescribed;
  - Sick call triage and follow up on a daily basis;
  - Medical clearances of inmates for transfers to other correctional institutions;
  - Appropriate and timely responses to medical needs and emergencies;
  - Additional nursing coverage in Intake/Release during Special Operations;
  - Physician support services;
  - Psychiatric support services; and
  - Dental support services.
- c. All quotes shall include a staffing schedule for physicians and/or nurse practitioners to ensure all inmates receive quality medical care in a timely manner. Physicians shall have hospital and/or emergency room experience or be Board Eligible/Board Certified in internal and/or emergency medicine.
  - d. A Licensed Mental Health Professional shall provide twenty-four hours a day, seven days a week routine and emergency care.
  - e. A Licensed dentist to provide dental care.
  - f. Medical Assistants and Technicians as required to meet program needs.

5. **Post Regulations and Staff Shortages**

- a. Written job descriptions and post orders defining the duties and responsibilities for all assignments shall be posted at the facility. Copies of staffing schedules encompassing all health care staff are to be posted in designated areas and submitted to the Court Services Support Services Captain each pay cycle.
- b. Any post left vacant in whole or in part of any shift will result in a credit to the PSO based on salary plus benefits of the position assigned to that post and for the hours the post is vacant. Additionally, the contractor will pay a penalty for position(s) not filled as required by the negotiated contract. Use the relief factor deemed suitable by your organization to ensure one hundred percent coverage per the staffing model submitted by contractor.

6. **Patient Care and Scheduling**

- a. The PSO's primary objective is for persons in the custody of PSO to receive quality medical care in a timely fashion. The contractor shall be responsible for providing timely quality medical care for all persons in PSO custody, including juveniles detained at the Juvenile Assessment Center. The contractor is responsible for coordinating with any and all health care providers who previously treated or who presently treat an inmate regarding a pre-existing injury or medical conditions for continuity of care.
- b. The contractor shall provide a level of staffing necessary to ensure those persons scheduled to be seen in sick call and all other clinics will be seen the day they are scheduled, regardless of other emergencies, unless the emergencies are extraordinary in nature. The contractor shall include in their response the maximum number of appointments to be reserved for each clinic daily. Failure to examine and/or treat inmates as scheduled will result in a fine as negotiated by contract.
- c. The contractor shall describe their service goals and performance measures for each program to be offered. NCHC, FMJS, and all other applicable jail medical standards shall be followed as they relate to scheduling of patient care.

## **7. Employment of Contracted Staff**

### **a. Background Checks**

- i. Prior to contractor's employee beginning work at a PSO facility, the employee must be cleared and approved in writing by the PSO Human Resources (HR) Office and the Court Services Bureau command staff. PSO retains the final authority of clearance into a PSO facility. The contractor shall provide the name, date of birth, local address, employment application, Credit Form, social security number, and copy of driver's license for all of contractor's employees assigned to work at PSO. All contractor's employees will be fingerprinted by PSO HR at no cost to contractor. Applicable licenses and/or certificates for all professional staff must be on file with the PSO prior to assignment at PSO. In addition, malpractice insurance shall be on file for all Physicians and Nurse Practitioners, and other professional or paraprofessional employees, if applicable.

### **b. Nondiscrimination**

- i. The contractor shall not discriminate against any employee or applicant for employment because of race, religion, color, sex, national origin, age, disability or any other basis prohibited by state or federal law relating to discrimination in employment, except where there is a bona fide occupational qualification reasonably necessary to the normal operation of the Contractor. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this non-discrimination clause

### **c. Drug Free Work place**

- i. The contractor agrees to (i) provide a drug-free workplace for the Contractor's employees; (ii) post in conspicuous places, available to employees and applicants for employment, a statement notifying employees that the unlawful manufacture, sale, distribution, dispensation, possession or use of a controlled substance or marijuana is prohibited in the Contractor's workplace and specifying the actions that will be taken against employees for violations of such prohibition; (iii) state in all solicitations or advertisements for employees placed by or on behalf of the Contractor that the Contractor maintains a drug-free workplace. For the purposes of this section, "drug-free workplace" means a site for the performance of work done in connection with a specific contract awarded to a Contractor in accordance with this chapter, the employees of whom are prohibited from engaging in the unlawful manufacture, sale, distribution, dispensation, possession or use of a controlled substance or marijuana during the performance of the contract.

### **d. PSO Policies**

- i. All contracted staff must adhere to PSO General Order 22.15 Civilian Personnel Appearance/Dress Code and PSO General Order 22.9 Smoke and Tobacco - Free Workplace.

### **e. Staff Performance**

- i. The PSO may prohibit entry to any secure area or remove a contract employee who does not perform his/her duties in a professional manner. The PSO also reserves the right to search contractor's work stations at PSO, including office space, and any person, property, or article entering or leaving its facilities.

### **f. Employment of Current Medical Employees**

- i. The contractor will interview all current licensed/non-licensed medical staff and make every effort to offer employment.

## 8. **Orientation and Security Training**

### **a. Training Requirements - Orientation and Annual Training**

- i. The contractor will ensure employees assigned to PSO receive orientation training from PSO and all personnel complete annual in-service training as required by Court Services Bureau Directives, NCCHC, FCAC and FMJS standards.

### **b. Comply with Security Procedures**

- i. The contractor shall follow all procedures established by the PSO governing security procedures. The contractor shares joint responsibility with the PSO to ensure appropriate security is maintained at all times when treating inmates. All employees of the contractor are subject to search of their person, including, but not limited to their property, supplies, coolers, purses, and/or articles upon entering the secure perimeter of the facility. The PSO reserves the right to deny entry to the facility at any time.

### **c. The Contractor shall submit in their proposal detailed descriptions of the following:**

- i. Specific methods to be used ensuring Contractor personnel are not engaged in passing contraband, i.e., weapons, drugs, tobacco (or any other item as listed in PSO policy and/or Florida Statute, Chapter 951) deemed as an illegal item to the inmate population.
- ii. Specific methods to prevent inmates from gaining access to and possession of any medical supplies, pharmaceuticals, or equipment.
- iii. The manner in which all sharp instruments/utensils/supplies will be issued, controlled, and inventoried while in use and accounted for prior to the end of each shift must be documented and monitored. The Contractor shall implement a count procedure and log form for sharp instruments and other items in the medical services area. The PSO reserves the right to define and ultimately approve sharp utensils that enter the medical services area and inventory items at its discretion. Any missing items shall be reported to the on duty Shift Commander immediately.
- iv. Contractor's Health Services Administrator shall attend meetings with the Court Services Bureau Commander/Designee and contract monitor on a regular basis to discuss programs, plans, and any security issues or changes.
- v. Contractor and Contractor personnel will be required to be knowledgeable and comply with all PSO's relevant policies and procedures and agrees to incorporate security and conduct related policies into practice. Upon award, Contractor shall be provided with all General Orders and Court Services Bureau Directives. Contractor personnel determined to be in violation of PSO's policies and procedures are subject to discipline up to and including termination upon request of the Court Services Bureau Commander/Designee.
- vi. All contract personnel are required to wear the PSO's supplied and purchased identification badge, with picture, face up in a visible manner at all times while in the PSO facility.
- vii. The Contractor and personnel will be responsible for keeping all internal doors in assigned work areas closed and locked. The Contractor and personnel must adhere to all security restrictions imposed by the PSO.
- viii. The Contractor shall notify the PSO in writing upon discovery if any employee is related to or previously had, has, or initiates a personal relationship with any person confined as an inmate in the facility. It is the Contractor's responsibility to require its personnel to alert the PSO whenever a person who is a relative or personal acquaintance of that employee is admitted to the PSO Detention Facility or Juvenile Assessment Center.
- ix. Pursuant to PREA (Prison Rape Elimination Act) standard 115.31, Contractor shall ensure all employees having contact with inmates are trained on topics outlined in this standard prior to any inmate contact. Employees shall be trained of their responsibilities under the PSO's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Contractor shall generate documentation confirming employees

understand the training they have received. All such documentation shall be sent to PSO and maintained by PSO.

- x. Pursuant to the Federal Bureau of Investigations and the Florida Department of Law Enforcement, Contractor shall comply with the Criminal Justice Information Services Security Policy. The policy requires that all employees receive CJIS Security Awareness Training/Testing every two years and requires all Contractor employees be fingerprinted. PSO will fingerprint all Contractor employees.
- xi. The FBI Criminal Justice Information Services (hereinafter referred to as "CJIS") Security Policy Version 5.6 mandates all agencies connected to the FBI CJIS systems adhere to regulation set forth within the Security Policy. Part of the Security Policy outlines directives dealing with personnel security. Included within the term "personnel" are all individuals who are utilized by criminal justice agencies to implement, deploy, and/or maintain the computers and/or networks of the criminal justice agency which are used to access FBI CJIS systems. These individuals include city/county IT personnel, and private vendors. The subject of non-criminal justice governmental personnel and private vendors is addressed in Sections 5.1.1.5(1) of the CJIS Security Policy and in the Security Addendum, which can be found in Appendix H, which will be made available to contractor upon request. These sections include information on documentation which should be maintained in order to remain in compliance with the Security Policy and establishes procedures and policies that will guide the parties to comply and adhere to the CJIS Security Policy pertaining to non-governmental personnel and private vendors. Contractor shall have a policy regarding Contractor's and employee's compliance with this section.

#### 9. **Quality Improvement Program**

- a. **Quality Improvement Program.** The contractor shall form a multidisciplinary quality improvement committee (within 60 days of the contract start date) which sets expectations, develops plans, and implements procedures to assess and improve the quality of the contractor's governance, management, and clinical and support processes. The multi-disciplinary quality improvement committee shall consist of healthcare providers from various medical disciplines working at the facility who frequently meet with the PSO Court Services Support Captain or designee on a fixed schedule to design quality improvement activities and to discuss the results in an effort to continuously work to improve care. The committee shall meet at least quarterly and provide regularly scheduled audits of inmate health care services with documentation of deficiencies and plans for correction of deficiencies. The quality improvement plan shall include a provision for program and contract monitoring (peer review) on an annual basis by an "outside" correctional health care consultant, the results of which shall be made available to the PSO. The quality program shall include, at a minimum, the following:
  - i. **Infection Control Surveillance.** The Infection Control Program shall include surveillance, preventive techniques, treatment, and reporting of infections in accordance with local and state laws. The contractor will be in communication with the Pasco Public Health Department to communicate reportable diseases. Contractor will assign a nurse to conduct infection control surveillance as required by NCCHC, FCAC and FMJS standards.
  - ii. **Accreditation Standards.** The contractor will obtain and maintain accreditation from NCCHC, FCAC, and FMJS. Accreditation files will be open to inspection by PSO upon request and will be kept on site. The contractor will be responsible for the payment of all fees associated with Accreditation.
  - iii. **Medical Audit Reports, Meetings and Inspections.** The contractor will meet with the PSO Court Services Support Captain on a monthly basis to discuss quality of healthcare services being provided and compliance with contractual obligations. The contractor shall submit a written monthly statistical report to the PSO, as requested. The format, detail, and

content of the reports shall be approved in advance in writing by the PSO.

- iv. **Medication Errors.** The contractor will institute policies and procedures for medication errors. All medication errors will be discussed at the quality meeting.
- v. **Audits.** The Court Services Support Captain or designee has the right to audit all services, reports, and documents regarding the operation of the medical services program.
- vi. **Inmate Grievances/Complaints.** The contractor will specify the policies and procedures to be followed in dealing with inmate complaints regarding any aspect of health care services. A data collection process to demonstrate compliance must be maintained and made available to the PSO.
  - 1. The contractor shall maintain monthly statistics of all grievances filed (with and without merit). All grievance procedures shall be in accordance with the PSO Court Services Bureau Directives. All grievances shall be responded to in writing within five business days of receipt of the grievance. The PSO reserves the right to review any inmate complaint and review the contractor's actions. The contractor must implement PSO's recommendations in disputed cases.
- vii. **Inmate Health Education Program.** The contractor will develop and maintain an inmate health education program, including, but not limited to information sessions, pamphlets, videos, regarding acute/chronic conditions.
- viii. **Utilization Review.** The contractor will establish and maintain a utilization review program for review and analysis of the utilization of off-site referrals including subspecialty and inpatient stays. The program shall include non-urgent hospitalization, precertification, urgent hospital certification, concurrent review, prospective denial, discharge planning, and prior authorization of targeted procedures, e.g., Magnetic Resonance Imaging (MRI) and Computerized Axial Tomography (CAT) scans. The utilization management program shall demonstrate the use of outside service has been appropriate (medically indicated) and the length of stay (if applicable) is neither longer nor shorter than medically necessary.
- ix. **Risk Management and Mortality Review.** The contractor will outline its risk management plan and discuss its procedures for dealing with critical incidents. The contractor will be responsible for establishing and providing evidence of a formal mortality review process. The PSO's General Counsel, Court Services Bureau Commander, Court Services Support Captain, and Court Services Security Services Captain will be included in any mortality review. The PSO General Counsel will be notified in writing with a copy of any inmate related litigation involving correctional health care received by the contractor. The contractor will not settle any inmate healthcare litigation without first contacting the PSO General Counsel, Court Services Bureau Commander, Court Services Support Captain, and contract monitor.

#### 10. **Intake Medical Screening**

- a. Within two (2) hours of physical placement of an inmate into the facility, the contractor shall complete an intake medical screening (as identified by the Sheriff's Office). For each intake screening the contractor fails to timely complete within the two-hour timeframe, the PSO may deduct from payment owed the contractor the amount of \$250.00 dollars, unless circumstances were beyond the control of the contractor, including, but not limited to, an inmate's failure to cooperate and/or inmate unavailability. Inmates must be medically cleared through this process before they are sent to general and/or designated housing. Quotes must detail the intake medical screening process.
- b. Unconscious persons or a person who appears to be seriously injured must be referred immediately for emergency medical attention. Their admission to the jail is predicated upon written medical clearance from a hospital. The contractor will submit a plan regarding the medical clearance

process detailing which inmates may be monitored at the facility and those who will be required to obtain medical clearance at an emergency room. The plan will also include a procedure for inmates under the influence of drugs/alcohol.

- i. The contractor shall complete medical intake screenings at Intake/Release. The medical intake screening will include all requirements outlined by NCHCC, FCAC, and FMJS standards, including, but not limited to:
  1. Review of hospital discharge documentation and/or of transfer summary;
  2. Verification of medications and initiation of Release of Information;
  3. Initiation of detox or detox observation protocols;
  4. History of chronic diseases;
  5. Mental health history;
  6. History of drug/substance abuse;
  7. Recording of vital signs, and weight;
  8. Mental health evaluation;
  9. Assess medical and mental health needs;
  10. Laboratory diagnostic tests as clinically indicated;
  11. Medical clearance and evaluation as clinically indicated;
  12. Initiation of medication administration, therapy and appropriate referral to Mental Health/Medical providers as clinically indicated;
  13. Appropriate housing assignment based on medical and mental health need;
  14. Place on, remove, or continue inmate on Property Authorization as indicated; and
  15. Place inmate on individual Q15 (a 15-minute watch by the Court Services Bureau staff) or other observation report, as needed.

#### **11. Health Assessment**

- a. The PSO requires a health assessment be completed on every inmate within ten (10) days of their arrival/booking. Inmates detained for longer than one year will be provided with a health assessment annually on their initial booking date. The Health Appraisal shall include all of the requirements outlined by NCCHC, FCAC, and FMJS standards, including, but not limited to:
  - i. Review of the intake medical screening;
  - ii. Complete history and physical examination; recording of vital signs, height, and weight;
  - iii. Mental health evaluation;
  - iv. Dental screening;
  - v. Testing for tuberculosis;
  - vi. Vision and hearing screening;
  - vii. Referral to Public Health Representative for HIV, Hepatitis A, B, C testing;
  - viii. Laboratory diagnostic tests as clinically indicated;
  - ix. Review of results of the health appraisal by a physician; and
  - x. Initiation of therapy and referral to Mental Health/Medical providers when appropriate.

#### **12. Inmate Worker Status**

- a. The contractor will indicate (based on the Health & Physical) when an inmate is fit for inmate worker status and ensure inmates are physically/mentally capable to perform assigned work duties. If at any time the inmate worker is not deemed fit for duty, due to medical or mental health reasons the contractor shall promptly notify the PSO and the inmate worker will be removed from inmate worker status until they are cleared by the medical/mental health provider.

**13. Nurses Clinic/Sick Call**

- a. The contractor will ensure the Nurses (LPN/RN) Clinic/Sick Call is conducted on a daily basis by a nurse handling all inmate medical requests, including referrals to Doctor's Clinic, as well as other medical concerns. Non-emergency medical concerns must be triaged by a nurse within 24 hours of receipt and must comply with all NCCHC, FCAC, and FMJS standards.

**14. Emergency Medical Care**

- a. The contractor will provide emergency medical services on-site 24 hours per day, seven days per week. During a medical emergency, the contractor's personnel are primary and will take over any and all life saving measures once they have arrived on scene. Arrangements must be made for required emergency services beyond on-site capabilities with appropriate community resources.
- b. The contractor will be responsible for all emergency transportation costs including ambulance/Bay Flight services. The contractor will also be responsible for providing emergency treatment to visitors, staff, employees, or subcontractors of the PSO who become ill or are injured while on the premises. Treatment shall consist of stabilization and referral to a personal physician, local hospital, or until the arrival of EMS.

**15. Juvenile Assessment Center**

- a. The contractor shall be responsible for providing medical evaluations to all juveniles involved in a use of force incident while detained at the Juvenile Assessment Center. The contractor shall also be responsible for emergency medical services which could result in a juvenile's transfer for additional medical treatment after acceptance into the JAC for processing. The contractor shall obtain medical authorization for the treatment of the juvenile from the juvenile's parent or guardian. In the event a parent or guardian is unable or unwilling to sign a medical authorization form for a juvenile detained at the JAC, the contractor shall notify the Florida Department of Children and Families.

**16. Dental Care**

- a. The contractor will provide basic dental care for all on-site inmates. A licensed dentist will perform all exams and treatments. The dental care program shall provide for basic dental services on a schedule approved by the PSO. There are two onsite dental treatment rooms at the PSO. The dentist will make referrals to providers for appropriate medical/clinical care when necessary. Priority emphasis will be to provide in-house dental care. Emergency dental services will be provided 24/7.

**17. Chronic Clinic**

- a. The contractor will develop and implement a program for chronic care. The chronic care provided will include an individual treatment plan implemented by the responsible physician specifying instructions on diet, medication, and diagnostic testing. The contractor will maintain a current chronic care clinic schedule and referral system.
- b. During the Medical Intake Screening, the nurse shall document and make a referral to the appropriate chronic clinic based on medical concerns. Inmates having a credible history of a chronic illness, who are determined to be medically unstable will be referred immediately to the Physician, by telephone, if necessary for orders. The inmate will be housed in the Medical Unit and will be seen the next day an ARNP/Doctor is on site unless the doctor determines in their medical judgment the inmate should be seen sooner or sent to the hospital for observation and clearance.

## 18. Pharmacy Services

- a. Pharmacy and emergency pharmacy service shall be consistent with State and Federal laws, NCCHC, FCAC, FMJS and/or regulations and monitored by a licensed, qualified pharmacist. Prescribed medications must be available within eight (8) hours of the order of issue being written. Medications will be received and/or delivered to the facility a minimum of two times per day Monday through Friday and once on weekends. The contractor shall have a back-up system for emergency medications which will be accessible 24 hours per day, 7 days per week. The contractor will provide details of this system.
- b. All dispensing of medication will be recorded to provide documentation inmates are receiving and ingesting prescribed medications. Documentation will be required when an inmate's ordered medication was not administered. The chart will indicate why, and if the inmate refused, the reason given. Medications must be blister packaged for easy storage in the medication carts, except for psychotropic medications which are to be dispensed in liquid form, if so manufactured. Any medication delivery delays noted by the Health Services Administrator could result in a written request to change pharmacy providers. In the event of a medication delivery delay, Contractor shall notify PSO in writing within seven (7) days of occurrence. All females will be tested for pregnancy prior to receiving any medications.
- c. The contractor will provide a pharmaceutical program in accordance with NCCHC, FCAC, FMJS requirements, federal, state, and local laws to meet the needs of the inmate population. The program will include guidelines for administering medications to inmates scheduled to be temporarily out of the facility (e.g. court appearances, inmate work crews, etc.). The Contractor's pharmaceutical program will be approved by PSO in advance and address at a minimum, the following:
  - i. Medication ordering process outlining verification, storage, and inventory;
  - ii. Medication administration systems to include Direct Observed Therapy (DOT) and Keep-on-Person (KOP) programs;
  - iii. Routine/non-urgent medication will be administered within 24 hours of physician's order. Urgent medications will be provided as required and ordered by physician;
  - iv. The administration of each medication will be documented on the electronic Medication Administration Record (MAR);
  - v. Documentation of an inmate's refusal to take prescribed medication. A refusal form must be obtained for each medication refusal and signed by the inmate and a witness;
  - vi. Requirements for physician evaluations prior to all new medication orders for inmates, including psychotropic medications. The evaluation will be documented in the inmate's health record;
  - vii. Appropriate storage of medications, inspections, and daily checks of refrigerator temperature will be documented;
  - viii. Proper administration, documentation, and storage of controlled medications;
  - ix. Priority to prescribing the generic equivalent of medication for all new conditions and/or pre-existing conditions if the drug has the same benefit as the brand name drug, unless the specific brand-name medication is the only alternative or there is an overriding medical necessity;
  - x. All medications will be maintained in a secure area and stored under proper conditions as required by federal, state, and local law, PSO policy, and NCCHC, FCAC, and FMJS standards;
  - xi. An inventory log indicating the use of stock medications will be maintained and reconciled;
  - xii. Provide policies and procedures for the removal and disposal of all outdated, unneeded, or surplus medications. (As per NCCHC, FCAC, and FMJS standards, **no expired**

**medications will be administered);**

- xiii. Medication rounds will be conducted only by qualified medical staff having no less than the LPN designation, at times determined by the PSO or as required by the prescribing physician. Medication shall be distributed primarily at the housing locations on a predetermined schedule;
- xiv. Must have an account with a local pharmacy to ensure medications are provided during emergency situations;
- xv. A complete formulary will be reviewed by providers on an annual basis; and
- xvi. Monthly Pharmacy report outlining utilization and cost.

**19. Medical Diet Requirements**

- a. The contractor will work closely with the contracted Food Service Manager and dietitian in developing and evaluating menus for appropriate medically-necessary diets as needed. The contractor will ensure allergies are medically indicated and reported to the Food Service Manager. A physician or nurse practitioner shall order special diets. The nursing staff will place all religious diets in the Jail Management System (under the Medical Section) as reported by the Court Services Bureau Inmate Chaplain.

**20. Transfer Summaries**

- a. The contractor will ensure all inmate transfers received from other agencies or transferred from PSO are screened by medical personnel for acute or chronic conditions, communicable diseases, mental status evaluation, and current medications. The contractor shall develop a procedure for transfer of pertinent medical information to emergency facilities and outside specialty consultants and for inmates transferred to federal, state, or local facilities, correctional or otherwise. Detailed summaries of medical, dental, and mental health care shall be sent to receiving facilities and prisons when inmates are transferred to other institutions. A supply of medications will be provided as indicated by NCCHC, FCAC, and FMJS standards.

**21. Ancillary Services**

- a. The contractor will utilize on-site facility staff to provide ancillary services to their fullest extent and shall be responsible for the cost of all on-site and off-site laboratory, ultrasound, EKG, x-ray, and other diagnostic services as required and indicated. The contractor will be responsible for regular laboratory service, phlebotomy, x-ray, and Electrocardiography (ECG) services. The contractor will be responsible to obtain all Clinical Laboratory Improvement Amendments (CLIA) waivers and inspections of dental x-ray equipment. A physician or nurse practitioner will review all laboratory results within 24-48 hours after receipt of test results to assess the follow-up care indicated and to screen for discrepancies between the clinical observations and laboratory results. The physician on-call shall be notified immediately of all STAT reports. All routine x-rays shall be provided on-site at the facility by utilizing mobile x-ray services (if possible). X-rays shall be read by a Board Certified radiologist and taken by a registered technician. The contractor will ensure that results are reported to them within twenty-four hours.

**22. Medical Specialist On-Site Service**

- a. Diagnosis and treatment regarding the following specialization services must be sufficient to provide for emergency care and as medically required for inmates at the detention facility or JAC. Care for the following specialties shall be provided on-site and within a reasonable amount of time, as is medically necessary:
  - i. Dentistry;
  - ii. Orthopedic;
  - iii. Physical Therapy;

- iv. Nephrology – Dialysis;
- v. Radiology – XRAY;
- vi. Lab tests, EKG or other testing;
- vii. HIV Specialty Care; and
- viii. Obstetrics/Gynecology.

- b. Hospice. The contractor shall coordinate hospice care as required for terminally ill inmates. Off-site visits for specialist appointments shall be managed and must be approved by the Medical Director.

**23. Partnerships**

- a. Describe your company's use of partnerships or agreements with local universities, hospitals, county health departments, or other resources to provide/enhance specialty medical services.

**24. Telemedicine**

- a. Describe your company's utilization of telemedicine as part of patient care delivery options.

**25. Mental Health Programs**

- a. Mental Health programs will be developed by the contractor for the referral, evaluation, and treatment of inmates. Mental Health services must be available 7 days per week and a provider must be available 24 hours a day, seven days a week for consultation. Contractor will be responsible for all aspects of psychiatric care including, but not limited to, mental health treatment, medication treatment, detoxification, initiating Baker Act proceedings, hospitalizations, and placing inmates on Property Authorization. If an inmate was on a Property Authorization prior to hospitalization, the contractor will ensure the inmate is placed back on Property Authorization upon return to the facility and the psychiatrist will be contacted for orders. The program will also include the following:

- i. All inmates referred for a mental health evaluation will receive a comprehensive diagnostic examination including a psycho-social history and mental status evaluation. This examination will include an assessment of suicidal risk, potential for violence, and special housing needs.
- ii. When isolated for psychiatric purposes, inmates shall be examined by a Licensed Mental Health Professional within twenty-four (24) hours after initial confinement. Psychiatric evaluations must support confinement of inmates based on risk of physical danger to self or others. A Licensed Mental Health Professional will be responsible to determine and document in the medical record when an inmate should be returned to general population.
- iii. All inmates on direct or psychiatric observation will be seen daily by the psychiatrist.
- iv. Psychotropic medication will be used when appropriate and will be dispensed only in liquid form when so manufactured. To maximize the effectiveness of pharmacotherapy and to reduce the toxicity and side effects of medication, an intensive program of drug monitoring shall exist. All persons taking psychotropic medication upon arrival in booking will be seen by the psychiatrist, physician, or nurse practitioner within 72 hours. A medical evaluation and routine lab work shall be performed on persons requiring segregation and psychotropic medications.
- v. Treatment plans will be developed for all mental health referrals including case findings, follow up referrals, liaison work, and opportunities for post release planning.

**26. Alcoholism Services.**

- a. Alcoholism services will be offered to inmates referred to the program for health problems and who have alcohol related problems. These services will be provided by medical and mental health professionals and should include monitoring for withdrawal.

**27. Detoxification of Inmates**

- a. The contractor will be responsible for the detoxification of inmates withdrawing from drugs or alcohol. Nurses shall record vital signs, state of consciousness, speech pattern, nausea, vomiting, anxiety, weakness, restlessness, sweating, shakiness, and muscle twitching on a flow chart. Physicians shall be notified for detoxification orders. Inmates experiencing severe detoxification (overdose) or withdrawal will be transferred by EMS to a licensed acute care facility for clearance and/or management. Contractor's proposal will provide details of this process.

**28. Methadone Treatment (Operation PAR)**

- a. The contractor will provide methadone treatment to pregnant inmates and maintain these services with Operation PAR. The contractor will make all appointments and coordinate transport with PSO Transportation staff.

**29. Close Observation and Confinement**

- a. Housing guidelines will be provided to inmates requiring close observation and/or segregated confinement for administrative reasons. All inmates assigned this classification, segregated from the general population for chronic or convalescent care, psychiatric care, or observation or for non-medical reasons must be seen by a medical professional on a daily basis. The Contractor's proposal will describe their method of monitoring and handling the care of inmates under close observation and confinement.
- b. Inmates presented to Booking while under the influence of alcohol or drugs must be evaluated for potential withdrawal symptoms. When indicated, inmates will be placed under medical observation and begin protocols for detoxification.

**30. Medical Housing**

- a. The contractor will manage the Medical Unit cells, including negative pressure quarantine cells. The Medical Unit will provide services, which include, but are not limited to, postoperative care, specialized medical care, dialysis, I.V. Therapy, special orthopedic care, and bed rest. This unit shall be staffed by Contractor on a 24 hour basis with a RN Supervisor. The contractor will work closely with the Operations and Intake/Release staff for the appropriate transferring in/out of inmates on the Medical Unit.

**31. Hospitalization & Offsite Specialty Services**

**a. Hospitalization/ER Visits**

- i. The contractor will obtain emergency outpatient/inpatient services from local hospitals to meet the health care requirements of the inmate. When outside hospitalization is required, the contractor will coordinate with the on duty Shift Commander or Transport Supervisor in arranging transportation and deputy coverage. No inmate shall be transported without a certified deputy or approved transportation officer present as security. The contractor is responsible for utilization review (Statistical Medical Review) to include preapprovals, case management, and discharge planning.
- ii. The contractor shall include in their proposal, the following cost structures:
  1. Contractor is responsible for all costs associated with hospitalization, all off-

site specialty services, inclusive of diagnostic and treatment procedures, and emergency transportation services. Billing for costs will be separate from general Inmate Health Care services. The contractor is responsible for seeking out and obtaining reimbursement from third parties. If an inmate has personal health care insurance, the contractor will make all attempts to have that insurance carrier/company pay for all services possible. Any and all benefit payments will be forwarded to the PSO's Fiscal Office.

- a. Up to an annual limit of \$50,000 per inmate per incarceration; or
  - b. Up to an aggregate annual limit as defined by contractor.
2. PSO and/or Pasco County is responsible for all costs associated with hospitalization and all off-site specialty services, inclusive of diagnostic and treatment procedures. Contractor shall negotiate rates with area hospitals and bill PSO on a monthly basis. The contractor is responsible for seeking out and obtaining reimbursement from third parties. If an inmate has personal health care insurance, the contractor will make all attempts to have the inmate's insurance carrier/company pay for all services possible.
  - iii. Contractor shall identify all billing methods and cost sharing proposals.
  - iv. Inmates returning from hospitalization or off site appointments are to be assessed upon their return by medical personnel. A note regarding the assessment with reference to follow up in-house must be documented in the inmate medical record.
  - v. The contractor will utilize local (Pasco County) hospitals whenever possible for hospitalization of inmates. Coordination and collaboration with local hospital administrations is the contractor's responsibility. The contractor is responsible for negotiation of rates and timely payment of hospital bills to maximize all discounts.
  - vi. Contractor shall be responsible for specialty care of inmates in the custody of the PSO, but housed at a detention facility outside of Pasco County. The PSO has an average of 60 inmates per year housed at facilities outside of Pasco County.

#### b. Specialty Care

- i. The contractor will provide specialty and subspecialty care as required or schedule and coordinate the provision of such care with outside providers. However, treatments should be provided in-house to the degree possible. The contractor will provide notice to the on duty Shift Commander or designee of all outside routine medical services five days in advance, unless the situation is deemed an emergency situation that cannot be delayed. (Hemodialysis is to be provided on-site).
- ii. The contractor will be responsible for all supplies used or ordered by the specialist, including recommended prosthetics, braces, special shoes, glasses, dentures, hearing aids, orthopedic devices, etc. The contractor will establish policies and procedures for the provision of prosthetics, regarding frequency and eligibility with the assistance and approval of PSO.
- iii. Any utilization review process developed by the contractor for approval of outside consultations or inpatient care shall be completed within **five (5) business days** of the ordering physician's request. This process will be reviewed and approved by PSO. The contractor will develop provisions for prenatal care, in accordance with accepted community standards. Prenatal care shall include (at a minimum) the following services:
  1. Routine urine testing for proteins and ketones;
  2. Vital signs and weight;
  3. Follow-up care with Obstetrician (to be provided on-site), unless emergency circumstances exist;
  4. Diagnostic follow-up, as required (ultrasound); and
  5. Dietary supplement.

- iv. The following specialty care, at a minimum, shall be provided:
  - 1. OB/GYN (Including Pregnancy Testing);
  - 2. Dermatology;
  - 3. Cardiology;
  - 4. ENT;
  - 5. General Surgery;
  - 6. Orthopedic;
  - 7. Ophthalmology;
  - 8. Neurology;
  - 9. Operation PAR (Methadone Treatment);
  - 10. Dialysis; and
  - 11. Wound Care

32. **Pregnancy Program**

- a. The contractor shall define an Obstetrics/Gynecology program.

33. **Medical Records**

- a. The contractor must implement within the first 30 days from contract commencement an Electronic Medical Records (EMR) System, unless such installation is delayed due to circumstances beyond the contractor's control. Should the contractor cease providing healthcare services to the PSO for any reason, the PSO may continue to utilize the EMR system with no additional financial obligation by the contractor and under the terms and conditions agreed upon between the PSO and EMR provider.
- b. Individual health care records will be initiated and maintained for every inmate regarding medical, dental, and/or mental health services as a result of the inmate screening process, health appraisal, medical clearance, sick calls, hospitalizations, or any service provided to the inmate during their detention period. The health record will not be combined with the custody record.
- c. Confidentiality of medical records, including Health Insurance Portability and Accountability Act of 1996 (HIPAA), shall be strictly followed. Adherence to applicable informed consent regulations and standards of the local jurisdiction must be maintained. Medical records shall be considered confidential. The contractor shall ensure specific compliance with standards regarding patient confidentiality is instituted for the receipt and filing of all outside consults, emergency room visits and inpatient hospitalizations.
- d. Medical summaries or certifications must be produced to accompany inmates for inter-agency transfers. Contractor must describe intra-system transfer protocols and procedures in accordance with NCCHC, FMJS, and FCAC Standards.
- e. Medical data necessary for the classification, security and control of inmates will be provided to appropriate PSO personnel.
- f. Information concerning any court or legal documents affecting inmates and the contractor must be provided, in writing, to the Court Services Support Captain prior to the close of the shift of service/receipt.
- g. The contractor will be responsible for responding to all medical records requests submitted to the PSO Legal Office and PSO's Professional Standards Office, and by attorneys, inmates, and doctor's offices for the purpose of continuity of care. Contractor must describe procedures for responding to medical records release requests.
- h. The electronic medical records system must be able to interface with other systems (such as the Jail Management System, Laboratory and Pharmacy Systems). Contractor will pay all interface costs. Records shall be accurate, comprehensive, legible, and up-to-date medical information must be maintained on each inmate under its care. **All medical records are the property of the PSO and will be made available to PSO upon request.**
- i. Hard copies of medical records will be scanned into the EMR and then filed and boxed to be sent

to the PSO Records Archives. All medical records shall be kept secure as required by applicable law and PSO regulations/standards. The contractor shall be the “official custodian of medical records” during the performance of the services under this agreement. Any destruction of medical records shall be approved by the Court Services Support Captain prior to destruction and shall be in accordance with the retention schedules as outlined in the Court Services Bureau Directives and Florida and/or Federal law.

- j. Current inmate medical provider keeps and maintains inmate medical records on an EMR system. Contractor shall work with current provider to transfer and obtain all existing medical records by the first day of the contract term. Contractor shall provide a plan for downloading and transferring all medical records to Contractor’s EMR system. Contractor shall ensure access to all existing medical records beginning the first day of the contract term.

**34. Inmate Fee Program & Medical Charge Slips**

- a. The contractor will participate and track the inmate co-pay program. The inmate fees collected will be for the use of the PSO not the contractor. The contractor will not collect or handle any inmate funds. Charge slips are used to gain the inmate’s acknowledgement of services provided and fees to be charged to their inmate account for those services. The charge slips shall be initiated and completed by medical personnel and forwarded to PSO staff. The contractor will get approval from the Court Services Bureau Commander for any changes in the co-pay program.

**35. Exposure Officer**

- a. The contractor will assign a nurse to address all PSO staff exposures. In the event of a PSO staff exposure at facility, contractor shall treat PSO staff.

**36. Annual Purified Protein Derivative (PPD) Screenings/ Hepatitis Vaccination of Sheriff’s Office Staff**

- a. The contractor shall perform PPD screening, readings, and administer the Hepatitis A and B Vaccine series to PSO personnel as scheduled and/or requested by the PSO at no additional cost to PSO. PSO shall provide the vaccines.

**37. Pasco County Public Health Department Linkage Program - HIV/AIDS Facility Certification**

- a. The contractor will obtain and maintain certification from the Florida Department of Health Division of Disease Control – Bureau of HIV/AIDS. The Pasco County Health Department will conduct HIV/HEP A, B, and C testing, prevention counseling, education, and linkage services at the detention facility. A minimum of two registered nurses must be current on HIV/AIDS 501 class and annually update through the Pasco County Health Department.

**38. Partnership with Community Colleges**

- a. contractor will facilitate and maintain partnerships with community colleges for internship/clinical rotation opportunities. All internships and/or clinical rotations shall be approved in advance in writing by the PSO.

**39. Emergency Disaster Plan**

- a. The contractor will develop procedures for a disaster plan in the event of a man-made or natural disaster. The Emergency Disaster Plan shall be coordinated with the security plan and incorporated into the PSO’s overall emergency plan. All of contractor’s personnel shall be trained on contractor’s emergency plan. Review of the health aspects of the disaster plan shall be a part of the initial orientation of new personnel and reviewed annually with all health care staff. This plan is to be reviewed annually and approved by the PSO.

**40. Statistical Reporting and Scheduled Reviews**

- a. Contractor shall keep and maintain all of the below listed reports. All required reports will be

provided to the Court Services Support Captain.

- b. Monthly narrative reports shall be submitted on the fifth calendar day of each month with all of the following data reflecting the previous month's workload:
  - Inmates requests for various services
  - Inmates seen at sick call
  - Inmates seen by physician
  - Inmates seen by dentist
  - Inmates seen by psychiatrist
  - Inmates seen by psychologist
  - Infirmatory admission, patient days, average length of stay
  - Mental Health admissions
  - Off-site hospital admissions
  - Medical specialty consultation referrals
  - Intake medical screening
  - History and physical assessments
  - Psychiatric evaluations
  - Diagnostic studies Report of third party reimbursement, pursuit and recovery
  - Percentage of inmate population dispensed medication
  - Inmates testing positive for venereal disease
  - Inmates testing positive for AIDS or AIDS Antibodies
  - Inmates testing positive for TB
  - Inmate mortality
  - Number of hours worked by entire medical staff, specifying each post or shift
  - Other data deemed appropriate by the PSO
- c. Monthly offsite activity/cost report by the 20<sup>th</sup> of each month. PSO is requiring all offsite cost reports outlining offsite, outpatient, inpatient, Emergency Room visits, and Clinical Service visits.
- d. Monthly pharmaceutical Report including cost of medications.
- e. Daily Medical Report outlines important events of both day and night shifts. A daily report for the previous twenty-four (24) hours submitted prior to 9:00a.m., to include:
  - Transfers to off-site hospital emergency departments
  - Communicable disease reporting
  - Suicide data (i.e., attempts and precautions taken)
  - Report of status of inmates in local hospitals and infirmaries
  - Staffing rosters
  - Completed medical incident report copies
  - Completed medical grievance report copies
  - A list of lost medical files
  - Intake screenings performed
  - Health Appraisal status report
- f. Staff meetings will be held on a monthly basis between health care administrative staff and the Court Services Support Captain to evaluate statistics, cost of services, program needs, problems, and coordination between PSO staff and medical personnel.
- g. A written manual of standardized policies and defined procedures approved by the health care authority and the PSO must be reviewed at least annually and revised as necessary.

#### 41. **Miscellaneous Requirements**

- a. Health Care staff shall be responsible for all housekeeping duties in the Medical Area with the exception of cleaning the floors, bathrooms, and vents.
- b. Inmates will not be allowed to provide any health care services, including record keeping.
- c. All transportation for outside medical consultations/treatment shall be coordinated in advance with the Shift Commander.
- d. The contractor shall be responsible for the disposal of all medical, contaminated or hazardous waste and associated cost. This material must be removed from within the facility to a secured area and disposed of in accordance with all Federal, State, and local laws.
- e. Contractor's staff shall respond to acute medical and emergency needs of PSO on duty staff and visitors. Services provided must be documented.
- f. The contractor shall participate in a weekly review of selected cases involving inmates identified

as requiring specialized housing. The Classification/Reclassification Meeting is comprised of representatives from healthcare, mental health, and PSO staff.

**42. Additional Financial Responsibility**

- a. In addition to the expenses associated with providing all the programs and services listed in this RFQ, the contractor will also be responsible for all costs, including, but not limited to, the following:
  - i. Medical supplies;
  - ii. Office equipment and supplies;
  - iii. Reimbursement to PSO for all long distance telephone charges incurred using PSO telephone extensions; and
  - iv. Reimbursement for printing costs on medical printers provided by PSO.
- b. The contractor will submit payment to all outside vendors and providers within 30 days of receipt of invoice.
- c. The contractor will, at its own expense, determine whether inmates have health insurance coverage to cover the cost of any off-site services or hospitalizations. If such health insurance coverage exists, contractor will process the appropriate claims and will follow-up until payment or reimbursement is complete. All such reimbursement will be reported and provided to the PSO.

**43. Office Furniture and Medical Equipment**

**a. Office Furniture**

- i. The PSO owns the existing office equipment. At contract award, the PSO will provide a reasonable amount of office furniture including desks, chairs, and filing cabinets for contractor's staff. The contractor will be responsible for the repair and/or maintenance of existing office equipment. All office furniture requirements shall be presented in the quote.

**b. Medical Equipment**

- i. The PSO owns the existing medical equipment. The contractor is responsible for the cost of all additional supplies and equipment needed to provide health care. An equipment list will be established and agreed upon by the contractor and PSO prior to the execution of a contract. The contractor will be responsible for the minor repair and/or maintenance of existing equipment. Equipment maintenance, service plans, inspections, calibrations, and certifications as required will be the responsibility of the contractor. Copies of reports of these activities will be provided to the Court Services Support Captain. Repair costs less than \$1,000 will be the responsibility of the contractor. Requests for repairs exceeding \$1,000 will be submitted to the Court Services Support Captain for approval, prior to the repair, unless it is an emergency.
- ii. In the event additional equipment with a value of \$1,000 or more is required during the term of the contract, a written description of the equipment and request for its purchase shall be submitted to the Court Services Support Captain who will present the request for consideration as a capital budget item.
- iii. The PSO will provide the contractor with office space, examination rooms, and utilities to enable the contractor to perform its obligations under the contract. The PSO will provide security staff for off-site supervision and transportation of inmates for medical services. The PSO will provide security services in the clinic for medical personnel. The PSO will provide basic housekeeping, cleaning supplies, and laundry services.

**44. Average Daily Population Statistics**

- a. The contractor will provide comprehensive inmate health care service, medical personnel, and other program staff to deliver the services described in this quote at a base price per year for a three (3) year period. To assist with the determination of proposed contract price, the average

daily population (ADP) history and projections are listed below:

**Inmates Statistics – ADP/Total Defendant Booked**

<b>Calendar Year (1 Jan – 30 Dec)</b>	<b>Total Defendant Booked</b>	<b>ADP</b>	<b>ADP % Change</b>
<b>2016</b>	<b>13,638</b>	<b>1,509</b>	<b>9.1 % +</b>
<b>2017</b>	<b>15,105</b>	<b>1,692</b>	<b>12.1 % +</b>
<b>2018</b>	<b>13,462</b>	<b>1,742</b>	<b>2.95 %+</b>
<b>Projected</b>			
<b>2019</b>	<b>20,448</b>	<b>2,050</b>	<b>17.7%+</b>
<b>2020</b>	<b>21,400</b>	<b>2,193</b>	<b>6.98%+</b>

Note: The Pasco County Detention Facility currently has a maximum capacity of 1900 inmates. At this time, inmates exceeding capacity are housed at another county’s detention facility with accrual of off-site specialty or emergency medical costs only. Should the PSO expand its capacity due to the addition of a temporary structure, the maximum capacity shall not exceed 2070.

## Inmate Medical Statistics

Stats are calculated by FY

	FY 2016	FY 2017	FY 2018 thru November
<b>Medical Services Stats</b>			
<b>Infectious Diseases</b>			
Avg per month HIV (+) inmates treated w/ meds	12.0	14.7	17.1
<b>Community - Yearly Total</b>			
Medical Clearance (Pre-booked)	360	410	411
Hospital Admissions (combined- CCS and Pre-books)	163	221	245
Emergency Room Visits (combined- CCS and Pre-books)	594	730	697
EMS Responded	8	8	26
Baker Act Admissions	65	47	53
Outpatient Surgeries	45	41	48
Yearly Total Referrals to Specialists	693	562	540
<b>Visits - Yearly Total</b>			
MD/Medical ARNP	6,462	7,451	6,543
Dentist	1,469	1,417	1,383
Psychiatrist/ARNP	2,247	1,944	1,083
Mental Health Professionals	15,744	16,158	14,441
Chronic Care Clinic Visits	2192	2,579	1,548
<b>Yearly Total Baby Deliveries</b>	4	3	3
<b>Avg Monthly Inmate on Detox Protocol</b>			
Clinical Opiate Withdrawal Scale	165.4	200.7	203.5
Clinical Institute Withdrawal Assessment	193.3	223.3	220.2
<b>Avg monthly Inmates on Psych meds</b>	314.0	275.3	286.67
<b>Tests Completed - Yearly Total</b>			
X-Rays	1,414	1,957	1,945
Ultrasounds	313	359	346
EKG s	543	638	441
Labs	1,485	1,750	2,582
<b>Pharmaceuticals</b>			
# of Prescriptions Dispensed	24,878	24,061	33,236
<b>Contracted Staff- FTE</b>			
Medical ARNP (additional .4- telemed for C.C. PRN)	1	1	1.4
LPN Nurses	19.5	19.5	20.9
RN Nurses/RN Charges	8	8	8.6
Nursing Positions Open	0	0	0
RN Supervisor	0	0	0
CNAs	0	0	0
Medical Secretary (Administrative Assistant)	1	1	1
Assistant Director of Health Services (Director of Nursing)	1	1	1
Director of Health Services (Health Services Administrator)	1	1	1
Med Records	2	2	2
<b>Contracted Staff (Continued)-FTE</b>			
	<b>FY 2016</b>	<b>FY 2017</b>	<b>FY 2018 thru November</b>
Part Time MD	0	0	0
Part Time Dentist	1	1	1
Part Time Psychiatrist	1	1	1
1 Part Time Psychiatric ARNP	0	0	0

1 Full Time Psychiatric ARNP	1	1	1
Mental Health Staff – Masters Level	4	4	4
<b>Medical Services Stats</b>			
Yearly Total Intake Screenings	12,658	14,188	13,822
Yearly Total Health & Physicals	5,673	6,135	6,934
Yearly Total Nursing Treatments	139,480	155,230	140,608
Yearly Total Sick Calls (Medical and Dental)	30,117	32,864	27,489
Yearly Total Sick Calls (Mental Health)	5,057	4,392	4,360
Yearly Total of Patients on IV Therapy	16	35	34
<b>Census- Avg Monthly</b>	1,498.3	1,693.7	1,704.7
<b>Cost for Offsite Services</b>	\$711,971.00	\$2,214,603.00	\$1,308,846.00
<b>Total Medication Expenditures</b>	\$775,521.00	\$964,099.00	\$1,284,794.00
<b>Medication Expenditure by Drug Category</b>			
Psychotropic Medication Expenditures	\$70,521.00	\$87,278.00	\$55,365.00
HIV Medication Expenditures	\$29,6510.00	\$376,386.00	\$424,031.00
Biological Medication Expenditures	N/A	\$75,269.00	\$380,125.00
<b>Medication Expenditure by Drug Category in the last 6 months</b>			
Psychotropic(June 2018-November 2018)	\$26,374.00		
HIV (June 2018-November 2018)	\$217,793.00		
Biological Medication Expenditures	\$133,238.00		
<b>Total Medical Services Budget 2018</b>	\$6,732,701.42		

**45. Cost Containment Program**

- a. The contractor will provide a detailed plan for the implementation and operation of a cost containment program. Addressed in this section shall be all mechanisms the contractor will use to control costs, areas in which cost savings can be achieved, and evidence of the success of such programs at other contractor sites. This plan will be written and approved by PSO before the execution of a contract.

**46. Billing**

- a. The PSO shall compensate the contractor on a monthly basis at the rate of 1/12 of the annual contract cost. Price must be all inclusive of program costs. Any expenses incurred in excess of the guaranteed costs would be absorbed by the contractor. The methodology used in determining the price should be included in the quote as well as the expense categories and percentages applied to each.
- b. **Payments to Subcontractors:** The contractor agrees if any subcontractor is employed by the Contractor for the provision of any goods or services under this Contract, the Contractor agrees to the following:
  - i. The Contractor shall, within seven (7) days after receipt of any payments from the PSO pursuant to this Contract, either:
    1. Pay the subcontractor for the proportionate share of the total payment received from the PSO attributable to the goods or services provided by the subcontractor; or
    2. Notify the PSO as applicable and the subcontractor in writing within 10 days of the intention to withhold all or a part of the subcontractor's payment with the reason for nonpayment. Written notice to the PSO will be given to: PSO Court Services Bureau Commander, 20101 Central Blvd, Land O'Lakes, FL 34637.

**47. Personnel**

- a. The contractor shall submit a written, detailed staffing matrix to meet all servicing requirements

as outlined in this RFQ. Registered Nurse staffing is required twenty-four (24) hours a day, seven days a week.

**b. Recruitment and Credentialing Program**

- i. The contractor will describe its recruitment program and shall indicate provisions to guarantee full staffing at the Facility. The PSO Court Services Bureau Commander and Court Services Support Captain will be involved in the interviewing process and final selection for the Health Services Administrator, Medical Director, and Director of Nursing. Proposed salary scales for all job titles shall be included in the quote. Personnel files of all subcontractors and contract employees will be maintained at the facility and made available to the Court Services Support Captain upon request. These files shall include copies of current licenses, proof of professional certification, Drug Enforcement Administration (DEA) numbers, malpractice insurance certificates, evaluations and position responsibilities.
- c. **Background Investigation** – The contractor will ensure all personnel submit to and pass a background investigation, including a fingerprint check conducted by the PSO in accordance with Paragraph 7(a) of this RFQ.
- d. **Compliance with Federal, State and Local statutes** – The contractor will enact policies to ensure all personnel comply with current state, federal, and local laws and regulations, court orders, PSO Bureau Directives, PSO General Orders, and ACA, FMJS, FCAC, and NCCHC standards.
- e. **Turnover of staff** - The contractor will describe its current nursing turnover ratio in other contracts (for both RNs and LPNs) and shall indicate specific turnover for health services administrators, medical directors, regional managers, and physicians.
- f. **On-Call Responsibility** - The contractor will ensure the on-site psychiatrist, dentist, physician, and health administrator will be on-call 24/7.
- g. **Staffing and Schedules** – The contractor will ensure all contract hours are spent on-site, except as is otherwise expressly agreed to by the Court Services Bureau Commander/Designee and the contractor. All full-time contractual staff shall be on-site for at least 40 hours per week. A 40-hour, on-site week shall consist of a 40-hour work schedule and an additional 30-minute meal period for each shift, which is not included in the work schedule. Contractor’s staff will not be reassigned to assist with problems of other contracts. Contractor’s staff will be required to comply with sign-in and sign-out procedures on an official time-keeping form.
- h. **Staff Absences/Coverage** - The contractor will specify how they intend to cover periods of absences caused by vacations, holidays, and sick leave and shall state what relief factor was computed into their staffing ratio. The contractor will state whether positions in their quote are to be covered by full or part time personnel.
  - a. At the end of each month, the contractor will report staff coverage and reimburse the PSO a credit consisting of an hourly salary and fringe benefits for each hour(s) of absence that brings coverage levels below one hundred (100%) percent. The contractor must maintain one hundred (100%) percent coverage of the submitted staffing plan. The staffing plan must be written and approved by PSO prior to the execution of a contract.
- i. **Security Clearance** - The contractor and its staff will be subject to and will comply with all security regulations and procedures of the PSO, including CJIS security requirements. Violations of regulations may result in the employee being denied access to the Facility. In this event, the contractor will provide alternate personnel to supply services, subject to the PSO's approval.
- j. **Employee Training and Orientation**
  - i. The contractor will describe its orientation program for its staff. The contractor will be responsible for ensuring all new health care personnel are provided with orientation and appropriate training regarding medical practices on-site at the facility. An outline of the orientation and in-service program will be submitted with the quote.
  - ii. The contractor’s employees new to the Facility are required to attend an 8-hour orientation program conducted by the PSO including, but not limited to the following, facility and

personal security, inmate manipulation, classification, and blood borne pathogen on their first day of employment. The contractor will be responsible for the employee compensation during this training.

- iii. The contractor will conduct emergency drills in coordination with PSO staff as directed by PSO.
- iv. All of contractor's employees must comply with CJIS security requirements. CJIS security requirements will be coordinated with the Court Services Support Services Captain.
- v. The contractor will meet all accreditation standards relating to staff training.

#### **48. Licenses and Certifications**

- a. The contractor will obtain, at its own expense, all licenses and/or certifications required for all staff to render medical and health services at PSO Detention Facility and Juvenile Assessment Center. The contractor will ensure all of their employees rendering services at the PSO Detention Facility and Juvenile Assessment Center possess all licenses and/or certifications necessary to render medical services as required by the State of Florida.

#### **49. Hospital Privileges**

- a. If the contractor does not have hospital privileges, they shall outline the process for admitting, monitoring, and discharging inmates.

#### **50. Contract Transition**

- a. The contractor must outline the transition from the current service delivery system to the new contract. The transition plan should address an orderly and efficient start-up. The contractor should emphasize their past experience in transitioning from a different vendor, implementing new contracts, and all successes in this area. The transition plan must be written and approved by PSO prior to the execution of a contract. A detailed transition plan shall be submitted with the quote addressing, at a minimum, the handling and transfer of the following issues:
  - i. Recruitment of current and new staff, including physicians;
  - ii. Subcontractors and specialists;
  - iii. Hospital services;
  - iv. Identification and assuming of current medical care cases;
  - v. Equipment and inventory;
  - vi. Medical record management plan detailing timely transition of EMR and obtaining existing medical records;
  - vii. Orientation of new staff;
  - viii. Personnel plan to supervisor and monitor transition;
  - ix. Timeline for transition; and
  - x. Pharmaceutical, laboratory, radiology, and medical supplies.

#### **51. Insurance and Certificate Requirements**

- a. The contractor shall provide the following insurance coverage and comply with the following requirements to ensure the contract meets minimum insurance specifications in order to protect the PSO's interest and comply with Florida State Law.
- b. General Requirements
  - i. The contractor will ensure that before commencing work, the contractor and any subcontractor shall furnish evidence such as a Certificate of Insurance, acceptable to the PSO, that it has procured and will maintain, at its own expense, until final acceptance of the work, or until released in writing at the time of "Notice of Substantial Completion", insurance in the kinds and amounts hereinafter specified. The PSO Detention Facility is

defined as PSO Detention Facility, its agents, officers and employees. Proof of insurance must be given to PSO and verified prior to the execution of a contract.

- c. Insurance: The contractor will be required to maintain and carry in force for the duration of the contract, insurance coverage of the types and minimum liability as set forth below and meeting the following requirements:
  - i. List the type of insurance coverage and acceptable limits, as required by the PSO.
  - ii. Name the certificate holder as PSO, 20101 Central Blvd, Land O'Lakes, FL 34637.
  - iii. Name the PSO, its members, and agents (without reference to a specific department) as an additional insured on each Certificate of Insurance for all liability policies. This can be provided in the caption or in the comments section of the certificate.
  - iv. Each certificate of insurance required, and each endorsement, must be signed by a licensed registered agent. In the event of self-insurance, by an authorized signatory.
  - v. In the event of any material alteration or cancellation of any insurance coverage, the issuing insurer will endeavor to mail written notice to the PSO, 20101 Central Blvd, Land O'Lakes, FL 34637.
  - vi. Insurance carriers should be admitted in the State of Florida, unless an exception is approved by the PSO.
  - vii. The Certificate of Insurance shall be submitted to the Court Services Bureau Commander with a copy to the Court Services Support Captain and contract monitor for compliance review, approval and retention at least thirty (30) days prior to the start of work.
- d. The contractor will ensure the insurance coverage and the Minimum Liability Requirements outlined below:
  - a. Professional Liability Insurance of \$1,000,000 per occurrence and \$3,000,000 annual aggregate
  - b. Commercial General Liability of \$1,000,000 combined single limit per occurrence for bodily injury, personal injury and property damage. Minimum \$2,000,000 aggregate.
  - c. Workers' Compensation and Employer's Liability
    - i. Workers' Compensation Statutory, (include all states endorsement)
    - ii. Employer's Liability \$100,000 each occurrence
- e. The contractor will maintain the full limit of coverage as stated above for five (5) years after substantial completion of the project resulting from this RFQ. Extended reporting or "tail" coverage shall be maintained on any coverage which is cancelled or non-renewed unless the replacement coverage includes a retroactive date no later than the date of the agreement which results from this RFQ. Evidence of replacement coverage and/or an extended reporting endorsement must be provided.
- f. The contractor will ensure that before entering into a contract, the contractor will furnish to the PSO a Certificate of Insurance verifying such coverage and identifying the Board of County Commissioners, Pasco County, Florida, its' officers, commissions, agents and employees, and the PSO as additional insured as pertains to the contract. This inclusion will not make the County a partner or joint venture with the contractor in its operations hereunder, nor does it apply to the Professional Liability coverage.
- g. The Board of County Commissioners, Pasco County, Florida, its' officers, commissions, agents and members and the Pasco County Sheriff will be named as additional insured's as respects: Liability arising out of acts performed by or on behalf of the contractor; products and completed operations of the contractor; premises owned, leased or used by the contractor; or automobiles, leased, hired or borrowed by the contractor.

The certificate holder on the Certificate of Insurance shall be as follows:

Board of County Commissioners  
Pasco County, Florida  
c/o PSO Purchasing Supervisor

20101 Central Blvd  
Land O'Lakes, FL 34637

This RFQ No. **1 FY19** shall be referenced on the Certificate of Insurance.

- h. Prior to any material change or cancellation, the Board of County Commissioners, Pasco County, Florida, its' officers, commissions, agents and employees will be given thirty (30) days advanced written notice by registered mail to the stated address of the certificate holder.
52. **Employment of Unauthorized Alien**: The contractor does not and will not during the performance of the contract for goods and/or services knowingly employ an unauthorized alien as defined in the Federal Immigration Reform and Control Act of 1986.
53. **Contractual Claims**: The contractor agrees contractual claims, whether for money or other relief, will be submitted in writing no later than 60 days after final payment; however, written notice of the contractor's intention to file such claim shall be given at the time of the occurrence or beginning of the work upon which the claim is based. Any notice or claim shall be delivered to the Court Services Bureau Commander, 20101 Central Blvd, Land O'Lakes, FL 34637 and shall include a description of the factual basis for the claim and a statement of the amounts claimed or other relief requested. The Court Services Bureau Commander shall render a decision on the claim and shall notify the contractor within 30 days of receipt of the claim. The contractor may appeal the decision of the Court Services Bureau Commander to the Pasco County Sheriff by providing written notice to the Court Services Bureau Commander, within 15 days of the date of the decision. The Pasco Sheriff shall render a decision on the claim within 60 days of the date of receipt of the appeal notice and such decision shall be final unless the contractor appeals the decision in accordance with Florida State Laws. Invoices for all services or goods provided by the Contractor shall be delivered to the PSO no later than 30 days following the conclusion of the work or delivery of the goods.
54. **Audit**: The contractor agrees to maintain books, records, and documents of all costs and data in support of the services provided under the resultant contract for a period of not less than five years after the effective date of final payment or contract termination. During this five-year term, the PSO or its authorized representative will have unlimited access to and the right to audit the books, records, and documents of the contractor during the contractor's normal working hours.
- a. There shall be no fees or costs charged to the PSO by the contractor for any such audit activities.
  - b. The contractor shall include the audit provisions of this section in all subcontracts and contracts of any entity providing goods or services pursuant to this Contract so as to guarantee the PSO's rights to audit any person or entity performing work pursuant to the Contract, all at no additional cost to the PSO. Should the contractor fail to ensure the PSO's rights under this section, the contractor shall be liable to the PSO for all reasonable costs and expenses the PSO may incur to obtain an audit or inspection of the records which would have otherwise been available under the provisions of this section.

**E. Instructions:**

- a. Written questions will be accepted until **20 Feb 2019**. All questions/requests for information may be emailed to Assistant Purchasing Manager, Dalia Hernandez Gibson at [dhernandezgibson@pascosheriff.org](mailto:dhernandezgibson@pascosheriff.org).
- b. **RFQ Timeline**:
  - RFQ Submission Date: **25 Jan 2019**
  - RFQ Conference/Project Site Visit: **8 Feb 2019 (1100 -1300) location TBD**. The purpose of the conference is to offer all contractors an opportunity to tour the Jail. During this conference,

**there will be a question/answer session. Responses to verbal questions during this conference shall be unofficial and nonbinding.**

- RFQ Questions Deadline: **20 Feb 2019 at 4:00 PM Local Time**
- RFQ Due Date: **25 Feb 2019 at 1:00 PM Local Time**
- RFQ Opening Date: **26 Feb 2019 at 10:00 AM Local Time**
- Location of Opening: **To be Determined**
- Vendor Interviews: **To be Determined**
- Contract Award (tentative): **To be Determined**

c. Procedure for Submission of Quotes and Evaluation

One original and seven (7) copies of all quote documents shall be sealed and submitted to:

Pasco Sheriff's Office  
Purchasing Manager Chamanda Burris  
19415 Central Blvd,  
Land O'Lakes, FL 34637

**NO LATER THAN 25 Feb 2019 at 1:00 P.M.**

**Clearly mark envelope; "RFQ No. 1-FY19 – Comprehensive Inmate Medical Services for Pasco Sheriff's Office Detention Facility/Juvenile Assessment Center"**

- d. Quotes received after the submission deadline will be returned unopened and will not be considered. The PSO is not responsible for delivery delays. Facsimile or electronically mailed quotes will be rejected. Each quote will be signed, or include a cover letter signed, by an authorized company representative having authority to bind the company. Any alterations, interlineation, or erasure of the quote must be initialed by the signer of the quote, guaranteeing authenticity.
- e. A quote, including all prices, may not be withdrawn, modified or canceled by the vendor for a period of sixty (60) days following the quote deadline and the vendor so agrees upon submittal of the quote. Once selected, the vendor agrees to extend submitted prices, if needed, during the contract negotiation period.
- f. The PSO reserves the right to reject any and all quotes as a whole or in part.

**F. Information to Be Submitted with Quotes**

- a. To the extent permitted by law, contractors may request in writing non-disclosure of confidential data. Such data shall accompany the quote, be clearly identified, and placed in a sealed envelope clearly marked "Confidential Data" and state why protection is necessary. It shall be submitted with the quote and shall be separate from the quote. Any request to keep the entire quote confidential cannot be honored.
- b. All quotes shall be honored until a contract is executed.
- c. The PSO is not liable for any costs incurred by the contractor in preparing a response to this solicitation. Contractors submit quotes at their own risk and expense. The PSO makes no guarantee that any products or services will be purchased as a result of this solicitation, and reserves the right to reject any and all quotes. All quotes and their accompanying documentation will become the property of the PSO.
- d. No award or acquisition can be made until authorized officials of the PSO approve such action.
- e. The PSO will not be obligated to the vendor for products or services until authorized PSO officials have a signed contract and/or issued a purchase order.
- f. The PSO does not make payment upon signing of a contract or issuance of a purchase order. Payment is only made after receipt and acceptance of goods and/or services. Partial payment arrangements may be made but final payment will not be made until completion of all aspects of the contract resulting from this request for quote.

In addition to information requested in Sections A-F, the following information shall be included in a contractor's proposal:

The contractor must be a reputable, established, and financially stable provider of the goods and/or services requested. The PSO requires assurance the vendor has a high probability of remaining in business during the term of the contract resulting from this request.

The RFQ response shall detail plans and programs that will assist the PSO in containing cost, increase efficiency, and provide quality health care services. It is important to maintain the organization of your response as outlined so the evaluators may easily locate the required documents. Include narratives, graphs, reports, etc.

**Description of Firm** - Provide the following information:

1. Name, a brief history, and description of the firm;
2. Include the firm's most recent annual report;
3. Size of the firm;
4. Number of employees employed by the corporation;
5. Annualized dollars of payroll;
6. Number of years in business; and
7. Last three years of audited financial statements.

**Experience of Firm** - Provide a summary of the firm's experience. Specify experience in providing Correctional Health Care in the State of Florida and in the southeastern United States. Describe experience with similar inmate population size to PSO and type of jail contracts. Highlight evidence of achievements in this area. Provide any additional information to distinguish your firm in its health services. Include in your discussion:

1. A list of present clients, including a contact person and telephone number for each account;
2. Date of original contract and expiration date for each account;
3. Number of renewals, if applicable;
4. Type and size of facility for each account; and
5. Yearly dollar amount of contract for each account.

### **Termination History**

Provide all of the following information:

- List all contracts lost or not renewed during the past five-years. List a contact person and telephone number for each account. Please provide a narrative describing any known reasons for contracts not being renewed. Contractor must specifically identify any contracts cancelled before the end of the term of the contract.

### **Leadership of Firm**

Provide all of the following information:

Discuss the leadership of the organization and highlight accomplishments of the individuals who will provide direct oversight of this project. Include the following information in the proposal:

- Identify all professional staff members who will be involved in the project, their experience, and the location of their office during this contract;
- Resumes of professional staff members involved in the PSO RFQ Process;
- The resume of the regional manager who shall be working with the PSO;
- Indicate where the regional manager is based geographically and other contractual responsibilities of the regional manager; and
- Indicate the anticipated frequency of on-site visits to PSO Detention Facility/JAC by the regional manager.

### **Program Personnel & Staffing Plan**

Provide all of the following information:

- Provide a listing and number of all job positions to be filled, description of job duties, qualifications, licensing requirements, and pay scale for each.
- Describe hiring practices and methods of recruitment and retention, background checks, and licensing.
- Indicate the percentage of staff hired through a staffing agency and which agencies are utilized.
- Provide staff turnover ratio by position or job classification.
- Provide staffing reports and penalties paid or payments credited due to lack of staffing over the last 12 months for each contract per site and what the percentage the penalties were of the annual contract price.
- Describe orientation, preceptor program, training, staff development programs, and employee performance evaluation methods.
- Provide program personnel organizational structure.
- Administrative Staff duties.
- Provide a one month staffing schedule for each position. (Use 12-hour shift schedules for non-administrative nursing)

### **Medical Program Components and Detailed Plan for Delivery**

Provide all of the following information:

- Describe in detail the firm's procedures for each of the following program components, include staff type to be used and documentation procedures:
  1. Intake Screening;
  2. Health Appraisal;
  3. Patient Care Scheduling, Sick call and Triage;
  4. Close observation & Confinement;
  5. Pregnancy;
  6. Medical Clearance; and
  7. Detox protocol.

### **Medical Specialists, Specialty Services**

Provide all of the following information:

- Describe how inmate medical needs requiring a Medical Specialist diagnosis or treatment will be obtained, arranged, scheduled, or otherwise provided on site.
- List all Specialty Services to be provided on-site and provide a proposed schedule of specialty services.
- Describe any use or experience in using local university resources for medical specialists.
- Describe how the need for off-site services will be determined, scheduled, and carried out.
- Describe the process for emergency hospitalizations, scheduled hospitalization, and follow up processes.
- Describe the process for ordering lab tests, diagnostic tests, XRAYs, and EKG's
- Describe your company's use of Telemedicine in terms of providers and delivery options.

### **Pharmacology**

Provide all of the following information:

- Describe preferred medication dispensary methods and schedules and other handling and processing of controlled substances.
- Describe any electronic administration of pharmaceuticals such as packaging, recording, tracking, ordering, and dispensing.
- Identify your pharmaceutical provider and include information about that company's operational procedures and any contractual relationship.

### **Mental Health Programs and Detailed Plan for Delivery**

Provide all of the following information:

- List all mental health personnel – titles and provide staffing schedules
- Describe housing and observation levels with precautions of psychiatric inmates.
- Describe the handling of referrals, evaluations and assessments.

- Describe the use and monitoring of psychotropic drugs.
- Describe the use and monitoring of the need for segregation or confinement.
- Describe all provided substance abuse programs and treatments.
- Describe case plans, referrals, and post release planning.

### **Medical Records, Statistical Data Collection and Reporting**

Provide all of the following information:

- Describe how Medical Records are entered and managed.
- Describe the procedures used to protect inmate confidentiality.
- Describe methods used for gathering statistical data.
- Describe daily, monthly, annual reporting of statistical data including the type of report and data to be included.

### **Quality Assurance & Control/Risk Management**

Provide all of the following information:

- List all and all claims or lawsuits pending against your firm and the nature of same.
- Describe all claims or suits against your company over the past three (3) years and explain the outcome of each. Include a narrative describing all cases that were settled and amounts of settlement. If contractor is a new firm, organization or corporation submit this information for your Principals.
- Describe how inmate grievances will be handled.
- Describe employee performance evaluation guidelines and performance monitoring.
- Describe internal and external audit schedules.

### **Continuity of Service Transition Plan**

Provide all of the following information:

- Describe your plan to transition into service and implement program changes without interruption to inmate care.
- Indicate if your program includes retaining any current contractor personnel and if so how will accrued benefits be addressed.
- Electronic Medical Records transition

### **Equipment**

Provide all of the following information:

- Describe any equipment needed to provide proposed health care plan.
- List any equipment purchases required prior to start up and the cost of acquisition.
- List any equipment preferred to be purchased within the first year of the program, if any.

### **Innovations and Value Added Programs**

Provide all of the following information:

- Provide information on programs, processes, equipment, or innovations bringing added value to your quote.

### **Accreditation Experience**

Provide all of the following information:

- Provide an overview of experience with NCCHC, ACA, FCAC, FMJS accreditation.
- Specify facilities the firm operates currently accredited by NCCHC, ACA, FCAC, and/or FMJS.
  - Include the following information:
    1. Name of facility;
    2. Accrediting agency (e.g., NCCHC, ACA, FCAC, FMJS);
    3. Include dates of re-accreditation.

### **Conflict of Interest.**

This RFQ is subject to Chapter 112 of the Florida Statutes. Contractors shall disclose with their response the name of any officer, director, employee, or other agent who is also an employee of the Pasco Sheriff's Office. Contractors shall also disclose the name of any Pasco Sheriff's Office employee who owns, directly or indirectly, an interest of five percent (5%) or more in the contractor's business or its affiliates.

### **References**

The contractor shall provide a list of current and past customers to whom the contractor is or has performed similar services will be provided including names of the organization, addresses, contact persons and telephone numbers. Provide at least five (5) business references from similar projects including who the contract was with, a contact name, addresses and telephone numbers. Business references shall be medical suppliers, pharmacies and laboratories that shall attest to the contractor's ability to provide contracted services and pay invoices in a timely manner. Other pertinent references may be given at the vendor's discretion.

### **Indemnification, Hold Harmless, and Sovereign Immunity Clause**

The contractor agrees to defend and indemnify the PSO, their members, and agents hold them harmless from any and all risks of every kind, nature, and description resulting from or arising out of the work and/or service performed by the Contractor, or its sub-contractor, under this contract; provided, however, that Contractor shall not be required to indemnify the PSO with respect to such risks to the extent caused by the negligence or intentional misconduct of the PSO or the PSO's contractors, over whom Contractor has no authority or control." Nothing contained in this section or the contract shall be construed as a waiver of sovereign immunity or Florida Statute 768.28.

### **J. Contract Period**

The contractor will ensure that the contract resulting from this request for quote will be for three (3) years. The entire Medical Services contract is expected to commence on October 1, 2019.

### **K. Evaluation Process**

1. The selection of a vendor shall be at the sole discretion of the PSO. Selection shall be based on the evaluation of all the information submitted and any further information the PSO may request. The PSO reserves the right to accept or reject any or all RFQs and to waive any informality. The criteria used for selection is as follows:
  - a. The extent to which the proposed services meet the requirements as specified in the RFQ.
  - b. The extent to which the Contractor meets all other requirements of the RFQ.
  - c. The cost of services.
  - d. The Contractor's qualifications, expertise and experience in providing the required services.
  - e. Any other pertinent criteria as determined by the PSO.
2. The RFQs will be evaluated by an Evaluation Committee. Members of the Evaluation Committee will independently review all evaluation criteria. Interviews may be scheduled with the selected Contractors. The PSO will schedule the time and location of these interviews.
3. Negotiations shall then be conducted with the selected Contractor and contract awarded.

### **L. Required Forms**

In addition to the above requirements, contractors shall submit the following forms with their RFQ:

- a. Vendor Information & Affirmation Form;
- b. Quote Annual Pricing; and
- c. Vendor Information, Remarks/Exceptions & Pricing.

**THIS QUOTE IS OFFERED TO PASCO SHERIFF'S OFFICE:**

Quotes shall be submitted in a sealed envelope. Quotes received after bid opening time will be returned unopened.

Quotes shall be submitted to Agency Services, Purchasing Manager, Pasco Sheriff's Office 19415 Central Blvd, Land O'Lakes, FL 34637 by the date and time indicated on the cover sheet.

Quotes shall be submitted in one (1) original and seven (7) copies.

**A. CONTRACTOR INFORMATION**

Name\_\_\_\_\_

Federal Taxpayer Identification Number\_\_\_\_\_

Address\_\_\_\_\_

\_\_\_\_\_

Person to Contact Regarding this Quote\_\_\_\_\_

Telephone Number\_\_\_\_\_ Fax Number\_\_\_\_\_

E-Mail Address\_\_\_\_\_

**B. AUTHORIZED SIGNATURE - All quotes shall be signed in ink by authorized principals of the firm.**

**The undersigned affirms and declares:**

1. Contractor has read and understands the requirements of this Request for Quote **1 FY19 Inmate Medical Services** and will comply with all requirements;
2. I am duly authorized to execute this quote/offer document and any contract(s) and/or transactions required by award of this RFQ;
3. This Quote is made without understanding, agreement, or connection with any person, firm, or corporation making a quote for the same purpose, and is in all respects fair and made without collusion or fraud; and
4. I understand and agree this quote shall remain open until a contract is executed.

Please Print or Type:

AUTHORIZED SIGNATURE:\_\_\_\_\_

PRINTED NAME:\_\_\_\_\_

TITLE:\_\_\_\_\_ DATE:\_\_\_\_\_

**VENDOR INFORMATION, REMARKS/EXCEPTIONS & PRICING**

The undersigned understands that this quote **must be signed in ink** and that any **unsigned** quote will be considered incomplete and subject to rejection by the Sheriff's Office.

**A. VENDOR INFORMATION**

Company Name: \_\_\_\_\_

Federal Taxpayer Identification Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Person to Contact Regarding this Quote: \_\_\_\_\_

Telephone Number Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**B. REMARKS & EXCEPTIONS TO QUOTE:** The undersigned certifies that any exceptions to the quote are noted below. All conditions not noted thereon are as requested. The undersigned also understands that any exceptions presented after the award, may be cause for cancellation of award.

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**C. QUOTE PRICING**

Proposals shall provide contract pricing which is inclusive of all costs for all required health care services as described herein, rendered inside and outside the facilities for each of the following time frames for each category listed below. This cost will be the total of all price breakdowns as listed below and should be based on an assumed billable population of 1900. The price is to include the furnishing of all professional services, labor, materials, equipment, insurance, licenses and applicable taxes necessary for proper performance of the contract services requested. Provide total cost for each year based on ADP and must include the breakdown for each year as listed below.

- A. October 1, 2019 – September 30, 2020 - \$ \_\_\_\_\_ Total Cost Year 1
- B. October 1, 2020 – September 30, 2021 - \$ \_\_\_\_\_ Total Cost Year 2
- C. October 1, 2021 – September 30, 2022 - \$ \_\_\_\_\_ Total Cost Year 3

The total cost for year 1 will be the total of all price breakdowns as listed below:

- Employee Benefits and Salaries \$ \_\_\_\_\_
- Contract Fees \$ \_\_\_\_\_
- Pharmaceutical Services \$ \_\_\_\_\_
- Medical Expenses - Off-Site Care \$ \_\_\_\_\_
- All Medical Supplies \$ \_\_\_\_\_
- Malpractice Insurance \$ \_\_\_\_\_
- Administrative Costs \$ \_\_\_\_\_

(Please indicate what they include)

- Federal, State, and Local Taxes and Licenses \$ \_\_\_\_\_
- Comprehensive Electronic Medical Records \$ \_\_\_\_\_

Provide the method used to calculate the above cost.

List expense categories and percentage of total each represents, e.g. Employee Benefits and Salaries, Medical Supplies, Pharmaceuticals etc.

**D. AUTHORIZED SIGNATURE**

**The undersigned affirms and declares:**

1. Proposer has read and understands the requirements of this solicitation and, that as the proposer, will comply with all requirements, and that I am duly authorized to execute this quote/offer document and any contract(s) and/or transactions required by award of this solicitation;
2. This quote is made without understanding, agreement or connection with any person, firm or corporation making a quote for the same purpose, and is in all respects fair and without collusion or fraud;
3. This quote shall remain open until a contract is executed.

Please Print or Type:

- BY: \_\_\_\_\_
- TITLE: \_\_\_\_\_
- DATE: \_\_\_\_\_
- SIGNATURE: \_\_\_\_\_

Below is an example of the information required on the OUTSIDE of your RFQ Package.  
You may use this as a label if you wish.

PASCO SHERIFF'S OFFICE  
19415 CENTRAL BLVD  
LAND O'LAKES, FL 34637

ATTN: PURCHASING  
CALL 813-929-2742

RFQ PACKAGE SUBMITTAL

RFQ # 1 FY19 INMATE MEDICAL SERVICES

OPENING DATE & TIME: **26 February 2019 at 1000 AM Local Time Location  
TBD**