



**STATE OF CONNECTICUT  
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES**

**REQUEST FOR PROPOSAL (RFP)**

**Pre Trial Intervention Programs**

The Connecticut Department of Mental Health and Addiction Services (hereafter referred to as DMHAS, or the Department), in its effort to successfully implement a person-centered, recovery-oriented, and value-driven system of care requests proposals from qualified private non-profit and for profit applicants to provide Pre Trial Intervention Programs (PTIP) that ensure evidence based therapeutic education and clinical interventions to address public policy concerns related to: (1) operations of vehicles under the influence of alcohol and drugs, reduction of recidivism and identification of individuals for whom more intensive treatment is necessary and (2) the use of illegal or non-sanctioned/prescribed, substances.

A **Bidders' Conference** will be held at 1:00 pm on Wednesday September 3, 2008 in Patrick Lee Auditorium, Merritt Hall at Connecticut Valley Hospital, Silver Street, Middletown, CT.

**Responses to this RFP must be received by the Department Program Contact Person (listed below) no later than 2:00 PM Local Time on September 23, 2008. Any response(s) received after that date and time shall be returned, unopened to the applicant.** The original and Six (6) exact (for total of 7), typed or computer printed copies of the proposal and one (1) electronic copy on CD-ROM, in either Microsoft Office Suite software or as a readable PDF file, must be submitted by the deadline to:

Department of Mental Health and Addiction Services  
Office of Pre Trial Interventions  
P.O. Box 351  
Russell Hall, Vance Drive, Room 217  
Middletown, Connecticut 06450  
ATTN: Gennell Holley

For questions on **program** issues, contact:

Robert C. Neuman, M.S.W. Pre Trial Interventions Manager  
Department of Mental Health and Addiction Services  
(860) 262-6104 phone  
(860) 262-5841 fax  
Email Address: Robert.Neuman@po.state.ct.us

This RFP also is available on the DMHAS Web Site at: <http://www.ct.gov/dmhas/rfp>

**EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER  
MINORITIES AND WOMEN ARE ENCOURAGED TO RESPOND**

## PROPOSAL FACE SHEET

### REQUEST FOR PROPOSAL (RFP) – Pre Trial Intervention Programs

1	RESPONDING AGENCY (Legal name and address of organization as filed with the Secretary of State):  LEGAL NAME:    — STREET ADDRESS: — TOWN/CITY/STATE/ZIP: —  FEIN:           —	SERVICES TO BE PROVIDED (Check applicable box[es])  Mental Health Services <input type="checkbox"/>  Addiction Services <input type="checkbox"/>	
2	AGENCY DIRECTOR/CEO NAME:	TELEPHONE NO:	FAX NO:
	TITLE:	E-MAIL:	
3	CONTACT PERSON NAME:	TELEPHONE NO:	FAX NO:
	TITLE:	E-MAIL:	
7	AREA(s) TO Be SERVED: STATEWIDE                                      CATCHMENT AREAS (List)                                      TOWNS (List)                                      REGIONS (List)		

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# I. Introduction

The Department of Mental Health and Addiction Services (DMHAS) is the state healthcare service agency responsible for health promotion, and the prevention and treatment of mental illness and substance abuse in Connecticut. The single overarching goal of DMHAS is promoting and achieving a quality-focused, culturally responsive, and recovery-oriented system of care. DMHAS has focused its efforts on greater involvement of persons in recovery in the planning and development of services, expanding system capacity through better care management of persons in treatment, promoting age, gender, sexual orientation, and culturally responsive services, and strengthening supportive community-based services. These efforts are captured in the Department's mission statement: "To improve the quality of life of the people of Connecticut by providing an integrated network of comprehensive, effective and efficient behavioral health services that foster self-sufficiency, dignity and respect."

DMHAS envisions a recovery-oriented system of behavioral health care that offers Connecticut's citizens an array of accessible services and recovery supports from which they will be able to choose those that are effective in addressing their particular behavioral health condition or combination of conditions. These services and supports will be culturally, age, and gender-responsive, build on personal, family, and community strengths, and have as their primary and explicit aim promotion of the person/family's resilience, recovery, and inclusion in community life. Finally, services and supports will be provided in an integrated and coordinated fashion in collaboration with the surrounding community, thereby ensuring continuity of care both over time and across agency boundaries, thus maximizing the person's opportunities for establishing, or reestablishing, a safe, dignified, and meaningful life in the community of his or her choice. Connecticut's vision is based on the following underlying values:

- The shared belief that *recovery* from behavioral health disorders is possible;
- An emphasis on the role of *positive relationships, family supports, and parenting* in maintaining recovery, achieving sobriety, and promoting personal growth and development;
- The *priority of an individual's or family's* goals in determining their pathway to recovery, stability, and self-sufficiency;
- The importance of *cultural capacity, cultural competence and age – and gender-responsiveness* in designing and delivering mental health services and recovery supports. Cultural capacity is defined as respectful and sensitive services that employ racial, cultural, age, gender, and sexual orientation consideration;
- The central role of *hope and empowerment* in changing the course of individuals' lives; and
- The necessity of *state agencies, community providers, and individuals in recovery, and recovery communities coming together* to develop and implement a comprehensive continuum of behavioral health promotion, prevention, early intervention, treatment, and rehabilitative services.

# II. Statement of Intent

Due to legislative and programmatic changes, and expanding needs for both data management and quality review/assessment, DMHAS is issuing this Request for Proposals (RFP) for two Pre Trial Intervention Programs contained within the Office of Pre Trial Interventions/Division of Forensic Services. The participants in both programs are generally first time offenders without significant psychiatric or addiction disorders. All individuals are court ordered to participate in PTIP evaluation and services.

## **The Pre Trial Intervention Programs (PTIP) include:**

1. ***The Pre Trial Alcohol Education System (PAES)*** is a diversionary program that was developed to address the public policy issue of operating vehicles while under the influence of alcohol or drugs. It seeks, through the use of an evidence-based approach of clinical intervention and/or treatment, to reduce the incidence of repeat or multiple offending. It also seeks to identify those offenders who are in need of more intensive services to address substance abuse and/or dependency and to introduce them to the recovery-oriented,

therapeutic services available to address their specific needs. It attempts to do all this through a culturally sensitive, non-judgmental approach.

In State Fiscal Year (SFY) 2006-2007 there were 8260 defendants evaluated as a result of criminal court orders for the PAES investigation. During this same time period 3780 defendants were ordered to complete a Level One program (described below), 3213 were ordered to a Level Two Program (described below). **No treatment will be provided as a result of this RFP.**

2. ***The Pre Trial Drug Education Program (PDEP)*** is also a diversionary program that was developed to address the equally important issue of the use of illegal or non-sanctioned/prescribed substances. This issue, by its pervasiveness, impacts on almost all aspects of society in addition to being destructive to the individuals themselves. This program also attempts, through the use of evidence-based interventions, to reduce recidivism. It additionally seeks to identify those individuals for whom more intensive treatment is necessary.

In the above fiscal year there were 4302 evaluations conducted in response to criminal court orders granting defendants either the PDEP or the Community Service Labor Program (CSLP). A total of 4112 were involved in the PDEP groups.

### III. Program Goals and Objectives

DMHAS will use this RFP to accomplish the following program goals and objectives:

1. All individuals referred by the court for the Pre Trial programs will receive services identified in the “Required Components” listed within the timelines specified.
2. To improve the geographic accessibility of the PTIP service based on court locations and the communities within their jurisdiction. Applicants must identify location where services will be delivered.
3. All successful applicants must have the capacity to collect and report data required by the Department to monitor and evaluate PTIP services in the state and enter that data into the DMHAS authorized data system.

### IV. Performance Measures

1. 100% of program evaluations will be completed within stated guidelines.
2. At least 85% of group assignment will occur within stated guidelines.
3. At least 70% of group participants will complete groups.
4. Post test scores of all completed groups will be 20% higher than the pre test scores.
5. Each individual who completes group will score at least 75% on the post test.
6. 100% of all required reports and correspondence to the Courts or the Court Support Services Division will be submitted within the stated guidelines.
7. Programs will submit to the Office of Pre Trial Interventions quarterly quality assurance reports indicating that a minimum of 20% of active case files are reviewed per month and that, for any identified problems, corrective action has been identified and that it has occurred. A follow-up report will then be necessary the following month describing the efficacy of the corrective action.
8. At least 95% of the required data on program participants will be entered into the DMHAS authorized data system according to specified time frames.

### V. Required Components

1. Service component that is staffed and credentialed to complete PTIP required evaluations and to conduct PTIP alcohol and drug education evidence based interventions as approved by DMHAS and contained in the Program Description contained in the Narrative below. Applicant must identify which of the Connecticut GA Courts they propose to serve (see Exhibit 1 attached) and commit to adaptations of the program to meet statutory changes.
2. Data collection and reporting capability to enter client specific data into the Department’s specified data collection system within stated timeframes.

3. A quality assurance component to evaluate outcomes specific to PTIP services to assure program effectiveness and other requirements as determined by DMHAS. At a minimum, each successful applicant will identify, develop, describe, and implement a clearly defined PTIP-specific quality assurance process for:
  - a. Reviewing service delivery and its compliance with Departmental requirements
  - b. Identifying any deficiencies
  - c. Addressing and resolving any deficiencies.
4. All programs will be responsible for assuring all appropriate communication with the court is completed in a timely manner. These communication requirements include:
  - a. Written notice within 7 calendar days to the Court Support Services Division (Bail Commission) of successful completion of Evaluation or Groups per court and DMHAS requirements; PTIP 'Discharge' data must be entered into the DMHAS authorized data system within 7 calendar days of completion
  - b. Written notice within 7 calendar days to the Court Support Services Division (Bail Commission) of failure to complete Evaluation or Groups per court and DMHAS requirements; PTIP 'Discharge' data must be entered into the DMHAS authorized data system within 7 calendar days of discharge
  - c. Addressing and resolving any deficiencies.
  - d. Respond to all court phone calls as follows:
    - A return call to court officials on the same day if the phone call originates before 3:00PM and a next business day morning call if it is received after 3:00PM.
    - A return call to other PTIP agencies or state officials within one business day
    - A return call to referrals/participants within three business days.
    - An agency "hotline" that guarantees a person answers for immediate issues.

\*\* All evaluations and services must be provided according to the following program design, protocols and time frames, and meet standard quality of care documentation requirements.

#### **A. *Pre Trial Alcohol Education System (PAES)***

##### **1. Evaluations:**

- Are completed on all people referred within 21 days of their eligibility date (set by the court)
- Are conducted by a certified or licensed substance abuse professional approved by the Department to conduct such evaluations and use standardized criteria for recommendations of level of care.
- Includes a clinical interview based on a Department approved format
- Includes review of arrestee's Blood Alcohol Content or other testing results.
- Includes the use of standardized testing instruments as required and approved by the Department.
- General data on 'Demographics', 'Client Legal Info', and 'Referral Date' must be entered into the DMHAS authorized data system within 5 business days of receipt of the referral
- PTIP 'Assessment' data must be entered into the DMHAS authorized data system within 5 business days of completion of the evaluation.
- Results in submission of a report in a Department specified format by the certified or licensed substance abuse professional, to the court of jurisdiction through the Court Support Services Division prior to the next court date. This will include:
  - a) Identification of defendant
  - b) Description of their cooperativeness with the evaluation process
  - c) Recommendation of the service level necessary to address the defendant's identified needs, i.e. Level 1, Level 2, or Treatment (treatment recommendations comply with the Connecticut Client Placement Criteria level of care).
- Provide the Department with the required, real-time data or reports as deemed essential by the Department for program management, review, and research. This will be done through the use of the DMHAS database. This will include data entry at multiple times during each individual case. Hard-copy reports may also be required.

##### **2. Standard Group – Level One, 10-weeks, 15-hours:**

This is the standard level group best described as “therapeutic education”.

- Ten (10) weekly classes facilitated by either (a) a certified or licensed substance-abuse professional or (b) a person pursuing certification or licensure who is reasonably expected to achieve credentialing within a one-year period. Such person must demonstrate at least one year’s supervised experience in working with people abusing substances in a group modality practice. All facilitators to be approved by the Department.
- All Level One participants are assigned to a group within 60 calendar days of their eligibility date
- PTIP ‘Group Assignment’ data must be entered into the DMHAS authorized data system within 5 business days of the Group assignment
- Group interaction format
- Classes are one and a half (1 1/2) hours in duration
- Class size of not more than 14 participants.
- Use of DMHAS approved curriculum
- Not more than 4.5 hours of didactic material (films, lectures, speakers, etc.) per 10 week course
- Maintain confidential, separate, individualized client files that:
  - a) Contain all information and paperwork received from or about the defendant
  - b) Include mandated Departmental paperwork.
  - c) Include client-oriented, weekly progress notes, Data/Assessment/Plan (DAP) format, indicating the participant’s presentation and participation in class, analysis of that presentation/participation, and facilitator’s plan for working with that individual participant.
- Provide the Department with the required, real-time data or reports as deemed essential by the Department for program management, review, and research. All data will be entered into the DMHAS authorized data system according to specified time frames. This will include data entry at multiple times during each individual course of services.

3. Enhanced Group – Level Two, 15-week, 22.5-hours:

This is an enhanced version of a Level One group and is pre-treatment oriented.

- Fifteen (15) weekly classes facilitated by certified or licensed substance-abuse professionals only. All facilitators to be pre-approved by the Department.
- All Level Two participants are assigned to a group within 75 calendar days of their eligibility
- Group interaction format
- Classes are one and a half (1 1/2) hours in duration
- Class size of not more than 12 participants
- Use of DMHAS approved curriculum
- Not more than 4.5 hours of didactic material overall per 15 week course
- Maintain confidential, separate, individualized client file as identified above
- Provide the Department with the required real-time data or reports as deemed essential by the Department for program management, review, and research. All data will be entered into the DMHAS authorized data system according to specified time frames. This will include data entry at multiple times during each individual course of services.

## ***B. Pre Trial Drug Education Program***

1. Evaluations
  - Are conducted by a certified or licensed substance-abuse professional approved by the Department.
  - Includes a clinical interview based on a Department approved format.
  - Includes review of substance testing results, if available.
  
2. Group Interaction, 8-week, 12-hours
  - Eight (8) weekly classes of therapeutic education facilitated by either (a) a certified or licensed substance-abuse professional or (b) a person pursuing certification or licensure who is reasonably expected to achieve credentialing within a one-year period. Such person must demonstrate at least one year's supervised experience in working with substance-using clients in a group modality practice. All facilitators to be approved by the Department.
  - Group interaction
  - Classes are one and a half (1 1/2) hours in duration
  - Class size of not more than 14 participants.
  - Use of DMHAS approved curriculum
  - Not more than 3 hours of didactic material per 8 week course
  - All PDEP/Community Service Labor Program referrals are evaluated within 30 days of their eligibility date and scheduled for a group within 45 days of the evaluation date.
  - Maintain confidential, separate, individualized client file. Contains all information and paperwork received from or about the defendant as identified above
  - Provide the Department with the required real-time data or reports as deemed essential by the Department for program management, review, and research. All data will be entered into the DMHAS authorized data system according to specified time frames. This will include data entry at multiple times during each individual course of services.

## **VI. Desired Components**

All Proposals submitted to DMHAS must address the features and components outlined in the Narrative section. DMHAS additionally will look favorably upon proposals that include desirable features, including, but not limited to, the following:

1. The ability to conduct bi-cultural/bilingual evaluations and education services in Spanish or other languages.
2. Capacity to effectively work with persons experiencing co-occurring disorders
3. An established history of providing services to people using substances and involved with the criminal justice system.
4. An established history of working in close cooperation with Courts and other criminal justice agencies and personnel.
5. Have the resources, i.e., personnel, facilities, and inter-agency collaborations, necessary for the rapid implementation of these programs.
6. If your agency currently has a contract with DMHAS, please indicate whether you are in compliance with contract requirements and in good standing with DMHAS.

## **VII. Other System Expectations**

Services implemented through this RFP, which are aimed at improving quality of care, must build upon and compliment DMHAS' focus on developing a recovery-oriented system of care that is responsive to the needs of persons served. All applicants must specify how they will address the following system expectations within their response. Please refer to the websites listed below for guidance regarding implementation of these systems expectations.



- **Cultural Competence (See Commissioner’s Policy Statement #76: Policy on Cultural Competence: <http://www.ct.gov/dmhas/cwp/view.asp?a=2907&q=334668>)**

Research and experience have shown that culture and society play pivotal roles in behavioral health, behavioral disorders, and the utilization and effectiveness of treatment services. Understanding the wide-ranging roles of culture and society enables the behavioral health field to design and deliver services that are more responsive to the needs of diverse racial and cultural groups. Currently, the DMHAS system serves many different populations and recognizes the significance culture as a factor affecting individual outcomes. In the coming decades, as Connecticut’s demography continues to change, it will become increasingly important that we strengthen the cultural competence of our service system. In order to address this issue in the present RFP, the following requirements have been set:

- The successful applicant must have a Cultural Competency Plan approved by the DMHAS Office of Multicultural Affairs.
- The applicant must demonstrate an understanding of the demographic, racial, ethnic, socioeconomic, and religious characteristics of the population in its targeted service area.

- **Recovery-Oriented Service System (See Commissioner’s Policy Statement #83 Promoting a Recovery-Oriented Service System: <http://www.ct.gov/dmhas/cwp/view.asp?a=2907&q=334672>)**

The purpose of this policy is to formally designate the concept of “recovery” as the overarching goal of the service system operated and funded by DMHAS. This action is consistent with the fact that DMHAS is a healthcare service agency. Thus, it is most appropriate that one should hope and expect that, as a result of active involvement with this healthcare system, they will be better able to manage their illness and improve the quality of their life.

- **Co-Occurring Capability (See Commissioner’s Policy Statement #84: <http://ct.gov/dmhas/LIB/dmhas/CommissionersPolicies/policy84.pdf>)**

The single overarching goal of DMHAS, as a healthcare service agency, is promoting and achieving a quality-focused, culturally responsive, and recovery-oriented system of care. The full attainment of this goal is not possible if the service system design, delivery, and evaluation are not fully responsive to people with co-occurring mental health and substance use disorders. Given the high prevalence of co-occurring disorders, the high number of critical incidents involving individuals with these conditions, and the often poor outcomes associated with co-occurring disorders in the absence of integrated care, it is extremely important that we collectively improve our system in this area. There have been advances in research and practice related to co-occurring disorders and it is important that the system close the science to service gap. Through these and other related improvements, the citizens of the state can expect better processes of care and better outcomes for people with co-occurring disorders.

- **Gender Responsive Care**

DMHAS’ initiative for Gender Responsive Care is designed to enhance our current behavioral health service system for women in a way that is trauma-informed, gender-specific, and promotes self-determination. A best practice system of care for women, supported by system-level policies and standards and program-level practices is currently under development. The goal was to improve treatment outcomes and the quality of services for women receiving substance abuse treatment in Connecticut through participation in a recovery-oriented treatment system of care that incorporates current best practices in gender responsive and trauma-informed programming.

- **Trauma Informed Care**

The primary goal of DMHAS' Trauma Informed Care initiative is to deliver behavioral health care that is sensitive and responsive to the needs of men and women who have experienced trauma. Trauma services are being developed based on the guiding principle that treatment must be informed by a sound scientific, clinical, culturally relevant, and humanistic understanding of the impact and impairment caused by traumatic stress.

- **Person-centered Care (See CT Implementation of Person-Centered Care: <http://www.ct.gov/dmhas/LIB/dmhas/Recovery/personcentered.pdf>)**

Commissioner's Policy Statement #83 formally designates the concept of "recovery" as the overarching goal of the service system operated and funded by DMHAS. DMHAS' mission to provide recovery-oriented care requires that services be maximally responsive to each individual's unique needs, values, and preferences. Emphasis on person-centered care is consistent with major advances that have already occurred throughout the DMHAS system, e.g., greater collaboration with advocacy and recovery groups and increased recognition of, and funding for, peer-based services.

- **Concurrent Medication-assisted Treatment (MAT)**

Each program must have access to, or coordinate with other providers, services that address the needs of individuals they serve, including individuals whose recovery is supported and enhanced through the use of clinically appropriate medications. These include, but are not limited to, medications to address symptoms directly related to substance use disorders (e.g., methadone, buprenorphine/naloxone, naltrexone, disulfiram, etc.), psychiatric conditions (e.g., antidepressants, anti-anxiolytics, antipsychotics, etc.), physical conditions (e.g., insulin, analgesics for chronic pain management, medications for TB, HIV/STD, Hepatitis, antihypertensives, anti-cholesterol, etc.), and smoking cessation medications (e.g., varenicline, wellbutrin, over-the-counter (OTC) products, etc.). Programs are encouraged to facilitate and support general wellness, including through the use of effective medications.

- **DMHAS' Recovery Practice Guidelines (See Practice Guidelines for Recovery-Oriented Behavioral Health Care: <http://www.ct.gov/dmhas/lib/dmhas/publications/practiceguidelines.pdf>)**

Wherever possible, programs must be guided by innovative, recovery-oriented, community-focused practice principles and guidelines, such as those outlined in the DMHAS' Practice Guidelines for Recovery-Oriented Behavioral Health Care. DMHAS' Guidelines emphasize the following principles: Participation, Promoting Access and Engagement, Continuity of Care, Strengths-Based Assessment, Individualized Recovery Planning, Functioning as a Recovery Guide, Community Mapping, Development, and Inclusion, and Identifying and Addressing Barriers to Recovery.

- **Integration of Primary Health and Wellness**

Life expectancy for individuals with behavioral health disorders is 15 years shorter than the general population. Integration of and/or linkages between behavioral and primary health and wellness approaches must be addressed to improve health and quality of life and to enhance life expectancy for individuals served throughout the DMHAS service system.

## **VIII. Award and Eligibility**

### ***A. ELIGIBLE APPLICANTS***

Proposals may be submitted from private, non-profit (501-C3) or for-profit state-licensed addiction services treatment agencies. Application eligibility is restricted to in-state applicants who have the infrastructure and can demonstrate capacity to provide alcohol and drug evaluation and education, and all services defined through this RFP within timeframes set forth by the Department.

Applicants are strongly encouraged to demonstrate linkages and system integration and take advantage of existing community resources and services, especially through interagency collaboration. Evidence of these collaborations must be detailed in the collaborator's specific role for the implementation of the project.

Proposals will be accepted from agencies applying either alone or as a group. Group applicants may include established coalitions, consortia or consist of as few as two entities. In the case of a group application, the applicant must provide evidence that they have been designated to act on behalf of the larger group. Individual clinicians functioning independently or collectively are not eligible.

**B. AWARD**

It is the intent of the Department to conduct a comprehensive, fair and impartial evaluation of proposals received in response to this procurement. Only proposals found to be responsive to the RFP will be evaluated and scored. A responsive proposal must comply with all instructions listed in this RFP. The original and six (6) exact, printed copies (total of 7) of the proposal must be submitted together with one (1) electronic copy in a properly addressed package by the deadline. The electronic copy must be provided on a CD-ROM in either Microsoft Office Suite software or as a readable PDF file.

**C. FUNDING**

DMHAS provides funding for these services through the State of Connecticut’s General Fund Pre Trial Account. It is a fee-for-service contract paid retroactively on the basis of submitted invoices and information contained in the associated Pre Trial Intervention Program’s database or supporting documentation. Payment for each service component will be made according to the following rates:

PAES Evaluation:	\$ 89.00/person
PAES, Level One Group Interaction:	\$ 189.58/person
PAES, Level Two Group Interaction:	\$ 248.69/person
PDEP Evaluation:	\$ 56.10/person

Continued funding is contingent upon availability of funding, continued legislative authorization, satisfactory program performance, compliance with departmental requirements, and demonstrated need for these services.

Applicants should note that any contracts developed as a result of this RFP are subject to the Department’s contracting procedures that include approval by the Office of the Attorney General, as well as, compliance with OPM Cost Standards, and State Contracting Board and State Election Enforcement Commission (SEEC) requirements.

**D. SCHEDULE**

EVENT	DATE
Release of RFP	August 5, 2008
Bidders’ Conference	September 3, 2008
Proposal Submission Deadline	September 23, 2008, 2:00 PM
Notice of Award (Begin Contract Negotiations)	November 15, 2008
Begin Implementation (Contract fully executed)	January 1, 2009

**E. EX PARTE CONTACT PROHIBITED**

Any form of *ex parte* contact regarding this RFP or any proposal being prepared or being considered under this RFP, whether directly or indirectly, is hereby strictly prohibited. This includes, but is not limited to, any contact with elected officials or other state employees asking them for advice, information, or support

at any time before actual notification of results is made. Violations will result in outright rejection of any and all proposals submitted under this RFP by the respondent. Any inquiries or requests regarding the RFP must be submitted to the Program Contact (Reference RFP Cover).

#### ***F. EVALUATION AND SELECTION***

It is the intent of DMHAS to conduct a comprehensive, fair and impartial evaluation of proposals received in response to this procurement. Only proposals found to be responsive to the RFP will be evaluated and scored. A responsive proposal must comply with all instructions listed in this RFP. The original and six (6) exact, typed or computer printed copies (total of 7) of the proposal must be submitted together with one (1) electronic copy in a properly addressed package by the deadline.

If your agency currently has a contract with DMHAS, please indicate in the Project Evaluation section of the proposal narrative whether you are in compliance with contract requirements and in good standing with DMHAS.

#### ***G. CONTRACT EXECUTION***

The pursuant contract developed, as a result of this RFP, is subject to Department contracting procedures, which includes approval by the Office of the Attorney General. Please note that contracts are executory and that no financial commitments can be made until, and unless, the contracts are approved by the Office of the Attorney General.

#### ***H. APPLICANT DEBRIEFING***

The Department will notify all applicants of any award issued by it as a result of this Pre Trial Intervention Program RFP. Unsuccessful applicants may, within thirty (30) days of the announcement of the awards, request a meeting for debriefing and discussion of their proposal by making a written request to the DMHAS contact person identified on the cover page of is RFP. Debriefing will not include any comparisons with other successful or unsuccessful proposals.

## **IX. Instructions for Completion of Proposal, Proposal Evaluation Criteria, and Scoring**

Responses to this Request for Proposal should consist of the following components **IN THE ORDER SPECIFIED BELOW**. A description of each of these components is provided. Please identify each section of your response with the corresponding sections below (e.g., Program Narrative B.,2., iv.)

#### ***A. PROGRAM NARRATIVE***

The narrative must be clear, concise and paginated and **must not exceed 20 single-spaced pages** in length, exclusive of appendices. Any letters of support from individuals or organizations on behalf of the applicant, resumes, letters of commitment, memoranda of understanding or other materials should be included as specific appendices.

All proposals must be formatted to identify the sections listed below in the same specified order. When a section/subcomponent involves an Appendix it should be clearly identified.

## **1. PROJECT PLAN (28 Points)**

### **a. Program Description:**

Briefly describe the Agency's current services and the areas served. Please also identify for which geographic area (GA) court(s) the applicant wishes to primarily provide services (See Exhibit 1 attached).

- i. Indicate which of the Connecticut GA courts this program will serve.
- ii. Indicate the applicant's experience with, and knowledge of, the people with substance disorders and forensic involvement, and the areas served.
- iii. Indicate any experiences providing cost-effective, timely, evaluation, intervention, and/or treatment services to forensic clients.
- iv. Identify any unique skills or services such as abilities at multi-cultural programming or working effectively with special populations and/or with individuals experiencing co-occurring disorders.
- v. Show how the proposed services will address age, race/ethnicity, cultural, language, disability, literacy, and gender issues for the target population.
- vi. Show how the program will ensure meeting the department's data entry requirements.

### **b. Linkages:**

- i. Describe the applicant's experience of working with the judicial and criminal justice systems, especially as it relates to substance abuse or public safety issues. Identify any relevant multi-agency collaborations, associations, or partnerships and the scope and goals of such.
- ii. Letters of coordination/support from community organizations or other state agencies serving the criminal justice populations supporting the project must be included in Appendix 2.

### **c. Acceptance of Referrals:**

- i. Indicate what steps will be taken to meet these requirements identified for processing referrals and delivering identified services in the event of a sudden, significant increase in referrals or loss of program staff.
- ii. Describe how the programs will accommodate persons regardless of educational level, gender, racial/ethnic, cultural or language issues, and/or disabilities.

## **B. MANAGEMENT PLAN: (30 Points)**

1. Present a comprehensive and realistic management plan for both the implementation and the continuation of the required components of these programs.
  - i. Include information on how the agency will monitor and assure contract outcomes are measured and met.
  - ii. Describe how the applicant will implement and conduct the previously described required components of the two programs.
  - iii. Describe, in a table format, (1) the persons who will be involved in the implementation of this project; (2) their roles in the project, and (3) address their relevant experience.
  - iv. NOTE: Projected implementation date, following execution of the possible contract for these services, will be considered as part of the review criteria for this Proposal.
  - v. The work plan itself must be consistent with this Request and with the values, goals, and objectives for these programs.
  - vi. In Appendix 3, include the applicants' table of organization with associated job descriptions and staff names must be submitted showing how the proposed programs will be incorporated into the overall agency. Identify and comment on all positions having direct responsibility for or impact on elements of these programs. For example, to include but not be limited to, billing, crisis management, data management and external interface, equipment or hardware acquisition, personnel issues (recruiting, hiring, disciplinary), quality assurance, supervision, etc.
2. Provide a program specific staffing plan, in table format, including:
  - i. The Program Director, support staff, other key staff, and any other staff assigned to these programs (if known).

- ii. Identify their position,
  - iii. Their responsibilities (be sure to identify programmatic and clinical supervision together with quality assurance responsibilities.),
  - iv. The individual time commitments (in full-time equivalents) associated with those responsibilities
  - v. Their qualifications
  - vi. Note if any persons are bilingual/bicultural and, if so, what languages are spoken
  - vii. Describe how any additional staff will be recruited and selected. Show evidence of the appropriateness of the proposed staff to the language, age, gender, sexual orientation, disability, and ethnic/racial/cultural factors of the target population
  - viii. Provide details, in table format, on how program staff training will be conducted. Include the following:
    - By Whom will the training be conducted
    - Where will it be conducted
    - Using what method
    - When will it be conducted.
    - On what topics/issues
3. Describe both technical and other resource availability to ensure meeting the data requirements described in this RFP and of these programs.
  4. Identify sites where services will be offered; indicate ‘first date of service delivery’ at each proposed site. Provide a Certificate of Occupancy. For sites not currently providing services or under the control of the applicant, submit a promissory letter from a landlord to lease the identified site and any other material that substantiates that the identified sites comply with all applicable city, and state regulations both as to the space itself and program-specific requirements. The facilities must have sufficient space and other resources at each site to conduct evaluations and at least two simultaneously occurring groups.
  5. Subcontracting - An applicant may subcontract any portion of the services as necessary. If a subcontractor will be involved, include a copy of the proposed contract, a description of the subcontractor’s services and criteria for choosing the subcontractor. The successful applicant is responsible to ensure that required information and court interactions are completed as outlined in the RFP and any ensuing contract for any subcontractors.

**C. PROJECT EVALUATION (27 Points)**

1. Describe how the Agency, if awarded the contract will have in place, or develop:
  - a. A mechanism to facilitate and ensure both staff and program adherence to the specified model.
  - b. A mechanism to ensure adherence to Department standards.
  - c. Identify client and programmatic feedback methods for program analysis and review.
  - d. Address participant and stakeholder questions and complaints.
  - e. Quantitative goals and objectives for the service components in terms of the possible numbers of individuals to be served, types of service, and outcomes to be achieved.
2. Submit a plan, using the above, to report issues, problems and progress to the Department, at least on a quarterly basis, in meeting the above goals, objectives, and the Department identified timelines and performance measures for these programs.
3. Provide the official name, address, phone number, fax number, and e-mail address of the applicant and organization. The principal contact person and the person (or persons) authorized to execute the contact must also be provided.
4. Describe applicant’s current infrastructure and its capacity to build a coordinated approach in response to this RFP
5. Briefly discuss the capability, administrative efficiencies, and experience of the applicant organization with similar projects and populations.
6. If your agency currently has a contract with DMHAS, please indicate whether you are in compliance with contract requirements and in good standing with DMHAS.

**D. APPENDICES (15 Points)**

The application may include the following appendices. These appendices must not be used to extend or replace sections of the Program Narrative.

- Appendix 1: Biographical Sketches/Resumes for Existing Staff and/or Job Descriptions for New Positions
- Appendix 2: Letters of Support/Coordination
- Appendix 3: Organizational Structure (Table of Organization)
- Appendix 4: Copy of Most Recent Financial Audit (If not a current DMHAS-funded agency)

## **X. Evaluation Criteria/Selection Committee**

A Selection Committee (SC), including but not limited to DMHAS staff and other parties with expertise or relevant experience in the RFP focus, will evaluate all proposals that meet qualification requirements set forth in this RFP. The SC will score proposals in accordance with the evaluation criteria set forth in this RFP. The evaluation of proposals shall be within the sole judgment and discretion of the SC. This will result in a recommendation to the Commissioner or his designee.

The applicant shall neither contact nor lobby DMHAS administration, staff, or evaluators during the evaluation process. Attempts by an applicant to contact and/or influence DMHAS administration, staff, or members of the SC may result in disqualification of the applicant.

The SC will evaluate each proposal to determine the extent to which it has met qualification requirements set forth in this RFP. The applicant should bear in mind that any proposal deemed by the SC to be unrealistic in terms of the technical or schedule commitments, or unrealistically high or low in cost, will be deemed reflective of a lack of technical competence or of a failure to comprehend the complexity and risk of the requirements as set forth in this RFP.

As a result of this RFP, DMHAS intends to enter into contract negotiations with parties selected using this RFP. Applicants whose responses conform to the RFP requirements and whose bids present the greatest value to people served by DMHAS, when all evaluation criteria are considered will be selected for final contract negotiations. The goal is to recommend proposals for award based on the cumulative points scored using the evaluation criteria.

Specifications contained in this RFP should be considered as minimum requirements. Much of the material needed to present a comprehensive proposal can be placed into one of the sections listed.

Proposals will be rated using a point scoring system that assesses how well the applicant addressed requirements set forth in this RFP. The maximum score across all evaluation criteria is 100 points. Points for this RFP are detailed in Section IX.

## **XI. General Proposal Requirements**

### **A. DISPOSITION OF PROPOSALS**

DMHAS reserves the right to reject any and all proposals, or portions thereof, received as a result of this request or to negotiate separately any service in any manner necessary to serve the best interest of DMHAS. DMHAS reserves the right to contract for all or any portion of the scope of work contained within this RFP if it is determined that contracting for a portion of the work will best meet the needs of DMHAS.

## B. CONDITIONS

Any prospective applicants must be willing to adhere to the following conditions and must positively state them in the proposals:

1. **Conformance with Statutes.** Any contract awarded as a result of this RFP must be in full conformance with statutory requirements of State of Connecticut and the Federal Government.
2. **Ownership of Subsequent Products.** Any product, whether acceptable or unacceptable, developed under a contract awarded, as a result of this RFP is to be sole property of the Department unless stated otherwise in the RFP or contract.
3. **Timing and Sequence.** Timing and sequence of events resulting from this RFP will ultimately be determined by DMHAS.
4. **Oral Agreement.** Any alleged oral agreement or arrangement made by an applicant with any agency or employee will be superseded by a written agreement.
5. **Amending or Canceling Requests.** DMHAS reserves the right to amend or cancel this RFP, prior to the due date and time, if it is in the best interest of DMHAS and the State.
6. **Rejection for Default or Misrepresentation.** DMHAS reserves the right to reject the proposal of any applicant that is in the default of any prior contract or for misrepresentation.
7. **Department's Clerical Errors in Awards.** DMHAS reserves the right to correct inaccurate awards resulting from its clerical errors.
8. **Rejection of Qualified Proposals.** Proposals are subject to rejection in whole or in part if they limit or modify any of the terms and conditions and/or specifications of the RFP.
9. **Applicant Presentation of Supporting Evidence.** An applicant, if requested, must be prepared to present evidence of experience, ability, service facilities, data reporting capabilities, and financial standing necessary to satisfactorily meet the requirements set forth or implied in the proposal.
10. **Changes to Proposal.** No additions or changes to the original proposal will be allowed after submittal. While changes are not permitted, clarification at the request of DMHAS may be required at the applicant's expense.
11. **Collusion.** By responding, the applicant implicitly states that they are submitting a response to this RFP that in all respects is fair and without collusion or fraud. It is further implied that the applicant did not participate in the RFP development process, had no knowledge of the specific contents of the RFP prior to its issuance, and that no employee of DMHAS participated directly or indirectly in the applicant's proposal preparation.

## C. PROPOSAL PREPARATION EXPENSE

The State of Connecticut and DMHAS assume no liability for payment of expenses incurred by applicants in preparing and submitting proposals in response to this solicitation.

## D. RESPONSE DATE AND TIME

In order to be considered for selection, the Department must receive proposals by **2:00 P.M. Local Time, on September 23, 2008**. Postmark date will **not** be considered the basis for meeting any submission deadline. Any applicant's response, which is received after the deadline, will not be accepted. Receipt of a proposal after the closing date and time as stated herein shall **not** be construed as acceptance of the proposal. If delivery of the proposal is not made by courier or in person, the use of Certified or Registered mail is suggested. **All** RFP communications, including proposals, should be addressed to the RFP Program Contact (Reference RFP page 1). Please confirm receipt of your submission by email or phone with the RFP Program Contact.

## E. INCURRING COSTS

DMHAS is not liable for any costs incurred by the applicant prior to the effective date of a contract.



## **F. FREEDOM OF INFORMATION**

Due regard will be given to the protection of proprietary information contained in all proposals received. However, applicants should be aware that all materials associated with this RFP are subject to the terms of the Freedom of Information Act, the Privacy Act, and all rules, regulations and interpretations resulting therefrom. It will not be sufficient for applicants to merely state generally that the proposal is proprietary in nature and not therefore subject to release to third parties. Those particular pages or sections, which an applicant believes to be proprietary, must be specifically identified as such. Convincing explanation and rationale sufficient to justify each exception from release consistent with Section 1-210 of the Connecticut General Statutes must accompany the proposal. The rationale and explanation must be stated in terms of the prospective harm to the competitive position of the Applicant that would result if the identified material were to be released and the reasons why the materials are legally exempt from release pursuant to the above-cited Statute. In any case, the narrative portion of the proposal may not be exempt from release. Between the applicant and DMHAS, the final administrative authority to release or exempt any or all material so identified rests with DMHAS.

## **H. CONFIDENTIALITY**

The successful applicant shall comply with all applicable state and federal laws and regulations pertaining to the confidentiality of proprietary information, data and other confidential or personal information concerning the medical, personal or business affairs of program participants acquired in the course of providing services under this RFP. The successful applicant shall keep confidential all financial, operating, proprietary or business information of DMHAS relating to the provision of services under this RFP which is not otherwise public information, along with all information, not described above, but specified in writing by DMHAS as confidential information. The successful applicant shall also cause each of its agents, employees, or subcontractors and other persons and organizations involved in doing business with or controlled by it from disclosing or transmitting to any person or legal entity any of the described information. The successful applicant shall ensure that the appropriate qualified service organization agreements are in place pursuant to federal confidentiality regulations.

## **I. AFFIRMATIVE ACTION**

Regulations of Connecticut State Agencies Section 46a68j-3(10) requires agencies to consider the following factors when awarding a contract that is subject to contract compliance requirements:

- i.** the applicant's success in implementing an affirmative action plan;
- ii.** the applicant's success in developing an apprenticeship program complying with Section 46a-68-1 to 46a-68-17 of the Connecticut General Statutes, inclusive;
- iii.** the applicant's promise to develop and implement a successful affirmative action plan;
- iv.** the applicant's submission of EEO-1 data indicating that the composition of its work force is at or near parity when compared to the racial and sexual composition of the work force in the relevant labor market area; and
- v.** the applicant's promise to set aside a portion of the contract for legitimate small contractors and minority business enterprises. (See CGS 4a-60).

## XII.

### Exhibit 1:

### GEOGRAPHIC COURT (GA) COVERAGE AREAS

CT Courts that generate referrals to the PTIP programs and the towns of arrests that are covered by each court.

CT Geographic Courts	Number of Referrals Calendar Year 2007	Towns Covered
GA# 01 @ Stamford	538	Darien, Greenwich, Stamford
GA# 02 @ Bridgeport	710	Bridgeport, Easton, Fairfield, Monroe, Stratford, Trumbull
GA# 03 @ Danbury	574	Bethel, Brookfield, Danbury, New Fairfield, Newtown, Redding, Ridgefield, Sherman
GA# 04 @ Waterbury	536	Middlebury, Naugatuck, Prospect, Southbury, Waterbury, Watertown, Wolcott, Woodbury
GA# 05 @ Derby	357	Ansonia, Beacon Falls, Derby, Orange, Oxford, Seymour, Shelton
GA# 07 @ Meriden	605	Cheshire, Hamden, Meriden, North Haven, Wallingford
GA# 09 @ Middletown	591	Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Killingworth, Haddam, Middlefield, Middletown, Old Saybrook, Portland, Westbrook
GA# 10 @ New London	506	East Lyme, Groton, Ledyard, Lyme, New London, North Stonington, Old Lyme, Stonington, Waterford
GA# 11 @ Danielson	605	Ashford, Brooklyn, Canterbury, Chaplin, Eastford, Hampton, Killingly, Plainfield, Pomfret, Putnam, Scotland, Sterling, Thompson, Windham, Woodstock
GA# 12 @ Manchester	622	East Hartford, Glastonbury, Manchester, Mariborough, South Windsor
GA# 13 @ Enfield	713	East Granby, East Windsor, Enfield, Granby, Simsbury, Suffield, Windsor, Windsor Locks
GA# 14 @ Hartford	667	Avon, Bloomfield, Canton, Farmington, Hartford, West Hartford
GA# 15 @ New Britain	688	Berlin, New Britain, Newington, Rocky Hill, Wethersfield
GA# 17 @ Bristol	518	Bristol, Burlington, Plainville, Plymouth, Southington
GA# 18 @ Bantam	310	Barkhamsted, Bethlehem, Bridgewater, Canaan, Colebrook, Cornwall, Goshen, Hartland, Harwinton, Kent, Litchfield, Morris, Salisbury, North Canaan, Norfolk, New Hartford, New Milford, Roxbury, Sharon, Thomaston, Torrington, Warren, Washington, Winchester
GA# 19 @ Rockville	683	Andover, Bolton, Columbia, Coventry, Ellington, Hebron, Mansfield, Somers, Stafford, Tolland, Union, Vernon, Willington
GA# 20 @ Norwalk	428	New Canaan, Norwalk, Weston, Westport, Wilton
GA# 21 @ Norwich	361	Bozrah, Colchester, Franklin, Griswold, Lebanon, Lisbon, Montville, Norwich, Preston, Salem, Sprague, Voluntown
GA# 22 @ Milford	360	Milford, West Haven
GA# 23 @ New Haven	1057	Bethany, Branford, East Haven, Guilford, Madison, New Haven, North Branford, Woodbridge

### **XIII. Additional Required Documents**

The following attached required State documents must be completed and submitted with the applicant's proposal:

- **NOTICE TO EXECUTIVE BRANCH STATE CONTRACTORS AND PROSPECTIVE STATE CONTRACTORS OF CAMPAIGN CONTRIBUTION AND SOLICITATION BAN**
- **CONSULTING AGREEMENT AFFIDAVIT**
- **AFFIRMATION OF RECEIPT OF SUMMARY OF STATE ETHICS LAW**

**NOTICE TO EXECUTIVE BRANCH STATE CONTRACTORS AND PROSPECTIVE STATE CONTRACTORS OF CAMPAIGN CONTRIBUTION AND SOLICITATION BAN**

This notice is provided under the authority of Connecticut General Statutes 9-612(g)(2), as amended by P.A. 07-1, and is for the purpose of informing state contractors and prospective state contractors of the following law (italicized words are defined on page 2):

***Campaign Contribution and Solicitation Ban***

No *state contractor, prospective state contractor, principal of a state contractor or principal of a prospective state contractor*, with regard to a *state contract or state contract solicitation* with or from a state agency in the executive branch or a quasi-public agency or a holder, or principal of a holder of a valid pre-qualification certificate, shall make a contribution to, or *solicit* contributions on behalf of (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee;

In addition, no holder or principal of a holder of a valid pre-qualification certificate, shall make a contribution to, or solicit contributions on behalf of (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of State senator or State representative, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee.

**Duty to Inform**

State contractors and prospective state contractors are required to inform their principals of the above prohibitions, as applicable, and the possible penalties and other consequences of any violation thereof.

**Penalties for Violations**

Contributions or solicitations of contributions made in violation of the above prohibitions may result in the following civil and criminal penalties: Civil penalties--\$2000 or twice the amount of the prohibited contribution, whichever is greater, against a principal or a contractor. Any state contractor or prospective state contractor which fails to make reasonable efforts to comply with the provisions requiring notice to its principals of these prohibitions and the possible consequences of their violations may also be subject to civil penalties of \$2000 or twice the amount of the prohibited contributions made by their principals.

Criminal penalties—Any knowing and willful violation of the prohibition is a Class D felony, which may subject the violator to imprisonment of not more than 5 years, or \$5000 in fines, or both.

**Contract Consequences**

Contributions made or solicited in violation of the above prohibitions may result, in the case of a state contractor, in the contract being voided.

Contributions made or solicited in violation of the above prohibitions, in the case of a prospective state contractor, shall result in the contract described in the state contract solicitation not being awarded to the prospective state contractor, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

The state will not award any other state contract to anyone found in violation of the above prohibitions for a period of one year after the election for which such contribution is made or solicited, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

Receipt acknowledged: \_\_\_\_\_

(signature)

(date)

Print name: \_\_\_\_\_

Title: \_\_\_\_\_

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

Additional information and the entire text of P.A 07-1 may be found on the website of the State Elections Enforcement Commission, [www.ct.gov/seec](http://www.ct.gov/seec). Click on the link to “State Contractor Contribution Ban”

## Definitions:

"State contractor" means a person, business entity or nonprofit organization that enters into a state contract. Such person, business entity or nonprofit organization shall be deemed to be a state contractor until December thirty-first of the year in which such contract terminates. "State contractor" does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person's capacity as a state or quasi-public agency employee.

"Prospective state contractor" means a person, business entity or nonprofit organization that (i) submits a response to a state contract solicitation by the state, a state agency or a quasi-public agency, or a proposal in response to a request for proposals by the state, a state agency or a quasi-public agency, until the contract has been entered into, or (ii) holds a valid pre-qualification certificate issued by the Commissioner of Administrative Services under section 4a-100.

"Prospective state contractor" does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person's capacity as a state or quasi-public agency employee.

"Principal of a state contractor or prospective state contractor" means (i) any individual who is a member of the board of directors of, or has an ownership interest of five per cent or more in, a state contractor or prospective state contractor, which is a business entity, except for an individual who is a member of the board of directors of a nonprofit organization, (ii) an individual who is employed by a state contractor or prospective state contractor, which is a business entity, as president, treasurer or executive vice president, (iii) an individual who is the chief executive officer of a state contractor or prospective state contractor, which is not a business entity, or if a state contractor or prospective state contractor has no such officer, then the officer who duly possesses comparable powers and duties, (iv) an officer or an employee of any state contractor or prospective state contractor who has managerial or discretionary responsibilities with respect to a state contract, (v) the spouse or a dependent child who is eighteen years of age or older of an individual described in this subparagraph, or (vi) a political committee established or controlled by an individual described in this subparagraph or the business entity or nonprofit organization that is the state contractor or prospective state contractor.

"State contract" means an agreement or contract with the state or any state agency or any quasi-public agency, let through a procurement process or otherwise, having a value of fifty thousand dollars or more, or a combination or series of such agreements or contracts having a value of one hundred thousand dollars or more in a calendar year, for (i) the rendition of services, (ii) the furnishing of any goods, material, supplies, equipment or any items of any kind, (iii) the construction, alteration or repair of any public building or public work, (iv) the acquisition, sale or lease of any land or building, (v) a licensing arrangement, or (vi) a grant, loan or loan guarantee. "State contract" does not include any agreement or contract with the state, any state agency or any quasi-public agency that is exclusively federally funded, an education loan or a loan to an individual for other than commercial purposes.

"State contract solicitation" means a request by a state agency or quasi-public agency, in whatever form issued, including, but not limited to, an invitation to bid, request for proposals, request for information or request for quotes, inviting bids, quotes or other types of submittals, through a competitive procurement process or another process authorized by law waiving competitive procurement.

"Managerial or discretionary responsibilities with respect to a state contract" means having direct, extensive and substantive responsibilities with respect to the negotiation of the state contract and not peripheral, clerical or ministerial responsibilities.

"Dependent child" means a child residing in an individual's household who may legally be claimed as a dependent on the federal income tax of such individual.

“Solicit” means (A) requesting that a contribution be made, (B) participating in any fund-raising activities for a candidate committee, exploratory committee, political committee or party committee, including, but not limited to, forwarding tickets to potential contributors, receiving contributions for transmission to any such committee or bundling contributions, (C) serving as chairperson, treasurer or deputy treasurer of any such committee, or (D) establishing a political committee for the sole purpose of soliciting or receiving contributions for any committee. Solicit does not include: (i) making a contribution that is otherwise permitted by Chapter 155 of the Connecticut General Statutes; (ii) informing any person of a position taken by a candidate for public office or a public official, (iii) notifying the person of any activities of, or contact information for, any candidate for public office; or (IV) serving as a member in any party committee or as an officer of such committee that is not otherwise prohibited in this section.





**STATE OF CONNECTICUT  
AFFIRMATION OF RECEIPT OF STATE ETHICS LAWS SUMMARY**

Affirmation to accompany a large State construction or procurement contract, having a cost of more than \$500,000, pursuant to Connecticut General Statutes §§ 1-101mm and 1-101qq

**INSTRUCTIONS:**

**Complete all sections of the form. Submit completed form to the awarding State agency or contractor, as directed below.**

**CHECK ONE:**

- I am a person seeking a large State construction or procurement contract. I am submitting this affirmation to the awarding State agency with my bid or proposal. [Check this box if the contract will be awarded through a competitive process.]
- I am a contractor who has been awarded a large State construction or procurement contract. I am submitting this affirmation to the awarding State agency at the time of contract execution. [Check this box if the contract was a sole source award.]
- I am a subcontractor or consultant of a contractor who has been awarded a large State construction or procurement contract. I am submitting this affirmation to the contractor.

**IMPORTANT NOTE:**

**Contractors shall submit the affirmations of their subcontractors and consultants to the awarding State agency. Failure to submit such affirmations in a timely manner shall be cause for termination of the large State construction or procurement contract.**

**AFFIRMATION:**

**I, the undersigned person, contractor, subcontractor, consultant, or the duly authorized representative thereof, affirm (1) receipt of the summary of State ethics laws\* developed by the Office of State Ethics pursuant to Connecticut General Statutes § 1-81b and (2) that key employees of such person, contractor, subcontractor, or consultant have read and understand the summary and agree to comply with its provisions.**

\* The summary of State ethics laws is available on the State of Connecticut’s Office of State Ethics website at [http://www.ct.gov/ethics/lib/ethics/contractors\\_guide\\_final2.pdf](http://www.ct.gov/ethics/lib/ethics/contractors_guide_final2.pdf)

\_\_\_\_\_  
Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name \_\_\_\_\_  
Title

\_\_\_\_\_  
Firm or Corporation (if applicable)

\_\_\_\_\_  
Street Address

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City \_\_\_\_\_ \_\_\_\_\_  
State \_\_\_\_\_ Zip Code