

Request for Proposals (RFP)

Questions for Drug Court Treatment Providers

TREATMENT PHILOSOPHY

1. What is the program's philosophy of treatment?
2. How is this philosophy "operationalized" on a daily basis?
3. Does the program serve a designated target population?
4. Does the program use harm reduction techniques? If so, please describe.

LEVEL OF CARE

1. What levels of care does the program provide?
2. What criteria are used to determine the appropriate levels of care?
3. Are services offered for both individuals and families?
4. What level of care metric is used?
5. What are the major differences in the levels of care provided?
6. What are the state requirements for treatment programs related to each level of care provided?
7. Are there plans to provide other levels of care in the future?

PROGRAM DESIGN AND TREATMENT INTERVENTIONS

1. What are the key elements of the program's design?
2. Does the design utilize evidence-based treatments? If so, please describe.
3. How does the program address cultural-specific needs of the client population?
4. Does the program use a strength-based model? Please explain.
5. Are clinical assessments conducted by licensed and certified professionals? If so, what are the licensure and certifications of the professionals conducting the assessments?
6. How frequently are clients reassessed?
7. Are clients screened and assessed for both mental and substance use disorders?
Are standardized instruments used to screen and assess for each type of disorder?
If so, what instruments are used?
8. What new interventions or services have been added in the past 2 years to enhance the program's design?
9. Which community partnerships have been established by the program, and how have these been maintained over time?
10. Does the program use manualized treatment curricula? If so, which curricula are used?
11. What experience does the program have in providing services to justice-involved populations?

PROGRAM OPERATIONS

1. Does the program offer onsite drug testing? Is there a drug-testing lab on site? How quickly are drug test results available?
2. Does the program have an established, written drug-testing protocol? If so, what does it include (e.g., process, chain-of-custody, analysis, technological and legal support, etc.)?
3. Does the program provide case management services? If so, please describe.
4. Does the program have an established community provider network in place for complementary and support services?
5. Does the program have a formal grievance process in place?
6. What types of client information are maintained by the program? Is this information maintained on an electronic database? Is this database encrypted?
7. What are the program's after-hours and emergency service protocols?
8. Does the program have a formal fiscal management and accounting procedure in place? If so, please describe.
9. Please provide a copy of the program's organizational chart that clearly describes key administrative and operational components.
10. Are processes in place to assist the uninsured in accessing insurance coverage, through either Medicaid or federal/state insurance exchanges?
11. Does the program offer specialized services for unique populations (e.g., gender, offender, non-offender, DWI, veterans, etc.)?
12. Does the program offer or assist with transportation services?
13. Are records kept in an analog or digital system?
14. Is the record system interoperable with the other major electronic health records systems in the area?

STAFF CHARACTERISTICS AND QUALIFICATIONS

1. What attempts have been made to provide diversity among the program's treatment team?
2. What attempts have been made to ensure cultural competency among the program's team?
3. Does the diversity of the treatment team appropriately reflect the diversity of the community?
4. Is the program team able to appropriately engage with the clients in a culturally competent manner?
5. To what extent does the treatment team include multidisciplinary staff? Do these staff have experience in working with court referrals and with drug-involved offenders?
6. Is the program's treatment team licensed and credentialed as per state requirements?
7. What type of staff training has been provided that aligns with the needs of the program's target population?
8. Does the treatment staff practice self-improvement and self-care as part of a cohesive team?
9. Does the treatment staff model the health they teach their clientele?

INSURANCE AND MEDICAID

1. Are processes in place to assist the uninsured in accessing insurance coverage, through either Medicaid or the federal/state insurance exchanges?
2. Does the provider have a system for determining whether an individual has insurance or is eligible for Medicaid?
3. Is the treatment provider eligible to receive payment from Medicaid? If so, does the provider accept Medicaid?
4. Does the program accept the major Medicaid plans or other health plans in the catchment area?
5. Does the program offer medication assisted therapies conformant to the Medicaid formularies?
6. Does the program assess individuals in a manner to ensure medical necessity in conformance with Medicaid protocols?
7. Are the treatment modalities offered in conformity with the state Medicaid plan?

QUALITY ASSURANCE MECHANISM

1. What are the federal, state, and local requirements for treatment service delivery in your catchment area? (e.g., accreditation, fire, safety, zoning, Medicaid/Medicare eligibility and billing requirements, confidentiality regulations (42 CFR), ADA specifications)
2. Does the program maintain a written set of formal policies, procedures, and/or standard operations guidelines?
3. Is the program subject to periodic onsite reviews by the state regulatory authority, accreditation agency, or other monitoring organization?
4. How does the program monitor the implementation of treatment components?
5. Does the staff have input into the program's design and changes to the design?
6. Do clients have an opportunity to voice constructive opinions regarding ways to improve the program? How is this feedback used?
7. Is clinical supervision available on site? If so, who provides this supervision?

PROGRAM EVALUATION

1. What program evaluations are required by local, state, and federal agencies? How frequently are evaluations required?
2. What program evaluations are required by funding entities? How frequently?
3. Has program evaluation been conducted to date? If so, what type of evaluation was conducted and what were the results?
4. What performance measures does the program compile and monitor? How are these measures used by program administrators?
5. Does the program operate an electronic management information system (MIS)? Who has access to the MIS database? What confidentiality safeguards are in place?
6. Are both qualitative and quantitative evaluation data collected? If so, please describe.
7. Would the program support an external evaluation (e.g., use of an external evaluator/researcher)? Does the program have experience in working with an external evaluator?
8. Is the program willing to share completed evaluations (methodologies and results) with the court?

COMPETENCIES THE PROVIDER MUST HAVE OR MUST BE WILLING TO DEVELOP

1. Is the program willing to provide court-ordered treatment services to justice-involved clients?
2. Does the program provide contingency management as part of substance abuse treatment? If not, would the program support the use of these techniques?
3. Will the program provide treatment of varying duration? If so, please describe.
4. Are services time driven or based on clinical and medical need?
5. Is the program willing to communicate treatment progress with probation and parole officers and with the drug court team?
6. How does the program provide modifications to its treatment interventions and modalities?
7. How does the program address client motivation? Does the program utilize motivational enhancement theories?
8. Is the program willing to be an active member of the court team (e.g., participate in staffing and hearings)?

MEDICATION ASSISTED TREATMENT (MAT)

1. Does the program support medication assisted treatment (MAT) approaches to recovery?
2. Does the program have a MAT prescribing physician/nurse practitioner on staff? If so, what specialized training or certification has been received?
3. Does the program have established relationships with MAT prescribing physicians in the community?
4. What communication protocols are in place with MAT prescribing physicians or other medical staff (both onsite and offsite) to ensure that there is adequate communication regarding clients' MAT compliance and progress?
5. What addiction medications are currently available to the program or the program's community MAT provider network? How long have these medications been used by the prescribing medical staff? How many existing clients within the program receive MAT?
6. Does the program have established protocols for MAT patients?
7. Does the program have a MAT taper, length of time requirement, or other policy that is not consistent with MAT evidence-based principles?
8. What types of psychosocial treatments (e.g., cognitive and behavioral therapies) are available to MAT patients?
9. What other substance abuse treatment services are available for MAT recipients?
10. Are addiction medicines stored and dispensed on site?
11. What is the program's funding source for MAT services (e.g., private insurance, federal or state insurance exchange, Medicaid, public treatment funds, self-pay, grant funding, etc.)?
12. Is there an adequate number of pharmacies in the catchment area to fill addiction medicine prescriptions?
13. Has the program negotiated addiction medication costs with pharmacies within the catchment area?
14. What staff training has been received related to MAT?



NDCI
NATIONAL DRUG
COURT INSTITUTE

1029 N. Royal Street, Suite 201
Alexandria, VA 22314

Tel: 703.575.9400

Fax: 703.575.9402

 ALLRISE.ORG