SAMPLE: Scope of Work, Submission Contents and Submission Requirements

I. SCOPE OF WORK – Background Information and Services Descriptions

A. Background

The index of reentry services in this RFP are the result of local and state strategic planning efforts that have been conducted over the past several years.

1. Senate Bill 678 and Community Corrections Partnership

Local criminal justice reform met statewide reform mandates at an unprecedented cross roads in the last couple of years. SB 678 was signed into law in October 2009. The purpose of the bill is to reduce recidivism amongst felony probationers by improving probation services using evidence based practices. SB678 required the formation of a Community Corrections Partnership (CCP), which advises the City and County of San Francisco on the use of evidence-based practices in sentencing and probation. It also created the Community Corrections Performance Incentive Fund, which rewards county probation departments for decreasing the number of felony probationers that are revoked and sentenced to state prison. From 2009 to 2011, San Francisco successfully decreased its commitments of felony probationers to state prison by 48% sending fewer felony probationers to state prison on a revocation. The Department is dedicating 100% of resources earned through this revocation reduction success to housing, treatment, employment, and other support services. Some of these funds have been allocated to the San Francisco Department of Public Health for stabilization housing, residential and outpatient treatment. Other funds have been allocated to the Human Services Agency for rental subsidies. Additional direct services funds will be awarded through this RFP process.

2. AB109/AB117 and Community Corrections Partnership Executive Committee

In an effort to address overcrowding in California’s prisons and assist in alleviating the state’s financial crisis, the Public Safety Realignment Act (AB 109) was signed into law on April 4, 2011. Amended by AB117, SB1021/SB1023, which went into effect on June 28, 2012 and July 1, 2012 respectively, AB109 transfers responsibility for supervising specified lower level inmates and parolees from the California Department of Corrections and Rehabilitation to counties. Implementation of the Public Safety Realignment Act began on October 1, 2011.

A summary of the four major changes enacted by Public Safety Realignment is below.

Post-Release Community Supervision: People released from State Prison on or after October 1st, 2011 who were serving sentence for a non-serious, non-violent, non-sex offense were released to Post-Release Community Supervision (PRCS), which is the responsibility of the Adult Probation Department. Prior to October 1st, 2011 these individuals would have been on State Parole. PRCS revocations are heard in San Francisco Superior Court, and revocation sentences are served in San Francisco County Jail.

Flash Incarceration: Defined under PC3454(c) as a period of detention in county jail for 1- 10
consecutive days. “Shorter, but if necessary more frequent, periods of detention for violations of an offender’s post-release supervision conditions shall appropriately punish an offender while preventing the disruption in a work or home establishment that typically arises from longer term revocations. APD, the supervising agency of Post-Release Community Supervisee may use a short term of incarceration in county jail as a sanction for violations of the terms and conditions of post-release community supervision.

Parole Violations: People released from State Prison on or after October 1st who were serving a sentence for a serious, violent, or sex offense continue to be released to State Parole. Parole violation hearings are still conducted by the Board of Parole Hearings. Parole violation sentences are no longer served in State Prison, but in San Francisco County Jail. Post July 1, 2013 the revocation process will work the same for parolees as it does for PRCS.

Redefining Felonies: Individuals convicted of certain felonies on or after October 1st may be sentenced to San Francisco County Jail for more than 12 months. Individuals sentenced under PC1170(h) may be sentenced to the low, mid, or upper term of a triad. The individual may be sentenced to serve that entire time in County Jail, or may be sentenced to serve that time split between County Jail and Mandatory Supervision. Mandatory Supervision is the responsibility of the Adult Probation Department.

3. Reentry Council of the City and County of San Francisco (Reentry Council)

As established by San Francisco Administrative Code 5.1, the Reentry Council initiated a broad based effort to identify the range of reentry services that may best support a person’s successful and permanent transition from the criminal justice system. Efforts were largely driven by the Reentry Council’s sub-committees which included knowledgeable and committed city representatives, and even more importantly, members of the community that either lived in neighborhoods largely impacted by crime and incarceration or other front line professionals that worked tirelessly to help currently and formerly incarcerated people permanently exit the criminal justice system. The Reentry Council’s due diligence also included review of the existing reentry services stock and service capacity, focus groups with city and community partners, and focus groups with a wide range of consumers of reentry services. The Reentry Council’s efforts culminated in the creation of a 2010 Annual Report that included concentrated input from the city, community and criminal justice involved individuals. You can access this report at http://sfreentry.com/our-progress/.

4. Theoretical Framework

A theoretical framework is the body of knowledge that creates the foundation for a program’s theory of change and helps to answer the most practical intervention questions: what needs to happen to move people away from criminal behavior and towards pro-social behavior? There has been a proliferation of meta-analyses on theoretical frameworks.

Proposers must be able to articulate what theoretical framework (s) guides the entity’s service design and delivery. Meta analysis suggests that the following theoretical frameworks help to validate criminal justice interventions and services. Some reentry service categories may have
other theoretical frameworks that more aptly ground a particular reentry service approach or intervention. Proposers are welcome to submit information on these or other theoretical frameworks. The bottom line is that proposers must articulate a theoretical framework that guides their work.

A. **Social Learning Theory** is the view that people learn by observing others. Associated with Albert Bandura’s work in the 1960s, social learning theory explains how people learn new behaviors, values, and attitudes. A behavioral perspective on learning theory would suggest that offenders learn to engage in criminal activities through a process of rewards and punishments. Intervention practices associated with the behavior aspects of social learning theory would seek to reduce the positive incentive for crime and to create new incentives for pro-social behavior.

5. **Principles of Effective Intervention:** The principles of effective intervention are program design elements that have a demonstrated relationship to program success in reducing recidivism. The more the below elements are present in a program; the greater the recidivism reduction integrity of the program.

- Assess offenders risks and needs (While the COMPAS assessment will help the SFAPD understand the range of reentry services and interventions that may most benefit a client, funded partners will need to incorporate appropriate secondary assessments into client intake to determine appropriate service intensity and duration)
- Enhance intrinsic motivation,
- Target interventions – Risk principle (prioritize higher risk individuals), Need Principle (Target interventions to criminogenic needs), Responsivity (Be sensitive to temperament, learning style, motivation, gender and culture when assigning programs), Dosage (Structure 40% - 70% of high risk offenders’ time for 3 – 9 months), Treatment (Integrate treatment into full sentence/sanctions requirements),
- Skill train with directed practice (Provide evidence based programming that emphasizes cognitive behavior strategies and is delivered by well-trained staff),
- Increase positive reinforcement (Apply four positive reinforcements for every one negative reinforcement),
- Engage ongoing support in natural communities (Realign and actively engage pro-social support for offenders in their communities for positive reinforcement of desired new behaviors),
- Measure relevant processes and practices (An accurate and detailed documentation of case information and staff performance, along with a formal and valid mechanism for measuring outcomes, is the foundation of evidence-based practice),
- Provide measurement feedback (Providing feedback builds accountability and maintains integrity, ultimately improving outcomes).

6. **Therapeutic Program Environment**

The SFAPD is committed to ensuring that reentry services promote a true “therapeutic environment” – an environment in which facility aesthetics, constructive staff, client encounters, and dynamic service strategies promote feelings of safety, dignity, and respect amongst clients.
Research and practice underscores how specific service strategies can become the foundation from which a therapeutic environment can grow. The proposer should articulate how the following strategies will be incorporated into facility, staff training, and overall service design.

1. **Strength-based Strategy**

2. **Trauma-informed Strategy**

3. **Family-focused Strategy**

**B. Proposal/Scope of Work - Reentry Services Descriptions**

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<th>Intensive Case Management</th>
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**Criminogenic Needs or Community Functioning Factor:** The SFAPD has determined that this intervention addresses a client’s community functioning.

**Funding:** $236,266. The SFAPD will provide one or more entities with funds not to exceed $236,266 to administer Intensive Case Management services in conjunction with this RFP. However, all proposals that receive a total reader score of at least 70 points will be considered for placement on the pre-qualification list.

**Designated Capacity:** SFAPD seeks 60 designated service slots. Proposed budgets should consider this desired capacity.

**Overview:** The incidence of serious mental illnesses, such as schizophrenia, major depression, bipolar disorder, and post-traumatic stress disorder, is two to four times higher among previously incarcerated people than it is among those in the general population. Criminal justice system involved individuals with mental illness face extremely complex barriers to safe and independent transitions back into their communities. While attempting to coordinate appointments in a schedule that will include meetings with a probation officer, a mental health clinician and perhaps other individualized or group treatment activities, clients are also dealing with a range of medication, housing, transportation and benefits obstacles. Their mental health challenges impact many aspects of daily functioning including ability to respond to and navigate the criminal justice system, follow through on treatment modalities, maintain housing, follow through on benefits access, and interact with educational and workforce development providers. Under these circumstances, it isn’t surprising that individuals often return to the types of criminal behavior that originally prompted their incarceration. On the other side of the spectrum, community corrections officers often feel like they have been presented with an untenable situation. With large caseloads, supervision officers are often without the time or resources to properly observe an individual to spot vulnerable or dangerous behaviors or to facilitate an intensive observation of compliance with treatment, programs or conditions of release. A meaningful partnership between the SFAPD and a qualified community based intensive or clinical case management program presents a win-win situation for the public, the client, the
SFAPD and community based provider that will benefit from some of the respectful accountability leverage that can be afforded by the SFAPD’s staff. The SFAPD appreciates a close and meaningful relationship with the San Francisco Department of Public Health (DPH). Via the DPH’s Behavioral Health Access Center (BHAC), SFAPD clients can get access to triage and as appropriate long-term care. Services include behavioral health assessments, placement into the behavioral health system of care, enrollment into entitlement programs, including HealthySF and SFPATH, and benefits assistance including GA, CAAP, PAES, and CalWorks. SFAPD clients whose mental health assessments reveal immediate personal and public safety risks will be considered in need of immediate access to services within DPH’s system of care. Through this RFP, the SFAPD seeks to compliment that existing service capacity for individuals with immediate and serious mental health issues with capacity to also further serve individuals whose mental health issues may not rise to a level of immediate response; but which impact the individuals’ ability to stabilize, and to follow through on supervision terms and conditions. All SFAPD clients that may have mental health needs will continue to be assessed through the Behavioral Health Access Center (BHAC) services that are provided in custody or in the community. Clients with mental health issues that don’t pose immediate personal or public safety risks may benefit through structured Intensive Case Management services which pairs the resources of a community based provider with those of the SFAPD. The SFAPD would like to create a close partnership with a community based entity that has a track record of providing intensive or clinical case management to criminal justice involved individuals with an array of mental health challenges. This service framework will be simple: SFAPD staff will identify clients in custody or on a community based case load that may have mental health needs. A referral will be made to BHAC – BHAC will conduct an in custody or community based assessment. Clients that are eligible for immediate referral into placement or authorization into the behavioral system of care will be immediately serviced by DPH. Other assessed clients will be considered for referral to the community based Intensive Case Management services. The DPO and clinical case management staff will keep regular and open communication to determine client risks, needs and ongoing transition plans. The DPO and clinical case management staff will meet with the client in the community until the client is adequately stabilized. The community based case management staff may provide an array of services including additional assessment, individualized treatment, referral to group treatment, attention to housing, health care, medications, employment, income supports and entitlements, food and clothing, transportation, and child care referrals. The partner entity may be required to commence services in custody or may receive referrals for clients that are already on community supervision. The SFAPD and community based team must be attuned to the special needs and circumstances of released offenders and develop treatment plans, monitoring and outreach that fit an individual’s circumstances. This mental health team will establish a mutually agreed upon client non-compliance and crisis situations sanctions matrix that addresses public safety, but does not rely exclusively on incarceration as the most expedient crisis response. The proposer should articulate what types of incentives and incremental sanctions could be used to address some of the most common noncompliance and crisis situations. **Primary Responsibilities:** Responsibilities will include meeting clients where they are in local custody, on the streets, in motels/hotels or any other known residence, providing research-driven risk/need assessment tools to help guide intervention strategy, brokering of a variety of individualized resources for clients, transporting clients to and from key appointments, and providing evidence based individualized or group based therapy, treatment and counseling. **Preferred Qualifications:**
minimum of two-years of experience providing clinical case management services to the target population, a thorough knowledge of the adult criminal justice system, knowledge of the National Institute of Corrections, Principles of Effective Intervention and The Six Gender Responsive Strategies for Women Offenders, thorough understanding or criminogenic risk and community functioning factors, a track record of administering research-driven risk and needs assessment tools to individuals with mental illness, close partnerships with other residential or treatment programs, a track record of providing evidence based individualized and group therapy to individuals with mental illness, experience with peer-led, self-help recovery support; and extremely adept at composing client reports with appropriate levels of information and as needed, appearing in court to publically represent the facts of client reports.

II. PROPOSAL – Submission Contents

A. Proposal Content

Proposers must complete items 1-4 below for each reentry service category in which you are applying. (Please read the Employment Services category closely as the application guidelines for that category are slightly different than those for all other categories).

1. Executive Summary (no more than ONE (1) page)
   a. A brief summary of the proposal that provides an overview of proposed activities; a statement of need; the number and demographic description of target population(s) to be served; evidence-based practices to be utilized; and specific program and client outcomes.

2. Program Proposal Narrative (no more than SIXTEEN (16) pages TOTAL)
   a. Program Overview (no more than TEN (10) pages) – Must include the following:

   • Clearly state whether proposed services will be provided in custody, in the community or a combination of both. If services will be provided in custody, specify the facility. Whether services will be provided in custody or in the community, please describe if/how services can be efficiently linked with other essential community based reentry services. Lastly, please clarify interest or intent to partner with APD’s Community Assessment and Services Center which will be launched in Spring 2013.

   • Describe specific target population(s) to be served including the total number to be served and estimated demographic characteristics of target population and the location of services (citywide or specific geographic locations within San Francisco by zip code) including details on relevant social determinants of health and health inequities; and describe how target populations and their family members, will be involved in the planning, development, implementation of project activities.

   • Describe how the reentry service will use assessment information to determine an appropriate client engagement and retention strategy, and service intensity and
duration. The SFAPD will conduct the COMPAS assessment and will determine what the individual’s overall risks and needs are; and will make recommendations of medium to high risk/needs to appropriate services. The SFAPD however expects that the selected service provider will conduct a secondary assessment (s) to assess the individual’s temperament, learning style, and motivation; and to determine the intensity and duration of the service. If a specific reentry service doesn’t have a logical secondary assessment, proposers should describe what consistent protocols will be in place to help identify an individual’s temperament, learning style and motivation.

- Describe the theoretical framework that guides your reentry service design and delivery.

- Describe the proposed reentry service design and delivery plan in detail. The detail should reflect a clear understanding of criminogenic needs and community functioning factors, whether the proposed service is addressing a criminogenic need or community functioning factor; and how the service delivery plan can help a client make progress towards a desired relative outcome. Also, clearly articulate how the service design incorporates the Principles of Effective Intervention, Women’s Gender Responsive strategies into service delivery and how the plan will strive to ensure a therapeutic environment. Please be sure that the service design also includes the performance measures that are prescribed in the RFP as well as others that are tailored best on proposer expertise.
  - Include a simple Logic Model that demonstrates the relationship between proposed theoretical framework, target populations, evidence based strategies, performance measures and outcomes goals (note: the Logic Model does not count against the total page limit but should not exceed one (1) page).

- Describe the evidence based curriculum that will be used to deliver the reentry services. This information will be closely aligned with the information you provided in the Mandatory Minimums section.
- Describe how the reentry service integrates cognitive behavioral or social learning methods.
- Describe how the reentry service will enhance intrinsic motivation.
- Describe how a sanctions and incentives matrix will be used to encourage client engagement and completion of the reentry service.

b. **Organizational Qualifications** (no more than **FOUR (4)** pages)

Each proposer must provide information on the agency’s qualifications, and past performance specific to the services and target populations described in the proposal.

This must include all of the following:
• A brief description of your experience delivering this reentry service or providing services to criminal justice involved individuals. For how long have you provided the service to high/medium risk, criminal justice system involved individuals? Succinctly describe your past success addressing criminogenic needs and community functioning factors with the proposed reentry service. Describe your experience providing reentry service inside San Francisco County Jail and/or State Prisons.

• A description and evidence of relevant program license or certification from local, state or federal agencies where applicable.

• Describe your strategy for integrating new staff into your organization and ensuring that staff are trained on reentry service model, curriculum, data collection

• Describe, as appropriate, your proposed collaborative partnership and your experience maintaining service delivery integrity across all partners in a collaborative model: what role will the partner play in service provision, what is the referral mechanism, how will you appropriately share client information? Attach MOUs and/or Letters of Intent, describing each partner’s roles and responsibilities (not included in page count).

• Describe specific client outreach, engagement and retention strategies and rationale as to why chosen strategies and approaches will be effective with the target populations.

• Staff Qualifications and Licensure (no more than TWO (2) pages)

• Provide an organizational chart for the project staff that shows how these staff fit within the proposer’s organizational structure including key reporting relationships and functions.

• Describe the reentry services Program Director role and qualifications (Whether or not funding will cover this position, please provide information on the Program Director role as requested): Is the program director directly involved in the design of the program, have at least three years of experience with the target population and have a degree in a social work or related field?

• Describe the responsibilities and qualifications of the position (s) delivering the proposed reentry service (if different than the Program Director). Does the position require a minimum of two years’ experience delivering the proposed service to the target population as well as some degree of higher education (AA, BA, MA or higher)?

• Describe the explicit strategy for recruiting and retaining staff that have experience delivering the proposed services to, and understand the needs, barriers and experiences of the target population.
• Provide duty statements/job descriptions for key leadership and front lines positions associated with the implementation of the reentry service.

3. **Budget**

There is important detail in each of the below bullet points. Please take the time to read this section carefully. If instructions are not followed, budget points will be deducted.

Please find the following budget forms in Appendix C of this document:
• Program Budget Summary
• Salary and Fringe Detail
• Operating Budget Detail
• Capital Detail
• Budget Justification Form

Please take note of the following information when completing your budget forms:
• Use the attached budget documents to thoroughly describe the proposed project expenses.
• As has been mentioned several times in this RFP, actual award amounts will be contingent on availability of funds.
• **Salaries and Fringe:** Itemize staff and benefits cost for each staff that will provide direct/frontlines reentry services (Break out costs of FICA, SUI, W/C and other benefits). Unless the Executive Director, Accountants or any other Management will play a frontlines services role, allocations for their time should not be included in the salaries and fringe section.
• **Operating Detail:** Please pay special attention to the reentry service descriptions and make sure operations costs adequately reflect essential items.
  o Where possible the SFAPD encourages organizations to allocate a portion of funds for client food, transportation and clothing vouchers (Federal funds may limit use of funds for food. Restrictions will be addressed as needed during contract negotiations).
  o Proposed budgets should anticipate the costs of auxiliary aids and services, such as Real Time Captioning or ASL interpretation.
  o Please also be sure to itemize all other program costs like rent, equipment, postage, communications, etc.
  o Proposers also must itemize sub-contractor/partner expenses as well. Please be sure to communicate this requirement to potential collaborative partners immediately so that they submit an itemized budget to you in a timely manner. **Proposers will automatically lose 3 budget points if sub contractor allocations are not itemized.**
  o **Overhead/Indirect/Administrative Detail:** This allocation cannot exceed 12% of the personnel costs/
• **Budget Justification Form:** Please fully describe your calculations and rationale for proposed budget items.
III. PROPOSAL - Submission Requirements

A. Non-Binding Letter of Intent

Prospective proposers should submit a Letter of Intent (LOI) on their agency’s letterhead stationary to Lauren Bell, Reentry Services Manager, San Francisco Adult Probation Department, Reentry Division, 850 Bryant Street, 2nd Floor, San Francisco, CA 94103 by 5:00pm, on Friday, October 26, 2012, to indicate their interest in submitting a proposal under this RFP. Such a letter of intent is non-binding and will not prevent acceptance of an agency’s proposal and neither commits an agency to submitting a proposal.

B. Time and Place of Proposal Submission

Proposals must be received by 5:00 p.m. on November 13, 2012. Postmarks will not be considered in judging the timeliness of submissions. Proposals may be delivered in person and left with SFAPD REENTRY DIVISION or mailed to:

Lauren Bell, Reentry Services Manager
San Francisco Adult Probation Department
Reentry Division
850 Bryant Street, 2nd Floor Lobby
San Francisco, CA 94103

Proposers shall submit one (1) original and seven (7) hard copies of the proposal. The original copy of the proposal must be clearly marked as “ORIGINAL”.

Proposals submitted by facsimile will not be accepted.

C. Format

All submission must be single-spaced, typewritten on standard recycled paper with an easy to read 12-point font such as Arial or Times New Roman and one inch margins. Please print on double-sided pages to the maximum extent possible (note that one, double-sided page is the equivalent of two proposal pages when meeting program proposal page limits). You can bind your proposal with a binder clip or single staple. Please do not submit your proposal in a three-ring binder, bind your proposal with a spiral binding, glued binding or anything similar. You are encouraged to use tabs or other separators within the proposal. Please also number pages and include a Table of Contents.

Please follow Attachment A, Application Checklist exactly when determining proposal order.

Please be sure the Minimum Agency Requirements Section is clearly labeled and bound separately from the program proposal (or proposals if you are applying in more than one service category).
D. Evaluation and Selection Criteria

The SFAPD has issued this RFP to identify reentry services providers in the following categories:

- Intensive Case Management
- Employment Services
- Sober Living Environment/Transitional Housing
- Restorative Justice/Victim Offender Mediation

There will be three (3) phases of review.

**Phase I. TECHNICAL AND MINIMUM QUALIFICATIONS REVIEW**

The SFAPD will review all received proposals to make sure they are technically compliant with formatting and submission guidelines as per the RFP and will conduct a review of the Minimum Agency Requirements packet. Proposers that are non-compliant with technical and Minimum Agency Requirements will not move forward to Phase II review.

**Phase II. INDEPENDENT READER REVIEW**

The SFAPD will follow the City and County of San Francisco’s guidelines for administering a competitive bid process that include proposal review by independent third party readers who will rate technically compliant proposals.

Proposals can earn up to 100 reader points

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<tr>
<td>Project Overview:</td>
<td>40</td>
</tr>
<tr>
<td>Organizational Qualifications:</td>
<td>20</td>
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<tr>
<td>Staff Certifications and Licensure:</td>
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<td><strong>Total Possible Reader Points</strong></td>
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**Phase III. FINAL FUNDING DECISIONS**

The SFAPD reserves the right to not solely rely on the highest score when making final award decisions, and further reserves the right to split funding between one or more successful proposals or to only award part of the described funding. The SFAPD will make final decisions that it believes are in the best long-term interests of Department needs, and clients.

**E. Proposal Scoring Criteria** (ONE section of all of the proposal content sections is pasted below as an example of how, in many cases, readers are scoring on the exact same questions as an applicant is asked to respond to. That is why it’s so important to follow the instructions).

1. **Project Overview**  
   40 Points
a. (2 points) Clearly state whether proposed services will be provided in custody, in the community or a combination of both. If services will be provided in custody, specify the facility. Whether services will be provided in custody or in the community, please describe if/how services can be efficiently linked with other essential community based reentry services. Lastly, please clarify interest or intent to partner with APD’s Community Assessment and Services Center which will be launched in Spring 2013.

b. (3 points) The proposal describes the specific target population(s) to be served including the total number to be served and estimated demographic characteristics of target population and the location of services (citywide or specific geographic locations within San Francisco by zip code) including details on relevant social determinants of health and health inequities; and describe how target populations and their family members, will be involved in the planning, development, implementation of project activities.

c. (4 points) The proposal describes how the reentry service will use assessment information to determine an appropriate client engagement and retention strategy, and service intensity and duration. The SFAPD will conduct the COMPAS assessment and will determine what the individual’s overall risks and needs are; and will make recommendations of medium to high risk/needs to appropriate services. The SFAPD however expects that selected service provider will conduct a secondary assessment(s) to assess the individual’s temperament, learning style, and motivation; and to determine the intensity and duration of the service.

d. (5 points) The proposal describes the theoretical framework that guides the reentry service design and delivery.

e. (15 points) The proposal describes the proposed reentry service design and delivery plan in detail. The detail reflects a clear understanding of qualifications specific to each subcomponent, criminogenic needs and community functioning factors, whether the proposed service is addressing a criminogenic need or community functioning factor; and how the service delivery plan can help a client make progress towards a desired relative outcome. The detail also incorporates the Principles of Effective Intervention, Women’s Gender Responsive strategies into service delivery and describes how the plan will strive to ensure a therapeutic environment. Lastly, the detail also includes the performance measures that are prescribed in the RFP as well as others that are tailored best on proposer expertise.

o The proposal includes a simple Logic Model that demonstrates the relationship between proposed theoretical framework, target populations, evidence based strategies, performance measures and outcomes goals (note: the Logic Model does not count against the total page limit but should not exceed one (1) page).

f. (2 points) The proposal describes the evidence based curriculum that will be used to deliver the reentry services.

g. (2 points) The proposal describes how the reentry service integrates cognitive behavioral or social learning methods.

h. (2 points) The proposal describes how the reentry service will enhance intrinsic motivation.

i. (5 points) The proposal describes how a sanctions and incentives matrix will be used to encourage client engagement and completion of the reentry service.