

## COUNTY OF DANE

## DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION

City County Building 210 Martin Luther King Jr. Blvd. Room 425 Madison, WI 53703-3345

**GREG BROCKMEYER**Director of Administration

CHARLES HICKLIN
Controller

Date: July 2, 201 To: All Proposers

Subject: Addendum #1 to RFP #121067 – Mental Health and Wellness Check-In's

for Sheriff's Office

## The following questions were received and responses are provided:

1) Is it allowable for some providers to have training licenses (all master's level, such as an CAPSW, MFT, etc.) as long as they are properly supervised per state requirements?

This would be acceptable

- 2) Are these full assessments of a person's mental health and well being, or just a check in on their current functioning level, resiliency, and coping skills? These will not be full assessments, but rather a check in on their current stressor levels, resiliency and coping skills.
- 3) Do you want a uniform mental health check-in and/or assessment tool to be developed specifically for this purpose? Are there any specific documentation requirements that will go to the county, beside the spreadsheet of attendees and themes of issues discussed?
  - Yes- we would want a uniform check in/assessment developed

    No other specific documentation requirements besides spreadsheet described
- 4) What is the plan of action if/when there are serious concerns in mental health functioning noted that may affect the person's ability to perform their required job duties? Is there a requirement report that must go to the county for individuals identified? (Obviously things other than mandatory reporting requirements.) Has there been a follow up plan established or will one need to be developed? How will the confidentiality of the professional be protected as well as their employment if there are concerns identified?

The intent of these sessions is to not single out employees who are experiencing difficulties, but rather to provide support and act as a proactive process in the recognition of signs of early onset of stress. The provider should have an understanding of available resources that may assist individuals with identified needs. The provider shall work with Dane County Risk Management and/or departmental designees in mandatory reporting situations.

Phone: 608-266-4131 Fax: 608-266-4425 TTY WI Relay 711



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Please acknowledge receipt of this addendum by checking the "Addendum #1" box in **Section 6 – Required Forms – Attachment A - Vendor Information** of your proposal response. If you have questions regarding this addendum, please contact me via phone or email as listed below.

Sincerely,

Megan Rogan
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