Following are general summaries of questions asked at the Mandatory Bidders’ Conference held on June 30, 2014, and their respective answers.

**Question 1:** Can co-located staff hours be counted if these are didactic hours? Regarding the hours for co-located residents’ time, should they be counted as general hours or specific hours? For example, would a didactic day of hours be included in the calculations if the resident is not actually providing clinical service to a county on that day?

**Answer:** Page 31, Section 1A(1) indicates that the co-located faculty must provide clinical supervision in the County Public Mental Health System that leads to certification by the Board of Psychiatry and Neurology. If the didactic hours meet that criterion, then yes they count; if not then they don’t count.

**Question 2:** What about resident hours? For example, if the resident is in a didactic training session but are not co-located clinical hours, are those to be included? If they are in didactic training related to their GME training hours, for instance training on a Friday, but not specific county program hours, do we include those hours? Or do we only include clinical time hours spent in a county facility?

**Answer:** Resident hours specifically refer to the time psychiatric residents/fellows spend in rotations in the Public Mental Health System (PMHS) so clinical hours would count as shown in Attachment 8 on page 23.

**Question 3:** Can the program pay for current faculty or must they be newly hired faculty?

**Answer:** The program pays for faculty that is co-located in the PMHS and that supervise residents/fellows in the PMHS. The faculty does not need to be newly hired staff.

**Question 4:** Our university takes the administration fee so the 25% Administration Rate would not go to the program. Does the remaining 75% have to be used only for residents in the PMHS or for the co-location of staff and not for books or for non-faculty staff?

**Answer:** Seventy-five percent of the funds must go to co-located faculty and you would need to discuss the Administration Rate issue with your university. The Administration Rate is to cover anything not related to co-located staff such as books or non-faculty staff. Page 32 states that the Contractor may use any or all of its Administration Rate to provide a recruitment incentive to psychiatric residents/fellows who commit to working in the PMHS upon certification by the Board of Psychiatry and Neurology.

**Question 5:** Do we need to include specific faculty information for every lecturer and supervisor or just a list of the rotations and lectures that will be taught? How specific do we need to be?

**Answer:** OSHPD staff cannot advise you on your proposal. We advise you to make your proposal as competitive as possible.
**Question 6:** Can you give examples of retention incentives we can offer to residents/fellows so that they will continue working in the PMHS?

**Answer:** Again, OSHPD cannot advise you on your proposal, as this could be deemed as OSHPD providing an unfair advantage. We advise you to consider all possibilities and submit what you consider a competitive and strong proposal.

**Question 7:** Regarding Attachment 8, the Rate Proposal Worksheet, are you looking for a comparison for all hours in a typical PGY 1 thru PGY 4 general psychiatric residency? And when determining the overall percentage of time psychiatric residents/fellows will spend in the PMHS, do we take an average of Years 1, 2, and 3?

**Answer:** You can propose to train residents/fellows during any three years of their residency or fellowship; the three years do not need to be general psychiatry years. In terms of the Rate Proposal Worksheet, you need to note a percentage of the time that you’re proposing residents/fellows will spend training in the PMHS per fiscal year and then take an overall average over the three years.