

REQUEST FOR INFORMATION FOR MOTIVATIONAL INTERVIEW TRAINING

RFI # 32901-31426 07/10/2025

1. STATEMENT OF PURPOSE:

The State of Tennessee, Department of Correction issues this Request for Information ("RFI") for the purpose of conducting training and follow-up coaching in Motivational Interviewing for probation officers and treatment providers working in Community Corrections. We appreciate your input and participation in this process.

2. BACKGROUND:

The State of Tennessee, Department of Correction (TDOC), issues this Request for Information (RFI) for the purpose of conducting training and follow-up coaching in Motivational Interviewing for probation officers and treatment providers working in Community Corrections. It is anticipated that the requested training would be conducted during three (3) consecutive days, followed by four (4) coaching sessions for each participant through a recorded interaction with an offender. The training would be offered regionally (three (3) regions), with up to three (3) training courses per region. Interested parties should provide an estimated cost for each three-day training program and each follow-up coaching session, along with the maximum number of staff who could attend each training, and the timeframe for completing all training requested. Each 3-day training course should cover the following areas:

- 1. The use of Motivational Interviewing in Probation and Parole
- 2. Setting the Stage (Attending Skills)
 - (a) Non-Verbal Communication
 - (b) Listening and Hearing
- 3. Understanding (Verbal Skills)
 - (a) Open-Ended Questions, Reflections, Affirmations, Summarizations

- (b) Empathic Responding
- (c) Creating Discrepancy
- (d) Managing Resistance
- (e) Eliciting Change Talk
- (f) Confronting Poor Behavior

The training would be delivered following the Tell – Show – Practice – Do method of learning. Participants would incrementally practice the skills during the training and be given feedback and coaching when applying the skills following the training.

3. COMMUNICATIONS:

3.1. Please submit your response to this RFI to:

Cody Tracey, Contract Administrator Department of Correction 320 6th Ave N. Nashville, TN 37243 O. 615.741.4792 C. 615.925.1083

3.2. Please feel free to contact the Department of Correction with any questions regarding this RFI. The main point of contact will be:

Chris Hansen, Assistant Commissioner of Community Supervision Department of Correction 320 6th Ave N. Nashville, TN 37243 O. 615.532.8129

3.3. Please reference RFI # 32901-31426 with all communications to this RFI.

4. RFI SCHEDULE OF EVENTS:

| EVENT | | TIME (Central Time Zone) | DATE (all dates are State business days) |
|-------|-----------------------|--------------------------------|------------------------------------------------|
| 1. | RFI Issued | | 07/10/2025 |
| 2. | RFI Response Deadline | 2 p.m. | 08/10/2025 |

5. GENERAL INFORMATION:

5.1. Please note that responding to this RFI is not a prerequisite for responding to any future solicitations related to this project and a response to this RFI will <u>not</u> create any contract rights. Responses to this RFI will become property of the State.

- 5.2. The information gathered during this RFI is part of an ongoing procurement. In order to prevent an unfair advantage among potential respondents, the RFI responses will not be available until after the completion of evaluation of any responses, proposals, or bids resulting from a Request for Qualifications, Request for Proposals, Invitation to Bid or other procurement method. In the event that the state chooses not to go further in the procurement process and responses are never evaluated, the responses to the procurement including the responses to the RFI, will be considered confidential by the State.
- 5.3. The State will not pay for any costs associated with responding to this RFI.

6. INFORMATIONAL FORMS:

The State is requesting the following information from all interested parties. Please fill out the following forms:

RFI #32901-31426 TECHNICAL INFORMATIONAL FORM

- 1. RESPONDENT LEGAL ENTITY NAME:
- 2. RESPONDENT CONTACT PERSON:

Name, Title:

Address:

Phone Number:

Email:

- BRIEF DESCRIPTION OF EXPERIENCE PROVIDING SIMILAR SCOPE OF SERVICES/PRODUCTS
- 4. Number of years experience working with criminal offenders:
- 5. Do you have advanced training in Motivational Interviewing:
- 6. What professional certifications do you have as a trainer in Motivational Interviewing:
- 7. Are you a member of the Motivational Interviewing Network of Trainers (MINT):
- 8. Number of years experience in training Motivational Interviewing to probation and/or parole officers:
- 9. Number of years experience in coaching individuals in applying Motivational Interviewing through recorded client interactions:
- 10. Are you able to adapt Motivational Interviewing withing the context of offender supervision:
- 11. Number of years experience in integrating Motivational Interviewing with other approaches to changing criminal behavior:
- 12. List of agencies / organizations where you trained staff in Motivational Interviewing:
- 13. Please attach an outline / Lesson plan of the contract and training methods you used in previous Motivational Interviewing trainings that you have conducted.

COST INFORMATIONAL FORM

- 1. Describe what pricing units you typically utilize for similar services or goods (e.g., per hour, each, etc.:
- 2. Describe the typical price range for similar services or goods

3. What is the max number of participants per training session:

ADDITIONAL CONSIDERATIONS

1. Please provide input on alternative approaches or additional things to consider that might benefit the State: