



**New York City Field Office**

**Supported Housing for Adults with Serious Mental Illness**

**Request for Proposals**

**NY/NY III**

**January, 2010**

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**Supported Housing for Adults with Serious Mental Illness  
NY/NY III  
Request for Proposals**

The New York State Office of Mental Health (OMH) announces the availability of funds for the development and operation of 250 units of Supported Housing for persons with serious mental illness in New York City under the NY/NY III initiative. Funding is available to provide rental assistance, contingency funds, and support services, to serve individuals in the target populations outlined in Section II below.

**I. Eligible Applicants**

Housing will be awarded to those agencies that have a proven track record of housing persons with serious mental illness. OMH will also consider other performance indicators such as an agency's ability to target housing to OMH priority populations, appropriate lengths of stay and transition to more independent housing.

Eligible applicants are limited to not-for-profit agencies with 501(c) (3) incorporation that have experience providing housing to individuals with a serious mental illness.

An announcement regarding the RFP will be e-mailed to all current OMH housing providers in New York City, as well as other organizations on the current mailing list (i.e. mental health advocacy agencies, local government officials, and other not-for-profit organizations).

Information about the RFP will be advertised through the Center for Urban Community Services, the Supportive Housing Network of New York, the Coalition of Behavioral Health Agencies, the Corporation for Supportive Housing, the Association for Community Living, and the OMH website.

The full RFP will be available on the [OMH website](#) and advertised through the NYS Contract Reporter.

An eligible provider applicant will be reviewed for fiscal viability and be in good standing with OMH and the NYC Department of Health and Mental Hygiene. Agencies operating OMH-certified programs in Tier 3 status at time of application are not eligible. Organizational character and competence will be assessed during the proposal review. Previous OMH actions including, but not limited to, fines, revocations of operating certificates, limitations on operating certificates and/or repeat citations impacting client care will be reviewed in scoring agency performance. Additional areas of organizational competence include: percentage of admissions from OMH Psychiatric Centers or OMH-operated residential programs; transition of residents to more independent housing; and accuracy and timeliness of CAIRS reporting. If an agency received an award of Supported Housing from a previous allocation, the agency's performance in filling the beds within the contractual time frame and with the priority population specified will be rated. In addition, reviewers will have access to CAIRS data on all OMH housing programs for the preceding twelve months. Agencies with significant vacancies that are due to a recent program opening will lose points.

## II. Target Populations

The housing and services developed through this RFP are designed for individuals with a serious mental illness meeting the eligibility criteria for NY/NY III Population A and Population B. See [Appendix A](#) for the criteria for determining Serious Mental Illness. Population A and Population B are defined as follows:

- A. Chronically homeless single adults who have a serious mental illness or who are diagnosed as mentally ill and chemically addicted (MICA). For the purposes of this RFP, a chronically homeless person is one who has spent at least one of the last two years in a homeless shelter or living on the street; (RFP targets 150 of these individuals); and
- B. Single adults who are presently living in New York State-operated psychiatric centers or State-operated community residences or transitional residences. These are individuals who could live independently in the community if provided with supported housing and who would be at risk of street or sheltered homelessness if discharged without supported housing. (RFP targets 100 of these individuals).

Individuals within these target populations who are in Assisted Outpatient Treatment (AOT) status must receive priority access to the beds.

Eligibility for NY/NY III Population A and Population B is determined by the NYC Human Resources Administration (HRA) through the submission of the HRA 2010e application. However, the housing provider must verify eligibility using the OMH criteria for determining a serious mental illness prior to making an admission. The Department of Homeless Services (DHS) monitors the placement of eligible individuals into Population A designated beds. The OMH NYC Field Office and OMH psychiatric centers monitor the placement of individuals into Population B designated beds.

Applicants for Population B beds must indicate the OMH psychiatric center from which they will accept referrals. Each of the following psychiatric centers will be allocated 20 slots to fill: Bronx PC, Creedmoor PC, South Beach PC, Manhattan PC/Rockland PC, and Kingsboro PC.

Individuals from the target populations may be placed directly into Supported Housing or providers may use this new Supported Housing capacity for persons currently residing in more service-intensive OMH-funded residential programs. The vacated units in the service intensive programs are filled with the targeted populations. Such plans are referred to as “backfill” arrangements.

The Supported Housing units developed under this RFP are permanently designated to serve the target population(s) the agency specifies in its proposal. If an agency elects to serve state operated psychiatric center (PC) discharges (Population B) in the units developed under this proposal, any vacancies that occur as these units “turn over” must also be filled with this population.

### III. Description of Supported Housing

Supported Housing provides access to affordable, independent housing and support services based on the needs and desires of the resident. Supported Housing residents may be able to live in the community with a minimum of staff intervention from the sponsoring agency. Many residents will be coping with co-occurring substance abuse disorders and be at various stages of recovery.

Services provided by the sponsoring agency will vary, depending upon the needs of the resident. Supported Housing staff will encourage and assist residents to develop natural community supports, integrate behavioral health with primary health care, use community resources, attain educational and employment goals, and pursue an individualized path towards recovery. Staff will help the individual to establish a household and facilitate the resolution of landlord-tenant issues. It is expected that the need for services provided by the sponsoring agency will decrease over time as the resident is more fully integrated in the community.

Supported Housing is extended-stay/permanent housing. Residents can remain in the housing as long as their clinical and financial circumstances allow them to meet their responsibilities as a tenant. Housing is not lost during hospitalization of moderate duration. There are no program participation requirements.

Persons who live in Supported Housing are tenants and will have the same rights and responsibilities as any other tenants in New York City. Supported Housing apartments must be integrated into generic housing and, when possible, the tenant must hold his/her own lease. Renting studio apartments, one-bedroom and two-bedroom apartments scattered throughout the community is the model. In instances where roommates are involved, the sponsoring agency must facilitate cooperative arrangements on bill payments, division of household responsibilities and other matters.

The Supported Housing model provides funds for establishing a household, rent stipends, support services funding and a contingency fund to cover client emergencies. There are no OMH licensing requirements. Sponsoring agencies must comply with the OMH Supported Housing Guidelines. In addition, all buildings in which apartments are located must have a valid Certificate of Occupancy. The OMH Field Office monitors Supported Housing and may conduct site visits. A copy of the OMH Supported Housing Guidelines is posted on the [OMH website](#) as part of this RFP and should be reviewed prior to responding to the RFP.

### IV. Operating Funding

Funding for Supported Housing is a combination of client rent payments and OMH funds. Providers will receive annual per bed funding for units developed under this initiative through an OMH contract, according to the following regional standard: **New York City: \$14,654**. This funding is for rent stipends, support services and contingency funds. Residents' contribution of 30% of net income toward the cost of rent and reasonable utility payments is not included in this funding.

Contracts will be written for a total period of five (5) years, with an initial period of one (1) year and four (4) annual renewals. OMH reserves the right to limit the first year's contract term to less than 12 months in order to align the contract dates with OMH's contract cycle.

## **V. Reporting Requirements**

Agencies must conform to all OMH fiscal reporting requirements as outlined in the "[Aid to Localities Spending Plan Guidelines](#)." These guidelines are available on the internet.

All OMH residential providers are also contractually required to maintain accurate reporting of all admissions and discharges through OMH's Child and Adult Integrated Reporting System (CAIRS).

All agencies will be subject to OMH monitoring visits and must operate in accordance with OMH guidelines.

## **VI. Submission of Proposals**

Applicants are required to submit a letter of intent postmarked by January 29, 2010. The letter of intent shall include a contact name, telephone number, e-mail address and an alternate e-mail address.

There is a mandatory bidders' conference at 2:30 p.m. on February 16, 2010 at the Office of Mental Health New York City Field Office, 330 Fifth Avenue, 9<sup>th</sup> Floor, New York, NY 10001. Only those applicants that submit a letter of intent by the deadline may attend the bidders' conference. Proposals will only be accepted from those who attend the mandatory bidders' conference.

The OMH NYC Field Office will accept complete proposals until 3:00 p.m. by March 16, 2010.

All questions must be submitted in writing by February 26, 2010. Questions received prior to February 16, 2010 will be addressed at the bidders' conference. All questions and answers will be posted on the OMH website by March 5, 2010. Submit questions in writing via e-mail to [Christine Madan](#).

## **VII. Review of Proposals**

All proposals will be assigned an identification number and logged into a database. Designated NYC field office housing staff will review each proposal for completeness. A complete proposal shall include all selection criteria and required appendices. If a proposal is not complete or it does not meet the basic qualifications for eligibility and target population as outlined in Sections I and II of the RFP, the proposal will be eliminated from further review. The applicant will be notified of the withdrawal of their proposal within 10 working days following the due date.

Proposals which meet the basic qualifications will be rated and scored according to the rating sheet, which is based on the selection criteria outlined in Section VIII of the RFP.

Proposals shall be brief (preferably no more than 20 pages) and must address each of the elements in the order presented in Section IX of the RFP. Those proposals that are not written in this order, and/or the content does not address all the elements specified for each component, will have points deducted during the scoring process.

A copy of the eligible proposals and rating sheets will be distributed for review and scoring by designated staff from the NYC Field Office Housing Unit, the OMH Central Office Bureau of Housing Development and Support, and at least one other reviewer such as the NYC Borough Coordinator, the NYC Field Office Fiscal Director, or the NYC Field Office Recipient Affairs Specialist. A representative from each OMH Psychiatric Center serving NYC will also participate in the review of proposals for the development of beds for Population B.

Each reviewer will score each proposal independently, and the scores will be averaged to determine the final score for each proposal. If an agency requests beds in two boroughs, the agency's proposal will be reviewed by the borough where the agency operates the most beds. Each final score is recorded on the data base. Any proposal not receiving a minimum score of 65 or above will be eliminated from consideration.

An agency may request beds for Population A, or B, or a combination of both; however, in the interest of spreading these resources as broadly as possible, no one provider will receive more than 20 supported housing units during the initial award process. If there are beds still to be distributed after allocations are made to all applicants with passing scores, the field office will then distribute the remaining beds in equal increments to the applicant with the highest score (not to exceed the amount requested), and work its way down the list.

For Population A, OMH will award beds, regardless of borough, to the applicant with the highest score and then work down the list until all 150 beds are allocated. For Population B, OMH will award beds to the highest scoring proposal(s) for each of the five psychiatric centers until all 100 beds are allocated.

In case of a tie in the ranking process, the points received for each tied proposal on the rating sheets will be used to break the tie. The proposal with the most total points in Section B of the rating sheets will be ranked higher. If there is a tie in Section B, points in C will be considered, and then points in A, if necessary.

An agency that receives an award that does not fill the beds within six months of receiving the first contractual payment will be subject to having the unfilled beds re-allocated to another agency or agencies. Using the same methodology as in the initial award process, the Field Office will distribute these beds in equal increments to the applicant with the highest score (not to exceed the amount requested) and work its way down the list).

All agencies will be notified in writing of their conditional award of Supported Housing units or their non-selection on or about April 16, 2010, pending approval of the Office of the State Comptroller (OSC). Once OSC approval has been secured and contracts executed, successful applicants can then proceed to locate apartments for Supported Housing. Contracts are expected to begin July 1, 2010.

An agency that does not receive an award of Supported Housing units may contact the NYC Field Office within 3 months for feedback concerning the reason(s) their proposal was not accepted.

## VIII. Selection Criteria

The New York State Office of Mental Health will review and rate each proposal. Awards will be made to the top-rated proposal(s) based on the following criteria:

- A. Population (10 points)
- B. Housing Implementation (30 points)
- C. Agency Performance (40 points)
- D. Operating Budget (20 points)

## IX. Proposal Components

Proposals must be brief (preferably no more than 20 pages) and must address each of the following elements in the following order:

Transmittal Form

Provide contact information for your agency. Indicate the number of units proposed for development by population and borough. Requests for units to house Population B individuals must indicate the OMH psychiatric center(s) it proposes to serve. The Transmittal Form is included as [Appendix B](#).

- A. Population (10 points)
  - 1. State the borough where you propose to develop this housing, the number of units to be developed and the target population to be served (as described in Section II). State your commitment to fill these units in coordination with the New York City Department of Homeless Services for the units awarded as Population A. For Population B, state your commitment to coordinate placements with OMH, the psychiatric center targeted, and the Single Point of Access (SPOA). If the agency proposes beds for Population B, state the psychiatric center(s) the beds will target. If the agency is proposing to serve the target population through a backfill arrangement, please provide the details of that arrangement.
  - 2. Describe in narrative form the characteristics of the population(s) to be served in Supported Housing and/or “backfilled” into other OMH housing. Discuss such population characteristics as likely service history, present functional level, educational level, job history, forensic history, community living skills, existence of social supports, and substance abuse history.
  - 3. Describe in narrative form the service needs of the population, specific to the characteristics described in (2) above.

B. Housing Implementation (30 points)

1. State admission criteria and procedures; include time frames. Agencies cannot reject someone for housing based solely on the past history of potential residents.
2. Describe strategies for in-reach and the plans for engagement of potential residents going into the Supported Housing and/or “backfilled” into other OMH housing. Describe the process for the development of a community re-integration strategy that will address issues of medication compliance, level of support needed, and substance use prevention for each setting. Explain the role of the referring entity in the development of this strategy.
3. Describe the services that will be provided directly by the sponsoring agency. Identify community-based resources that will be available to recipients through referrals and/or linkage agreements. Indicate how these services support the residents’ recovery from mental illness and substance abuse. Describe how all services will take into account the cultural and linguistic needs of the individual.
4. Explain recipient choice related to selecting an apartment and household furnishings. Note if the units will be single or shared apartments. If an individual will share an apartment, explain how recipients will be matched and how roommate issues will be resolved.
5. Supported Housing is considered “extended-stay” housing. Describe how this key principle will be reflected in the development and on-going operation of these units.
6. Include the agency’s policy regarding a recipient’s desire to reunite with children or live with a spouse or significant other while remaining in Supported Housing.
7. Provide a staffing plan. Note if these proposed beds will be part of the agency’s current Supported Housing, and if so, explain the impact on staffing ratios. Include a description of the roles and responsibilities of each staff member. Indicate the skills and experience each staff member will be expected to have. Describe initial and ongoing staff training and supervision. Describe the use of peer to peer services and supports that will be available.
8. Explain the lease arrangement. Attach a copy of the proposed lease or sublease agreement. For sublease arrangements, provide the rent collection and rent arrears procedure. Describe the supports provided by the agency to appropriately ensure rent payment is made on time by recipients.
9. Describe recipient assessment procedures and the development of a person-centered, strengths-based support plan. Attach a copy of any recipient assessment tools and a sample support plan.

10. Describe the process of support planning that will incorporate strategies to engage and motivate clients toward their recovery and provide an appropriate response to clients who are at risk of relapsing and/or begin refusing their medications. Discuss methods for ensuring integrated services for residents with co-occurring substance abuse disorder. Describe how residents will be assisted when a mental illness or substance abuse relapse occurs.
11. Provide the policy and procedure for terminating tenancy. Include a description of the range of interventions that would be used to prevent someone from losing their housing. In addition, explain how an individual may “graduate” from Supported Housing to permanent, independent housing. Describe the resources the agency will use to help someone achieve independence.
12. For agencies “backfilling” to service intensive settings, provide discharge planning procedures and explain how the agency will create a culture of transition to ensure that residents are engaged in a process of moving towards more independent housing.
13. Attach the grievance procedure that will be provided to residents. Explain how recipients are empowered to provide input into Supported Housing practice on a formal and informal basis.
14. Explain the process for handling client emergencies after hours and on weekends.
15. Provide a proposed time line for establishing the Supported Housing units and initial tenancy.

C. Agency Performance (40 points)

**For Agencies with an OMH Housing Contract**

1. Depict an actual person who has a serious mental illness and has recently been served in your housing. Illustrate the challenges posed and how your agency addressed these challenges. Describe in detail how you supported this person in his or her recovery and transition toward independence. Please limit your response to one page. (15 points)
2. If you are a current OMH housing provider, explain how your housing responds to OMH priorities. Note your agency’s performance in targeting OMH priority populations, ability to transition individuals into more independent housing, occupancy levels, and experience providing recovery-oriented housing. Base your response using the most recently published Residential Program Indicators (RPI) Report. The RPI Report will be available at the Bidder’s Conference. (15 points)
3. Current OMH housing providers will also be evaluated on the timeliness and accuracy of CAIRS reporting, willingness to accept challenging clients, willingness to accept clients under an AOT order, performance on certification visits, budgetary compliance, participation in SPOA, responsiveness to complaints, and participation in residential provider meetings. (10 points)

**For Agencies without an OMH Housing Contract**

1. Depict an actual person who has a serious mental illness and has recently been served in your housing. Illustrate the challenges posed and how your agency addressed these challenges. Describe in detail how you supported this person in his or her recovery and transition toward independence. Please limit your response to one page. (15 points)
2. Submit a copy of your agency's audited financial statement for 2007 or 2008. This document will be reviewed to rate your agency's fiscal viability. (15 points)
3. Complete the Reference Form ([Appendix D](#)). This form requests information regarding contracts currently monitored by all local, state and/or federal government agencies. It will be used to rate your agency's experience and performance with other funders. (10 points)

**D. Proposed Operating Budget (20 points)**

Describe how client and, when applicable, non-client rent will be calculated. Explain the use of contingency funds. Highlight other sources of funding, if any.

Attach a one-and two-year operational budget. Include start-up costs in Year 1 of the budget and assume a full year of operating funds ([see Appendix C](#)). The start-up should include the amount needed for the establishment of the units. This includes broker fees, security deposits, furniture, moving expenses and other expenses. The annual budget for Year 2 should include the cost of staffing, rent stipends, and contingency funds. Show sources of income including client rent and OMH funding. List staff by position, FTE, and salary.

**X. Timeline**

Please note the following timetable for this RFP:

RFP Released	1/19/10
Letters of Intent Due	1/29/10
Mandatory Bidders' Conference (2:30-4)	2/16/10
Questions Due	2/26/10
Questions and Answers Posted	3/5/10
Proposals Due	3/16/10
Conditional Awards Made on or Around	4/16/10

## **XI. Directions for Submission of Supported Housing Proposals**

Submit six (6) copies of the full proposal via mail or hand delivery. Faxed or e-mailed proposals will not be accepted. Each copy must have a Transmittal Form ([see Appendix B](#)). Four copies must be received at the NYC Field Office by 3:00 pm on March 16, 2010 addressed as follows:

[Christine Madan](#), Deputy Director  
New York State Office of Mental Health  
New York City Field Office  
330 Fifth Avenue, 9th Floor  
New York, NY 10001-3101

**and**

Send two (2) copies of the full proposal each with Transmittal Form, postmarked by March 16, 2010 to:

[Michael R. Newman](#), Director  
Bureau of Housing Development and Support  
New York State Office of Mental Health  
44 Holland Avenue, 7th Floor  
Albany, NY 12229

Questions concerning the Supported Housing program and fiscal issues should be addressed in writing via e-mail to [Ms. Madan](#). All questions and answers will be posted on OMH's website.

## **XII. Appendices**

[Appendix A: Criteria for Determining Serious Mental Illness](#)

[Appendix B: Transmittal Form](#)

[Appendix C: Budget Form](#)

[Appendix D: Agency Reference Form](#)