

New York State Office of Mental Health



**SUPPORTED HOUSING FOR ADULTS WITH SERIOUS MENTAL ILLNESS WHO ARE OMH
PSYCHIATRIC CENTER LONG TERM STAYERS**

Request For Proposals

Long Island Field Office

April 2011

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1 Introduction and Background

1.1 Purpose of the Request for Proposal

The New York State Office of Mental Health (OMH) announces this Request for Proposals (RFP) for the development and operation of up to 50 units of Supported Housing for persons residing in OMH psychiatric centers (PC) or OMH transitional housing programs serving Nassau and Suffolk County residents. These are individuals with serious mental illness who have resided in an OMH psychiatric center and/or OMH transitional housing program for one year or longer. If a PC has no other individuals on their inpatient list who can be discharged who meet the Long Stay criteria of one year, they can use the designated Long Stay units to facilitate the discharge of individuals who have been in the PC for at least six months and are in danger of becoming Long Stay. All housing will be sited in Nassau and/or Suffolk County. Please see Section 5 for more details on eligibility for the housing.

Agencies awarded contracts will be required to comply with all requirement criteria as described in section 5.3 of this RFP.

1.2 Availability of the RFP

The full RFP will be available on the OMH website (<http://www.omh.ny.gov/omhweb/rfp/>) and advertised through the NYS Contract Reporter. An announcement regarding the RFP will be e-mailed to all current OMH housing agencies, as well as other organizations on OMH's current mailing list (i.e., mental health advocacy agencies, local government officials, and other not-for-profit organizations). This includes the Center for Urban Community Services, Supportive Housing Network of New York, Coalition of Behavioral Health Agencies, Corporation for Supportive Housing, and Association for Community Living.

2 Proposal Submissions

2.1 Letter of Intent

Agencies interested in responding to the Request for Proposals are required to submit a Letter of Intent to Bid to the OMH Issuing Officer by April 27, 2011. The Letter of Intent to Bid shall be non-binding.

Please mail the letter of intent to the Issuing Officer:

Laurie Danforth, Contract Management Specialist 1
New York State Office of Mental Health
Contracts and Claims
44 Holland Avenue - 7th Floor
Albany, NY 12229
Attn: Letter of Intent

2.2 Designated Contact/Issuing Officer

OMH has assigned an Issuing Officer for this project pursuant to State Finance Law §§ 139-j and 139-k. The Issuing Officer or a designee shall be the sole point of

contact regarding the RFP from the date of issuance of the RFP until the issuance of the Notice of Conditional Award. To avoid violating State Finance Law or being deemed non-responsive, a bidder is restricted from making contact with any other personnel of OMH regarding the RFP. Certain findings of non-responsibility can result in rejection for a contract award. The Issuing Officer for this RFP is:

[Laurie Danforth](#)

Contract Management Specialist 1
New York State Office of Mental Health
Contracts and Claims
44 Holland Avenue - 7th Floor
Albany, NY 12229

2.3 Key Events/Timeline

RFP Release Date	April 13, 2011
Letter of Intent Due	April 27, 2011
Questions Due	May 13, 2011
Questions Posted on Website	May 20, 2011
Proposals Due	June 3, 2011
Award Notification	July 22, 2011
Anticipated Start Date	October 1, 2011

2.4 RFP Questions and Clarifications

All questions or requests for clarification concerning the RFP shall be submitted in writing to the Issuing Officer by fax at (518) 402-2529 or by [e-mail](#) by May 13, 2011. The questions and official answers will be posted on the OMH website by May 20, 2011 and will be limited to addressing only those questions submitted by the deadline. No questions will be answered by telephone or in person.

2.5 Addenda to Request for Proposals

It is the bidder's responsibility to periodically review the OMH website to learn of revisions or addendums to this RFP. Changes to the RFP will also be posted in the NYS Contract Reporter. No other notification will be given.

2.6 Eligible Agencies

Agencies eligible to respond to this RFP are: (1) not-for-profit agencies with 501(c)(3) incorporation that have experience providing housing and mental health support services to individuals with serious mental illness, and who receive funding from OMH or the local government unit for those programs.

2.7 Disqualification Factors

Following the opening of bids, a preliminary review of all proposals will be conducted by the Issuing Officer or a designee to review each proposal's submission for completeness (as defined in Section 2.8) and verify that all eligibility criteria have been met. Proposals that do not meet basic participation standards will be disqualified, specifically:

- Proposals that do not comply with the RFP required format as defined in Section 2.8; and
- Proposals from current providers of OMH licensed programs that are in Tier III status.

2.8 Instructions for Bid Submission and Required Format

Each proposal is required to contain:

1. Agency Transmittal Form ([Appendix A](#));
2. Proposal Narrative;
3. Operating Budget ([Appendix B](#));
4. Budget Narrative ([Appendix B1](#)).

The Proposal Narrative should be concise (no more than 20 pages, not including attachments). The Operating Budget and Budget Narrative ([Appendix B](#) and [B1](#)) are separate documentations that appear in the RFP section of the OMH website and can be downloaded in Excel or PDF format. Bidders must **not** substitute their own budget format. **Failure to use the provided Operating Budget and Budget Narrative formats may result in disqualification for non-responsiveness.**

Bidders must submit six (6) signed copies of the full proposal package by mail or hand delivery to be received by close of business on June 3, 2011. Bidders should allow a sufficient mail delivery period to ensure timely arrival of their proposals. Proposals cannot be submitted via e-mail or facsimile. Any proposal received after the deadline will be reviewed solely at the discretion of OMH.

2.9 Packaging of RFP Responses

Proposals should be sealed in an envelope or box and sent to:

Laurie Danforth, Contract Management Specialist 1
New York State Office of Mental Health
Contracts and Claims
44 Holland Avenue - 7th Floor
Albany, NY 12229
Attn: RFP Supported Housing For Long Stay Individuals

3 Administrative Information

3.1 Term of Contracts

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, dependent upon appropriated funding. OMH reserves the right to change the contract term for the first or second year so that it is more or less than 12 months in order to align the contract dates with OMH's Long Island contract cycle (January 1 through December 31).

If an agency not previously awarded a contract as part of the original RFP evaluation is awarded beds through the reallocation process (see Section 4.3.2), the five (5) year contract term will commence on the award date. OMH reserves the right to change the first year's contract term, as stated above.

The OMH Direct Contract Form is available in [Appendix C](#).

3.2 Reserved Rights

OMH reserves the right to:

- Reject any or all proposals received in response to the RFP that are deemed non-responsive or do not meet the minimum requirements;
- Withdraw the RFP at anytime, at the agency's sole discretion;
- Make an award under the RFP in whole or in part;
- Disqualify a bidder whose conduct fails to conform to the requirements of the RFP;
- Seek clarifications of proposals for the purposes of assuring a full understanding of the responsiveness to the solicitation requirements;
- Use proposal information obtained through the state's investigation of a bidder's qualifications, experience, ability or financial standing, and any material or information submitted by the bidder in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP;
- Prior to the bid opening, direct bidders to submit proposal modifications addressing subsequent RFP amendments;
- Prior to the bid opening, amend the RFP specifications to correct errors or oversight, supply additional information, or extend any of the scheduled dates or requirements and provide notification to potential bidders via the OMH website and the New York State (NYS) Contract Reporter;
- Eliminate any non-material specifications that cannot be complied with by all of the prospective bidders;

- Waive any requirements that are not material;
- Negotiate any aspect of the proposal in order to assure that the final agreement meets OMH objectives;
- Conduct contract negotiations with the next responsible bidder, should the agency be unsuccessful in negotiating with the selected bidder;
- Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of a bidder's proposal and/or to determine a bidder's compliance with the requirements of the solicitation;
- Conduct a readiness review of each selected bidder prior to the execution of the contract as set forth in Section 4.4;
- Cancel or modify contracts due to the insufficiency of appropriations;

3.3 Debriefing

OMH will issue award and non-award notifications to all bidders. Bidders that do not receive an award may request a debriefing in writing, regarding the reasons that their own proposal was not selected or disqualified, within 15 business days of the dated OMH notification letter. Written debriefing requests may be sent to the Designated Contact, as defined in Section 2.2 of this RFP.

3.4 Protest Procedure

Protests of an award decision must be filed within twenty (20) business days after the date of a non award letter, or 5 business days following the date of a debriefing meeting. The Commissioner or his designee will review the matter and issue a written decision within twenty (20) business days of the receipt of a protest. All protests must be in writing and must clearly and fully state the legal and factual grounds for the protest and include all relevant documentation. The written documentation should clearly state reference to the RFP title and due date. Such protests must be submitted by mail to:

**NYS Office of Mental Health
Commissioner Michael F. Hogan, Ph.D.
44 Holland Avenue
Albany, NY 12229**

4 Evaluation Factors for Awards

4.1 Evaluation Criteria

All proposals will be rated and ranked in order of highest score based on an evaluation of each bidder's written submission as well as OMH internal reviews.

The Evaluation will apply points in the following categories as defined in Section 5.5:

Technical Evaluation	
Population	10 points
Housing Implementation	30 points
Agency Performance: <ul style="list-style-type: none">• Bidder's Narrative• OMH Internal Reviews	40 points
Financial Assessment	20 points
Total Proposal Points	100 points

For a detailed description of evaluation criteria for the Technical Evaluation and the Financial Assessment components, see Section 5.5 (Proposal Narrative).

The OMH internal review will consist of an assessment of the bidder's organizational competency. This will include a review of the bidder's residential programs over the past two years to assess occupancy rates and admissions from priority populations.

4.2 Method for Evaluating Proposals

All proposals will be assigned an identification number and logged into a database. Designated staff will review each proposal for completeness and verify that all eligibility criteria are met. A complete proposal shall include all required components as described in Section 2.8. If a proposal is not complete or does not meet the basic eligibility and participation standards as outlined in Sections 2.6 and 2.7, the proposal will be eliminated from further review. The agency will be notified of the rejection of its proposal within 15 business days from the proposal due date.

Evaluation of proposals will be conducted in two parts: Technical Evaluation and Financial Assessment. An independent evaluator will compute the Financial Assessment score using a weighted formula, and a committee consisting of at least three technical evaluators will complete the Technical Evaluation.

Each technical evaluator will independently review the technical portion of each proposal and compute a technical score. Evaluators of the Technical Evaluation component may then meet to provide clarity or review any questions an evaluator has about a particular section of a proposal. Following any such discussion, evaluators may independently revise their original score in any section, and will note changes on the evaluation sheet. Once completed, final Technical Evaluation scores will then be recalculated, averaged, and applied to the final Financial Assessment score to arrive at final scores. Any proposal not receiving a minimum average score of 65 will be eliminated from consideration.

OMH will enter negotiations with the vendor with the highest averaged score. In the event of a tie score between two proposals, the applicant with the highest score on the Housing Implementation section of the Technical Evaluation will receive a conditional award, based on successful negotiations.

4.3 Process for Awarding Contracts

4.3.1 Initial Awards and Allocations

Proposals will be rated and ranked in order of highest to lowest score. Awards will be made based on score until all the beds for the psychiatric center catchment area have been allocated.

If there are beds still to be distributed after allocations are made to all applicants with passing scores, the remaining beds will then be distributed in equal increments to the extent possible, to the applicant with the highest score, not to exceed the maximum number of beds requested by the agency and work its way down the list.

4.3.2 Reallocation Process

There are a number of factors that may result in some or all of the Supported Housing units allocated to one or more contractors being reallocated. This includes, but is not limited to, failure to develop the housing within the approved time frame, inability to find Supported Housing apartments and retention of clients in the housing. A contractor will be provided notification if any or all of the units allocated to it are to be reallocated to another agency.

To reallocate beds, OMH will go to the next highest ranked proposal that did not get an initial award of beds. This agency will be offered all the available beds, not to exceed their original requested amount. If all agencies with passing scores received an initial award of beds, OMH will go back to the top of the list. An award of beds will be offered to the highest ranked agency. If the agency does not accept the award, OMH will work its way down the list.

4.4 Award Notification

At the conclusion of the procurement, notification will be sent to all successful and non-successful bidders. All awards are subject to approval by the NYS Attorney General and the Office of State Comptroller before an operating contract can be finalized.

OMH reserves the right to conduct a readiness review of the selected bidder prior to the execution of the contract. The purpose of this review is to verify that the bidder is able to comply with all participation standards and meets the conditions detailed in its proposal.

Upon receipt of an approved fully executed contract from NYS, contractors can begin to locate apartments appropriate for Supported Housing.

5 Scope of Work

5.1 Introduction

This RFP is issued to provide rental assistance, contingency funds, and housing case management services for up to 50 individuals that meet the Psychiatric Center (PC) Long Stay criteria outlined below. Agencies will be selected to develop housing units within Nassau and Suffolk County.

The housing and services developed through this RFP are designated for individuals meeting the eligibility criteria in section 1.1 of this RFP.

Within this group, individuals with an Assisted Outpatient Treatment (AOT) order are eligible for priority access. See Addenda A for the criteria for determining Serious Mental Illness.

Agencies must work with the Psychiatric Center (PC) to target the appropriate housing for that particular PC's priority Long Stay population, i.e., provide in-reach, develop coordinated discharge/admission plans with PC staff, and identify/provide services and supports to ensure successful transition into the community. Referrals may be sent directly from the PC or through the Single Point of Access (SPA).

PC Long Stay individuals 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 then targeted to the population detailed above. Such plans are referred to as "backfill" arrangements. If an agency intends to backfill, preference will be given to those agencies that have a continuum of housing and/or agreements with other agencies for filling the beds with the target population.

Agencies planning backfill arrangements with other OMH housing providers shall submit a Memorandum of Understanding that explains the agreement with each agency, i.e., number of residents identified to move into the Supported Housing, and agreement to backfill the vacancies with referrals from the target population.

The Supported Housing units developed under this RFP are permanently designated to serve the PC Long Stay individuals. This means for units developed under this proposal, any vacancies that occur as these units "turn over" must also be filled with this population.

If the agency chooses to backfill, and the individual in the backfill bed moves to another level of OMH housing, the agency is not required to fill the vacated bed with another Long Stay individual. The "PC Long Stay" designation will remain with the individual as long as they remain in OMH housing. The contract agency is required to fill the backfill bed with a PC Long Stay individual if a vacancy occurs under one of the following conditions: 1) the client is discharged to an acute care hospital or OMH psychiatric center; or 2) the client is discharged within the first 6 months of admission for any reason.

The LI Field Office or designee must approve all referrals into the Supported Housing and/or the backfill bed prior to admission.

5.2 Objectives and Responsibilities

Supported Housing is “extended stay/long term” housing. Residents of Supported Housing can remain in this housing as long as their clinical and financial circumstances render them eligible and allow them to meet their responsibilities as a tenant. Supported Housing is not lost during acute hospitalization (90 days or less), and there are no program attendance requirements. Residents of Supported Housing are tenants and will have the same rights and responsibilities as any other tenant in Nassau or Suffolk County.

Supported Housing provides affordable, independent housing and access to community based support services based on the needs and desires of the resident. Residents of Supported Housing may be able to live in the community with a minimum of staff intervention from the contract agency. Others may need the provision of additional supports, such as an Assertive Community Treatment (ACT) team and intensive or supportive case management services. Some residents may be coping with co-occurring substance abuse disorders and be at various stages of recovery.

Services provided by the contractor will vary, depending upon the needs of the resident. Supported Housing staff will encourage and assist residents to develop natural community supports, use community resources and pursue an individualized path towards recovery in securing necessary supports. 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 contractor and other agencies will decrease over time as integration in the community improves and the residents make progress in their recovery.

When possible, tenants should hold their own leases. Renting studio, one-bedroom and two-bedroom apartments scattered throughout the community is the norm. In instances where roommates are involved, the agency must facilitate cooperative arrangements on bill payments, division of household responsibilities and other matters.

Supported Housing is integrated housing that consists of scattered site apartments located in multiple buildings throughout the community. The goal is to provide individuals with a setting in which they live in their own apartments and are able to interact with non-disabled persons to the fullest extent possible.

There is no capital funding associated with this initiative to purchase or renovate an existing apartment building.

A contractor may use other government funding or agency funds to purchase and/or renovate a building. In this instance, contractors must be able to document that funding is adequate to pay the debt service, ongoing building maintenance and repairs. Contractors must consult with the OMH Long Island Field Office Housing Unit before purchasing a site or entering into a long-term lease.

Supported Housing funding provides rent stipends, housing case management services, and contingency funds, as specified in the Supported Housing Guidelines. There are no OMH licensing requirements. Contractors must comply with the OMH Supported Housing Guidelines. A copy of the OMH Supported Housing Guidelines is posted on OMH's website at <http://www.omh.ny.gov/omhweb/rfp/> as part of this RFP and should be reviewed prior to responding to the RFP.

In addition, all buildings in which apartments are located must have a valid Certificate of Occupancy. The OMH Long Island Field Office monitors Supported Housing and conducts site visits to review compliance with the Guidelines.

5.3 Reporting Requirements

Agencies that receive an allocation of housing resources under this RFP must agree to ensure that these units will only be filled with individuals residing in an OMH Psychiatric Center or OMH operated residential program who meet the eligibility criteria.

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 at <http://www.omh.ny.gov/omhweb/spguidelines/>.

Agencies awarded a Supported Housing contract will be required to maintain accurate reporting of all admissions and discharges through OMH's Child and Adult Integrated Reporting System (CAIRS) and comply with any requirements OMH may subsequently develop to ensure compliance. They will be required to participate in the Single Point of Access.

5.4 Operating Funding

Funding for scattered site Supported Housing is a combination of client rent payments and OMH funds. Residents of Supported Housing are required to pay 30 percent of their net income for rent and reasonable utilities. Contractors will receive annual funding for units developed under this initiative through an OMH contract at the current Long Island Supported Housing rate (currently \$14,493 per unit). This funding is for rent stipends, housing case management services and contingency funds, as specified in the Supported Housing Guidelines.

5.5 Proposal Narrative

When submitting proposals for funding under this RFP, the narrative must address all of the components listed below, in the following order:

5.5.1 Population

1. State the PC you are targeting, the county where you are proposing to develop the Supported Housing, and the number of units to be developed for each PC. State your commitment to filling these units in coordination with the LI Field Office, the Single Point of Access (SPA), along with the state psychiatric center that is being targeted. If the agency is proposing to serve the target population through a backfill arrangement, provide the details of that arrangement. Agencies without a continuum of housing that wish to backfill may

partner with an OMH licensed housing provider. Submit a Memorandum of Understanding (MOU) between the agencies that will participate in this arrangement.

2. Describe in narrative form the characteristics of the PC Long Stay population to be served in Supported Housing and/or “backfilled” into service intensive programs. Discuss such population characteristics as likely service history, present functional level, educational level, job history, forensic history, community living skills, existence of social supports, substance abuse history, all in the context of individuals that have been hospitalized for over a year, and in some cases, numerous years.
3. Describe in narrative form the service needs of the Long Stay population, specific to the characteristics described in (2) above. Describe the approach that will be used to ensure the successful transition of PC Long Stay individuals and their retention in the community.

5.5.2 Housing Implementation

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 to the OMH Psychiatric Center and the plans for engagement of potential residents going into the Supported Housing and/or “backfilled” into service intensive settings. Describe the process for the development of an individualized community re-integration strategy that will address issues of medication compliance, skill development, and substance use prevention. Explain the role of the PC in 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 the 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 towards 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 disorders. 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.

5.5.3 Agency Performance

Describe the agency's experience and approach in providing recovery-oriented housing and/or mental health services to persons with mental illness, including helping these individuals achieve their rehabilitation and recovery goals.

Current licensed OMH housing agencies must note their agency's ability to target OMH priority populations, average length of stay and ability to transition individuals into independent housing. OMH Supported Housing agencies should indicate occupancy levels and ability to accept OMH priority populations. Base your response on the most recently published Residential Program Indicators Report. Also, please note that agencies will be evaluated on the timeliness of CAIRS reporting.

Note: The OMH internal review will consist of an assessment of the bidder's organizational competency. This will include a review of the bidder's residential programs over the past two years. 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.

5.5.4 Financial Assessment

Describe how client and, when applicable, non-client rent will be calculated. Explain how your agency plans to utilize contingency funds. Highlight other sources of funding, if any. Describe how your agency manages its operating budget.

Attach an operational budget. Include start-up costs in Year 1 of the budget and assume a full year of operating funds (see [Appendix B](#)). The start-up should include the amount needed for the establishment of the units, including cost of staffing, broker fees, security deposits, furniture, moving expenses and other expenses. Show sources of income including client "rent" and OMH funding. Bidders should list staff by position, full-time equivalence (FTE), and salary.

Also, bidders must complete a Budget Narrative which should include the following:

- detailed expense components that make up the total operating expenses;

- the calculation or logic that supports the budgeted value of each category;
- description of how salaries are adequate to attract and retain qualified employees; and
- a description of how apartment rental assumptions are calculated within the geographic area in which they are located.

Use the Operating Budget ([Appendix B](#)) and the Budget Narrative ([Appendix B1](#)) to submit with your proposal. The Operating Budget ([Appendix B](#)) is a separate document on the RFP section of the OMH website and can be downloaded in PDF format. Do **not** substitute your own budget format. Failure to complete the Operating Budget using the correct form may be cause to reject your proposal for non-responsiveness.