



**Adult Forensic ACT – 4 New teams
Request for Proposals 2023**

Questions & Answers

Q1. Would an application to upgrade our current team be acceptable, or is OMH's intention to develop a second Forensic ACT team in Monroe County?

A1. OMH will make an award to a new team and will not allow an expansion of a currently licensed team.

Q2. Will letters of commitment or letters of support from partners and/or references be considered in the review of proposal materials?

A2. A letter of support will not be considered in the scoring for the RFP review process.

Q3. In speaking with local SPOA for ACT, they suggested that OMH should be able to instruct applicants if we should expect to be working within a catchment area OR if we should plan to implement across the whole county. What is OMH's expectation for this F-ACT team (to serve 1+ catchment areas, or the whole county)?

A3. It is expected the awarded ACT team for a specific county/borough will meet the needs of that county/borough.

Q4. Does OMH expect applicants for this RFP to complete workplans to submit with our application in Grants Gateway?

A4. Yes, the workplan must be submitted with the Grants Gateway application. It is not a scored component.

Q5. Past applications through Grants Gateway have allowed applicants to attached a file if a response exceeded the 4000-character limit of a prompt. However, Page 28 of the RFA suggests that, "Agencies should use only the space available in Grants Gateway." Can applicants still attach detailed responses, if needed, or is OMH prohibiting applicants from attaching detailed responses in the event they exceed the character limit for a given prompt?

A5. Answers must not exceed the character limit for this RFP, no attachments are allowed.

Q6. What are the parameters of costs for 1) Start-up costs; and 2) Transition/ramp up costs? For example, what costs are eligible? Are any costs ineligible (i.e. van and/or transportation costs)?

A6. Start-up costs includes costs that an organization would need for startup, such as phones, computers, desk and chairs, office furniture. Transition/ramp-up costs cover the costs as you start up the team. You will only be serving as many individuals as you have admitted over first few months and won't be at full capacity billing and revenue. Ramp-up helps cover costs to make it through the months where agency may not have revenue coming in through Medicaid. Start-up costs may include, but are not limited to, vehicle, computers, iPads, printer, phone system and mobile devices, office furniture, office supplies, med storage, recruitment costs, utilities, insurance, or electronic health record or reporting capabilities. Start-up costs may not be used for capital expenditures.

Q7. Will there be any collaborations set up with housing providers to prioritize this population?

A7. For this 4-team Forensic ACT RFP there will be no collaborations or partnerships that are facilitated by NYS OMH or DOHMH with housing providers.

Q8. Will there be any formal training on implementing the RNR model?

A8. Training through the ACT Institute and CUCS Academy for Justice Informed Practices are required for the Forensic ACT Team. Any trainings not available through these platforms should be provided or arranged by the awarded agency.

Q9. Will there be further information put out specific to the experience or role that the criminal justice specialist?

A9. There will be further guidance in the forthcoming Forensic ACT Program Guidance. It is recommended that each Criminal Justice Specialist should be knowledgeable and/or experienced in the field of criminal justice or have experience serving the SMI population who are justice involved.

The 68-size capacity team is required to have at least one of the two Criminal Justice Specialists as an LPHA. The education and experience of the second Criminal Justice Specialist will be left to the discretion of the agency.

Q10. Will the ACT Institute add trainings specific to working with the Forensic ACT population?

A10. At this time there are no specific Forensic ACT trainings but there could be some developed in the future. The Forensic ACT staff will be required to complete the ACT Institute trainings, in addition to the CUCS Academy for Justice-Informed Practice.

Q11. For the CUCS academy, some of the trainings are very general and informative. However, the presenters are from the NYC area and in a good amount of the trainings, there was time spent reviewing specific programs in NYC. Will there be any added information to the trainings for the WNY area teams?

A11. The CUCS Academy for Justice-Informed Practice core curriculum, particularly the online content, is available and relevant to providers state-wide. Efforts are underway to tailor the content such that the Upstate providers, including Western New York, are appropriately supported through identification of regional resources and challenges, and through additional site-specific training as needed.

Q12. For the additional assessments required for this team, for example criminogenic needs assessment, etc. will there be recommended assessments provided or will it be up to each team to find assessments that meet the requirements?

A12. There will be recommended assessments in the forthcoming Forensic ACT Program Guidance.

Q13. Are PAR documents required with the proposal submission or will those be submitted post-award by selected providers?

A13. PAR documents will only be required for agencies that have been issued an award to develop a Forensic ACT team.

Q14. Is OMH requiring specific risk screening/assessment tools and if so which ones? Or can applicants propose specific tools for OMH consideration?

A14. There will be recommended assessments in the forthcoming Forensic ACT Program Guidance. Applicants can propose specific tools for OMH consideration.

Q15. The Budget Template (Appendix B) does not include enough rows in the Itemized Staff Plan for all the required and discretionary staff roles. Only 13 rows are provided, but we will need at least several more rows to reflect both the full staffing (14 roles) plus relevant discretionary / project leadership staffing. Can OMH provide an updated template with a minimum of five (5) extra rows in that Itemized Staff Plan section?

A15. Updated budget templates with additional rows have been added to the OMH website under this procurement. Please use the updated template when submitting a proposal.
<https://omh.ny.gov/omhweb/rfp/2023/forensic/index.html>

Q16. In response to the final sentence of the 6.4c prompt, would OMH like applicants to directly retrieve, state, and self-evaluate/describe (within this 4,000-character response) the applicants' understanding of their CAIRS completion rates and CAIRS length of stay averages, and/or is OMH simply informing applicants that OMH/reviewers will retrieve, review, and evaluate these figures and metrics, as part of OMH's due-diligence and scoring of this section)?

A16. RFP Applicants are being asked to evaluate the identified CAIRS data points from the RFP question 6.4c within the 4,000-character response limit. OMH will also be retrieving the same CAIRS data that the team is being asked to self-evaluate.

Q17. Is it acceptable to for applicants to plan up to 18 months from start-state to reach full capacity and utilization for a 68-slot ACT team (or is OMH expecting/requiring this milestone to be reached within a shorter timeframe, such as 12 months)? Our experience in the area suggests an average of 4 new clients per month to be more realistic (which would entail ~17 months to reach full capacity).

A17. Forensic ACT Teams will not be expected to reach full capacity within one year of receiving their operating certificate. Forensic ACT Teams should anticipate 4 – 6 referrals per month, per ACT Program Guidelines, Section 5.4: *The number of admissions per month should not exceed the range of four (4) to six (6), unless otherwise approved by the State, particularly for newly licensed teams that are attempting to fill up to full capacity. Consideration should be given to the fact that, during the weeks following admission, individuals will need highly intensive services that requires significant initial effort to complete the assessment and begin addressing many unmet needs (e.g., housing, entitlements, medical care and stabilizing psychiatric symptoms).*

Q18. Can applicants budget for a gradually phased-in staffing pattern during the first 12 to 18 months, or if not, by what month does OMH expect the Forensic ACT team to be operating at full-staff capacity?

A18. Staff should be gradually phased in throughout the ramp-up period. 12-18 months is appropriate for the total staffing up for Forensic ACT Teams. During this period, teams should maintain a 6:1 participant to staff ratio.

Q19. The Budget Template does not allow for partial-year (i.e., ramp up) roles in the Itemized Staff Plan. Only Salary OR FTE can be adjusted, but not duration within the 12-month period. We can adjust the salary within the Salary cell (ex: \$72,000 * 12 / 9 would demonstrate a 9-month role with a \$72,000 salary but only display \$54,000 in the cell) OR keep the full salary and FTE without adjustment to ramp-up time in role in Year 1, which has been the case in past grants from OMH. Does OMH have a preference about how to reflect ramp-up expectations of roles in Year 1, for Itemized Staff Plan?

A19. Year one should be from the effective date of the contract to the end of the local fiscal year of the provider. For example, if the contract effective date is 1/1/24 and they are an upstate provider the first year would be 1/1/2024 - 12/31/24. If they are a downstate provider, it would be 1/1/24 – 6/30/24.

The applicants should submit as much information as possible. It is suggested that applicants include the additional contract yearly amounts that may not fit in the budget template in the budget narrative section of the RFP.