



**Office of  
Mental Health**

**Safe Options Support (SOS) Program:  
Young Adult CTI Teams**

**New York City**

**Request for Proposals**

**Grant Procurements**

**(On-Line Submission Required)**

**Statewide Financial System (SFS) Identifier – OMH108**

**March 2024**



## Table of Contents

<b>1. Introduction and Background</b> .....	<b>1</b>
1.1 Purpose of the Request for Proposal .....	1
1.2 Target Population/Eligibility Criteria .....	2
1.3 Bidders Conference .....	3
<b>2 Proposal Submissions</b> .....	<b>3</b>
2.1 Designated Contact/Issuing Officer .....	3
2.2 Key Events/Timeline .....	4
2.3 Disposition of Proposals .....	4
2.4 Eligible Agencies .....	4
2.5 RFP Questions and Clarifications .....	5
2.6 Addenda to Request for Proposals .....	5
2.7 Disqualification Factors .....	5
2.8 SFS Prequalification Requirement .....	5
2.9 Vendor Registration, Prequalification and Training Resources for Not-for-Profits .....	6
<b>3 Administrative Information</b> .....	<b>8</b>
3.1 Reserved Rights .....	8
3.2 Debriefing .....	9
3.3 Protests Related to the Solicitation Process .....	10
3.4 Term of Contracts .....	10
3.5 Minority and Women Owned Business Enterprises .....	10
3.6 Participation Opportunities for New York State Certified Service-Disabled Veteran Owned Businesses .....	12
3.7 Equal Opportunity Employment .....	12
3.8 Sexual Harrassment Prevention Certification .....	13
3.9 Bid Response .....	13
3.10 Acceptance of Terms and Conditions .....	14
3.11 Freedom of Information Requirements .....	14
3.12 NYS and OMH Policies .....	14
<b>4 Evaluation Factors for Awards</b> .....	<b>14</b>
4.1 Evaluation Criteria .....	14
4.2 Method for Evaluating Proposals .....	15
4.3 Process for Awarding Contracts .....	15
4.3.1 Initial Awards and Allocations .....	15
4.3.2 Contract Termination and Reassignment .....	16
4.4 Award Notification .....	16
<b>5 Scope of Work</b> .....	<b>16</b>
5.1 Introduction .....	16
5.1.1 SOS CTI Teams .....	16
5.1.2 Quality Infrastructure and Reporting Requirements .....	16
5.1.3 Referrals to The SOS Teams .....	17
5.1.4 Components .....	18
5.1.5 SOS CTI Team Staffing .....	18
5.1.6 Documentation System and Use of Technology .....	18
5.1.7 Hours of Operation .....	19
5.2 Objectives and Responsibilities .....	19
5.3 Operating Funding .....	23
<b>6 Proposal Narrative</b> .....	<b>23</b>

6.1	Population .....	23
6.2	Description of Program .....	24
6.3	Implementation.....	25
6.4	Agency Performance .....	26
6.5	Utilization Review, Reporting, and Quality Improvement .....	26
6.6	Inclusion and Diversity.....	26
6.7	Financial Assessment.....	28

## 1. Introduction and Background

### 1.1 Purpose of the Request for Proposal

The New York State Office of Mental Health (OMH) announces the availability of funds for the development of two (2) Young Adult Safe Options Support (SOS) Critical Time Intervention (CTI) Teams, as follows:

- Bronx and Upper Manhattan
- Mid-town & Lower Manhattan and Brooklyn

The Young Adult SOS CTI Team will use an evidence-based CTI approach to provide intensive outreach, engagement, and care coordination services to serve individuals, ages 18 to 25, who are unsheltered. The SOS CTI Team will work collaboratively with partners, including street outreach teams, drop-in centers, law enforcement, hospitals, and others in close contact with the individual.

SOS CTI Teams are multidisciplinary teams comprised of licensed clinicians, care managers, and peer specialists. The Young Adult SOS CTI Team model includes an adjusted staffing pattern that allows for an increased number of youth peer advocates to assist in facilitating engagement and fostering trust. Services will be provided for up to 12 months, pre- and post-housing placement, with an intensive initial outreach and engagement period that includes multiple visits per week. The Young Adult SOS CTI Team will connect participants with treatment and support services, while also prioritizing their educational and vocational training and advancement. The team will provide developmentally appropriate support to help participants learn self-management skills and necessary “real-world” skills, including but not limited to financial literacy, decision-making, time management, interpersonal interactions socially and in work settings, as well as self-care and well-being on the road to self-efficacy and recovery.

The SOS CTI Teams follow the CTI model – a time-limited, evidence-based service that helps vulnerable individuals during periods of transition. The teams will be serving young adults as they transition from street homelessness to housing. CTI promotes community integration, self-advocacy, and continuity of care by ensuring that the member has strong ties to their professional and non-professional support systems during these critical periods. It is a team-based model that incorporates professionals and peers. The team works with members and their professional and natural support networks to build skills and strengthen supports so that care can successfully be transferred, and SOS services terminated, within 12 months.

The Young Adult SOS CTI Team will be expected to incorporate elements of Positive Youth Development (PYD) which emphasizes positive outcomes and strategies to build the intellectual, physical, social, and

emotional aptitude of youth. The PYD approach will include an increased focus on youth involvement, skill-building, leadership, and community engagement. The Young Adult CTI Team will also be well-versed in trauma-responsive services that incorporate effective interventions for traumatic stress, as well as the physical and behavioral health consequences of trauma.

Young adults experiencing homelessness are at a considerable risk of victimization, including through sex and labor trafficking, and LGBTQIA+ youth are particularly vulnerable to exploitation. The Young Adult SOS CTI Team will need to be well-versed in the indicators of human trafficking and work closely with other organizations to support young adults who are unsheltered and at risk of exploitation.

SOS CTI Teams are culturally responsive and inclusive, demonstrating empathy and respecting individuals' sexual orientation and gender identity and using the names and pronouns identified by the individual. SOS CTI Teams must be aware of situations of increased risk of homophobic or transphobic violence and other forms of discrimination and respect individuals' choice on when and to whom they wish to reveal their sexual orientation or gender identity. The SOS CTI Teams review and attempt to mitigate the effects of discrimination based on individuals' demographic identity (race, ethnicity, spiritual practices, gender identity, sexual orientation). SOS CTI Teams show understanding toward participants' personal stories as they may relate to oppression and inequality.

## **1.2 Target Population/Eligibility Criteria**

The Young Adult SOS CTI Team will serve individuals ages 18 to 25 who are experiencing street homelessness.

Referrals will be coordinated through the SOS Referral Hub. Individual referrals can be made by, but are not limited to:

- Outreach teams
- Drop-in centers
- Hospitals
- Community, family, and caregivers
- Community providers
- Police
- MTA

The Young Adult SOS CTI Team will work in close collaboration with the SOS Referral Hub, SOS CTI Teams, NYC's Street Homeless Outreach Teams, hospitals, and others to ensure that those individuals who are in greatest need for this intensive service are identified, referred, and immediately connected to services.

Referrals will be reviewed and coordinated in close collaboration with NYC Street Outreach Teams, NYC Department of Homeless Services (DHS), OMH, OASAS, OTDA and NYC Department of Health and Mental Hygiene (DOHMH). This will ensure rapid connection and prevent any duplication of services.

### **1.3 Bidder's Conference**

A Bidder's Conference will be held at the date and time listed below. Prospective Applicants' participation in this conference is highly encouraged but not mandatory.

The purpose of the Bidder's Conference is to:

- Explain the initiative
- Answer any questions Applicants may have related to the project or the process

The details for the Bidders' Conference are as follows:

Date/Time – Monday, April 3, 2024 at 10:00 AM - 11:00 AM via WebEx

**Join link:**

<https://meetny.webex.com/meetny/j.php?MTID=m3e2d7ba95a47b3de69cd3096c1515865>

**Webinar number:**

161 528 1022

**Webinar password:**

b9Jq3MpjCv2 (29573675 from phones and video systems)

**Join by phone**

+1-518-549-0500 US (English Menu)

+1-518-549-0059 US (Menú en Español)

Access code: 161 528 1022

## **2. Proposal Submissions**

### **2.1 Designated Contact/Issuing Officer**

OMH has assigned an Issuing Officer for this project. 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 being deemed non-responsive, an applicant 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:

Carol Swiderski  
Contract Management Specialist 2  
New York State Office of Mental Health  
Contracts and Claims  
44 Holland Avenue, 7<sup>th</sup> Floor  
Albany, NY 12229  
[OMHLocalProcurement@omh.ny.gov](mailto:OMHLocalProcurement@omh.ny.gov)

**2.2 Key Events/Timeline**

RFP Release Date	3/13/2024
Bidders Conference	4/3/24
Questions Due	4/15/24
Questions and Answers Posted on Website	5/1/2024
Proposals Due by 2:00 PM EST*	5/20/2024
Anticipated Award Notification	6/26/2024
Anticipated Contract Start Date	10/1/2024

\*OMH strongly advises that applicants do not wait until the last day/last few hours to complete and submit applications/proposals to Grant RFPs. Exceptions will not be considered or made for an applicant who cannot complete their proposal/application by the due date and time of the RFP.

**2.3 Disposition of Proposals**

All proposals submitted by the due date and time become the property of OMH. Any proposals not received by the due date and time do not get reviewed and are excluded from consideration.

**2.4 Eligible Agencies**

Prequalification is required for all not-for-profit organizations seeking grant funding from New York State. Please see Section 2.9 and Section 2.10 for additional Prequalification Information.

Eligible applicants are not-for-profit agencies with 501(c) (3) incorporation that have experience working with young adults and providing outreach, case management and/or behavioral health services to persons with a history of housing instability and/or street homelessness.

Please be advised that all questions regarding Eligibility will be responded to through the official posting of the Questions and Answers. No questions about Eligibility will be responded to either individually or prior to the posting of the Q&As.

The Local Governmental Unit (LGU), Director of Community Service (DCS)/Mental Health Commissioner has a statutory authority and responsibility for oversight and cross-system management of the local mental hygiene system to meet the needs of individuals and families affected by mental illness, substance use disorder and/or intellectual/developmental disability in their communities. LGU collaboration is a vital part of the work of



SOS CTI Teams. Applicants must notify the LGU(s) of their intent to apply. The LGU for New York City is NYC DOHMH.

## **2.5 RFP Questions and Clarifications**

All questions or requests for clarification concerning the RFP shall be submitted in writing to the Issuing Officer by e-mail to [OMHLocalProcurement@omh.ny.gov](mailto:OMHLocalProcurement@omh.ny.gov) by 2:00 PM EST on the “Questions Due” date indicated in section 2.2 and will be limited to addressing only those questions submitted by the deadline. No questions can be submitted or will be answered after this date. No questions will be answered by telephone or in person. Please enter “Safe Options Support (SOS) Program: Young Adult CTI Teams” in the subject line of the email.

The questions and official answers will be posted on the OMH website by the date listed in the timeline section 2.2 Key Events/Timeline.

## **2.6 Addenda to Request for Proposals**

In the event that it becomes necessary to revise any part of the RFP during the application submission period, an addendum will be posted on the OMH website and the NYS Contract Reporter.

It is the applicant’s responsibility to periodically review the OMH website and the NYS Contract Reporter to learn of revisions or addendums to this RFP. No other notification will be given.

## **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 and verify that all eligibility criteria have been met. Additionally, during the proposal evaluation process, evaluators will also be reviewing eligibility criteria and confirming that they have been met. During the course of either of these review processes, proposals that do not meet basic participation standards will be disqualified, specifically:

- Proposals from applicants that do not meet the eligibility criteria as outlined in 2.4; or
- Proposals that do not comply with bid submission and/or required format instructions as specified in 2.9 or
- Proposals from eligible not-for-profit applicants who have not completed Vendor Prequalification, as described in 2.9, by the proposal due date of 2:00 PM EST on Section 2.2 Key Events/Timeline.

## **2.8 SFS Prequalification Requirement**

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which require not-for-profits to be Prequalified in order for proposals to be evaluated and any resulting contracts executed.

Proposals received from eligible not-for-profit applicants who have not been Prequalified by the proposal due date of 2:00 PM EST on Section 2.2 Key Events/Timeline will not be able to submit their bid response through SFS.

**Please do not delay in beginning and completing the prequalification process. The State reserves five (5) days to review submitted prequalification applications. Prequalification applications submitted to the State for review less than 5 days prior to the RFP due date and time may not be considered. Applicants should not assume their prequalification information will be reviewed if they do not adhere to this timeframe.**

## **2.9 Vendor Registration, Prequalification and Training Resources for Not-for-Profits**

**NOTE: For any application that does not contain all the required documentation and/or “See Attached” responses that were to be uploaded, please be advised that the application will be reviewed and scored as submitted. For any incomplete response or missing and/or inappropriately submitted documentation, points will be deducted. It is the responsibility of the applicant to ensure, prior to submission, that the application is appropriate and complete.**

Each proposal submission through SFS is required to contain:

- Operating Budget (Appendix B)
- Budget Narrative (Appendix B1)

**All applicants must be registered with the New York State Statewide Financial System (SFS) and all Not-for-Profit agencies must be prequalified prior to proposal submission.**

Not-for-profit organizations must **Register** as a vendor the Statewide Financial System and successfully **Prequalify** to be considered for an award.

This grant opportunity is being conducted as an SFS bid event. Not-for-profit vendors that are not prequalified can initiate and complete bid responses. However, not-for-profit vendors that are not prequalified will NOT be allowed to submit their bid response for consideration.

Information on [Registration](#) and [Prequalification](#) are available on the Grants Management Website. A high-level synopsis is provided below.

### **Registering as an SFS Vendor**

To register an organization, send a complete [Grants Management Registration Form for Statewide Financial System \(SFS\) Vendors](#) and accompanying documentation where required by email to [grantsreform@its.ny.gov](mailto:grantsreform@its.ny.gov). You will be provided with a Username and Password allowing you to access SFS.

Note: New York State Grants Management reserves 5-10 business days from the receipt of complete materials to process a registration request. Due to the length of time this process could take to complete, it is advised that new registrants send in their registration form as soon as possible. Failure to register early enough may prevent potential applicants from being able to complete a grant application on time.

If you have previously registered and do not know your Username, please contact the SFS Help Desk at (855) 233-8363 or at [Helpdesk@sfs.ny.gov](mailto:Helpdesk@sfs.ny.gov). If you do not know your Password, please click the [SFS Vendor Forgot Password](#) link from the main log in page and follow the prompts.

### **Prequalifying in SFS**

- Log into the SFS Vendor Portal.
- Click on the Grants Management tile.
- Click on the Prequalification Application tile. The Prequalification Welcome Page is displayed. Review the instructions and basic information provided onscreen.

Note - If either of the above referenced tiles are not viewable, you may be experiencing a role issue. Contact your organization's Delegated Administrator and request the Prequalification Processor role.

- Select the Initiate a Prequalification Application radio button and click the Next button to begin the process. Starting with **Organization Information**, move through the steps listed on the left side of the screen to upload **Required Documents**, provide **Contacts** and **Submit** your Prequalification Application.

Note - If the Initiate a Prequalification Application radio button is not available, your organization may have already started a prequalification application and could even be prequalified. Click on the Version History Link to review your organization's prequalification status. If you are not currently prequalified, or your prequalification expires prior to the due date of this RFA, you will need to choose Collaborate on or Update your application.

- System generated email notifications will be sent to the contact(s) listed in the **Contacts** section when the prequalification application is Submitted, Approved, or returned by the State for

more information. If additional information is requested, be certain to respond timely and resubmit your application accordingly.

Note: New York State reserves 5-10 business days from the receipt of complete Prequalification applications to conduct its review. If supplementary information or updates are required, review times will be longer. Due to the length of time this process could take to complete, it is advised that nonprofits Prequalify as soon as possible. Failure to successfully complete the Prequalification process early enough may result in a grant application being disqualified.

Specific questions about SFS should be referred to the SFS Help Desk at [helpdesk@sfs.ny.gov](mailto:helpdesk@sfs.ny.gov).

### **On Demand Grantee Training Material**

A recorded session with information about the transition to SFS is available for Grantees on the Grants Management website - <https://grantsmanagement.ny.gov/> and in SFS Coach.

The following training material focused on grants management functionality is currently available in SFS Coach:

- An SFS Vendor Portal Reference Guide ([https://upk.sfs.ny.gov/UPK/VEN101/FILES/SFS\\_Vendor\\_Portal\\_Access\\_Reference\\_Guide.pdf](https://upk.sfs.ny.gov/UPK/VEN101/FILES/SFS_Vendor_Portal_Access_Reference_Guide.pdf)) to help Grantees understand which Grants Management roles they need in the SFS Vendor Portal based on the work they are currently involved in.
- A Grantee Handbook ([upk.sfs.ny.gov/UPK/VEN101/FILES/Grantee\\_User\\_Manual.pdf](https://upk.sfs.ny.gov/UPK/VEN101/FILES/Grantee_User_Manual.pdf)), which provides screenshots and step-by-step guidance on how to complete Grants Management-related tasks in SFS
- On-demand recorded training videos focused on each aspect of the Grants Management business process

Agencies can view vendor training material in SFS Coach by selecting **SFS Training for Vendors** from the Topic drop-down list.

## **3. Administrative Information**

### **3.1 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 or are determined to be otherwise unacceptable, in

- the agency's sole discretion;
- Withdraw the RFP at any time, at the agency's sole discretion
- Make an award under the RFP in whole or in part;
- Disqualify and applicant whose conduct and/or proposal fails to conform to the requirements of the RFP;
- Seek clarifications and revisions of proposals for the purposes of assuring a full understanding of the responsiveness to this solicitation requirements;
- Use proposal information obtained through the state's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant 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 applicants 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, SFS and the New York State (NYS) Contract Reporter;
- Eliminate any non-material specifications that cannot be complied with by all of the prospective applicants;
- Waive any requirements that are not material;
- Negotiate any aspect of the proposal with the successful applicant in order to ensure that the final agreement meets OMH objectives and is in the best interests of the State;
- Conduct contract negotiations with the next responsible applicant, should the agency be unsuccessful in negotiating with the selected applicant;
- 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 an applicant's proposal and/or to determine an applicant's compliance with the requirements of the solicitation;
- Cancel or modify contracts due to insufficiency of appropriations, cause, convenience, mutual consent, non-responsibility, or a "force majeure";
- Change any of the scheduled dates stated in the RFP.

### **3.2 Debriefing**

OMH will issue award and non-award notifications to all applicants. Non-awarded applicants may request a debriefing in writing requesting feedback on their own proposal, within 15 business days of the OMH dated letter. OMH will not offer debriefing to providers who are awarded a team. OMH will not offer ranking, statistical, or cost information of other proposals until after the NYS Office of the State Comptroller has approved all awards under this RFP. Written debriefing requests may be sent to the Designated Contact, as defined in Section 2.1.

### **3.3 Protests Related to the Solicitation Process**

Protests based on errors or omissions in the solicitation process, which are or should have been apparent prior to the deadline for receipt of all written questions for this RFP, must be filed prior to the deadline for questions. In the event an applicant files a timely protest based on error or omission in the solicitation process, the Commissioner of OMH or their designee will review such protest and may, as appropriate, issue a written response or addendum to the RFP to be posted on the OMH website in the RFP section. Protests of an award decision must be filed within fifteen (15) business days after the notice of conditional award or five (5) business days from the date of the debriefing. The Commissioner or their designee will review the matter and issue a written decision within twenty (20) business days of receipt of 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 to:

New York State Office of Mental Health  
Commissioner Ann Marie T. Sullivan, M.D.  
44 Holland Ave  
Albany, NY 12229

### **3.4 Term of Contracts**

The contracts awarded in response to this RFP will be for a five-year term. Selected applicants awarded a contract under this RFP will be required to adhere to all terms and conditions in OMH's Master Grant Contract.

### **3.5 Minority and Women Owned Business Enterprises**

OMH recognizes its obligation to promote opportunities for maximum feasible participation of certified minority and women-owned business enterprises (MWBs) and the employment of minority group members and women in the performance of OMH. OMH expects that all contactors make a good-faith effort to utilize Minority and/or Women Owned Business Enterprises (M/WBE), on any award resulting from this solicitation in excess of \$25,000 for commodities and services or \$100,000 for construction.

With respect to MWBEs, each award recipient must document its good faith efforts to provide meaningful opportunities for participation by MWBEs as subcontractors and suppliers in the performance of the project to be described in each grant disbursement agreement, and must agree that OMH may withhold payment pending receipt of the required MWBE documentation. The directory of MWBEs can be viewed at <https://ny.newnycontracts.com>. For guidance on how OMH will determine a contractor's "good faith efforts", refer to 5 NYCRR §142.8.

In accordance with 5 NYCRR § 142.13, each award recipient acknowledges that if it is found to have willfully and intentionally failed to comply with the MWBE participation goals set forth herein and in its grant disbursement agreements, such finding constitutes a breach of contract and OMH may withhold payment from the award recipient as liquidated damages.

Such liquidated damages shall be calculated as an amount equaling the difference between: (1) all sums identified for payment to MWBEs had the award recipient achieved the contractual MWBE goals; and (2) all sums paid to MWBEs for work performed or material supplied under the grant disbursement agreement.

By applying, an Applicant agrees to demonstrate its good faith efforts to achieve its goals for the utilization of MWBEs by submitting evidence thereof in such form as OMH shall require. Additionally, an Applicant may be required to submit the following documents and information as evidence of compliance with the foregoing:

A. An MWBE Utilization Plan, which shall be submitted in conjunction with the execution of the grant disbursement agreement except as otherwise authorized by OMH. Any modifications or changes to the MWBE Utilization Plan after the execution of the grant disbursement agreement must be reported on a revised MWBE Utilization Plan and submitted to OMH.

OMH will review the submitted MWBE Utilization Plan and advise the award recipient of OMH acceptance or issue a notice of deficiency within 30 days of receipt.

B. If a notice of deficiency is issued, the award recipient will be required to respond to the notice of deficiency within seven (7) business days of receipt by submitting to OMH, a written remedy in response to the notice of deficiency. If the written remedy that is submitted is not timely or is found by OMH to be inadequate, OMH shall notify the award recipient and direct the award recipient to submit within five (5) business days, a request for a partial or total waiver of MWBE participation goals. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid or proposal.

OMH may refuse to enter into a grant disbursement agreement, or terminate an existing grant disbursement agreement resulting from this solicitation, under the following circumstances:

- a. If an award recipient fails to submit a MWBE Utilization Plan;
- b. If an award recipient fails to submit a written remedy to a notice of deficiency;
- c. If an award recipient fails to submit a request for waiver; or,
- d. If OMH determines that the award recipient has failed to document good faith efforts

The award recipient will be required to attempt to utilize, in good faith, any MBE or WBE identified within its MWBE Utilization Plan, during the performance of the project. Requests for a partial or total waiver of established goal requirements may be made at any time during the term

of the project, but must be made no later than prior to the submission of a request for final payment under the grant disbursement agreement.

Each award recipient will be required to submit a Quarterly MWBE Contractor Compliance & Payment Report to OMH over the term of the project, in such form and at such time as OMH shall require, documenting the progress made toward achievement of the MWBE goals established for the project.

### **3.6 Participation Opportunities for New York State Certified Service-Disabled Veteran Owned Business**

Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Business (SDVOB), thereby further integrating such businesses into New York State's economy. OMH recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of OMH contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, applicants are expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as proteges, or in other partnering or supporting roles.

OMH hereby establishes an overall goal of 0% for SDVOB participation, based on the current availability of qualified SDVOBs. For purposes of providing meaningful participation by SDVOBs, the Applicant/Contractor would reference the directory of New York State Certified SDVOBs found at <https://ogs.ny.gov/Veterans>. Additionally, following any resulting Contract execution, Contractor would be encouraged to contact the Office of General Services' Division of Service-Disabled Veterans' Business Development to discuss additional methods of maximizing participation by SDVOBs on the Contract.

It would be required that "good faith efforts" to provide meaningful participation by SDVOBs as subcontractors or suppliers in the performance of a resulting awarded Contract as documented.

### **3.7 Equal Opportunity Employment**

By submission of a bid or proposal in response to this solicitation, the Applicant/Contractor agrees with all terms and conditions of Master Contract for Grants, Section IV(J) – Standard Clauses for All New York State Contracts including Clause 12 – Equal Employment Opportunities for Minorities and Women. The Contractor is required to ensure that it and any subcontractors awarded a subcontract over \$25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work"), except where the Work is for the beneficial use of the Contractor, undertake or continue programs to ensure that minority group members



and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

The Applicant will be required to submit a Minority and Women-Owned Business Enterprises and Equal Opportunity Policy Statement, to the State Contracting Agency with their bid or proposal. To ensure compliance with this Section, the Applicant will be required to submit with the bid or proposal an Equal Opportunity Staffing Plan (Form # to be supplied during contracting process) identifying the anticipated work force to be utilized on the Contract. If awarded a Contract, Contractor shall submit a Workforce Utilization Report, in such format as shall be required by the Contracting State Agency on a monthly or quarterly basis during the term of the contract. Further, pursuant to Article 15 of the Executive Law (the "Human Rights Law"), all other State and Federal statutory and constitutional and non-discrimination provisions, the Contractor and sub-contractors will not discriminate against any employee or applicant for employment status because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status, or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest. Please Note: Failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.

### **3.8 Sexual Harassment Prevention Certification**

State Finance Law §139-I requires applicants on state procurements to certify that they have a written policy addressing sexual harassment prevention in the workplace and provide annual sexual harassment training (that meets the Department of Labor's model policy and training standards) to all its employees. Bids that do not contain the certification may not be considered for award; provided however, that if the applicant cannot make the certification, the applicant may provide a statement with their bid detailing the reasons why the certification cannot be made. A template certification document is being provided as part of this RFP. Applicants must complete and return the certification with their bid, or provide a statement detailing why the certification cannot be made.

### **3.9 Bid Response**

Neither the State of New York or OMH shall be responsible for the costs or expenses incurred by the applicant in preparation or presentation of the bid proposal.

### **3.10 Acceptance of Terms and Conditions**

A bid, in order to be responsive to this solicitation, must satisfy the specifications set forth in this RFP. A detailed description of this format and content requirements is presented in Section 2.9 of this RFP.

### **3.11 Freedom of Information Requirements**

All proposals submitted for OMH's consideration will be held in confidence. However, the resulting contract is subject to New York State Freedom of Information Law (FOIL). Therefore, if an applicant believes that any information in its bid constitutes a trade secret or should otherwise be treated as confidential and wishes such information not be disclosed if requested, pursuant to FOIL (Article 6 of Public Officer's Law), the applicant must submit with its bid, a separate letter specifically identifying the page number(s), line(s), or other appropriate designation(s) containing such information explaining in detail why such information is a trade secret and formally requesting that such information be kept confidential. Failure by an applicant to submit such a letter with its bid identifying trade secrets will constitute a waiver by the applicant of any rights it may have under Section 89(5) of the Public Officers Law relating to the protection of trade secrets. The proprietary nature of the information designated confidential by the applicant may be subject to disclosure if ordered by a court of competent jurisdiction. A request that an entire bid be kept confidential is not advisable since a bid cannot reasonably consist of all data subject to a FOIL proprietary status.

### **3.12 NYS and OMH Policies**

The applicant/contractor must agree to comply with all applicable New York State and OMH policies, procedures, regulations and directives throughout the Term of the contract.

## **4. Evaluation Factors and Awards**

### **4.1 Evaluation Criteria**

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

The Evaluation will apply points in the following categories as defined in Section 6:

<b>Technical Evaluation</b>	<b>Points</b>
Population	18
Description of Program	22
Implementation	15
Agency Performance	5

Utilization Review, Reporting & Quality Improvement	10
Diversity, Equity, Inclusion and Recipient Input	10
Financial Assessment	20
<b>Total Proposal Points</b>	100 Points

For a detailed description of evaluation criteria for the Technical Evaluation and the Financial Assessment components, see Section 6 (Proposal Narrative).

## **4.2 Method for Evaluating Proposals**

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 2.9. If a proposal is not complete or does not meet the basic eligibility and participation standards as outlined in Section 2.4, the proposal will be eliminated from further review. The agency will be notified of the rejection of its proposal within 10 working days of the proposal due date.

Proposals will be conducted in two parts: Technical Evaluation and Financial Assessment. The technical evaluation committee, consisting of at least three evaluators, will review the technical portion of each proposal and compute a technical score. A financial score will be computed separately based on the operating budget and budget narrative submitted.

Evaluators of the Technical Evaluation component may then meet to discuss the basis of those ratings. Following the discussion, evaluators may independently revise their original score in any section. 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 score of 70 will be eliminated from consideration.

In case of a tie in the scoring process, the proposal with the highest score on the Description of Program (Section 6.2) of the Proposal Narrative will be ranked higher.

## **4.3 Process for Awarding Contracts**

### **4.3.1 Initial Awards and Allocations**

Proposals will be ranked, and the highest scoring applicant in each region will be awarded the SOS CTI teams allotted in that region.

### **4.3.2 Contract Termination and Reassignment**

There are a number of factors that may result in the contract being reassigned. This includes, but is not limited to, failure to meet start-up milestones, failure to maintain staff to client ratio, excluding referrals based on criminal or substance abuse history, or poor performance outcomes. A contractor will be provided notification if there is need for reassignment.

To reassign the contract, OMH will go to the next highest ranked proposal. If there are no agencies left with a passing score, OMH will go to the top of the list and work its way down the list to reassign the contract.

### **4.4 Award Notification**

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

## **5. Scope of Work**

### **5.1 Introduction**

#### **5.1.1 - SOS CTI Teams:**

OMH intends to issue two (2) awards through this RFP for Young Adult SOS CTI Teams to be developed in the boroughs detailed in Section 1.1

The provider must commit to meeting SOS CTI team start-up requirements, including program location, staffing, and monthly ramp up deliverables. SOS CTI team start-up will include the involvement of OMH and other key agencies to provide support around the development of the team, which will start based on OMH's determination of readiness. Monthly calls and/or meetings will be held to provide technical assistance and ensure the delivery of services consistent with programmatic objectives.

#### **5.1.2 – Quality Infrastructure and Reporting Requirements**

- 1. Quality Infrastructure:** The provider who coordinates or directly operates a team must have a quality, supervisory and operational infrastructure that assures fidelity to the CTI model. Programs will be required to maintain accurate reporting and case records according to Regulation and Program Guidance.

The Young Adult SOS CTI Team will be required to submit regular reports to OMH regarding all enrolled individuals including admission and discharge dates, characteristics of individuals served, diagnoses, referral source, services provided, discharge plan, disposition, and follow-up. Information will also be submitted regarding performance indicators demonstrating that members' continuity of care has been assured (including stable housing) and that reliance on psychiatric center (PC), inpatient (IP), and emergency department (ED) services has been reduced and jail/prison time decreased. OMH will provide programs with a template of the data items required for reporting for manual or bulk data entry.

2. **Participation in Learning Community:** Providers will be expected to participate in a SOS CTI team active learning community, in collaboration with OMH, to review progress, outcomes and develop best practices for SOS CTI Teams. Learning community activities will involve, at a minimum, quarterly meetings with OMH and key stakeholders to assure that the teams' caseloads are full, and that case-level and program-wide concerns can be quickly addressed.
3. **Utilization Review:** SOS CTI Teams will have a systemic approach for self-monitoring and ensuring ongoing quality improvement including analyzing utilization review findings and recommendations. This information should be used to measure timeliness of services, disposition and outcomes, and will inform the SOS agency's overall quality improvement plan. SOS CTI providers should ensure continuous quality improvement of services and development of the program including regular monitoring and evaluation of outcomes. SOS CTI providers will participate in site visits from OMH, OASAS and LGU's where applicable.
4. **Technology Supports:** Applicants must describe how they use digital technology to support client engagement in care. Technology supports include tools and resources for identifying potential clients, communicating and responding to referral sources, communicating with clients and key support persons, care planning, and transition planning. Applicants should describe digital tools available to staff as well as those available to clients.

All applicants should have an electronic health record (EHR) and describe the EHR. OMH is exploring a clinical data interoperability system based on the HL7 FHIR® that will connect directly with provider EHRs to extract required data elements and limit provider reporting burden. Applicants should note whether their EHR supports an interoperability system using secured data transfer protocols such as SFTP, TIS 1.2, OAuth 2, SAML.

### 5.1.3 – Referrals to The SOS Teams

Referrals to the Young Adult SOS CTI Team will be managed through a Referral Hub. The Referral Hub, as well as the Young Adult SOS CTI Team, will work closely with other SOS Teams, DHS, Department of Youth and Community Development (DYCD), DOHMH, and Street Outreach Teams to ensure that referrals and/or members are not enrolled with another program that offers duplication of services.

Upon receiving a referral, the Young Adult SOS CTI team will begin efforts towards connection with referred individual within 24 hours. Once connection is established, teams will conduct assertive and persistent outreach to establish trust and foster engagement. The teams will provide coordinated care transition activities and support, starting from the time of referral through transition to community housing, treatment and supports.

#### **5.1.4 – Components:**

The NYC Safe Options Support program includes a SOS Referral Hub, SOS CTI Teams, and is intended to involve close collaboration with NYC's Homeless Outreach Teams. The SOS Teams also work closely with the new inpatient Transition to Home Units (THU) which specialize in the care of street homeless individuals with serious mental illness.

#### **5.1.5 – SOS CTI Team Staffing**

It is expected that the Young Adult SOS CTI Team be comprised of 9.0 FTE's: 1.0 FTE Team Leader, 2.0 FTE licensed clinicians (ex. LCSW, LMSW, LMHC, Licensed Psychologist), 2.0 FTE care managers (preference given to individuals with CASAC certification), and 4.0 FTE youth peer advocates. All eligible SOS Team members are expected to obtain and maintain 9.58 certification.

The team is expected to establish an on-call system with staff to provide 24/7 response and support to participants around housing emergencies and care transitions from hospitals and acute care settings.

#### **5.1.6 – Documentation System and Use of Technology**

Not only for the purpose of accurate and successfully billing and revenue cycle management but also as a quality and learning tool, it is expected that the provider have an electronic health record that can document referrals, assessments and each encounter with the member. It is also expected that the provider maximizes the use of technology to help support the team's communication and quality improvement efforts as well as each member's transition and recovery goals.

### 5.1.7 – Hours of Operation

SOS CTI Teams will have hours of operation that allows them to adequately provide all necessary services with consideration of the unique needs and availability of the individuals whom they serve. This shall include evenings and weekends, alongside the aforementioned 24/7 on-call capacity.

## 5.2 Objectives and Responsibilities

The Young Adult SOS CTI team will conduct outreach to areas where unsheltered young adults are known to frequent and enroll at least 70 individuals into CTI services annually. All individuals referred will receive sustained outreach and engagement attempts, even if they initially decline services. The Young Adult SOS Team will continue to work with individuals to ensure that their immediate needs are met (including clothing, shelter and food), and that community linkages and supports remain solid.

The Young Adult SOS CTI Team will follow the evidence-based model of critical time intervention which includes four phases as described below. Each of the phases requires the Young Adult SOS CTI Team to have a skill set based on a non-judgmental, person-centered, strength-based, and trauma-informed approach that meets participants where they are, helps them identify what is important to them, and communicates hope that things can and will change. The team will be knowledgeable about young adult development, integrating and adapting to the changes in an individual's goals and needs across domains with flexibility, as appropriate.

**Phase 1** Relationship Building and Placement (Approximately 3 months, Pre-Housing Placement): Identifying and reaching out to participants and developing a trusting relationship with the member. For individuals who are agreeable to seeking temporary shelter, the Young Adult SOS CTI Team provides support during the transition from street homelessness to a Youth Shelter, Safe Haven, Stabilization Bed, or other temporary housing.

During this phase, the Young Adult SOS team assists with housing applications while a member is placed in shelter/temporary housing or the setting of their choice. The team facilitates other referrals that maximize the success of the member's care plan. Referrals will connect members to the people and providers who will assume the primary role of support in the community. Tasks in this phase include but are not limited to:

- Conducting assertive and persistent outreach to establish trust and foster engagement with referred member;

- Utilizing engagement strategies that are person-centered, culturally sensitive, recovery oriented, and considerate of an individual's preferences, priorities, and immediate needs;
- Conducting ongoing assessment of an individual's immediate needs, including, but not limited to, health, safety, clothing, food, and shelter;
- Working closely with the participant, using the OMH PSYCKES Medicaid record system to determine what has been tried before in terms of treatment and other supports, and developing a care plan that addresses demographics, family/social history, vocational/educational history, medical and behavioral health history, housing, legal involvement (if any), entitlement/benefits, and strengths/preferences;
- Collaborating with other homeless outreach providers and stakeholders who may be familiar with the individual and their history of homelessness to streamline care;
- Communicating via in-person and remote (e.g., zoom, texts) meetings with prospective providers and other supporters of the participant's recovery and transition goals (e.g., family/family of choice or social support network);
- Conducting assessment of housing needs, completion of housing applications, including supporting member in obtaining necessary documentation, and coordination of housing placement; and
- For those participants who are hospitalized:
  - Engaging with the individual prior to discharge in the hospital to build rapport and trust – this should include a number of face-to-face visits;
  - Prior to discharge, confirming with housing and other providers that the new setting/provider is prepared to meet the individual's needs in terms of treatment, support, and basic needs such as income/benefits, cell phone access, transportation, food, safety, adequate heat, lighting, etc.;
  - Working with the hospital team on identifying and addressing the strengths and weakness of proposed discharge plans;
  - On the day of discharge, accompanying the participant to the new home setting unless the individual does not want this support as part of their personal recovery goals; and
  - Assisting with housing and facilitating and suggesting other referrals that will maximize the success of the participant's discharge and recovery plan.

*PHASE 2 begins at the moment of housing placement and represents the start of CTI services, when the focus shifts to supporting the member in maintaining their housing and achieving other recovery-oriented goals.*

**Phase 2** Support, Transition and Linkage (Months 0-3, Post-Housing Placement): Providing support and beginning or continuing to connect the individual to the people and providers who will assume the primary role of support in the community. The Young Adult SOS Team provides support



during the transition into housing and connects the member to people and agencies that will assume the ongoing role of support. The role of the SOS team will continue after housing placement is made, to help support and ensure that the housing placement is successful. Housing placement can occur directly from the street or from shelter.

Spending time with a member is a key characteristic of SOS, as it is critical to building trust and seen as a means to help support a successful transition into housing. During this phase, frequency and duration of the contact will be flexible and tailored to the specific needs of each member. Tasks in this phase include but are not limited to:

- Observe operation of the individual's support network by accompanying the participant to medical, psychiatric and other provider visits;
- Establish with the participant a plan for routine check-in visits; these may be more frequent initially, and decrease as the individual adjusts to their new home, with visits taking place in the person's home or other places in the community;
- Prepare with the participant a wellness plan, and/or crisis and support plan that can be activated if needed by the individual. Wellness Recovery Action Plans (WRAP) and Psychiatric Advance Directives (PAD) can be especially helpful;
- Provide benefits and entitlements support by assisting individuals with appropriate paperwork to apply to receive social services and entitlements, and accompany participant to benefits office, as needed;
- Assist the individual in developing an educational/vocational plan, and connecting to relevant educational programs, vocational training, and job placement assistance.
- If the participant needs more intensive supports (e.g., an ED/CPEP/IP visit), the team will work with the individual and treatment team to resolve the crisis and return the participant back to the community setting as soon as possible;
- Mediate any conflicts between the individual and their support team;
- Help identify solutions, if needed, to resolve barriers/concerns related to successful transition to the new setting/support system and achievement of housing stability;
- Encourage the person to identify and express desired change in terms of the new setting or support so that they may take more responsibility for their recovery, including in advocating with their medical team around medication issues;
- Working closely with the participant, identifying goals that provide the motivation to take care of their health;
- Support the individual to enhance the "real-world" skills necessary to achieve the goal of becoming an independent adult; and
- Utilization of motivational interviewing and broad harm reduction strategies including safer use, meeting people "where they are at", including directly distributing naloxone to young adults.

**Phase 3** Monitoring and strengthening of the support network and the participant's skills in managing their support system and advocating for themselves (Months 4-6): Reducing the frequency of in-person visits to 1 - 2 times per week, or other appropriate frequency as determined by the SOS CTI team in consultation with the member. Team can make additional contact via text, FaceTime, Skype, or other methods of communication in between in person meetings. Tasks in this phase include but are not limited to:

- Continuing to observe the operation of the support network while decreasing the number of meetings with the individual, as appropriate;
- Continuing to assess the participant's need for skill-building and introduce extra supports to promote self-efficacy in all areas, as necessary;
- Working with the participant to identify and/or augment community and social supports of interest – e.g., involvement with a faith community, gym membership, social clubs, etc. The team should budget for wrap-around dollars to assist the participant with these important community inclusion efforts;
- Based on the participant's interests, supporting connection to peer-based, vocational and/or educational programs, and other services that are important for successful transitions;
- Again, if the participant needs more intensive supports (e.g., an ED/CPEP/IP visit) then the team will work with the individual and treatment team to resolve the crisis and return the participant back to their community setting as soon as possible; and
- Assisting participant in transition to housing and/or housing stability.

**Phase 4** SOS Completion and Achievement Recognition (Months 7-9): Tasks in this phase include but are not limited to:

- Reducing the frequency of in-person visits to 1 or 2 times monthly, or other appropriate frequency as determined by the SOS CTI team in consultation with the participant;
- Communicating with the participant the plan for longer-term goals, including the SOS CTI team's stepping back and allowing the participant to manage their supports independently and to fully achieve recovery goals;
- Supporting the participant in their continued engagement with community providers and other sources of supports;
- Holding a final meeting with the participant and their supporters to acknowledge all that has been accomplished and ensuring that the supports can function independently; and
- Preparing a discharge summary and disenrolling the participant from the service.

**Optional Phase 5:** Post-housing placement support. In some cases, a participant may have completed all phases and still require support from the SOS team for an additional period of time. In such cases, the member will be transitioned to a maintenance phase for up to 3 months. During this time, the focus will be on ensuring that the participant continues to receive ongoing support to maintain their housing stability and prevent any relapse into homelessness.

During this final phase of SOS services, tasks include but are not limited to:

- Addressing any outstanding needs or issues that may hinder the member's progress towards self-sufficiency. This may include addressing legal or financial concerns, securing necessary documentation or identification, or addressing any remaining behavioral health concerns;
- Developing a transition plan for continued support and services. This may involve referrals to community resources or other service providers that can offer ongoing support as needed;
- Monitoring the member's progress and evaluating the effectiveness of the services provided to ensure that the member is on track towards their goals; and
- Providing guidance and support as the member transitions to independent living, reconnects with family or other support networks, or seeks additional services as needed.

### **5.3 Operating Funding**

Each team award will be made in the amount of \$4,760,280 for five (5) years. Annual funding for each of the five (5) years is \$952,056. \$90,000.00 in wrap-around dollars is assumed in the funding provided.

Over the course of the contract, opportunities may be explored for increased revenue from billable services under the Health Home Plus program. Any such revenue is expected to be utilized to enhance the SOS Teams.

## **6. Proposal Narrative**

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

### **6.1 Population**

- a. Describe your agency's understanding of the characteristics and service needs of young adults experiencing street homelessness in the proposed catchment area.
- b. Describe your agency's experience with the critical time intervention

model and its use to support homeless or unstably housed individuals, or experience with other interventions used to support unsheltered individuals in achieving stability.

- c. Describe your agency's experience with, and strategies for, outreach and engagement of young adults with a history of unstable housing, as well as possible co-occurring disorders and histories of complex trauma.
- d. Describe your agency's track record in working with individuals with multiple system involvement and how you have advocated with them and on their behalf to better coordinate care among behavioral health, medical, housing, and other providers. Include the cultural and linguistic needs of individuals to be served, as well as individuals who are LGBTQUIA+ and gender non-binary/non-conforming.
- e. Describe your agency's experience in working with and employing youth peer advocates or peer support specialists, and the role of peers within your organization.
- f. Describe your agency's history of working with NYC's Homeless Outreach Teams and Runaway & Homeless Youth programs.
- g. Describe your agency's familiarity with New York City's temporary housing options for homeless youth, the supportive housing system and experience with coordinating housing applications, housing placements and housing supports.

## **6.2 Description of Program**

- a. Describe how you will coordinate the review of Young Adult SOS CTI team referrals in a timely manner and meet face-to-face with recipients –within 24 hours of referral - to begin the outreach and engagement process.
- b. Provide a description of the engagement practices and strategies to be used and targeted to the population to be served by Young Adult SOS CTI Team. Identify engagement challenges and how they will be addressed.
- c. Describe how you intend to partner with local Homeless Outreach Teams and Runaway & Homeless Youth programs to coordinate outreach activities and avoid duplication of effort.
- d. Describe your network, internally and externally, of behavioral health and other providers, and how you plan to utilize those networks to facilitate rapid access to care. In your response, describe how you plan to ensure close collaboration with the Local Government Unit (LGU) to facilitate care for individuals served by the Young Adult SOS CTI Team.

- e. Describe the real-world skills that are necessary for a young adult to achieve independence and how the SOS CTI Team will support the individual in developing those skills.
- f. Describe how the Young Adult SOS CTI Team will work with recipients to identify educational/vocational goals and connect to educational programs, vocational training, and job placement assistance.
- g. Describe your agency's success in assisting recipients in achieving permanent housing, including your interface with the NYC Human Resources Administration.
- h. Describe how the Young Adult SOS CTI Team will assist recipients in achieving community inclusion and expanding and/or strengthening their support system.
- i. Describe your agency's plans for individual assessment and person-centered care planning, including ways in which the plan engages and motivates recipients toward their recovery.
- j. Provide a description of your crisis management and safety plan that will be used should recipients require it.

### **6.3 Implementation**

- a. Describe start-up and phase-in activities necessary to implement the Young Adult SOS CTI Team for the geographic area in the application. Include timeframes in your description.
- b. Describe the agency's physical space needs for all the teams and other equipment and administrative oversight supports necessary to successful programmatic operation.
- c. Describe the staff training that will be given prior to the teams enrolling any members, and the ongoing training and supervision that will be provided to assure fidelity to the CTI model and ensure high-quality services.
- d. Describe the recruitment plan that the agency will use to recruit, train, retrain, and support the level of professional and appropriately qualified staff needed to carry out the program duties.
- e. Describe ways in which your agency will attempt to use technology and data to promote best care and achievement of recipients' recovery goals.

#### **6.4 Agency Performance**

- a. Describe your agency mission, the services provided, and the population(s) served, including the demographic makeup of the populations using available data (race, ethnicity, gender, sexual orientation, language, etc.) and how this data informs policies, service provision and staff recruitment. Describe how these experiences demonstrate the agency's experience and qualification for operating a Young Adult SOS CTI Team.
- b. Describe how your agency and its board have strengthened the quality, fiscal stability and mission of the agency over the last five years. Give examples of proudest achievements and lessons learned/obstacles/barriers/challenges that the organization has encountered.
- c. Describe the agency's experience in providing culturally and linguistically relevant services, and approaches to ensuring the young adults served from marginalized or underserved populations are engaged, served, and satisfied with interventions.

#### **6.5 Utilization Review, Reporting, and Quality Improvement**

- a. Describe how you will ensure confidentiality of recipients' records in a way that conforms with all local, state, and federal confidentiality and privacy regulations.
- b. Describe how your agency will integrate this program into your overall quality improvement infrastructure and efforts. Identify two achievements of your quality department that have occurred within the last two years of which you are particularly proud.
- c. Describe how your agency intends to participate in an active learning community, in collaboration with OMH, to review progress, outcomes and develop best practices for SOS CTI Teams.

#### **6.6 Diversity, Equity, Inclusion and Recipient Input**

##### **Commitment to Equity and the Reduction of Disparities in Access, Quality and Treatment Outcomes for Marginalized Populations**

- a. Provide a mission statement for this project that includes information about the intent to serve individuals from marginalized/underserved populations in a culturally responsive trauma-informed way.
- b. Identify the management-level person responsible for coordinating/leading efforts to reduce disparities in access, quality, and treatment outcomes for marginalized populations.
- c. Identify the management-level person responsible for

coordinating/leading efforts to ensure incorporation of feedback from participants in services in continuous agency improvement. Information provided should include the individual's title, organizational positioning and their planned activities for coordinating these efforts).

- d. Provide the diversity, inclusion, equity, cultural and linguistic competence plan for this program (as outlined in the National CLAS Standards). Plan should include information in the following domains:
- workforce diversity (data-informed recruitment);
  - workforce inclusion;
  - reducing disparities in access quality, and treatment outcomes in the patient population;
  - soliciting input from diverse community stakeholders, organizations and persons with lived experience;
  - efforts to adequately engage underserved foreign-born individuals and families in the project's catchment area
  - how stakeholder input from service users and individuals from marginalized/underserved populations was used when creating the diversity, inclusion, equity, cultural and linguistic competence plan. Discuss how the plan will be regularly reviewed and updated.

#### **Equity Structure**

- e. Describe the organization's committees/workgroups that focus on reducing disparities in access, quality, and treatment outcomes for marginalized populations (diversity, inclusion, equity, cultural/linguistic competence).
- f. Describe the organization's committees/workgroups that focus on incorporating participants of services into the agency's governance. Note - it is important to describe how membership of any such committee/workgroup includes people with lived experience and representatives from the most prevalent cultural groups to be served in this project.

#### **Workforce Diversity and Inclusion**

- g. Describe program efforts to recruit, hire and retain a) staff from the most prevalent cultural group of service users and b) staff with lived experience with mental health and receiving mental health services.

#### **Language Access**

- h. Describe efforts to meet the language access needs of the clients served by this project (limited English proficient, Deaf/ASL). This information should include the use of data to identify the most prevalent language access needs, availability of direct care staff who speak the most prevalent languages, the provision of best practice approaches to provide language access services (i.e., phone, video interpretation). Also, include information about efforts to ensure all staff with direct contact with clients are knowledgeable about using these resources. Additionally, provide information about the plan to provide documents and forms in the languages of the most prevalent

cultural groups of its service users (consent forms, releases of information, medication information, rights, and grievances procedures).

This section should also include information related to:

- addressing other language accessibility needs (Braille, limited reading skills);
- service descriptions and promotional material.

### **Recovery Values**

- i. Describe the agency or program's plan to espouse recovery and resilience-oriented values into practice.

### **Collaboration with Diverse Community Based Stakeholders/ Organizations**

- j. For this project, describe proposed efforts to partner, collaborate with and include diverse, culturally relevant community partners in service provision and in the gathering of stakeholder input. This includes information about subcontracting entities (if applicable) and other efforts to ensure government resources reach organizations and populations that are historically economically marginalized, including those that are peer run.

## **6.7 Financial Assessment**

- a. The proposal must include a 5-year Budget (Appendix B) for each team totaling of \$4,760,280 with an annual per team amount of \$952,056 available. \$90,000.00 in wrap-around dollars is assumed in the funding provided.

The indirect cost/administrative overhead rate is capped 15%. Providers must follow Consolidated Fiscal Report (CFR) Ratio-Value guidance which excludes equipment/property from the direct cost base. Federal Negotiated Indirect Cost Rate Agreements (NICRA) are not allowable. Any travel costs included in the Budget must conform to New York State rates for travel reimbursement. Applicants should list staff by position, full-time equivalent (FTE), and salary.

- b. Using the Budget Narrative (Appendix B1), describe how your agency manages its operating budget. Also, applicants must use the Budget Narrative (Appendix B1) to include the following:
  1. detailed expense components that make up the total operating expenses;
  2. the calculation or logic that supports the budgeted value of each category; and,
  3. description of how salaries are adequate to attract and retain qualified employees.'



4. Pursuant to Section 5.3 - Discuss plans on how any increasing revenue from billable services would be used to enhance the teams.