

# HOMELESS SUPPORT SERVICES FOR INDIVIDUALS WITH BEHAVIORAL HEALTH NEEDS

## REQUEST FOR PROPOSALS

April 1, 2016 – Updated on April 20, 2016

### INTRODUCTION

The Monroe County Office of Mental Health (MCOMH) is soliciting information from organizations interested in providing supportive services to individuals with behavioral health issues experiencing homelessness in our community. MCOMH has collaborated for many years with various community providers, including the Monroe County Department of Human Services, to provide services to the homeless population. MCOMH recognizes the complex and evolving needs of these individuals and is consolidating resources into a new model to best address these needs.

Annual funding amount for the operation of the Homeless Supportive Services is \$150,000.

### GOALS / DEFINITION OF THE SERVICE

The intent of this funding is to provide individualized, person centered supportive services to individuals with behavioral health needs who are also experiencing homelessness or at risk of becoming homeless. To best understand the needs of these individuals, MCOMH and DHS conducted an online survey of a wide range of stakeholders in January 2016. Participants were asked to identify their top three priorities for homeless support needs in our community. The top responses were as follows:

1. Linkage to safe, suitable, affordable housing, including assistance with apartment searches and landlord relationship building.
2. Aftercare services following housing placement, including eviction prevention.
3. Linkage to mental health and/or substance abuse services.

Based on this information, the priorities for this RFP are active outreach to the target population; linkage and long term maintenance of safe, affordable housing; linkage with other necessary resources, including mental health and substance use treatment; and coordination/collaboration with other homeless services providers in the community. Services will be available for adults, families and transition age youth. These services provided should complement and work in collaboration with other supports and providers, as opposed to duplicating existing services.

### POPULATION(S) OF FOCUS

The identified populations of focus are as follows:

- I. Adults, 18 years and older, who:
  - a. Have a mental illness and/or substance use disorder AND
  - b. Currently homeless or at risk of being homeless.
- II. Youth, 16 years and older, who:
  - a. Have a mental illness and/or substance use disorder AND
  - b. Currently homeless or at risk of being homeless.
- III. Families in which:
  - a. One or more primary caregivers has a mental illness and/or substance use disorder AND
  - b. The family currently is currently homeless or at risk of being homeless.

### COMPONENTS OF THE SERVICE

The organization receiving this award is expected to provide a range of supportive services for individuals with behavioral health needs who are also experiencing homelessness. These services should include, but are not limited to, the following:

1. Community-based outreach: Respondents should utilize a collaborative, team based approach to proactive outreach to identify and engage members of the target population. Outreach should occur in the community in locations where the target population is known or suspected to reside. Outreach efforts should occur in coordination with other community partners who are conducting outreach to homeless individuals. The frequency of outreach efforts may vary depending on the season/time of year but should occur regularly and often enough to meet community need and to effectively engage with the target population. The proposal should clearly demonstrate experience with and intent to utilize best practices for homeless outreach and engagement as identified by the Substance Abuse and Mental Health Services Association (SAMHSA), including (but not limited to):

1. Outreach is an interactive process that should be flexible and creative.
2. Outreach should meet people “where they are.”
3. Respect, relationship building and the involvement of clients are critical components.
4. Teams and networks are essential to success.
5. Coordination of services should be emphasized.
6. An emphasis on safety, boundaries and ethics.
7. The ultimate goal is to integrate people into the community.

(Olivet, Bassuk, Elstad, Kenney, Shapiro. *Assessing the Evidence: What We Know About Outreach and Engagement*. <http://homeless.samhsa.gov/Resource/Assessing-the-Evidence-What-We-Know-About-Outreach-and-Engagement-37555.aspx>.)

More information about best practices for homeless outreach can be found at the link above and at <http://homeless.samhsa.gov/Channel/Outreach-35.aspx>.

2. Linkage to safe, affordable housing: Respondents should prioritize linking the target population as quickly as possible to safe, affordable, permanent housing options consistent with individual need. It will be vital for program staff to have an extensive awareness of community housing resources and processes for accessing these resources, including Shelter Plus Care beds.

3. Post-housing placement monitoring and support: A key component of this new service model will be assistance following housing placement to ensure long term success. MCOMH and MCDHS have received feedback that ongoing residential monitoring and assistance for homeless individuals who achieve a housing placement is not sufficient in our community. This lack of support following residential placement can result in a sudden loss of housing, negative impact on relationships with property owners and landlords, and repeating the cycle of homelessness. Respondents should establish a long term follow up process (e.g., 6- to 12-month post placement involvement, etc.) that effectively addresses individual needs and promotes the success of each housing placement. Proposals should describe the anticipated scope and model of these services, which should be flexible and based on individual need. Ongoing supports should include (but are not limited to) assistance with:

- Establishing and maintaining the household.
- Becoming acquainted with the local community.
- Applying for entitlements.
- Understanding rights and responsibilities as a tenant.
- Resolving apartment and building maintenance issues.
- Linkages to community resources and health home care coordination.
- Budgeting to ensure that rent and other expenses are paid.

4. Linkage to other supports and services, including mental health and substance use treatment: In addition to housing placement, respondents should ensure that members of the target population are linked to behavioral treatment services consistent with individual needs, including mental health treatment, substance use treatment, and associated community support and peer-based services. It will be vital for program staff to have an extensive awareness of the behavioral health system and processes for accessing these resources.

5. Linkage and assistance with public benefits: It is essential for members of the target population to have access to public benefits as quickly as possible in order to promote stability, recovery and independence. Program staff should be familiar with the process for applying for public benefits and will work closely with eligible individuals and DHS staff to ensure follow through with application and recertification requirements. The program should also utilize the SOAR (SSI Outreach, Access, Recovery) model to assist homeless in application for SSI benefits. More information about this model can be found at <https://soarworks.prainc.com>.

It is expected that the awardee will utilize a team based approach to providing these service consisting of at least 2.0 FTEs. However, proposals should specify the anticipated staff configuration, qualifications, salaries and work schedules (as noted in the Application Narrative below).

Proposals should clearly describe how services will be provided in conjunction and integrated with Health Home Care Management. It is anticipated that Health Home Care Management referrals should be submitted for all individuals receiving Homeless Support Services who are not already linked to this resource. Homeless Support Services should ultimately meet the comprehensive needs of the target population while providing focused residential supports to maintain housing and providing the necessary expertise to other ongoing supports to adequately meet the needs of this population. Proposals should clearly outline intentions, if any, to generate revenue as part of these services, whether now or in the future. Details about potential revenue should be provided in the application budget.

As noted above, these services are intended to be highly collaborative and program staff should work closely with other homeless service providers, residential resources, behavioral health treatment providers, and the Monroe County Office of Mental Health and Department of Human Services. All program activities should complement and work in collaboration with other supports and providers, as opposed to duplicating existing services (e.g., Health Home Care Management; Mental Health Supported Housing services, etc.). Respondents to this request for proposals must identify the processes and structures under which this ongoing collaboration will be achieved. It is also expected that respondents will participate on an ongoing basis in community meetings and county planning related to the needs of the target population.

**REQUEST FOR PROPOSALS  
APPLICATION NARRATIVE AND BUDGET**

Agencies interested in responding to this solicitation are to submit a proposal narrative to the Monroe County Office of Mental Health no later than ~~April 29, 2016~~ **May 6, 2016**. **Monroe County Office of Mental Health approved this extension on April 20, 2016.** The proposal is required to be submitted electronically to the following email address: [mentalhealth@monroecounty.gov](mailto:mentalhealth@monroecounty.gov)

Questions related to any aspect of this RFP must be submitted via e-mail to [mentalhealth@monroecounty.gov](mailto:mentalhealth@monroecounty.gov) no later than close of business on **Friday, April 8, 2016**.

When submitting a question to this email address, please include "Homeless Support Services RFP" in the email subject line. All questions and the responses to these questions will be posted on the MCOMH Procurement Opportunities webpage (<http://www2.monroecounty.gov/mh-rfp>) by **April 13, 2016**. Only questions submitted through this e-mail process and received by the **April 8, 2016** deadline will be responded to.

**APPLICATION NARRATIVE**

The Application Proposal should be no more than **10** pages, including the cover page. Application Budget information should be included as a separate excel file.

Proposals should be written utilizing "Calibri" font, size 12, and margins should be no smaller than .5". The proposal should include the following:

Proposal Cover Page. The cover page includes the following general information:

- Agency name and address
- Division/department under which the Homeless Support Services for individuals with behavioral health issues will operate
- Name, phone number and e-mail for the Division/department contact person
- The name, title and signature of the individual authorizing the submission of the proposal.

The Application Narrative should address each of the following areas:

- I. Agency Experience Serving Population of Focus:
  - a. Describe your agency's experience in providing services to individuals who are experiencing homelessness, including the use of best practices for homeless outreach.
  - b. Describe your agency's experience in providing services to individuals with mental health and/or substance use issues. Include existing relationships with other relevant stakeholders/providers.
  - c. Describe your agency's ability to implement an innovative and flexible service to serve the needs of individuals falling into both of the categories above. Include a description of how the agency plans to assess the effectiveness of the services provided and modify service provision over time to best meet the needs of the population of focus. Include any provisions needed by the agency to effectively implement and operate these services.
  
- II. Program Components:
  - a. Operations and Services
    - i. Describe your agency's housing plan for providing homeless support services to individuals with behavioral health issues. Include estimated numbers served, length of stay, and anticipated demographics of the target population.

- ii. Describe how best practices for homeless outreach will be utilized in providing these services, as well as strategies for linking individuals with public benefits and SSI using the SOAR model (described above). Describe how staff will help monitor and maintain housing placements.
    - iii. Describe in detail barriers associated with providing services to the target population and anticipated strategies to overcome these challenges.
    - iv. Describe relevant risk management policies and procedures.
    - v. Describe any performance and quality management activities that will evaluate the operations and effectiveness of the program.
  - b. Staffing Proposal
    - i. Describe your agency's staffing plan for the designated supervisor and other personnel that would be part of the program.
    - ii. Describe how the staffing pattern/coverage is adequate to each specific component of the program.
    - iii. Describe how you will recruit and retain a sufficient number of diverse staff to allow for matching staff with the population served.
    - iv. Describe your agency's proposed required staff competencies for operating program and the training plan for ensuring all staff obtains the appropriate competencies.
  - c. Stakeholder Partnership
    - i. Describe your agency's ability or plan to be able to establish effective working relationships with other community stakeholders, including homeless service providers, residential resources, behavioral health treatment providers, and the Monroe County Office of Mental Health and Department of Human Services.
  - d. Organizational Structure
    - i. Describe the organizational structure under which the program will be operated.
- II. Program Performance/Outcomes
  - i. Describe your agency's plans for tracking and reporting on the following performance and outcome areas:
    - 1. Number of individuals served; frequency of contacts
    - 2. Range and scope of outreach efforts
    - 3. Successfully maintaining housing placements
    - 4. New and ongoing linkages to other required services, including Health Home Care Management
    - 5. Linkage to and maintenance of entitlements
    - 6. Evidence of community collaboration
- III. Cultural and Linguistic Competence:
  - a. Describe how you will ensure that services are culturally and linguistically competent, including how services will be structured to ensure such competence.
- IV. Family and Consumer Voice:
  - a. Describe how your agency incorporates family and consumer voice into all aspects of the organization, including the following:
    - i. Are family members and/or consumers represented on the Agency Board?
    - ii. Does your agency and/or program have Family and/or Advisory Groups? To what extent do consumers participate in those?
- V. Program Implementation Timeframe

- a. Describe your agency’s anticipated timeframe associated with the implementation of the this program. It is anticipated that notification of the SH award will be made by ~~Friday, May 6, 2016~~ **May 13, 2016**. **Monroe County Office of Mental Health approved this extension on April 20, 2016**. Timeframe should delineate time required for implementation activities and the anticipated date that program will be operational. Utilization of a Gantt chart to delineate activities and timeframes is preferred.

Please remember to attach a cover page to the Application.

**APPLICATION BUDGET**

**Application Budget should be included with the application narrative as a separate excel file.**

Annual funding amount for the operation of Homeless Support Services for individuals with behavioral health issues is a maximum of \$150,000.

**Homeless Support Services:**

Provide Expense / Revenue Detail similar to the line items of the DMH-2 Schedule of the Consolidated Fiscal Report (CFR), for the time periods below:

2016 Calendar Year - Projection

2017 Annualized - Projection

Please also provide us with the following for **each** time period:

Breakdown of Direct Care and Non-Direct Care FTE's by position type (including estimated salary and FTE amounts)  
 Number of individuals served

**SELECTION PROCESS**

Proposals received in response to this Request for Proposals by the due date of ~~April 29, 2016~~ **May 6, 2016** will be reviewed by a team established by the MCOMH.

In addition to overall clarity and general comprehensiveness, proposals will be scored based upon the following criteria:

<b>Criteria</b>	<b>Associated Scoring</b>
I. Agency Experience Serving Population of Focus	<b>20</b>
a. Homeless Population, including Best Practices for Homeless Outreach	10
b. Behavioral Health (MH/SU) population	10
II. Program Components	<b>50</b>
a. Operations, Services & Needs	20
b. Utilizes Best Practices for Outreach/Engagement	10
c. Staffing Proposal	
d. Stakeholders Partnership	10
e. Organizational Structure	5
	5
III. Cultural and Linguistic Competence	<b>10</b>
IV. Family and Consumer Voice	<b>10</b>
V. Program Implementation Timeframe	<b>10</b>
<b>Total</b>	<b>100</b>