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# ERIE COUNTY

# REQUEST FOR PROPOSAL (RFP)

TO PROVIDE

**Transitional Supported Housing for those Recovering from Substance Use Related Disorder**

**RFP # 2021-039VF**

September 29, 2021

**Mark O’Brien, LCSW-R, Commissioner**

**Erie County Department of Mental Health**

**Edward A. Rath County Office Building**

**95 Franklin Street**

**Buffalo, NY 14202**

I. INTRODUCTION

The County of Erie, New York (the “County”) is currently seeking Requests for Proposals (RFP) from qualified agencies interested in providing transitional supported housing for individuals and heads of households with families, who are recovering from Substance Use Disorder.

The Treatment Committee of the Erie County Opioid Epidemic Task force has identified increasing access to affordable housing as one of its priority areas. This was decided upon by the Committee after a review of the existing need for such housing and survey data distributed to the community which also identified housing accessibility for those in recovery from a Substance Use Disorder (SUD) as an area of high need. In support of this community identified need, the Erie County Department of Mental Health is pleased to announce this Request for Proposal (RFP).

The primary goal of this initiative is to assist individuals recovering from a Substance Use Disorder in their successful and sustained transition to or continued maintenance in the community with sustained recovery by providing independent scattered site housing and related community supports.

**Eligible Applicants**: Must be a nonprofit 501(c)(3) with experience providing community housing and substance abuse support or treatment services to adults with a primary SUD diagnosis.

**Capacity and Funding:** The awarded contract will require the capacity to house 12 individuals or individuals with families at any point in time. Utilization is expected to be maintained at a minimum of 90% of capacity at all times. Annual funding will be available at a rate of $14,583 per bed prorated during start-up; plus, reasonable 1x start-up expenses. Therefore, $175,000 in annual funding will be available, not inclusive of 1x start-up expenses. In addition, there will also be the potential to earn performance-based incentive dollars, the details of which can be found later in this RFP.

**Target Population:** Those 18 years or older with a primary diagnosis of SUD as indicated by the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)* whose documented housing status clearly and specifically indicates that it is not supportive of recovery and unlikely to become so. Examples include, presently homeless, at risk for homeless, living in a domestically abusive situation, or with others whose behaviors are clearly and demonstrability unsupportive to the individual’s recovery efforts. Although the service is voluntary, if the service candidate accepts admission, there must also be a documented willingness to actively engage in services as defined.

It is the County's intent to select the Proposal(s) that demonstrates a commitment to the individuals served in a manner that leads to sustained recovery and independent and empowered community living.

IMPORTANT: APPLICATIONS THAT ARE NOT 100% COMPLETE AS SPECIFIED WITHIN THIS RFP, EXCEED THE SPECIFIED PAGE LIMITS, OR ARE NOT RECEIVED BY THE SPECIFIED DUE DATE AND TIME WILL NOT BE REVIEWED. ACCORDINGLY, PLEASE READ INSTRUCTIONS CAREFULLY SINCE CRITICAL INFORMATION IN THESE REGARDS MIGHT ONLY BE PRESENTED ONE TIME.

The County reserves the right to amend this RFP. The County reserves the right to reject any or all of the proposals, or any part thereof, submitted in response to this RFP, and reserves the right to waive formalities, if such action is deemed to be in the best interest of the County. The County reserves the right to request additional information from any proposer. While it is expected that a single award will result for this RFP solicitation, the County reserves the right to award negotiated contracts to one or more proposers. Proposals received shall be considered to remain in effect for no less than 6 months and for no more than 18 months from date of receipt.

This RFP is not intended and shall not be construed to commit the County to pay any costs incurred in connection with any proposal or to procure or contract with any firm.

# II. PROPOSAL PROCEDURES

1. **ANTICIPATED SCHEDULE OF PROPOSAL**

The following schedule is for informational purpose only. The County reserves the right to amend this schedule at any time.

Issue RFP: **September 29, 2021**

* The RFP and related attachments can be found and downloaded at the Erie County Department of Mental Health Website at

<https://www3.erie.gov/mentalhealth/request-proposals>.

Emailed Questions Due:

* All questions should be emailed to [Melissa.Stark@erie.gov](mailto:Melissa.Stark@erie.gov) **by 5:00 p.m., October 13, 2021.** **Be sure to include RFP# 2021-039VF as the subject line in your email**. Only emailed questions with the above referenced subject line received by October 13, 2021 at 5 p.m. will receive a response. No individual responses will be sent in response to emailed questions. Rather, responses to these questions will be addressed and posted on the Department of Mental Health website at: [https://www3.erie.gov/mentalhealth/request-proposals](https://www3.erie.gov/mentalhealth/request-proposals%20%20%20%20%20%20October%208)
* Responses will be posted within 3 business days of the due date by which emailed questions are to be received.

Proposals Due: **November 8, 2021, by 3:00 p.m.**

* Respondents are encouraged to begin RFP development prior to the submission of any questions and all questions being answered

Selection Made: On or about **January 8, 2022**

Initiation of RFP Services: No later than **February 28, 2022**, earlier is desired.

1. **APPLICATION REQUIREMENTS**
2. Each proposal shall be prepared simply and economically avoiding the use of elaborate promotional materials beyond what is sufficient to provide a complete, accurate and reliable presentation. An eleven-point Font or larger, standard 8.5 inch by 11-inch paper and, margins no smaller than 0.75 inches are to be used for all materials (excepting for the Fonts, margins and paper size used on County provided forms). All documents are to include page numbers.

Proposals are to be packaged and ordered in the following manner:

1. One-page transmittal letter or memo on agency letterhead.
2. ECDMH RFP Submission Package Checklist (Appendix A) on the top of entire submission package (after agency transmittal letter).
3. Signed Agency Cover Sheet form (Appendix B). The original must have the original signature of the applicant organization’s chief executive. Unsigned proposals will be rejected.
4. Proposal Narrative. This is to be limited to no more than fourteen (14) pages.
   1. NOTE: The fourteen (14) page limit on the Proposal Narrative does not apply to the additional pages comprised by the required Submission Package Checklist, Agency Cover Sheet, Performance Measures Worksheets, up to two-page budget narrative, or other required application materials.
5. Performance Measures Worksheet (Appendix C) for each Performance Measure.
6. Memorandums of Understanding
7. Job Descriptions
8. Budget (Appendix D): Applicants are allowed to attach to the Budget an optional budget narrative, such narrative not to exceed two (2) pages.
9. Appendix F: Personnel Demographics
10. **Required with Submission** **(in addition to items previously described**):

* A letter indicating Disclosure of employees or officers who are currently a county employee or officer, or have been within one year prior to the date of response to this RFP. If none, indicate such in your letter.
* Proposer Certification (Schedule A)
* Insurance Certifications (Schedule B). If current insurances are already received in good order and within effective dates, it is not required to resubmit. A copy is found within this RFP, but can be accessed at <https://www3.erie.gov/mentalhealth/sites/www3.erie.gov.mentalhealth/files/2021-09/fillable-ec-insurance-certificate_blank_0.pdf>
* Erie County Equal Pay Certification (Schedule C). A Copy is found within this RFP, but can be accessed at <https://www3.erie.gov/mentalhealth/sites/www3.erie.gov.mentalhealth/files/2021-09/coe-equal-pay-certification_0.pdf>
* Letter of no more than two (2) pages clearly describing the proposer’s policies and practices pertaining to the participation of Minority Owned Business Enterprises and Women Owned Business Enterprises (MBE/WBE) in the selection of the proposer’s contractors and vendors.

1. One (1) original and five (5) copies shall be submitted in a SEALED package.
2. HOW TO APPLY

* Applicants must complete the documents requested and those provided by the Erie County Department of Mental Health. Applicants may download the application materials by going to the Department’s website <https://www3.erie.gov/mentalhealth/request-proposals>.

(<http://www.erie.gov/health/mentalhealth/>). Please note that ECDMH will not review material beyond the specified page limits.

To the extent feasible, please order your narrative content and the other proposal materials consistent with that indicated in Section II B. Applicant Requirements. If the ordering contradicts submission ordering directions in other sections of this RFP there will no penalty for any resultant document ordering discrepancies in your submission.

* **Submission of the proposals shall be directed to:**

Mark O’Brien, LCSW-R

Commissioner

Erie County Department of Mental Health

Edward A. Rath Building

95 Franklin Street, Room 1237

Buffalo, New York, 14202

**All proposals must be delivered to the above office by November 8, at 3:00 p.m. Proposals received after the above date and time will not be considered. Absolutely no exceptions will be made. The County is under no obligation to return proposals.**

1. NO COMMUNICATIONS OF ANY KIND WILL BE BINDING AGAINST THE COUNTY, EXCEPT FOR THE DEPARTMENT OF MENTAL HEALTH FORMAL RESPONSES TO QUESTIONS, IF ANY, ADDRESSED ON THE WEB.

5. Proposers may be required to give an oral presentation to the County to clarify or elaborate on their written proposal. Those proposers will be notified to arrange specific times.

6. No proposal will be accepted from nor any agreement awarded to any proposer that is in arrears upon any debt or in default of any obligation owed to the County. Additionally, no agreement will be awarded to any proposer that has failed to satisfactorily perform pursuant to any prior agreement with the County.

1. Certified Minority Business Enterprise/Women's Business Enterprise (MBE/WBE) proposers should include the Erie County certification letter with the proposal. Such a letter will not be considered against the page limitation in 1.d. above.
2. If proposer is a Veteran-Owned Business, proposer should include letter indicating company is 51% or more Veteran-owned. Such a letter will not be considered against the page limitation in 1.d. above.

**III. SCOPE OF PROFESSIONAL SERVICES REQUIRED**

**Eligible Population:**

Those 18 years or older with a primary diagnosis of a SUD whose documented housing status clearly and specifically indicates that it is not supportive of recovery. Examples include presently homeless, at risk for homelessness, living in or without an alternative would return to a domestically abusive situation, or living with others whose behaviors are clearly and demonstrability unsupportive to the individual’s recovery efforts. The provider is expected to thoroughly explain the program to the recipient and provide a summary document for the individual to review. This should not only include the expectations but the potential benefits and overarching goals of the program. It is expected that this will be done from a positive and strength-based perspective.

Recipients must agree to and be able to actively plan, engage and participate in the overarching goal of achieving sustained recovery and obtaining independent community housing during the up to 2-year program tenure. As such, individuals should have demonstrated behaviors indicative of their commitment to recovery. Examples include but are not limited to: Engagement in treatment and/or related self-help, documented clean time, commitment to recovery related prescribed medication.

Individuals who are need of a higher level of care, in need of greater supports and/or who are not yet ready to engage in the services offered are not likely to be good candidates and should coordinate with Housing SPOA for linkage to more appropriate services. If the referring provider is a NYS OASAS certified provider, it is suggested that information from their Level of Care for Alcohol and Drug Treatment Referral (LOCADTR) assessment be utilized to help inform an admission decision. While the LOCADTR won’t offer an option for this specific service, its recommendations for higher levels of care may help to rule out this particular service.

Those applying to this RFP acknowledge and accept a no declination policy for those meeting the above referenced eligibility criteria.

**Referrals:**

All referrals must be made via the Erie County Adult Single Point of Access and Accountability (A-SPOA) portal. ECDMH Housing A-SPOA will screen the referral for initial appropriateness and, if deemed likely to be eligible, provide a referral to the provider via the SPOA Management Information System. The provider then must make attempts to reach out to meet with the individual within 3 business days of receipt of referral. The provider will then complete an initial eligibility determination and assessment. Should the provider believe the referred recipient is not eligible, A-SPOA must be notified within 24 hours with rationale for further discussion and determination of next steps. This may include a request for the provider to obtain additional supportive information or acceptance of the declination of the referral. In order to allow A-SPOA to facilitate efficient and effective management of program utilization and timely referrals, the provider will be expected to consistently and accurately maintain SPOA MIS information within 72 hours of client status change.

**Overarching Goals:**

The provider will work with and engage program participants towards: sustaining stable housing; establishing linkages to treatment services and supports facilitative of recovery from substance use disorder and/or co-occurring disorders, supportive services and mainstream benefits; and increasing participants’ employability skills and ultimately employment which helps to facilitate sustainable community integration and sustained independent housing within the time frame of the program’s expected duration. In addition, when appropriate, assisting participants with securing the necessary resources that support healthy family development and functioning are also expected. Care is expected to be trauma-informed and person centered.

Person centered planning should identify goals and needs critical to meet such objectives, especially those pertinent to meeting the goal to maintain recovery from SUD and to successfully transition to successful independent housing in the community. Regular progress must be reviewed with the recipient, other treatment and service supports, and anyone identified by the recipient as desirable to include in their care planning. Revisions to the plan should be regularly made in accordance with success, challenges and identified needs. Assessment, clinical services, collaborative efforts, service plans, and updates must be clearly documented.

All people experiencing housing instability, regardless of their housing history and duration of instability, can achieve housing stability and permanent housing. Some families and individuals may need minimal supports for a brief period, while others may need more intensive and long-term support services. Everyone is “housing ready.” Being in recovery and/or criminal and incarceration histories are not deterrents to housing or an individual’s ability to succeed in maintaining housing. It is expected that the awarded provider be “consumer ready.”

**Length of Stay and Transition:** This service is designed to provide a transitional living situation for a period of up to 2 years. During this time frame and starting on day one, goals to allow for sustained recovery and successful transition to independent housing will be the primary focus of program staff and the recipient of services. When necessary up to a one-year extension can be provided. However, in such cases the Department must be notified at least 6 months in advance of an expected extension request and clear documentation must be provided to support approval of an extension. This must minimally include current barriers, plans to address such barriers including resource and/or skill acquisition, client sign off agreeing with the barriers and recovery plan as well as the client’s active participation in development of the plan. ECDMH commits to rendering a decision within 30 days of receipt. The intervening period may involve requests for further clarification from the provider. If an extension is approved summary updates as to the success and the extent of the progress being made must be provided to the ECDMH every 3 months thereafter. While not desirable and to be avoided, it is possible that successful transition to independent housing may not be accomplished even with this extension. Therefore, it is incumbent upon the service provider to have a proactive, achievable contingency plan developed in collaboration with and signed off by the recipient to secure a suitable alternative in advance of this timeframe. Discharge to a shelter, homelessness or other unstable housing would be considered a significantly negative outcome.

**Rent and Housing Expectations:**

Fair Market Rent as established by the United States Department of Housing and Urban Development (HUD) will help to guide apartment searches. Recipients are expected to contribute 30% of household income to the monthly rent. It is expected that the selected provider would utilize the Tenant Rent Calculation Worksheet (PAS-113H) as found on [Search | Office of Addiction Services and Supports (ny.gov)](https://oasas.ny.gov/search/housing_pas_xxh_)

The Housing Quality Standards as established by U.S. HUD in federal guidelines 24 CFR Section 982.401 must be met. The provider must utilize HUD’s Inspection form<https://www.hud.gov/sites/dfiles/OCHCO/documents/52580A.PDF> or

<https://www.hud.gov/sites/dfiles/OCHCO/documents/52580.PDF> when doing so. These can be accessed by clicking on the specific hyperlink. (Note: If the agency owns the property, the inspection must be completed by a qualified outside independent entity.) Annual inspections by the provider (or outside entity) must also be completed and documented and all needed repairs must be made within 30 days of the inspection. The initial and annual inspections must be maintained in the recipient’s case record.

Occupancy agreement detailing program requirements, recipient rights and grievance procedure must be in place, reviewed, signed by the recipient and filed in the recipient’s case record.

The Program Tenure agreement understanding and acknowledgement of time limited nature of rental subsidy and agreement therein must be reviewed, signed by the recipient and filed in the recipient’s case record.

Housing must be integrated in the community and, as reasonable, include a choice of options which provide opportunities for community engagement, access to services and employment opportunities. The options presented should ensure the resident’s rights of privacy, including their right to dignity, respect, freedom from coercion, or fear of any retaliation.

The lease for the selected property is expected to be in the recipient’s name.

Person-centered planning with the recipient shall work towards successful transition within the parameters of the program’s duration, starting day one. Care is expected to be trauma-informed.

On site case management and coordination is a critical component of this service. The development of the therapeutic relationship between the housing case manager-coordinator and the recipient is seen as a key determinant of success. As a result, it will be expected that a minimum of two face to face visits occur each week during the first 1-2 months of the program. A portion of these can occur in the community, if desired by the recipient. However, during this initial timeframe at least two visits/month should occur in the recipient’s residence. Afterwards and through the duration of the program, at least 2 face to face contacts per month are expected, at least one of these must be in the recipient’s residence. In addition, in-person visits should be augmented by phone and digital communications. **These are viewed as minimums and it is understood that contact will be based on recipient identified need and clinical indications which should be proactively monitored.** Although encouraged, but not explicitly required, consideration should be given for how the service will integrate support from those with lived experience. A plan for the provision of on-call response during non-traditional hours should be incorporated into the service structure.

The Case Manager-Coordinator will be expected to facilitate coordinated care planning along with the recipient of services and be in frequent contact with the individual’s treatment/service provider(s) and ideally with the recipient’s recovery support network to ensure care planning activities support SUD recovery efforts and successful transition from the service. This activity must be clearly documented. Memorandums of Understanding with treatment providers, SUD support services, and other likely provider community supports outlining their agreement to participate in such activities along with roles and responsibilities should be included as part of the application package. Coordinating such efforts via virtual meetings is allowable where appropriate and clinically indicated.

A critical component of this initiative is facilitating empowerment and entry to, return to, or enhancement in the recipient’s place in the workforce. Linkages to vocational/educational counseling services that include job development, employment supports, and access to skills training to aid career growth are considered essential. It will be incumbent upon the applicant to submit a plan that demonstrates a commitment to a path to employment for all recipients. This may include the direct provision of such services and/or a referral agreement to one or more such services. Having more than one option would provide alternatives which may better suit the recipient’s desires/needs and will thus be scored more favorably. Minimally such services should include job development, employment related support groups, and access to skills training to aid career growth. Whether or not the applicant intends to provide such services directly or via a service agreement with another provider(s), it will still be **expected that the housing team will create and facilitate an environment which supports, encourages and provides a culture of hope, possibility, success, and empowerment with respect to employment.** **Achievement of related outcomes will be closely monitored.** The vocational service provider should be a regular participant in care planning and coordination meetings. This provider should also foster a similar culture. Applicants should clearly indicate how this will be achieved and maintained.

**Case records:**

Recipients records must minimally contain the following:

* Referral
* Occupancy and program tenure agreement
* Assessment and relevant updates
* Housing inspection
* Service plan to be completed within 30 days of admission and related updates to occur no less than every 90 days
* Case notes which show the date, location, mode, and duration of client contact detailing current issues discussed as these relate to the plan of care, coordination with other services providers, supports and/or significant others
* Request to ECDMH for extension, where required
* Discharge summary showing final disposition and active community linkages
* Income verification to be utilized towards rent calculation, updated annually
* Consents as appropriate
* Verification of employment and sustained independent housing

**Minimum Staffing Expectation:**

* Supervisor (can be an appropriate portion of an FTE): Masters in human services with at least 5 years direct experience providing services to a primarily SUD population, at least 3 years of which must include experience providing and/or supervising housing and/or housing case management/care coordination. Having a CASAC is seen as a plus.
* SUD Housing Case Manager-Coordinator: Bachelor’s degree in human services and 2 years direct experience providing services to a primarily SUD population, at least one year of which must include experience providing housing and/or housing case management/care coordination. CASAC and lived experience seen as a plus.
* Staffing plan which clearly articulates coverage in the event of vacation, prolonged leave and/or turnover.

**Training for staff and supervisor** should include therecognition of the signs and symptoms of severe reactions to or overdose on substances, including but not limited to the use of naloxone overdose prevention kits. New staff must receive such training as early as possible but within 3 months of hire, unless there is documented evidence of such training within the last 12 months of date of hire, and be provided access to such kits. In addition, training on the value and ability of employment for recipients should occur as early as possible but within the first 6 months of operation and then minimally on an annual basis each year. Staff must also attend a training on cultural diversity and/or racial equity asearly as possible but within the first 6 months of being hired, unless there is documentation of such within the last 12 months of date of hire. On an ongoing basis staff experience, education, and career goals should be evaluated to determine an appropriate staff training plan that is facilitative of the service goals and objectives for the intended recipients. These may include, but are not be limited to, trauma informed care, motivational interviewing and relevant addiction and mental health trainings.

**Required Process and Program Outcomes:**

Applicants should indicate their expected targeted level of achievement on the process and program outcomes on the Performance Measures Worksheet (Appendix C). Outcomes should reflect reasonable expectations based on historical experience and/or documented national norms and the expected success of quality improvement efforts. While applicants are encouraged to push beyond the limits of past performance, outcomes should be presented with the understanding that actual achievement significantly below targeted levels as presented on the RFP may lead to a required corrective action plan. Upon commencement of services, please note that all outcomes must be further reported by race, ethnicity, age and gender.

* Utilization of bed days maintained at >90% of capacity
* % of referrals received that are accepted
* Median days from acceptance of referral to time housed
* % of accepted referrals housed
* % of individual case months, after month two, with at least 2 f:f visits/month
* % of individuals admitted who are independently housed at discharge within 24 months of being housed.
* % of individuals admitted who are independently housed at discharge within 36 months of being housed.
* At discharge, the % of individuals admitted who are discharged within 24 months of admission, who have documented, uninterrupted employment of at least 35 hours/week for a minimum of 60 days prior to discharge
* At discharge, the % of individuals admitted who are discharged within 36 months of admission, who have documented, uninterrupted employment of at least 35 hours/week for a minimum of 60 days prior to discharge
* % of individuals admitted who are in formal education (accredited degree or accredited certification) at discharge
* % of individuals admitted with sustained recovery at discharge ( this will be mutually defined by the awarded provider and ECDMH)

It is the expectation that the selected awardee will have the ability, commitment and contractual obligation to rigorously evaluate their performance against the performance measures delineated within this RFP. Proposals must clearly demonstrate the applicant’s capacity to perform such evaluation in a manner that optimizes data accuracy and validity.

The applicant should include clear and concise detail that describes the program’s ability to utilize an Electronic Health Record to support clinical service documentation, Quality Improvement process, data informed practice, and Utilization Management, to continually assess and where necessary, intervene with respect to performance. The applicant must c**learly articulate and demonstrate a successful history of doing so and a commitment to doing so within this specific service.**

Successful applicants should expect site visits by the Department to review the program.

Performance reviews will be regularly completed and at the conclusion of year 3 and the receipt of relevant data, a review based on performance and outcomes will occur to help inform a decision to maintain, re-bid or end the service.

**Performance Incentive:**

Beyond the baseline funding of $175,000 annually, the following incentives are possible for the awarded provider:

* Achieving documented uninterrupted employment of at least 35 hours/week for at least 60 days prior to discharge and at least 60 days thereafter ($2,000 per occurrence)
* Achieving documented, stable, independent housing at discharge and at least 60 days thereafter within 24 months of admission ($1,500 per occurrence)

**Line item budget:**

Please provide a line item budget (see Appendix D) and related narrative which clearly justifies the funding request within your proposal. Reasonable 1x costs associated with startup are allowable. Please be sure to clearly identify the number of FTE’s by each staffing title. Please be sure to list any ongoing in-kind related costs and/or revenue offsets for which you will not be seeking funding and have an identified revenue source. You may attach a up to a two (2) page narrative to your budget. This up to two-page budget narrative/justification will not count towards the 14-page maximum for the narrative.

**Collaboration between the provider and ECDMH:**

ECDMH is committed to the success of this service and learning from the experience. As a result, ECDMH wishes to maintain a collaborative relationship with the provider and those applying should be willing to have an open, transparent, collaborative relationship with ECDMH. It’s expected that regular dialogue with the provider about all aspects of the program will occur to learn of successes, barriers, challenges, and where warranted, potential modifications. This will include consistently scheduled in-person and virtual meetings which should include program direct service and administrative staff and the sharing of program data. These meetings will be transparent and solution oriented with the welfare and benefit of the current and future recipients at the uppermost forefront.

**The Proposer’s level of Minority Owned Business Enterprises and Women Owned Business Enterprises** (**MBE/WBE) Participation:**

The Erie County Legislature enacted Local Law No. 5 requiring a minority and women-owned business utilization commitment by persons or firms contracting with the County of Erie for supplies, materials, equipment, and insurance. A summary can be viewed at [MBE/WBE Commitment | Purchasing (erie.gov)](https://www2.erie.gov/purchasing/index.php?q=mbewbe-commitment).

In an effort to support MBE/WBE participation a portion of this RFP will be scored based on the proposer’s participation of MBE/WBE in the selection of the proposer’s contracts and vendors. Your response should include a letter of no more than two (2) pages clearly describing the proposer’s policies and practices pertaining to the level of MBE/WBE participation in your selection of contractors and vendors.

**PERFORMANCE COMPONENT PROGRAM NARRATIVE**

Most of the information described in this section is to be presented within the Program Narrative. The rest is to be presented using designated forms. When required forms are used the information presented thereon may be incorporated in the scoring of that aspect of the narrative.

It is strongly recommended that responses to each of the items below be clearly labeled within the narrative. This will help to assure that the reviewer/s will be able to readily identify the material responsive to each of these items for scoring purposes. In addition to the scoring, **the Department’s collective experience with the applicant’s performance, responsiveness, and level of cooperation with Adult Single Point of Accountability/Access will be weighed as part of any final determination.**

**For the Narrative section, please use the following heading bars in the document, as listed in the application below:**

* Program Design & Implementation (100 Points)
* Workforce, Documentation, Accountability (30 Points)
* Performance Measures (20 Points)
* Budget (30 Points)
* Minority Owned Business Enterprises and Women Owned Business Enterprises (MBE/WBE)

(10 Points)

Exhibits, appendices, attachments and other documents that are not specified as required are not allowed and will be discarded without acknowledgement. Please do not include copies of research, annual reports, or other unrequested material.

**Scoring Tool:**

**In addition to the above, ECDMH has provided a copy of the scoring tool (Appendix E) for your reference and will be utilized in the evaluation of the applications to this RFP.** **Applicants are strongly advised to consult the tool and utilize it when crafting a response to this application.**

**The results of possible agency interviews may be factored into such a qualitative evaluation.**

**In addition, the Department’s collective experience with the applicant’s performance and responsiveness, as well as the level of cooperation with Adult Single Point of Accountability/Access will be weighed as part of any final determination.**

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| --- | --- |
| **Appendix E: Erie County Department of Mental Health**  **Transitional Supported Housing for those Recovering from Substance Use Related Disorder**  **Scoring Tool**  **RFP# 2021-039VF** | |
| **PROGRAM DESIGN and IMPLMENTATION.** | |
| Program Design and Implementation  1a | **Describe your agency’s experience with providing the target population with the identified service.** |
| 1a Score | 0 = No response, or Applicant states they have experience either with housing or serving those with a primary SUD diagnosis. Few other details provided. **Description does not meet eligibility criteria.**  5 = Applicant provides a clear description pertaining to their experience providing both community-based housing and serving those with a primary SUD diagnosis and the related relevant service plan goals.  10 = In addition to the positive characteristics for a score of “5” applicant states they also provide care management/case management services to the identified population. Description of experience provides clear and convincing evidence as well as demonstrates a strong history in all areas relevant to this RFP. Applicant’s description demonstrates that it is presently certified and/or funded by NYS OASAS or provides convincing detail for the reviewer of their experience and expertise providing services and supports for those with a primary Substance Use Disorder. |
|  |  |
| Program Design and Implementation  1b | **Describe your agency’s policies, procedures and practices which ensure adherence to person centered planning and the principals of trauma informed care.** |
| 1b Score | 0 = No response.  1 = Applicants description is limited in nature or scope and/or does not reference both components referenced above.  5 = Applicant’s description references both components described above and has policies and procedures in place which led the reviewer to reasonably be assured that the services provided via this RFP would regularly and consistently be provided in a person-centered manner while adhering to the principals of trauma informed care  10 = In addition to the positive characteristics for a score of “5” agency’s description includes consistent training, targeted supervision and/or a Quality Assurance component that regularly reviews such practices which the reviewer can be reasonably assured provides for corrective action of improvement when appropriate. |
|  |  |
| Program Design and Implementation1c | **Describe how you intend to complete your screening and assessment process to meet the benchmarks described within the RFP and determine eligibility? What tool(s) will you utilize to do so? What is your history with developing and maintaining relationships with landlords.** |
| 1c Score | 0 = No response.  1 = Applicant describes a screening and assessment process that is vague or ambiguous. Little or no reference is made to how it intends to meet the benchmarks and/or determine eligibility. No description of the assessment tool. Has no history with developing/maintaining relationships with landlords.  5 = Applicant describes a screening and assessment process that is clear and the narrative indicates to a reasonable degree that the process outlined will meet the benchmarks and to assessment tool will be effective in appropriately determining eligibility. Description of landlord relationships is limited.  10 = In addition to the positive characteristics for a score of “5” agency’s description includes clear evidence that the assessment is relevant to determine the life areas that are relevant to efficacious service delivery related to the intent of the service outcomes outlined in the RFP description. Description of developing/maintaining relationships with landlords is clear and provides the reviewer reasonable assurance that the provider will effectively manage/nurture and trouble shoot potential community housing resources. |
|  | |
| Program Design and Implementation  1d | **Describe your plan to ensure that there is coordinated care planning with the recipient of services and stakeholders (including family/significant others) relevant to the recipient’s service plan goals. Include MOUs as described in the RFP narrative.** |
| 1d Score | |  | | --- | | 0 = No response.  1 = Applicant describes collaboration and coordination as consisting of mostly written communication  and correspondence. Few if any MOU’s are provided. Little if any reference is made about the recipient’s role.  5 = Applicant describes collaboration which includes written and verbal communication but the description includes little if any in person or virtual communication in a collaborative fashion with several  stakeholders relevant to the recipient and recipient’s successful discharge from this service. MOU’s  may be included in the submission but they are not specific to this service and/or do not specifically  commit the signatory to participating in active care planning sessions. Reference for including  recipient’s active role and/or family/significant others is made but it is not clear.  10 = In addition to the positive characteristics for a score of “5” agency’s description includes  intent and procedure to maximize collaborative care planning with multiple stakeholders in a  simultaneous or multi-party “session” that is relevant to the recipient and the recipient’s successful discharge from the services. MOU’s are included that support the MOUs  signatory’s active participation in such care planning. Description of philosophy and process for  including the recipient in an active role and that of the family/significant others are detailed and provides the reviewer with reasonable assurance that where appropriate, efforts to engage family/significant others will be a valued and a consistent aspect of collaborative service planning. | |
|  | |
| Program Design and Implementation  1e | **Recognizing that relapse is often part of recovery, describe how you will proactively assess potential indications of relapse and should a relapse occur work to facilitate a return to cognitions and behaviors that are facilitative of a return to a healthier lifestyle. Provide a description of your agency’s retention policy for clients served in this program who are in relapse and actively using substances.** |
| 1e Score | 0 = No response.  1 = Applicant describes a process that is vague or ambiguous. Policy and procedures are not indicative of ongoing assessment, is unforgiving of relapse and/or does not include many or few facilitative interventions.  5 = Policy and procedure is clear and specific, provides for regular assessment, and demonstrates to the reviewer the intent of the provider to be proactive and facilitative during a relapse without fear of discharge due simply to use or related behaviors without opportunities for intervention.  10 = In addition to the positive characteristics for a score of “5” agency policy and procedures clearly describe collaboration and communication with stakeholders important to the recipient’s recovery as part of the proactive actions and interventions supportive of recovery. |
|  |  |
| Program Design and Implementation  1f | **Describe your agency policy, practices and history which supports empowerment facilitative of successful transition to independent housing within the prescribed time frame of the program. Provide examples and relevant data demonstrating effective outcomes. Describe how you will collaborate with the recipient and community supports to build sustainable skills that will support the individual’s ability to successfully navigate future situations that may disrupt or risk continued community tenure, and result in effective linkages to natural and community resources that will facilitate sustainability of the outcomes.** |
| 1f Score | 0 = No response.  1 = Applicant describes a policy, procedure and practices that are vague or ambiguous.  5 = Policy, procedure, and practices are clear and specific and demonstrate to the reviewer that the practices of the applicant will support empowerment wherever and whenever possible. Description includes innovative and creative services and supports and how those will be provided to the target population by other organizations or by program staff from other programs.  10 = In addition to the positive characteristics for a score of “5” agency provides creative examples and supplies data that supports the effectiveness of what is described. The description provides a clear sense and service methodology that places a priority and clear intent on sustainable supports and related skill development that will help the individual successfully navigate future situations that may disrupt or risk continued community tenure. Narrative provides the reviewer with reasonable assurance that the interventions and practices will result in successful outcomes within the prescribed time frame of the program. |
|  |  |
| Program Design and Implementation  1g | **Describe the policy, practices and history which will support early, active and direct paths to employment and/or educational related outcomes for consumers. Provide examples and data demonstrating effective outcomes. Indicate if this will be provided in house and/or by linkage to an existing service provider. Include related MOUs from outside providers.** |
| 1g Score | 0 = No response.  1 = Applicant describes a policy, practices and history that are vague or ambiguous and/or the answer to the above is incomplete.  5 = Description of the policy, practices and history are clear and specific and demonstrate to the reviewer that the practices of the applicant will support the achievement of positive employment and/or educational outcomes. Only one service provider is offered as a potential referral linkage.  10 = In addition to the positive characteristics for a score of “5” agency relevant data is provided for the same or similar service. Description provides the reviewer with a reasonable expectation that employment and educational attainment will be “felt” by recipients of this service as possible, hopeful and achievable. Multiple potential referral linkages are included with the corresponding MOU(s) included. These MOU(s) will clearly indicate their willingness to engage and participate in the collaborative case planning described earlier. The description clearly describes how the housing staff will regularly and consistently participate in vocational services care planning and coordination meetings. Narrative provides the reviewer with reasonable assurance that the applicant places a priority on employment/educational outcomes and philosophically believes that such outcomes are not only possible within the scope of this service, but critical. |
| Program Design and Implementation  1h | **Describe your plan for providing 24/7 afterhours coverage and response.** |
| 1h Score | 0 = No response.  1 = Applicant describes a plan that is vague or ambiguous and/or the answer to the above is incomplete; or does not provide for a timely response to the consumer.  5 = Description provides a clear and reasonable plan for afterhours coverage that is responsive to the recipients.  10 = In addition to the positive characteristics for a score of “5” agency plan describes a reasonable process to “check in” with the individual subsequent to the initial afterhours contact. |
|  |  |
| Program Design and Implementation  1i | **Describe the process, both administrative and clinical, by which you will seek to maximize the likelihood that the great majority of recipients will successfully transition from this program within 24 months of being housed. The description should include a feedback loop to determine the effectiveness of any interventions and incorporate the experience of recipients.** |
| 1i Score | 0 = No response.  1 = Applicant describes a plan that is vague or ambiguous and/or the answer to the above is incomplete.  5 = Description includes a clear process by which recipient outcomes will be collected, reviewed and analyzed inclusive of reasonable time frames. It is not clear that recipients’ experiences will help shape the data review.  10 = In addition to the positive characteristics for a score of “5” agency plan process includes clear timeframes for regular review, corrective action and reassessment. Clear communication and collaborative problem solving between administrative and clinical teams is obvious. Current and past recipients of service are seen as key informants and included as part of the process. |
|  |  |
| Program Design and Implementation  1j | **As an attachment please provide the Job Description for staff and supervisor as indicated on the Budget demonstrating its relevancy to the delivery of services and attainment of the goals as described within the RFP. Do you plan to include support from those with lived experience and if so, how?** |
| 1j Score | 0 = No response.  1 = Job Descriptions are generic and at best loosely associated with the delivery of services and attainment of the goals as described within the RFP narrative.  5 = Job Descriptions demonstrate relevancy to the delivery of services and attainment of goals described within the RFP narrative. Reviewer believes that the appropriate amount of experience/education is being required for the supervisor and direct care staff positions.  10 = In addition to the positive characteristics for a score of “5” job description of the supervisor and/or the direct care staff places a value on support from those with lived experience and/or lived experience is clearly incorporated in another appropriate manner. |
|  |  |
|  | **Total Score for Program Design and Implementation =** |

|  |  |
| --- | --- |
| **Workforce, Documentation, Accountability** | |
| Workforce, Documentation, and Accountability 2a | **Program capacity is 12 consumers. It is expected that at least a 90% (11) of the beds are full at all times. SPOA will work with the successful applicant and community collaborators to ensure maximum capacity is achieved. However, maintaining workforce and staffing that reflects the population served remains a challenge and such issues can negatively impact the success of a program. Please describe how your agency addresses workforce issues. Describe your retention efforts and provide your rate of** **staff turnover for the past two years specifically related to housing and care management/coordination programs. How will you meet the needs of the target population in times of staffing shortages?** **Describe your agency’s practices for promoting equity, diversity and inclusion at each stage of planning for, recruiting, hiring and retaining diverse staffing. Describe your agency’s experience/ability to hire Spanish speaking or other staff with a language other than English.** |
| 2a Score | 0 = No response  1 = Response acknowledges workforce issues but provides no description on how to address it and offers little in the way of proactive staff retention efforts. No specific plan is identified on how to assist in a sustainable transition. Data related to staff turnover is not provided and/or it appears significantly higher than other respondents.  5 = Minimal details are provided to address workforce issues. Agency provides a description of reasonable retention efforts and a plan to sustain transition. Staff turnover data is reasonable and within range of other respondents. Description of hiring practices which promote equity, diversity and inclusion are apparent.  10 = Specific plans and proactive retention efforts with evidence of positive impact are provided. Agency provides examples of when staffing vacancies was impacting services and the strategic interventions implemented to ensure proper care was provided to people served. Staff turnover data is reasonable and within range of other respondents. Description of hiring practices which promote equity, diversity and inclusion are apparent through recruitment, hiring and retaining diverse staffing; included are Personnel Demographics statistics. Demographics appear to the reviewer to be consistent with narrative of the proposer and demonstrates at least a degree of diversity.  . |
|  | |
| Workforce, Documentation, and Accountability 2b | **Describe your agency’s historic and planned ability to properly document services performed, record, track and analyze outcomes in a manner that facilitates sound clinical practice and data informed decision making and process improvement. Describe how administration and clinical staff will transparently collaborate with respect to Quality Assurance (QA) and Quality Improvement (QI). What role will the recipient’s experience play in this respect? Provide a timeframe for review periods.** |
| 2b Score | 0 = No response  1 = Response doesn’t clearly articulate the utilization of an Electronic Health Record for appropriately recording clinical services. Little if any description of the QI/QA process is provided or what is provided is vague or ambiguous in its response to the above questions. No timeframe is provided.  5 = Description includes a clear description of a functioning EHR for the services to be provided that is inclusive of case record documentation and outcome tracking. Description of process for QI/QA is limited. Description of role of recipient feedback is not clear or limited. Time frame for review is provided.  10 = Description of agency’s historical use of EHR and a related QA/QI process is very clear and robust with clear timeframes for doing so in a collaborative manner with administration and clinical staff. Description clearly indicates the value of and a process for including recipient feedback in improving service delivery. Provider’s description provides the reviewer with reasonable confidence that the service provider’s general operating philosophy places a priority on QA/QI processes and will be regularly and consistently carried out as an integral aspect of this service. |
|  |  |
| Workforce, Documentation, and Accountability  2c | **Please describe your staff training plan to meet the requirements as outlined in the RFP.** |
| 2c Score | 0 = No Response  1 = Description of plan is ambiguous or vague and does not provide the reviewer with clear confidence that it will be met or met within the required guidelines.  5 = Description of plan is clear, reasonable and concise.  10 = Response also includes knowledge of training resources that will allow the agency to meet required timeline. |
|  |  |
|  | **Total Score for Workforce, Documentation, and Accountability =** |
|  | |

|  |  |
| --- | --- |
| **PERFORMANCE MEASURES** | |
| Performance Measures  3a | **Applicants should provide the targeted level of achievement for each outcome for the 2022 startup year and 2023. Outcomes should neither be low balled or unreasonably high, but based on historical performance in other similar programs with an allowance for anticipated improvements based on QA and QI activities. Each outcome should include a clear and reasonable justification for the anticipated target level.** **While applicants are encouraged to push beyond the limits of past performance, outcomes should be presented with the understanding that actual achievement significantly below targeted levels as presented on the RFP may lead to a required corrective action plan.** |
|  |  |
| 3a Score | 0 = Did not answer  1 = Percentages are indicated but lack sufficient information/explanation for the data used to determine performance measures, and/or the data provided is limited in nature.  5 = Percentages chosen are presented with justification based on comparable agency experience or national information used from the past two years to establish performance measures or sufficient explanation was given for the forecasted data; in the absence of historical data to establish performance measures as described in the RFP, the description of closely aligned historical outcome data is provided with a brief but clear explanation that explains the data source and pertinent service. The historical data provided is relevant. Targeted achievement levels are not unreasonably outside the range of other applicants.  10 = In addition to the positive score of “5”, the description and data conveys a sense that achievement of specified performance outcomes are highly likely. Outcomes and related justification indicate to the reviewer a desire to achieve beyond past performance. Justification is relevant and reasonable. |
|  | |
|  | |
| **Total Score for Performance Measures Total = x 2 weighting =** | |

**Budget Narrative**

Provide a budget narrative and supporting spreadsheet indicating your funding request. This should indicate and justify your request for funding. All expenditures should be in support of the achievement of the stated outcomes within this RFP. Where you will provide in-kind staffing, support or services please indicate the same.

|  |  |
| --- | --- |
| PERFORMANCE COMPONENT BUDGET (Appendix D) | |
| Budget  4a | Provide a budget narrative and spreadsheet (Appendix D) that outlines and clearly justifies your request for funding up to $175,000. Indicate if budget will include reasonable one-time funding to assist with relevant start-up expenditures. These one-time funds, if any, can be in addition to the $175,000 base funding. Provide detail w/n the narrative for any line items as directed on Appendix D. Please list any in-kind related costs for which you will not be seeking financial support. (Budget Narrative and spreadsheet are considered in this scoring) |
| Budget  Score  4a | 0 = Missing or incomplete  1 = Complete, but reflects inconsistencies with component’s program narrative, especially in regard to staffing and/or is not clear to the reviewer.  5 = Complete, clear and appears realistic. Program narrative and budget are consistent. Additional information where requested is provided. However, requested startup expenses are not entirely clear, reasonable or well justified.  10 = In addition to reference for a “5”, it is without any notable inconsistencies. Appears viable. Funding utilization is clear in its detail supportive of the service to be performed and the achievement of desired outcomes. One-time start-up expenses are clearly identified, reasonable and justified. |
|  | |
| **Total Score for Budget = x 3 weighting=** | |

|  |  |
| --- | --- |
| **MINORITY OWNED BUSINESS ENTERPRISES AND WOMEN OWNED BUSINESS ENTERPRISES (MBE/WBE)** | |
| MBE/WBE  5a | In an effort to support MBE/WBE participation a portion of this RFP will be scored based on the proposer’s participation of MBE/WBE in the selection of the proposer’s contracts and vendors. Your response should include a letter of no more than two (2) pages clearly describing the proposer’s policies and practices pertaining to the level of MBE/WBE participation in your selection of contractors and vendors. |
| MBE/WBE  5a | 0 = Missing or incomplete  1 = Complete, but policy and procedures are not specific to MBE/WBE participation.  5 = Complete, clear and specific to MBE/WBE. However, there are no goals established and/or no existing documentation of MBE/WBE contractors or vendors selected.  10 = In addition to reference for a “5”, the proposer has several components which would support selection of MBW/WBE. These may include but are not limited to keeping a source list of MBE/WBEs, allowing sufficient time for proposals to be received, and/or policy explicitly states an organizational goal for contracts provided to MBE/WBE. |
|  | |
| **Total Score for MBE/WBE Participation =** | |
|  | |

|  |
| --- |
| **Section Scores:**  **Program Design & Implementation:**  **Workforce, Documentation, Accountability:**  **Performance Measures:**  **Budget:**   * **Level of Minority Owned Business Enterprises and**   **Women Owned Business Enterprises (MBE/WBE):**    **Total Score All Areas:** |
| **The results of possible agency interviews may be factored into such a qualitative evaluation.**  **Potential follow up questions for the agency:** |

**Deputy County Executive Approval of Scoring Tool**

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**Deputy County Executive Maria Whyte**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date**

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| --- | --- |
| **ERIE COUNTY DEPARTMENT OF MENTAL HEALTH**  **Transitional Supported Housing for those Recovering from**  **Substance Use Related Disorder**  **RFP # 2021-039VF**  **Appendix B: AGENCY COVER SHEET FORM - APPLICANT INFORMATION**  **Instructions for completing Appendix B**  **(This is to be the top sheet for the entire application package.)** | |
| **Organization Name** | **Please list the official name of your organization.** |
| **Mailing Address** | **Please list the official address of your organization for mailing purposes; include city and ZIP code information.** |
| **Primary RFP Contact** | **Please provide name, telephone number, FAX number, email address and, complete mailing address if different than the organizational mailing address above, for the primary contact for this proposal. Should you have a change in this information after submitting your application, please be sure to provide the updated information to Melissa.Stark@erie.gov** |
| **Alternate RFP Contact** | **Please provide name, telephone number, FAX number, email address and, complete mailing address if different than organization mailing address above, for an alternate contact for this proposal. Should you have a change in this information after submitting your application, please be sure to provide the updated information to** [**Melissa.Stark@erie.gov**](mailto:John.Grieco@erie.gov) |
| **Leadership** | **Please list the name of your organization’s Executive Director, President or Chief Executive Officer. If your organization has interim leadership, please list “Interim” in parentheses.** |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Chief Executive Officer Signature (as identified above) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title

**Appendix B: Cover Sheet**

**Transitional Supported Housing for those Recovering from Substance Use Related Disorder**

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| --- | --- |
| **ERIE COUNTY DEPARTMENT OF MENTAL HEALTH**  **RFP # 2021-039VF**  **Appendix B: AGENCY COVER SHEET FORM - APPLICANT INFORMATION**  **Please refer to the instructions within the RFP for completing Appendix B**  **(This is to be the top sheet for the entire application package.)** | |
| **Organization Name** |  |
| **Mailing Address** |  |
| **Primary RFP Contact** |  |
| **Alternate RFP Contact** |  |
| **Leadership** |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chief Executive Officer Signature (as identified above) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title

**IV. STATEMENT OF RIGHTS**

**UNDERSTANDINGS**

**Please take notice**, by submission of a proposal in response to this request for proposals, the proposer agrees to and understands:

* that any proposal, attachments, additional information, etc., submitted pursuant to this Request for Proposals constitute merely a suggestion to negotiate with the County of Erie and is not a bid under Section 103 of the New York State General Municipal Law;
* submission of a proposal, attachments, and additional information shall not entitle the proposer to enter into an agreement with the County of Erie for the required services;
* by submitting a proposal, the proposer agrees and understands that the County of Erie is not obligated to respond to the proposal, nor is it legally bound in any manner whatsoever by submission of same;
* that any and all counter-proposals, negotiations or any communications received by a proposing entity, its officers, employees or agents from the County, its elected officials, officers, employees or agents, shall not be binding against the County of Erie, its elected officials, officers, employees or agents unless and until a formal written agreement for the services sought by this RFP is duly executed by both parties and approved by the Erie County Legislature, the Erie County Fiscal Stability Authority, and the Office of the Erie County Attorney.

In addition to the foregoing, by submitting a proposal, the proposer also understands and agrees that the County of Erie reserves the right, and may at its sole discretion exercise, the following rights and options with respect to this Request for Proposals:

* To reject any or all proposals;
* To issue amendments to this RFP;
* To issue additional solicitations for proposals
* To waive any irregularities in proposals received after notification to proposers affected;
* To select any proposal as the basis for negotiations of a contract, and to negotiate with one or more of the proposers for amendments or other modifications to their proposals;
* To conduct investigations with respect to the qualifications of each proposer;
* To exercise its discretion and apply its judgment with respect to any aspect of this RFP, the evaluation of proposals, and the negotiations and award of any contract;
* To enter into an agreement for only portions (or not to enter into an agreement for any) of the services contemplated by the proposals with one or more of the proposers;
* To select the proposal that best satisfies the interests of the County and not necessarily on the basis of price or any other single factor;
* To interview the proposer(s);
* To request or obtain additional information the County deems necessary to determine the ability of the proposer;
* To modify dates;
* All proposals prepared in response to this RFP are at the sole expense of the proposer, and with the express understanding that there will be no claim, whatsoever, for reimbursement from the County for the expenses of preparation. The County assumes no responsibility or liability of any kind for costs incurred in the preparation or submission of any proposal;
* While this is a RFP and not a bid, the County reserves the right to apply the case law under General Municipal Law § 103 regarding bidder responsibility in determining whether a proposer is a responsible vendor for the purpose of this RFP process;
* The County is not responsible for any internal or external delivery delays which may cause any proposal to arrive beyond the stated deadline. To be considered, proposals MUST arrive at the place specified herein and be time stamped prior to the deadline

**EVALUATION**

The following criteria, not necessarily listed in order of importance, will be used to review the proposals. The County reserves the right to weigh its evaluation criteria in any manner it deems appropriate:

* Proposer’s demonstrated capability to provide the services.
* Evaluation of the professional qualifications, background and resume(s) of individuals involved in providing services.
* Proposer’s experience to perform the proposed services.
* Proposer’s financial ability to provide the services.
* Evaluation of the proposed cost/s. It should be noted that while cost is not the only consideration, it is an important one.
* A determination that the proposer has submitted a complete and responsive proposal as required by this RFP.
* An evaluation of the proposer’s projected approach and plans to meet the requirements of this RFP.
* The proposer’s presentation at and the overall results of any interview conducted with the proposer.
* Proposers MUST sign the Proposal Certification attached hereto as Schedule “A”. Unsigned proposals will be rejected.
* Level of Minority Owned Business Enterprises and Women Owned Business Enterprises (MBE/WBE)
* Proposers may be required to give an oral presentation to the County to clarify or elaborate on the written proposal.
* No proposal will be accepted from nor any agreement awarded to any proposer that is in arrears upon any debt or in default of any obligation owed to the County. Additionally, no agreement will be awarded to any proposer that has failed to satisfactorily perform pursuant to any prior agreement with the County.

## CONTRACT

After selection of the successful proposer, a formal written contract will be prepared by the County of Erie and will not be binding until signed by both parties and, if necessary, approved by the Erie County Legislature, the Erie County Fiscal Stability Authority and the Office of the County Attorney. NO RIGHTS SHALL ACCRUE TO ANY PROPOSER BY THE FACT THAT A PROPOSAL HAS BEEN SELECTED BY THE COUNTY FOR SUBMISSION TO THE ERIE COUNTY LEGISLATURE AND/OR THE ERIE COUNTY FISCAL STABILITY AUTHORITY FOR APPROVAL. THE APPROVAL OF SAID LEGISLATURE AND/OR AUTHORITY MAY BE NECESSARY BEFORE A VALID AND BINDING CONTRACT MAY BE EXECUTED BY THE COUNTY.

The term of the contract shall be for a one (1) year period commencing on or about January 1, 2022 (or less than one year commencing after January 1, 2022 if necessitated by delays associated with the RFP and contracting processes), and terminating December 31, 2022, The County, in its sole discretion may extend the agreement beyond is initial term for up to an additional year at one-year periods at the same prices and conditions.

## INDEMNIFICATION AND INSURANCE

The proposer accepts and agrees that language in substantially the following form will be included in the contract between the proposer and the County:

“In addition to, and not in limitation of the insurance requirements contained herein the Consultant agrees:

(a) that except for the amount, if any, of damage contributed to, caused by or resulting from the negligence of the County, the Consultant shall indemnify and hold harmless the County, its officers, employees and agents from and against any and all liability, damage, claims, demands, costs, judgments, fees, attorneys' fees or loss arising directly or indirectly out of the acts or omissions hereunder by the Consultant or third parties under the direction or control of the Consultant; and

(b) to provide defense for and defend, at its sole expense, any and all claims, demands or causes of action directly or indirectly arising out of this Agreement and to bear all other costs and expenses related thereto.

Upon execution of any contract between the proposer and the County, the proposer will be required to provide proof of the insurance coverage described in Schedule “B”.

Insurance coverage in amount and form shall not be deemed acceptable until approved by the County Attorney.

**INTELLECTUAL PROPERTY RIGHTS**

The proposer accepts and agrees that language in substantially the following form will be included in the contract between the proposer and the County:

All deliverables created under this Agreement are to be considered “works made for hire”. If any of the deliverables do not qualify as “works made for hire”, the Consultant hereby assigns to the County all right, title and interest (including ownership of copyright) in such deliverables and such assignment allows the County to obtain in its name copyrights, registrations and similar protections which may be available. The Consultant agrees to assist the County, if required, in perfecting these rights. The Consultant shall provide the County with at least one copy of each deliverable.

The Consultant agrees to indemnify and hold harmless the County for all damages, liabilities, losses and expenses arising out of any claim that a deliverable infringes upon an intellectual property right of a third party. If such a claim is made, or appears likely to be made, the Consultant agrees to enable the County’s continued use of the deliverable, or to modify or replace it. If the County determines that none of these alternatives is reasonably available, the deliverable will be returned.

All records compiled by the Consultant in completing the work described in this Agreement, including but not limited to written reports, source codes, studies, drawings, blueprints, negatives of photographs, computer printouts, graphs, charts, plans, specifications and all other similar recorded data, shall become and remain the property of the County. The Consultant may retain copies of such records for its own use.]

## NON-COLLUSION

The proposer, by signing the proposal, does hereby warrant and represent that any ensuing agreement has not been solicited, secured or prepared directly or indirectly, in a manner contrary to the laws of the State of New York and the County of Erie, and that said laws have not been violated and shall not be violated as they relate to the procurement or the performance of the agreement by any conduct, including the paying or the giving of any fee, commission, compensation, gift, gratuity or consideration of any kind, directly or indirectly, to any County employee, officer or official.

## CONFLICT OF INTEREST

All proposers must disclose with their proposals the name of any officer, director or agent who is also an employee of the County of Erie. Further, all proposers must disclose the name of any County employee who owns, directly or indirectly, an interest of ten percent or more in the firm or any of its subsidiaries or affiliates.

There shall be no conflicts in existence during the term of any contract with the County. The existence of a conflict shall be grounds for termination of a contract.

**COMPLIANCE WITH LAWS**

By submitting a proposal, the proposer represents and warrants that it is familiar with all federal, state and local laws and regulations and will conform to said laws and regulations. The preparation of proposals, selection of proposers and the award of contracts are subject to provisions of all Federal, State and County laws, rules and regulations.

## CONTENTS OF PROPOSAL

The New York State Freedom of Information Law as set forth in Public Officers Law, Article 6, Sections 84 et seq., mandates public access to government records. However, proposals submitted in response to this RFP may contain technical, financial background or other data, public disclosure of which could cause substantial injury to the proposer's competitive position or constitute a trade secret. Proposers who have a good faith belief that information submitted in their proposals is protected from disclosure under the New York Freedom of Information Law shall:

a) insert the following notice in the front of its proposal:

**“NOTICE**

**The data on pages \_\_\_ of this proposal identified by an asterisk (\*) contains technical or financial information constituting trade secrets or information the disclosure of which would result in substantial injury to the proposer’s competitive position.**

**The proposer requests that such information be used only for the evaluation of the proposal, but understands that any disclosure will be limited to the extent that the County considers proper under the law. If the County enters into an agreement with this proposer, the County shall have the right to use or disclose such information as provided in the agreement, unless otherwise obligated by law.”**

and

b) clearly identify the pages of the proposals containing such information by typing in bold face on the top of each page **" \* THE PROPOSER BELIEVES THAT THIS INFORMATION IS PROTECTED FROM DISCLOSURE UNDER THE STATE FREEDOM OF INFORMATION LAW."**

The County assumes no liability for disclosure of information so identified, provided that the County has made a good faith legal determination that the information is not protected from disclosure under applicable law or where disclosure is required to comply with an order or judgment of a court of competent jurisdiction.

The contents of the proposal which is accepted by the County, except portions "Protected from Disclosure", may become part of any agreement resulting from this RFP.

**SCHEDULE “A”**

**PROPOSER CERTIFICATION**

The undersigned agrees and understands that this proposal and all attachments, additional information, etc. submitted herewith constitute merely an offer to negotiate with the County of Erie and is NOT A BID. Submission of this proposal, attachments, and additional information shall not obligate or entitle the proposing entity to enter into a service agreement with the County of Erie for the required services. The undersigned agrees and understands that the County of Erie is not obligated to respond to this proposal nor is it legally bound in any manner whatsoever by the submission of same. Further, the undersigned agrees and understands that any and all proposals and negotiations shall not be binding or valid against the County of Erie, its directors, officers, employees or agents unless an agreement is signed by a duly authorized officer of the County of Erie and, if necessary, approved by the Erie County Legislature and Erie County Fiscal Stability Authority and the Office of the County Attorney.

It is understood and agreed that the County of Erie reserves the right to reject consideration of any and all proposals including, but not limited to, proposals which are conditional or incomplete. It is further understood and agreed that the County of Erie reserves all rights specified in the Request for Proposals.

It is represented and warranted by those submitting this proposal that except as disclosed in the proposal, no officer or employee of the County of Erie is directly or indirectly a party to or in any other manner interested in this proposal or any subsequent service agreement that may be entered into.

*Proposer Name*

By:

*Name and Title*





