



**Office of Alcoholism and
Substance Abuse Services**

Request for Proposals

Recovery Community and Outreach Center Initiative

September 17, 2015

www.oasas.ny.gov

**New York State Office of Alcoholism and Substance Abuse Services
Recovery Community and Outreach Center Initiative
Request for Proposal**

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**New York State Office of Alcoholism and Substance Abuse Services
Recovery Community and Outreach Center Initiative
Request for Proposal**

Expected Timetable for Key Events:

Release Date.....	September 17, 2015
Letter of Intent MANDATORY	October 19, 2015
Closing Date for Submission of Bidder Inquiries.....	October 26, 2015
Answers to Bidder’s Inquiries on or about.....	November 9, 2015
Closing Date for Receipt of Bidder’s Proposals.....	November 30, 2015
Anticipated Evaluation and Selection.....	January 4, 2016

All Inquiries to:

Karen Stackrow
New York State Office of Alcoholism and Substance Abuse Services
1450 Western Avenue, 5th Floor
Albany, New York 12203-3526
procurements@oasas.ny.gov
Reference: “Recovery Community and Outreach Center Initiative RFP”

Submission of Proposal to:

Karen Stackrow
New York State Office of Alcoholism and Substance Abuse Services
1450 Western Avenue, 5th Floor
Albany, New York 12203-3526
Reference: “Recovery Community and Outreach Center Initiative RFP”

Please be aware that any expenses your agency incurs in the preparation and submission of the proposal(s) will not be reimbursed by the State. Your agency’s continued interest in providing services to the State of New York is appreciated.

- **FUNDING AVAILABLE:** Up to six (6) programs with operating budgets not to exceed \$350,000 per site in annual State aid funding, excluding start-up costs. This amount may increase or decrease based on future State appropriations. There is no funding for Capital Projects under this RFP.

- **ELIGIBLE APPLICANTS:** Non-profit community-based organizations, inclusive of faith-based, that have completed and maintained the not-for-profit prequalification process under the Grants Gateway Grant Opportunity Portal and are interested in developing a local Recovery Community and Outreach Center.

Applicants must demonstrate that they have experience delivering services related to the services they are proposing to deliver in response to this RFP.

**New York State Office of Alcoholism and Substance Abuse Services
Recovery Community and Outreach Center Initiative
Request for Proposal**

1. INTRODUCTION AND BACKGROUND

A. Purpose

The New York State Office of Alcoholism and Substance Abuse Services (OASAS) has developed this Request for Proposal (RFP) for eligible applicants interested in developing and implementing a local Recovery Community and Outreach Center that will function as a valued resource for the community through the provision of the following: recovery supports for individuals and their families, that are in, or seeking, recovery from substance use disorders (SUD); information and education to the community on how to access treatment supports, including the navigation of insurance and treatment issues; wellness information and activities to foster a lifetime of wellness for individuals, families and the community; and the extended use of peer supports and volunteers to assist in all areas of the Center's operation. OASAS intends to promote volunteer and peer involvement to foster a sense of community ownership that cannot be achieved through paid staff alone. The Center is not to be a drop-in center, rather people that come should be there to participate, fostering a sense of community ownership.

The goal is to develop a statewide infrastructure and OASAS intends to ensure that the new Centers are geographically located to best represent all areas of the state. These Centers will offer a diverse range of recovery support services to help individuals in recovery improve their health and wellness, live a self-directed life, and strive to reach their full potential. (SAMHSA, 2012). Services are to be accessible not only during daytime hours, but also during evenings and weekends, reflecting the diverse times individuals and families may be available to access services. OASAS recognizes it is not feasible for a Center to be open 24 hours per day; however, a Center will be expected to have some evening hours as well as some weekend hours. The menu of available services and times of being open is to be responsive to the local area's needs and its unmet recovery supports needs, including information and strategies to family members regarding engagement in the treatment process. It should be noted that OASAS recognizes that responsiveness to unmet needs is not a stagnant concept, but rather it is fluid and dynamic. Individuals in early recovery that access services may have very different needs than individuals in later stages of recovery. Family members may need guidance and suggestions on how to be supportive of a family member in recovery that may change relative to the stage of their family members' recovery. Family members may also need accurate and timely information on available treatment options and strategies to help engage a family member in treatment and recovery. Therefore, it is critical that the applicant have processes to regularly obtain feedback from the individuals and families they serve to ensure that the services offered are aligned with the needs and wants of the community the Center is to serve. The Centers will integrate and reflect the key values and essential characteristics as described in this solicitation document.

The Recovery Community Services Program (RCSP) has been a successful Federal program competitively funded through the United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration's Center for Substance Abuse

Treatment (SAMHSA-CSAT) since 2000. Centers funded by the RCSP utilize peer-to-peer recovery support services to help people initiate and sustain treatment and recovery from substance use disorders. These Centers are associated with measurable improvement in treatment and post-treatment outcomes for participants. Similarly, CSAT's Access to Recovery (ATR) program provides recovery care management and recovery supports and has demonstrated significant reductions in substance use, mental health indices, and criminal justice involvement as well as increases in participant employment, social connections; and stable housing.(SAMHSA-Access to Recovery: Approaches to ROSC-Three Case Studies, 2009).

B. Vision for Recovery Community and Outreach Centers

OASAS is committed to the development of a Recovery-Oriented System of Care (ROSC) for all New Yorkers. ROSC is a network of formal and informal services developed and mobilized to help attain and sustain long-term recovery for individuals and families impacted by substance use. A ROSC is not a local, state, or federal treatment agency but a macro-level organization within the community, state or nation. The Recovery Community and Outreach Centers will enhance the development of that system by:

- Building statewide infrastructure as OASAS intends to develop Centers throughout the state to represent the diverse geographic locations and needs of the state.
- Engaging multiple stakeholders and partners within the community, inclusive of prevention programs, to develop consensus, shared vision, community ownership and identification of local resources regarding treatment, prevention and recovery supports for individuals and families in the community.
- Providing infrastructure, recovery capital, and treatment and other referral resources within local communities.
- Providing assistance to individuals and families to help them learn to navigate access to the substance use treatment system, including assistance in negotiating any insurance issues that may be barriers to treatment access.
- Providing a community-based, non-clinical setting that is safe, trauma-informed, welcoming and alcohol/drug-free for any member of the community.
- Providing recovery support services to individuals and their families that may or may not have previously been involved in formal treatment approaches and/or mutual support groups.
- Providing individuals and families the opportunity to learn from their peers to enhance social connectedness and to achieve personal and common goals related to recovery from addiction.
- Providing participants with the ability to access Peer Advocates, Recovery Coaches and Peer Specialists to enhance the recovery process.
- Promoting long-term recovery through skill building, recreation, education, wellness, employment readiness, civic restoration, and a number of other pro-social activities.

- Providing activities and an environment that will promote a lifetime of wellness for individuals, families and the community.

All proposals should include special attention to cultural considerations for the provision of services as well as an environment that reflects the population that the community expects to serve, all within the constraints of operational expectations. Innovative program design and/or interventions that build upon essential core program elements are encouraged. To support the effective implementation of a Recovery Community and Outreach Center, applicants will be required to describe how their organization completed or plans to complete the tasks associated with the exploration stage of implementation such as identification of a site for the Center; development of community consensus regarding the need for a Center; development of job descriptions and responsibilities; process to be utilized to recruit and select candidates to employ; development of the Center's policies and procedures that reflect a trauma-informed approach; process to be utilized to screen, orientate and train volunteers as a resource to the Center; identification of existing community resources that may be accessed to support the ongoing operations of the Center and other tasks that need to be completed prior to a Center becoming operational.

C. Funding

OASAS anticipates funding up to six (6) programs with operating budgets not to exceed \$350,000 per site in annual State aid funding, excluding start-up costs. There is no funding for Capital Projects under this RFP.

D. Availability of the RFP

The RFP will be available on the OASAS website. An announcement regarding the RFP will be e-mailed to the most current address of record of all known potential eligible agencies and will be advertised in the New York State Contract Reporter. The RFP will also be available on New York State Grants Gateway Grant Opportunity Portal at: https://grantsgateway.ny.gov/Intelligrants_NYSGG/module/nysgg/goportal.aspx.

E. Contract Period

The contracts are expected to for a period of up to five years. The annual funding cycle of the awards will be based on the local fiscal period for the county in which the applicant will operate the proposed Recovery Community and Outreach Center. For NYC, the fiscal period is July-June while the remainder of the state is January-December. Funding for each annual period of the contract is subject to availability of State appropriations and program performance.

II. PROPOSAL REQUIREMENTS AND SUBMISSIONS

A. Letters of Intent -- MANDATORY

Agencies interested in responding to the Request for Proposal are **required** to submit a **non-binding Letter of Intent**. The letter of intent to bid must be emailed to the OASAS Procurements mailbox at Procurements@oasas.ny.gov with the Subject: **“Recovery Community and Outreach Center Initiative RFP – Letter of Intent”** by 5:00p.m., Eastern Standard Time

October 19, 2015. The letter of intent to bid must include the vendor's name, mailing address, a valid e-mail address, telephone number, a statement of intent to bid for the subject Request for Proposal, and an authorizing signature. Faxed letters of intent to bid will not be accepted. A Letter of Intent to Bid form has been included for your convenience (Attachment D).

Any amendments to the RFP will be sent only to the designated contacts of organizations who submitted a letter of intent to bid by 5:00p.m., Eastern Standard Time October 19, 2015.

B. Designated Contact Agent

OASAS has designated a Contact Agent who shall be the exclusive OASAS contact from the time of issuance of the RFP until the issuance of the Notice of Award (restricted time period). Applicants may not communicate with any other personnel of OASAS regarding this RFP during the restricted time period. The designated contact agent is:

Karen Stackrow
New York State Office of Alcoholism
and Substance Abuse Services
1450 Western Avenue, 5th Floor
Albany, New York 12203-3526
procurements@oasas.ny.gov

C. Inquires Related to the RFP

OASAS will not be hosting a bidders' conference. However, written questions from potential applicants received via email will be accepted through October 26, 2015 at 5:00pm Eastern Standard Time. All inquiries must be directed to: Procurements@oasas.ny.gov, with the Subject: "Recovery Community and Outreach Center Initiative RFP". To the degree possible, each inquiry should cite the RFP section and paragraph to which it refers. Inquiries may be submitted at any time prior to the deadline noted in the RFP schedule.

Inquiries will not be answered on an individual basis. Written responses to inquiries submitted by the deadline date are anticipated to be emailed to all potential applicants that have submitted a timely letter of intent on or about November 9, 2015.

D. Prequalification Requirement for Not-for-profit Applicants - MANDATORY

(See Attachment C for important information on Maintaining Prequalification Status)

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which require not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for proposals to be evaluated. Information on these initiatives can be found on the [Grants Reform Website](#).

Proposals received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the proposal due date of 5:00p.m. on November 30, 2015 cannot be evaluated. Such proposals will be disqualified from further consideration.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The [Vendor Prequalification Manual](#) on the Grants Reform Website details the requirements and an [online tutorial](#) are available to walk users through the process.

1) Register for the Grants Gateway.

- On the Grants Reform Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the Division of Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

If you have previously registered and do not know your Username please email grantsreform@budget.ny.gov. If you do not know your Password please click the [Forgot Password](#) link from the main log in page and follow the prompts.

2) Complete your Prequalification Application.

- Log in to the [Grants Gateway](#). **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Proposal.
- Specific questions about the prequalification process should be referred to your agency representative or to the Grants Reform Team at grantsreform@budget.ny.gov.

3) Submit Your Prequalification Application

- After completing your Prequalification Application, click the ***Submit Document Vault Link*** located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.

- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.
- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity.

Failure to prequalify will serve as a bar to grant eligibility. If you have any questions about prequalification, please go to the Grants Reform website or contact the OASAS prequalification specialist, Karen Stackrow at procurements@oasas.ny.gov.

E. Addenda to the RFP

In the event that it becomes necessary to revise any part of the RFP, an addendum will be posted on the OASAS website and emailed to those individuals that have submitted a Letter of Intent.

F. Key Events/Timeline

Release Date.....	September 17, 2015
Letter of Intent MANDATORY.....	October 19, 2015
Closing Date for Submission of Bidder Inquiries.....	October 26, 2015, at 5:00p.m.
Answers to Bidder’s Inquiries on or about.....	November 9, 2015
Closing Date for Receipt of Bidder’s Proposal.....	November 30, 2015 at 5:00p.m.
Anticipated Evaluation and Selection.....	January 4, 2016

G. Eligible Applicant

OASAS is seeking applications from non-profit community-based organizations, inclusive of faith-based, interested in developing a local Recovery Community and Outreach Center. The applicant must demonstrate that they have experience delivering services related to the services they are proposing to deliver in response to this RFP. The role and experience of key personnel must be described in the relevant section as identified below. OASAS is especially interested in applicants that represent partnerships among recovery support service providers and other entities such as county Local Governmental Units (LGUs), Prevention Councils and prevention providers, local government, local drug courts and other relevant stakeholders. Applicants are advised that OASAS may not fund an application where it identifies the applicant as an OASAS-certified and/or funded provider that is not in good standing at the time an award is made or other information is obtained in the review that indicates an issue with the performance or viability of the bidder.

The following definitions and guidelines apply throughout this solicitation:

- **Peer:** A peer is a peer when he/she self-identifies as a peer and is willing to share his/her lived experiences with others. Peer support services should strive to recruit a diverse

cadre of peers so that people with a range of backgrounds and experiences might find the possibility of connection. Peers/coaches may be volunteers or paid for their work. (SAMHSA, *Equipping Behavioral Health Systems & Authorities to Promote Peer Specialist/Peer Recovery Coaching Services*, 2012).

- **Recovery Capital:** Is the breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery. (White, W., 2006)
- **Peer Provider:** A peer provider, e.g. Certified Peer Advocate; Certified Peer Specialist, Recovery Coach, is a person who uses his or her lived experience of recovery from substance use disorder and mental illness, plus skills learned in formal training, to deliver services in behavioral health settings to promote mind-body recovery and resiliency. (SAMHSA-HRSA Center for Integrated Solutions, 2014)
- **Local Governmental Unit:** As defined in New York State Mental Hygiene Law, section 41.03 paragraph 5, local governmental unit “means the unit of local government given authority in accordance with this chapter by local government to provide local services.”
- **In Good Standing:** All of a provider’s operating certificates with OASAS, if applicable, which are subject to a compliance rating must have a current compliance rating of partial (2 years) or substantial (3 years) compliance. For OASAS certified or funded prevention agencies, this is defined as completion of a Program Performance Review (PPR) with no unresolved Management Plan within the prior two years. The PPR addresses provider compliance with the standards contained in the current OASAS Prevention Guidelines, credentialing requirements, fiscal viability, and timely submission of all required programmatic and fiscal reports.
- **OASAS Certified:** Pursuant to Article 32 of the New York State Mental Hygiene Law, possession of operating certificate(s) issued by the OASAS commissioner to engage in the provision of Chemical Dependence Withdrawal and Stabilization Services, Chemical Dependence Inpatient Rehabilitation Services, Chemical Dependence Residential Rehabilitation Services for Youth, Chemical Dependence Residential Services, or Chemical Dependence Outpatient and Opioid Treatment Services as defined in 14 NYCRR Parts 816, 818, 817, 819 and 822, respectively.

H. Format for the Proposal and Instruction for Submission

Format

Only one proposal from an applicant organization will be accepted. The proposal should be typed and double-spaced on both sides of 8 ½ x 11 paper utilizing Times New Roman, 12 pt. font. Pages should be numbered. Each submission should contain:

1. **Proposal Cover Letter** -A Proposal Cover Letter will transmit the applicant’s Proposal Package to OASAS. It should be completed, signed, and dated by an authorized representative of the applicant organization. The letter should include a designated agency contact name, phone number and e-mail address.

2. **Non-Binding Letter(s) of Commitment-** should be included if the applicant intends to coordinate the delivery of services with other non-profit entities, inclusive of faith-based. The letter of commitment must identify a lead for the organization, title within the organization, phone number and e-mail address. The letter should speak to the organization's capacity to provide the services offered through the Recovery Community and Outreach Center; a description of the extent of the organization's relevant experience delivering the specific service(s); and the ability of the organization to begin to provide those services within the timeframes stipulated in the RFP. **Note: These letters are only needed if the applicant organization intends to collaborate with other non-profit organizations to deliver recovery support services.**
3. **Service provider agreement(s) or memorandum(s) of understanding** - A minimum of one (1) with a licensed SUD treatment provider organization and OASAS prevention provider that identifies a process and procedure for referral of individuals and families as indicated and needed. **Please note that if the applicant is a non-profit licensed treatment organization or a prevention provider, the service provider agreement or memorandum of understanding must be with a licensed treatment provider organization and prevention provider that is not affiliated with the applicant organization to ensure that all participants will have the opportunity of choice.**
4. **Proposal Narrative-** The narrative should be concise (no more than 20 pages, not including attachments).
5. **An Outline of policies and procedures as to how the Recovery Community and Outreach Center will operate** (these will not be considered as part of the project narrative, but can be considered an appendix and should be labeled as such).
6. **An Organizational Structure** that identifies how the Recovery Community and Outreach Center fits within its host organization, if applicable.
7. **Job Descriptions** which detail required qualifications and needed relevant experience of key staff as well as proposed salaries. If temporary staff or volunteers are to be involved, the applicant must include details for their screening, orientation, training and supervision.
8. **Resume of Director** which will be overseeing the program being proposed.
9. **Documentation demonstrating not-for-profit status.**
10. **Budget Narrative and Justification** (Attachment A)
11. **Initiative Funding Request (IFR)** for Start-up and Fully Annualized Budget (Attachment B)

Submission Process

ONE ORIGINAL AND FOUR COPIES of complete proposals must be mailed in a sealed envelope, sent via delivery service or hand delivered by the organization or the organization's representative to the address below:

Karen Stackrow
New York State Office of Alcoholism and Substance Abuse Services
1450 Western Avenue, 5th Floor
Albany, New York 12203-3526
procurements@oasas.ny.gov

Reference: “Recovery Community and Outreach Center Initiative RFP”

The cover of the sealed envelope should be labeled “**Recovery Community and Outreach Center Initiative RFP**”.

All applications must be received by November 30, 2015, at 5:00pm.

III. Administrative Information

A. Vendor Responsibility

Pursuant to New York State Finance Law section 163(3) (a) (ii), State agencies are required to ensure that contracts are awarded to responsible vendors. A determination of responsibility includes, but is not limited to, an affirmative review of an applicant’s qualifications, legal authority, financial stability, integrity and past contract performance. A vendor responsibility review, including completion of a vendor responsibility questionnaire, will be required of any successful applicant. OASAS requires a successful applicant to formally communicate any changes in its responsibility disclosure. Failure to disclose any changes provides OASAS with the right to terminate the contract for cause.

OASAS recommends that applicants file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <http://osc.state.ny.us/vendrep/documents/system/checklist.pdf> or go directly to the VendRep System online at <http://portal.osc.state.ny.us>.

Applicants must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller’s Help Desk at (866) 370-4672 or (518) 408-4672 or email at ciohelpdesk@osc.state.ny.us.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website at www.osc.state.ny.us/vendrep or via contacting OASAS or the Office of the State Comptroller’s Help Desk for a copy of the paper form.

B. Reserved Rights

OASAS reserves the right to:

- Reject any or all proposals received in response to this RFP;

- Not make an award to any applicant who is not in good standing or who proposes to subcontract with an OASAS-certified provider who is not in good standing at the time a contract is awarded;
- Not make an award to any applicant who proposes to subcontract with any entity that OASAS determines does not meet the criteria of a responsible vendor;
- Withdraw the RFP at any time, at the agency's sole discretion;
- Make an award under this RFP in whole or in part;
- Make awards based on geographical or regional consideration to best serve the interests of the State;
- Make awards in a culturally competent and ethnically diverse as determined necessary and appropriate in the sole discretion of OASAS to best serve the interests of the state ;
- Negotiate with the successful applicant within the scope of the RFP in the best interests of the state;
- Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of this RFP;
- Seek clarifications and revisions of proposals;
- Use proposal information obtained through site visits, management interviews and the state's investigation of an applicant's or its proposed subcontractor's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP;
- Prior to the bid opening, amend the RFP to correct errors of oversights, or to supply additional information as it becomes available;
- Prior to the bid opening, direct applicants to submit proposal modifications addressing subsequent RFP amendments;
- Change any of the scheduled dates;
- Eliminate any mandatory, non-material specification that cannot be met by all of the prospective applicants;
- Waive any requirement that is not material;
- Conduct contract negotiations with the next successful applicant, should the agency be unsuccessful in negotiating with the selected applicant;
- Utilize any and all ideas submitted in the proposals received;

- Require correction of simple arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an applicant’s proposal and/or to determine an applicant’s compliance with the requirements of the solicitation;
- Accept proposals after the due date for submissions, if OASAS in its sole discretion, determines there is good cause shown for the delay in the submissions;
- Cancel or modify contracts due to the insufficiency of appropriations.

C. Debriefing

A debriefing is available to any Applicant that submitted a proposal in response to this RFP (“*Bidder*”). Bidder will be accorded fair and equal treatment with respect to its opportunity for debriefing. A debriefing must be requested in writing by the unsuccessful Bidder within ten (10) business days of OASAS notifying the unsuccessful Bidder that another vendor was selected.

An unsuccessful Bidder must make a written request for a debriefing to the designated contact agent referenced in Section II. A. by e-mail or first class mail. The debriefing will be limited to only the evaluation results as they apply to the proposal of the Bidder receiving the debriefing. The debriefing may be in writing, by telephone, by videoconference or in person, at the sole discretion of OASAS.

D. Funding Availability and Awards

As part of this RFP, OASAS is seeking to fund up to six (6) applications to develop a Recovery Community and Outreach Center with a programmatic and operations budget not to exceed \$350,000 per site in annual State aid funding. Additionally, up to one-quarter of the full annual State aid award may be requested for one-time start-up costs (see Attachment B). OASAS intends to ensure geographic representation and will utilize its current statewide regions in making award decisions.

It is anticipated that any application accepted for funding will be able to begin operation within 180 days of receiving the award. If an awardee is not able to meet this requirement, OASAS will reserve the right to select another qualified applicant.

IV. Scope of Work

A. Needs Assessment

A needs assessment is a systematic, rational process for collecting and analyzing data to describe the needs of a specific population concerning recovery from substance use and mental health and related problems within that population. Data for needs assessment falls into four categories: population surveys; archival indicators; focus groups; and key informant interviews. The needs assessment allows the applicant organization to focus on the geographical area and the target population(s) where the most significant unmet needs relative to treatment and recovery are, and to identify the existing recovery capital in the target community to assist in meeting the needs of the recovering community, and families in need of information and support services. This information can then be used to inform policy and program selection with the goal of assisting

individuals and their families to initiate and maintain recovery by offering a wide array of services to assist individuals and their families around initiating and sustaining sobriety; improvement in global health, (physical, emotional, relational and ontological-life meaning and purpose); citizenship, (positive participation in and contribution to community life); and a lifetime of wellness for all individuals, families and the entire community. In addition, the data collected serves as a baseline for monitoring the effectiveness of policies and programs and community efforts to address the treatment, recovery and wellness needs of their community.

B. Target Populations

Target populations will be broad as OASAS envisions the Centers as a resource for the entire regional area. Specifically, the applicant should identify the populations who will benefit from access to, and participation at, a local Recovery Community and Outreach Center through receipt of the Center's services, and the specific geographic location and boundaries, if any, that the Center intends to serve. For the purposes of this RFP, the applicant should focus on a multiple populations living within

Applicants should clearly identify the target populations for the proposed Center, the geographic range the Center intends to serve and provide a rationale based upon needs assessment data for the selection of a particular target groups and geographic location.

C. Continuous Feedback Loop(s)

OASAS recognizes that responsiveness to unmet community needs is not a stagnant concept, rather it is fluid and dynamic. Individuals in early recovery that access services may have very different needs than individuals in later stages of recovery. Family members may need guidance and suggestions on how to be supportive of a family member in recovery that may change relative to the stage of their family members' recovery. Family members may also need accurate and timely information on available treatment options and strategies to help engage a family member in treatment and recovery. All community members may need access to wellness activities and services that may change over time. Therefore, it is imperative that the applicant build in processes to regularly obtain feedback from the individuals, families and community they serve to ensure that the services offered are aligned with the needs and wants of the community the Center is to serve. The applicant must describe the formal process, methods, and frequency that they will utilize to obtain feedback from the individuals, families and community that they intend to serve. In addition, the applicant must describe the process and frequency they plan to utilize to analyze and act upon the feedback they receive from the individuals, families and community they intend to serve. Applicants are encouraged to be creative and innovative. Engagement of recipients of services in the feedback analysis and action process is encouraged.

D. Siting of the Center and Community Buy-In

OASAS recognizes that there can be community resistance to siting a Recovery Center when an applicant does not engage in a process to involve community stakeholders nor develop community

consensus in a process around the need and specific planned location for a Recovery Community and Outreach Center. Community opposition and lack of effective relationships may jeopardize the development and sustainability of a Center. The applicant must demonstrate that the organization has or will obtain community buy-in for, and endorsement of, the proposed Center and its planned location. The applicant should note that the term *community* has both micro and macro dimensions. The micro community may include the geographic location immediately surrounding the proposed center, while the macro community will include the county LGU and other such stakeholders. In addition, the applicant must demonstrate that a proposed location, if known, is accessible during evening and weekend hours. This accessibility must include handicapped accessibility. The response to the RFP must include a description of the facility, if known, and the proposed hours of operation. **The Recovery Community and Outreach Center is not to provide for overnight accommodations.**

E. Marketing and Social Media

The prevalence of social media in the current environment can be perceived as a resource for outreach and engagement of individuals, families and the community for treatment, prevention, recovery, and a lifetime of wellness. Marketing and social media may also be utilized to enhance the community's awareness about treatment, prevention and recovery; demystify and enhance treatment access and recovery, as well as to reduce stigma. The applicant should describe the organization's plans to utilize social media and marketing to optimize access and participation in the Center's services; enhance access to treatment, prevention and recovery support services; and promote a lifetime of wellness within the community.

F. Program Approach and Services

The Recovery Community and Outreach Center is designed to be a safe and welcoming trauma-informed facility located readily and easily accessible to individuals and their families in recovery; individuals and families seeking information on and access to, SUD treatment, prevention and recovery; and community members interested in accessing wellness activities. The Center cannot be co-located with any Substance Use Disorder (SUD) treatment facility. The Center must be compliant with all local and county building codes, including guidelines for accessibility established by the American with Disabilities Act (ADA). The Center will agree to monitoring and inspection as required by OASAS.

The applicant organization will hire and maintain appropriate staff, peers and volunteers to meet the goals set out in their design and proposed model of services and service delivery. Job descriptions should be developed for all staff, along with salary schedules, if applicable. Supervision of, and support for, staff; peers and volunteers must be developed. All staff and volunteers with regular or routine contact with individuals under the age of 21 must adhere to the process outlined and posted on the OASAS webpage: <http://www.oasas.ny.gov/JC/CBC/index.cfm>
All paid and/or volunteer staff must have the appropriate training, certifications and credentials, as applicable. The Center staff and volunteers will need to maintain a relationship with, and have an understanding of, existing community resources.

The Center must create clear Policies and Procedures for all paid and volunteer staff. Policies and Procedures may be subject to review and approval by OASAS. The Center must adhere to guidelines posted on the OASAS website regarding background checks of employees and volunteers www.oasas.ny.gov/JC/CBC/index.cfm

The Center must utilize sign-in sheets for all skill building groups; workshops; educational activities; employment readiness; and wellness activities facilitated at the facility and/or organized by the Center to document the number of participants utilizing the service and facility. A sign-in sheet should also be utilized during the drop in times as well. Each sign-in sheet must include the name of the participant; location of the activity or service; date of the activity or service; and be signed by the person(s) that facilitated the service or activity. Signing in may create a problem for certain groups, because of the level of anonymity. In those instances, the Center will be required to report head counts and the reason for anonymity.

Each Recovery Community and Outreach Center is expected to provide a combination of “stage-appropriate” emotional, informational, instrumental and social supports designed to be responsive to a range of needs experienced by people that are in a continuum from early recovery through long-term sustained recovery. It is essential that the services developed in each Center grow out of the identified needs and interests of each of the local recovering community being served. Similarly, it is recognized that there are a variety of ways that people have succeeded in establishing and sustaining recovery. The OASAS initiative anticipates that Recovery Community and Outreach Centers will serve the broader recovering community rather than be linked or apparently affiliated with a single approach to recovery or type of service provider. It is essential that the Centers are welcoming and culturally sensitive to all people being served.

Recovery Community and Outreach Centers will promote a sense of “expertise” built upon collective wisdom and common experience and which emphasize community building. Key values associated with supporting recovery include:

- Choice – services must be tailored to meet individual needs, and be flexible and open to modification as the person moves forward in his/her recovery. Individual strengths and experiences are recognized and built upon.
- Voice – as articulated by the mental health consumer movement, “nothing about us without us”, direct involvement by recovering individuals and family members in planning and carrying out programs and services is a critical component for success.
- Empowerment – services must not simply “do” for individuals and families. The interventions must educate and empower people to make their own informed choices in matters affecting their lives and to accept responsibility for those choices. The Center will foster a belief in the primacy of the individuals served, in resilience, and in the ability of individuals, organizations and communities to heal and promote recovery.
- Dignity and Respect – all services and all communications should be built on tangible evidence of dignity and respect for all persons involved.
- Hope – hope is essential for recovery from addiction and life trauma. Recovery from these life problems is an achievable goal that in turn makes all other quality of life goals possible.

The Recovery Community and Outreach Centers are expected to embrace trauma –informed approaches to service delivery. This means the organization: realizes the widespread impact of trauma and understands potential paths to recovery; recognizes the signs and symptoms of trauma in individuals, staff, and families; responds by fully integrating knowledge about trauma into policies, procedures and practices; and seeks to actively resist re-traumatization. (SAMHSA, 2014). Each Center must include the following characteristics:

- Build Recovery Capital – for individuals, families and communities. Families and peers bring real-world and the natural environment where recovery is to be attained/sustained; builds support for long-term recovery and helps families understand and heal (Laudet and White, 2008);
- Provide Safety and Hope – throughout the organization, staff and the people they serve, feel physically and psychologically safe; the physical setting is safe and interpersonal interactions promote a sense of safety;
- Responsive to the Recovering Community – each Center should develop an Advisory Board that is representative of the recovering community and the community at-large that is being served;
- Focus on Timely Access to SUD Treatment, Recovery, Prevention and Wellness - demonstrate through mission and vision, a commitment to SAMHSA’s Guiding Principles of Recovery;
- Invites All to Participate – Centers are to be accessible to the entire recovering community and the community at-large and will not hold an apparent organizational affiliation/identification with prevention, SUD treatment or other service providers, religious organizations or particular approaches to recovery;
- Promote Peer Support and Volunteerism - rely primarily on peers with lived experience and volunteers for operations and offer opportunities for recovering individuals a chance to help their peers. Peer support is a key ingredient for establishing safety and hope, building trust, enhancing collaboration and utilizing their stories to promote recovery and healing;
- Enhance Public Awareness – Centers will assist in developing a positive public perception of treatment, prevention, recovery and the benefits of a lifetime of wellness.

G. Required and Eligible Services

Peer-to-peer recovery support services; assistance to families and individuals on how to access, engage and navigate the treatment system; assistance to families and individuals on how to negotiate insurance barriers to treatment; outreach to families and individuals regarding SUD treatment, SUD education, and recovery supports available to the public; and skill-building classes or workshops through the Center will all be required core activities that will be provided by the Recovery Community and Outreach Centers. The Centers will serve as a welcoming community of support for everyone, (adults, teens, children, family members and significant others), interested in pursuing SUD treatment, prevention, recovery and wellness activities.

Additional eligible services to be provided by Certified Peer Advocates, Certified Peer Specialists, Recovery Coaches, Volunteers and other staff to support peers and families, both individually and in small groups, may include, but are not limited to:

- Help peers create individual recovery service plans based on recovery goals and steps to achieve those goals
- Use recovery-oriented tools to help their peers address challenges
- Assist others to build their own self-directed wellness plans
- Assist participant access to benefits, entitlements, legal assistance, civic restoration, transportation support, health management, stable housing, and education and employment connections
- Support peers in their decision-making
- Set up and sustain peer and family self-help and educational groups
- Offer a sounding board and shoulder to lean on
- Advocate with individuals for what they need
- Support people in crisis, and
- Share their personal stories of recovery

Successful peer recovery support services initiatives will network and build strong and mutually supportive relationships with formal and informal systems in their communities (i.e., SUD treatment programs, prevention, mental health, housing, transportation, criminal justice, education etc.). However, these peer services are designed and delivered primarily by individuals in recovery to meet the targeted community's recovery support needs, as each local community defines them. Therefore, although supportive of formal treatment, peer recovery support services are not treatment in the commonly understood clinical sense of the term. Most importantly, recovery support services should be designed to build resiliency and support individuals' integration or re-integration within their communities and help family members learn about treatment and recovery processes as well as prevention resources within the community. Centers must simultaneously take care not to foster a substitute dependency in participants. Recovery Community and Outreach Centers are expected to be both a resource for Recovery Care Management services and, in some cases may be a provider of such services. **The Center may not provide direct clinical services** but may host community meetings and mutual support groups such as Alcoholics Anonymous or Narcotics Anonymous.

At the same time, peer recovery support services are expected to support and enhance the full continuum of addiction services. Centers may provide services designed to prevent relapse and promote long-term recovery, including but not limited to educational and wellness classes, employment readiness classes/groups, life skills and recreational activities. Moreover, when individuals do experience relapse, recovery support services can help minimize the negative effects through early intervention and, when appropriate, timely linkage to SUD treatment resources.

Abstinence, (which includes abstinence attained in conjunction with medication assisted treatments, such as methadone or buprenorphine), is an important part of sustained recovery from substance use disorders. However, recovery is a larger construct than sobriety or abstinence as it embraces engagement or re-engagement with the community based on resilience, health, and hope.

Therefore, peer recovery support services are expected to focus less on the pathology of substance use and more on maximizing the opportunities to create a lifetime of recovery and wellness for the individual, family, and community.

This RFP may support certified or licensed professionals to provide recovery support services inclusive of recovery care management, to individuals and families; wellness services; employment readiness; educational and occupational services; prevention services; exercise and recreational activities; daily living skill-building services; assistance obtaining stable housing and the facilitation of access to SUD treatment for individuals and families.

V. Application Proposal

The applicant should submit a proposal for funding under this RFP with a narrative not to exceed 20 pages, excluding attachments that addresses all of the components listed below, in the following order:

A. Statement of Need (3 page max.)

Please clearly describe the unmet recovery support services needs in the geographical area(s) proposed to be served, including the needs that the proposal intends to address by implementing the Recovery Community and Outreach Center. The description should include, but not be limited to the following:

- Identification of the problem the implementation of the proposal will help remedy;
- Appropriate demographic and epidemiological information for the geographical areas to be served, including but not limited to recovery prevalence data
- The demographic and recovery supports needs of the individuals and families who will participate in the services or a description of the process the applicant intends to utilize to identify these recovery support needs;
- Issues of age, race, ethnicity, culture, language, sexual orientation, disability, transportation, literacy and gender in the target populations that will need to be addressed;
- Establish a projected number of individuals and families that will be served by the Center on an annual basis with a projected utilization within each distinct service or activity offered; and
- Provide a description of the continuous feedback loop the applicant will implement with the participants it intends to serve.

B. Proposed Approach (8 page max.)

Interested applicants should clearly describe their project approach, which should include both a mission and vision statement regarding treatment, recovery and recovery support services. The project description and approach should include but not be limited to:

- Clearly defined measurable goals, objectives and anticipated outcomes

- A timeline for implementation that clearly defines milestones, inclusive of start-up
- A timeline for when each service or activity will be implemented if a staggered approach is to be utilized
- Location and description of facility, if known, including hours and days/evenings of operation for the populations served and description of ADA compliance
- Mission and vision statement with a description of how the goals and objectives flow from the organization's mission and vision
- Description of activities and services that will be provided, including other resources that can be leveraged to support the project along with a rationale for the inclusion of each specific service and activity
- Existing relationships with, and understanding of, community resources
- Involvement of key partners and the roles they will assume in the implementation of recovery support services, (**NOTE: letters of commitment are required from all key partners** and these commitment letters will **not** count towards page limitations)
- A plan for peer involvement in recovery support services
- A plan for family involvement in recovery support services
- A plan for coordinating the referral of individuals and families to SUD treatment, and /or prevention services that must include procedures to promote information sharing so that the Center will be able to identify whether an individual or family actually accessed and engaged with the entity they were referred to
- A copy of, or an outline, for the Policies and Procedures manual that the Center will utilize
- A description of how the applicant organization intends to conduct outreach to engage community participants, including how the applicant will utilize social media

C. Organizational Capacity, Readiness and Staffing Plans (5 page max.)

This section should describe and demonstrate the organization's capability to implement and operate the proposed Center. Information provided should clearly delineate the roles and responsibilities of both applicant organizations and key partners and include, but not be limited to, the following:

- A description of the applicant organization's relevant experience, and duration of that experience, in delivering the services they propose to deliver under this RFP;
- An organizational chart and description of organizational structure, lines of supervision, and management oversight for the proposed program, including oversight and evaluation of consultants and contractors and training for staff;

- Identification of the person(s) that will have responsibility for daily and key tasks such as leadership, monitoring ongoing progress, preparing reports, analysis of participant, staff and referral feedback loops and data, and communicating with other partners;
- The roles, qualifications, expertise, relevant experience and auspices of key personnel, (both paid and volunteer);
- Staffing pattern and rationale for each staff position that reflects an adequate number and appropriate mix of staff and volunteers and includes bilingual individuals appropriate to the cultural communities represented by the individuals and families who will receive services;
- Staff job descriptions (these may be an attachment and will not count towards page limitations);
- A description of the model the Center will utilize to supervise non-clinical peers;
- A description of how the applicant organization intends to recruit, screen, orientate, train and supervise volunteers;
- A description of how the applicant will negotiate the exploration stages of implementation in developing the Center. Specifically, documentation on how the applicant has or will develop community consensus on the need for a Center; how siting issues were or will be addressed; identification of any barriers to siting; demonstrated commitment of key stakeholders , which must include at a minimum the county LGU or NYC DMH, as appropriate; and the local Prevention Council or prevention provider.
- A description of the organization’s sustainability plan post state funding

It is also expected that an Advisory Board be developed and sustained. The Advisory Board should include but not be limited to individuals in SUD recovery, families, and members of the community, which will help to inform the program about ongoing needs within their community. Please clearly describe:

- The role of the Advisory Board and potential tasks that the board will perform
- Frequency of Advisory Board meetings and identification of the individual that will be responsible for developing and maintaining a record of Board summaries and follow-up between Board meetings
- Plans to recruit members and sustain the Advisory Board
- Key individuals and/or community organizations that would best represent the population(s) served

D. Data and Reporting Requirements (2 page max.)

The applicant organization will make any/all documents and records available for audit and evaluation to entitled Federal, State and County officials upon request. OASAS will establish and

conduct regular program monitoring site visits and record reviews, health and safety reviews, fiscal, data information, and quality management of services processes. The Center must maintain all sign-in sheets for all services for audit purposes.

The Center will collect data and provide a quarterly report to be submitted to OASAS Program Staff responsible for the Center development. The report will include the following:

- Total unique participants served during a reporting period with an identification of individual in recovery, family member, community member at-large
- Average unique participants per week
- Types of services provided
- Frequency of services provided
- Number of services provided overall
- Number of individuals and families referred to SUD treatment and/or prevention providers
- Number of individuals and families that successfully accessed and engaged in SUD treatment or prevention services after receipt of a referral(s)
- Number of participants attending each service or activity provided
- Number of individuals and families referred for housing services
- Number of individuals and families that obtained stable housing
- Any changes in staff and/or hours of operation
- Number of participants that have disengaged from the Center's services
- Methods, strategies and results of efforts to obtain feedback from participants, staff and the community on the quality, accessibility and type of services needed
- Documentation of the analysis of participant, staff and community feedback and any actions initiated in response to that analysis
- Any barriers identified to the provision of the Center's services
- Outreach, marketing and media activities conducted during the reporting period
- Number of volunteers that were screened, trained and working for the Center
- Number of hours volunteers worked and a bulleted summary of their tasks during the period
- Any new service provider agreements, consultants and/or partnerships
- Progress update on implementing the Center's sustainability plan

OASAS reserves the right to adjust and change data and reporting requirements as the project evolves. The proposal should include how the Center will monitor services and who will be responsible for working with OASAS on data collection.

E. Budget Narrative (4 page max.)

Working within the cost parameters of \$350,000 per site in annual **State aid** funding, applicants must provide the Budget Narrative and Justification (Attachment A) along with a completed Initiative Funding Request (IFR) Form (Attachment B):

- Personal Services – detailed by position and salaries to include the percentage of time devoted to this project
- Fringe Benefits
- Non-Personal Services (i.e. Other than Personal Services (OTPS))
- Equipment
- Property/Space
- Agency Administration
- Budget Summary

Applicants are required to use the budget worksheets provided in Attachment A –Budget Narrative and Justification, and Attachment B- Initiative Funding Request Form when completing this section.

Bidders must include a start-up budget that covers one-time costs necessary to start the program. The amount of the start-up budget should be no more than three months or one-quarter of the annual budget.

OASAS expects the start-up period to be the first 90 days of the new contract; and that providers will be at full capacity within 180 days of receiving the approved OASAS contract.

V. Review and Rating Criteria

A. Threshold Review Criteria

Following the opening of bids, a preliminary review of all proposals will be conducted by the issuing officers or a designee to determine whether the application meets specific threshold criteria.

The following “threshold review criteria” will be rated either yes or no. If any of the criteria are rated *no* the application will be **immediately disqualified from further consideration without exception.**

1. Was the application received by OASAS by the submission deadline date set forth by in the OASAS Recovery Community and Outreach Center RFP?

2. Did OASAS receive a mandatory Letter of Intent from the applicant by the stated deadline?
3. Was the applicant prequalified in the Grants Gateway on the proposal submission deadline date as set forth in the RFP?
4. Does the applicant meet the eligibility criteria set forth in this RFP?
5. Is the proposal letter completed, signed, and dated?
6. Are there non-binding letter(s) of commitment included that identify the organization's name, lead liaison to the Center, title of that person within the organization, phone number, non-for-profit status and e-mail address, where appropriate? Do these letters of commitment clearly identify what the organization will provide to the Center and within a specified timeframe?
7. Is there a minimum of one (1) n MOU or Service Provider Agreement as detailed in Section H. 3. included?
8. Is the program Budget Narrative and Justification Attachment A completed?
9. Is the IFR for Start-up and Fully Annualized Budget Attachment B completed?

B. Review Criteria

Proposals passing the threshold review will be assessed, rated, and ranked in order of highest score based on an evaluation of each applicant's written submission. A minimum score of 70 will be required in order for a proposal to be considered for funding. The evaluation will apply points in the following categories:

• Statement of Need	5 points
• Program Approach	35 points
• Organizational Capacity, Readiness & Staffing	30 points
• Data and Reporting	10 points
• Budget Narrative	<u>20 points</u>
Total Possible Points	100 points

C. Method for Evaluating Proposals

Evaluation of proposals will be conducted in two parts: Program Evaluation and Fiscal Assessment. OASAS' review team, consisting of at least three evaluators, will review the program portion of each proposal and compute a program score. The Program Evaluation includes: Statement of Need, Program Approach, Organizational Capacity, Readiness and Staffing, and Data and Reporting. All of the program scores will be added together and averaged to arrive at a final program score. Evaluators of the Program Evaluation component may then meet to provide clarity or clear any questions an evaluator has about a particular section of a proposal. Following the discussion, evaluators may independently revise their original score in any section, and will note

changes on the evaluation sheet. Once completed, final Program Evaluation scores will then be recalculated and averaged. A Fiscal Assessment score will be computed separately based on the operating budget and budget narrative. The final Program Evaluation and Fiscal Assessment scores for each proposal will be added together, resulting in an overall final score.

In the event that two or more proposals have the same highest overall final score, the following tie breaker criteria will be applied to determine which proposal will be ranked highest:

- The proposal(s) with the highest total Program Evaluation score will be ranked highest
- If the Program Evaluation scores are tied, the proposal(s) with the highest Program Approach score will be ranked highest.

Attachment A: Budget Narrative and Justification

A. Personnel:

An employee is anyone in the applicant's organization whose work is associated with the project. Please note if existing staff are to be part of the project these funds should not be used to supplant their salaries.

Position	Name	Annual Salary/Rate	Level of Effort	Cost
Agency Executive Director	John Doe	\$50,000	10%	In-kind
			TOTAL	

JUSTIFICATION:

B. Fringe Benefits:

List all components of fringe benefits rate

Component	Rate	Wage	Cost
FICA			
Workers Compensation			
Insurance			
		TOTAL	\$

JUSTIFICATION:

C. Non-Personal Services (i.e. Other than Personal Service):

Please list any other than personal service costs (e.g., Training, Supplies, Services/Activities, etc.) that will be required.

Item(s)	Rate	Cost
	TOTAL	\$

JUSTIFICATION:

D. Equipment:

Please list equipment needed to support the project and associated costs.

Item(s)	Rate	Cost
	TOTAL	

JUSTIFICATION:

E. Property/Space:

Please list cost of property/space needed to support the project.

Property/Space	Rate	Cost
	TOTAL	\$

JUSTIFICATION:

F. Agency Administration:

Costs related to agency administration.

Item(s)	Rate	Cost
	TOTAL	\$

JUSTIFICATION:

**Attachment B - OASAS 2015 Recovery Community and Outreach Center
INITIATIVE FUNDING REQUEST (IFR) FORM
(Start-up and Annual Operating Budgets)**

1. Printed Legal Name of Applicant Entity:			
2. Printed Name of Local Governmental Unit, if Applicable:			
3. Applicant's OASAS Provider Number:		4. Applicant's Street Address/P.O. Box:	
5. Applicant's City/Town/Village:		6. Postal Zip Code:	7. Date Prepared:
8. Printed Name of Applicant Contact Person:		9. Printed Title of Contact:	
10. Contact Telephone #:			

PART II – OPERATIONAL FUNDING REQUEST

1. Date Initiative expected to be operational:		
	(Column A) PROPOSED START-UP OPERATING BUDGET	(Column B) ANNUAL OPERATING BUDGET
REQUESTED OPERATING BUDGET FOR PROPOSAL		
2. Gross Expense Budget (see instructions for details): Round Amounts to the nearest \$100.		
Personal Services		
Fringe Benefits		
Non-Personal Services		
Equipment		
Property/Space		
Agency Administration		
TOTAL GROSS EXPENSE BUDGET		
3. Revenue Budget (see instructions for details): Round Amounts to the nearest \$100.		
Patient Fees		
SSI and SSA		
Public Assistance (Safety Net & TANF)		
Medicaid		
Medicare		
Third Party Insurance/Private Pay		
Food Stamps		
Closely Allied Entity Contributions		
Donations		
Other: Specify:		
Specify:		
Specify:		
TOTAL REVENUE BUDGET		
4. NET OPERATING COST		
5. OASAS State Aid Funding Requested		
6. Full-Time Equivalent (FTE) Staff Requested:		
Applicant Official:		
Printed Name:	Printed Title:	
Signature:	Date:	

**Instructions for Completing the Initiative Funding Request Form (IFR)
(Start-up and Annual Operating Budgets)**

PROVIDER INFORMATION

1. **Printed Legal Name of Applicant Entity** – Print the incorporated or legal name of the agency submitting the Initiative Funding Request on the IFR and on any additional pages that are attached. **Do not enter the common name or acronym.**
2. **Printed Name of Local Governmental Unit, if Applicable** – Print the complete name of the County or City of New York Local Governmental Unit (LGU) that administers the Applicant Entity’s local State Aid contract agreement. **Applicants that have a direct contract with OASAS for State Aid funding should leave this blank.**
3. **Applicant’s OASAS Provider Number** – Enter the unique five-digit number that identifies the agency and that is used for reporting purposes to OASAS. This number is the same as the *Agency Code* number used when submitting Consolidated Fiscal Report (CFR) documents.
- 4-6. **Applicant Address** – Enter the mailing address, including zip code, where the administrative office of the applicant entity is located.
7. **Date Prepared** – Enter the date the Initiative Funding Request Form (IFR) was prepared.
- 8-10. **Applicant Contact Person** – Enter the printed name and title, and the telephone number (including area code) of the person who can answer questions concerning the information provided on the IFR.

PART II – OPERATIONAL FUNDING REQUEST

1. **Date Initiative Expected to be Operational** – Enter the date, in the xx/xx/xxxx format, that the proposed initiative is expected to be operational and will require Aid to Localities funding from OASAS. During the implementation of the initiative, OASAS reserves the right to establish and approve an operational start date later than proposed by the successful applicant to accommodate available funding and capacity needs.

Requested Operating Budget for Proposal

Requested operating budget amounts must represent:

Column A – **PROPOSED START-UP OPERATING BUDGET:** The start-up or part year costs, net deficit and OASAS State aid funding requested for one-time costs necessary to start the program effort. Start-up costs are one-time expenses only and must be reasonable and necessary for program implementation. The start-up budget is limited to one quarter (1/4) of the full annual State aid. Start-up costs may include, but are not limited

to the following: equipment; office supplies; furniture; rental deposits/securities; and staff recruitment.

Column B – **ANNUAL OPERATING BUDGET**: The 12-month, full annual costs, revenues, net deficit and OASAS State aid funding requested. Awards to the selected applicants will be prorated for the first fiscal period based on the initiative start date identified above. The full annual budget may be pro-rated based on the approved start date of the initiative.

ALL AMOUNTS REQUESTED FOR THE ADDITIONAL INITIATIVE FUNDING MUST BE ROUNDED TO THE NEAREST HUNDRED DOLLARS.

2. **Gross Expense Budget** – Applicants should refer to the Consolidated Fiscal Reporting (CFR) Manual for a more detailed general description of the following expense items which should be entered in Columns A and B:

- Personal Services
- Fringe Benefits
- Non-Personal Services (i.e. Other than Personal Services (OTPS))
- Equipment
- Property/Space
- Agency Administration

3. **Revenue Budget** – Applicants should refer to the CFR Manual for an explanation of each revenue category, and enter applicable start-up and annual projected amounts that they anticipate receiving to offset costs attributable to the initiative in Columns A and B.

If the applicant does not anticipate receiving any additional revenue to offset costs of its proposal it should so indicate by entering \$0 for each category in Columns A and B.

4. **Net Operating Cost** - Enter the amount obtained by subtracting **Total Revenue Budget** from **Total Gross Expense Budget in Column A and B**.
5. **OASAS State Aid Funding Requested** – Enter the amount of OASAS State aid funding being requested for the initiative in Columns A and B. This amount **should equal** the **Operating Budget Net Deficit** amount.
6. **Full-Time Equivalent (FTE) Staff Requested** – Enter the number of FTE’s requested as part of this initiative in Columns A and B.

Applicant Official – Enter the printed name and title of the applicant agency representative submitting the IFR proposal.

Signature and Date – The IFR must be signed and dated by the applicant agency representative.

ATTACHMENT C

Maintaining Grants Gateway Prequalification Status

Interested applicants should be aware that even after your organization becomes prequalified in the NYS Grants Gateway system, you still need to monitor the status of your document vault to ensure that your organization remains eligible to apply for this grant opportunity on the proposal submission due date.

Expiring Documents that Effect Prequalification Status – There are currently three required documents that expire on a yearly basis, and as such, require that your organization’s document vault be updated prior to each expiration in order to maintain a *Prequalified* status. These documents are:

- IRS990
- Audit
- CHAR500

It is strongly recommended that you update these required documents proactively (i.e.: before the annual expiration date.) The advantage of a proactive approach is as follows:

- If you proactively open your Document Vault to update required documents prior to expiration your document vault will be placed in *Document Vault Prequalified Open* status. Your organization will remain eligible to apply for grants while in this status.
- Once you have updated and submitted your document vault, your document vault status will change to *Document Vault Prequalified /In Review*. Likewise this is a *Prequalified* status and you are eligible to apply for grants.

However, **if you allow one or more required documents to expire**, your document vault will automatically move to *Document Vault Expired* status. Your organization is **not eligible** to apply for grants in this status. Once your document vault is in the *Document Vault Expired* status, the following must occur before *Prequalified* status can once again be achieved:

1. You must updated and submitted your document vault at which time your status will change to *Document Vault In Review*. (Note: this is not a prequalified status and you are not eligible to apply for grants.)
2. The State Agency assigned to your document vault must review the vault, determine that it meets the prequalification requirements, and change the vault status to *Prequalified*. (Note: This may take several days so you should ensure that you upload updated documents and submitted your document vault as soon as possible after expiration.)

Further details on expiring documents and their effect of your *Prequalification* status can be found at: <https://www.grantsreform.ny.gov/Grantees> under *Quick Links - Maintaining Prequalification*.

ATTACHMENT D

LETTER OF INTENT TO BID (To be completed by the Bidder)

Date: _____

**Karen Stackrow
New York State Office of Alcoholism
and Substance Abuse Services
1450 Western Avenue, 5th Floor
Albany, New York 12203-3526**

RFP Reference:

**OASAS 2015 Request for Proposal:
Residential Community and Outreach Center Initiative**

Dear Ms. Stackrow:

This is to notify you of our non-binding intent to submit a bid response on the above noted RFP.

The individual to whom all information regarding this RFP (e.g. addenda) should be transmitted is:

Sincerely,

Name

Title

Organization, Street Address, City, State, and Zip Code

Phone #

Fax #

E-mail Address: _____

SFS ID#: _____