



PROCUREMENT NOTICE

State of Connecticut
Department of Mental Health and Addiction Services

REQUEST FOR PROPOSALS (RFP)

RFP# DMHAS-CSD-Mental Health (MH) Intensive Residential Services 2021

Legal Notice

Mental Health Intensive Residential Program 16-bed High Intensity Medical Program Request for Proposals

The State of Connecticut, Department of Mental Health and Addiction Services (DMHAS) is seeking proposals from qualified private non-profit proposers capable of providing a Mental Health Intensive Residential Program in a congregate community residence with staff on site twenty-four (24) hours per day, seven (7) days per week to individuals age eighteen (18) or older who have serious and persistent psychiatric disorders, or co-occurring serious and persistent psychiatric disorders and substance use disorders. Some individuals admitted may also have serious co-occurring medical conditions such as diabetes or obesity, that are impacted and complicated by the adjunct psychiatric disorder.

Proposals may be submitted from organizations that can demonstrate **a minimum of five (5) years' experience** providing residential services to adults with serious mental illness who may be transitioning from inpatient psychiatric settings or adults at-risk for re-hospitalization and who may have co-morbid medical conditions. Proposals must include the full capacity specified in this RFP. Proposals will not be considered if a provider does not possess the capability of providing the full amount of the beds specified for the High Intensity Medical Program.

It is "desired" that the proposed program be sited in the **Greater Hartford area**; but not required.

DMHAS is seeking proposals for one (1) program which is described in greater detail below.

High Intensity Medical Program - 16-beds

Total Annual funding \$1,187,328

The program is a high intensity medical congregate community residence program with a 16-bed capacity. This Mental Health Intensive Residential Program is focused on individuals with serious mental illness and high levels of medical co-morbidity. Individuals served in this program may have a length of stay of twelve (12) to forty-eight (48) months. Referrals to the High Intensity Medical Program shall come directly from a state-operated inpatient facility. The successful proposer will provide participants with assistance in all areas of daily living including but not limited to: community integration, education and employment assistance, self-management of symptoms and medications, personal finances and budgeting, meal preparation, improving communication skills, and use of leisure time. Where appropriate, the program will assist clients to transition to less restrictive living situations such as supervised apartments or supported apartments. The Mental Health Intensive Residential Program must assume responsibility for all consumers currently being served by the Community Mental Health

Affiliates Mental Health (CMHA) Parkview Program. Future referrals must be approved by DMHAS' Medical Director or his/her designee.

The program shall accept current clients of the Parkview Program and shall accept new referrals to the program on a no-decline basis thereafter. Interested proposer must have experience providing residential services to the target population of this RFP. The successful proposer will be required to begin delivering services by June 1, 2021 with full operation and transition of services expected to begin July 1, 2021. The selected proposer will be designated by the Department as a Targeted Case Management (TCM) provider.

The Request for Proposals is available in electronic format on the State Contracting Portal at https://biznet.ct.gov/SCP_Search/Default.aspx?Acclast=2, the Department's website at <http://www.ct.gov/DMHAS> or from the Department's Official Contact:

Name: **Marcia McDonough**
Address: Department of Mental Health and Addiction Services
Office of the Commissioner/Contract Administration
410 Capitol Avenue / PO Box 341431 / Hartford, CT 06134
Phone: 860 418-6672
E-Mail: marcia.mcdonough@ct.gov

Deadline for ELECTRONIC SUBMISSION OF PROPOSALS is:

**August 24, 2020
3:00 PM EST**

The Department reserves the right to reject any and all proposals or cancel this procurement at any time if deemed in the best interest of the State of Connecticut (State).

The Department is an Equal Opportunity/Affirmative Action Employer

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I. GENERAL INFORMATION

■ A. INTRODUCTION

1. RFP Name or Number. **DMHAS-CSD-MH Intensive Residential Services 2021**

2. Summary. The State of Connecticut, Department of Mental Health and Addiction Services (DMHAS) is seeking proposals from qualified private non-profit proposers capable of providing a Mental Health Intensive Residential Program in a congregate community residence with staff on site twenty-four (24) hours per day, seven (7) days per week to individuals age eighteen (18) or older who have serious and persistent psychiatric disorders, or co-occurring serious and persistent psychiatric disorders and substance use disorders. DMHAS is seeking proposals for one (1) program which is described in greater detail below. Some individuals that are admitted or already reside in the program have significant co-morbid medical conditions such as diabetes or obesity that are impacted and complicated by the adjunct psychiatric disorder.

High-Intensity Medical Program 16-beds Total funding \$1,187,328

This is a high intensity medical congregate community residence program with a 16-bed capacity. This Mental Health Intensive Residential Program is focused on individuals with serious mental illness and high levels of medical co-morbidity. Individuals served in this program may have a length of stay twelve (12) to forty-eight (48) months and are transitioning from a state-operated inpatient psychiatric facility.

The successful proposer will provide participants with assistance in all areas of daily living including but not limited to: community integration, education and employment assistance, self-management of symptoms and medications, personal finances and budgeting, meal preparation, improving communication skills, and use of leisure time.

Referrals to the High-Intensity Medical Program shall come directly from a state-operated inpatient facility and must be approved by the DMHAS Medical Director or his/her designee.

3. Synopsis. This service is designed to replace the range of services currently provided by the Community Mental Health Affiliates (CMHA) existing Mental Health Intensive Residential Programs. Interested proposers must possess a Connecticut business license, be a non-profit, and have at least five years' experience providing the residential services that are being procured through this RFP. The successful proposer will be required to begin delivering services by June 1, 2021 with full implementation by July 1, 2021.

4. Commodity Codes. The services that the Department wishes to procure through this RFP are as follows:

- 0098: Medical Services
- 1000: Healthcare Services
- 2000: Community and Social Services

■ B. ABBREVIATIONS / ACRONYMS / DEFINITIONS

AFR	Annual Financial Report
BFO	Best and Final Offer
BHH	Behavioral Health Home
CARF	Commission on Accreditation of Rehabilitation Facilities
C.G.S.	Connecticut General Statutes
CSD	Community Services Division
CT	Connecticut
DAS	Department of Administrative Services (CT)
DMHAS	Department of Mental Health and Addiction Services (CT)
EST	Eastern Standard Time
FOIA	Freedom of Information Act (CT)
FTE	Full Time Equivalent
GAF	Global Assessment of Functioning Scale
IRS	Internal Revenue Services (US)
LMHA	Local Mental Health Authority
MAT	Medication-Assisted Treatment
MH	Mental Health
MGAF	Modified Global Assessment of Functioning Scale
OPM	Office of Policy and Management (CT)
OSC	Office of State Comptroller (CT)
POS	Purchase of Service
P.A.	Public Act (CT)
RFP	Request for Proposal
SEEC	State Elections Enforcement Commission (CT)
TCM	Targeted Case Management
U.S.	United States

- *contractor*: a private provider organization, CT State agency, or municipality that enters into a POS contract with the Department as a result of this RFP
- *proposer*: a private provider organization, CT State agency, or municipality that has submitted a proposal to the Department in response to this RFP
- *prospective proposer*: a private provider organization, CT State agency, or municipality that may submit a proposal to the Department in response to this RFP, but has not yet done so

■ **C. INSTRUCTIONS**

1. **Official Contact.** The Department has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Department. Proposers, prospective proposers, and other interested parties are advised that any communication with any other Department employee(s) (including appointed officials) or personnel under contract to the Department about this RFP is strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: **Marcia McDonough**
Address: Department of Mental Health and Addiction Services
Office of the Commissioner/Contract Administration
410 Capitol Avenue
PO Box 341431
Hartford, CT 06134

Phone: 860 418-6672

E-Mail: marcia.mcdonough@ct.gov (**Preferred method of communication during the pandemic**) Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

2. **RFP Information.** The RFP, addenda to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:

- Department's RFP Web Page
<http://www.ct.gov/dmhas>
- State Contracting Portal
<http://das.ct.gov>

It is strongly recommended that any proposer or prospective proposer interested in this procurement subscribe to receive e-mail alerts from the State Contracting Portal. Subscribers will receive a daily e-mail announcing procurements and addendums that are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFP.

Printed copies of all documents are also available from the Official Contact upon request.

3. **Contract Awards.** The award of any contract pursuant to this RFP is dependent upon the availability of funding to the Department. The Department anticipates the following:
 - Total Funding Available: High Intensity Medical Program **\$1,187,328.00 annually**
 - Number of Awards: **1**
 - Contract Cost: **\$1,187,328,0 Annually**
 - Contract Term: **one (1) – three (3) years, at the discretion of the Department**

- 4. Eligibility.** Private provider organizations (defined as non-state entities that are either nonprofit or proprietary corporations or partnerships) are eligible to submit proposals in response to this RFP. Individuals who are not a duly formed business entity are ineligible to participate in this procurement.
- 5. Minimum Qualifications of Proposers.** To qualify for a contract award, a proposer must meet the following minimum qualifications, or indicate ability to meet the following minimum qualifications before the start date of the contract:
- CT Business License (issued by the Office of the Secretary of the State) Proof of CT Business Licensure - Proof of the Proposer agency's is registered with the Office of the Secretary of the State) shall be provided as **Appendix 1** - Please refer to the following hyperlink:
<https://www.concord-sots.ct.gov/CONCORD/online?sn=InquiryServlet&eid=99>
 - CT non-profit status as **Appendix 2**
 - Joint Commission (TJC) or Commission on Accreditation of Rehabilitation Facilities (CARF) accreditation as **Appendix 3**

Proposals may be submitted from organizations that can demonstrate **a minimum of five (5) years' experience** providing residential services to adults with serious mental illness who may be transitioning from inpatient psychiatric settings or adults at-risk for re-hospitalization and who may have co-morbid medical conditions. Proposals must include the full capacity specified in this RFP. Proposals will not be considered if a provider does not possess the capability of providing the total number of beds specified for the High Intensity Medical Program.

Proposer that **own or have proposed agreements** to rent space capable of housing the program at the time the RFP is due shall receive higher consideration/score. It is desired that the proposed program be sited in the Greater Hartford area but not required.

- 6. Procurement Schedule.** See below. Dates after the due date for proposals ("Proposals Due") are target dates only (*). The Department may amend the schedule, as needed. Any change will be made by means of an amendment to this RFP and will be posted on the State Contracting Portal and, if available, the Department's RFP Web Page.
- | | |
|---------------------------------------|---------------------------------|
| • RFP Planning Start Date: | May 15, 2020 |
| • RFP Released: | July 1, 2020 |
| • Mandatory Letter of Intent Due: | July 15, 2020, 3:00 PM |
| • RFP Bidder's [Virtual] Conference | July 17, 2020 |
| • Deadline for Questions: | July 20, 2020, 3:00 PM |
| • Answers Released: | July 27, 2020 |
| • Proposals Due: | August 24, 2020, 3:00 PM |
| • (*) Proposer Selection: | September 14, 2020 |
| • (*) Start of Contract Negotiations: | September 28, 2020 |
| • (*) Start of Contract: | November 1, 2020 |
| • Begin Client Transition | June 1, 2021 |
| • Full Program Implementation | July 1, 2021 |

7. Mandatory Letter of Intent.

A Letter of Intent (LOI) **is required** by this RFP. The LOI is non-binding and does not obligate the sender to submit a proposal. The LOI must be submitted to the Official Contact identified in Section C.1 of this RFP. LOI's may be submitted by e-mail by the deadline established in the Procurement Schedule. The LOI must clearly identify the sender, including agency name, contact person, postal address, telephone number, fax number, and e-mail address. It is the sender's responsibility to confirm the Department's receipt of the LOI. Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.

8. Inquiry Procedures.

Noteworthy: ONLY questions submitted by prospective proposers who submitted a Mandatory Letter of Intent will be answered.

All questions regarding this RFP or the Department's procurement process must be directed, in writing, to the Official Contact before the deadline specified in the Procurement Schedule. The early submission of questions is encouraged. Questions will not be accepted or answered verbally – neither in person nor over the telephone. All questions received before the deadline(s) will be answered. However, the Department will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFP or the procurement process will not be answered. At its discretion, the Department may or may not respond to questions received after the deadline. If this RFP requires a Letter of Intent, the Department reserves the right to answer questions only from those who have submitted such a letter. The Department may combine similar questions and give only one answer. All questions and answers will be compiled into a written amendment to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the answers to questions on the date(s) established in the Procurement Schedule. The Department will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP Web Page. At its discretion, the Department may distribute any amendments to this RFP to prospective proposers who submitted a Letter of Intent or attended the RFP Bidder's Conference.

9. RFP Bidder's Conference. A Virtual RFP Bidder's conference **will** be held on **Friday, July 17, 2020**. Details of the conference will be provided as an Addendum to the RFP, to be posted no later than July 13, 2020. Attendance at the RFP Bidder's Conference is not required; but is highly recommended. Prospective proposers will be provided an opportunity to submit questions via email to the Official Contact Person. All questions submitted will be answered in a written Addendum to this RFP, which will serve as the Department's official response. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the Addendum and duly noted as such. The agency will release the Addendum on the date established in the Procurement Schedule. The Department will publish any and all Addenda to this RFP on the State Contracting Portal and on the Department's Web Site.

10. Electronic Proposal Due Date and Time. The Official Contact is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be received by the Official Contact on or before the due date and time:

- Due Date: August 24, 2020
- Time: 3:00 PM

Proposals received after the due date and time will not be evaluated.

An acceptable submission must include the following:

- one (1) conforming electronic copy of the original proposal.

Unsigned proposals will not be evaluated. The proposal must be complete, properly formatted and outlined, and ready for evaluation by the Screening Committee.

The electronic copy of the proposal must be emailed to the Official Agency Contact for this procurement. The subject line of the email must read: **RFP # DMHAS-CSD-MH Intensive Residential Services 2021**. Required forms and appendices may be scanned and submitted in Portable Document Format (PDF) or similar file format.

- 11. Multiple Proposals.** The submission of multiple proposals **is not** an option with this procurement.
- 12. Declaration of Confidential Information.** Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), the Privacy Act, and all rules, regulations and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL. In Section C of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).
- 13. Conflict of Interest - Disclosure Statement.** Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Department will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement. *Example: “[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85.”*

■ **D. PROPOSAL FORMAT**

1. **Required Outline.** All proposals must follow the required outline presented in Section IV – Proposal Outline. Proposals that fail to follow the required outline will be deemed non-responsive and not evaluated.
2. **Cover Sheet.** The Cover Sheet is Page 1 of the proposal. Proposers must complete and use the Cover Sheet form provided by the Department in Section IV.I – Forms.
3. **Table of Contents.** All proposals must include a Table of Contents that conforms with the required proposal outline. (See Section IV.)
4. **Executive Summary. This summary must not exceed one (2) pages.** The Executive Summary shall include the Proposer’s prior experience with residential service provision to the identified population, and the **eligibility and qualifications** requirements to respond to this RFP, found in Section C. INSTRUCTIONS, 4. Eligibility and 5. Minimum Qualifications of Proposers.
5. **Attachments.** Attachments other than the required Appendices or Forms identified in Section IV are not permitted and will not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions may result in disqualification.
6. **Style Requirements. THIS IS AN ELECTRONIC SUBMISSION.** Submitted proposals must conform to the following specifications:
 - Paper Size: 8 ½ x 11 (Letter)
 - Page Limit: Maximum 20 pages, exclusive of Executive Summary, Appendices and Budget forms
 - Font Size: 12
 - Font Type: Times New Roman
 - Margins: Normal (1 inch)
 - Line Spacing: 1 ½
7. **Pagination.** The proposer’s name must be displayed in the header of each page. All pages, including the required Appendices and Forms, must be numbered in the footer.

■ **E. EVALUATION OF PROPOSALS**

1. **Evaluation Process.** It is the intent of the Department to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful proposers, and awarding contracts, the Department will conform with its written procedures for POS procurements (pursuant to C.G.S. § 4-217) and the State’s Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85).
2. **Screening Committee.** The Department will designate a Screening Committee to evaluate proposals submitted in response to this RFP. The contents of all submitted proposals, including any confidential information, will be shared with the Screening Committee. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. Attempts by any proposer (or representative of any proposer) to contact

or influence any member of the Screening Committee may result in disqualification of the proposer.

- 3. Minimum Submission Requirements.** All proposals must comply with the requirements specified in this RFP. To be eligible for evaluation, proposals must (1) be received on or before the due date and time; (2) meet the Proposal Format requirements; (3) follow the required Proposal Outline; and (4) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. The Department will reject any proposal that deviates significantly from the requirements of this RFP.
- 4. Evaluation Criteria (and Weights).** Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Screening Committee will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals. The criteria are weighted according to their relative importance. The weights are disclosed below. The maximum score across all evaluation criteria is 100 point as follows:
- **Organizational Profile** 10
 - **Service Requirements** 25
 - **Staffing Requirements** 10
 - **Data & Technology Requirement** 10
 - **Work Plan** 20
 - **Financial Requirements** 5
 - **Budget & Budget Narrative** 15
 - **Appendices** 5

Note: As part of its evaluation of the Staffing Plan, the Screening Committee will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

- 5. Proposer Selection.** Upon completing its evaluation of proposals, the Screening Committee will submit the rankings of all proposals to the Department head. The final selection of a successful proposer is at the discretion of the Department head. Any proposer selected will be so notified and awarded an opportunity to negotiate a contract with the Department. Such negotiations may, but will not automatically, result in a contract. Pursuant to Governor M. Jodi Rell's Executive Order No. 3, any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at the Department's discretion, about the outcome of the evaluation and proposer selection process.
- 6. Debriefing.** Within ten (10) days of receiving notification from the Department, unsuccessful proposers may contact the Official Contact and request information about the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days. If unsuccessful proposers still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Department to discuss the evaluation process and their proposals. If held, the debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. The Department will schedule and hold the debriefing meeting within fifteen (15) days of the request. The

Department will not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

- 7. Appeal Process.** Proposers may appeal any aspect the Department's competitive procurement, including the evaluation and proposer selection process. Any such appeal must be submitted to the Department head. A proposer may file an appeal at any time after the proposal due date, but not later than thirty (30) days after an agency notifies unsuccessful proposers about the outcome of the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for the Department to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.
- 8. Contest of Solicitation or Award.** Pursuant to Section 4e-36 of the Connecticut General Statutes, "Any bidder or Proposer on a state contract may contest the solicitation or award of a contract to a subcommittee of the State Contracting Standards Board..." More detailed information is available on the State Contracting Standards Board web site at <http://www.ct.gov/scsb/site/default.asp>.
- 9. Contract Execution.** Any contract developed and executed as a result of this RFP is subject to the Department's contracting procedures, which may include approval by the Office of the Attorney General

II. MANDATORY PROVISIONS

■ A. STANDARD CONTRACT, PARTS I AND II

By submitting a proposal in response to this RFP, the Proposer implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract":

Part I of the standard contract is maintained by the Department and will include the scope of services, contract performance, quality assurance, reports, terms of payment, budget, and other program-specific provisions of any resulting POS contract. A sample of Part I is available from the Department's Official Contact upon request.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the contract. Part II is available on OPM's website at: http://www.ct.gov/opm/fin/standard_contract

Note:

Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a Proposer is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the Proposer must inform the Proposer's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected Proposer (contractor), and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's Office.

■ B. ASSURANCES

By submitting a proposal in response to this RFP, a Proposer implicitly gives the following assurances:

1. **Collusion.** The Proposer represents and warrants that the Proposer did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The Proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the Proposer's proposal. The Proposer also represents and warrants that the submitted proposal is in all respects fair and is made without collusion or fraud.
2. **State Officials and Employees.** The Proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The Department may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the Proposer, contractor, or its agents or employees.

3. **Competitors.** The Proposer assures that the submitted proposal is not made in connection with any competing organization or competitor submitting a separate proposal in response to this RFP. No attempt has been made, or will be made, by the Proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The Proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the Proposer knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.
4. **Validity of Proposal.** The Proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto. The proposal shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Department may include the proposal, by reference or otherwise, into any contract with the successful Proposer.
5. **Press Releases.** The Proposer agrees to obtain prior written consent and approval of the Department for press releases that relate in any manner to this RFP or any resultant contract.

■ **C. TERMS AND CONDITIONS**

By submitting a proposal in response to this RFP, a Proposer implicitly agrees to comply with the following terms and conditions:

1. **Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.
2. **Preparation Expenses.** Neither the State nor the Department shall assume any liability for expenses incurred by a Proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
3. **Exclusion of Taxes.** The Department is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.
4. **Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed through the entire term of the contract.
5. **Changes to Proposal.** No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Department may request and authorize Proposers to submit written clarification of their proposals, in a manner or format prescribed by the Department, and at the Proposer's expense.
6. **Supplemental Information.** Supplemental information will not be considered after the deadline submission of proposals, unless specifically requested by the Department. The Department may ask a Proposer to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a

time selected and in a place provided by the Department. At its sole discretion, the Department may limit the number of Proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per Proposer.

7. **Presentation of Supporting Evidence.** If requested by the Department, a Proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Department may make onsite visits to an operational facility or facilities of a Proposer to evaluate further the Proposer's capability to perform the duties required by this RFP. At its discretion, the Department may also check or contact any reference provided by the Proposer.
8. **RFP Is Not an Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Department or confer any rights on any Proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the Proposer and the Department and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the Proposer or for payment of services under the terms of the contract until the successful Proposer is notified that the contract has been accepted and approved by the Department and, if required, by the Attorney General's Office.

■ **D. RIGHTS RESERVED TO THE STATE**

By submitting a proposal in response to this RFP, a Proposer implicitly accepts that the following rights are reserved to the State:

1. **Timing Sequence.** The timing and sequence of events associated with this RFP shall ultimately be determined by the Department.
2. **Amending or Canceling RFP.** The Department reserves the right to amend or cancel this RFP on any date and at any time, if the Department deems it to be necessary, appropriate, or otherwise in the best interests of the State.
3. **No Acceptable Proposals.** In the event that no acceptable proposals are submitted in response to this RFP, the Department may reopen the procurement process, if it is determined to be in the best interest of the State.
4. **Award and Rejection of Proposals.** The Department reserves the right to award in part, to reject any and all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Department may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Department reserves the right to reject the proposal of any Proposer who submits a proposal after the submission date and time.
5. **Sole Property of the State.** All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFP shall be the sole property of the State, unless stated otherwise in this RFP or subsequent contract. The State has the right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.

6. **Contract Negotiation.** The Department reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Department further reserves the right to contract with one or more Proposer for such services. After reviewing the scored criteria, the Department may seek Best and Final Offers (BFO) on cost from Proposers. The Department may set parameters on any BFOs received.
7. **Clerical Errors in Award.** The Department reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a Proposer and subsequently awarding the contract to another Proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial Proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the Proposer.
8. **Key Personnel.** When the Department is the sole funder of a purchased service, the Department reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Department also reserves the right to approve replacements for key personnel who have terminated employment. The Department further reserves the right to require the removal and replacement of any of the Proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the Department.

■ **E. STATUTORY AND REGULATORY COMPLIANCE**

By submitting a proposal in response to this RFP, the Proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:

1. **Freedom of Information, C.G.S. § 1-210(b).** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the Proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The Proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a Proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.
2. **Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive.** CT statute and regulations impose certain obligations on State agencies (as well as contractors and subcontractors doing business with the State) to insure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.
3. **Consulting Agreements, C.G.S. § 4a-81.** Proposals for State contracts with a value of \$50,000 or more in a calendar or fiscal year, excluding leases and licensing

agreements of any value, shall include a consulting agreement affidavit attesting to whether any consulting agreement has been entered into in connection with the proposal. As used herein "consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information or (C) any other similar activity related to such contract. Consulting agreement does not include any agreements entered into with a consultant who is registered under the provisions of C.G.S. Chapter 10 as of the date such affidavit is submitted in accordance with the provisions of C.G.S. § 4a-81. The Consulting Agreement Affidavit (OPM Ethics Form 5) is available on OPM's website at http://www.ct.gov/opm/fin/ethics_forms

IMPORTANT NOTE: A Proposer must complete and submit OPM Ethics Form 5 to the Department **with the proposal**.

4. **Gift and Campaign Contributions, C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8 and No. 7C, Para. 10; C.G.S. § 9-612(g)(2).** If a Proposer is awarded an opportunity to negotiate a contract with an anticipated value of \$50,000 or more in a calendar or fiscal year, the Proposer must fully disclose any gifts or lawful contributions made to campaigns of candidates for statewide public office or the General Assembly. Municipalities and CT State agencies are exempt from this requirement. The gift and campaign contributions certification (OPM Ethics Form 1) is available on OPM's website at http://www.ct.gov/opm/fin/ethics_forms

IMPORTANT NOTE: The successful Proposer must complete and submit OPM Ethics Form 1 to the Department prior to contract execution.

5. **Nondiscrimination Certification, C.G.S. §§ 4a-60(a)(1) and 4a-60a(a)(1).** If a Proposer is awarded an opportunity to negotiate a contract, the Proposer must provide the Department with *written representation* or *documentation* that certifies the Proposer complies with the State's nondiscrimination agreements and warranties. A nondiscrimination certification is required for all State contracts – regardless of type, term, cost, or value. Municipalities and CT State agencies are exempt from this requirement. The nondiscrimination certification forms are available on OPM's website at http://www.ct.gov/opm/fin/nondiscrim_forms

IMPORTANT NOTE: The successful Proposer must complete and submit the appropriate nondiscrimination certification form to the awarding Department prior to contract execution.

III. PROGRAM INFORMATION

■ A. DEPARTMENT OVERVIEW

The Department of Mental Health and Addiction Services is the state healthcare service agency responsible for health promotion, and the prevention and treatment of mental illness and substance abuse in Connecticut. The single overarching goal of the Department is promoting and achieving a quality-focused, culturally responsive and recovery-oriented system of care. The Department has focused its efforts on greater involvement of persons in recovery in the planning and development of services, expanding system capacity through better care management of persons in treatment, promoting age, gender, sexual orientation and culturally responsive services and strengthening supportive community-based services. These efforts are captured in the Department's mission statement: "To improve the quality of life of the people of Connecticut by providing an integrated network of comprehensive, effective and efficient behavioral health services that foster self-sufficiency, dignity and respect."

The Department works towards a recovery-oriented system of behavioral health care that offers Connecticut's citizens an array of accessible services and recovery supports from which they will be able to choose those that are effective in addressing their particular behavioral health condition or combination of conditions. These services and supports are culturally, age and gender responsive, build on personal, family and community strengths, and have as their primary and explicit aim, promotion of the person/family's resilience, recovery and inclusion in community life. Finally, services and supports are provided in an integrated and coordinated fashion in collaboration with the surrounding community, thereby ensuring continuity of care both over time and across agency boundaries, thus maximizing the person's opportunities for establishing or reestablishing a safe, dignified and meaningful life in the community of his or her choice. Connecticut's vision is based on the following underlying values:

- The shared belief that *recovery* from behavioral health disorders is possible and expected;
- An emphasis on the role of *positive relationships, family supports and parenting* in maintaining recovery, achieving sobriety and promoting personal growth and development;
- The *priority of an individual's or family's* goals in determining their pathway to recovery, stability and self-sufficiency;
- The importance of *cultural capacity, cultural competence and age/gender-responsiveness* in designing and delivering mental health services and recovery supports. Cultural capacity is defined as respectful and sensitive services that employ racial, cultural, age, gender and sexual orientation consideration;
- The central role of *hope and empowerment* in changing the course of individuals' lives; and
- The necessity of state agencies, community providers, individuals in recovery and recovery communities coming together to develop and implement a comprehensive continuum of behavioral health promotion, prevention, early intervention, treatment and rehabilitative services.

The proposer awarded a contract as a result of this procurement will be required to adhere to Department Agency Terms and Conditions, copies of which are available upon request to the Agency Official Contact of this Procurement.

■ B. PROGRAM OVERVIEW

MH Intensive Residential High Medical Acuity (16-bed mental health intensive residential program)

As a result of this RFP, the Department will expect its contracted provider to establish and operate a 16-bed congregate residential program for adults with serious psychiatric disorders over the age of 18. Referrals to the program will come directly through the DMHAS Medical Director's office from a state –operated inpatient facility in any area within the state.

- The Mental Health Intensive Residential Program, 16-bed High Intensity Medical Program will place emphasis on recovery-focused, high intensity, community-based services for individuals with serious mental illnesses, substance use disorders or serious mental illness and co-occurring substance use disorders, especially those that are uninsured and underinsured. The program must assume responsibility for all consumers currently being served by the Community Mental Health Affiliates (CMHA) Mental Health Intensive Residential Program (Parkview). New referrals shall not be rejected and existing service participants cannot be ejected without review of the DMHAS Medical Director or his/her designee. The expected capacity to be served for the program is specified below, as well as the actual number of unduplicated clients served in State Fiscal Year 2020

DMHAS Service Level of Care	Program Capacity	<i>Actual Served in SFY2019</i>
Mental Health Intensive Residential High Medical Acuity	16	18

Such services, **hereinafter referred to as Intensive Residential Mental Health Services**, shall be provided in a highly structured environment, with twenty-four (24) hour staff supervision, and a length of stay of **twelve (12) to forty-eight (48) months**. Admission to the Intensive Residential Mental Health Services shall come directly from a state-operated inpatient facility and be approved through the Department's Medical Director or his/her designee.

Specifically, the Contractor shall:

1. Coordinate with the current provider of these services to transition clients to the new program;
2. Collaborate closely with referring agents, and the Department's Local Mental Health Authorities (LMHAs), to ensure expedient and seamless transitions from inpatient care;
3. Perform an initial intake evaluation that includes screening each individual for symptoms of substance use using a Department approved screening instrument;
4. Ensure that all individuals with substance use issues identified by the screening instrument receive an assessment by a licensed professional;
5. Document the substance use disorder diagnoses for each individual as appropriate;
6. Complete a release of information, collaborate with the provider, and document as appropriate if an individual is currently receiving substance use services;

7. Accept individuals who are on medication for a substance use disorder, unless the Department so waives this requirement;
8. Conduct assessments, including but not limited to the utilization of a tool identified by the Department, to help individuals identify and explore personal strengths, and community and recovery resources and supports to enable the individuals to be contributing members of their community;
9. Develop with each individual, a recovery plan that addresses identified needs in areas such as employment, education, self-management skills, relapse prevention and social skills training. Such plans shall contain goals identified by the individual and shall provide detailed information on goals, objectives, tasks, and interventions, and shall identify the individual and/or provider responsible and time frames for accomplishment;
10. Complete a review of the recovery plan and determine the appropriateness of the individual's continued placement in the program, not less than once every ninety (90) days;
11. Provide instruction and activities that increase each individual's skills and independence that include the following areas:
 - a. Coping strategies and behavior management alternatives;
 - b. Solving daily problems related to community living, medical conditions and interpersonal relationships;
 - c. Alleviation and management of psychiatric disorders;
 - d. Daily living and self-care skills including at a minimum, medication compliance, self-management of the symptoms of mental illness, the use of transportation, planning and preparation of nutritious meals, personal grooming, management of financial resources, shopping, use of leisure time, interpersonal communication and problem-solving;
 - e. Skills necessary to support a full and independent life in the community;
 - f. Skills necessary to manage physical health needs and co-occurring medical conditions such as diabetes, obesity, etc. that are impacted and complicated by adjunct psychiatric disorder including self-management of medications for physical disorders;
 - g. Skills necessary for the use of naloxone in response to opioid overdose;
 - h. Connecting individuals to natural community supports and mentors;
 - i. Development of self-advocacy skills and assistance with accessing self-help and advocacy resources;
 - j. Recovery skills used to prevent relapse and manage symptom cycles;
 - k. Development or maintenance of positive social relationships, to ensure independent participation in social, interpersonal or community activities, and to achieve full community reintegration.
- 11 Monitor self-administration of medication;
12. Provide appropriate substance use disorder evaluation, education, treatment and referrals;
13. Facilitate appropriate linkages with community services and recovery supports including therapy and medication management if they are not delivered through the agency;
14. Coordinate and manage medical care as needed;
15. Develop a discharge plan to sustain his or her recovery and maintain involvement with needed services; and

16. Ensure all direct care staff and non-direct care staff who have client contact receive training in the use of naloxone in response to an opioid overdose.

NOTEWORTHY: Please reference **Attachment 1** Scope of Services that provides Performance Outcome Measures

■ C. MAIN PROPOSAL COMPONENTS

It is expected that proposals will demonstrate the proposers' knowledge of the needs of the target population to be served as well as related Connecticut experience in service provision to the target populations described in this Request for Proposal.

1. Executive Summary. All proposals must include an Executive Summary. The Executive Summary should not exceed two (2) pages in length and should summarize the program being proposed, to include total annual cost, total number of individuals served and location of proposed services. The Executive Summary shall also include **eligibility and qualifications** requirements to respond to this RFP, found in Section C. INSTRUCTIONS, 4. Eligibility and 5. Minimum Qualifications of Proposers.

2. Organizational Profile.

- a. **Purpose / Mission / Philosophy:** Briefly describe the purpose, mission and philosophy of the agency and the proposed program. This section should also describe how your program or agency will adhere to applicable state and federal laws, regulations and policies governing provision of mental health services. Also describe how the site will be managed and how ancillary supports like Information Technology, Medical Records, and Administrative Support fit into that management structure.
- b. **Entity Type / Years of Operation:** Provide a brief history of the agency. Proposers must be registered to do business in the State of Connecticut through the Office of the Secretary of the State and must also be a registered private, non-profit 501(c)3 and must provide proof of both in **Section H** of their proposal. Additionally, the agency organizational structure should be summarized with a Table of Organization provided in Section H. of the proposal. Please submit an organizational chart that depicts the total organizational structure and where this program would reside within that structure.
- c. **Service Locations:** Provide the location of the proposer's administrative offices, as well as the proposed location for the Mental Health Intensive Residential Program. Please describe the extent to which the program site is appropriately zoned and licensed, and provide proof of such in **Section H** of your proposal.
 - 1) Does your agency currently control the site? If no, provide details of how and when the site will be available.
 - 2) Has appropriate zoning been secured for the site? If no, provide details of how and when zoning approval is anticipated, or justification as to why zoning is not required.
 - 3) Is the site fully compliant with Americans with Disabilities Act (ADA) standards? If no, describe the degree to which the site is ADA compliant.
 - 4) Does the program site share space with any other program, agency, business, residence, etc.?
 - 5) Will you require bond funding for your site in order to make renovations?

Proposers are not required to obtain possession of physical space or zoning compliance prior to submission of a proposal. Proposers that own or have proposed agreements to rent space capable of housing the program at the time the RFP is due shall receive higher consideration/score.

The Department will require retention of space and proof of zoning compliance for all programs, in accordance with local regulations, prior to the initiation of contract negotiations.

If space and zoning is not secured at the time of proposal submission, the proposer must affirm that both will be obtained by the time of initiation of contract negotiations, which is expected to be September 28, 2020. The Department reserves the right to terminate any negotiations or subsequent contracts if the proposer fails to obtain space or zoning. Furthermore, the Department reserves the right to deem a proposed site as unsuitable for the operation of the Mental Health Intensive Residential program.

- d. **Qualifications / Certification / Licensure:** Describe your agency's qualifications and interest in providing the kinds of services being requested through this RFP. Proposers must possess a valid CT Business License, proof of CT nonprofit (501-3c) status, and accreditation by The Joint Commission or Commission on Accreditation of Rehabilitation Facilities (CARF) and must provide proof of these in **Section H** of the proposal. If such accreditation has not been obtained, the proposal must describe the extent to which the proposer has initiated one of these processes and the current status. Please describe the number of years that you have provided residential services to the target population.
 - e. **References:** If you do not currently or have not in the past three (3) years provided contracted services to the Department, at least two reference letters must be included in **Section H** of the proposal to support the description of your experience in providing these services. Letters must include agency name, contact name, mailing address, phone number and email address of the writer. Letters must also include the nature of the writer's relationship with the proposer and the extent of the proposer's provision of services to the writer. This is **NOT** a Letter of Support. The writer must be able to detail a prior relationship of services provided by the proposing agency.
3. **Service Requirements.** Proposals must address each of the areas listed below. It is the Department's expectation that direct service provision for the Level of Care required under this RFP be solely provided by the proposer.
- a. **Proposed Level of Care Services:** Describe in detail how your agency will provide the Mental Health Intensive Residential level of care described in Section B. PROGRAM OVERVIEW above, including how such service provision will meet the requirements for that Level of Care.
 - b. **Treatment/Service Components:** Describe in detail how your agency will incorporate the following components into provision of services for the residential level/levels of care required under this RFP. It is expected that the program will not provide all of the services listed below but will link program participants to these services as appropriate.

- 1) Intake and screening with;

- 2) Mental Health and Substance Use Service Activities, including a Comprehensive Strengths-Based Assessment. Assessment should place emphasis on the individual's strengths and assets, and should include: a psychiatric history, risk assessment, functional history, trauma history, mental status examination, diagnosis, physical health, use of drugs and alcohol, education and employment, social development and functioning, activities of daily living, family structure and relationships, and environmental supports. Providers may be required to utilize specialized tools developed for populations that are the targets of certain services contained within this grant. This may include any DMHAS-required assessments and other clinical tools;
 - 3) Treatment/Recovery Planning including a timeline of recovery goals and objectives;
 - 4) Service Coordination;
 - 5) Coordination and management of co-morbid medical conditions;
 - 6) Symptom assessment and management, including development of each person's skills to recognize stressors and develop coping mechanisms and recovery strategies;
 - 7) Psychiatric evaluation, medication prescription, administration, monitoring and education including Medication-Assisted Treatment for substance using individuals;
 - 8) Counseling and psychotherapy, including trauma services;
 - 9) Co-occurring substance abuse services;
 - 10) Work and Education-Related Services or linkage to local specialty providers of these services;
 - 11) Residential Supports such as helping to find and lease apartments, tenancy help, etc. or linkage to local specialty providers of these services;
 - 12) Social/Interpersonal Relationship and Leisure-Time Skill Training;
 - 13) Use of Peer Support (or Recovery Support) Specialists Services;
 - 14) Environmental and other supports;
 - 15) Psycho-education, support, and consultation to families (and significant others) of program participants and the community at large;
 - 16) Transportation for program participants due to the absence of public transportation and the lack of personal resources consumers may have;
 - 17) Outreach, collaboration, and linking with state-operated and private inpatient psychiatric facilities, nursing homes, and with police, court personnel, and jail/prison officials to prevent unnecessary incarceration, and to facilitate smooth transitions from the inpatient or correctional system.
- 4. Program Requirements.** Services implemented through this RFP must build upon and compliment the Department's focus on development of a recovery-oriented system of care that is responsive to the needs of each person served. All proposers must specify how they will address the following system expectations. Where listed, please refer to the websites for guidance regarding implementation of these expectations:

- a. **Cultural Competence.** See Commissioner's Policy Statement #76: Policy on Cultural Competence: <http://www.ct.gov/dmhas/cwp/view.asp?a=2907&q=334668>

Research and experience have shown that culture and society play pivotal roles in behavioral health, behavioral disorders, and the utilization and effectiveness of treatment services. Understanding the wide-ranging roles of culture and society enables the behavioral health field to design and deliver services that are more responsive to the needs of diverse racial and cultural groups. Currently, the DMHAS system serves many different populations and recognizes the significance of culture as a factor that affects individual outcomes. In the coming decades, as Connecticut's demography continues to change, it will become increasingly important that we strengthen the cultural competence of our service system. In order to address this issue in the present RFP, the applicant must demonstrate an understanding of the demographic, racial, ethnic, socioeconomic, and religious characteristics of the population in its targeted service area.

- b. **Family and Significant Other Participation.** See Commissioner's Policy Statement #71 on Family Psycho-education: <http://www.ct.gov/dmhas/lib/dmhas/policies/chapter6.12.pdf>

DMHAS believes the recovery process can be promoted by drawing upon an individual's natural support system which can include an individual's family members, friends, and others. Family involvement can be a positive recovery support and contributor to improved treatment outcomes, successful employment, continued education, and stable housing.

- c. **Recovery-Oriented Service System.** See Commissioner's Policy Statement #83 Promoting a Recovery-Oriented Service System: <http://www.ct.gov/dmhas/cwp/view.asp?a=2907&q=334672>

The purpose of this policy is to formally designate the concept of "recovery" as the overarching goal of the service system operated and funded by DMHAS. This action is consistent with the fact that DMHAS is a healthcare service agency. Thus, it is most appropriate that one should hope and expect that, as a result of active involvement with this healthcare system, individuals will be better able to manage their illness and improve the quality of their life.

- d. **Co-occurring Capability.** See Commissioner's Policy Statement #84: <http://www.ct.gov/dmhas/LIB/dmhas/CommissionersPolicies/policy84.pdf>

The single overarching goal of DMHAS, as a healthcare service agency, is promoting and achieving a quality-focused, culturally responsive, and recovery-oriented system of care. The attainment of this goal is possible only if the service system design, delivery, and evaluation are fully responsive to people with co-occurring mental health and substance use disorders. Given the high prevalence of co-occurring disorders, the high number of critical incidents involving individuals with these conditions, and the often poor outcomes associated with co-occurring disorders in the absence of integrated care, it is extremely important that we collectively improve our system in this area. There have been advances in research and practice related to co-occurring disorders and it is important that the system close the science to service gap. Through these and other related improvements, the citizens of the state

can expect better processes of care and better outcomes for people with co-occurring disorders.

- e. Employment and Education. See Commissioner's Policy Statement # 73 on Accessibility to Services:
<http://www.ct.gov/dmhas/lib/dmhas/policies/chapter6.17.pdf>

DMHAS recognizes that gainful employment is essential for most people's well-being. Employment makes recovery from, and dealing with, psychiatric and/or addiction disorders easier and increases self-esteem and satisfaction with one's daily life. The DMHAS providers at all levels will communicate this belief that people with behavioral health disorders can, and should be, productive members of society.

- f. Gender Responsive Care. DMHAS' initiative for Gender Responsive Care is designed to enhance our current behavioral health service system for women in a way that is trauma-informed, gender-specific, and promotes self-determination. A best practice system of care for women, supported by system-level policies and standards and program-level practices is currently under development. The goal is to improve treatment outcomes and the quality of services for women receiving substance abuse treatment in Connecticut through participation in a recovery-oriented treatment system of care that incorporates current best practices in gender responsive and trauma-informed programming.

- g. Trauma Informed Care. See Commissioner's Policy Statement on Trauma Informed Care:
<http://www.ct.gov/dmhas/lib/dmhas/policies/chapter6.5.pdf>

The primary goal of DMHAS' Trauma Informed Care initiative is to deliver behavioral health care that is sensitive and responsive to the needs of men and women who have experienced trauma. Trauma services are being developed based on the guiding principle that treatment must be informed by a sound scientific, clinical, culturally relevant, and humanistic understanding of the impact and impairment caused by traumatic stress.

- h. Person-Centered Care. See CT Implementation of Person-Centered Care:
<http://www.ct.gov/dmhas/LIB/dmhas/Recovery/personcentered.pdf>

Commissioner's Policy Statement #83 formally designates the concept of "recovery" as the overarching goal of the service system operated and funded by DMHAS. DMHAS' mission to provide recovery-oriented care requires that services be maximally responsive to each individual's unique needs, values, and preferences. Emphasis on person-centered care is consistent with major advances that have already occurred throughout the DMHAS system, e.g., greater collaboration with advocacy and recovery groups and increased recognition of, and funding for, peer-based services.

- i. Concurrent Medication-Assisted Treatment (MAT). Each program must have access to, or coordinate with other providers, services that address the needs of individuals they serve, including individuals whose recovery is supported and enhanced through the use of clinically appropriate medications. These include, but are not limited to, medications to address symptoms directly related to substance use disorders (e.g., methadone, buprenorphine/naloxone, naltrexone, disulfiram, etc.), psychiatric

conditions (e.g., antidepressants, antianxiolytics, antipsychotics, etc.), physical conditions (e.g., insulin, analgesics for chronic pain management, medications for TB, HIV/STD, Hepatitis, anti-hypertensives, anti-cholesterol, etc.), and smoking cessation medications (e.g., varenicline, wellbutrin, over-the-counter (OTC) products, etc.). Programs are encouraged to facilitate and support general wellness, including the use of effective medications.

- j. DMHAS' Recovery Practice Guidelines. See Practice Guidelines for Recovery-Oriented Behavioral Health Care:
<http://www.ct.gov/dmhas/lib/dmhas/publications/practiceguidelines.pdf>

Wherever possible, programs must be guided by innovative, recovery-oriented, community-focused practice principles and guidelines, such as those outlined in the DMHAS' Practice Guidelines for Recovery-Oriented Behavioral Health Care. DMHAS' Guidelines emphasize the following principles: Participation, Promoting Access and Engagement, Continuity of Care, Strengths-Based Assessment, Individualized Recovery Planning, Functioning as a Recovery Guide, Community Mapping, Development, and Inclusion, and Identifying and Addressing Barriers to Recovery.

- k. Citizenship. Citizenship builds on DMHAS' Recovery vision by fostering full citizenship among the people served. An important component of this vision requires providers to cultivate partnerships with local communities in all spheres of civic life (e.g., housing, employment, education, socialization, recreation, spirituality, etc.). In some cases, this will involve building on and expanding current partnerships; in others it will involve creating new ones. Citizenship assists program participants to: understand and exercise rights, identify ways to fulfill goals and responsibilities, enhance their roles as valued members of their communities, enhance their knowledge and access of community resources, and enhance their ability to develop supportive relationships and networks.
- l. Integration of Primary Health and Wellness. Persons with serious mental illness have a life expectancy that is 25 years less than the general population. Integration of and/or linkages between behavioral and primary health and wellness approaches must be addressed to improve health and quality of life and to enhance life expectancy for individuals served throughout the DMHAS service system.

5. **Staffing Requirements**. Proposals must include a proposed staffing plan for each of the residential programs. Proposers must describe the staff categories, including the extent to which they have the appropriate training, experience and credentialing to perform assigned duties, the extent to which staff will be multi-lingual and multi-cultural. Brief job descriptions, minimum qualifications, hours per week and hourly wages must be provided for all staff categories assigned to this project. Please do not include resumes.

Staffing Levels. It is the Department's expectation that the program/service component will meet minimum staffing levels specified below. Proposers may propose use of multiple persons to comprise a Full Time Equivalent (FTE), but the Department reserves the right to require a 1 person to 1 FTE ratio at its discretion:

- a. MH Intensive Residential Services with High Medical Acuity

- 1) 1 full-time equivalent (FTE) MH Intensive Residential Director who serves as the clinical/administrative supervisor of the program;
 - 2) Residential Counselors who provide direct service, case management, life skills training, employment/education assistance and supervision to individuals residing within the residential program 24/7. The staffing pattern for the residence is 3 (1st Shift) / 3 (2nd Shift) and 2 (3rd Shift) on weekdays and weekends
 - 3) 1 FTE RN on shift 1 and 2
 - 4) .25 Occupational Therapist
 - 5) 1 FTE Certified Nurse Assistant
 - 6) .5 FTE Program Assistant who is responsible for organizing, coordinating, and monitoring all non-clinical operations of the Program, including managing medical records; operating and coordinating the management information system; for individual and program expenditures; and providing receptionist activities, including triaging calls and coordinating communication within the team and between the team and consumers;
 - 7) At least one direct-care team member must be a person in recovery from psychiatric or co-occurring psychiatric and substance use disorders and be certified as a Recovery Support Specialist;
 - 8) At least one direct-care team member must have special training in rehabilitation (e.g., skill-building) interventions; and
 - 9) Each client has a primary case manager who provides assistance with orientation to community resources and accessing recovery support services, entitlements, and medical services. They also teach, coach, and assist with life skills acquisition.
 - 10) Program must meet dietary needs of all clients within the program.
 - 11) Multi-lingual / Spanish-speaking direct care staff.
- b. Staff Training and Supervision. The program must have a written policy for clinical supervision of all staff that provide treatment, habilitation/rehabilitation, and support services. This supervision and direction shall consist of:
1. Individual, side-by-side sessions in which the supervisor accompanies an individual staff member to meet with a program participant in a regularly scheduled or crisis meeting in order to assess performance of the staff member, offer feedback, and model alternative treatment approaches;
 2. Participation with team members in organizational staff meetings and regularly scheduled treatment planning meetings to review and assess staff performance and provide direction regarding individual cases;
 3. Regular meetings with individual staff to review their work with program participants, assess clinical performance, and offer feedback;
 4. Regular reviews, critiques, and feedback regarding staff documentation (with special emphasis on the quality, completeness, and timeliness of progress notes, assessments, treatment plans, and treatment plan reviews);
 5. Regular reviews of staff productivity including the percent of time spent in direct contact with program participants, and time spent providing services in community settings (out of the office) where appropriate or required;

6. Written documentation of all clinical supervision provided to Mental Health Intensive residential staff; and
 7. Documentation of staff participation in training events, including:
 - a) Specialized training in recovery-oriented approaches to skill building and rehabilitation activities;
 - b) Documentation and related compliance issues; and
 - c) Risk assessment and management.
- 6. Data and Technology Requirements.** Proposers must demonstrate sufficient capacity to collect and manage Department-required data. The Department expects the following:
- a. Program service site will have processes in place that utilize data to monitor and inform program management and improvement;
 - b. Proposers will have sufficient capacity to collect and manage DMHAS required data regarding admission, discharge, and services. Proposals must describe the proposer's past practice in submitting required data to DMHAS, if applicable, or other organizations, and explain how that process will be incorporated in this new program;
 - c. Proposers will be required to submit information related to Targeted Case Management Services. Proposals must describe how your agency has met reporting requirements for such. If this would be a new reporting requirement, please describe how you will meet the reporting requirement; and
 - d. Proposers and the proposed program have the capability to access the internet, send/receive outside email and view PDF documents. Proposals must also describe the current office operating systems utilized by the agency, and the capability of the agency to maintain electronic health records and electronic case management records/offender files.
- 7. Sub-Contractors.** It is the Department's expectation that direct service provision for the Level of Care required under this RFP be provided by the proposer.
- 8. Work Plan.** Proposals must include a detailed implementation process and timeline, including the identification of all necessary steps to operationalizing the residential program, target dates, and individuals responsible. It is the Department's expectation that proposers will create and include in their proposals, the following:
- a. A time line describing the start-up process to obtain and remodel the physical setting/structure for the Mental Health Intensive Residential Program, if necessary;
 - b. A time line describing the startup process to hire, orient, and train staff;
 - c. An estimated date by which the client admission process will begin
 - d. An estimated date by which the residential program will be fully operational.

The ability to start up a viable program in a short time frame will receive higher consideration/score in the evaluation process. Proposers with a demonstrated capacity to be fully operational before the anticipated start date will be given higher consideration /score.

D. COST PROPOSAL COMPONENT

1. Financial Requirements

Any proposer agency that does not hold a current contract with the Department, must submit cover letters from their auditor for the last three (3) annual audits of their agency and a copy of their most recent financial audit, included in **Section H** of the proposal. If less than three (3) audits were conducted, detail must be provided as to why, and any supporting documentation assuring the financial efficacy of the applicant agency should be included (i.e. an accountant prepared financial statement, a tax return, etc.).

If the three (3) most recent audits are available via the Office of Policy and Management's EARS system, such may be noted in the proposal, and a hardcopy of the audit cover letters need not be provided.

2. Budget Requirements

The Department has developed a cost model for each of the Mental Health Intensive Residential Program using data supplied by the current provider in the Department's Annual Financial Reports (AFR). Based on this analysis, the Department has determined that a program of this size and with the required program components should cost no more than **\$1,187,328** annually.

Startup costs for the first year of operation may be proposed, but the Department reserves the right to negotiate these costs based on available funding. Any proposed startup costs must be clearly identified in the Budget and cannot be annualized into future year funding.

Proposals must provide an itemized budget (**please refer to Form 8**) and narrative for the program. The Budget should be clear, realistic and appropriate to the program(s) proposed.

The Department expects that providers will supplement DMHAS funds with third party revenues where services are reimbursable. Each program budget must show the amount of revenue that will be generated through third party billing.

A budget narrative must be provided, explaining all costs contained in the budget.

E. Appendices

The following appendices must be included in the submission, as Section H. These appendices must not be used to extend or replace sections of the Program Narrative, and no other appendices are permitted for inclusion in the proposal.

1. Proof of CT Business Licensure - Proof of the Proposer agency's Connecticut Business License (issued through the Office of the Secretary of the State) shall be provided as **Appendix 1**. Please refer to the following hyperlink:
<https://www.concord-sots.ct.gov/CONCORD/online?sn=InquiryServlet&eid=99>
2. Proof of CT Non-Profit Status Proof of agency non-profit status, and if a current NSPL provider, a copy of their signed NSPL network agreement, shall be provided as **Appendix 2**.
3. Proof of Joint or CARF Accreditation shall be provided as **Appendix 3**

4. Proof of or proposed proof of Zoning/Certificate of Occupancy shall be provided as **Appendix 4**
5. Table of Organization shall be provided as **Appendix 5**
6. Letters of Reference shall be provided as **Appendix 6**
7. Cover Letters from Previous 3 Audits shall be provided as **Appendix 7**

IV. PROPOSAL OUTLINE

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B. Table of Contents	2
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c. Service Locations	
d. Qualifications/Certification/Licensure	
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a. Cultural Competence	
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6. Work Plan.	

G. Cost Proposal Component

- 1. Financial Requirements
- 2. Budget and Budget Narrative

H. Appendices

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I. Forms

- a. **Form #1: Gift and Campaign Contribution Certification**
This form must be completed and included in Section I of the proposal.
- b. **Form #2: Consulting Agreement Affidavit**
This form must be completed and included in Section I of the proposal.
- c. **Form #3: Acknowledgment of Contract Compliance**
This form must be completed and included in Section I of the proposal.
- d. **Form #4: Notification To Bidders**
This form must be completed and included in Section I of the proposal. For more information on completion of this report, go to www.ct.gov/chro
- e. **Form #5: Employer Information Report**
This form must be completed and included in Section I of the proposal. For more information on completion of this report, go to www.eeoc.gov
- f. **Form #6: IRAN Certification**
- g. **Form #7: Cover Sheet**
This form is page one (1) of your Proposal.
- h. **Form #8: Budget Template**



STATE OF CONNECTICUT GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION

Written or electronic certification to accompany a State contract with a value of \$50,000 or more in a calendar or fiscal year, pursuant to C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8, and No. 7C, Para. 10; and C.G.S. §9-612(g)(2)

INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (i) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

- CHECK ONE:** Initial Certification 12 Month Anniversary Update (Multi-year contracts only.)
- Updated Certification because of change of information contained in the most recently filed certification or twelve-month anniversary update.

GIFT CERTIFICATION:

As used in this certification, the following terms have the meaning set forth below:

- 1) "Contract" means that contract between the State of Connecticut (and/or one or more of its agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State agency below;
- 2) If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;
- 3) "Contractor" means the person, firm or corporation named as the contractor below;
- 4) "Applicable Public Official or State Employee" means any public official or state employee described in C.G.S. §4-252(c)(1)(i) or (ii);
- 5) "Gift" has the same meaning given that term in C.G.S. § 4-250(1);
- 6) "Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(B) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (B) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding **Gifts** by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a **Gift** to

any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

CAMPAIGN CONTRIBUTION CERTIFICATION:

I further certify that, on or after December 31, 2006, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(g)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support, any candidate for statewide public office, in violation of C.G.S. § 9-612(g)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after December 31, 2006 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(g)(1), to, or solicited on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support any candidates for statewide public office or the General Assembly, are listed below:

Lawful Campaign Contributions to Candidates for Statewide Public Office:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>

Lawful Campaign Contributions to Candidates for the General Assembly:

<u>Contribution Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

Printed Contractor Name

Printed Name of Authorized Official

Signature of Authorized Official

Subscribed and acknowledged before me this _____ day of _____, 20____.

Commissioner of the Superior Court (or Notary Public)



STATE OF CONNECTICUT
CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: ____]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, except for the agreement listed below:

Form fields for Consultant's Name and Title, Name of Firm (if applicable), Start Date, End Date, Cost, and Description of Services Provided.

Form fields for Is the consultant a former State employee or former public official? (YES/NO), and If YES: Name of Former State Agency, Termination Date of Employment.

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement. Shaded area containing fields for Printed Name of Bidder or Contractor, Signature of Principal or Key Personnel, Date, Printed Name (of above), and Awarding State Agency.

Sworn and subscribed before me on this ____ day of _____, 20__.

Acknowledgement of Contract Compliance - Notification to Bidders

**COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES
CONTRACT COMPLIANCE REGULATIONS
NOTIFICATION TO BIDDERS**

(Revised 09/3/15)

The contract to be awarded is subject to contract compliance requirements mandated by Sections 4a-60 and 4a-60a of the Connecticut General Statutes; and, when the awarding agency is the State, Sections 46a-71(d) and 46a-81i(d) of the Connecticut General Statutes. There are Contract Compliance Regulations codified at Section 46a-68j-21 through 43 of the Regulations of Connecticut State Agencies, which establish a procedure for awarding all contracts covered by Sections 4a-60 and 46a-71(d) of the Connecticut General Statutes.

According to Section 46a-68j-30(9) of the Contract Compliance Regulations, every agency awarding a contract subject to the contract compliance requirements has an obligation to “aggressively solicit the participation of legitimate minority business enterprises as bidders, contractors, subcontractors and suppliers of materials.”

“Minority business enterprise” is defined in Section 4a-60 of the Connecticut General Statutes as a business wherein fifty-one percent or more of the capital stock, or assets belong to a person or persons: “(1) Who are active in daily affairs of the enterprise; (2) who have the power to direct the management and policies of the enterprise; and (3) who are members of a minority, as such term is defined in subsection (a) of Section 32-9n.”

“Minority” groups are defined in Section 32-9n of the Connecticut General Statutes as “(1) Black Americans . . . (2) Hispanic Americans . . . (3) persons who have origins in the Iberian Peninsula . . . (4) Women . . . (5) Asian Pacific Americans and Pacific Islanders; (6) American Indians . . .” An individual with a disability is also a minority business enterprise as provided by Section 4a-60g of the Connecticut General Statutes. The above definitions apply to the contract compliance requirements by virtue of Section 46a-68j-21(11) of the Contract Compliance Regulations.

The awarding agency will consider the following factors when reviewing the bidder’s qualifications under the contract compliance requirements:

- (a) the bidder’s success in implementing an affirmative action plan;
- (b) the bidder’s success in developing an apprenticeship program complying with Sections 46a-68-1 to 46a-68-17 of the Administrative Regulations of Connecticut State Agencies, inclusive;
- (c) the bidder’s promise to develop and implement a successful affirmative action plan;
- (d) the bidder’s submission of employment statistics contained in the “Employment Information Form”, indicating that the composition of its workforce is at or near parity when compared to the racial and sexual composition of the workforce in the relevant labor market area; and
- (e) the bidder’s promise to set aside a portion of the contract for legitimate minority business enterprises. See Section 46a-68j-30(10)(E) of the Contract Compliance Regulations.

*** INSTRUCTIONS Proposer must sign acknowledgment below, and return acknowledgment to awarding agency along with signed proposal.**

The undersigned acknowledges receiving and reading a copy of the “Notification to Bidders” form.

Signature: _____

Date: _____

FORM #4**INSTRUCTIONS AND OTHER INFORMATION**

The following **BIDDER CONTRACT COMPLIANCE MONITORING REPORT** must be completed in full, signed, and submitted with the bid for this contract. The contract awarding agency and the Commission on Human Rights and Opportunities will use the information contained thereon to determine the bidders compliance to Sections 4a-60 and 4a-60a CONN. GEN. STAT., and Sections 46a-68j-23 of the Regulations of Connecticut State Agencies regarding equal employment opportunity, and the bidder's good faith efforts to include minority business enterprises as subcontractors and suppliers for the work of the contract.

1) Definition of Small Contractor

Section 4a-60g CONN. GEN. STAT. defines a small contractor as a company that has been doing business under the same management and control and has maintained its principal place of business in Connecticut for a one year period immediately prior to its application for certification under this section, had gross revenues not exceeding fifteen million dollars in the most recently completed fiscal year, and at least fifty-one percent of the ownership of which is held by a person or persons who are active in the daily affairs of the company, and have the power to direct the management and policies of the company, except that a nonprofit corporation shall be construed to be a small contractor if such nonprofit corporation meets the requirements of subparagraphs (A) and (B) of subdivision 4a-60g CONN. GEN. STAT.

To download an electronic copy of the Bidder Contract Compliance Monitoring Report from CHRO:

https://www.ct.gov/chro/lib/chro/Notification_to_Bidders.pdf

Please attach a copy of the **Bidder Contract Compliance Monitoring Report** to the Proposal as Form #4.

Bidder Contract Compliance Monitoring Report

2) Description of Job Categories (as used in Part IV Bidder Employment Information) (Page 2)

<p>MANAGEMENT: Managers plan, organize, direct, and control the major functions of an organization through subordinates who are at the managerial or supervisory level. They make policy decisions and set objectives for the company or departments. They are not usually directly involved in production or providing services. Examples include top executives, public relations managers, managers of operations specialties (such as financial, human resources, or purchasing managers), and construction and engineering managers.</p> <p>BUSINESS AND FINANCIAL OPERATIONS: These occupations include managers and professionals who work with the financial aspects of the business. These occupations include accountants and auditors, purchasing agents, management analysts, labor relations specialists, and budget, credit, and financial analysts.</p> <p>MARKETING AND SALES: Occupations related to the act or process of buying and selling products and/or services such as sales engineer, retail sales workers and sales representatives including wholesale.</p> <p>LEGAL OCCUPATIONS: In-House Counsel who is charged with providing legal advice and services in regards to legal issues that may arise during the course of standard business practices. This category also includes assistive legal occupations such as paralegals, legal assistants.</p> <p>COMPUTER SPECIALISTS: Professionals responsible for the computer operations within a company are grouped in this category. Examples of job titles in this category include computer programmers, software engineers, database administrators, computer scientists, systems analysts, and computer support specialists</p> <p>ARCHITECTURE AND ENGINEERING: Occupations related to architecture, surveying, engineering, and drafting are included in this category. Some of the job titles in this category include electrical and electronic engineers, surveyors, architects, drafters, mechanical engineers, materials engineers, mapping technicians, and civil engineers.</p> <p>OFFICE AND ADMINISTRATIVE SUPPORT: All clerical-type work is included in this category. These jobs involve the preparing, transcribing, and preserving of written communications and records; collecting accounts; gathering and distributing information; operating office machines and electronic data processing equipment; and distributing mail. Job titles listed in this category include telephone operators, bill and account collectors, customer service representatives, dispatchers, secretaries and administrative assistants, computer operators and clerks (such as payroll, shipping, stock, mail and file).</p>	<p>BUILDING AND GROUNDS CLEANING AND MAINTENANCE: This category includes occupations involving landscaping, housekeeping, and janitorial services. Job titles found in this category include supervisors of landscaping or housekeeping, janitors, maids, grounds maintenance workers, and pest control workers.</p> <p>CONSTRUCTION AND EXTRACTION: This category includes construction trades and related occupations. Job titles found in this category include boilermakers, masons (all types), carpenters, construction laborers, electricians, plumbers (and related trades), roofers, sheet metal workers, elevator installers, hazardous materials removal workers, paperhangers, and painters. Paving, surfacing, and tamping equipment operators; drywall and ceiling tile installers; and carpet, floor and tile installers and finishers are also included in this category. First line supervisors, foremen, and helpers in these trades are also grouped in this category.</p> <p>INSTALLATION, MAINTENANCE AND REPAIR: Occupations involving the installation, maintenance, and repair of equipment are included in this group. Examples of job titles found here are heating, ac, and refrigeration mechanics and installers; telecommunication line installers and repairers; heavy vehicle and mobile equipment service technicians and mechanics; small engine mechanics; security and fire alarm systems installers; electric/electronic repair, industrial, utility and transportation equipment; millwrights; riggers; and manufactured building and mobile home installers. First line supervisors, foremen, and helpers for these jobs are also included in the category.</p> <p>MATERIAL MOVING WORKERS: The job titles included in this group are Crane and tower operators; dredge, excavating, and lading machine operators; hoist and winch operators; industrial truck and tractor operators; cleaners of vehicles and equipment; laborers and freight, stock, and material movers, hand; machine feeders and offbearers; packers and packagers, hand; pumping station operators; refuse and recyclable material collectors; and miscellaneous material moving workers.</p> <p>PRODUCTION WORKERS: The job titles included in this category are chemical production machine setters, operators and tenders; crushing/grinding workers; cutting workers; inspectors, testers sorters, samplers, weighers; precious stone/metal workers; painting workers; cementing/gluing machine operators and tenders; etchers/engravers; molders, shapers and casters except for metal and plastic; and production workers.</p>
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3) Definition of Racial and Ethnic Terms (as used in Part IV Bidder Employment Information) (Page 3)

<p>White (not of Hispanic Origin)-All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.</p> <p>Black (not of Hispanic Origin)-All persons having origins in any of the Black racial groups of Africa.</p> <p>Hispanic- All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.</p>	<p>Asian or Pacific Islander- All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes China, India, Japan, Korea, the Philippine Islands, and Samoa.</p> <p>American Indian or Alaskan Native- All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.</p>
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BIDDER CONTRACT COMPLIANCE MONITORING REPORT

PART I – Bidder Information

<p>Company Name: _____</p> <p>Street Address: _____</p> <p>City & State: _____</p> <p>Chief Executive: _____</p> <p>Major Business Activity: (brief description)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Bidder Parent Company: (If any)</p> <p>_____</p> <p>Other Locations in CT: (If any)</p> <p>_____</p>	<p>Bidder Federal Employer Identification Number: _____</p> <p>Or Social Security Number: _____</p> <p>Bidder Identification (response optional/definitions on page 1)</p> <p>-Bidder is a small contractor? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>-Bidder is a minority business enterprise? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>(If yes, check ownership category)</p> <p>Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian American <input type="checkbox"/></p> <p>American Indian/Alaskan Native <input type="checkbox"/> Iberian Peninsula <input type="checkbox"/></p> <p>Individual(s) with a Physical Disability <input type="checkbox"/> Female <input type="checkbox"/></p> <p>-Bidder is certified as above by State of CT? Yes <input type="checkbox"/> No <input type="checkbox"/></p>
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PART II - Bidder Nondiscrimination Policies and Procedures

<p>1. Does your company have a written Affirmative Action/Equal Employment Opportunity statement posted on company bulletin boards? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>2. Does your company have the state-mandated sexual harassment prevention in the workplace policy posted on company bulletin boards? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>3. Do you notify all recruitment sources in writing of your company's Affirmative Action/Equal Employment Opportunity employment policy? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>4. Do your company advertisements contain a written statement that you are an Affirmative Action/Equal Opportunity Employer? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>5. Do you notify the Ct. State Employment Service of all employment openings with your company? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>6. Does your company have a collective bargaining agreement with workers? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>6a. If yes, do the collective bargaining agreements contain non-discrimination clauses covering all workers? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>6b. Have you notified each union in writing of your commitments under the nondiscrimination requirements of contracts with the state of CT? Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>7. Do all of your company contracts and purchase orders contain non-discrimination statements as required by Sections 4a-60 & 4a-60a Conn. Gen. Stat.? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>8. Do you, upon request, provide reasonable accommodation to employees, or applicants for employment, who have physical or mental disability? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>9. Does your company have a mandatory retirement age for all employees? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>10. If your company has 50 or more employees, have you provided at least two (2) hours of sexual harassment training to all of your supervisors? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>11. If your company has apprenticeship programs, do they meet the Affirmative Action/Equal Employment Opportunity requirements of the apprenticeship standards of the Ct. Dept. of Labor? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>12. Does your company have a written affirmative action Plan? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If no, please explain. _____ _____</p> <p>13. Is there a person in your company who is responsible for equal employment opportunity? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, give name and phone number: _____ _____</p>
--	---

I. Will the work of this contract include subcontractors or suppliers? Yes No

1a. If yes, please list all subcontractors and suppliers and report if they are a small contractor and/or a minority business enterprise. (defined on page 1 / use additional sheet if necessary)

1b. Will the work of this contract require additional subcontractors or suppliers other than those identified in 1a. above? Yes No

PART IV - Bidder Employment Information

Date: _____

JOB CATEGORY *	OVERALL TOTALS	WHITE (not of Hispanic origin)		BLACK (not of Hispanic origin)		HISPANIC		ASIAN or PACIFIC ISLANDER		AMERICAN INDIAN or ALASKAN NATIVE	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Management											
Business & Financial Ops											
Marketing & Sales											
Legal Occupations											
Computer Specialists											
Architects/Engineering											
Office & Admin Support											
Wkly/ Grounds Cleaning/Maintenance											
Construction & Extraction											
Installation, Maintenance & Repair											
Material Moving Workers											
Production Occupations											
TOTALS ABOVE											
Total One Year Ago											
FORMAL ON THE JOB TRAINEES (ENTER FIGURES FOR THE SAME CATEGORIES AS ARE SHOWN ABOVE)											
Apprentices											
Trainees											

*NOTE: JOB CATEGORIES CAN BE CHANGED OR ADDED TO (EX. SALES CAN BE ADDED OR REPLACE A CATEGORY NOT USED IN YOUR COMPANY)

PART V - Bidder Hiring and Recruitment Practices

(Page 5)

1. Which of the following recruitment sources are used by you? (Check yes or no, and report percent used)				2. Check (X) any of the below listed requirements that you use as a hiring qualification		3. Describe below any other practices or actions that you take which show that you hire, train, and promote employees without discrimination
				(X)		
SOURCE	YES	NO	% of applicants provided by source			
State Employment Service	<input type="checkbox"/>	<input type="checkbox"/>			Work Experience	
Private Employment Agencies	<input type="checkbox"/>	<input type="checkbox"/>			Ability to Speak or Write English	
Schools and Colleges	<input type="checkbox"/>	<input type="checkbox"/>			Written Tests	
Newspaper Advertisement	<input type="checkbox"/>	<input type="checkbox"/>			High School Diploma	
Walk Ins	<input type="checkbox"/>	<input type="checkbox"/>			College Degree	
Present Employees	<input type="checkbox"/>	<input type="checkbox"/>			Union Membership	
Labor Organizations	<input type="checkbox"/>	<input type="checkbox"/>			Personal Recommendation	
Minority/Community Organizations	<input type="checkbox"/>	<input type="checkbox"/>			Height or Weight	
Others (please identify)	<input type="checkbox"/>	<input type="checkbox"/>			Car Ownership	
	<input type="checkbox"/>	<input type="checkbox"/>			Arrest Record	
	<input type="checkbox"/>	<input type="checkbox"/>			Wage Garnishments	

Certification (Read this form and check your statements on it CAREFULLY before signing). I certify that the statements made by me on this BIDDER CONTRACT COMPLIANCE MONITORING REPORT are complete and true to the best of my knowledge and belief, and are made in good faith. I understand that if I knowingly make any misstatements of facts, I am subject to be declared in non-compliance with Section 4a-60, 4a-60a, and related sections of the CONN. GEN. STAT.

(Signature)	(Title)	(Date Signed)	(Telephone)
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- Joint Reporting Committee
- Equal Employment Opportunity Commission
- Office of Federal Contract Compliance Programs (Labor)

EQUAL EMPLOYMENT OPPORTUNITY

EMPLOYER INFORMATION REPORT EEO-1

Standard Form 100
REV 01/2006
O.M.B. No. 3048-9007
EXPIRES 01/2009
100-214

Section A—TYPE OF REPORT

Refer to instructions for number and types of reports to be filed.

1. Indicate by marking in the appropriate box the type of reporting unit for which this copy of the form is submitted (MARK ONLY ONE BOX).

- | | |
|---|---|
| (1) <input type="checkbox"/> Single-establishment Employer Report | Multi-establishment Employer:
(2) <input type="checkbox"/> Consolidated Report (Required)
(3) <input type="checkbox"/> Headquarters Unit Report (Required)
(4) <input type="checkbox"/> Individual Establishment Report (submit one for each establishment with 50 or more employees)
(5) <input type="checkbox"/> Special Report |
|---|---|

2. Total number of reports being filed by this Company (Answer on Consolidated Report only) _____

Section B—COMPANY IDENTIFICATION (To be answered by all employers)

1. Parent Company					OFFICE USE ONLY
a. Name of parent company (owns or controls establishment in item 2) omit if same as label					a.
Address (Number and street)					b.
City or town		State	ZIP code		c.
2. Establishment for which this report is filed. (Omit if same as label)					
a. Name of establishment					d.
Address (Number and street)		City or Town	County	State	ZIP code
					e.
b. Employer identification No. (IRS 9-DIGIT TAX NUMBER)					f.
c. Was an EEO-1 report filed for this establishment last year? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Section C—EMPLOYERS WHO ARE REQUIRED TO FILE (To be answered by all employers)

<input type="checkbox"/> Yes	<input type="checkbox"/> No	1. Does the entire company have at least 100 employees in the payroll period for which you are reporting?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	2. Is your company affiliated through common ownership and/or centralized management with other entities in an enterprise with a total employment of 100 or more?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	3. Does the company or any of its establishments (a) have 50 or more employees AND (b) is not exempt as provided by 41 CFR 60-1.5, AND either (1) is a prime government contractor or first-tier subcontractor, and has a contract, subcontract, or purchase order amounting to \$50,000 or more, or (2) serves as a depository of Government funds in any amount or is a financial institution which is an issuing and paying agent for U.S. Savings Bonds and Savings Notes?
If the response to question C-3 is yes, please enter your Dun and Bradstreet identification number (if you have one): <input style="width: 100px;" type="text"/>		

NOTE: If the answer is yes to questions 1, 2, or 3, complete the entire form, otherwise skip to Section G.

Section D - EMPLOYMENT DATA
 Employment at this establishment - Report all permanent full- and part-time employees including apprentices and on-the-job trainees unless specifically excluded as set forth in the instructions. Enter the appropriate figures on all lines and in all columns. Blank spaces will be considered as zeros.

Job Categories	Number of Employees (Report employees in only one category)														Total Col A - N		
	Race/Ethnicity																
	Hispanic or Latino							Not-Hispanic or Latino									
	Male			White				Black or African American				Asian				American Indian or Alaska Native	
Executive/Senior Level Officials and Managers	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O		
First/Mid-Level Officials and Managers																	
Professionals																	
Technicians																	
Sales Workers																	
Administrative Support Workers																	
Craft Workers																	
Operatives																	
Laborers and Helpers																	
Service Workers																	
TOTAL																	
PREVIOUS YEAR TOTAL																	

1. Date(s) of payroll period used: _____ (Omit on the Consolidated Report.)

Section E - ESTABLISHMENT INFORMATION (Omit on the Consolidated Report.)

1. What is the major activity of this establishment? (Be specific, i.e., manufacturing steel castings, retail grocer, wholesale plumbing supplies, title insurance, etc. Include the specific type of product or type of service provided, as well as the principal business or industrial activity.)

Section F - REMARKS

Use this item to give any identification data appearing on the last EEO-1 report which differs from that given above, explain major changes in composition of reporting units and other pertinent information.

Section G - CERTIFICATION

Check 1 All reports are accurate and were prepared in accordance with the instructions. (Check on Consolidated Report only.)

Check 2 This report is accurate and was prepared in accordance with the instructions.

Name of Certifying Official _____ Title _____ Signature _____ Date _____

Name of person to contact regarding this report _____ Title _____ Address (Number and Street) _____

City and State _____ Zip Code _____ Telephone No. (including Area Code and Extension) _____ Email Address _____

All reports and information obtained from individual reports will be kept confidential as required by Section 709(c) of Title VII WILLFULLY FALSE STATEMENTS ON THIS REPORT ARE PUNISHABLE BY LAW. U.S. CODE, TITLE 18, SECTION 1001

Form 7. Iran Certification

Rev. 3/28/14  [Adobe.pdf](#)  [Word.doc](#)

Effective October 1, 2013, this form must be submitted for any large state contract, as defined in section 4-250 of the Connecticut General Statutes. This form must always be submitted with the bid or proposal, or if there was no bid process, with the resulting contract, regardless of where the principal place of business is located. Entities whose principal place of business is located outside of the United States are required to complete the entire form, including the certification portion of the form. United States subsidiaries of foreign corporations are exempt from having to complete the certification portion of the form. Those entities whose principal place of business is located inside of the United States must also fill out the form, but do not have to complete the certification portion of the form.



FORM#7

REQUEST FOR PROPOSAL
RFP # DMHAS-CSD-MH Intensive Residential Services-2021
 Department of Mental Health and Addiction Services
 Proposal Cover Sheet

Proposer/Agency Name _____ FEIN _____

Address _____

City/Town _____ State _____ Zip Code _____

Agency Contact: _____ Title: _____

Telephone Number _____ Fax Number _____ E-Mail Address _____

Total Annual Program Cost _____

Total Annual Cost to DMHAS _____

<p>Proposed <u>Program</u> Address:</p> <p>_____</p> <p>_____</p>
--

Proposer/Agency Fiscal Year: _____ to _____
(month) (month)

Is your agency a non-profit? Yes No Is your agency incorporated? Yes No

Is your agency registered as a:

Minority Business Enterprise? Yes No

Women Business Enterprise? Yes No

Small Business Enterprise? Yes No

I certify that to the best of my knowledge and belief, the information contained in this application is true and correct. The application has been duly authorized by the governing body of the applicant, the applicant has the legal authority to apply for this funding, the applicant will comply with applicable state and federal laws and regulations, and that I am a duly authorized signatory for the applicant.

Signature of Authorizing Official _____ Date

Typed Name and Title

DIRECT EXPENSES		ANNUAL Costs
<u>5100: SALARIES</u>		-
5101	Staff Salaries & Wages	
5102	Overtime	
5103	Non-Routine Comp. (specify in narrative)	
Total Salaries		\$ -
<u>5200: FRINGE BENEFITS</u>		
<u>5300: CONTRACTUAL SERVICES</u>		-
5301	Medical Professional	
5302	Behavioral Health Professional	
5303	Contracted Workers - Non-Payroll	
5304	Other Contractual (specify in narrative)	
Total Contractual Services		\$ -
<u>5400: TRANSPORTATION</u>		-
5401	Staff Travel Reimbursement	
5402	Vehicle Leases	
5403	Vehicle Maintenance	
5404	Other Transportation (specify in narrative)	
Total Transportation		\$ -
<u>5500: MATERIALS AND SUPPLIES</u>		-
5501	Food	
5502	Lab & Medical Supplies	
5503	Equipment (Less than \$5,000)	
5504	Other Materials and Supplies (specify in narrative)	
Total Materials/Supplies		\$ -
<u>5600: FACILITIES</u>		-
5601	Rent and Real Estate Taxes	
5602	Security	
5603	Maintenance & Repair - Facility and Plant	
5604	Utilities	
5605	Other Facilities (specify in narrative)	
Total Facilities		\$ -
<u>5700: CAPITAL EXPENSES (> \$5,000)</u>		-
5701	Capital Equipment	
5702	Depreciation	
5703	Other Capital (specify in narrative)	
Total Capital Expenses		\$ -
<u>5800: OTHER EXPENSES</u>		-
5801	Communications	

5802	Insurance	
5803	Housekeeping	
5804	Staff Training and Conferences	
5805	Drug Testing	
5806	Other (specify in narrative)	
Total Other Expenses		\$ -
5900: CLIENT SUBSIDIES		-
5901	Transportation	
5902	Nutrition/Food Vouchers	
5903	Education	
5904	Housing	
5905	Personal Items	
5906	Other Client Subsidies (specify in narrative)	
Total Client Subsidies		\$ -
TOTAL DIRECT EXPENSES		\$ -
INDIRECT EXPENSES		-
7100: ADMINISTRATIVE & GENERAL		-
7111	Staff Salaries & Wages	
7120	Fringe Benefits	
	All Other A&G	
TOTAL INDIRECT EXPENSES		\$ -
-		\$ -

Attachment #1 (Scope of Service)

INTENSIVE RESIDENTIAL MENTAL HEALTH SERVICES

- a. The Contractor shall provide Intensive Residential Mental Health Services to individuals age eighteen (18) or older who have serious and persistent psychiatric disorders, or co-occurring serious and persistent psychiatric disorders and substance use disorders; some individuals admitted may also have co-occurring medical conditions such as diabetes or obesity, that are impacted and complicated by the adjunct psychiatric disorder (hereinafter "individual" or "Individual" shall have the same meaning as "Client" as defined in Part II, Section A.5 of this contract).

Such services, hereinafter referred to as Intensive Residential Mental Health Services, shall be provided in a highly structured and rehabilitative environment, with twenty-four (24) hour staff supervision, and a length of stay of twelve (12) to twenty-four (24) months. Admission to the Intensive Residential Mental Health Services shall come directly from a state-operated inpatient facility and be approved through the Department's Medical Director or his/her designee.

Specific Intensive Residential Mental Health programs, locations, capacities and hours of operation to be provided by the Contractor under the terms of this contract, are delineated in Part I, Section A (Summary of Programs)

Specifically, the Contractor shall:

1. Collaborate closely with referring agents, and the Department's Local Mental Health Authorities (LMHAs), to ensure expedient and seamless transitions from inpatient care;
2. Perform an initial intake evaluation that includes screening each individual for symptoms of substance use using a Department approved screening instrument;
3. Ensure that all individuals with substance use issues identified by the screening instrument receive an assessment by a licensed professional;
4. Document the substance use disorder diagnoses for each individual as appropriate.
5. If an individual is currently receiving substance use services, complete a release of information, collaborate with the provider, and document as appropriate;
6. Accept individuals who are on medication for a substance use disorder, unless the Department so waives this requirement;
7. Conduct assessments, including but not limited to the utilization of a tool identified by the Department, to help individuals identify and explore personal strengths, and community and recovery resources and supports to enable the individuals to be contributing members of their community;
8. Develop with each individual, a recovery plan that addresses identified needs in areas such as employment, education, self-management skills, relapse prevention and social skills training. Such plans shall contain goals identified by the individual and shall provide detailed information on goals, objectives, tasks, and interventions, and shall identify the individual responsible and time frames for accomplishment;
9. Complete a review of the recovery plan and determine the appropriateness of the individual's continued placement in the program, not less than once every ninety (90) days;
10. Provide instruction and activities that increase each individual's skills and independence that include the following areas:
 - a. Coping strategies and behavior management alternatives;
 - b. Solving daily problems related to community living, medical conditions and interpersonal relationships;
 - c. Alleviation and management of psychiatric disorders;
 - d. Daily living and self-care skills including at minimum, medication compliance, self-management of the symptoms of mental illness, the use of transportation, planning and preparation of nutritious meals, personal grooming, management of financial resources, shopping, use of leisure time, interpersonal communication and problem-solving;
 - e. Skills necessary to support a full and independent life in the community;
 - f. Skills necessary to manage physical health needs and co-occurring medical conditions such as diabetes, obesity, etc. that are impacted and complicated by adjunct psychiatric disorder including self-management of medications for physical disorders;
 - g. Skills necessary for the use of naloxone in response to opioid overdose;
 - h. Connecting individuals to natural community supports and mentors;
 - i. Development of self-advocacy skills and assistance with accessing self-help and advocacy resources;
 - j. Recovery skills used to prevent relapse and manage symptom cycles;
 - k. Development or maintenance of positive social relationships, to ensure independent participation in social, interpersonal or community activities, and to achieve full community reintegration.
11. Monitor self-administration of medication;
12. Provide appropriate substance use disorder evaluation, education, treatment and referrals;
13. Facilitate appropriate linkages with community services and recovery supports;

14. Develop a discharge plan to sustain his or her recovery and maintain involvement with needed services;
and
 15. Ensure all direct care staff and non-direct care staff who have client contact receive training in the use of naloxone in response to an opioid overdose.
- c. The Contractor shall provide services which meet the required utilization rate for Intensive Residential Mental Health Services. The Contractor's service utilization rate shall be measured by the number of days utilized as reported to the Department's information system and in the required monthly service reports. Such information shall be verified by the Department. The minimum acceptable utilization rate for intensive residential programs is 90% of the maximum attainable number of days as determined by multiplying the bed capacity for each funded program as stated above by 365. Utilization for all funded treatment services shall be computed based on total program capacity.
- d. The Contractor shall implement the programs and services described herein to result in the following outcomes on behalf of individuals served. Such outcomes shall be measured in the manner described herein. Outcome results achieved pursuant to these terms and conditions will be monitored by the Department through data reported by the Contractor to the Department's information systems, in observations through site visits and/or in the required monthly service reports. The Department's outcome indicators for the Contractor's funded services are as follows:

PERFORMANCE OUTCOME MEASURES

INTENSIVE RESIDENTIAL MENTAL HEALTH SERVICES

OUTCOMES	MEASURES
1. Contractor will meet reporting requirements in a timely manner.	Department required data will be submitted to the Departments' data collection system no later than the 15 th day of each month.
2. Contractor will meet the expected utilization rate or annual projection of individuals to be served for this level of care.	A utilization rate of at least 90% will be achieved.
3. Individuals will report satisfaction with their services.	At least 80% of respondents to the Department's consumer satisfaction survey will rate services positively in each of the domains of access to services, quality of services, outcomes, participation in service planning, respect, recovery and general satisfaction with services.
4. Individuals will improve or maintain their overall functioning.	At least 75% of individuals served annually will maintain or increase their level of functioning as measured by the Global Assessment of Functioning Scale (GAF), Modified Global Assessment of Functioning Scale (MGAF).
5. Individuals will successfully complete treatment.	At least 75% of individuals discharged will have substantially completed the objectives identified on their recovery plans.
6. Individuals will receive follow-up care promptly.	At least 90% of individuals who have successfully completed treatment will have at least one (1) residential admission at a lower level of service intensity, or two (2) outpatient services within thirty (30) days of discharge.
7. Individuals will avoid readmission to the same or higher level of care.	No more than 15% of individuals who have been discharged will be readmitted to the same or higher level of care within thirty (30) days.