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# Safe Options Support (SOS) Program: NYC CTI Teams

## Request for Proposals
## Bidder's Conference

**July 18, 2023**

# New York State's Expanded Homeless Initiative

NEW YORK STATE OF OPPORTUNITY. Office of Mental Health

# NYS Expanded Homeless Initiative

- Currently there is an estimated 3,500 individuals who are unsheltered in NYC.
- There are currently 11 SOS Teams operating throughout Manhattan, Bronx, Brooklyn and Queens.
- 7 SOS Teams were recently awarded in areas outside NYC, and additional teams are planned across NYS.
- Funding is being provided to support 2 SOS (Safe Options Support) Critical Time Intervention (CTI) Teams.

# SOS CTI Award Information

- Teams will be awarded as follows: One (1) in Richmond County (Staten Island) and one (1) in Queens County (The Rockaways area of the borough).
- Each team award will be made in the amount of $6,698,640.00 for five (5) years. Annual funding for each of the five (5) years is $1,339,728.00.
- Over the course of the contract, opportunities may be explored for increased revenue from billable services under the Health Home Plus program.

# SOS (Safe Options Support): CTI Teams Overview

# SOS CTI Teams

- SOS Teams will use an evidence-based Critical Time Intervention (CTI) approach to provide intensive outreach, engagement and care coordination services for up to 12 months, pre- and post-housing placement, with an intensive initial outreach and engagement period.

- Participants will learn self-management skills and master activities of daily living to support self-efficacy and recovery.

# SOS CTI Teams

- Each SOS CTI team will attempt to conduct 1,200 outreach encounters each calendar year, and enroll at least 90 individuals into CTI services

- All individuals referred will receive sustained outreach and engagement attempts, even if they initially decline services.

# SOS CTI Teams

- SOS Teams will be serving individuals as they transition from street homelessness to housing and facilitating connection to treatment and support services.

- SOS Teams will be comprised of licensed clinicians, care managers, peers, and registered nurses.

# Referrals to SOS CTI Teams

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- Individual referrals to SOS CTI Teams can be made by
  - Outreach teams
  - Hospitals
  - Community, family and caregivers
  - Community providers
  - Police
  - MTA
  - City and State Agencies (OMH, OASAS, OTDA, DOHMH, DHS, etc.)

# Referrals to SOS CTI Teams

- Referrals to the SOS CTI Teams will be managed through a Referral Hub and assigned to teams based on location and need.

- Teams will work in close collaboration with Street Homeless Outreach Teams, hospitals, and other stakeholders to prevent duplication and ensure that individuals in greatest need are identified, referred, and immediately connected to services.

# Referrals to SOS CTI Teams

- Upon receiving a referral, the SOS CTI teams will begin efforts towards connection with referred individuals within 24 hours.

- The teams will provide coordinated care transition activities and support, starting from the time of referral through transition to community housing, treatment and supports.

# Staffing & Hours of Operation

# SOS CTI Team Staffing

- Teams will be comprised of 12.0 FTE's:
    - 1.0 FTE Team Leader
    - 4.0 FTE licensed clinicians (ex. LCSW, LMSW, LMHC, Licensed Psychologist), including at least one clinician with specialized training and experience working with substance use disorders
    - 4.0 FTE care managers
    - 2.0 FTE peer specialists
    - 1.0 FTE Registered Nurse

# Hours of Operation

- Teams will have hours of operation that include evenings and weekends to ensure consistent outreach and engagement.

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

# SOS CTI Team Staffing

- SOS CTI team start-up will include the involvement of OMH and other key agencies to provide support around the development of the team.

- Monthly calls and/or meetings will be held to provide technical assistance and ensure the delivery of services consistent with programmatic objectives.

# Phases of SOS CTI Support

# Phases of SOS CTI Team Support

Phase 1 - Outreach and Engagement (0-3 months):

- Identifying and outreaching to individuals, developing a trusting relationship by utilizing person-centered engagement strategies
- If hospitalized, engaging with individual prior to discharge and working with inpatient team on aftercare planning
- Developing a care plan using historical information obtained through the OMH PSYCKES Medicaid application

# Phases of SOS CTI Team Support

Phase 2 - Support, Transition and Linkage (3-6 months):

- Connecting individual to people and providers that will assume the primary role of support in the community
- Utilization of motivational interviewing, harm reduction counseling, Wellness Recovery Action Plans (WRAP)
- Assessment of housing needs and benefits/entitlements support

# Phases of SOS CTI Team Support

Phase 3 (Months 6-9):

- Monitoring and strengthening of recipient's support network and promoting self-efficacy in all areas
- Assist the recipient with community inclusion efforts and augment community and social supports
- Assisting recipient in transition to housing and/or housing stability

# Phases of SOS CTI Team Support

Phase 4 (Months 9 to 12) - SOS Completion and Achievement Recognition:

- Reducing the frequency of visits to 1 or 2 times monthly, or other appropriate frequency
- Communicating with the recipient the plan for longer-term goals, including decreased involvement of SOS CTI Team

# Phases of SOS CTI Team Support

Optional Phase 5 - Post-housing placement support:

- Interventions may continue up to 3 months after housing placement to ensure community and housing stability, and that community linkages remain in place
- Ongoing support is provided to maintain housing stability and prevent any relapse into homelessness

# Quality Infrastructure and Reporting Requirements

# Quality Infrastructure / Reporting Requirements

- Providers must have a quality, supervisory and operational infrastructure that assures fidelity to the CTI model.
- Providers will be expected to participate in a SOS CTI Team active learning community, in collaboration with OMH, to review progress, outcomes and develop best practices.

# Quality Infrastructure / Reporting Requirements

- Submission of regular reports to OMH via the SOS Hub regarding all enrolled clients, including admission and discharge dates, characteristics of individuals served, etc.

- Provide information regarding performance indicators demonstrating continuity of care and reduced reliance on Emergency Departments and Inpatient settings.

# Quality Infrastructure / Reporting Requirements

- Ensure ongoing quality improvement, including analyzing utilization review findings and recommendations.
- Measure timeliness of services, disposition and outcomes to inform the SOS agency's overall quality improvement plan.
- Participate in site visits and ensure regular monitoring and evaluation of outcomes.

# Documentation & Use of Technology

# Documentation and Use of Technology

- Applicants must describe how they will utilize digital technology to support client engagement in care and describe digital tools available to staff, as well as those available to clients.

- All applicants should have an electronic health record (EHR) and describe their EHR.

# Documentation and Use of Technology

- Providers should have an EHR that can document referrals, assessments, and each encounter with the recipient.
- It is expected that the provider maximizes the use of technology to help support the team's communication and quality improvement efforts, as well as each recipient's transition and recovery goals.

# Proposal Narrative

# Population and Description of Program

Proposal narratives must address the following components:

- Population – experience with / knowledge of homeless individuals, familiarity with temporary housing options
- Description of Program – engagement strategies, coordination of rapid response, partnership with other systems of care

# Implementation and Agency Performance

- Implementation – timeframes, physical space, recruitment and training; inclusion, use of data and technology

- Agency Performance – mission, experience in providing culturally informed/competent services, ways agency has strengthened quality/fiscal stability

# Utilization Review, Inclusion & Diversity, Financial Assessment

- Utilization Review – method of ensuring confidentiality, ways agency will integrate SOS CTI into overall quality improvement infrastructure
- Inclusion & Diversity – equity, cultural/linguistic competence plan, training strategies, language access
- Financial Assessment – 5-year budget for each team and plan for how agency will manage its operating budget

# Timeline and Questions

# Key Events/Timeline

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| • RFP Release Date | 7/11/23 |
| • Bidders Conference | 7/18/23 |
| • Questions Due | 8/2/23 |
| • Questions and Answers Posted on Website | 8/15/23 |
| • Proposals Due by 2:00:00 PM EST* | 8/30/23 |
| • Anticipated Award Notification | 9/27/23 |
| • Anticipated Contract Start Date | 1/1/2024 |

# Questions?

- Questions and requests for clarification will now be taken in the chat box on the right side of your screen.
- Both questions presented and answers provided will be included in the Question and Answer document posted to the New York State Contract Reporter as outlined in the RFP.
- Additional questions or requests for clarification concerning the RFP must be submitted in writing to the Issuing Officer by e-mail to OMHLocalProcurement@omh.ny.gov by 4:00 PM EST on August 2, 2023.