

ANSWER: “Administrative staff members” refers to clerical staff across the entire organization, as opposed to just upper management level administrative personnel. There should be focused attention and efforts on recruiting and retaining staff who are from or have experience working with the most prevalent cultural groups of the service users being served at all levels across the organization.

133. For the last part of question-prompt 6.1ha, can OMH/OASAS please clarify a typo / confusing conclusion to the prompt, here it says, “& efforts to retain diverse employees use of best practice approaches to mitigate biases in interview/hiring processes.” Should the word “including” be added between “employees” and “use” ... or is OMH/OASAS asking applicants to focus its response to the last portion of this complex question-prompt differently?

ANSWER: Yes, the word “including” should be added between employees and use.

134. Can you speak to your specific expectations regarding the DEI section of the RFP, particularly around "stakeholder input"?

ANSWER: “Stakeholder input” means input from a diverse cross section of service users, community members and other entities with knowledge about the mental health crisis service system. The Offices cannot provide specific information about how to answer the questions. We are looking for the strongest proposals possible.

Es/EDEd

135. Are there any required room types for the ICSC? For example, are sleeping/rest quarters required?

ANSWER: Refer to Program Guidance Premises section for more information on layout and environment.

136. The length of stay “24 hours” seems very unrealistic. In other states, the length of stay is 7-10 days which seems much more manageable. Can this be changed? That’s not enough time for someone to sleep, let alone get billing information and referrals started.

ANSWER: Length of stay is up to 24 hours as this is an outpatient service, not residential. Refer to Program Guidance.

137. Are there any minimum square foot requirements for the ICSC? What does OMH foresee to be the average square footage of an ICSC?

ANSWER: There is no average square footage. Space will need to be large enough to provide all services in a safe, comfortable environment. Refer to Program Guidance Premises Section.

138. Will the ICSC design require beds or chairs?

ANSWER: There are no specific requirements that address beds or chairs. Recipient comfort and physical layout should be taken into consideration. Refer to Program Guidance.

139. Do we have a maximum/minimum "bed" count requirement?

ANSWER: See response to question #138.

140. Services can be provided for up to 24 hours, doesn't that require beds?

ANSWER: See response to question #138.

141. Can you clarify how individuals would be served through crisis stabilization if there are no beds?

ANSWER: See response to question #138. For further reference, the Offices recommend looking at how Crisis Stabilization Center programs are designed across the country.

142. I know the RFP gives some info about layout/facility (separate entrance for Law enforcement). I am wondering if there is any additional guidance or best practice recommendation regarding layout, total square footage, etc.

ANSWER: Proposed Part 600 Regulation and Program Guidance do not include recommendations for total square footage. Size of location and layout should reflect needs of the service area. Refer to Program Guidance premises section and question #141.

143. Regarding 'observation' and space-allocation criteria for mild-to-moderate detoxification services, what are the minimum requirements regarding the arrangement, separation, and/or amount of physical space allocated to this function?

ANSWER: See response to question #142.

144. Can there be one shared entrance for children and adults? (Separate waiting and treatment areas)?

ANSWER: Yes.

145. Is an ICSC required to have security on site?

ANSWER: No, there are no security requirements. An ICSC may choose to have security available on-site.

146. Based on the most current draft of Part 600 (or other guidance), does OASAS/OMH advise that the ICSC needs to provide separate spaces for men and women (i.e., people who self-identify as male and people who self-identify as female) for mid-to-moderate detoxification services? Or is a single such space across gender-identification acceptable?

ANSWER: No, we do not require separate spaces based on gender or gender identity.

PARTNERSHIPS

147. Are letters of support, linkage agreements, or MOUs required to be submitted to demonstrate “partnerships with other agencies within the crisis response system, including but not limited to mobile crisis providers, crisis residences, Supportive Crisis Stabilization Centers, law enforcement, EMS, and other community treatment and support services?

ANSWER: Letters of support are not required but may be submitted as part of the RFP proposal and will be required as part of the certification process. The Offices strongly encourage providers to consult with LGUs prior to proposal submission. See Proposed Part 600 Regulation and Program Guidance for more information on linkage agreements and MOUs.

148. Will there be an expectation of close collaboration with law enforcement so as to facilitate jail as well as ER Diversion?

ANSWER: Yes.

149. Are letters of support and/or commitment required in this application? If not, are they allowed?

ANSWER: Not required but allowed. See response to question #147.

150. Are collaborative partnerships encouraged in this model?

ANSWER: Yes.

151. Given that there may be more than 100 entities interested in applying to this RFP (based on attendee list), how do you envision all of us collaborating with the LGU/OMH/OASAS field offices in the development of our proposals? Have you identified and can share preferred contacts at each of these public entities for discussion?

ANSWER: Collaborative resources include consulting with the OMH field offices and OASAS regional offices. Contact information to the OMH field offices and OASAS regional offices and regional coverage are available on the OMH and OASAS websites. If you were to reach out to either the OMH Field office or OASAS regional office, we trust that they would cooperate within their own counterparts, so you do not need to reach out to both. Additional collaborative resources are available through the Conference of Local Mental Hygiene Directors (CLMHD).

OMH Field Offices:

<https://omh.ny.gov/omhweb/aboutomh/fieldoffices.html>

OASAS Regional Offices:

<https://oasas.ny.gov/providers/regional-offices>

Conference of Local Mental Hygiene Directors:

http://www.clmhd.org/contact_local_mental_hygiene_departments/

152. Will the relevant government agencies provide help in finding linkages/placements for clients following their 24-hour ICSC stay? It can be very difficult to make those kinds of linkages so quickly, especially if working with both the adult and pediatric networks of aftercare services, which are completely separate.

ANSWER: Demonstration of linkages and partnerships should be included in the proposal, refer to Section 5.3 of the RFP (page 23). Additionally, See Proposed Part 600 Regulation and Program Guidance.

153. Are there any community needs assessments that we can review to understand the unique needs of each region?

ANSWER: Examples of community needs assessment include local services plans through CLMHD. Other community assessments may be available through the OMH field offices and OASAS regional offices, the Departments of Health and LGUs.

154. Would OMH & OASAS like to see (uploaded via the Grantee Document Folder) any Letters of Commitment or Memoranda of Agreement/Understanding... or would you prefer that such agreements be mentioned / briefly referenced in the relevant narrative responses? (Is there a preference for Letters of Commitment vs. MOUs/MOAs for any specific types of partners that are enumerated in the RFP?)

ANSWER: Applicants need to put together the strongest application they can that will demonstrate their ability to develop and operate an ICSC. The Offices encourage proposals to include anything along those lines (MOUs/MOAs, Letters of Commitment) that can help further the goal of successfully operating an ICSC. Additionally, see response to question #147.

155. Under which section in the "Technical Evaluation" will letters of support contribute to the scoring? How many letters of support are required to obtain full points?

ANSWER: Letters of support will not contribute to scoring. The submission of these letters should be considered voluntary and there is no consideration of points to be given.

156. What would constitute an appropriate relationship with a contracted OASAS provider?

ANSWER: See Proposed Part 600.9 Regulation.

GRANTS GATEWAY

157. The OMH Procurement Opportunities website for this RFP indicated the due date as 4/21/2022, but the RFP and the Grants Gateway indicate it is 5/19/2022. Please confirm which is correct.

ANSWER – The due date of the proposals for the RFP is 6/09/2022 at 3:00 PM.

158. A question related to the Grants Gateway: Are Program Specific Question responses limited to 4,000 characters or are attachments with narrative longer than 4,000 characters permitted?

ANSWER: Please refer to the instructions given in the “Instructions/Introductory Text” box in the Program Specific Questions section.

159. In submitting responses via Grants Gateway, when an applicant chooses to upload a specific response (vs filling in the textbox), is the applicant allowed to include tables or graphs (which wouldn't format easily in a textbox) AND/OR may the applicant periodically exceed the 4,000-character textbox limit in such uploaded responses where SLIGHTLY more explanation is needed to concisely but thoroughly answer all parts of a more multi-part question?

ANSWER: An applicant can choose to respond within the 4,000-character textbox or upload a response, but the caveat is that the answer must be succinct and specific to the question. Responses should answer the question without going off into tangents. In the days of paper RFP submissions, number of pages were typically limited to around 20. Moving into the Gateway, we are no longer allowed to limit responses, other than through the 4,000-character box, because we found it to be restrictive. The most important thing is to make sure your answer is succinct. Make sure you also put “see attached” in the text box if you do choose to use an attachment. If you do not put something in the text box, you will get an error message. You may attach charts, tables, or graphs when applicable to answering a question.

160. This is a nuanced, not a duplicate question, aimed at facilitating the least complicated reviewing experience by the reviewers. If a Provider/applicant chooses to use the 4,000-character textbox responses for about 2/3 of the question-prompts BUT will use the Upload option for the remaining 1/3 of question-prompts (which request [a] lengthier, more detailed response[s] than can fit within the 4,000 characters), will the reviewers’ experience be made easiest (for them) if the Provider/applicant simply types “See attached” in the relevant 1/3 of textboxes, where the uploads accompany. OR, will the reviewers’ experience be made even easier (more flowing), if the Provider/applicant elects to simply UPLOAD EVERY response, regardless of brevity or length (e.g., for consistency of how the REVIEWERS see and access the responses)? In this latter scenario, the Provider/applicant will simply type “See attached” for ALL responses. We are aiming to get an understanding of how complicating/distracting it feels to reviewers when the response pattern alternates between textbox responses and “See attached” responses (vs. all textbox responses or ALL uploaded responses).

ANSWER: There is no opportunity to provide both a response within the 4,000-character text box and provide an upload. This is an either/or option. An applicant can choose to respond within the text box OR respond through providing an upload. If choosing to upload, applicants must type “See Attached” in the response box. An applicant cannot respond using both formats.

It is up to the applicant to determine how they will respond – either through the 4,000-character limit text box or with an upload. The scoring process is not affected by which method an applicant chooses to utilize.

NOTE: if an applicant chooses to provide an upload and not respond in the 4,000 character limit text box, the response must be succinct and specific ONLY to the question being posed. The response must be explicit to the question. If using an upload, applicants are cautioned to ensure that reviewers are not searching for response to the question due to the fact that an upload may provide a more expanded response. As part of the score, applicants can take into account any part of the upload that is not responsive to the exact question being posed.

161. In looking at the Grants Gateway, in sections 6.11-6.4b of the “Program Specific Questions” there is a limit of 4,000 characters per answer. Is that the max space we should use to answer those questions? Alternately, we see there is also the option of uploading an attachment with each answer; is that where we should be answering the questions, instead? (And if so, what is the character/page limit for those docs?)

Any insights into how detailed/succinct you want us to answer the questions would be very helpful - as we could respond to these questions in one page or 10 pages, depending on how much detail you'd like.

ANSWER: See Response to question #160.

162. Are applicants free to use the Grantee Document Folder to upload supporting information that the applicant feels would strongly convey capacity of the applicant to succeed in launching and sustaining the Crisis Stabilization Center (assuming such supportive information is not requested/submitted elsewhere in the application)?

ANSWER: There are 2 spots on the upload properties page where you can provide additional documentation that is not specifically asked for in another question. You may have to scan several documents altogether because there are only 2 document placeholders altogether. It is suggested to include a cover page to explain what the documents are if you choose to upload several documents altogether.

163. For required Attestations Numbers 4 and 5, unlike Attestations 1 through 3, Grants Gateway does not provide a “Yes/No” pull-down menu but instead requests a response in up to 4,000 characters. Does OMH/OASAS request that providers/applicants simply type in “Yes” if they agree with this attestation?

ANSWER: For all of the Attestation questions, the applicant should type “Yes” in the response box if they agree with the Attestation and “No” if the applicant does not agree.

164. For question prompt 6.7b, which has a Grants Gateway character limit of only 250 (compared to 4,000 for most other prompts), does OMH/OASAS prefer providers/applicants to simply type “See

Attached” and to then address all parts of this question (including “Describe how your agency manages its operating budget”) within the uploaded Appendix B1?

ANSWER: as indicated in the Instructions/Introductory Text box, the response to this question requires the upload of the Budget Narrative (Appendix B1). The construct within the Gateway requires the upload but does not require a response in the 250 character limit text box.

165. Does the Excel spreadsheet template provided in the Pre-Submission Uploads (Appendix B) exclude any/all planned expenditures for the separate Capital Project Funds (up to \$1 million) that are referenced in Section 6.4.1 and 6.4g question-prompts of Grants Gateway? OR [how/where does OMH/OASAS wish providers/applicants to include expenses pertaining to such capital project within Appendix B (the 5-year Budget referred to in 6.7a)?

Are providers/applicants correct in understanding that “up to \$1 million” set aside for Capital Project Funds are entirely separate (and excluded from) the “start-up funds totaling \$1.67M” that are referenced in question-prompt 6.7a?

With regard to Grants Gateway question prompt 6.4g, does OMH/OASAS wish providers/applicants to use this response as the only response (i.e. the only form/field/attachment) within the entire application whereby applicants are expected to address the proposed costs pertaining to the separate Capital Project funds? Is there any separate budget form beyond the budget narrative and timeline response requested in prompt 6.4g that applicants should prepare and upload to address the proposed Capital Project expenditures?

ANSWER: The excel template is for start-up funding only. Once an applicant receives an award through this RFP, they will have an opportunity to work with the Bureau of Housing Development and Support to access capital funds, of up to \$1 million if needed, to modify program space to meet the requirements of Title 14 NYCRR Part 600. The only response regarding capital funds expected is for Question 6.4 g.

166. The Bidders’ Conference stated that letters of support were permitted. Where should letters of support be uploaded in Grants Gateway?

ANSWER: There is a Placeholder spot on the Pre-Submission uploads page that allows for applicants to provide any additional documentation that is not a required component of the RFP.

167. What documents are acceptable to upload into the “placeholder” sections under the Pre-Submission Uploads? Can you provide some examples of what you might be looking for?

ANSWER: There is no prescribed, expected, suggested document(s) for these placeholders. As stated in the Gateway – “In the event applicant wants to provide supporting documentation not otherwise required by the RFP”

WEBSITE

168. When providers/applicants are answering Question-prompts in Grants Gateway associated with sections 6.3 (Description of Program) and 6.4 (Implementation), and with the related RFP instructions on page 29 and page 30 that say “Responses should be consistent with the Crisis Stabilization Program Guidance but should not be a reiteration of the Guidance. Responses should describe how your agency would meet these areas following the Crisis Stabilization Program Guidance”, **what is the most direct way for providers/applicants to assure that they are accessing the complete and most updated documents available that comprises what is referred to by the OMH/OASAS as the “Crisis Stabilization Program Guidance”?**

ANSWER: Refer to OMH and OASAS links in section 1.1 of the RFP.

169. Throughout the RFP, when the term “Crisis Stabilization Center Program Guidance” is used, and when guidance instruction “See Section 1 of this document for a link to the draft guidance” appears, are providers/applicants correctly understanding that the most updated “draft guidance” is the document currently titled at the top “A new Part 600 is added to Title of the NYCRR to read as follows,” and which is accessible (at the time of this Q&A exchange” at this named link: https://omh.ny.gov/omhweb/policy_and_Regulation/proposed/omh600.pdf

ANSWER: Proposed Part 600 Regulation has been updated and is posted on the OMH and OASAS websites. Draft Program Guidance is in the process of being finalized for publication and will be posted on the OMH and OASAS websites when complete. See response to question #168.

170. As of the publishing of the Q&A for the Intensive Crisis Stabilization Centers (ICSC) funding opportunity, anticipated on or about 4/28/22, can OMH/OASAS please clarify the most updated status of the following statement (and regulatory guidance) indicated on pages 5-6 of the RFP: “The Offices anticipate Title 14 NYCRR Part 600 will be re-posted for public comment by February 2022. The reposted Crisis Stabilization Program Guidance will be released at a later date and will be available using the links below:

Title 14 NYCRR Part 600:

https://omh.ny.gov/omhweb/policy_and_regulations/

<https://oasas.ny.gov/legal>

Crisis Stabilization Program Guidance:

<https://omh.ny.gov/omhweb/bho/crisis-intervention.html>

<https://oasas.ny.gov/legal>

ANSWER: See response to question #169.

171. Can OMH/OASAS please clarify if there are any more granular, specific URLs, web links or sub-web pages/sub-directories that are incorporated more deeply within each/any of the landing-page links named in the RFP on page 6 that link more directly into the most updated Crisis Stabilization Program Guidance available?

ANSWER: Draft Program Guidance was not available at the time of the Bidder's Conference but will be made available as soon as possible.

SUPPORTIVE CSCs

172. Will the State also be releasing an RFP for the Supportive Crisis Stabilization Centers? If so, when is it anticipated this request to be released?

ANSWER: This RFP is only for the development of Intensive Crisis Stabilization Centers. At the moment, there is no RFP for the development of Supportive Crisis Stabilization Centers. An RFP for Supportive CSCs is anticipated to be released Summer 2022

173. Is the RFP application out now only for ICSC's? If so, when do you expect the RFP to be released for the SCSC's?

ANSWER: See response to question #172.

GENERAL

174. What type of zoning designation does OMH foresee an ICSC being classified as? Our municipality does not have a specific zoning designation for this type of program.

ANSWER: The Offices are unable to advise. OMH and OASAS do not determine zoning designations and recommend the applicant reach out to their municipality for assistance.

175. When is construction expected to begin?

ANSWER: ICSCs are expected to be operational by January 2023.

176. What is the project budget or firm value?

ANSWER: The award amount is determined by provider submitting the proposal. Per Section 5.5 of the RFP, start-up funds will be allocated up to \$1.67 million and may be spent over two years. State Aid is \$1.2 Million. Ongoing net deficit funding and capital funding will be made available to applicants awarded pursuant to this RFP.

177. Are union bids required?

ANSWER: Unrelated to this RFP.

178. Performance Measures are also grantee-defined and should reflect some measurable benchmark(s) in order to demonstrate adequate progress within 18 months of the award date, as required by the RFP (Pg. 11). What benchmarks are specifically expected to be accomplished within 18 months of award?

ANSWER: Please Refer to reporting, quality improvement and utilization review section of the RFP.

179. Will there be a recording and slides from the Bidders Conference be shared?

ANSWER: Yes, slides and recording are available using the following link:
<https://omh.ny.gov/omhweb/rfp/2022/icsc/index.html>

180. Will the Bidders Conference slides be available to print?

ANSWER: See response to question #179.

181. Does OASAS see these centers as a replacement for open access centers, and or will those continue to be allowed to operate?

ANSWER: No, crisis stabilization centers are not a replacement for Open Access Centers.

182. Will you provide a list of existing respite programs to work with?

ANSWER: This is an opportunity to reach out to your local Director of Community Services to begin discussions on what resources already exist within your given region. Additionally, see response to question #151.

183. Are we able to get access to any assessment reports or input from the public that was used to develop the RFP?

ANSWER: There are no public facing documents that were used to develop the RFP. See response to question #151.

184. Do you anticipate future opportunities for the development of additional ICSC's if one per economic development region proves to be insufficient to meet the region's need?

ANSWER: The Offices will evaluate this first phase of development before considering future opportunities.

185. What data sets did NYS use in developing the utilization assumptions that led to the funded budget? Can providers look at that data in developing responses to the RFP?

ANSWER: See response to question #84. The data used for utilization is not public.

186. Is the program required to provide meals?

ANSWER: The ICSCs are not required to provide meals but are allowed. Refer to Proposed Part 600 Regulation and Program Guidance.

187. What are the key differences between the ICSCs proposed in the RFP and the Comprehensive Psychiatric Emergency Services Program (CPEP)?

ANSWER: ICSCs are jointly licensed by OMH and OASAS and offer voluntary services for all New Yorkers for up to 24 hours. ICSCs have specific staffing and programmatic requirements licensed under Proposed Part 600 Regulation.

Comprehensive Psychiatric Emergency Programs (CPEPs) are licensed by OMH, offering emergency services that are embedded within hospitals that have inpatient programs. CPEPs offer both voluntary and involuntary services. CPEPs have specific staffing and programmatic requirements under Part 590.

188. For the Grants Gateway Work Plan Overview form, what start date and end date does OMH/OASAS prefer to see indicated for this Intensive Crisis Stabilization Center project?

ANSWER: See section 2.13 of RFP – “The Work Plan Period should reflect the anticipated contract period. Contracts will be approved for a five-year term”. The anticipated award contract date is 10/1/22.

189. Page 25 of the RFP states: “EHR is expected to have an HL7 FHIR/CCDA/CSV or similar web service for seamless direct integration of data.” Can we have more information on what is expected: what system are we integrating with? What is the timeframe for data to begin to be submitted? Where would the CSV data drop be if we do not create a direct HL7 connection?

ANSWER: The Interoperable solution/system envisions to minimize the data collection burden. During the implementation phase, we expect to meet with providers to develop the best solution for data submission and we will be working with providers to develop a plan for monthly reporting, expected once programs are up and running.

190. When are proposals due?

ANSWER: June 9, 2022. The RFP timeline was updated in February 2022. The RFP publication does not reflect these changes, but you will find the updated timeline as an announcement on both the OMH and OASAS websites below. The updated timeline is also reflected in the Grants Gateway.

OMH Website

<https://omh.ny.gov/omhweb/rfp/2022/icsc/index.html>

OASAS Website

<https://oasas.ny.gov/funding/intensive-crisis-stabilization-centers>