



**Office of
Mental Health**

Intensive and Sustained Engagement Teams (INSET) Request for Proposals

Grant Procurements

(On-Line Submission Required)

Statewide Financial System (SFS) Identifier- OMH155

September 2025

TABLE OF CONTENTS

1.	INTRODUCTION AND BACKGROUND	1
1.1	Purpose of the Request for Proposal	1
1.2	Target Population.....	1
2.	PROPOSAL SUBMISSIONS	2
2.1	Designated Contact/Issuing Officer	2
2.2	Key Events/Timeline	2
2.3	Disposition of Proposals.....	3
2.4	Eligible Agencies.....	3
2.5	RFP Questions and Clarifications	3
2.6	Addenda to Request for Proposals	3
2.7	Disqualification Factors	3
2.8	SFS Prequalification Requirement	4
2.9	Vendor Registration, Prequalification and Training Resources for Not-for-Profits	4
3.	ADMINISTRATIVE INFORMATION	7
3.1	Reserved Rights	7
3.2	Debriefing	8
3.3	Protests Related to the Solicitation Process.....	8
3.4	Term of Contracts	8
3.5	Minority and Women Owned Business Enterprises.....	9
3.6	Participation Opportunities for New York State Certified Service-Disabled Veteran Owned Business.....	10
3.7	Equal Opportunity Employment.....	11
3.8	Sexual Harassment Prevention Certification	12
3.9	Gender-Based Violence and the Workplace Certification	12
3.10	Bid Response	12
3.11	Acceptance of Terms and Conditions.....	12
3.12	Freedom of Information Requirements.....	12
3.13	NYS and OMH Policies	13
4.	EVALUATION FACTORS AND AWARDS.....	13
4.1	Evaluation Criteria.....	13
4.2	Method for Evaluating Proposals	13
4.3	Process for Awarding Contracts.....	14
	Initial Awards and Allocations	14
4.4	Contract Termination and Reassignment	14
4.5	Award Notification	14
5.	SCOPE OF WORK.....	15
5.1	Introduction	15
5.2	Objectives and Responsibilities.....	16
5.3	Operating Funding	17
6.	PROPOSAL NARRATIVE.....	18
6.1	Population.....	18
6.2	Description of Program	18
6.3	Implementation	19
6.4	Agency Performance, Reporting, and Quality Improvement.....	20
6.5	Diversity, Equity, Inclusion and Promoting Lived Experience	21
	6.5.1 Commitment to Equity and the Reduction of Disparities in Access, Quality, and Treatment Outcomes for Marginalized Populations.	21

New York State Office of Mental Health

6.5.2	Equity Structure.....	22
6.5.3	Workforce Diversity and Inclusion.....	22
6.5.4	Language Access.....	22
6.5.5	Recovery Values	23
6.5.6	Collaboration with Diverse Community-Based Partners/Organizations...	23
6.6	Financial Assessment	23

1. Introduction And Background

1.1 Purpose of the Request for Proposal

New York's mental and behavioral health systems continue to strive toward more trauma-informed, equitable ways of meeting the needs of the community, particularly for individuals and their social supports who have not been well engaged through traditional services or programs. As such, the New York State Office of Mental Health (OMH) seeks to expand the availability of Intensive and Sustained Engagement Teams (INSET).

OMH is seeking proposals to contract with community-based, Peer-run organizations and/or organizations with established peer-run programs/departments to implement an Intensive and Sustained Engagement Team (INSET) in one (1) New York State location excluding counties where an INSET team currently operates. The INSET program components and the administering agency responsibilities are detailed in section 5.

INSET currently operates in the following counties: Suffolk, Nassau, Kings, Westchester, Orange, Sullivan, Rockland, Putnam, and Monroe.

Intensive and Sustained Engagement Teams (INSET) is a voluntary, peer-led, community-based engagement approach designed to support adults who are historically marginalized, underserved, and unserved by traditional mental health services and systems and/or who may be at risk of involuntary commitment. INSET teams aim to support these individuals in identifying and reaching their unique valued life goals, connect individuals and communities, and provide 24/7 intensive and sustained support to participants and their chosen community in the least restrictive manner possible.

INSET reduces repeat hospitalizations and lengths of stay, incarcerations, and costs connected to the high rate of physical health issues usually experienced by individuals most in need. INSET teams support individuals in navigating systems involvement. INSET teams build trust and rapport, hope, and strength in navigating these difficult circumstances by placing the individual's voice, choice, self-determination, community membership and inclusion, and quality of life at the forefront.

Applicants should identify the county or counties they intend to serve in their application. Please note that if an applicant intends to serve only one county, they should detail how they will expand to meet the needs of surrounding areas as the program grows.

Notice: Notification of intent to apply should be made to the Local Governmental Unit (county director of community services) for each county to be served under the program application, as defined in Section 41 of the New York State Mental Hygiene Law.

1.2 Target Population

INSET teams are designed to support individuals of at least 18 years of age labeled as "high risk" or with "complex mental health needs", who are currently in or have recurrent encounters with emergency department, inpatient, crisis, and/or forensic settings. These individuals may be described by traditional systems as having chronic, serious, or long-term mental illness, substance use, complex and compounding health and wellness

New York State Office of Mental Health (OMH)

needs and a lack of ongoing and consistent access to care that is supportive. The program also aims to conduct outreach and engage with individuals historically and currently marginalized from traditional services.

Examples include individuals who are experiencing emotional distress or trauma responses; are currently in or have had recurrent encounters with inpatient settings, Comprehensive Psychiatric Emergency Programs (CPEPs), or other crisis services; are eligible for, currently active with, recently been discharged from, or have a history of Assisted Outpatient Treatment (AOT); and individuals at risk of negative systems involvement.

2. Proposal Submissions

2.1 Designated Contact/Issuing Officer

OMH has assigned an Issuing Officer for this project. The Issuing Officer or a designee shall be the sole point of contact regarding the RFP from the date of issuance of the RFP until the issuance of the Notice of Conditional Award. To avoid being deemed non-responsive, an applicant is restricted from making contact with any other personnel of OMH regarding the RFP. Certain findings of non-responsibility can result in rejection for a contract award. The Issuing Officer for this RFP is:

Jeremy Rossello
Contract Management Specialist 2
New York State Office of Mental Health
Contracts and Claims
44 Holland Avenue, 7th Floor
Albany, NY 12229
OMHLocalProcurement@omh.ny.gov

2.2 Key Events/Timeline

RFP Release Date	09/25/2025
Questions Due	10/16/2025
Questions and Answers Posted on Website	11/6/2025
Proposals Due by 2:00 PM EST*	12/01/2025
Anticipated Award Notification	1/06/2026
Anticipated Contract Start Date	07/01/2026

*OMH strongly advises that applicants do not wait until the last day/last few hours to complete and submit applications/proposals to Grant RFPs. Exceptions will not be considered or made for an applicant who cannot complete their proposal/application by the due date and time of the RFP. **Please note that there are restrictions to the type, size and naming conventions of the files and attachments uploaded in SFS. For more information, please review the SFS Attachment Guide [Here](#). Failure to comply with these guidelines may result in attachments not being viewable to reviewers.**

2.3 Disposition of Proposals

All proposals submitted by the due date and time become the property of OMH. Any proposals not received by the due date and time do not get reviewed and are excluded from consideration.

2.4 Eligible Agencies

Eligible applicants are not-for-profit agencies with 501(c) (3) incorporation located in New York State and seeking to implement INSET in counties where INSET does not currently exist. This criterion excludes applicants seeking to implement INSET in the following counties: Nassau, Suffolk, Kings, Westchester, Orange, Sullivan, Rockland, Putnam, and Monroe.

Please be advised that all questions regarding Eligibility will be responded to through the official posting of the Questions and Answers. No questions about Eligibility will be responded to either individually or prior to the posting of the Q&As.

Prequalification is required for all not-for-profit organizations seeking grant funding from New York State. Please see Section 2.8 and Section 2.9 for additional Prequalification Information.

2.5 RFP Questions and Clarifications

All questions or requests for clarification concerning the RFP shall be submitted in writing to the Issuing Officer by e-mail to OMHLocalProcurement@omh.ny.gov by 2:00 PM EST on the "Questions Due" date indicated in section 2.2 and will be limited to addressing only those questions submitted by the deadline. No questions can be submitted or will be answered after this date. No questions will be answered by telephone or in person. Please enter "INSET RFP" in the subject line of the email.

The questions and official answers will be posted on the OMH website by the date listed in the timeline section 2.2 Key Events/Timeline.

2.6 Addenda to Request for Proposals

In the event that it becomes necessary to revise any part of the RFP during the application submission period, an addendum will be posted on the OMH website and the NYS Contract Reporter.

It is the applicant's responsibility to periodically review the [OMH Procurement website](#) and the [NYS Contract Reporter](#) to learn of revisions or addendums to this RFP. No other notification will be given.

2.7 Disqualification Factors

Following the opening of bids, a preliminary review of all proposals will be conducted by the Issuing Officer or a designee to review each proposal's submission for completeness and verify that all eligibility criteria have been met. Additionally, during the proposal evaluation process, evaluators will also be reviewing eligibility criteria and confirming that they have been met. During the course of either of these review processes,

New York State Office of Mental Health (OMH)

proposals that do not meet basic participation standards will be disqualified, specifically:

- Proposals from applicants that do not meet the eligibility criteria as outlined in 2.4; or
- Proposals that do not comply with bid submission and/or required format instructions as specified in 2.9 or
- Proposals from eligible not-for-profit applicants who have not completed Vendor Prequalification, as described in 2.8, by the proposal due date of 2:00 PM EST on the date indicated in Section 2.2.

2.8 SFS Prequalification Requirement

Pursuant to the New York State Division of Budget Bulletin H-1032, dated June 7, 2013, New York State has instituted key reform initiatives to the grant contract process which require not-for-profits to be Prequalified in order for proposals to be evaluated and any resulting contracts executed.

Proposals received from eligible not-for-profit applicants who have not been Prequalified by the proposal due date of 2:00 PM EST on **the date indicated in Section 2.2** will not be able to submit their bid response through SFS.

Please do not delay in beginning and completing the prequalification process. The State reserves five (5) days to review submitted prequalification applications. Prequalification applications submitted to the State for review less than 5 days prior to the RFP due date and time may not be considered. Applicants should not assume their prequalification information will be reviewed if they do not adhere to this timeframe.

2.9 Vendor Registration, Prequalification and Training Resources for Not-for-Profits

NOTE: All applications must be submitted through the Statewide Financial System (SFS). No applications will be accepted electronically, US Postal Service, express mail delivery service or hand delivered.

For any application that does not contain all the required documentation and/or “See Attached” responses that were to be uploaded, please be advised that the application will be reviewed and scored as submitted. For any incomplete response or missing and/or inappropriately submitted documentation, points will be deducted. It is the responsibility of the applicant to ensure, prior to submission, that the application is appropriate and complete.

Each proposal submission through SFS is required to contain:

- Operating Budget (Appendix B)
- Budget Narrative (Appendix B1)

All applicants must be registered with the New York State Statewide Financial System (SFS) and all Not-for-Profit agencies must be prequalified prior to

proposal submission.

Not-for-profit organizations must Register as a vendor the Statewide Financial System and successfully Prequalify to be considered for an award.

This grant opportunity is being conducted as an SFS bid event. Not-for-profit vendors that are not prequalified can initiate and complete bid responses. However, not-for-profit vendors that are not prequalified will NOT be allowed to submit their bid response for consideration.

Information on [Registration](#) and [Prequalification](#) are available on the Grants Management Website. A high-level synopsis is provided below.

Registering as an SFS Vendor

To register an organization, send a complete [Grants Management Registration Form for Statewide Financial System \(SFS\) Vendors](#) and accompanying documentation where required by email to grantsmanagement@its.ny.gov. You will be provided with a Username and Password allowing you to access SFS.

Note: New York State Grants Management reserves 5-10 business days from the receipt of complete materials to process a registration request. Due to the length of time this process could take to complete, it is advised that new registrants send in their registration form as soon as possible. Failure to register early enough may prevent potential applicants from being able to complete a grant application on time.

If you have previously registered and do not know your Username, please contact the SFS Help Desk at (855) 233-8363 or at Helpdesk@sfs.ny.gov. If you do not know your Password, please click the [SFS Vendor Forgot Password](#) link from the main log in page and follow the prompts.

Prequalifying in SFS

- Log into the SFS Vendor Portal.
- Click on the Grants Management tile.
- Click on the Prequalification Application tile. The Prequalification Welcome Page is displayed. Review the instructions and basic information provided onscreen.

Note - If either of the above referenced tiles are not viewable, you may be experiencing a role issue. Contact your organization's Delegated Administrator and request the Prequalification Processor role.

- Select the Initiate a Prequalification Application radio button and click the Next button to begin the process. Starting with Organization Information, move through the steps listed on the left side of the screen to upload Required Documents, provide Contacts and Submit your Prequalification Application.

Note - If the Initiate a Prequalification Application radio button is not available, your organization may have already started a prequalification application and could even be prequalified. Click on the Version History Link to review your

New York State Office of Mental Health (OMH)

organization's prequalification status. If you are not currently prequalified, or your prequalification expires prior to the due date of this RFA, you will need to choose Collaborate on or Update your application.

- System generated email notifications will be sent to the contact(s) listed in the Contacts section when the prequalification application is Submitted, Approved, or returned by the State for more information. If additional information is requested, be certain to respond timely and resubmit your application accordingly.

Note: New York State reserves 5 business days from the receipt of complete Prequalification applications to conduct its review. If supplementary information or updates are required, review times will be longer. Due to the length of time this process could take to complete, it is advised that nonprofits Prequalify as soon as possible. Failure to successfully complete the Prequalification process early enough may result in a grant application being disqualified.

Please note that all responses/applications/submissions to this RFP **must** be submitted through the Statewide Financial System (SFS). No mailed, delivered or emailed submissions will be accepted. OMH strongly recommends that applicants plan accordingly and allow themselves enough time to appropriately complete and submit by the due date and time of this RFP.

When providing uploads in response to any of the questions posed (including the Fiscal/Budget component), please upload only PDF versions of those documents. When saving these files before uploading, with the exception of an underscore, please do not use any special characters in the file name, letters only should be used.

Specific questions about SFS should be referred to the SFS Help Desk at helpdesk@sfs.ny.gov.

On Demand Grantee Training Material

A recorded session with information about the transition to SFS is available for Grantees on the Grants Management website - <https://grantsmanagement.ny.gov/> and in SFS Coach.

The following training material focused on grants management functionality is currently available in SFS Coach:

- An SFS Vendor Portal Reference Guide (https://upk.sfs.ny.gov/UPK/VEN101/FILES/SFS_Vendor_Portal_Access_Reference_Guide.pdf) to help Grantees understand which Grants Management roles they need in the SFS Vendor Portal based on the work they are currently involved in.
- A Grantee Handbook (upk.sfs.ny.gov/UPK/VEN101/FILES/Grantee_User_Manual.pdf), which provides screenshots and step-by-step guidance on how to complete Grants Management-related tasks in SFS

New York State Office of Mental Health (OMH)

- On-demand recorded training videos focused on each aspect of the Grants Management business process

Agencies can view vendor training material in SFS Coach by selecting **SFS Training for Vendors** from the Topic drop-down list.

3. Administrative Information

3.1 Reserved Rights

OMH reserves the right to:

- Reject any or all proposals received in response to the RFP that are deemed non-responsive or do not meet the minimum requirements or are determined to be otherwise unacceptable, in the agency's sole discretion;
- Withdraw the RFP at any time, at the agency's sole discretion
- Make an award under the RFP in whole or in part;
- Disqualify any applicant, and rescind any conditional award or contract made to such applicant whose conduct as a provider does not meet the applicable standards as determined solely by OMH and/or proposal fails to conform to the requirements of the RFP;
- Seek clarifications and revisions of proposals for the purposes of assuring a full understanding of the responsiveness to this solicitation's requirements;
- Use proposal information obtained through the state's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFP;
- Prior to the bid opening, direct applicants to submit proposal modifications addressing subsequent RFP amendments;
- Prior to the bid opening, amend the RFP specifications to correct errors or oversight, supply additional information, or extend any of the scheduled dates or requirements and provide notification to potential bidders via the OMH website, SFS and the New York State (NYS) Contract Reporter;
- Eliminate any non-material specifications that cannot be complied with by all of the prospective applicants;
- Waive any requirements that are not material;
- Negotiate any aspect of the proposal with the successful applicant in order to ensure that the final agreement meets OMH objectives and is in the best interests of the State;
- Conduct contract negotiations with the next responsible applicant, should the agency be unsuccessful in negotiating with the selected applicant;

New York State Office of Mental Health (OMH)

- Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an applicant's proposal and/or to determine an applicant's compliance with the requirements of the solicitation;
- Cancel or modify contracts due to insufficiency of appropriations, cause, convenience, mutual consent, non-responsibility, or a "force majeure";
- Change any of the scheduled dates stated in the RFP.

3.2 Debriefing

OMH will issue award and non-award notifications to all applicants. Non-awarded applicants may request a debriefing in writing requesting feedback on their own proposal, within 15 business days of the OMH dated letter. OMH will not offer debriefing to providers who are awarded a team. OMH will not offer ranking, statistical, or cost information of other proposals until after the NYS Office of the State Comptroller has approved all awards under this RFP. Written debriefing requests may be sent to the Designated Contact, as defined in Section 2.1.

3.3 Protests Related to the Solicitation Process

Protests based on errors or omissions in the solicitation process, which are or should have been apparent prior to the deadline for receipt of all written questions for this RFP, must be filed prior to the deadline for questions. In the event an applicant files a timely protest based on error or omission in the solicitation process, the Commissioner of OMH or their designee will review such protest and may, as appropriate, issue a written response or addendum to the RFP to be posted on the OMH website in the RFP section. Protests of an award decision must be filed within fifteen (15) business days after the notice of conditional award or five (5) business days from the date of the debriefing. The Commissioner or their designee will review the matter and issue a written decision within twenty (20) business days of receipt of protest.

All protests must be in writing and must clearly and fully state the legal and factual grounds for the protest and include all relevant documentation. The written documentation should clearly state reference to the RFP title and due date. Such protests must be submitted to:

New York State Office of Mental Health
Commissioner Ann Marie T. Sullivan, M.D.
44 Holland Ave
Albany, NY 12229

3.4 Term of Contracts

The contracts awarded in response to this RFP will be for a five-year term. OMH reserves the right to modify the first period of the contract to coincide with the applicable fiscal period. For New York City contracts, the fiscal period is July 1 through June 30 of each year. Selected applicants awarded a contract under this RFP will be required to adhere to all terms and conditions in OMH's Master Grant Contract.

3.5 Minority and Women Owned Business Enterprises

OMH recognizes its obligation to promote opportunities for maximum feasible participation of certified minority and women-owned business enterprises (MWBEs) and the employment of minority group members and women in the performance of OMH. OMH expects that all contactors make a good-faith effort to utilize Minority and/or Women Owned Business Enterprises (M/WBE), on any award resulting from this solicitation in excess of \$25,000 for commodities and services or \$100,000 for construction.

With respect to MWBEs, each award recipient must document its good faith efforts to provide meaningful opportunities for participation by MWBEs as subcontractors and suppliers in the performance of the project to be described in each grant disbursement agreement, and must agree that OMH may withhold payment pending receipt of the required MWBE documentation. The directory of MWBEs can be viewed at <https://ny.newnycontracts.com>. For guidance on how OMH will determine a contractor's "good faith efforts", refer to 5 NYCRR §142.8.

In accordance with 5 NYCRR § 142.13, each award recipient acknowledges that if it is found to have willfully and intentionally failed to comply with the MWBE participation goals set forth herein and in its grant disbursement agreements, such finding constitutes a breach of contract and OMH may withhold payment from the award recipient as liquidated damages.

Such liquidated damages shall be calculated as an amount equaling the difference between: (1) all sums identified for payment to MWBEs had the award recipient achieved the contractual MWBE goals; and (2) all sums paid to MWBEs for work performed or material supplied under the grant disbursement agreement.

By applying, an Applicant agrees to demonstrate its good faith efforts to achieve its goals for the utilization of MWBEs by submitting evidence thereof in such form as OMH shall require. Additionally, an Applicant may be required to submit the following documents and information as evidence of compliance with the foregoing:

- A. An MWBE Utilization Plan, which shall be submitted in conjunction with the execution of the grant disbursement agreement except as otherwise authorized by OMH. Any modifications or changes to the MWBE Utilization Plan after the execution of the grant disbursement agreement must be reported on a revised MWBE Utilization Plan and submitted to OMH.

OMH will review the submitted MWBE Utilization Plan and advise the award recipient of OMH acceptance or issue a notice of deficiency within 30 days of receipt.

- B. If a notice of deficiency is issued, the award recipient will be required to respond to the notice of deficiency within seven (7) business days of receipt by submitting to OMH, a written remedy in response to the notice of deficiency. If the written remedy that is submitted is not timely or is found by OMH to be inadequate, OMH shall notify the award recipient and direct the award recipient to submit within five

New York State Office of Mental Health (OMH)

(5) business days, a request for a partial or total waiver of MWBE participation goals. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid or proposal.

OMH may refuse to enter into a grant disbursement agreement, or terminate an existing grant disbursement agreement resulting from this solicitation, under the following circumstances:

- i. If an award recipient fails to submit a MWBE Utilization Plan;
- ii. If an award recipient fails to submit a written remedy to a notice of deficiency;
- iii. If an award recipient fails to submit a request for waiver; or,
- iv. If OMH determines that the award recipient has failed to document good faith efforts

The award recipient will be required to attempt to utilize, in good faith, any MBE or WBE identified within its MWBE Utilization Plan, during the performance of the project. Requests for a partial or total waiver of established goal requirements may be made at any time during the term of the project, but must be made no later than prior to the submission of a request for final payment under the grant disbursement agreement.

Each award recipient will be required to submit a Quarterly MWBE Contractor Compliance & Payment Report to OMH over the term of the project, in such form and at such time as OMH shall require, documenting the progress made toward achievement of the MWBE goals established for the project.

3.6 Participation Opportunities for New York State Certified Service-Disabled Veteran Owned Business

Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Business (SDVOB), thereby further integrating such businesses into New York State's economy. OMH recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of OMH contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, applicants are expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as proteges, or in other partnering or supporting roles.

OMH hereby establishes an overall goal of 0% for SDVOB participation, based on the current availability of qualified SDVOBs. For purposes of providing meaningful participation by SDVOBs, the Applicant/Contractor would reference the directory of New York State Certified SDVOBs found at <https://ogs.ny.gov/Veterans>. Additionally, following any resulting Contract execution, Contractor would be encouraged to contact

the Office of General Services' Division of Service-Disabled Veterans' Business Development to discuss additional methods of maximizing participation by SDVOBs on the Contract.

It would be required that "good faith efforts" to provide meaningful participation by SDVOBs as subcontractors or suppliers in the performance of a resulting awarded Contract as documented.

3.7 Equal Opportunity Employment

By submission of a bid or proposal in response to this solicitation, the Applicant/Contractor agrees with all terms and conditions of Master Contract for Grants, Section IV(J) – Standard Clauses for All New York State Contracts including Clause 12 – Equal Employment Opportunities for Minorities and Women. The Contractor is required to ensure that it and any subcontractors awarded a subcontract over \$25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work"), except where the Work is for the beneficial use of the Contractor, undertake or continue programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

The Applicant will be required to submit a Minority and Women-Owned Business Enterprises and Equal Opportunity Policy Statement, to the State Contracting Agency with their bid or proposal. To ensure compliance with this Section, the Applicant will be required to submit with the bid or proposal an Equal Opportunity Staffing Plan (Form # to be supplied during contracting process) identifying the anticipated work force to be utilized on the Contract. If awarded a Contract, Contractor shall submit a Workforce Utilization Report, in such format as shall be required by the Contracting State Agency on a monthly or quarterly basis during the term of the contract. Further, pursuant to Article 15 of the Executive Law (the "Human Rights Law"), all other State and Federal statutory and constitutional and non-discrimination provisions, the Contractor and subcontractors will not discriminate against any employee or applicant for employment status because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status, or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest. Please Note: Failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.

3.8 Sexual Harassment Prevention Certification

State Finance Law §139-l requires applicants on state procurements to certify that they have a written policy addressing sexual harassment prevention in the workplace and provide annual sexual harassment training (that meets the Department of Labor's model policy and training standards) to all its employees. Bids that do not contain the certification may not be considered for award; provided however, that if the applicant cannot make the certification, the applicant may provide a statement with their bid detailing the reasons why the certification cannot be made. A template certification document is being provided as part of this RFP. Applicants must complete and return the certification with their bid or provide a statement detailing why the certification cannot be made.

3.9 Gender-Based Violence and the Workplace Certification

State Finance Law §139-m requires all vendors bidding on state contracts to implement and attest to a Gender-Based Violence and the Workplace policy. Applicants on state procurements must certify that they have a written policy addressing gender-based violence in the workplace that meets the minimum requirements of State Finance Law §139-m. Bids that do not contain the certification may not be considered for award; provided however, that if the applicant cannot make the certification, the applicant may provide a statement with their bid detailing the reasons why the certification cannot be made. A template certification document is being provided as part of this RFP. Applicants must complete and return the certification with their bid or provide a statement detailing why the certification cannot be made.

3.10 Bid Response

Neither the State of New York or OMH shall be responsible for the costs or expenses incurred by the applicant in preparation or presentation of the bid proposal.

3.11 Acceptance of Terms and Conditions

A bid, in order to be responsive to this solicitation, must satisfy the specifications set forth in this RFP. A detailed description of this format and content requirements is presented in Section 2.9 of this RFP.

3.12 Freedom of Information Requirements

All proposals submitted for OMH's consideration will be held in confidence. However, the resulting contract is subject to New York State Freedom of Information Law (FOIL). Therefore, if an applicant believes that any information in its bid constitutes a trade secret or should otherwise be treated as confidential and wishes such information not be disclosed if requested, pursuant to FOIL (Article 6 of Public Officer's Law), the applicant must submit with its bid, a separate letter specifically identifying the page number(s), line(s), or other appropriate designation(s) containing such information explaining in

New York State Office of Mental Health (OMH)

detail why such information is a trade secret and formally requesting that such information be kept confidential. Failure by an applicant to submit such a letter with its bid identifying trade secrets will constitute a waiver by the applicant of any rights it may have under Section 89(5) of the Public Officers Law relating to the protection of trade secrets. The proprietary nature of the information designated confidential by the applicant may be subject to disclosure if ordered by a court of competent jurisdiction. A request that an entire bid be kept confidential is not advisable since a bid cannot reasonably consist of all data subject to a FOIL proprietary status.

3.13 NYS and OMH Policies

The applicant/contractor must agree to comply with all applicable New York State and OMH policies, procedures, regulations and directives throughout the Term of the contract.

4. Evaluation Factors and Awards

4.1 Evaluation Criteria

All proposals will be rated and ranked in order of highest score based on an evaluation of each applicant's written submission as well as OMH internal reviews. **Please note that there are restrictions to the type, size and naming conventions of the files and attachments uploaded in SFS. For more information, please review the SFS Attachment Guide [Here](#). Failure to comply with these guidelines may result in attachments not being viewable to reviewers.** The Evaluation will apply points in the following categories as defined in Section 6:

Technical Evaluation	Points
6.1 Population	10
6.2 Description of Program	25
6.3 Implementation	30
6.4 Agency Performance, Reporting, and Quality Improvement	5
6.5 Diversity, Equity, Inclusion and Promoting Lived Experience	10
6.6 Financial Assessment	20
Total Proposal Points	100 Points

For a detailed description of evaluation criteria for the Technical Evaluation and the Financial Assessment components, see Section 6 (Proposal Narrative).

4.2 Method for Evaluating Proposals

Designated staff will review each proposal for completeness and verify that all eligibility

New York State Office of Mental Health (OMH)

criteria are met. A complete proposal shall include all required components as described in Section 2. If a proposal is not complete or does not meet the basic eligibility and participation standards as outlined in Section 2.4, the proposal will be eliminated from further review. The agency will be notified of the rejection of its proposal within 10 working days of the proposal due date.

Proposals will be conducted in two parts: Technical Evaluation and Financial Assessment. The technical evaluation committee, consisting of at least three evaluators, will review the technical portion of each proposal and compute a technical score. A financial score will be computed separately based on the operating budget and budget narrative submitted.

Evaluators of the Technical Evaluation component may then meet to discuss the basis of those ratings. Following the discussion, evaluators may independently revise their original score in any section. Once completed, final Technical Evaluation scores will then be recalculated, averaged, and applied to the final Financial Assessment score to arrive at final scores.

Any proposal not receiving a minimum score of 70 will be eliminated from consideration.

In case of a tie in the scoring process, the proposal with the highest score on the Implementation Section (Section 6.3) of the Proposal Narrative will be ranked higher.

4.3 Process for Awarding Contracts

Initial Awards and Allocations

Proposals will be ranked, and one award will be made to the applicant with the highest score to assume the operation of an INSET program in the region of New York State to which their proposal(s) apply.

4.4 Contract Termination and Reassignment

There are a number of factors that may result in the contract being reassigned. This includes, but is not limited to, failure to meet start-up milestones, excluding referrals based on criminal or substance abuse history, or poor performance outcomes. A contractor will be provided notification if there is need for reassignment.

To reassign the contract, OMH will go to the next highest ranked proposal. If there are no agencies left with a passing score, OMH will go to the top of the list and work its way down the list to reassign the contract.

4.5 Award Notification

At the conclusion of the procurement, notification will be sent to successful and non-successful applicants. All awards are subject to approval by the NYS Attorney General and the Office of the State Comptroller before an operating contract can be finalized.

5. Scope of Work

5.1 Introduction

New York's mental and behavioral health systems continue to strive toward more trauma-informed, equitable ways of meeting the needs of the community, particularly for individuals and their social supports who have not been well engaged through traditional services or programs. OMH is seeking proposals to contract with one community-based, Peer-run organization and/or an organization with established peer-run programs/departments to implement an Intensive and Sustained Engagement Team (INSET) in one (1) New York State location excluding counties where an INSET team currently operates.

INSET is a voluntary, peer-led, community-based engagement approach designed to support adults who are historically marginalized, underserved, and unserved by traditional mental health services and systems and/or who may be at risk of involuntary commitment. INSET teams aim to support these individuals in identifying and reaching their unique valued life goals, connect individuals and communities, and provide 24/7 intensive and sustained support to participants and their chosen community in the least restrictive manner possible. A particular focus of INSET is supporting participants during times of transition, self-identified vulnerability, or other challenges, which often fall under the traditional description of an individual with "complex mental health needs."

INSET is distinct because of its holistic, person-first, trauma-informed, and culturally curious approach. The team-based, multi-disciplinary model emphasizes the importance of strengthening existing connections and facilitating new connections to participants' natural sources of support. INSET is a low barrier model that allows for flexibility in how, when, and where participants meet with the team. As a non-billable program, INSET teams do not turn individuals away due to Medicaid eligibility and do not place rigid timeframes on achieving successful outcomes.

INSET team members uphold the belief that recovery is possible and probable. INSET reduces repeat hospitalizations and lengths of stay, incarcerations, and costs connected to the high rate of physical health issues usually experienced by individuals most in need. INSET teams support individuals in navigating systems involvement. INSET teams build trust and rapport, hope, and strength in navigating these difficult circumstances by placing the individual's voice, choice, self-determination, community membership and inclusion, and quality of life at the forefront.

There is an opportunity for INSET to be included as part of an Enhanced Voluntary Agreements (EVA) offered to individuals in need. The use and implementation of EVAs vary widely by county; however, a core function of the agreements is to divert individuals from more restrictive community options such as AOT whenever possible, or in some uses as a step-down from AOT. That key distinction raises the potential for INSET, a wholly voluntary program, to play a critical role moving forward in ensuring that people are able to receive the services they need in the least restrictive setting while focusing on the independence and quality of life of the individual being served. There are also opportunities for counties to designate certain INSET participants as a priority population

for SPOA and other immediate needs, given the target population and proximity to programs such as AOT.

The Local Governmental Unit (LGU), Director of Community Service (DCS)/Mental Health Commissioner has a statutory authority and responsibility for oversight and cross-system management of the local mental hygiene system to meet the needs of individuals and families affected by mental illness, substance use disorder and/or intellectual/developmental disability in their communities. LGU collaboration is a vital part of the work of INSET. Applicants should notify the LGU(s) of their intent to apply.

5.2 Objectives and Responsibilities

The multidisciplinary INSET team is led by a Peer Team Leader and four (4) FTE Peer Support Specialists. The team also consists of a family liaison, two licensed professionals including and Licensed Master Social Worker (LMSW) or Licensed Mental Health Counselor (LMHC) and a Nurse Practitioner (NP), as well as administrative staff. Services are flexible and responsive to the expressed wishes and needs of participants. Engagement with participants is not time-limited and meetings occur when and where it is convenient to that participant, including during times of crisis. In developing an INSET team, programs shall prioritize a staffing plan in which lived experience in the mental health system is valued for all positions.

INSET teams are required to engage with at least 60 individuals per month. This number accounts for 1) intensive outreach teams conduct with approximately 30 individuals per month to build trust prior to potential INSET enrollment and 2) engagement with at least 30 enrolled participants per month. Programs may serve more than 60 individuals per month based on need and program capacity. Engaging in a mutual relationship based on collaborative and trauma-responsive connections will be key; length of engagement is determined in partnership with the participant. The intent is to re-orient individuals to the community of their choice and toward a self-directed life. Ideal applicants will demonstrate a clear understanding and application of peer support values, principles, and practices.

INSET teams develop innovative outreach and engagement strategies to engage participants and community partners. Respondents should include practices for communicating with county Assisted Outpatient Treatment (AOT) programs, Single Point of Access (SPOA) contacts, Local Government Units (LGUs), hospital discharge planners, legal liaisons and/or advocates, courts, judicial officials, hospitals, clinics, and other mental health program providers. The goal of these strategies is to engage individuals who may benefit from INSET in lieu of AOT, and/or upon discharge or “stepping down” from these and other services.

INSET teams shall collaborate with OMH to develop, implement, and improve upon program components including by developing outreach and engagement plans, submitting reports, and attending monthly check-in meetings and Learning Collaboratives. Programs are required to develop a supervision and management structure that affords the ability to meet all reporting requirements, collaborate with OMH

New York State Office of Mental Health (OMH)

and community partners, build and maintain quality improvement measures, and maintain integrity to the program model.

Other services enrolled individuals may be referred to and/or in which they may be co-enrolled include but are not limited to:

- Care management
- Clinical services
- Housing
- CORE/HCBS
- PROS
- AOT*
- Enhanced Voluntary Agreements (EVA)**

* For more information about AOT please visit: <https://my.omh.ny.gov/bi/aot>

** The ability to position INSET correctly with and through the counties where it is implemented will be critical. INSET is based on the principle of informed, voluntary engagement. INSET could be part of the EVA offered to individuals in need

5.3 Operating Funding

One award will be made in the amount of \$800,000.00 per year, for each of five years. At a cost of \$800K, it is anticipated that the community-based INSET team will engage with at least 60 individuals per month and be comprised of the following: peer team leader, 4 FTE certified peer specialists, and two clinicians, including an NP and either an LMSW or LMHC. INSET Peer Specialists will be offered competitive salaries commensurate to their workload. 24/7 engagement is intensive and personalized and shall include the capacity for face-to-face, telephonic, and virtual (Webex, Zoom, etc.) meetings. An INSET Team shall have the capacity to meet with participants in the setting and time that is most convenient to them on average four to five (4-5) times per month.

The awardee is expected to work with the OMH INSET Program Team to develop innovative outreach strategies and adhere to the program model with monthly virtual meetings and a monthly Learning Collaborative with all INSET teams statewide. Programs shall have strong partnerships, linkages, and partnership agreements with AOT providers, including providers of services specified on an AOT order, County DCSs, and AOT referral sources, SPOA contacts, legal liaisons and advocates, hospitals, clinics, and other services as indicated. These relationships are established with the goal of engaging individuals who may benefit from INSET early in their recovery journey.

The awardee will support staff development by providing time for training, education, and other opportunities. This may include time to complete necessary trainings and attend conferences when funding and coverage allows and attend regular reflective practice

sessions. Programs must also submit reporting as prescribed by the OMH INSET program team on a monthly, quarterly, and annual basis.

6. Proposal Narrative

6.1 Population

INSET teams are designed to support individuals of at least 18 years of age identified as “high risk” or with “complex mental health needs”, who are currently in or have recurrent encounters with emergency department, inpatient, crisis, and/or forensic settings. These individuals may be described by traditional systems as having chronic, serious, or long-term mental illness, substance use, complex and compounding health and wellness needs and a lack of ongoing and consistent access to care that is supportive. The program also aims to conduct outreach and engage with individuals historically and currently marginalized from traditional services and those eligible for, currently active with, recently discharged from, or with a history of court-ordered Assisted Outpatient Treatment (AOT) services.

- a. To receive the point for LGU notification, identified in section 4.1 Evaluation Criteria, please provide proof that LGU(s) were notified of your agency’s Intent to Apply to this RFP (e.g., sent email, certified letter, etc.)
- b. Provide the location for which this proposal applies. Describe in narrative the characteristics of the population to be served.
- c. Describe your understanding of the needs of INSET’s target population, emphasizing those who may have limited support networks/resources and who may not otherwise be engaged in traditional services for various reasons.
- d. Describe approaches and/or best practice in outreach to the target population. Response should demonstrate fidelity to the values and principles of peer support.
- e. Describe approaches and/or best practices in engaging/supporting the target population. Response should demonstrate fidelity to the values and principles of peer support.
- f. Describe your network, internally and externally, of behavioral health and other providers, and how you plan to utilize those networks to facilitate rapid access to care.

6.2 Description of Program

- a. Identify the primary county you intend to serve and describe your understanding of the need for INSET services in the county or counties you intend to serve. Please utilize data specific to your region without relying solely on global or national data wherever possible.

New York State Office of Mental Health (OMH)

- b. Detail your agency's understanding and application of peer support values, principles, and practices beyond the understanding of an ability to provide recovery-focused and strengths-based services.
- c. It is strongly encouraged that program staff demonstrate lived and professional experience serving individuals who are impacted by the mental health system. Describe your agency's experience hiring and retaining peer support staff.
- d. Describe your agency's experience supporting the target population and unique qualifications to do so in the county you intend to serve.
- e. Describe how you will coordinate the review of referrals in a timely manner and meet face-to-face with participants within 24-48 hours of referral, beginning the outreach and engagement process.
- f. Describe how you will conduct outreach to establish trust and foster engagement with referred individuals, including responding to them and addressing their concerns and needs 24 hours per day, 7 days per week.
- g. Describe your experience in collaborating and coordinating with providers of mental health, substance use, medical, and other services, to work closely with program participants and ensure connection to treatment providers and other supports.
- h. Describe your network of community and/or natural supports, and how you plan to utilize those networks to facilitate supportive connections.
- i. Describe your agency's knowledge of and experience with training and education relating to peer program development.
- j. Describe your agency's approaches to data collection, including collecting data and compiling indicators reflecting personal wellness, individual recovery outcomes measures, participant demographic information, dimensions of wellness, information pertaining to Psychiatric Advance Directives (PADs), and participants' unique needs and preferences. Describe how you track changes in indicators over time.
- k. Describe your agency's success in assisting participants in achieving community inclusion and reducing social isolation, where participants express a desire for these circumstances.
- l. Describe your agency's success in assisting participants in achieving permanent housing.
- m. Describe your agency's plans for person-centered support planning, including ways in which the plan engages and motivates participants toward their recovery using peer support, founded on respect and shared responsibility.

6.3 Implementation

- a. Provide a realistic timeline for the project, including key activities and responsible staff.

New York State Office of Mental Health (OMH)

- b. Describe start-up and phase-in activities necessary to implement INSET Teams for the geographic area(s) proposed in the application. Include timeframes and accountable parties.
- c. Provide a detailed description of the recruitment and hiring of certified Peer Support Staff and a detailed description of the roles of these staff.
- d. Discuss how the applicant organization and other participating organizations with similar projects and populations will provide trauma-informed and responsive and culturally appropriate services.
- e. Describe the agency's equipment and other needs for the teams and other administrative oversight supports necessary for successful programmatic operation.
- f. Describe how the agency will implement INSET in the community, meeting people "where they're at", at times and in spaces that are convenient to them.
- g. Describe the staff training that will be given prior to the teams enrolling participants, and the ongoing training and supervision that will be provided to ensure fidelity to the INSET model.
- h. Describe plans to recruit, train, retain, and support licensed staff in the context of a peer-run and delivered program.
- i. Describe ways in which your agency plans to collect and use data for program management, to promote best care and – most importantly – to support the achievement of participants' recovery goals.
- j. Describe the agency's experience and expertise in providing outreach, technical assistance and direct services to the target population of this RFP.
- k. Describe the agency's expertise in peer support and advocacy and how you currently employ peer specialists/advocates.
- l. Provide the organizational chart and describe the staffing plan, including leadership and supervisory structures. Ensure this includes a list of staff who will participate in the project as well as the qualifications for key personnel. Response must also detail how in-discipline peer supervision will be prioritized.
- m. Indicate which staff or units within the organizational structure will carry out each of the objectives outlined in the RFP.
- n. Provide a job description including a list of required qualifications for each staff position identified in the RFP.
- o. Describe the plan for the continued sustainability of the program.

6.4 Agency Performance, Reporting, and Quality Improvement

- a. To objectively measure the impact of INSET, awardees must demonstrate a willingness and ability to work with OMH on INSET oversight, training and support activities.

New York State Office of Mental Health (OMH)

Applicants should describe their experience designing and developing tools, forms, data elements and data collection processes. In addition, provide examples of dedicated research and evaluation activities aimed at determining program outcomes.

Programs should describe their current or anticipated Continuous Quality Improvement (CQI) process, including how they expect to collect data that will tell them how they are doing in achieving objectives. Specific program quality improvement activities should include:

- How your organization will utilize CQI data
- Plans for collecting and using data to monitor and improve program performance
- How the organization will provide training and support to systems to support assure staff competencies
- The process that peer supervisor staff will implement to identify problems and develop solutions
- Establishing data collection systems to support quality improvement
- Tracking the program's record in providing required deliverables
- Monthly, quarterly, and annual reporting to OMH

6.5 Diversity, Equity, Inclusion and Promoting Lived Experience

This section describes the commitment of the entity to advancing equity. OMH is committed to the reduction of disparities in access, quality, and treatment outcomes for historically marginalized populations as well as centering and elevating the voices of individuals with lived experience throughout the system.

6.5.1 Commitment to Equity and the Reduction of Disparities in Access, Quality, and Treatment Outcomes for Marginalized Populations.

- a) Provide a mission statement for this project that includes information about the intent to serve individuals from marginalized/underserved populations in a culturally responsive trauma-informed way.
- b) Identify the management-level person responsible for coordinating/leading efforts to reduce disparities in access, quality, and treatment outcomes for marginalized populations.
- c) Identify the management-level person responsible for coordinating/leading efforts to ensure incorporation of feedback from participants in services in continuous agency improvement. Information provided should include the individual's title, organizational positioning and their planned activities for coordinating these efforts).
- d) Provide the diversity, inclusion, equity, cultural and linguistic competence

plan for this program (as outlined in the National CLAS Standards). The plan should include information in the following domains:

- Workforce diversity (data-informed recruitment)
- Workforce inclusion
- Reducing disparities in access quality, and treatment outcomes in the patient population
- Soliciting input from diverse community stakeholders, organizations and persons with lived experience
- Efforts to adequately engage underserved foreign-born individuals and families in the project's catchment area as identified in 6.1.a.
- How stakeholder input from service users and individuals from marginalized/underserved populations was used when creating the diversity, inclusion, equity, cultural and linguistic competence plan
- Discuss how the plan will be regularly reviewed and updated.

6.5.2 Equity Structure

- e) Describe the organization's committees/workgroups that focus on reducing disparities in access, quality, and treatment outcomes for marginalized populations (diversity, inclusion, equity, cultural/linguistic competence).
- f) Describe the organization's committees/workgroups that focus on incorporating participants of services into the agency's governance. Note - it is important to describe how membership of any such committee/workgroup includes people with lived experience and representatives from the most prevalent cultural groups to be served in this project.

6.5.3 Workforce Diversity and Inclusion

- g) Describe program efforts to recruit, hire and retain a) staff from the most prevalent cultural group of service users and b) staff with lived experience with mental health and receiving mental health services.

6.5.4 Language Access

- h) Describe efforts to meet the language access needs of the participant served by this project (limited English proficient, Deaf/ASL). This information should include the use of data to identify the most prevalent language access needs, availability of direct care staff who speak the most prevalent languages, the provision of best practice approaches to provide language access services (i.e., phone, video interpretation). Also, include information about efforts to ensure all staff with direct contact with participants are knowledgeable about using these resources. Additionally, provide information about the plan to

provide documents and forms in the languages of the most prevalent cultural groups of its service users (consent forms, releases of information, medication information, rights, and grievances procedures). This section should also include information related to: addressing other language accessibility needs (Braille, limited reading skills); service descriptions and promotional material.

6.5.5 Recovery Values

- i) Describe the agency or program's plan to espouse recovery and resilience-oriented values into practice.

6.5.6 Collaboration with Diverse Community-Based Partners/Organizations

- j) For this project, describe proposed efforts to partner, collaborate with and include diverse, culturally relevant community partners in service provision and in the gathering of partner input. This includes information about subcontracting entities (if applicable) and other efforts to ensure government resources reach organizations and populations that are historically economically marginalized, including those that are peer run.

6.6 Financial Assessment

1. The proposal must include a 5-year Budget (Appendix B). \$800,000 is available annually. The indirect cost/administrative overhead rate is capped at 15%. Providers must follow Consolidated Fiscal Report (CFR) Ratio-Value guidance which excludes equipment/property from the direct cost base. Federal Negotiated Indirect Cost Rate Agreements (NICRA) are not allowable. Any travel costs included in the Budget must conform to New York State rates for travel reimbursement. Applicants should list staff by position, full-time equivalent (FTE), and salary. Please provide a detailed justification as to how the staff salaries were determined.
2. Describe how your agency manages its operating budget, Please include the following:
 - a) detailed expense components that make up the total operating expenses;
 - b) the calculation or logic that supports the budgeted value of each category; and,
 - c) description of how salaries are adequate to attract and retain qualified employees.
 - d) detailed description of the program's financial sustainability.