



Office of
Mental Health

Teams to Promote Aging in Place in OMH Supportive Housing (TPAP) Bidder's Conference

Thursday, September 10, 2026

Purpose of TPAP Grant

To facilitate aging in place for residents age 55 and older in supportive housing at risk of losing community tenure due to:

- emerging unmet care coordination, cross service system navigation, and homecare needs compounded by:
- lack of connection to social determinants of health (SDOH) resources, and community and natural supports.

****Residents younger than 55 years living with complex medical conditions that necessitate homecare are also included in this grant.***



Supportive Housing Programs with Required Partnerships

Only OMH Supportive Housing Programs are eligible to apply as lead applicant*

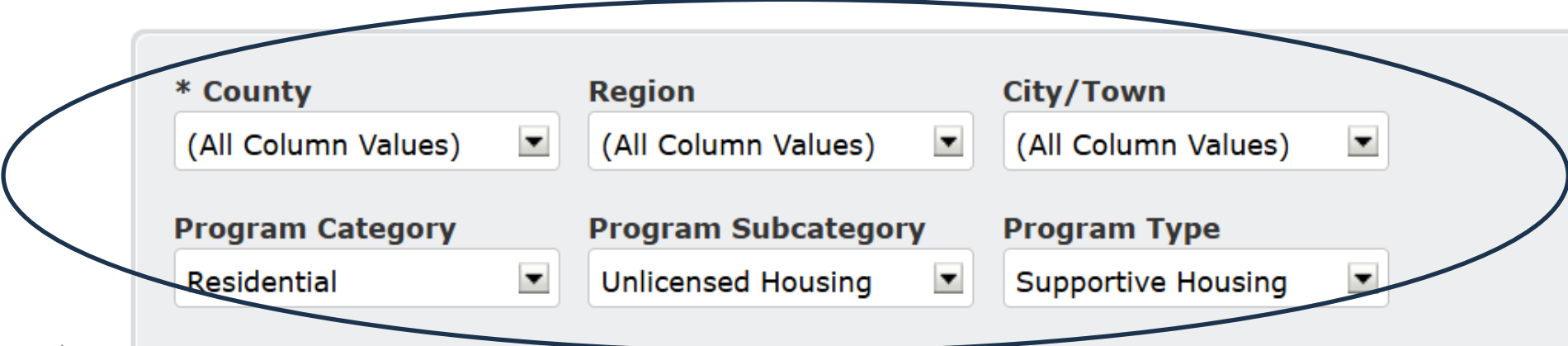
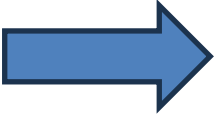
***However, partnerships are required with:**

- The Local Office for Aging**
- Home Agency**

And at least one Mental Health or Substance Use/Gambling Peer must be hired

Verifying Lead Applicant has an OMH Supportive Housing Program

Go to the [Find a Mental Health Program](#), select **Advanced Search**



* County (All Column Values) ▼	Region (All Column Values) ▼	City/Town (All Column Values) ▼
Program Category Residential ▼	Program Subcategory Unlicensed Housing ▼	Program Type Supportive Housing ▼
Zip Code 	Program Name 	Agency Name
Hours Of Operation ALL ▼	Population Served ALL ▼	Special Population ALL ▼
Recipient Run ALL ▼	Additional Services ALL ▼	Apply

At Least 2 Grants will be Awarded to Rural Counties

Rural Counties Table

Allegany	Cortland	Jefferson	Putnam	Tioga
Broome	Delaware	Lewis	Rensselaer	Tompkins
Cattaraugus	Essex	Livingston	Schenectady	Ulster
Cayuga	Franklin	Madison	Schoharie	Warren
Chautauqua	Fulton	Montgomery	Schuyler	Washington
Chemung	Genesee	Ontario	Seneca	Wayne
Chenango	Greene	Orleans	St. Lawrence	Wyoming
Clinton	Hamilton	Oswego	Steuben	Yates
Columbia	Herkimer	Otsego	Sullivan	

Statement of Need/Population to be Served

- **Unmet homecare needs of the residents to be served:** consider residents' needs for both personal care services that address activities of daily living (personal hygiene, dressing, eating, bathing, etc.) and instrumental activities of daily living (budgeting, shopping, household chores, etc.).
- **Skilled home health needs:** such as wound care, professional therapies including physical and occupational therapy, and management of chronic conditions.
- **Unmet social determinants of health needs:** such as food, transportation, utilities, caregiving, finances, employment, personal safety, and family and community support.
- **Unmet social needs that exacerbate social isolation and loneliness:** Consider residents' cultural background, including military service, and religious affiliations.

Statement of Need/Population to be Served

Provide information about adults living in your agency's OMH supportive housing who are anticipated to participate in this program.

- **The estimated number and percentage of residents aged 55 years and older who are struggling to age in place due to:**
 - need for more intensive cross service system care coordination and navigation assistance, unmet and/or emerging homecare needs, and/or lack of significant connection to social determinants of health resources and opportunities to establish social and natural supports
- **The estimated number and percentage of residents younger than 55 years old with complex medical needs necessitating homecare.**

Description of Program: Interdisciplinary Care Team

Describe how the program will establish an interdisciplinary team that includes:

- An OMH supportive housing case manager
- A local office for aging case manager
- A homecare professional
- At least one mental health or substance use/gambling peer professional



Description of Program: Interdisciplinary Care Team

- **The number, name(s), location(s), and type(s) (scattered site or single site)** of your OMH supportive housing program(s) that your interdisciplinary team will serve, including if the team will serve more than one location and/or county/borough
- **The local Office for Aging your agency** will partner with to include an aging case manager in the interdisciplinary team. Describe previous experience your agency has in partnering with the local Office for Aging and connecting residents to aging network resources, including NY Connects. ***Your application must include a Letter of Commitment from the local Office for Aging.***
- **The homecare organization your agency** will partner with to include a homecare professional in the interdisciplinary care team. Describe previous experience your agency has in partnering with homecare agencies and direct care homecare staff serving OMH supportive housing residents. Describe how your agency will foster communication and mutual learning between your homecare professional and other interdisciplinary team members. ***Your application must include a Letter of Commitment from at least one homecare agency.***

Description of Program: Peer Support Services

Describe your agency's plan to provide peer support services and connect your peer professional with peers in the other TPAP programs throughout the five-year service demonstration.

Include any previous experience your agency has in collaborating with peers as well as any existing partnerships with peer or family-run organizations.

Resources:

- Information about Work Requirements for Provisionally Certified Peers
 - Provisionally Certified mental health Peer Specialists (CPS) require documentation of 2,000 hours of Peer Specialist experience under the supervision of a qualified supervisor to move on to standard certification.
<https://behavioralhealthprofessional.com/wp-content/uploads/2024/03/NCPS-Supervised-Work-Experience-Verification-Form-Feb-2024.pdf>
 - Provisionally Certified substance use/gambling Recovery Peer Advocates (CRPA) require a [Role Experience & Supervision](#) (RE&S) form to be filed out by anyone who supervises the peer.
- CRPA resources
 - [Unity Alliance](#): resources including a dedicated CRPA page, CRPA Certification Guide, and Upgrade to CRPA Guide for current CRPA Provisionals
 - [CRPA Role Competencies](#)
- Please see the application form for more information: [NYCPS Application Feb 02-14-2020.pdf](#);

Wraparound Funding

Available to provide services and goods not covered through existing reimbursement channels

- Transportation, meals, minor home modifications, (such as grab bars or nightlights to prevent falls), timed pill boxes, technology to connect people with family/friends, virtual senior centers and telehealth appointments, etc.



WRAPAROUND FUNDS

Description of Program: Leadership, Assessment, Goals

- **Describe how you will provide leadership of the interdisciplinary team's work:** including the assessment process and development of a person-centered, strengths-based service plan, developed in coordination with the resident and other collaterals, as appropriate.
- **Explain how the assessment process:** including the administration of the De Jong Gierveld Loneliness Scale and the Social Determinants of Health (SDOH) Inventory will inform resource connection and social engagement to develop a “living” or evolving service plan.
- **Describe how the interdisciplinary team will develop a process to assess aging in place needs and determine the most appropriate interventions to be implemented through the use of wraparound funding:** Describe how the team will include resident input on how wraparound funding will be used to promote independence and social connection based on their preferences and needs.
- **Describe the specific individual and systemic barriers and challenges this program intends to address by implementing this proposal.**

Description of the Community Partners

Describe the key community-based organizations your agency will partner with across systems including mental health, aging, substance use and gambling, as well as civic and cultural organizations, to meet social determinants of health and social engagement needs.

- Include previous experience working with community partners to meet aging and health related social needs of older supportive housing residents.
- Include any previous experiences or ideas to connect residents to opportunities for community inclusion such as volunteering, employment, community block parties, etc.

Description of Training and Education

- Describe how your agency will consult with the Older Adult Technical Assistance Center (OATAC) and subject matter experts from OMH and OASAS to recruit, train, and provide supervision of a paid peer professional for the interdisciplinary team.
- Describe the potential training and education that you (OMH Supportive Housing provider) and your partners (aging service system, homecare agency, community-based organizations) can provide during the cross-disciplinary trainings included in the grant-funded learning collaboratives.

Implementation

Describe how the program will look when it is fully implemented.

- The roles, responsibilities, and workload of staff and supervisors involved in this project;
- How the interdisciplinary team will work together to establish an assessment and care planning process that continuously integrates the resident's preferences, community partners, and resources, and responds to changing medical needs; and
- How you will leverage cross-trainings and learning collaborative opportunities to ensure evaluation for continuous quality improvement.

Agency Experience

Provide an overview of your agency's experience in operating supportive housing programs, serving individuals who are living with serious mental illness and/or co-occurring substance use disorder, and are experiencing aging-related challenges, including managing chronic medical conditions.

- Describe your knowledge of community resources relevant to this population, specifically addressing social determinants of health and social engagement needs.
- Provide a summary of your agency's experience in developing and managing a team that supports residents living in a community setting with aging in place services.

Describe your agency's mission as it relates to the target population.

- Describe your agency's experience working with older adults with multiple systems involvement (mental health, substance use, aging network, physical health, Medicaid, Medicare, entitlements, etc.), and how you have advocated with them and on their behalf to better coordinate care, both internally and externally.
- Describe the ways in which your agency has assisted residents in being involved in their communities of choice (e.g., faith, family, resident advisory boards, social groups, arts institutions, etc.).

Diversity, Equity, Inclusion, and Resident Input

- **Provide a mission statement for this program** that includes information about the intent to serve individuals from marginalized/underserved populations in a culturally responsive, trauma-informed way.
- **Identify the management-level person responsible for coordinating/leading efforts to reduce disparities in access, quality, and treatment outcomes for marginalized populations.** Information provided should include the individual's title, organizational positioning, and their planned activities for coordinating these efforts.
- **Identify the management-level person responsible for coordinating/leading efforts to ensure incorporation of feedback from residents.** Information provided should include the individual's title, organizational positioning, and their planned activities for coordinating these efforts.
- Describe the organization's committees and/or workgroups that focus on **incorporating participants of TPAP and other residents** into the agency's governance.
- Describe program efforts to recruit, hire, and retain staff with **lived mental health experience** from the most prevalent cultural group of residents.

Diversity, Equity, Inclusion, and Resident Input

Language Access

- Describe efforts to meet the language access needs of the clients served by this project (including limited English proficiency and Deaf/ASL).
 - Include the use of data to identify the most prevalent language access needs,
 - availability of direct care staff who speak the most prevalent languages, and
 - the provision of best practice approaches to provide language access services (e.g., phone, video interpretation). Include information related to other language accessibility needs (such as braille and limited reading skills), service descriptions, and promotional material.

Recovery Values

- Describe the agency's definition of recovery and how the program supports the individual in achieving full recovery from SMI and/or SUD.
 - Describe how new and existing staff are trained in recovery-oriented practices.

Financial Assessment

The proposal must include a 5-year Budget

- \$300,000 is available annually
- The indirect cost/administrative overhead rate is capped at 15%.
- Follow Consolidated Fiscal Report (CFR) Ratio-Value guidance which excludes equipment/property from the direct cost base. List staff by position, full-time equivalent (FTE), and salary.

Describe how your agency will manage the proposed program operating budget

- Detailed expense components that make up the total operating expenses;
- Calculation or logic that supports the budgeted value of each category, including all financial arrangements with required aging and homecare partners and for hiring of at least one mental health and/or substance use/gambling peer professional to collaborate with the OMH supportive housing case manager to form the interdisciplinary team;
- Describe how:
 - wraparound funds will be allocated to address aging in place needs not covered through traditional reimbursement systems and any budget funds to be used with community-based organizations to address unmet social determinants of health and social engagement needs; and
 - salaries are adequate to attract and retain qualified employees.

Point of Contact

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 contacting 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:
New York State Office of Mental Health
Contracts and Claims
44 Holland Avenue, 7th Floor
Albany, NY 12229
OMHLocalProcurement@omh.ny.gov

Key Events/Timeline

- RFP Release Date 08/27/2026
- Bider's Conference 09/10/2026
- Questions and Answers Due 09/17/2026
- Q and A Posted on Website 10/08/2026
- Proposals Due by 2:00PM EST 10/29/2026
- Anticipated Award Notification 12/10/2026
- Anticipated Contract Start Date 07/01/2027

Questions?



Office of Mental Health