



# **REQUEST FOR PROPOSALS:**

## ***Trainings for Behavioral Health Organizations that Serve Women with Children***

**Release Date: July 8, 2020**

**Proposal Due: July 29, 2020**

**Anticipated Contract Start: September 1, 2020**

**Issued by:**

Behavioral Health System Baltimore, Inc.  
100 South Charles Street, Tower II, 8<sup>th</sup> Floor  
Baltimore, Maryland 21201

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# REQUEST FOR PROPOSALS

## ***Trainings for Women with Children Behavioral Health Organizations***

### **I. Overview of the Project**

#### **A. OVERVIEW OF BHSB**

Behavioral Health System Baltimore, Inc. (BHSB) is a non-profit organization tasked by Baltimore City to manage the city's public behavioral health system. As such, BHSB serves as the local behavioral health authority for Baltimore City. In this role, BHSB envisions a city where people live and thrive in communities that promote and support behavioral health and wellness.

BHSB is committed to enhancing the behavioral health and wellness of individuals, families, and communities through:

- The promotion of behavioral health and wellness prevention, early intervention, treatment, and recovery;
- The creation and leadership of an integrated network of providers that promotes universal access to comprehensive, data-driven services; and
- Advocacy and leadership of behavioral health-related efforts to align resources, programs, and policy.

BHSB is committed to promoting behavioral health equity in Baltimore City by ensuring that the behavioral health provider network is culturally and linguistically responsive to the diverse populations served; reducing behavioral health care access barriers for populations known to experience discrimination and marginalization; and supporting communities directly to develop services that are responsive to their unique strengths and needs.

#### **B. OVERVIEW OF PROJECT**

Through this procurement, BHSB is seeking qualified organization(s) to implement trainings for providers that provide a range of behavioral health services to women with children (WWC). BHSB anticipates releasing a separate RFP in late 2020 or early 2021 for a continuum of behavioral health services for women with children. In advance of the RFP for WWC Services, BHSB is seeking an organization to implement trainings targeted to potential RFP applicants with the goal of improving the number of and quality of RFP responses.

## C. SCOPE OF SERVICE

The training organization(s) will provide at least one, but not more than four trainings between September and November 2020. Trainings may be virtual or in-person. If in-person trainings are proposed, virtual options must be available as a back-up in case BHSB determines in-person trainings would pose too high a public health risk.

The trainings must be specifically tailored to address the behavioral health needs of women with children in Baltimore City. Due to restrictions on the funding source, we cannot expand the eligible population to include fathers or grandparents who are primary caregivers, but we are aware of the need to provide more services to these populations.

Types of topics the trainings could address include:

- Opening/operating a behavioral health program
- Braiding fee-for-service and grant funding
- Leveraging other funding sources that serve WWC
- Providing mobile Care Coordination or Case Management for adults (following an integrated health model)
- Operating a Withdrawal Management program (ASAM Level 3.7 residential and outpatient)
- Operating a residential treatment facility (ASAM Levels 3.5, 3.3, or 3.1)
- Operating scattered site and/or congregate temporary or permanent supportive housing (following a Housing First model)
- Operating a recovery residence
- Providing on-demand walk-in behavioral health services
- Integrating parent peer support into clinical services

Priority will be given to trainings that address, in addition to WWC in general, subpopulations such as:

- Pregnant and postpartum women
- Mothers who are transition age youth (18-24 years old)
- Persons with criminal justice involvement
- Persons with disabilities
- Persons who do not speak English, or speak English as a second language

Priority will be given to trainings that incorporate the following orientations, values, or models into their training:

- Family-focused. Providers nurture and strengthen overall family functioning and parent-child relationships, enhance family strengths and resilience, and build on family culture.
- Access and equity. Providers verify through continuous consumer feedback and data analysis that services are provided in welcoming environments and through low-barrier processes that ensure persons are well-served regardless

of age, race, disability, gender, sexual orientation, religion, nationality, spoken language or other characteristics.

- Culturally competent, comprehensive, and holistic. Providers collaboratively develop with each individual a unique plan of services that (1) is based on the experiences, values, preferences, beliefs, culture, and identity of the individual and their community, and (2) expertly addresses a broad range of potential needs (education, training, housing, social, spiritual, legal, etc.).
- Resilience. Provider processes and services are informed by and responsive to structural and individual trauma. Providers honor that all human beings have the capacity to learn, grow and change (including the right to try and fail) and the power to impact structural or systemic change.
- Person-centered and grounded in Harm Reduction and Housing First. Recognizing health care and housing as human rights, providers offer services without preconditions (meeting consumers “where they are”), support consumers in making their own choices, nonjudgmentally acknowledge the challenges of avoiding risky behavior (such as drug use), and prioritize housing and service continuity as means to reduce harm.
- Outcome-based and transparent. Through service planning, providers collaborate with consumers to track and record progress toward measurable goals in a way that is fully owned by and accessible to the consumer.
- Strengths based. Provider processes and services identify, build on, and enhance the capabilities, knowledge, skills, and assets that the individual, youth, or family already possess.
- Voice and Choice. Consumer perspectives are elicited and prioritized during all phases of planning and services, and options and choices reflect individual and family values and preferences.
- Interdisciplinary, team-based, and inclusive of natural supports. Providers include a complete array of specialties (e.g. medical, vocational, addictions, mental health, peer recovery specialists, etc.) including, with full consent from the consumer, family or community relations (e.g. friends, extended family, church members, teachers, etc.) as full partners in service planning. All partners share responsibility for developing, implementing, monitoring, and evaluating consumer progress by blending perspectives and resources.

BHSB will consider topics, subpopulations, orientations, values, and models that are not listed here.

#### **D. FOCUS AUDIENCE**

The target audience for the trainings includes new or prospective providers that have not previously served WWC as well as more experienced providers. BHSB anticipates between 10 and 40 participants at each training, but would consider other training approaches, such as multiple training sessions of fewer participants.

## **E. STAFFING REQUIREMENTS**

There are no staffing requirements for this procurement. Please read eligibility criteria for requirements to submit proposals.

## **F. FUNDING AVAILABILITY**

BHSB has allocated \$20,000 for this project. Applicants may apply for the full amount or a partial amount. BHSB can but does not need to split the allocation into subawards.

## **G. CONTRACTING WITH BHSB**

Applicants selected through this process will enter into a contractual agreement with BHSB. Following a notification of selection, BHSB will issue a Letter of Award that provides details about the contract and the process for executing it. Selected organizations will be required to submit a new budget on BHSB's budget form, which will be reviewed for allowable costs under the grant.

Please note that applicants may be asked to change their budgets and/or details of their proposals even if the proposal were selected for funding. Applicants new to BHSB's contract process are encouraged to review relevant forms available on our website here: <https://www.bhsbaltimore.org/for-providers/forms-for-providers>.

### Contract Type and Payment

BHSB issues several types of contracts with different payment mechanisms based on the requirements of the funding source. The contract that will result from this procurement is described below. Applicants are encouraged to consider whether their organization will be able to operate with this payment mechanism before applying for these funds.

- Consultant Contract
  - Issued to a person or entity engaged in independent work as outlined in the contract. The total cost of the contract is based on a calculation that includes an hourly consultant rate and the estimated number of hours it will take to complete the scope of work.
  - Payment is based on the costs reported for a specific period (e.g., hourly rate x # of hours worked that month).

BHSB issues payments once per month. Applicants should note that submitting required documents and reports late can result in delayed payment.

## Contract Monitoring and Technical Assistance

Selected applicants will be required to submit regular Program and Financial reports to BHSB using an electronic contract management application. BHSB will review these reports to monitor progress and contract compliance throughout the contract term.

**Program Reports** include an update on progress toward deliverables (e.g., number of people served, number of services delivered, etc.). Some program reports may also require organizations to attach a data report with additional information (e.g., consumer demographic information, process and/or outcomes data, etc.). BHSB monitors progress on these reports throughout the contract term and may offer technical assistance and support if deliverables are not being met.

**Financial Reports** are required to generate payment and involve submitting actual expenditures or invoices (depending on the contract type) and to monitor spending compared to the budget or award amount. If organizations are spending more or less than expected awarded throughout the contract term, BHSB may offer technical assistance and support to ensure the funding covers the contract term fully and may reduce funding if all funds are not likely to be expended by the end of the contract term.

Please note that submitting Program or Financial Reports late can result in delayed payment.

## Verification of Services

BHSB audits all contracts to review whether the requirements set forth in the contract were completed as reported and that relevant federal, state, and local regulations were followed. This generally occurs after the conclusion of the contract period. Audits may be conducted remotely through a review of documents submitted to BHSB or on-site at the organization's location.

Applicants should be aware of best practices in documenting both programmatic and financial activities to aid in an efficient audit.

## II. Overview of RFP

### A. PURPOSE OF RFP

The purpose of this RFP is to select qualified organization(s) to implement trainings for providers that provide a range of behavioral health services to women with children (WWC).

### B. APPLICANT ELIGIBILITY

Applicants must meet all of the criteria outlined below to be considered eligible to be selected through this RFP process:

- Training vendors must demonstrate experience with and knowledge of the subject matter and competency in executing trainings on the subject matter

### C. PROPOSAL TIMEFRAME AND SPECIFICATIONS

#### 1. Timeline

Release Date:	July 8, 2020
Proposal Due:	July 29, 2020
Anticipated Contract Start:	September 1, 2020

#### 2. Pre-Proposal Conference

There will be no pre-proposal conference for this procurement. Applicants may submit questions to [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org) by July 15, 2020. All questions received by the close of business July 15, 2020 will be answered and posted on BHSB's website with the RFP document by July 22, 2020. Substantive questions received after this date cannot be answered.

#### 3. Proposal Due Date, Time, and Location

Proposals must be submitted electronically by email to [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org) by attaching one or more PDF files. Because some email systems prohibit sending or receiving large files, applicants may need to split files into multiple emails. It is recommended that a separate email be sent with no attachments to request confirmation that the proposal was received.

All proposals must be received no later than **12:00 pm (noon) EST on July 29, 2020**. All submitted proposals become the property of BHSB. If you are having technical troubles related to submitting your proposal, contact BHSB before the due date/time.

Proposals submitted after the due date/time will not be considered.



#### **4. Authorized Contact**

Applicants are advised that the authorized contact person for all matters concerning this RFP is Jennifer Glassman whose contact information is listed below.

Jennifer Glassman, Procurement Lead/ Special Projects Coordinator  
Behavioral Health System Baltimore  
100 South Charles Street, Tower II, 8<sup>th</sup> Floor  
Baltimore, MD 21201  
Email: [Procurements@BHSBaltimore.org](mailto:Procurements@BHSBaltimore.org)

**5. Anticipated Service Term:** September 1, 2020 - December 31, 2020

#### **D. AWARD OF CONTRACT**

The submission of a proposal does not, in any way, guarantee an award. BHSB is not responsible for any costs incurred related to the preparation of a proposal in response to this RFP. BHSB reserves the right to withdraw an award prior to execution of a contract with a selected applicant in BHSB's sole and absolute discretion.

BHSB will select the most qualified and responsive applicants through this RFP process. BHSB will enter into a contract with selected applicants following the notification of award. All selected applicants must comply with all terms and conditions applicable to contracts executed by BHSB.

#### **E. RFP POSTPONEMENT/CANCELLATION**

BHSB reserves the right to postpone or cancel this RFP, in whole or in part.

#### **F. APPLICANT APPEAL RIGHTS**

Applicants may file an appeal to the Procurement Lead within five days of notification of non-award. The Procurement Lead will review the appeal, examine any additional information provided by the protesting party, and respond to the protestor within ten working days of receipt of the appeal.

### **III. Format and Content of Proposal**

#### **A. PROPOSAL INSTRUCTIONS**

Applicants should submit all required information in the format specified in these instructions by the due date. The proposal narrative should be submitted using the outline provided in the next section, and should not exceed 5 typed, single-spaced pages using Times New Roman 12-point font. The cover letter and appendices do not count toward the page limit.

The final proposal package shall include:

- A proposal cover letter signed and dated by an authorized representative of the applicant organization. If the applicant is using a fiscal agent, the legal name of that organization as well as a designated contact person with contact information should be identified.
  - The cover letter must include:
    - full legal name of the applicant organization
    - physical address
    - designated contact person
    - their contact information (email address and phone number)
- A full proposal with all appendices.

Late proposals will not be considered.

It is the policy of BHSB to adhere to the rules and regulations in the Health Insurance Portability and Accountability Act (HIPAA). We do not anticipate that any proposal submitted in response to this RFP would include individually identifiable health information. However, if it does, please remember that protected health information (PHI) needs to be secured via encryption and should adhere to the Guide to IT Privacy and Security of Electronic Health Information:

<https://www.healthit.gov/topic/privacy-security-and-hipaa/health-it-privacy-and-security-resources-providers>.

#### **B. PROPOSAL NARRATIVE OUTLINE AND RATING CRITERIA**

The proposal should be a clear, concise narrative that describes the applicant's responses to the prompts outlined below. This narrative outline will also be used as the rating criteria, and the number of points allocated to each section is also noted.

1. Organizational Background and Capacity (25 points)
  - a. Provide an overview of your organization, including its history, mission, and overall purpose.

- b. Describe your organization's experience managing trainings similar to this project, meeting contractual deliverables and obligations (including any contracts with BHSB), and your capacity to manage the programmatic and financial requirements of this grant.
  - c. Describe your organization's access to, experience working with, and continued capacity to work with providers of behavioral health services and housing services that serve women with children.
  - d. Describe the organization's history and experience, including length of time, delivering trainings, including any evidence-based practices used.
  - e. BHSB awards additional points to organization owned or led by marginalized and oppressed groups to help address systemic barriers that have led to inequity in funding. Describe whether your organization is owned and/or led by members of historically marginalized or oppressed groups, including racial and ethnic groups (i.e., African American/ Black, Latinx), LGBTQ communities, etc.
2. Service Delivery (25 points)
- a. Describe your organization's plan to deliver trainings as outlined in the Scope of Service section of this RFP. Specifically indicate each topic you would include from the list provided.
  - b. Using and/or adding to the list provided, specifically indicate each subpopulation that would be addressed during the trainings and explain how each subpopulation would be addressed.
  - c. Using and/or adding to the list provided, specifically indicate the orientations, values, philosophies and/or models that would be incorporated into the training(s) and explain how these would be incorporated.
  - d. Describe whether/how your organization hires or includes persons with lived experience of recovery in training planning, development, or implementation.
  - e. Describe what applications or software you will use to deliver trainings.
3. Program Evaluation and Quality Assurance (5 points)
- a. Describe how evaluations are used to improve trainings, including a couple of examples of improvements that have been made as a result of previous evaluations.
4. Proposed Funding and Schedule of Activities (10 points)
- a. List the activities that will be conducted including a schedule of activities based on the proposed start and end dates listed in this RFP. This should include hours required per activity, and total amount of funding requested. Include a narrative that explains how time was allocated and what is included in the hourly rate or a line item budget if applicable.

5. Appendices
  - a. Resume or curriculum vitae for individuals/consultants working on this project that includes licenses, certifications, and other significant accomplishments