



Behavioral Health System
Baltimore

REQUEST FOR PROPOSALS:

Early Childhood Mental Health (ECMH)

Head Start Initiative

Release Date: May 1, 2026

Pre-Proposal Conference: May 8, 2026, at 11:30 am

Proposals Due: June 1, 2026, at 5:00 p.m.

Anticipated Award Notification: June 19, 2026

Anticipated Contract Start: July 1, 2026

Issued by:

Behavioral Health System Baltimore, Inc.
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TABLE OF CONTENTS

OVERVIEW OF THE PROJECT.....	3
Overview of BHSB	3
Description of Project.....	3
Scope of Service	3
Assessments	4
Comprehensive Mental Health Services	4
Training, Coaching, and Outreach	5
Focus Population	6
Staffing Requirements.....	6
Funding Availability.....	7
Risk Assessment	7
Contracting with BHSB	7
OVERVIEW OF RFP.....	9
Purpose of RFP.....	9
Applicant Eligibility	9
Proposal Timeline and Specifications.....	9
Award of Contract	11
RFP Postponement/Cancellation	11
Applicant Appeal Process	11
FORMAT AND CONTENT OF PROPOSAL	12
Proposal Instructions	12
Proposal Narrative Outline and Rating Criteria	12

OVERVIEW OF THE PROJECT

Overview of BHSB

Behavioral Health System Baltimore, Inc. (BHSB) is a non-profit organization that serves as the Local Behavioral Health Authority (LBHA) on behalf of Baltimore City and operates in this role under the authority of the Maryland Department of Health (MDH). BHSB is responsible for planning, managing, and monitoring resources, programs, and policies within the larger Medicaid fee-for-service system, as well as services directly funded by BHSB through private and public grants. We use our knowledge of what services are available and how to structure system resources to meet the unique needs of the communities we serve.

BHSB envisions a city where people live and thrive in communities that promote and support behavioral health and wellness. We are committed to building a system of care that serves all community members in need of services. We work to ensure that the most appropriate care is provided, taking into consideration family and community differences.

Description of Project

Through this Request for Proposals (RFP), BHSB is seeking one or more organizations that will staff a total of 3.0 full-time equivalent (FTE) clinicians who will provide mental health services for the Early Childhood Mental Health (ECMH) Head Start Initiative. The ECMH Head Start Initiative delivers individual and classroom mental health consultation to targeted Head Start programs and licensed Early Childhood Development Centers in Baltimore City, serving preschool children ages 3–5. Its primary goal is to equip Head Start staff and caregivers with strategies to manage challenging behaviors and support children with mental health needs, ultimately improving kindergarten readiness. This initiative addresses the gaps in kindergarten readiness by targeting behavioral challenges early. It also prioritizes reducing school suspensions and improving educational outcomes.

Scope of Service

The selected applicants will provide comprehensive ECMH services to Head Start programs and Early Childhood Development Centers located throughout Baltimore City. Services include classroom-based and individual consultation, child assessments, and coaching and training for staff and caregivers. All services must be delivered using a trauma-informed and family-centered approach that takes into account individual differences and family dynamics and supports the social-emotional development and well-being of young children.

Each selected applicant will be assigned to one or more Head Start and Early Childhood Development Center(s), depending on the number of FTEs awarded.

Assessments

Children are referred for assessment by their caregiver and/or Head Start staff.

- If the referral is made by a caregiver, the clinician administers an assessment.
- If the referral is made by Head Start staff—and if the child’s behaviors are not putting others at risk—the clinician conducts a classroom observation to determine if an assessment is indicated. If the child’s behaviors are putting others at risk, the clinician does not delay administering the assessment.

The clinician administers the [Devereux Early Childhood Assessments \(DECA-C\)](#), which is an evidence-based assessment tool designed to identify children who may be at risk for social-emotional, behavioral, or mental health challenges within educational and childcare settings. The selected applicants are responsible for ensuring assessments are administered, scored, and interpreted in accordance with established DECA-C guidelines and best practices.

The DECA-C assessment evaluates key areas of social-emotional functioning, including but not limited to:

- Self-regulation and self-control
- Initiative and engagement
- Attachment and relationships
- Behavioral concerns such as aggression, withdrawal, or emotional dysregulation

Assessment results are used to identify children with areas of vulnerability and to determine if comprehensive mental health services and/or referrals for other community-based services are indicated.

Comprehensive Mental Health Services

Children who are identified through the DECA-C as needing comprehensive mental health services are assigned to a clinician’s caseload. Clinicians are expected to carry a total annual caseload of at least 48 unduplicated children per 1.0 FTE. Service delivery should align with the following evidence-based training and consultation models:

- [Maryland SEFEL Pyramid Model](#)¹

¹ The Maryland SEFEL Pyramid Model is a research-based framework designed to promote the social and emotional development of young children through the creation of supportive relationships and intentional learning environments. Grounded in evidence-informed practices, the model emphasizes collaborative partnerships among early childhood providers, families, and home visitors to strengthen children’s social and emotional foundations.

- [Facilitating Attuned Interactions \(FAN\)](#)²

Clinicians are expected to deliver the following services to Head Start staff and caregivers of children on their caseload:

- Assess instructional practices and deliver targeted consultation and actionable recommendations to strengthen strategies that promote the child's social, emotional, and behavioral development.
- Administer a follow up DECA-C assessment.
- Provide evidence-based education and support for caregivers to enhance their capacity to support the child's emotional and behavioral development, such as the [Chicago Parent Program](#) or other comparable, research-supported models.
- Facilitate referrals for a minimum of 10 children on the caseload to community-based service providers, including but not limited to speech and occupational therapy.

Training, Coaching, and Outreach

Selected applicants are required to provide the following services to Head Start staff:

- Regular classroom observations
- Shadowing instructional staff as appropriate
- Structured, reflective coaching and feedback to staff

In addition, selected applicants must facilitate a minimum of two (2) staff trainings and two (2) caregiver trainings annually per 1.0 FTE in each assigned Center.

Training topics may include, but are not limited to:

- Early childhood social-emotional development
- Trauma-informed care, including adverse childhood experiences (ACEs)
- Evidence-based approaches for supporting children with challenging behaviors
- Strategies to strengthen classroom environments and improve staff-child interactions

In addition, selected applicants are expected to conduct family and community outreach activities, which could be during caregiver trainings, workshops, camps, and/or tabling at Head Start events.

² FAN is a relationship-based approach designed to strengthen connections between providers and parents, with the goal of supporting parents in becoming more attuned and responsive to their children's needs. It equips professionals with strategies to engage families in ways that promote emotional attunement, self-regulation, and collaborative problem-solving.

Project Deliverables

The selected applicants will be responsible for the following deliverables:

- Serve a caseload of 48 unduplicated children per 1.0 FTE.
- Provide a minimum of 48 mental health consultation sessions annually per 1.0 FTE, delivered either individually or within classroom settings.
- Conduct and document at least 20 classroom observations annually per 1.0 FTE, providing structured coaching and feedback. Observations may include children on or referred to the caseload, as well as general classroom management to support staff practice.
- Document classroom observations and coaching sessions, including feedback from staff.
- Administer DECA-C assessments twice annually (pre- and post-tests) for 100% of children on the caseload.
- Refer a minimum of 10 children on the caseload to community-based service providers annually per 1.0 FTE.
- Deliver two (2) staff trainings and two (2) parent/guardian trainings annually per 1.0 FTE, including agendas, handouts, and satisfaction surveys.
- Participate in staff meetings as requested (minimum 4 annually per 1.0 FTE).
- Develop and distribute an annual Community Mental Health Resource Guide.
- Collaborate with at least four (4) community partners that serve youth and families annually per 1.0 FTE.
- Submit all required data. This includes but is not limited to demographic data, staffing logs, activity reports, and narrative summaries.

Focus Population

Children ages three to five who are enrolled in Baltimore City Head Start and Early Childhood Development Centers, along with their caregivers and program staff. Priority shall be given to children identified as at risk based on results from the DECA-C assessment or those referred for behavioral health or social-emotional supports.

Staffing Requirements

Each selected applicant will be assigned to one or more Head Start and Early Childhood Development Center.

Clinicians and administrative staff working on this project must have relevant experience and knowledge to meet the needs of the people who will be served within the scope of the project. Clinical staff must hold one of the following licenses.

- Independently Licensed Advanced Clinical Mental Health Professionals:
 - Licensed Certified Social Worker–Clinical (LCSW-C)
 - Licensed Clinical Professional Counselor (LCPC)
- Master’s-Level Licensed Mental Health Professionals
 - Licensed Master Social Worker (LMSW)
 - Licensed Graduate Professional Counselor (LGPC)

Selected applicants must provide ongoing clinical supervision and training in accordance with each staff member’s licensure board requirements.

Funding Availability

Total funding for the ECMH Head Start Initiative in FY27 is \$166,122. Selected applicants will receive \$55,374 for each 1.0 FTE awarded. The funding has the option to renew annually, contingent on the availability of funding and performance.

Award funds may be applied only to allowable costs and may not duplicate or supplant Medicaid or public behavioral health fee-for-service reimbursements. Applicants must bill Medicaid for all reimbursable services and use grant funds solely for non-reimbursable services.

Risk Assessment

BHSB completes a risk assessment as part of the procurement process. Applicants should provide the most recent versions of all required documentation with their RFP application.

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. The selected applicants will be required to submit a new budget on BHSB’s budget forms, 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 was 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

The contract and payment type that will result from this procurement are described below. Applicants are encouraged to consider whether their organization will be able to operate with this payment mechanism before applying for these funds.

Cost Reimbursement – Actual Expenditures contract

- Vendor receives payment after costs are incurred and reported. Payment is based on the costs reported for a specific period.

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 system. 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 on track to be 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 of their award amount throughout the contract term, BHSB may offer technical assistance and support to ensure the funding covers the contract term fully, and BHSB 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. Failure by vendors to comply with the terms of any contract with BHSB may result in the denial of future contracts with BHSB.

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

OVERVIEW OF RFP

Purpose of RFP

BHSB is seeking one or more organizations that will staff a total of 3.0 FTE clinicians who will provide mental health services for the Early Childhood Mental Health (ECMH) Head Start Initiative. The ECMH Head Start Initiative delivers individual and classroom mental health consultation to targeted Head Start programs and licensed Early Childhood Development Centers in Baltimore City, serving preschool children ages 3–5. Its primary goal is to equip Head Start staff and caregivers with strategies to manage challenging behaviors and support children with mental health needs, ultimately improving kindergarten readiness. This initiative addresses the gaps in kindergarten readiness by targeting behavioral challenges early. It also prioritizes reducing school suspensions and improving educational outcomes.

Applicant Eligibility

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

- Be licensed as a Maryland COMAR 10.63 Outpatient Mental Health Center.
- In Good Standing with the Maryland Department of Assessments and Taxation
- Able to bill and receive reimbursement from Medicaid.
- For applicants that currently receive grant funds from BHSB or did receive grant funds in prior years:
 - No outstanding financial audits
 - No late payments owed to BHSB
 - No current Corrective Action Plans (CAP) for which the applicant has not met identified targets more than two years beyond the date the CAP was issued.
 - No more than one (1) Accountability Compliance Audit in the two fiscal years preceding the current fiscal year that reflects unresolved deficiencies.

Proposal Timeline and Specifications

1. Timeline

Release Date:	May 1, 2026
Pre-Proposal Conference Date	May 8, 2026, at 11:30 a.m.
Proposal Due:	June 1, 2026, at 5:00 p.m.

Anticipated Award Notification:	June 19, 2026
Anticipated Contract Start:	July 1, 2026

2. Pre-Proposal Conference

Date: May 8, 2026

Time: 11:30 am

Location: Microsoft Teams meeting - Join on your computer or mobile app

Click here to join the meeting [Updated Early Childhood Mental Health Pre-Proposal](#)

Or call in (audio only): [+1 443-819-0973](tel:+14438190973),,219647414#

Phone Conference ID: 219 647 414#

Please join five minutes early to leave time to troubleshoot. If you have any problems accessing the meeting, please contact Procurements@BHSBaltimore.org.

Questions related to this RFP will be answered at the Pre-Proposal Conference. Questions posed during the conference and BHSB's responses will be posted on BHSB's website at <https://www.bhsbaltimore.org/for-providers/funding-opportunities/> by **May 15, 2026**.

Individuals who attended the Pre-Proposal Conference will be notified by email when questions and answers are posted on BHSB's website.

Questions received after this conference cannot be answered.

3. Proposal Due Date, Time, and Location

All proposals must be submitted through BHSB's online portal. Applicants must register with the system ahead of time. You will be able to save your application and continue working on it before submitting it. BHSB encourages all applicants to test this system well in advance of submitting proposals.

Click [here](#) to access BHSB's online application portal, or copy and paste the following URL into your browser:

<https://www.grantinterface.com/Home/Logon?urlkey=bhsbaltimore>

All proposals must be received no later than **5:00 pm EST on June 1, 2026**.

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 at Procurements@BHSBaltimore.org.

Proposals submitted after the due date/time cannot be considered.

4. Authorized Contact

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

Ashley Coston, Procurement Lead

Email: Procurements@BHSBaltimore.org

6. Anticipated Service Term: July 1, 2026 – June 30, 2026, with options to renew annually pending availability of funding and performance.

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.

RFP Postponement/Cancellation

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

Applicant Appeal Process

Applications must be complete and fully responsive to the below Proposal Narrative Outline and must include all required appendices. Applicants may file an appeal within five days of notification of non-selection. BHSB will not review new proposal materials that were not included in the application. BHSB will review the appeal letter and respond to the non-selected applicant within ten working days of receipt of the appeal.

FORMAT AND CONTENT OF PROPOSAL

Proposal Instructions

- Applications must be submitted through BHSB's [online portal](https://www.grantinterface.com/Home/Logon?urlkey=bhsbaltimore): <https://www.grantinterface.com/Home/Logon?urlkey=bhsbaltimore>. We recommend you start your application early.

Late proposals will not be accepted.

- Generative artificial intelligence (AI) tools are becoming increasingly prevalent. While AI is a helpful tool, it is important to ensure that proposals reflect authentic responses and realistic service delivery plans.
- It is the policy of BHSB to adhere to the rules and regulations in the Health Insurance Portability and Accountability Act (HIPAA), which require appropriate safeguards to protect the confidentiality, integrity, and security of all protected health information. No proposals submitted in response to this RFP should include individually identifiable health information.

For more information, please refer 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>.

Proposal Narrative Outline and Rating Criteria

Applicants must respond to the questions below and submit all documents listed in the Required Documents section. The following outline describes the information requested and the assigned possible point values for each question.

- 1.** This project will award a total of 3.0 full-time equivalent (FTE) clinicians. If selected through this RFP, what is your preferred number of FTEs? What is the minimum you would accept? What is the maximum? **(Unscored)**
- 2. Organizational Background and Capacity**
 - a. Provide an overview of your organization, including its history, mission, and overall purpose. **(5 points)**
 - b. Describe your organization's history and experience working with the focus population, including the length of time delivering services to children and families. **(5 points)**
- 3. Principles and Values**
 - a. Describe your organization's commitment to a trauma-informed and responsive approach and any trauma-specific interventions your organization currently offers and/or would implement if awarded this grant. **(15 points)**

4. Service Delivery

- a. Describe your organization's ability to effectively implement services that meet the needs of each person served, taking into consideration family, community, and regional differences. How will you maintain a high level of quality and person-centered care? **(15 points)**
- b. Describe your approach to collaborating with Head Start programs and Early Childhood Centers to engage families, support child development, and ensure children are academically, socially, and emotionally prepared for a successful transition into kindergarten. **(15 points)**
- c. Describe how your organization will collaborate with other community-based organizations in Baltimore City to identify and engage individuals in need of services and ensure that all individuals referred will, with consent, be linked to and/or receive needed services. **(15 points)**

5. Staffing Plan

- a. Describe your proposed staffing pattern, including supervisors, and how it will fulfill the staffing requirements in this RFP. Include an organizational chart that shows how this program will fit into your organization's overall structure. **(5 points)**
- b. Describe your proposed training plan for staff assigned to this program and indicate any relevant expertise, training, and/or skills staff already possess. **(5 points)**

6. Effectively Serving the Focus Population

- a. Describe how your organization is uniquely qualified to address the needs of each person served through this project. How will you take into consideration individual, family, and community differences experienced by the focus population? **(5 points)**

7. Program Evaluation and Quality Assurance

- a. Describe how your organization obtains and incorporates feedback from people served and other stakeholders. How do you use feedback to develop, implement, operationalize, and/or improve program services? **(5 points)**
- b. Describe any previous experience your organization has had implementing similar projects. Were you able to meet all of the programmatic and financial deliverables and reporting requirements? How did you address any quality concerns? **(5 points)**

8. Implementation Timeline

- a. Provide a detailed timeline for implementation that includes all of the activities you have committed to perform in your proposal. Show an outline of all the steps necessary to operationalize this project fully, and

by when each step would be completed. Contracts are expected to start on July 1, 2026. **(5 points)**

9. Required Documents

- Copies of all relevant licenses/certifications, including any licenses issued by the Maryland Department of Health (BHA and OHCQ). BHSB is aware that BHA is experiencing delays with license applications. Please upload a copy of the letter from BHA acknowledging receipt of the application, along with a copy of the most recent license.
- Most recent site visit report from the ASO, Accrediting Organization, and/or the Office of Health Care Quality (OHCQ), including any statements of deficiencies and program improvement plans
- Organizational chart
- Resume or curriculum vitae for individuals/consultants working on this project
- Verification of ability to bill and receive reimbursement from the Administrative Services Organization (ASO) for Maryland Medicaid's public behavioral health system [and/or Maryland Medicaid], which may be one of the following:
 - Medicaid Provider Enrollment Letter or Certificate
 - Medicaid Provider Number/ID Confirmation
 - Medicaid Participation Agreement
- Attach a line-item budget and budget narrative for the first year of work, aligning it with the staffing requirements and proposed activities.
- Most recent final Financial Audit package, including Findings and Management Letter from an independent auditor (preferred) OR a recent unaudited Income Statement **AND** Balance Sheet. If an audit is not available, please upload a statement detailing why.
- Most recent IRS 990 – Return of Organization Exempt from Income Taxes, **OR** if an IRS 990 form is not required to be filed, the most recent Business Tax Return, OR the Schedule C only of the most recent Personal Tax Return. (Please redact any social security numbers on the Schedule C.)
- Completed and signed [Organizational Capacity Assessment](#). (This form is available on BHSB's website. Click on For Providers, select Forms for Providers, then scroll down to Key Information for Contracts.)
- Certificate of Good Standing from the Maryland Department of Assessments and Taxation.
 - The certificate **must be dated within one year** of the RFP submission due date.
 - **Screenshots from the MDAT website will not be accepted.**