

# Announcement of Request for Proposal (RFP) Fiscal Year 2023-2024

**Summary of Project**: Westside Regional Center (WRC) is soliciting proposals for a substance use treatment peer mentoring contracted service.

Posting Date: October 16, 2023

Mental Health Services Act (MHSA) Funds Available: The MHSA, approved by voters in 2004, assists counties and state agencies in providing increased funding, personnel, and other resources to support county mental health programs. The Department of Developmental Services (DDS) has been receiving MHSA funding for regional centers to develop and oversee innovative projects. WRC, in collaboration with Frank D. Lanterman Regional Center, received MHSA funds to improve substance use disorder services for individuals with intellectual/developmental disabilities (I/DD) and mental health concerns. This project is called "Substance Use Delivery Expansion Project" and it aims to: (1) develop an E-learning Certification Program to increase the capacity of providers working with individuals with I/DD who are dually diagnosed with substance use disorders (SUD), and (2) develop a Peer Mentoring Program for individuals dually diagnosed with I/DD and SUD, or at risk for dual diagnosis, to support their immediate needs and facilitate substance recovery, social connections, as well as links to local recovery groups. The second goal, development of a Peer Mentoring Program, is the focus for this RFP and will be achieved by contracting with an individual, a group of individuals, or a not-for-profit agency (501-C3), or a proprietary, for-profit entity. Funds identified in this RFP are solely for activities integral to development and program delivery. For example, administrative component, personnel recruitment, program design development (including screening, intake, individual and program evaluations), staff training, mentor recruitment and training. Funds are not intended to cover 100% of the development costs.

**Location:** WRC and Frank D. Lanterman Regional Center's catchment areas and other adjacent communities.

**Development Timeline:** The program should be ready to provide services no later than June 30, 2024, unless otherwise specified.

**Service Description**: WRC is soliciting proposals for a substance use treatment peer mentoring contracted service to train and support adult individuals with I/DD and SUD, and those who are at risk for dual diagnosis of substance use and mental health conditions, to serve as peer mentors for other clients in substance use recovery. Individuals participating in this program may need support in some or all the following areas: substance abuse prevention and treatment, mental health challenges, anger and aggression management, medication management, health care and access to mental

health/substance use services, and forensic concerns and/or risk of criminal involvement. The agency might offer or arrange comprehensive substance abuse prevention and/or treatment, mental health counseling, trauma-focused therapies, social skill development, competency training, and crisis intervention services. The agency will also develop a peer-delivered outreach program to individuals supported by the regional centers who are in substance use recovery and create linkages between those clients and mentors.

Potential providers must have prior experience/knowledge in the following:

- Supporting individuals with developmental disabilities, mental health, and forensic backgrounds.
- Working with substance abuse prevention and/or treatment.
- Working with the mental health care system.
- CA valid license (i.e., LMFT, LSW, PsyD, PhD, LPC) or at the very least, a certification as a Substance Use Counselor.

A provider must be able to work collaboratively with others in a multi-agency, interdisciplinary configuration (e.g., other regional centers, courts, mental health systems, probation).

# Goals should be individualized to program participants, and possible outcomes may include the following:

- Improved knowledge, attitudes, and coping skills surrounding substance use and harm reduction.
- Reductions or eliminations of substance use.
- Increases in self-efficacy and motivation to change.
- Increases in knowledge and access to local health and recovery support services.
- Development of positive mentee and peer mentor relationships (increased utilization of social/peer support).
- Active implementation of strategies to decrease mental health symptoms identified by the counselor (e.g., depression, anxiety).

**Deadline for Submission:** Proposals must be received at WRC by **December 15th, 2023.** This RFP does not commit WRC to procure or contract for services or support. WRC may elect to fund all, part, or none of the project, depending on funding availability as approved by DDS and the quality of the proposals received.

**MHSA funding will be negotiated.** MHSA funds have been approved by the DDS under WRC's "Substance Use Delivery Expansion Project" for the Peer Mentoring Program and are set as following:

Fiscal Year (FY): 2023-24: up to \$75,000

FY 2024-25: up to \$150,000 FY 2025-26: up to \$150,000

The applicant agency should propose to use funds to bring in consultation for development of the service, and for recruitment of staff and consultants to establish the service.

## The applicant agency:

- Will be required to meet all Title 17 requirements, as applicable to this service model as prescribed by DDS.
- Will provide a plan for recruitment, thorough background check, i.e., Live-scan, pre-service and ongoing training, and provision of consultative support to supported living staff that will best assure that the outcomes of the service and life goals of individuals are met.
- Will provide a plan for security and response to emergencies.
- Will develop a plan for evaluation of service success and quality of life outcomes by an objective third party.
- Must adapt toward individual service recipients and a commitment to have a creative and flexible approach to service, and to modify support to ensure continued stability without requesting additional funding from the regional center.
- Must agree to a minimum of quarterly monitoring by WRC. Families will be evaluated by a separate process and on a more frequent schedule.
- Must keep financial data for 5 years from the date of contract. It is required to keep receipts and cancelled checks for 5 years from the date of contract.
- Must disclose any potential conflicts of interest (Title 17, §54500). Proposals will NOT be accepted from employees of the State of California, employees of the regional center system, or their immediate family members. Eligible applicants may be either a non-profit corporation (501-C3) or proprietary, for-profit entities.

## **Additional Requirements:**

- Development of Program/Service Design: The selected applicant will be required to complete a service design within thirty (30) days of award of the contract.
- Proof of Liability Insurance: The selected applicant will be required to maintain general and professional liability insurance for all work performed on behalf of regional center clients and their families and to name the regional center as an additional insured on all such policies.

**Costs for Proposal Submission:** Applicants responding to the RFP shall bear all costs associated with the development and submission of a proposal.

#### **SUBMISSION INSTRUCTIONS**

Please submit a single PDF file with all information in the same order as listed below:

**Application/Proposal Coversheet –** Attachment A

Table of Contents

Professional Resumes and References - Attachment B

**Statement of Obligation –** Attachment C

Sample Financial Statement - Attachment D

**Budget Summary –** Attachment E

**Mission, Vision, and Value Statements:** Provide any agency MVV statements and how these were developed for your agency.

**Background and Experience:** Summarize education, experience, and knowledge of key personnel in providing services to the target populations. Describe how the documented education, knowledge, and experience will be a good fit for developing this program.

**Development Experience:** Briefly summarize your current and previous development of services and programs. Highlight similarities between current or previous program(s) developed and your proposed program for this RFP.

**Agency Outcomes:** Describe anticipated outcomes of proposed service and how achievement of outcomes will be measured.

**Assessment and Planning:** Briefly describe the planning process. Discuss how individual goals and objectives will be determined and progress measured. Describe the outcomes for each target population involved (e.g., individuals working as mentors as well as those being mentored).

**Administrative/Consultant Roles:** Describe roles of Administrator, additional staff, and proposed involved consultants. Provide qualifications of any certified or licensed staff or consultants. Attach resumes.

**Methods and Procedures:** Applicants will describe the substance use treatment peer mentoring service including how they will address:

- Substance use and mental health treatment needs of participants, as well as therapeutic approaches/modalities to be utilized.
- Education approaches for substance abuse treatment and prevention to prepare program participants to mentor their peers, tools to monitor competencies, and any proposed processes to reimburse mentors for working with mentees.
- Participant motivation issues using incentive systems to promote cooperation and participation in the treatment and educational aspects of the services.
- Entrance/exit criteria for program participants.

**Staff Recruitment and Retention:** Describe your plan to recruit and retain quality staff. Include the following:

- Desired characteristics for all staff positions.
- Health and criminal background screening procedures.
- Initial and ongoing training, including required certifications. Include any specialized training for providing behavior support and crisis intervention to individuals who have potentially dangerous behaviors.
- Discuss what typical staff turnover is for your organization/agency.
- Provide information on salary levels and benefits. Direct care staff must be paid at a set minimum.
- Attach an organization chart that includes this project and maps the supervisory hierarchy.
- Provide job descriptions and qualifications for the primary staff and consultant positions.

**Staffing Schedule:** Provide a sample one-week staffing schedule including the administrative staff, direct support professionals, consultant(s), and program prep time.

**Transportation:** Describe how participants' transportation will be addressed for appointments and program activities.

**Communication:** Describe how participants' diverse communication styles will be addressed (including any translation, interpretation, ASL needs).

**Financial Resources:** Discuss what financial resources you bring to the project (e.g., line of credit, cash, or fluid capital reserves, etc.).

Continuous Quality Improvement (CQI): Describe how the service agency will use data, such as agency outcomes, stakeholder satisfaction, or other existing data (e.g., incident reports, medication logs) to identify service problems pursuant to corrective changes such as revised staff training curriculums, staff training procedures (e.g., supervision, medication management, recruiting, etc.). Providers shall describe the feedback loop by which problem procedures will be identified, corrective through revised practices, and further monitored to measure the effectiveness of those changes in agency practice.

# DS 1891 Applicant/Vendor Disclosure Statement: Complete and include this document:

http://www.dds.ca.gov/Forms/docs/DS1891.pdf

**Formatting Requirements:** All submissions must be emailed to **RFP@WestsideRC.org.** Electronic submissions <u>cannot</u> exceed 15 megabytes per email. Multiple emails per RFP submission can and will be accepted. An email acknowledgement of each submission received will be sent to the applicant.

Attachments/Forms must be type written. Include additional pages as needed, please note that **proposals should be no longer than 10 pages total.** All proposals must be complete, typewritten, collated, and page numbered. Please save and email the attachments/forms as a single PDF file.

The "Application/Proposal Coversheet" (see Attachment – A) must be the first page of the proposal.

The proposal must include a Table of Contents.

As applicable, include appendices for documents, such as resumes, certificates, curricula, schedules, letters of recommendation, letters of support from agencies, consultants expected to provide program services, etc. Those will not be counted towards the maximum 10-page submission.

Fax copies will NOT be accepted.

Submissions will NOT be returned.

Proposals will NOT be accepted after the deadline.

**Inquiries/Requests for Assistance:** Technical assistance is limited to the information on the requirements for preparing the application packet. Applicants are expected to prepare the documentation themselves or retain someone to provide such assistance. If an applicant chooses to retain assistance from another party, the applicant must be able to thoroughly address all sections of the proposal during the interview process and/or demonstrate that the party assisting with the application will have a continuing role in the ongoing operation of the program.

Inquiries Contact: Westside Regional Center

Attn: Aga Spatzier, Wellness Manager

5901 Green Valley Circle, Ste. 320

Culver City, CA 90230 agas@westsiderc.org

## **Timeline requirements:**

- October 16, 2023---Request for proposals release
- November 16, 2023---RFP Zoom orientation meeting (optional)
- **December 15, 2023---**RFP submission deadline
- January 8-12, 2024---Evaluation of proposals by selection committee
- January 22-26, 2024---Interviews with highest-ranking applicants, if applicable
- January 31, 2024---Notice of selection mailed to applicants
- February 2, 2024---Notification of Project Award posted on WRC website
- March 1, 2024---Contract signed

An RFP orientation meeting will be held on Thursday, November 16th, 2023, at 11:00 a.m. via Zoom. Please submit questions about the RFP to <a href="mailto:agas@westsiderc.org">agas@westsiderc.org</a> prior to the orientation meeting.

Register in advance for Peer Mentoring Program RFP Orientation.

After registering, you will receive a confirmation email with information about joining the meeting.

## APPLICATION/PROPOSAL COVERSHEET

Name of Applicant or Organization Submitting Proposal							
Name of parent corporation, if applicable							
	1						
Annlicant's m	ailing address						
Applicants in	alling address						
Contact perso	on for project						
Contact phon	e number	Contact fax number		Conta	ct e-mail addr	ess	
Author of pro	posal or consulta	ınt assisting with propos	al		Author/cons	sultant ph	one number
	List all Regio	nal Centers with which y	ou have	vendore	ed programs (	or service	19
Reg. Center		Program/Service			rogram/Servi		Vendor Number
<u> </u>							
	List all Regiona	al Centers with which vo	u have r	rograms	s/services in o	<u>devel</u> opm	ent
Reg. Center	List all Regional Centers with which you have programs/services in development  Type of Program/Service in Development  Service Start Date						
Application submitted by:							
Cignotive (names report he puthorized to hind approximation)					Date		
Signature (person must be authorized to bind organization)  Date							

## PROFESSIONAL RESUMES AND REFERENCES

Name of Applicant/Organ	nization:						
Submit a professional res who will be administrator,		ants identified or referenced in application, including individuals					
List all staff and/or consultants for whom a resume is attached							
Na	ame	Job Title/Type of Consultant					
qualifications, experience	and ability to implement this	ncy affiliation, who can be contacted in regard to applicant's proposal. References must be professional in nature. References l/or applicant's family members are excluded from consideration.					
Name:		Phone:					
<u> </u>							
Name:		Phone:					
Job Title:							
Agency Affiliation:							
Name:		Phone:					
Agency Affiliation:							

## STATEMENT OF OBLIGATION

obligation. Do not include services you propose to provide through the	
Describe other professional/business obligations held by the License	
Action Plan (CAP), sanction, notice of immediate danger, or an "A" of other citation from a regional center or state licensing agency.  [ ] No [ ] Yes	
The applicant or member of the applicant's organization or staff has a from any agency for abuse (verbal, physical, sexual fiduciary, neglecting [ ] No [ ] Yes  If yes, explain in detail.	
The applicant is planning to expand existing services (with or without source other than Westside Regional Center during Fiscal Year 2023 year 2024/2025.  [ ] No [ ] Yes  If yes, indicate funding source and scope of grant project.	
The applicant is currently receiving or planning to apply for grants/fur to develop social service programs.  [ ] No [ ] Yes  If yes, indicate name, location, type and capacity of service(s).	nds from any source
The applicant is presently providing social services to regional center other members of the community.  [ ] No [ ] Yes  If yes, indicate name, location, type and capacity of service(s).	consumers or
	[ ] No [ ] Yes  If yes, indicate name, location, type and capacity of service(s).  The applicant is currently receiving or planning to apply for grants/fur to develop social service programs.  [ ] No [ ] Yes  If yes, indicate name, location, type and capacity of service(s).  The applicant is planning to expand existing services (with or without source other than Westside Regional Center during Fiscal Year 2023 year 2024/2025.  [ ] No [ ] Yes  If yes, indicate funding source and scope of grant project.  The applicant or member of the applicant's organization or staff has a from any agency for abuse (verbal, physical, sexual fiduciary, neglecting light yes, explain in detail.  The applicant or any member of the applicant's organization received Action Plan (CAP), sanction, notice of immediate danger, or an "A" of other citation from a regional center or state licensing agency.  [ ] No [ ] Yes  If yes, explain in detail.  Describe other professional/business obligations held by the License Administrator, including name, location, type, and capacity (time company).

#### SAMPLE FINANCIAL STATEMENT

#### 1. CURRENT ASSETS:

Cash in banks

Accounts receivable

Notes receivable

Equipment/vehicles

Inventories

Deposits/prepaid expenses

Life insurance (cash value)

Investment securities (stocks and bonds)

### 2. FIXED ASSETS:

Buildings and/or structures

Real estate holdings

Long-term investments

Potential judgments and liens

### 3. CURRENT LIABILITIES:

Accounts payable

Notes payable (current portion)

Taxes payable

### 4. LONG-TERM LIABILITIES:

Notes/contracts

Real estate mortgages

### 5. OTHER INCOME

Wages/revenues or other sources

## 6. LINE OF CREDIT

Amount available (specify)

## **BUDGET SUMMARY**

Ν	ame of Applica	nt/Organization:			

Submit budget projections using estimates that are both reasonable and realistic uses of funds.

	Care and Services	Start-up Expense	Ongoing Monthly
1.	Food		
2.	Household Supplies		
3.	Personal Supplies		
4.	Program Equip/Recreation		
5.	Total Board & Supply (add lines 1-4)		
	Physical Plant	Start-up Expense	Ongoing Monthly
6.	Lease/Insurance (3 months lease)		
7.	Utilities (gas, electric, water, phone/media)		
8.	Vehicle Lease		
9.	Vehicle Maintenance/Gas/Insurance		
10.	Furnishings/Maintenance		
11.	Total Physical Plant (add Lines 6-10)		
	General Administration	Start-up Expense	Ongoing Monthly
12.	Admin Overhead		
13.	Office Supplies/Equipment/phone		
14.	Insurance(s)		
15.	Other-CCL fees		
16.	Staff recruitment		
17.	Training & Staff Development		
18.	Total Gen. Administration (add lines 12-17)		
	Staffing	Start-up Expense	Ongoing Monthly
19.	Salary – Administrator		
20.	Direct Staffing		
21.	Program Consultants		
22.	Employee Benefits		
23.	Payroll Taxes		
24.	Worker's Compensation		
25.	Total Staffing Expenses (add lines 19-24)		
26.	Total Start-up Expenses (add lines 5,11,18 & 25)	\$	
27.	Total Mo. Rate Per Person (divide Line 26 by 4)		\$