



Technical Assistance Center for Children's Behavioral Health Providers

Request for Proposals

Grant Procurements

(On-Line Submission Required)

February 2024

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1. Introduction and Background

The continuum of children’s behavioral health services in New York State (NYS) is rapidly evolving and expanding to serve the diverse needs of children and their families/caregivers. The entire array of behavioral health services licensed, funded, or designated by the NYS Office of Mental Health and the Office of Addiction and Support Services is in a constant state of change and growth. Services and programs for children and their families, such as youth and family peer support, outpatient clinical services, residential treatment, and other home and community-based services and supports are transforming, keeping pace with broader healthcare system changes and reforms.

In this current environment, it is imperative that providers be positioned to adapt to rapidly shifting care delivery models and payment structures while preserving and growing a skilled and knowledgeable behavioral health workforce. The New York State Office of Mental Health (OMH), in partnership with the Office of Addiction and Support Services (OASAS), is committed to supporting providers in these efforts. The goals of this Request for Proposals (RFP) are to:

- Establish a baseline of best practice and clinical acumen in children’s behavioral health services,
- Promote and grow the availability of evidence-based practices grounded in research and science,
- Explore opportunities for the expansion of innovative interventions to meet the individual and diverse needs of children and their families,
- Ensure effective, quality of care and demonstrate positive outcomes based on interventions provided to fidelity.

1.1 Purpose of the Request for Proposal

The field of healthcare is changing rapidly in an effort to achieve the over-arching goals of efficiency, effectiveness and quality outcomes. To assist children’s behavioral health care providers in being able to evolve and acclimate to the ever-changing health care field, the NYS OMH is issuing this Request for Proposal (RFP) to invite eligible applicants to submit proposals for a dedicated training and technical assistance center. The Center would focus on assisting New York State’s children’s behavioral health providers working across the

service continuum of care to enhance the quality of services within strong organizational and business models.

The awardee will be responsible for developing and implementing training in identified areas of focus, as well as providing targeted technical assistance to New York State's children's behavioral health providers with the goal of:

- Expand the quality of care for children and youth and their families/caregivers by advancing the competencies and skills of the children's behavioral health workforce,
- Increasing the availability of evidence-based practices provided by children's behavioral health agencies for children with mental health and substance use needs and their families,
- Grow capacity for innovative interventions to address individualized needs and diverse communities to ensure access to effective and quality services,
- Expanding, recruiting and retaining a qualified Family and Youth Peer workforce that will be well equipped to support youth and families receiving children's behavioral health services.

Anticipated outcomes will result in a:

- Robust children's behavioral health network of providers with a skilled workforce,
- Children's behavioral health system that will offer quality services through evidence-based approaches to care,
- Increase in culturally responsive and competent practices,
- Increase in positive outcomes in mental health and wellness for children and their families, reducing the needs for higher level of care and use of restrictive settings,
- High quality peer workforce that can serve the diverse and unique behavioral health needs of children and their families/caregivers.

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 1
New York State Office of Mental Health
Contracts and Claims
44 Holland Avenue, 7th Floor
Albany, NY 12229
Jeremy.rossello@omh.ny.gov

2.2 Key Events/Timeline

RFP Release Date	2/13/2024
Questions Due	3/05/2024
Questions and Answers Posted on Website	3/26/2024
Proposals Due by 3:00 PM EST*	4/16/2024
Anticipated Award Notification	5/10/2024
Anticipated Contract Start Date	7/1/2024

*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.

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 must be:

- a non-for-profit 501c(3) and/or academic institution,
- currently do business and located in New York State, and

- have the capacity to provide trainings on a statewide basis.

Eligible bidders must also have:

- Experience and proficiency in conducting statewide training and providing technical assistance through in person and remote means, using the necessary technology to reach a wide breath of audiences and stakeholders,
- An established learning management system to promote, conduct and track provided education and training sessions, along with those registered and participating,
- An understanding in the field of healthcare in NYS, as well as children’s mental health and substance use systems of care.

Applicants may subcontract with content experts for specific deliverables. Content experts must be:

- NYS OMH Funded and/or designated family-run, youth-run, peer support organizations, **or**
- Not-for-profit providers who are licensed, designated, authorized or funded by the NYS OMH for the provision of children’s behavioral healthcare services, **or**
- NYS Children’s behavioral health advocacy and/or member agencies who have knowledge and expertise of the children’s behavioral health system of care, **or**
- Academic experts in the areas of children’s behavioral health treatment, services and evidence-based interventions, or
- Entities who have authority to train and issue certifications in recognized evidence-based practices, including proprietary evidence-based practices.

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.

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 jeremy.rossello@omh.ny.gov by 2:00 PM EST on the “Questions Due”

date indicated in section 2.3 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.

The questions and official answers will be posted on the OMH website by 3/16/2024.

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 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, 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 2.10, by the proposal due date of 2:00 PM EST on 4/16/2024.

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 4/16/24 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: 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 grantsreform@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 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 5-10 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.

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
- 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 and applicant whose conduct 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 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;
- 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. Selected applicants awarded a contract under this RFP will be required to adhere to all terms and conditions in OMH's Master Grant Contract.

OMH reserves the right to change the contract term for the first year so that it is more or less than 12 months in order to align the contract dates with OMH's contract cycle (NYC Providers - July 1 through June 30; Rest of State Providers – January 1 through December 31).

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 (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:

- a. If an award recipient fails to submit a MWBE Utilization Plan;
- b. If an award recipient fails to submit a written remedy to a notice of deficiency;
- c. If an award recipient fails to submit a request for waiver; or,
- d. 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 sub-contractors 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-I 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 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.

3.10 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 2.11 of this RFP.

3.11 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 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.

3.12 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.

The Evaluation will apply points in the following categories as defined in Section 6:

Technical Evaluation	Points
1) Experience and Organizational Structure	10 points
2) Advancing Core Competencies and Skills of the Behavioral Health Workforce	15 points
3) Evidence-Based Practice (EBP) Training and Certification	20 points total
a) Proprietary EBP Models of Care	• 10 pts.
b) Community-Defined Practices	• 10 pts.
4) NYS Model Implementation	10 pts.
5) Expanding and Supporting the Family and Youth Peer Workforce	15 points
6) Diversity, Equity and Inclusion and Persons with Lived Experience	10 points
7) Financial Assessment	20 points
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 criteria are met. A complete proposal shall include all required components as described in Section 2.10. 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 Evidence Based Practice Training and Certification (Section 6.2) of the Proposal Narrative will be ranked higher.

4.3 Process for Awarding Contracts

4.3.1 Initial Awards and Allocations

Proposals will be ranked, and one award made to the applicant with the highest score to assume the operation of the **Technical Assistance Center for Children's Behavioral Health Providers**.

4.3.2 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 contract deliverables, failure to complete and submit reports on required timeframe, failure to be responsive to and complete required or requested tasks within the scope of the contract, 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.

4.4 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 Purpose

The purpose of the **Technical Assistance Center for Children's Behavioral Health Providers** RFP is to create a dedicated training and technical assistance center focused on assisting New York State's children's behavioral health providers working across the service continuum of care to strengthen the skills and knowledge of mental health staff and increase access to evidenced based practices. By enhancing the quality of services, the Center can help to increase positive outcomes for children and families.

As the Technical Assistance Center for Children's Behavioral Health Providers, the awardee would be expected to coordinate and collaborate with other OMH funded or designated training entities, including but not limited to the Evidence Based Treatment Dissemination Center (EBTDC), the Managed Care Technical Assistance Center (MCTAC), the Center for Practice Innovation (CPI) and the ACT Institute (AI).

The awardee must have an established Learning Management System (LMS) that can be accessible to individuals outside of the organization. The LMS must have the capacity to maintain, and archive provided webinars and trainings that can be accessed by providers at a later date. The LMS must have the capacity to easily search for archived trainings in an organized and structured way. Further, the awardee must have the ability to award continuing education credits across all appropriate and relevant categories of professional (i.e., licensed practitioners) and paraprofessional staff (i.e., credentialed peers) free of charge for the behavioral health care workforce.

5.2 Goals and Objectives – Awardee Responsibilities

Goal 1: Advancing the competencies and skills of the children’s behavioral health workforce and supporting program technical assistance and quality improvement.

A focus on enhancing the quality of care for youth and their families/caregivers across the children’s service continuum by advancing the competencies and skills of the children’s behavioral health workforce and supporting a provider’s ability to retain this skilled workforce is critical to a robust and effective care.

Objective 1: Promoting the skills and competencies of the behavioral health workforce

Using a multi-modal approach, the awardee will assist the children’s behavioral health workforce across the service continuum to advance their skills and competencies to serve an ever-expanding population. The awardee will provide information, technical assistance, and training on systems, services, and treatment strategies for achieving positive outcomes for youth with behavioral health needs and their families. This includes, but is not limited to, a collection of resources and materials designed to expand and support the use of best practices for both behavioral health providers and the children/youth and families they work with.

The awardee will be responsible for either directly developing and implementing training in each of the identified topic areas or contracting with experts to provide the training directly and serving as a moderator for the training sessions. Trainings will adapt to the needs of the system to enhance learning and engagement; the awardee will continually monitor participant feedback and elicit input from a variety of sources to inform training needs and modalities.

The awardee will provide targeted support and technical assistance to various services and programs for service delivery in a variety of settings from community based to residential care; subsequently, service delivery strategies may have various approaches depending on the context of care. Further, the trainings will need to be applicable to a broad array of staff, including administrative leadership, supervisory, clinical and direct care in the mental health and behavioral health continuums of care.

The awardee will develop and deliver trainings to the administrators and supervisors of the children's behavioral health workforce that includes, but not limited to, such topics as:

- Leadership development, including creating supportive organizational cultures
- Best practice approaches and emerging research-based interventions to inform agency training and staff competencies
- Models of supervision
- Enhancement of supervisor skills and competencies,
- Professional development of supervisees,
- Supporting staff self-care and addressing staff burnout
- Topical content, as directed, on current and emerging trends

The awardee will develop and deliver trainings, both one-time offerings and intensive learning collaboratives, to clinical and direct care staff of the children's behavioral health workforce that includes, but not limited to, such topics as:

- Core Competencies in Assessment and Evaluation, Treatment and Clinical Care
- Integration of Behavioral Healthcare for Co-occurring Disorders
- Skills and Scope for Rehabilitative Services and Direct Support Personnel
- Coordinated and collaborative approach to care, including through improving systems literacy
- Trauma and Resiliency
- Diversity, Inclusion, Equity and Belonging (across all domains including race, class, gender/sex/sexuality, disability, religion, etc.)
- Youth & Family Engagement/Family Driven & Youth Guided Care

Additional topics may arise as requested based on agency policy directives, current events and/or program development or redesign. The awardee will assist the State in achieving policy and program goals that require training and technical assistance to behavioral health provider agencies.

Objective 2: Supporting and Collaborating with Behavioral Health Agencies Through Targeted Discussions and Technical Assistance

Often, the State determines it necessary to explore the functions of specific services or program areas in order to help improve service delivery or contribute to the fiscal or operational viability of an agency. These activities may include convening a workgroup to discuss regulatory barriers to care, review of productivity and service utilization to maximize viability, helping to facilitate a change in practice based on a shift in policy or program design, or similar exercises.

The awardee will work with OMH and use its technological and outreach capacity to work to host and convene identified topic-specific in-person and/or virtual meetings or forums with providers and/or stakeholders to address needed activities. The awardee will also work with OMH and targeted providers to undertake more in-depth focused studies on programs and topics identified by the State, as requested. The awardee will develop summary reports of findings, feedback, data collected, and recommendations based on the study undertaken.

Goal 2: Implementing Evidence-Based Practice Models for Children's Behavioral Health Care Providers

The ability to maintain a skilled behavioral health workforce is inextricably linked to providing opportunities for professional development and the provision of promising evidence-based practices (EBPs) that ensure effective services and enhance quality of care. Children's behavioral health providers, under the oversight and monitoring of the OMH and OASAS, will benefit from having greater access to training on implementing promising and evidence-based models of treatment so they can offer effective care delivery models to a wider variety of youth and families who present with complex challenges and needs.

Objective 1: Evidence-Based Models of Care

The awardee will implement and manage the statewide structure to disseminate information about and support the training of nationally recognized EBPs targeting children and families provided by authorized proprietary entities who offer certifications to providers. The OMH, in partnership with OASAS, will direct the awardee on chosen EBPs and targeted providers, which will include:

- NYS EBP-authorized Children and Family Treatment and

Support Services (CFTSS) designated providers authorized to serve the foster care, mental health and substance use populations;

- OMH licensed, designated and/or funded providers, across outpatient and residential systems; and
- OASAS identified adolescent-serving endorsed providers.

While NYS' children's behavioral health system is robust, the use of age and developmentally appropriate diagnostic evidence-based practices (EBP's) is not widespread. The awardee will improve access to EBP's through a comprehensive statewide training and technical assistance effort. The awardee will be responsible for the:

- Implementation of evidence-based practices in the children's public behavioral health system, including training and technical assistance, data management and evaluation,
- Implementation of evidence-based assessment and diagnostic practices, including case conceptualization

The awardee will create/collate and maintain information on EBPs, including those related to assessment and diagnostic practices, across ages, target populations, research evidence, and other considerations for the children's public behavioral health system to increase knowledge of EBPs. The awardee will collaborate with other entities at the direction of OMH, including but not limited to the Center for Practice Innovations and the Evidence-Based Training and Dissemination Center, including to jointly brand and release information as appropriate.

The awardee will provide access to State-chosen EBPs by contracting with authorized proprietary EBP training entities. The awardee will help to schedule and coordinate trainings statewide for targeted State authorized behavioral health providers. The awardee will create mechanisms to collect data specific to EBP training, implementation, and performance and share data in full (non-aggregate) with the State. The data will be analyzed and supplied to the State to track and monitor quality and outcome metrics on a routine basis, as determined by the State, to inform future implementation efforts. The awardee will work with the State on any publications, presentations, or other products resulting from the data.

The awardee will serve as the conduit between NYS, EBP proprietary organizations, and provider agencies. This includes the tracking of

training implementation, provider attendance and overall model compliance.

Objective 2: Community-Defined Practices

The awardee will create and maintain an a portfolio of work that supports the research and piloting of promising and community defined emerging practices addressing areas of need in children’s mental health. The awardee will create and maintain information on CDPs across ages, target populations, research evidence, and other considerations for the children’s public behavioral health system to increase knowledge of CDPs.

NYS recognizes that while formal EBPs have been studied academically or clinically, proved successful, and replicated by more than one investigation or review, there is value in researching and support emerging practices. By investing in emerging or promising practices, NYS opens the door to grassroot opportunities and practices that may reflect the unique needs associated with specific communities, cultural groups, or current social challenges impacting the mental health of New Yorkers. OMH is committed to exploring and supporting models that are inspired by local communities, demonstrate a positive impact, and display opportunity for growth. The awardee will work to identify practices, expand evaluation studies, and use collected data to demonstrate impact and outcomes. Evaluation studies may target specific programs, communities, or areas of need depending on the practice and associated activities.

The awardee will create mechanisms to collect data specific to model training, implementation, and performance and share data in full with the State. The awardee will work with the State to review/support development of all tools and data collection approaches. The data will be analyzed and supplied to the State in full (non-aggregate) to track and monitor quality and outcome metrics on a routine basis, as determined by the State, to inform future implementation efforts. The awardee will work with the State on any publications, presentations, or other products resulting from the data.

The awardee will also facilitate a stakeholder group to understand the practices currently utilized and found to produce promising outcomes. The stakeholder group should consist of a variety of individuals with expertise in research-based practices, cultural and community-driven interventions, and the children’s mental health system, including, as

appropriate, youth and families. This research and feedback will be analyzed by the awardee to inform potential pilot projects.

Goal 3: NYS OMH Model - Youth Assertive Community Treatment (ACT)

To avoid the use of institutional settings and to facilitate a successful transition back to community, OMH is implementing a statewide rollout of a Youth ACT model. While ACT is a well-established evidence-based practice for adults, little research has been done on models adapted to meet the needs of children and families. The proposed New York State model will adapt the traditional ACT Model to meet the unique needs of children and families. This adaptation will require a robust technical assistance and evaluation support structure to not only ensure an effective implementation of the approach but also support for a robust continuous quality improvement effort that allows the program to grow and improve over time.

The awardee will provide training and technical assistance to Youth ACT teams across New York State. The awardee will utilize a collaborative Learning Health System framework to support the development of the Youth ACT model, including:

- developing and providing a variety of training to meet the needs of Youth ACT teams, leveraging our web-based and learning management platforms,
- implementation, evaluation, and ongoing continuous quality improvement methods, including the collection of feedback from providers, youth and families, to support the development and refinement of a Youth ACT Model.

The awardee will ensure coordination with the State and develop a process for shared agreement with State leads on all products. Specifically, the awardee will create mechanisms to collect data specific to Youth ACT training, implementation, and performance and share data in full with the State. The data will be analyzed and supplied to the State to track and monitor quality and outcome metrics on a routine basis, as determined by the State, to inform future implementation efforts. The awardee will work with the State on any publications, presentations, or other products resulting from the data.

Goal 4: Expanding and Supporting a Qualified Family and Youth Peer Workforce

Peer support services are an integral component to the provision of high-quality family and youth behavioral health services. As a result, OMH has expanded the availability of peer services in a variety of treatment and program areas to ensure that youth and their families have access to the peer support services they need. OMH is committed to the growth, recruitment and retention of a skilled Family and Youth Peer workforce within the NYS children's behavioral health service continuum through training and credentialing, and quality supervision efforts.

Objective 1: Maintenance of NYS Family and Youth Training and Credentialing

In partnership with peers in New York State, OMH has worked to professionalize the Family and Youth Peer Support disciplines and enable them to be reimbursable under Medicaid, by developing and supporting a training and credentialing process for Family and Youth Peer Advocates who deliver these services to youth and families. This RFP seeks the continuation and enhancement (when applicable and approved by OMH) of the current training and credentialing process for Family and Youth Peer Advocates (Refer to <https://www.ftnys.org/workforce/family-peer-advocate-credential/> and <https://www.ftnys.org/yp-ypa-credential/>)

The Family and Youth Peer Advocate credentials are integral to the future of the children's behavioral health system, wherein peer advocates will be more broadly reimbursable through Medicaid. Therefore, the promotion and growth in availability of the training for the credential is paramount to assuring access to peer services for children and their families. To adequately communicate the role and scope of the peer advocate, use of credentialed and trained family and youth peers as trainers in the NYS Credentialing is critical and inherent in the values of peer support. As a result, the awardee would be required to contract with a NYS family-run and youth-run statewide peer organization to assist in the provision of training and issuance of the Family and Youth Peer Credential.

Objective 2: Ongoing Professional Development and Supervision of the Family and Youth Peer Advocate Workforce

For Family and Youth Peer Support providers to build the capacity to serve an ever-expanding children's behavioral health population they must continually draw in new staff. Finding the best possible FPAs and YPAs who can fit within a provider organization can be both a challenge and an opportunity.

Once hired, keeping qualified FPAs and YPAs on staff requires ongoing professional development in order to ensure success in their role and to meet their needed continuing education credits. Having access to training on the best tools and approaches to providing peer services in various settings, programs and with targeted populations, strengthens the Family and Youth Peer workforce and ensures effective provision of peer services.

Further, OMH is committed to the development of a new wave of supervisors that come directly from within the Family and Youth Peer Support discipline. The outcomes and benefits from this approach are twofold. For newly hired family and youth peers, having supervisors with the personal knowledge and skills of what the job entails is advantageous and combines the support, mentoring, and coaching needed to enhance the quality of their peer work with youth and families. For “seasoned” credentialed Family and Youth Peer Advocates, it creates career pathways for those who wish to foster their professional development into supervisory positions within the discipline.

The awardee will be responsible for developing and implementing training or contracting with experts to provide training on quality youth and family peer services, leadership development, and supervision of the peer workforce. Trainings to include but are not limited to:

- Provision of peer services in community and residential settings
- Family and Youth engagement from a peer perspective
- Scope of Practice of Family and Youth Peer Advocates
- Empowering youth and families for self-sufficiency and direction
- The fostering of supervisor champions for the peer workforce,
- Specialized leadership and supervisory training for Credentialed Family and Youth Peer Advocates who aspire to become supervisors in their respective discipline.

The awardee will be expected to work in collaboration and coordinate with all relevant OMH funded or designated entities that also work in the field of peer support and advocacy, this includes, but not limited to, statewide peer-run organizations, PeerTAC and the NYS Peer Advancement Network.

5.3 Requirements for Reporting, Collaboration, and Deliverables

- The awardee will ensure coordination with the State and develop a workplan for shared agreement with State leads on all products. The workplan will identify the meeting structure, key liaison, timelines for events, data collection and evaluation plans, The workplan will be one of the initial deliverables of this contract.
- The awardee will work in collaboration with OMH staff to support coordination of training, technical assistance, program implementation, and evaluation efforts:
 - The awardee will be required to meet with OMH as requested and respond to scheduling requests in a timely manner. The awardee will be required to appoint an evaluation liaison for each effort as needed (EBP, Youth Act, Peer Training) to coordinate with OPHE on scheduling meetings and adherence to procedures and timelines for awardee data submission to OMH.
 - In collaboration with the State, the awardee will develop a data collection and reporting workplan that includes measurement tools, procedures, and mechanisms for sharing with the State data specific to Youth ACT training, implementation, and performance. The data will be analyzed and supplied to the State to track and monitor quality and outcome metrics on a quarterly basis—or more frequently if required—to inform future implementation efforts.
 - The awardee will be responsible for supporting events that providing mechanism for any evaluation training (e.g., Evaluation expectations, Tableau training) and data presentations with providers in collaboration with OPHE staff.

The awardee will be required to submit quarterly reports to OMH to include:

- A summary of the training sessions (i.e., topics, location, etc.) that were held during the reporting quarter
- Upcoming trainings and offerings for the next quarter
- The number of participants per training session,
- Tracking data on the number of unique providers by county and by region who participated in trainings
- Tracking data on the number of unique providers by State agency licensed programs and program types
- Number of certifications, credentials and continuing education credits issued across training opportunities
- Findings on process undertaken to solicit training needs from children’s behavioral health care providers

- An aggregate report on the analysis of the satisfaction surveys for each training session.
- Outcomes and findings of evaluation activities across deliverables and areas of training
- Additional data and narratives, as requested by OMH and OASAS.

5.4 Operating Funding

One award will be made in the amount of \$ 32,500,000 for the five years. Annual funding for each of the 5 years is \$ 6,500,000 dollars.

6. Proposal Narrative

When submitting proposals for funding under this RFP, the narrative must address all components listed below, in the following order:

6.1 Experience and Organizational Structure

6.1.a. Provide a concise description of the knowledge and experience of the applicant that summarizes its qualifications for conducting trainings and providing technical assistance for children’s behavioral health care providers, including both children’s mental health providers and adolescent-serving substance use providers. The applicant must address their understanding of the challenges facing children’s behavioral health providers and the vast changes within the field of health care impacting the overall children’s mental health and substance use systems of care.

6.1.b. Detail your plan to staff the Training and Technical Assistance Center in order to achieve all goals and objectives outlined. Information provided should clearly delineate the roles and responsibilities of employed personnel, as well as any other contractual or collaborative organizations or individuals. The narrative should include the following:

- An organizational chart and description of organizational structure, lines of supervision, and management oversight for the proposed Center;

- Indication of who is responsible for what day-to-day key tasks, such as providing leadership; communications and promotions; training; data collection, monitoring ongoing progress; and preparing quarterly reports;
- The qualifications, expertise, and relevant experience of key personnel conducting training and providing leadership over the Center, and how they are qualified and knowledgeable in the areas of children’s mental health and substance use.

6.2 Advancing the core competencies and skills of the children’s behavioral health workforce and supporting ongoing program quality improvement

Detail how the applicant would propose to complete the required training topics for the behavioral health care workforce to assure quality outcomes for children and families. Based on Goal 1 and its respective objectives, this section should:

- 6.2.a.** Provide a detailed plan on the proposed trainings to be provided, including, but not limited to, the:
 - type of content to be included in trainings and how trainings will be targeted to various types of personnel and service/program settings
 - mode of delivering the trainings including the ability to flexibly adjust training modes in response to provider feedback
 - logistical elements of providing the trainings, including, but not limited to, registration, tracking participants, etc.
 - qualifications and competencies of the staff member(s) who will be responsible for each aspect of the trainings. If the entity cannot provide any the training directly, describe your plan to identify and contract with experts for those topic areas.
- 6.2.b.** Describe how you plan to identify and assess for ongoing training and/or support needs by program type, including how/who you will engage as stakeholders in guiding content and topics for training and education
- 6.2.c.** Describe your plan to conduct satisfaction and feedback surveys of trainees, collect data and report those findings by program type
- 6.2.d.** Detail your plan for outreach, marketing and promotion of trainings.

6.2.e. Provide a detailed plan for how you will convene providers and/or stakeholder for topic-specific forums or targeted studies

6.3 Evidence-Based Practice Training and Certification

The applicant must outline their plan to manage the delivery of EBP training statewide, in close collaboration with OMH and OASAS, on identified models of treatment by providing a narrative in section on the below:

EBP Models of Care:

6.3.a Detail how you plan to gather, create/collate, and disseminate information on EBPs for the public behavioral health system to allow them to make decisions about pursuing EBP implementation.

6.3.b. Detail how you plan to collaborate and contract with proprietary entities for the provision of EBP training, fidelity monitoring and issuance of certifications to qualified providers,

6.3.c. Detail how you plan to schedule and coordinate trainings statewide with proprietary entities for targeted State authorized behavioral health providers, inclusive of children’s mental health agencies and adolescent substance use service providers,

6.3.d. Detail how you plan to work with entities with authority to credential in proprietary EBPs on the monitoring and oversight of fidelity measure and outcomes for trained providers and plan to share findings with the State,

6.3.e. Describe your plan for evaluation, in collaboration with the proprietary entities and OMH/OASAS, of the EBP approach to training and the effectiveness of the EBP models/interventions,

6.3.f. Describe how and what you will track related to data, outcomes and expenses and report your activities to the State on at least a quarterly basis; describe your approach for demonstrating the training approach is meeting the goals of the initiative.

6.3.g. Describe the process for determining the trainings, supports and resources needed, beyond the trainings provided by the proprietary entities, to support EBP implementation and ongoing maintenance.

Community-Defined Practices

6.3.h. Describe the process you will undertake to research and identify community-defined practices addressing areas of need in children’s mental health; include the individuals and entities you plan to engage in this process and the relevant experience and knowledge in this area,

6.3.i. Describe how information on community-defined practices will be available to the public behavioral health system to allow them to make decisions about pursuing CDP implementation,

6.3.j Describe how you will explore and support models that are community defined evidence practices to meet the diverse and unique needs of local communities,

6.3.k. Describe how you will create and utilize a stakeholder group to inform community defined practices. Outline the planned composition of the group, including relevant characteristics, such as knowledge base, affiliation or representation, diverse characteristics, geographic areas, applicable experience, etc.

6.3.l. Describe how you will conduct evaluation studies (e.g., data source, measures, frequency of collection or reporting), and use collected data to demonstrate impact and outcomes, in collaboration with OMH/OASAS

6.3.m. Describe how you will explore mechanisms to inform and align with complementary evaluation efforts statewide (e.g., Youth ACT)

6.3.n. Describe how you will collaborate with the OMH Office of Population Health and Evaluation in all data collection and evaluation activities.

6.4 NYS Model for Youth Assertive Community Treatment (ACT)

Detail plans for how the applicant will create a targeted training platform for Youth ACT licensed providers where they can receive specialized training and access materials focused on Youth ACT. The narrative should also:

6.4.a Describe your plan to create and offer specialty trainings based on the NYS model of Youth ACT, in collaboration with OMH and the ACT Institute through the Center for Practice Innovation; this should include foundational, role specific and ongoing topic specific trainings, as identified by the teams, OMH and the TA entity to meet the needs of the teams and model. Identify the number of topic specific trainings

6.4.b. Describe what materials, tools, guides, and other

materials you plan to create to educate and share information on and across teams,

6.4.c. Describe your workplan, including type, scope, and frequency, for team-based technical assistance to ensure teams are functioning to required levels of fidelity and quality of care,

6.4.d. Describe your approach to fostering a learning health system for role-specific and cross-site education and information sharing to the teams statewide, including type, scope, and frequency of activities.

6.4.e. Describe how you plan to quantitatively evaluate the effectiveness of the training and technical assistance activities and fidelity of teams to a model, set of core practices, or prototype (i.e., data collections tools, quality of the tool, frequency of data collection, and data sharing and reporting procedures with OMH)

6.4.f. Describe how you will support the evaluation of Youth ACT in partnership with providers and OMH Office of Population Health and Evaluation.

6.5 Expanding and Supporting the Family and Youth Peer Workforce

Detail how the applicant will maintain and enhance (if needed) the Family and Youth Peer Support training and credentialing process, as well as support ongoing training for continuing education and the supervision of peer advocates. The narrative should:

6.5.a. Describe your plan to identify and contract with experts for topic areas in which the applicant is not able to provide the training directly,

6.5.b. Provide a detailed plan on administering all aspects of the current FPA and YPA training which includes online and in-person sessions. Please include the qualifications and competencies of the staff members involved in this aspect of the YPA and FPA training and credentialing,

6.5.c. Provide a detailed plan on administering all aspects of the current FPA and YPA credentialing process. Please include the qualifications and competencies of the staff members involved in this aspect of the YPA and FPA training and credentialing process,

6.5.d. Describe your plan on marketing and promoting the Family and Youth Peer Training and Credentialing process to the FPS and YPS disciplines,

6.5.e Submit a detailed plan for the development and implementation of a supervisory training specifically for Credentialed Family and Youth Peer Advocates to include:

- Content of trainings
- Mode of delivery of training
- Frequency of trainings.

6.5.f. Describe your plan to conduct satisfaction and feedback surveys of trainees, collect and maintain data, and report those findings,

6.5.g. Detail their plan to identify and assess for ongoing training and/or support needs.

6.5.h. Detail your plan for offering trainings which meet the needs of peer workforce development and requirements for continuing education credits.

6.6 Diversity, Equity and Inclusion and Persons with Lived Experience

6.6.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.

6.6.b. Identify the management-level person responsible for coordinating/leading efforts to reduce disparities in access, quality, and treatment outcomes for marginalized populations.

6.6.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.

6.6.d. Provide the diversity, inclusion, equity, cultural and linguistic competence plan for this program (as outlined in the National CLAS Standards). 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.
- 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.

6.6.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).

6.6.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.

6.6.g. Describe program efforts to recruit, hire and retain staff:

- a) from the most prevalent cultural group of service users, and
- b) with lived experience with mental health and receiving mental health services.

6.6.h. Describe efforts to meet the language access needs of the clients 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, the provision of best practice approaches to provide language access services (i.e., phone, video interpretation). 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.

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

6.6.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 stakeholder 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.

6.7 Financial Assessment

- a. The proposal must include a 5-year Budget (Appendix B). \$6,500,000 is available annually. The indirect cost/administrative overhead **rate** is capped 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.
- b. Describe how your agency manages its operating budget. Also, applicants must complete a Budget Narrative (Appendix B1) which should include the following:
 1. detailed expense components that make up the total operating expenses;
 2. the calculation or logic that supports the budgeted value of each category; and,
 3. description of how salaries are adequate to attract and

retain qualified employees.