
REQUEST FOR PROPOSALS (RFP)

EXPANDING BUPRENORPHINE OUTREACH TO PEOPLE EXPERIENCING HOMELESSNESS WITH OPIOID USE DISORDER

ISSUE DATE: SEPTEMBER 13, 2021

APPLICATION DUE DATE: OCTOBER 15, 2021

REPLY TO: JLEE@FPHNYC.ORG

RELEASED BY:



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TABLE OF CONTENTS

SECTION I: SUMMARY OF THE REQUESTS FOR PROPOSALS.....	3
SECTION II: SCOPES OF SERVICES.....	6
SECTION III: FORMAT AND CONTENT OF THE PROPOSAL.....	10
SECTION IV: EVALUATION AND AWARD PROCEDURES.....	14
SECTION V: ATTACHMENTS.....	17
ATTACHMENT A: SUBMITTAL FORM	
ATTACHMENT B: APPLICANT ELIGIBILITY QUESTIONNAIRE	
ATTACHMENT C: BUDGET FORM	

LIST OF ACRONYMS

Request for Proposals (RFP)
People Experiencing Homelessness (PEH)
People Who Use Drugs (PWUD)
Opioid Use Disorder (OUD)
Medication for Opioid Use Disorder (MOUD)
Substance Use Disorders (SUD)
Bureau of Alcohol and Drug Use, Prevention, Care and Treatment (BADUPCT)
New York City Department of Health and Mental Hygiene's (DOHMH)
Fund for Public Health in New York City (FPHNYC)
Lesbian, Gay, Bisexual, Transgender, Queer (or Questioning), Intersex, and Asexual (or Allies).
(LGBTQIA+)

SECTION I: SUMMARY OF THE REQUESTS FOR PROPOSALS

This Request for Proposals (RFP) is issued by the Fund for Public Health in New York City (FPHNYC), on behalf of the New York City Department of Health and Mental Hygiene's (DOHMH) Bureau of Alcohol and Drug Use, Prevention, Care and Treatment (BADUPCT) to increase opportunities for rapid access to treatment for opioid use disorder (OUD) for people experiencing homelessness (PEH) through referral to low-threshold, same-day treatment with buprenorphine. FPHNYC and DOHMH will be accepting applications from organizations in New York City that provide outreach to people experiencing homelessness (PEH), including those who are street-based, living in a shelter or temporary housing, or who are unstably housed for referrals to same-day treatment for opioid use disorder (OUD).

1. RFP Timetable

Request for Proposals (RFP) Release	September 13, 2021
Applicants' Conference	September 23, 2021
Deadline for Written Questions	September 28, 2021 at 11:59 p.m. ET
Q&A Posted	October 4, 2021
Proposal Package Due	October 15, 2021 at 11:59 p.m. ET
Expected Funding Notification*	November 1, 2021
Expected Project Start Date*	November 15, 2021

* Funding notification and project start dates are target dates only. FPHNYC may amend the schedule as needed.

2. Applicant Eligibility

Interested and qualified Applicants that can demonstrate their ability to successfully provide the services outlined in this RFP are invited to submit a proposal, provided they meet the following minimum requirements:

- A. Organizations must be a 501(c)(3) nonprofit organization. Eligible institutions may include community and faith-based organizations, community health centers, and colleges/universities.
- B. Applicants must currently provide services within New York City and for all aspects of service required herein.
- C. Applicants must currently conduct outreach to people experiencing homelessness (PEH), including those who are street-based, living in a shelter or temporary housing, or who are unstably housed, and those likely to use drugs.

- D. Applicants must be able to devote time for existing staff to attend initial project trainings and quarterly follow-up meetings about substance use, harm reduction, engaging people around substance use and treatment, same-day and other treatment resources, use of field tools, data collection and reporting.
- E. Applicants must agree to comply with all DOHMH data collection and reporting requirements.
- F. Applicants must agree to attempt to obtain consent from clients for data collection with a tool and protocol provided or approved by DOHMH.

3. Anticipated Funding

FPHNYC and DOHMH will select up to three (3) organizations to connect individuals experiencing homelessness to same-day medication treatment with buprenorphine for OUD using an online platform to connect to a telemedicine provider. It is anticipated that \$38,747 will be awarded per organization for the initial 8-month start-up period. The contract period will begin on November 15, 2021 and all activities must be completed by June 30, 2022. There is strong potential for awards to be extended; any extensions will be contingent upon the following: availability of funds, continued need for services, approval by DOHMH, and satisfactory contractor performance.

The funds available through this RFP come from a grant made by The New York Community Trust.

Payments for the contract term will consist of milestone payments tied to the achievement of deliverables.

4. Applicants' Conference

A virtual information session will be held on September 23, 2021 from 10:00 a.m. to 11:00 a.m. for those interested in applying. While participation in the Applicants' Conference is not mandatory, it is recommended that Applicants utilize this opportunity to ask any questions they may have related to this RFP. Additionally, questions submitted via email prior to the webinar will be discussed. The webinar will also be recorded and posted on FPHNYC's website within 24 hours.

Please register using the following link:

<https://us02web.zoom.us/meeting/register/tZcrcO6prTwiHdIX5K8-dqhpesqQxARml2tM>

After registration, a confirmation email will be sent with information on how to join the session. Participants will have the option to join by computer and/or by telephone.

5. Submissions Instructions

The deadline for submission is Friday, October 15, 2021 by 11:59 p.m. Eastern Standard Time (EST). Proposals must be submitted via email to jlee@fphnyc.org and include the title of the solicitation, "**EXPANDING BUPRENORPHINE OUTREACH**," in the subject line. A complete proposal consists of all requested documents on the Proposal Checklist. Proposals received after the due date and time will not be accepted.

6. RFP Inquiries, Written Questions and Answers

Questions and requests for clarification about this RFP must be submitted via e-mail to jlee@fphnyc.org with a subject line of “**EXPANDING BUPRENORPHINE OUTREACH.**” All such questions and inquiries must be received on Monday, October 11, 20212021 by 11:59 p.m. EDT. Any questions received after the deadline may not be answered.

The Q&A will be posted at: <https://www.fphnyc.org/get-involved/rfps/>.

Applicants are encouraged to check the webpage frequently to stay informed throughout the procurement process.

SECTION II: SCOPES OF SERVICES

1. Overview

There is a high prevalence of substance use-related mortality, including opioid overdose deaths, among people experiencing homelessness (PEH). Drug-related deaths were the leading cause of death among homeless men in New York City for the past three years, and among homeless women for the past five years. Potential risk has been exacerbated by the COVID-19 emergency, including from disruptions to support systems and additional barriers to engaging people in treatment.

Opioid overdose deaths are preventable. A critical strategy is increasing access to effective treatment. Buprenorphine, a safe medication for opioid use disorder (MOUD) available by prescription, is a recommended treatment for opioid use disorder (OUD) in homeless populations but is currently highly underutilized. It is a particularly well-suited tool for rapid engagement of PEH.

This initiative will address OUD among PEH in NYC by facilitating the engagement of PEH in same-day, evidence-based treatment for OUD with buprenorphine to increase opportunities to connect people to treatment, including via telemedicine. This initiative is expected to increase connection to care, and potentially contribute to a reduction in opioid-related morbidity and mortality.

2. Project Goals and Objectives

The goal of this funding is to support New York City organizations that outreach and provide services to PEH to strengthen the organization's capacity to provide low-threshold engagement and connection to designated providers for same-day buprenorphine treatment of OUD. Funding will be used to support time for planning, training, and implementation of enhanced engagement of people who use drugs (PWUD) in conversations about their substance use and treatment options, and to facilitate referrals to appropriate same-day treatment options, particularly for buprenorphine for OUD.

Contracted organizations' existing outreach teams will be provided training, tablets (to make initial contact with telemedicine provider while in the field with a client, as well as to collect data), and cell phones (to distribute to participating clients for contact with telemedicine provider). Telemedicine provider will assess the client over the phone, provide buprenorphine prescription(s) as appropriate, coordinate prescription pickup for client, and connect patient to maintenance clinic for follow-up care.

The initiative will examine outcomes including PEH engaged in conversations about opioid use and treatment, those who are successfully connected to the initial consultation for buprenorphine, those who continue treatment after the initial consultation and other ancillary measures.

3. Project Scope of Work

The organizations contracted under this RFP will be responsible for the following activities:

Planning

During the project planning period, selected organizations will be expected to:

- A. Identify a staff member to serve as project lead. This individual's responsibilities will include serving as the main point of contact for communication with FPHNYC and DOHMH, overseeing and submitting deliverables, and liaising with outreach teams to identify and address (with the support of DOHMH) programmatic challenges.
- B. Identify outreach teams that will participate in this initiative
- C. Participate in project kickoff and planning meetings with DOHMH
- D. Coordinate with DOHMH to schedule training sessions for outreach teams
- E. Purchase supplies and other items needed for program implementation

Training

Selected organization will be expected to participate in the following:

- F. Facilitate participation of street outreach teams and other relevant staff in DOHMH-led training on engaging in conversations about opioid use and connecting PEH with providers. The goal is to leverage the relationships developed by outreach teams and service providers to connect people to treatment.
- G. Facilitate participation of street outreach teams and other relevant staff in DOHMH-led training about data collection, tablet and cell phone usage, and cell phone distribution.
- H. Facilitate participation of project supervisors in an additional two-hour training session as needed.
- I. Facilitate participation of street outreach teams and other relevant staff in quarterly refresher sessions (1-2 hours per session).

Program Implementation

During project implementation, selected organizations will:

- J. Provide trained outreach teams to identify and engage PEH who are interested in starting buprenorphine treatment. Outreach teams will explain the program, determine client's interest, and perform a brief, focused intake including consent.
- K. Transmit intake information to a designated treatment provider. Selected organizations will not be responsible for partnering with treatment providers. The DOHMH will connect selected organizations with treatment providers.
- L. Provide a smartphone if a PEH client needs one and facilitate initial contact by telephone with the treatment provider. In the initial call, the PEH client will be scheduled for an appointment within 24 hours or less whereby they will receive a callback for a telemedicine session with the buprenorphine medical provider. The consult will last approximately 15 minutes. Outreach staff will not be required to remain with the client during this time but may provide support within their capacity and usual protocols.
- M. Distribute the following as appropriate:
 - Hygiene packs for people with pending telemedicine consult. These may include socks, soap, toothcare items, comb, or other personal care items.
 - Comfort packs for people who may experience opioid withdrawal while telemedicine consultation is pending. These may include snacks, water, over-the-counter medications for symptom relief of opioid withdrawal, other items.
 - MetroCards for travel to pharmacy for prescriptions and travel Follow-up treatment provider.
- N. Provide usual level of follow up, navigation, and case management of clients referred for treatment.

Data Collection and Reporting

For data collection and reporting, selected organizations will be expected to:

- O. Collect data on client demographics, engagement, and services provided, including number of clients engaged in conversations about substance use and/or treatment, reporting interest in treatment, and linked to relevant care, such as linkages to same-day treatment providers.
- P. Enter collected data into an external data reporting and management system provided by DOHMH.
- Q. Submit monthly narrative reports that provide updates on progress, including: accomplishments, lessons learned, and barriers to program delivery.
- R. Participate in evaluation activities (i.e. interviews with staff regarding the initiative) led by DOHMH.

4. Use of Funds

It is expected that selected organizations will utilize the devices, supplies, and materials listed below in program delivery. These items may be purchased directly with funds awarded or provided by the organization.

- Tablets for outreach teams with Wi-Fi capability and a mobile data plan including internet for one year.
- Smartphone for clients without phone access. Smartphone must have at least 3 months of paid cell service including talk, text and at least 4 GB of data per month.
- Hygiene packs for people with pending telemedicine consultations. This may include socks, soap, toothcare items, comb, and other related items.
- Comfort packs for people who may experience opioid withdrawal while telemedicine consultation is pending. This may include snacks, water, over-the-counter medications for symptom relief of opioid withdrawal, and other related items.
- MetroCards for return travel to pharmacy and return travel to initial visit with maintenance treatment provider after stabilization with the same day telemedicine prescriber. Please budget for fourteen trips per week.

Funds may also be used for project staff salaries, data collection, additional supplies, and other direct project-related expenses. Funds may not be used to provide medical treatment.

5. Additional Support

In addition to funding, DOHMH will support project planning and implementation as described below. Additional support may be developed in response to needs identified by participating organizations.

- A. Linkages to treatment providers
DOHMH will identify providers for same-day treatment for OUD and treatment for other SUDs and mechanisms to connect with these providers.
- B. Staff training
DOHMH will provide initial training and periodic enhancement training for outreach staff and supervisors to provide knowledge and skills to engage and connect clients to treatment for OUD. Topics will include OUD and other substance use disorders (SUDs), harm reduction,

strategies for discussion of substance use and treatment, use of project tools connecting clients to same-day buprenorphine treatment resources, and data collection and reporting.

C. Field Tools

DOHMH will provide access to web-based platforms for data collection and connection to same-day treatment providers.

D. Technical assistance

DOHMH will provide technical assistance for planning, implementation, and ongoing support as needed.

E. Data

DOHMH will provide data on which neighborhoods in NYC have the highest rates of overdose mortality to help organizations target outreach efforts.

SECTION III: FORMAT AND CONTENT OF THE PROPOSAL

The items contained in this section must be included in the applicant's proposal to meet the minimum requirements for evaluation. The sections must be in the order described and written in a straightforward and concise manner. Proposals will be evaluated based on their content, not length.

Applicants must carefully examine all requirements stipulated in this RFP and respond to each requirement in their proposal.

A. Proposal Format Requirements

- Application narrative should be single-spaced.
- Applications should have 1" margins all around (headers and footers may appear outside of this margin).
- Suggested minimum font size is Times New Roman 12-point except for any included supportive charts, which may use a font no smaller than 10-point.
- Each page of the application narrative should be consecutively numbered and adhere to page limits.
- Application narrative should remain in the same sequence and format as provided; questions should not be renumbered or reordered; however, the text of the question can be omitted.
- Each page of the application should include as a header or footer the name of the organization submitting the application.
- The application narrative must be approximate 6 pages or less.
- Applications must be submitted in PDF format.

B. Proposal Content/ Application Instructions

The application must consist of all responses to the sections below and must address all the questions in each section in the order listed below. Include relevant program data whenever possible, including relevant data on the populations you serve. Label the beginning of each section as indicated (e.g., "Provider Experience") and include each question number and letter; it is not necessary to repeat the text of the question.

1. Proposal Submittal Form (Attachment A)

The Vendor Proposal Form (Attachment A) transmits the Proposer's Proposal Package to FPHNYC. An official authorized to bind the proposer must sign the Vendor Proposal Form.

2. Applicant Eligibility Questionnaire (Attachment B)

The Applicant Eligibility Questionnaire (Attachment B) certifies that the Proposer meets the minimum mandatory requirements stated in this RFP.

3. Narrative Proposal

Below is a listing of the information to be provided by the Applicant.

I. **Provider Experience (suggested word limit: 850 words or less)**

- a. Provide a description of the current neighborhoods (borough, community district, or zip code) and populations served by your organization.

- Provide number of annual clients per geographic area, if possible and demographics as specifically as possible, i.e., race, gender, LGBTQA+, and other. (150 words)
- b. Estimate the volume of people your organization engages through outreach per week, on average, for each of the following: (150 words)
 - People who are experiencing homelessness.
 - People known to have OUD or a history of a non-fatal overdose or other opioid-related incident.
 - People with any type of SUD.
 - c. List the outreach activities and services your organization provides to people experiencing homelessness: (300 words for c and d)
 - People Experiencing Homelessness
 - People Who Use Drugs, including harm reduction-related services, such as naloxone access, and treatment.
 - d. Describe the unmet need for OUD treatment among the populations you serve and stated interest in medication treatment for OUD expressed by clients.
 - e. Describe existing linkages and the process for referrals or connections to: (250 words)
 - Harm reduction services, such as syringe service programs
 - OUD or SUD treatment.
- II. Program Services (*suggested word limit: 1,100 words or less*)**
- a. Specifically identify the borough and neighborhood (geographic service area) your organization is proposing to serve under this application. (200 words)
 - b. Describe your planned strategy to identify and engage clients in conversations about OUD and same-day buprenorphine treatment. (300 words)
 - c. Describe how facilitating referrals for same-day treatment will be incorporated into existing activities. (300 words)
 - d. Describe any available or planned supports that would facilitate clients' initial engagement with same-day treatment. (300 words)
- III. Program Monitoring, Data Management, and Reporting (*suggested word limit: 750 words or less*)**
- a. Describe existing data systems used for program and administrative data collection about outreach and client interactions. What data systems/capabilities are currently in place? How is data currently collected by outreach workers? (350 words)
 - b. List any data that your organization currently collects among clients served about SUDs, engagement in conversations about substance use and treatment, and referrals for SUD treatment. (200 words)

- c. Describe your organization's capacity for collecting additional data and ability to enter this data into an external data reporting and management system provided by DOHMH (200 words)

IV. Health Equity and Social Justice (*suggested word limit: 350 words or less*)

- a. Describe one example of how your organization has challenged structural racism or other forms of oppression involving people who identify as LGBTQIA+ or other marginalized groups. This might include training to increase staff awareness about institutional racism, gender identity, and sexual orientation oppression; examining the role of structural oppression and implicit bias in your organization's policies and practices; examining how racism impacts the relationship between your service providers and clients; and/or initiatives that ensure input from frontline staff and clients about program design and ways to best meet the needs of clients.

4. Organizational Chart/Staffing Plan

Submit a 1-page organization chart with the titles of all involved supervisors and staff and existing and proposed job duties and percent time related to the funded planning, training, and outreach activities. The organization chart is not counted toward the narrative page limit.

5. Budget Proposal & Budget Justification (Attachment C or Excel template provided)

The award will fund organizations currently doing street outreach and/or providing services to PEH to expand access to same-day treatment options for OUD. Contracts with organizations will provide funds to cover staff time and for organization to purchase tools and supplies for outreach as specified above.

- I. Applicants must complete and attach a Budget Proposal using the template provided. The template is not counted in the narrative page limit.
- II. The proposed budget should reflect the estimated cost of providing the proposed services for an 8-month contract period. The budget should not exceed \$38,747.
- III. It is expected that selected organizations will utilize the devices, supplies, and materials listed below in program delivery. These items may be purchased directly with funds awarded or provided by the organization.
 - Tablets for outreach teams with Wi-Fi capability and a mobile data plan including internet for one year.
 - Smartphone for clients without phone access. Smartphone must have at least 3 months of paid cell service including talk, text and at least 4 GB of data per month.
 - Hygiene packs for people with pending telemedicine consultations. This may include socks, soap, toothcare items, comb, and other related items.
 - Comfort packs for people who may experience opioid withdrawal while telemedicine consultation is pending. This may include snacks, water, over-the-counter medications for symptom relief of opioid withdrawal, and other related items.
 - MetroCards for travel to the pharmacy for prescription pick-up and/or travel to treatment visits. Please budget for fourteen trips per week.

Funds may also be used for project staff salaries, data collection, additional supplies, and other direct project-related expenses. Funds may not be used to provide medical treatment.

- IV. Please include a brief narrative description justification for each line item based on the project description. This section will not be counted toward the page limit.

C. Proposal Package Contents

The Proposal Package email should contain the following materials. Proposers should utilize this section as a “checklist” to assure completeness prior to submitting their proposal.

- Proposal Submittal Form (Attachment A)**
- Applicant Eligibility Questionnaire (Attachment B)**
- Narrative Proposal** that responds to all questions posed in proposal instructions
- Organizational Chart** showing programs and staff involved in initiative
- Budget Proposal (Attachment C or Excel template provided)**
- Budget Justification** with a brief narrative description for each line item based on the project description.

SECTION IV: EVALUATION AND AWARD PROCEDURES

All proposals submitted within the stated deadline will be reviewed to determine if they meet the minimum requirements of this RFP and have responded to all necessary questions and requests. The Evaluation Committee will evaluate and rate all qualified proposals based on the Evaluation Criteria described below.

1. Proposal Evaluation Criteria

The criteria, and the relative weight of each, that will be utilized to evaluate proposals are:

a. Quality of the Applicants' Narrative Proposal	40%
b. Applicant's demonstrated level of organizational and staff capability	40%
d. Applicant's Budget Proposal	20%

2. Selection Process

The review process will consist of the following steps:

1. Adherence to Mandatory Minimum Requirements
All applications will undergo an initial administrative review for completeness. For an application to be evaluated, it must include all required components and meet all required eligibility criteria.
2. Proposal Evaluation
All responsive proposals will be judged by a review committee convened by DOHMH. The Committee will evaluate applications and score Applicants according to the criteria listed above. Each application will be scored by at least three reviewers.
3. Final Selection
Once the proposals have been evaluated and scored by individual committee members, the entire committee may meet discuss the proposals and assign a final ranking score. The highest-ranking Applicants will be selected for award.

FPHNYC and DOHMH reserve the right to conduct interviews as DOHMH deems applicable and appropriate. Although discussions may be conducted with Applicants, DOHMH reserves the right to award contracts on the basis of initial proposals received, without discussions.

3. Award Process

Each Applicant submitting a proposal will be notified in writing regarding the decision concerning their proposal. Once selections are made, designated recipients will enter into a contract with the Fund for Public Health in New York City. Final contract execution is contingent upon successful

completion of contract negotiations and demonstration of compliance with all requirements of FPHNYC, DOHMH, and the City of New York, or any other applicable federal and state laws and policies.

At the discretion of FPHNYC and DOHMH, final awards may be less than requested in order to distribute funds among awardees and ensure adequate distribution of services throughout priority neighborhoods and communities. FPHNYC also reserves the right to make adjustments to deliverables and timeframes in response to changes in priorities or need as a result of the COVID-19 pandemic.

4. Additional Information

Right to Amend, Cancel this RFP, or Solicit a New RFP

FPHNYC may amend or cancel this RFP at any time, without any liability to FPHNYC, and/or DOHMH. FPHNYC or DOHMH may solicit new requests for information and/or proposals regarding the services addressed in this RFP at any time.

Right to Reject Proposals

FPHNYC may reject any or all proposals received and may ask for further clarification or documentation. Submitted information that does not respond to all items in this RFP may be excluded from further consideration and alternative information packages may not be considered.

Insurance

Applicants selected for award will be required to maintain a commercial general liability insurance policy in the amount of \$1,000,000 per incident and \$3,000,000 aggregate. Contractors will also be required to provide proof of worker's compensation insurance coverage at the statutory limits. FPHNYC and the City of New York shall be named as Additional Insureds on the commercial general liability policy and as Certificate Holders for all other required insurance. Contractors will need to demonstrate that necessary insurance coverage is in place from the start of the contract.

NYC Vendor Registration

This project is being supported, in part, with funding from the NYC Health Department, which requires that vendors register in the City's Payee Information Portal (PIP). In PIP, vendors can view financial transactions with the City of New York, register for Electronic Funds Transfer payments and more. For more information, please visit: <https://a127-pip.nyc.gov/webapp/PRDPCW/SelfService>.

Depending on award size, vendors may also be required to register in PASSPort, the City's digital procurement system. PASSPort training and information materials are available through videos, user guides and FAQs at www.nyc.gov/passport.

Proposal Costs

The Applicant will be solely responsible for any costs incurred in preparing, delivering, or presenting responses to this RFP. Applicants will not be reimbursed for any costs incurred in preparing proposals.

Fulfillment of Requirements

By submitting an information package, the Applicant acknowledges that the respondent has read and understands this RFP and can fulfill all requirements.

Submitted Information

Once submitted, responses will be the property of FPHNYC and will not be returned.

SECTION V: ATTACHMENTS