



Addendum 1
Connecticut Department of Correction
RFP #DOC-RES/NON-RES/PS-2020-SM
Community Residential Services/Non-Residential Parole Services

The Connecticut Department of Correction (The Department) is issuing Addendum 1 to RFP #DOC-RES/NON-RES/PS-2020-SM Community Residential Services/Non-Residential Parole Services. All requirements of the original Request for Proposals (RFP) except those requirements specifically changed by this addendum shall remain in effect. In the event of any inconsistency between information provided in the RFP and information in this addendum, the information in this addendum shall prevail.

SCORES/WRNA: This addendum provides information as to the assessment tools names in the RFP in Section III B.2 2-1g. Intake/Orientation. The SCORES assessment tool is actually the ORAS (Ohio Risk Assessment System) tool renamed SCORES in CT (Statewide Collaborative Risk Evaluation System). The specific ORAS tools used in CT are the SRT, RT, and CST. The tools and trainings are available from the University of Cincinnati (UC). There is no license fee. However, before using the tools, individuals must have initial end user training by the UC certified/authorized trainers.

The WRNA (Women's Risk Need Assessment) is public domain; there is no license fee. However, the WRNA also requires initial end-user training. The WRNA is available from University of Nevada, Las Vegas (UNLV) (<https://www.unlv.edu/ccjp/assessment/wrna>) or Bauman Consulting Group, LLC (Ashley Bauman) <http://baumanconsultinggroup.com/trainings-workshops>

Floor Plans: This addendum requires the submission of floor plans of the proposed residential program. Floor plans shall be included as Appendix 12. Floor plan submission for scattered-site supportive housing proposals is not applicable.

Site Visits: This addendum allows the Department as its discretion to conduct site visits of proposed program sites as part of its evaluation.

All references to establishing Savings Account in accordance with the definition delineated in Section III.A.1 of this RFP should read: All residents will be expected to establish a savings account (in accordance with Offender Monies: Offenders Savings Accounts in the [DOC's Parole and Community Services Residential Provider Manual](#)).

This addendum amends **Sections I.C.3; I.C.10; I.D.4; Section III.B.2. 2-1i(5); III.B.2.2-1I; III.D.2.b; Section IV Proposal Outline**, and adds **Section III.B.2. 2-1i(9)** of the RFP.

Section I.C.3 Contract Offers of the RFP is hereby amended as follows:

Through this RFP process, the Department shall offer the right to negotiate a contract to one or more selected proposer(s), subject to anticipated total funding available and program need. Additional proposals may be selected for funding at a later date, subject to availability of additional funding and program need.

Section I.C.10 of the RFP is deleted and replaced as follows:

- 10. Multiple Proposals.** The submission of multiple proposals is an option with this procurement. A proposer may submit proposals for more than one geographic area and/or program type. Proposals for more than one geographic area and/or program type may not be combined. Each proposal must be self-contained and packaged separately.

Section I.D.4 of the RFP is deleted and replaced as follows:

- 4. Executive Summary.** Proposals must include a high-level summary, not exceeding two (2) pages, of the main proposal and cost proposal. The Executive Summary shall include, but not be limited to include the:
- a. proposer's minimum of three (3) years' demonstrated experience providing the requested services to formerly incarcerated individuals;
 - b. proposed program type;
 - c. program capacity including number of beds and gender; and
 - d. location of program.

Section III.B.2. 2-1i(5) Scattered-Site Supportive Housing Program is amended as follows to include the following components. A Job Developer position is not required but employment assistance should be provided with a program of this type:

- i) **Job Development.** It is expected that the program will include a significant emphasis on development of relationships with local employers willing to hire formerly incarcerated individuals, local workforce development boards, and American Job Centers.
- j) **Job Readiness.** It is expected that the program will include components to strengthen a resident's likelihood of sustainable employment. These components should include, but not be limited to: Employment Counseling; Job Search Techniques; Resume Assembly; Interviewing Skills; Job Application Preparation; etc. Proposers should identify career and job readiness assessment tools used.
- k) **Job Retention.** It is expected that the program will include a component designed to encourage employer communication regarding the resident's work ethics, productivity, etc. It is also expected that the program will provide a strong focus on providing residents with the tools necessary to deal with conflict productively, and retaining their employment long-term.
- l) **Savings Account Maintenance.** All residents will be expected to establish a savings account (in accordance with Offender Monies: Offenders Savings Accounts in the [DOC's Parole and Community Services Residential Provider Manual](#)).

Section III.B.2.2-1i(9) Residential Mental Health service/treatment components have been added as follows:

(9) Residential Mental Health Programs

The Department expects programs of this type to accept individuals with a high level of mental health needs (assessed by the Department as Mental Health Levels 4 and 5). The program should accommodate those individuals who will most often require some level of assistance for the remainder of their lives, and those who may be targeted for DMHAS services upon release. The following components must be addressed.

- a) Mental Health Treatment. How will assessed mental health needs of residents be addressed? Include specific group and individual counseling session length, duration, and curricula to be utilized, as well as group capacity.

- b) Medication Management. It is expected that the program will include the capability to provide medication management to residents in need of such services as a result of their mental health needs. Proposals should describe how the program will provide medication management.
- c) Employment. It is expected that the program will include a component that allows for community access (after completion of intensive mental health treatment components), which may include possible employment for those residents able to sustain such. Proposals should describe the capacity of the program to assist with resident employment.
- d) Community Access. It is expected that the program will include a community access component that will allow residents to begin reintegration in a supervised and structured manner. This may include group activities, employment search, etc.
- e) Service Linkage. It is expected that the program will include the capability to provide linkage to local mental health providers and/or DMHAS providers to ensure continuity of care upon completion of the program.
- f) Transportation Assistance. The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.
- g) Identification Procurement. It is expected that residents will be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
- h) Benefits Assistance. It is expected that residents will be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
- i) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, non-shelter housing upon completion of the program.
- j) Drug Testing. It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.
- k) Discharge Planning. In conjunction with the resident's Individual Treatment Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. The Discharge Plan should include permanent housing options upon completion of the program, benefits eligibility, linkage to local community services, etc.

Section III.B.2.I of the RFP is deleted and replaced as follows:

- i. *Prison Rape Elimination Act (PREA).* All contractors providing residential services shall adhere to the federal Prison Rape Elimination Act of 2003, Public Law 108-79. Additionally, all contractors providing residential services shall comply with Department policies and procedures as they relate to PREA standards for contracted residential community programs, as such policies and procedures are delineated and maintained in the Department's Parole and Community Services Residential Provider Manual. The proposal must indicate whether the proposed program is compliant with PREA standards.

Section III.D.2.b. Budget Requirements of the RFP is amended as follows:

b. Budget: **A responsive proposal must include** a separate budget form, which is provided in **Section V. Forms** of this RFP, **for each State fiscal year** (July 1 to June 30) that a proposer offers the proposed program. (Form 4A Budget Form with Start-Up Costs Section, Form 4B Budget Form (No Start-Up Costs). Since contract offers may be made up to three years with the option of a two-year extension at the discretion of the Department, proposal submissions should include annual program budgets for each year up to the maximum of 5 years. Start-up costs can only be included in year 1 (FY2021). All revenue, including non-DOC revenue must be identified.

In addition to the full program budgets for the period the program is offered, a second set of annual budgets based on the minimal number of beds required for sustainability should be submitted in the event that DOC does not have the funding available and/or need for all the beds offered in a program proposal.

Proposers should also complete Form 4C Summary of Total Proposal Costs, based on the number of years that a program is offered.

Note: Revised budget forms (Forms 4A, 4B, and 4C) are included at the end of this Addendum and will be posted on the DAS and DOC websites.

Section IV Proposal Outline is hereby deleted and replace as follows:

There is now a separate Proposal Outline for Residential Program and one for Non-Residential Programs. The footnotes on the outline in the original RFP remain the same.

IV Proposal Outline

Residential Programs Proposal Outline	Page
A. Cover Sheet	1
B. Table of Contents	2
C. Declaration of Confidential Information	Etc.
D. Conflict of Interest – Disclosure Statement	
E. Executive Summary	
F. Main Proposal Component	
1. Organizational Requirements	
a. Purpose/Mission/Philosophy	
b. Entity Type/Years in Operation	
c. Administrative Office Location	
d. Qualification/Certification/Licensure	
2. Service Requirements	
a. Referral Process	
b. Program Capacity	
c. Date of Program Availability	
d. Location of Program	
e. Room and Board	
f. Accountability	
g. Intake/Orientation	
h. Development of Individual Service/Treatment Plans	
i. Service/Treatment Components	
The section should contain the lettering for the particular program type for the proposal. E.g. this section should appear as follows for a Work Release proposal.	
Work Release Programs	

- a) Job Development
- b) Job Readiness
- c) Job Retention
- d) Savings Account/Maintenance
- e) Transportation Assistance
- f) Identification Procurement
- g) Benefit Assistance
- h) Housing Assistance
- i) Drug Testing
- j) Discharge Planning
- k) Mentoring
- j. Evidence-Based Programming
- k. Internal Security Measures
- l. Prison Rape Elimination Act
- m. Eligibility and Exclusions.....

- 3. Staffing Requirements.....**
 - a. Program Staff/Manager
 - b. Recruitment, Hiring, and Retention Plan
 - c. Staff Training/Education/Development.....
 - d. Multilingual and Multicultural Competency

- 4. Reporting Requirements**
 - a. Equipment.....
 - b. Reports
 - c. Disclosure Policy.....
 - d. Performance Outcome Measures

5. Work Plan

- G. Cost Proposal Components.....**
 - 1. Financial Requirements**
 - a. Financial Capacity.....
 - b. Financial Controls.....
 - 2. Budget Requirements.....**
 - a. Budget
 - b. Budget Justification/Narrative

- H. Appendices**
 - 1. Proof of Non-Profit Status.....
 - 2. Reference Letters
 - 3. Proof of Zoning.....
 - 4. Proof of Licensure
 - 5. Staff Matrix.....
 - 6. Job Descriptions
 - 7. Resumes
 - 8. Audited Financial Statements
 - 9. Commission on Human rights and Opportunities, Workplace Analysis Affirmative Action Report¹
 - 10. Consulting Agreement Affidavit (OPM Ethics Form 5)²
 - 11. OPM Iran Certification Form 7³

Section IV Proposal Outline

Non-Residential Programs Proposal Outline	Page
A. Cover Sheet	1
B. Table of Contents	2
C. Declaration of Confidential Information	Etc.
D. Conflict of Interest – Disclosure Statement	
E. Executive Summary	
F. Main Proposal Component	
1. Organizational Requirements	
a. Purpose/Mission/Philosophy	
b. Entity Type/Years in Operation	
c. Administrative Office Location	
d. Qualification/Certification/Licensure	
2. Service Requirements	
This section for the Employment, Educational and Vocational Coordinator Service should be as follows:	
Employment, Educational and Vocational Coordinator Services:	
a. Employment, Educational vocational Readiness	
b. Referral Process	
c. Capacity	
d. Date of Delivery Services	
e. Hours of Operation	
f. Intake	
g. Service Components	
This section for the Fiduciary services shall contain a narrative of the services.	
3. Staffing Requirements	
a. Program Staff/Manager	
b. Recruitment, Hiring, and Retention Plan	
c. Staff Training/Education/Development	
d. Multilingual and Multicultural Competency	
4. Reporting Requirements	
a. Equipment	
b. Reports	
c. Disclosure Policy	
d. Performance Outcome Measures	
5. Work Plan	
G. Cost Proposal Components	
3. Financial Requirements	
a. Financial Capacity	
b. Financial Controls	
4. Budget Requirements	
a. Budget	
b. Budget Justification/Narrative	
H. Appendices	
1. Proof of Non-Profit Status	

2. Reference Letters
3. Proof of Zoning.....
4. Proof of Licensure
5. Staff Matrix.....
6. Job Descriptions
7. Resumes
8. Audited Financial Statements
9. Commission on Human rights and Opportunities, Workplace Analysis Affirmative Action Report¹
10. Consulting Agreement Affidavit (OPM Ethics Form 5)²
11. OPM Iran Certification Form 7³

This addendum also contains questions submitted by interested parties and the Department’s official answers. These answers shall clarify the requirements of the RFP.

Questions and Answers: The questions and answers have been grouped into categories and similar questions may have been grouped with one answer provided.

OVERALL

1. In reviewing the RFP starting on page 17 you list all the programs that will be funded. On page 20 Service Requirements I understand the need to only add the components to what you are proposing, my question is: I do not see any questions for the Residential Sex Offender Treatment Program.

Answer: Residential Sex Offender Treatment Programs are not being procured in this RFP, but are programs that are part of DOC’s network of community services.

2. In regard to the same page 20 Service Requirements is it correct that after entering the components for the program you are proposing, you then go to page 33 and add in the j,k,l,m to complete that section?

Answer: Yes this is correct. For each Residential program that a proposal is being submitted the proposal should address:

- a. Referral Process
- b. Program Capacity
- c. Date of Program Availability
- d. Location of Program
- e. Room and Board
- f. Accountability
- g. Intake/Orientation
- h. Development of Individual Service/Treatment Plans
- i. Service/Treatment Components
- j. Evidence-Based Programming
- k. Internal Security Measures
- l. Prison Rape Elimination Act
- m. Eligibility and Exclusions

3. Regarding proposal outline, I’m wondering if there is a duplication in Section 2 Service Requirements and section 4 Reporting Requirements? We don’t currently have reporting requirements for items e through m.

- 2. Service Requirements**
- a. Referral Process
- b. Program Capacity
- c. Date of Program Availability

- d. Location of Program
- e. Room and Board
- f. Accountability
- g. Intake/Orientation
- h. Development of Individual Service/Treatment Plans
- i. Service/Treatment Components
- j. Evidence-Based Programming
- k. Internal Security Measures
- l. Prison Rape Elimination Act
- m. Eligibility and Exclusions

4. Reporting Requirements

- a. Equipment.
- b. Reports
- c. Disclosure Policy
- d. Performance Outcome Measures
- e. Room and Board
- f. Accountability
- g. Intake/Orientation
- h. Development of Individual Service/Treatment Plans
- i. Service/Treatment Components
- j. Evidence-Based Programming
- k. Internal Security Measures
- l. Prison Rape Elimination Act
- m. Eligibility and Exclusions

4. When following the proposal outline on pages 41 & 42 under #4. Reporting Requirements there is a.-m. but in the body of the RFP on pages 36, 37 & 38 there are only a-d and stops at d. performance outcome measures. Is the e-m listed on the outline not supposed to be there? They are listed in section 2. Service Requirements to be answered.

Answer to Question 3 and 4: The Department apologizes for this error: e-m should not have been included in the Reporting Requirements. See revised outline in this addendum. The Reporting Requirements include:

- a. Equipment
- b. Reports
- c. Disclosure Policy
- d. Performance Outcome Measures

5. On page 19, Proposal Contents start with B, on page 41 they start with F – which do we follow?

Answer: See the revised Program Outline contained in the addendum for Residential or Non-Residential programs.

6. No Executive Summary is listed on page 19 or before, do we include one?

Answer: The Executive Summary is on page 7 Section I.D.4. The Executive Summary in your proposal outline is item E. Executive Summary. Please note the additions added to the Executive Summary section in this Addendum 1.

7. How do you want to number the components that are specific to the program that we are listing as they start with (a) as do the components on page 20

Answer: See revised Proposal Outline in this addendum for labeling/listing. Since each program that an entity is proposing requires a separate proposal, the only section that is particular to the program type is the

Services section, which is for Residential Programs is F.2.i Service/Treatment components or for Non-Residential programs is F.2.

For Residential programs the Service/Treatment component section labeling starts with a)

Work Release a) – k)

Work Release Women and Children: a) – l)

Substance Abuse a) – g)

Transitional Supportive Housing a) – j)

Scattered-Site Supportive Housing a) – h)

Behavioral Intervention a) – i)

Per Diem Beds requires a narrative in response to the services requested.

Re-Housing a) Location – g) Housing Quality Standards

Mental Health a) – i)

Non-Residential:

Employment, Educational and Vocation Coordinator proposals a– h)

Fiduciary Services require a narrative in response to the service requested.

8. Page 41 of the proposal states *This section presents the **required** outline that must be followed when submitting a proposal in response to this RFP. Proposals must include a Table of Contents that exactly conforms with the required proposal outline (below). Proposals must include all the sections listed below, in the order specified, using the prescribed lettering and numbering scheme. Incomplete proposals will not be evaluated.*

However, this does not reflect the outline/sections requested for the following service types: Rapid Re-Housing as well as the non-residential parole services. Will the Department be providing outlines for these types of services or should proposers provide their own based on the RFP outline?

Answer: See revised Proposal Outline and guidance provided in this addendum. Rapid Re-Housing details are provided in F.2.i. Service/Treatment Components.

9. Can you be more specific about use of dividers in the proposal? There are 9 lettered sections, 7 numbered sections and 50 lettered subsections. I want to be sure to comply with the intent of this request.

Answer: At minimum DOC would like dividers between lettered sections A – H. Dividers can be on regular paper naming the section.

10. Page 6- Language reads that proposals must include a signed Addendum Acknowledgement. Where is this form found?

Answer: The Addendum Acknowledgement form will be issued with each addendum. There will be at least one addendum issued with this RFP that will at minimum release the answers to the questions submitted.

11. Is it possible to get a listing of agencies funded by program type, bed count or slots, and region?

Answer: See DOC's Directory of Contracted Community Programs available on DOC's website.

12. Is all of this a rebid of existing programs? If not, what is new?

Answer: This is a procurement for existing and new programs. The new programs are Behavioral Intervention; Per Diem Beds; Re-Housing; Fiduciary Services; and Employment, Educational and Vocational Coordinator.

13. Page 38 – Work Plan – If we are an existing provider with existing DOC programs, do we need to submit this timeline? Or is this for new programs only?
14. Is a work plan required for existing up-and-running programs? Seems it would be unnecessary for a program like mine.
15. Page 38 Is a work plan required for programs already in operation. If yes, would the focus be specific to adherence to program expectations as outlined in the contract? Please provide any additional information that might needed or required in this area for pre-existing programs.

[Answer to Questions 13-15: All Proposals require a work plan: new programs as well as existing programs. Work plans should not only list the task/deliverables necessary for a program to become operational, but should provide an outline/schedule of the tasks and deliverables of the program during operation and can address program expectations.](#)

16. On page 38 of the RFP, there is no page limit listed for the Work Plan. Is there a page limit? If so, how many pages?

[Answer: There is no page limit.](#)

17. Do we need to submit floor plans for each proposed facility? If so, do they count against the page limit?

[Answer: As made part of Addendum 1, floor plans are requested for all programs except scattered-site supportive housing proposals and do not count against the page limit.](#)

18. Pg. 9- What are the criteria distinctions between the Financial requirements and the budget requirements?

[Answer: Financial requirements consider an organization’s Audits and financial statements and reveal an organization fiscal stability, financial capacity and internal controls. Budget requirements consider the proposed program’s annual budget, start-up costs, and leveraging. Budget requirements consider cost effectiveness and justification narratives that clearly detail budget line items.](#)

19. Can you please clarify which models described on pages 17-19 are currently funded and which are new models?

[Answer: New Residential Programs include: 8. Behavioral Intervention Program; 9. Per-Diem Beds; and 10. Re-Housing. New Non-Residential Programs include: Employment Services/Educational/Vocational Coordinator. All other programs are currently funded programs.](#)

20. Can an existing provider request funding under their current component to address increased staffing costs as it relates to legislatively mandated minimum wage increases?

[Answer: No.](#)

21. Based on Pages 18 and 19 of the RFP it appears that the funding request is specific to expansion under the Behavioral Intervention Program, Per Diem Bed Price, Re-Housing, Fiduciary, and Employment Services component is that accurate?

[Answer: No. Page 18 and 19 provide an overview of the Department’s Community Network of Programs The programs to be procured under this RFP, as listed on page 3, and as further detailed on pages 22-34 include: Work Release; Work Release Women & Children Program; Substance Abuse; Mental Health; Transitional Supportive Housing Program; Scattered-Site Supportive Housing; Behavioral Intervention Program; Per-Diem Beds; Re-Housing; Fiduciary Services; and Employment Services, Educational and Vocational Coordinator.](#)

22. If an agency is applying under 2 components does this mean two separate proposals should be submitted?

Answer: Yes, for each program type that you are applying a complete proposal must be submitted. Programs must be sustainable on their own and should not be combined so that the surplus from one program is required to support another.

23. Although the Department lists no funding levels for this procurement can a list of current funding be released by each of the requested components?

Answer: Confidential

24. If the appendices listed on page 42 under #9, 10, and 11 are already loaded onto the BizNet portal do they also need to be submitted with this proposal?

Answer: If #9 (Commission on Human Rights and Opportunities, Workplace Analysis) and #11 (OPM Iran Certification Form 7) are already uploaded on BizNet and the signature date on these form is not a year old, those forms are sufficient. If those forms are a year or more old, they need to be updated. **For #10 (Consulting Agreement Affidavit -OPM Ethics Form 5) this form must be uploaded as it is specific to the RFP.**

25. The sequence of sections that start on page 19 is significantly different from the outline on page 41:

Answer: Please follow the revised Proposal Outline provided in this Addendum.

26. Page 23, 1.a It is noted that preference will be given to programs that include Mentors for residents. Would the provision of a Recovery Support Coordinator who was formerly incarcerated meet this definition? If not, will you please provide examples of mentoring programs that do meet the standard of expectation.

Answer: Mentoring on page 23, k. would include any individual that can provide valuable support in helping participants make their transition to productive lives in the community. Individuals/volunteers acting as mentors should be evaluated as being appropriate for this role. DOC is looking for respondents to provide their own recommendations as to how best to fulfill this role.

27. Page 23, 2.f. Identification Procurement- This section notes that the provision of funding to assist with the procurement of identification *may* be provided. Should the program budget reflect a line item for this or are we to request this directly of DOC on a case by case basis?

Answer: A budget line is not needed. If an inmate does not have sufficient funds to cover the costs of ID procurement, DOC's Inmate Welfare fund may cover these costs through a direct request to the Inmate Welfare fund on a case by case basis.

28. Page 35, 3.a Is there a preferred standard for education and/or experience for the Program Manager?

Answer: No, just what is listed on Page 35.3.a.

29. Can you tell me where we can find the budget forms for the RFP? Do we get them once we submit the LOI?

Answer: An excel Form #4: Proposed Annual Program Budget is on the DAS website as well as DOC's website.

30. In stating a minimum of three years experience, can this include juvenile justice, behavioral health services for person with criminal justice issues, or community-based housing for forensic behavioral health populations? Or must it be DOC or CSSD experience?

Answer: The proposal should provide detail as to the experience listed, but as presented it would count. The experience does not have to be only DOC or CSSD experience.

31. How should organizations budget for the increase in minimum wage over the next two years? Would you like individual annual budgets that show the staff the increase to \$14/hr and then \$15/hr

Answer: Providers should be aware of any impact minimum wages would have to their budgets. Budgets should be submitted for each year of the proposed program.

32. The RFP states that we need to submit a “minimum” and “maximum” budget based on # of clients served/apartments rented. Is it possible to have the two figures be the same?

Answer: If a program’s minimum and maximum # of beds is the same for a program to be sustainable than one budget can be submitted but should be noted as such.

33. Would the Department be able to provide guidance about allowable overhead rates?

Answer: The Department follows [OPM POS Cost Standards](#) regarding eligible costs. Administrative and General costs should be reasonable and necessary. The organization’s cost allocation plan must use the hierarchy of cost methodology to reflect true A&G costs.

34. If the applicant does not currently contract with the DOC but has an existing Prison Rape Elimination Act (PREA) policy should we attach it as appendix 12, or is simply referencing that we have a policy which can be reviewed by DOC if selected sufficient?

Answer: Section III.B.2.I PREA, in this amendment has been amended so that all proposals must indicate whether the proposed program is compliant with PREA standards. Therefore, your proposal does not need to be submitted at this time, but should be reviewed to indicate if it is compliant.

35. We are looking to add four beds to our Scattered Site Housing program. Do we need to submit two proposals – one for the 10 beds we have and a second proposal for 14 beds.

Answer: You should submit a proposal for the number of beds you are proposing. The proposal should identify the maximum amount of beds, and the minimum number of beds for the program to be sustainable.

36. Please define what you mean by “conforming copies of the original proposal” from page 6 of the RFP.

37. Please define what you mean by “conforming electronic copy of the original proposal” on page 6 of the RFP.

Answer to Question 36 & 37: Conforming copies meaning similar in type/duplicate of original proposal.

38. On page 39 of the RFP, it lists a 5-page limit for financial requirements but no page limit for budget requirements. Is there a page limit for budget requirements, or is that section included within the 5-page limit for financial requirements?

Answer: There is no page limit to the budget requirement section.

39. What does “completing the program successfully” mean on page 38 of the RFP?

40. Where Outcome Measures are outlined on page 37 and 38 of the RFP, there are metrics for each type of program that reference completing the program “successfully”. Can the CTDOC indicate how “successful” completion will be measured?”

Answer to 39 and 40: the success completion outcome metrics are as follows for the various program types: [Individual Service Plan/Treatment Plan](#): eligible offenders have a completed service/treatment plan within 15 days of admission.

[Employment](#): Eligible offenders obtained employment or enrolled in school/vocational programming.

[Housing](#): Discharged to independent residence, other residence (family/friend or sober house), CTDOC-contracted residential program or shelter with case management.

[Savings Account](#): Eligible offenders who completed reporting period with an active savings account.

[Substance Free-Lifestyle](#): At least 1 drug screen administered to each offender at least once per month.

Offenders who completed reporting period with no positive drug screens.

[Program Completion](#): Offender who discharged successfully, administratively, transferred to another program, discharged to a higher level of care or discharged without prejudice.

Discharge Plan: Offenders who resided in the program longer than 15 days and discharged with a plan/summary.

Women and Children Program - Child Reunification: Offenders with children under 18 who showed improvement in relationships with child.

41. Does DOC have an approved lab vendor for urinalysis (Abbott?) and breathalyzers? If so, can you provide lab screen, cup, and saliva per unit costs, as well as historic info on utilization of each?

Answer: DOC does not specify a specific vendor for urinalysis and breathalyzers and does not have information as to lab screen, cup, saliva per unit costs, nor historic info on utilization of each.

42. What is the prevalent graduated sanctions curriculum or program used in DOC community-based residential programming?

Answer: DOC does not have curriculum. Providers are expected to use evidence based best practices.

43. Would DOC be looking for programs to become accredited?

Answer: No

44. For the Residential Services solicitation, are there regions within the state or sub-populations that are priorities for the DOC to have served?

Answer: To Be Determined and will be based on needs of inmate population.

45. How many additional beds are expected to be added to the current inventory of residential programs as a result of this RFP?

Answer: To Be Determined and will be based on needs of inmate population and available funding.

46. If a responding organization has a current residential contract and would like to apply to offer additional residential services in another region, would that qualify as a new program or a program expansion?

Answer: This would be a new program. A program expansion would be additional beds at a current program location.

47. The budget template offered has the top section cells locked so that I cannot enter FTE's, salary detail, etc., but there is a place for total salaries in the section below. Can I assume I just enter the total number and discuss the breakdown later if I'm selected to negotiate a contract?

Answer: A revised template form has been posted on the DAS and DOC website with unlocked cells so FTE and salary detail can be entered.

48. Offender rent is not mentioned in the room and board section of the RFP. Current guideline is 30% of net pay not to exceed \$100 weekly and no back charges. Should I include the current guideline or does CTDOC intend to eliminate offender rent?

Answer: Subsistence/Offender Rent is required and should be included on the budget income line 4305 Client Participant fees. See Page 37 of Parole and Community Service Residential Provider Manual, "Rent shall not exceed 30% of the offender's net income, up to a maximum of \$100 per week. "

49. Current staff resumes are required in this RFP. Can I include resumes in their original format or must I rewrite them in the same font and size as the rest of the proposal?

Answer: Resumes may be kept in their original format and font.

50. Will there be start-up costs available?

Answer: A proposal may include start-up costs. Start-up costs are allowable for only the first year of the program (FY21 budget). Start-up costs require a detailed narrative that justify such costs and the costs associated must be included on the "Start-up" section of the budget.

51. Page 40 of the RFP states Budget. A responsive proposal must include a separate budget form, which is provided in Section V. Forms of this RFP, for each State fiscal year (July 1 to June 30). Page 5 states "Contract Term: Up to three (3) years with the option of a two-year extension at the discretion of the Department," So to confirm, the Department is looking for 3 fiscal years of budgets?
52. Page 40 of the RFP indicates that a budget must be submitted for each of the three fiscal years in my proposal. The form 4 budget sheet says clearly at the top that multi-year contracts will have the **same funding each year**. So, do I need one budget form for the duration of the proposed three years or three budget forms?

Answer to Question 51 & 52: Please refer to **Section III. D.2.b**. Budgets revised in this addendum for guidance. Proposals should include a budget for the number of years the program is being proposed with the maximum of 5 years. Start-up costs can be included in only year 1 (FY2021 budget).

53. What are 'Outliers' as mentioned on the average program cost page of the RFP?

Answer: The table included in the RFP for program cost list the high, low and average of per bed costs by program. If there were programs where costs were much higher or lower than the majority of programs those programs would be considered outliers and would not be included to provide better data.

54. Is a separate complete proposal required for each service component?

Answer: Yes a separate proposal should be submitted for each program type.

WORK RELEASE

55. The Work Release Programs – are they for both male and female programs?

Answer: Proposals are being sought for both male and female work release programs. Proposals for male and female programs may not be combined. Each proposal must be self-contained and packaged separately.

56. Work Release - Family Engagement – On page 22, it is mentioned that it is expected that an on-site family reunification component is expected as well as a Job Developer position. Has DOC made additional funds available for additional staff for these functions?

Answer: Proposal budgets should include all costs necessary to administer the program.

57. Is subsistence collection still required for Work Release programs? If so, at what rate?

Answer: Subsistence/Offender Rent is required. See Page 37 of [Parole and Community Service Residential Provider Manual](#), "Rent shall not exceed 30% of the offender's net income, up to a maximum of \$100 per week. "

58. Work Release programs are getting more residents who are unable to work – mental health, disabilities – or refuse to pay rent. Would there be any compensation for this?

Answer: These are factors for submission in your proposal and corresponding budget.

59. If a provider is an existing contractor under the Community Residential Work release component and has a multi year contract do they need to respond to this RFP to re procure services?

Answer: No. Existing Providers with contracts that have not reached their term (over 1 year remaining in the contract) do not need to respond to this RFP to procure those services contracted.

60. Can the department provide a minimum, maximum and median dollar amount currently being paid to Work Release programs for the position of Program Manager and direct care staff?

Answer: Due to the varying staff titles, roles, and responsibilities it would be difficult to provide reliable numbers to address this question.

61. Page 20, 2.d. (Page 20)- There is reference made to DPH licensing. Will DPH licensing be required of all Work Release programs? Will Work Release programs that previously been funded and have not been DPH licensed now be required to pursue that licensure?

Answer: The program site must be licensed in accordance with State regulations. It is the proposer's responsibility to work with the appropriate State agencies to determine the appropriate licensure level for the proposed program type.

62. Is DOC looking to develop new work release program and if so, is Bridgeport or any other cities a priority?

Answer: To be determined by the needs of the inmate population.

63. Page 23 – Residential Work Release – Women and Children Program – In the introduction it cites the need to include a Job Developer but doesn't make mention of on-site family reunification. While Social Reunification is listed on page 24, this section refers to the mothers and their children. Are there additional on-site family reunification requirements for this model too? If so, has DOC made additional funds available for additional staff to perform these functions?

Answer: Women & Children program is essentially a female work release program that allows children to live on-site with their mother. In addition to services available in traditional work release programs, offenders also receive assistance in: re-unification with their children; parenting classes; learning to care for a child while maintaining fulltime employment; and developing relationships with the Department of Children and Families when appropriate. Proposal budgets should include costs necessary to run this type of program.

64. Can the department provide the number of beds for the women/parent/ex-offender (recognizing children would be additional beds) it seeks to procure for the Residential Women and Children's program?

Answer: To be determined based on the needs of the inmate population. Proposals should be submitted based on beds available for DOC selection.

65. What has been the historical utilization rate of the Residential Women and Children's program (i.e. volume of referrals, is program historically at capacity)?

Answer: Utilization rates over the past year has been low, but services need to be available. Please note that this type of program shall not be specific to just women with children, that is, referrals must also be accepted for women without children; children can reside in the program full-time until they are school-aged, and for overnight visits thereafter; and child care services must be provided.

66. In the Work Release Women and Children model, please define what you mean by a "stable, on-going relationship" for the performance outcome measure on page 37 of the RFP?

Answer: Stable, on-going relationship may differ by client but is a positive consistent relationship with the child. This measure can be developed collaboratively with the Provider after proposal selection.

RENOVATIONS

67. Will there be funds available for renovations?

68. As an existing provider, we would not have start-up costs but want to propose upgrading furniture and equipment. How would you suggest we go about budgeting a one-time expense like this, which would be like a startup cost?

Answer to Question 67 & 68: Yes. Renovation costs can be included in Start-up costs for State Fiscal Year 2021 (July 1, 2020 – June 30, 2021) and should be listed within the "start-up cost" section of the budget and

clearly defined in the budget justification narrative. Preference will be given to proposals that have more efficient and economical total costs including start-up costs.

69. Can we include start-up/capital improvements costs in the budgets for Work Release Programs?

Answer: Please refer to [OPM Cost Standards](#) regarding allowable and unallowable expenses related to maintenance and repair, capital improvement and real property. Preference will be given to proposals that have more efficient and economical total costs including start-up costs. Start-up costs can only be included in year 1 (FY2021).

PER-DIEM BEDS

70. Per Diem beds – Is CT DOC looking for full services for these beds or just room and board? Under what circumstances does CT DOC envision needing per-diem beds (e.g., for pre-revocation clients, temporary loss of housing, or to increase CT DOC’s capacity)? What is the anticipated length of stay for individuals for per diem beds?

Answer: DOC is looking for full services for the per-diem beds (intake/orientation, case management). Per-diem beds are non-DOC beds, but additional, flexible beds to meet DOC needs. Individuals would be placed in per diem beds with programs that could meet the individual’s needs. The individual would remain in the program for as long as the bed was available or needed by DOC.

71. Does the department have any current per diem bed contractors and if so, what is the average cost per bed?

Answer: No this is a new program for DOC and subject to the availability of funding.

72. What has been the historical utilization rate of the per-diem bed program (i.e. average length of stay, volume of referrals)? Or, if this is not a current service type/there is not a current provider, what does the Department anticipate the average length of stay, volume of referrals, etc to be?

Answer: This is a new program for DOC. The anticipated stay at the per-diem beds is temporary for as long as the bed is available or needed by DOC.

73. Our agency would be able to provide per diem beds in the event that our residential transitional supportive housing program is not funded by CT DOC at the full number of beds proposed. Would the department consider a proposal with such a caveat?

Answer: Yes possibly, but DOC the Provider would need to have an agreement with DOC in place for a residential program.

ASSESSMENTS

74. Is there a cost for the SCORES assessment itself that should be budgeted?

Answer: There is no cost for the ORAS/SCORES, but the University of Cincinnati (UC) does require and charge for initial user training for the tools. Proposers need to research end user training expenses, consider sustainability options (Training for Trainers costs versus continued use of outside trainers), and include a plan and budget for implementation of the tools.

75. Is there a cost for the WRNA assessment itself that should be budgeted?

Answer: There is no cost for the WRNA itself. However, end-user training is required to use the tool. Proposers need to research end user training expenses, consider sustainability options (Training for Trainers costs versus continued use of outside trainers), and include a plan and budget for implementation of the WRNA.

76. Pg. 22- Will the DOC offer QA on SCORES and WRNA tools? Is there a cost that should be budgeted?

Answer: DOC will not be providing QA for ORAS/SCORES and WRNA. The proposal should include plans and a budget for QA.

77. Is there a cost to the QA from or the Developer on these tools that should be budgeted?

Answer: Proposers need to identify potential QA provider/s, obtain costs, and include a plan for QA and costs for QA in their budget. The University of Cincinnati offers QA, however, there are other providers that provide QA services (e.g., Community Solutions Inc., Bauman Consulting Group, LLC.)

78. Will DOC provide initial and ongoing training for the assessment tools? If not, will DOC provide funding for initial and ongoing training?

Answer: Providers not currently trained in SCORES and WRNA should provide a transition plan to using these tools. Staff training is an eligible expense and can be included in the proposal budget. Proposers need to research end user training expenses, consider sustainability options (Training for Trainers), and include a plan and budget for implementation of the tools.

79. Will we have to pay for a license for the assessment tools? If so, is that a one-time fee, or will we need to pay each time we use it.

Answer: There is no license fee. There are requirements and costs for end-user training. Proposers need to research end user training expenses, consider sustainability options (Training for Trainers costs versus continued use of outside trainers), and include a plan and budget for implementation of the tools.

80. Will DOC provide the SCORES training?

Answer: DOC will not be providing SCORES training. Staff training is an eligible expense and can be included in a proposed budget.

81. Does DOC offer training for SCORE and WRNA assessments? If not, can you suggest a training vendor and associated costs? Does DOC have an external trainer (like CSSD) for its community-based providers?

Answer: Providers should plan and budget for training in SCORES and WRNA. SCORES/ORAS Tools and training is available from The University of Cincinnati. WRNA training is available from the University of Nevada, Las Vegas (UNLV) or Bauman Consulting Group, LLC (Ashley Bauman).

82. Is the requirement to use SCORES a 'sometime in the future' requirement? Will LSI-R be acceptable for now? We have had no introduction or training for SCORES and upon search I cannot find a community corrections module.

Answer: Please refer to the additional guidance regarding ORAS (SCORES) at the beginning of this addendum. When researching for this tool search for ORAS with the University of Cincinnati. The LSI-R is acceptable but DOC is encouraging providers to transition to SCORES

83. Page 21, 2.g. Will the ASUS and LSI be considered as an evidence-based assessment tool moving forward? If yes, will DOC provide ongoing training and/or funding for staff training on these tools? If no, does DOC intend to provide training both initially and on ongoing basis for the SCORES and WRNA assessment tools effective July 1, 2020?

Answer: Staff Training is an eligible expense and can be included in a Provider's budget. For the criminogenic risk need assessment Providers are encouraged to move towards SCORES. ASUS and any other supplemental evidence based tools are acceptable.

84. Page 22-23 of the RFP states that "DOC assessment tool preferences are SCORES and the WRNA. Providers not currently trained in using SCORES should provide a transition plan for using these tools." According to <https://portal.ct.gov/BOPP/Research-and-Development-Division/SCORES/SCORES>

“According Researched in depth by the Board or Pardons and Paroles, the Ohio Risk Assessment System, originated at the University of Cincinnati and in use by the Ohio Department of Rehabilitation and Correction, offers all of these elements. The system has the capacity to inform decision making from judicial sentence to prison program assignment to release decisions by the Board and Wardens alike, to community supervision levels. The system was renamed with the SCORES acronym to individualize it to Connecticut’s criminal justice systems. The SCORES is a series of risk assessment tools can be used as standalone assessment s or integrated into a continuum of assessments that assists in sharing information across settings. To begin, only the DOC and Board will utilize the system, which has several assessment tools to be completed at certain points in the system.”

As SCORES has been individualized to Connecticut’s criminal justice systems and “has several assessment tools to be completed at certain points in the system”, will the Department provide instruction on which specific SCORES assessment tools it expects its contractors to administer as well as training on the SCORES? If the Department will provide training on the SCORES would it be able to provide a projected timetable for the training that we can use to inform our transition plan?

Answer: This Addendum provided additional information regarding SCORES and WRNA that addresses the assessment tools. Staff training for these tools is an eligible budget expense and can be included in a Providers budget.

85. What type of intake/orientation and development of individual service plan is expected for the per diem bed program? i.e. Does the DOC assessment tool preferences of the SCORES and the WRNA hold for this service type as well?

Answer: Per-diem beds placement will be made to place individuals into programs that are similar to the needs of the individual so that the program can provide the services and assessments needed.

86. On page 22, you mention that you want providers to use SCORES and WRNA for assessments. It is our understanding that the former is done by DOC and include in the referral package. I have not been informed that DOC is using WRNA.

87. In terms of transitioning to these tools, do you expect us to conduct these instruments rather than DOC or just be able to assess them?

Answer: DOC utilizes WRNA and is encouraging Providers to transition to these tools.

88. In either case, does DOC provide training on them? If yes, is there a cost to the training? If not, can you recommend trainers?

Answer: There is no cost for the ORAS/SCORES, but the University of Cincinnati (UC) does require and charge for initial user training for the tools. Proposers need to research end user training expenses, consider sustainability options (Training for Trainers costs versus continued use of outside trainers), and include a plan and budget for implementation of the tools. The University of Cincinnati is a training provider in ORAS/SCORES and Bauman Consulting Group, Inc. is a training provider in WRNA.

89. Is it the expectation that the proposer will receive a copy of these assessments that have been completed by the DOC Parole and Community Services staff and be trained to interpret and utilize them (SCORES and WRNA) to inform the services and service plan(s) offered at the proposed program?

Answer: No assessments will not be provided.

90. Is it the intention of the DOC that the proposer independently gain/purchase access to the multiple assessment components which comprise the SCORES and WRNA tools and be trained to administer and interpret them at the program despite these assessments being completed by parole previously and available as part of the referral?

Answer: DOC requires providers to establish a case plan and must conduct evidence based assessments. DOC encourages the use of SCORES and WRNA.

91. Is it the expectation of the DOC that the proposer select one of the components that make up the SCORES to administer at the program in addition to the full SCORES assessment that Parole will have already completed?

Answer: Please refer to the information provided at the beginning of this addendum which lists the components of SCORES.

92. Can you please provide information that will permit proposers to purchase access to the SCORES assessment system, is there a preferred vendor or will DOC provide this access, and if so, at what cost, if any?

Answer: Please see information provided at the beginning of this addendum regarding SCORES.

REHOUSING

93. In the rehousing program, is the contractor responsible for administering the rent subsidy, or requesting payment to the landlord from a third party?

Answer: In the rehousing program the Contractor/Provider will administer rental payments and will make payment directly to the landlord.

94. Pg. 29, 8- Is there a cost to the HMIS system associated with the Rapid Re-Housing Guidelines that should be budgeted?

Answer: No. All Data Collection will be reported to DOC, the HMIS system is not a component of DOC's Re-Housing Program.

95. Who pays for initial and ongoing training on HMIS?

Answer: N/A - HMIS is not a component of DOC's Re-Housing Program.

96. Pg. 30, g-Will funding from DOC for items noted in this section be paid directly to the landlord or utility company for example?

Answer: Eligible costs in this section include administrative as well as rental payments, security deposits, and utilities, etc. Payments made on behalf of the resident participant (direct payments) will be made directly from the Contractor/Provider to the Landlord, Utility Company.

97. Or, is it expected that the provider will pay directly to the landlord or utility company and be reimbursed by the DOC?

Answer: It is expected that the Provider will pay directly to landlord or utility companies. Re-Housing budgets should include an Administrative as well as programmatic piece estimated on 15-20 participants annually in the Re-Housing program. DOC will make prospective quarterly payments to the Provider for the direct payments covering rent, utilities, etc.

98. Should the cost of direct payments for the RH program be included in our budget or will that be funded separately through the HUD Continuum of Care awards or other source?

Answer: Yes the cost of direct payments should be included in the proposals budget. However, proposals that include other sources to fund direct payments will be considered.

99. Has DOC made arrangements with the sub-grant recipients and/or CCEH to receive clients through this current RFP process?

Answer: No. Referrals to the Re-Housing Program will be made by Parole.

100. Pg. 38, 5-Is the request for 2, 3 or 5 fiscal years?

Answer: A proposal should include the number of years that the Contractor/Provider commits to run the proposed program as described and budgeted in the proposal. As described in C. 3. Contract Offers on page 5 of the RFP, DOC will negotiate contracts up to 3 years with the option of a two-year extension (five-year maximum term).

101. Pg. 58-Note at bottom of page which specifically excludes individuals in transitional housing. The phrase "transitional housing" is defined differently by CCEH and the CANs as compared to DOC's definition. Based on this, will DOC clients who are in DOC residential programs be eligible for RRH funds under this RFP?

Answer: DOC Re-housing program while modeled off the Rapid Re-Housing Program is different and in cases where DOC has provided a definition, that definition is the one to adhere to.

102. Under the Re-Housing component, the RFP on page 29 references that services are only sought for the Hartford area...does this include surrounding towns as well?

Answer: Yes, the Hartford area includes Hartford and surrounding towns/cities.

103. For the Re-Housing services will the referrals come only from Parole or could they also come through the Coordinated Access Network system?

Answer: Referrals from the Re-Housing Program will come only from Parole.

104. Can funds be allocated directly into RH operating budget?

Answer: Budgets should include a direct operating funds for rent, utilities, etc. based on 15-20 program participants annually. DOC anticipates providing funding prospectively on a quarterly basis for these services.

105. For the Re-housing program, Page 30 of the RFP, bullet f) states that "financial assistance for RH clients when necessary will be provided by a DOC to providers for direct payment to third parties." How should this be reflected in the budget forms? i.e. should Re-housing program bidders exclude (not include) funding for financial assistance from its project budget?

Answer: Budget should include funding for program participant financial assistance. Funding can be listed in 6100 Client Subsidies section of the budget. Eg. line item 6104 for Housing expenses; 6150 Other Client Subsidies for participant utility expenses.

106. Is there a current contractor providing re-housing services to the Department? If so, who is the contractor?

Answer: No, this is a new program to DOC.

107. There appears to be some discrepancies concerning the way participants will be referred to the Re-housing Program. The proposal says that all referrals will be from Parole. The RFP also says that agencies doing Rehousing through this grant need to follow the CT Rapid Rehousing Guidelines which says that referrals are via the Coordinated Access Network (CAN).

Answer: The RFP indicates that the RH Program will follow the CT Rapid Rehousing Guidelines EXCEPT for referrals, data collection and provision of financial assistance. Therefore, referrals to this program will come only from Parole.

108. It is our understanding that a person on Parole must have housing to exit incarceration. This would make the offender ineligible for the CAN.

Answer: The purpose of this program is to establish housing so that additional individuals can be released to Parole with housing.

109. Should we disregard this part of the guidelines? Disregard that the referrals will be from parole? Mainly through transitional housing/halfway houses (particularly when preference is given to people who are employed or already receiving benefits.

Answer: Referrals to the RH program will be made by Parole only.

110. Is DOC administering the Rehousing (Rapid Rehousing) program directly? Are federal funds involved? If not, what other state agency or Non-profit is involved?

Answer: At this time RH program funding is from DOC. No federal funding, other state agency or non-profit is involved. The Department is looking for creative proposals and encourages proposals that have the ability to leverage funding and involve community relationships.

111. Are client-based room and board fees applicable? For which programs? Is this a percentage of earned income or a set fee above and beyond "pocket money"? Does this count a program income?

Answer: The Department assumed that this question was related to the Re-Housing program, but does not understand this question. If this question was related to a Work Release program and subsistence/offender rent, please see the answer to question #48 and the Department's Parole and Community Services Residential Provider Manual.

112. Question regarding the Re-Housing Program: Do we include "Client Service" monies in our budget? There is some confusion because of the fiduciary structure that DOC is putting in place.

Answer: The Department is unsure of your meaning of "Client Service" monies in this question. If client service is direct payments for rent, utilities on behalf of the program participant, those costs should be included in the budget based on the parameters of assisting 15-20 participants annually in the Hartford area. If client services are for case management, those costs should also be included in the budget.

FIDUCIARY SERVICES

113. Fiduciary Service: Details are provided for ASIST and Per-Diem: 75 checks are written annually for under the ASSIST program and 0-100 checks are estimated for the Per-diem program. Would you please provide how many checks in total are estimated to be written annually for all services? Would you please provide the number of checks written in the previous year?

Answer: The Per-diem program is a new program so there is no number of checks written in the previous year. For the ASIST program 75 checks were written in the previous year. Our estimate for all services is ~175 checks per year.

114. Fiduciary Service: Please describe the requirements for maintaining monthly reports for fund balance tracking?

Answer: In addition to normal Account/Bank Statement reconciliations the Provider must submit monthly and quarterly utilization logs to DOC detailing transitions (including payee information, checks written, deposits, running total and ending balance).

115. Fiduciary Service: Will receiving entities/providers be pre-qualifying or pre-approving expenses?

Answer: No pre-qualifying or pre-approving of expenses is required by the Provider, the Provider will be given the information need to issue checks.

116. Fiduciary Services. Who is responsible to issue 1099's to receiving entities/providers?

Answer: The Provider is responsible for issuing 1099's to receiving entities.

117. Fiduciary Service: How timely do the funds need to be issued? (please define upon request or time sensitive).

Answer: Upon request means that a Provider will receive a notice/email from DOC to issue a check. Time sensitive means within 24-48hrs of DOC's notice.

118. Fiduciary Services: What documentation will be provided as back up to support the disbursement? Is a separate bank account required?

Answer: DOC will provide the notification/documentation to support disbursements. A separate account for "Fiduciary Services" must be created.

119. Fiduciary Services: Can disbursement be handled from a central office or does it need to be on location?

Answer: Disbursements can be handled from a central office.

120. Fiduciary: Given the time-sensitive nature of re-housing (aka rapid rehousing) can the selected agency (ies) make their own payments rather than awaiting approval and check-writing by the Fiduciary Services provider?

Answer: The Re-Housing (RH) program would not be a program covered by Fiduciary Services. The RH program budget would include funding for direct participant payments such as rent, therefore the Provider would be making payments out of that program budget. DOC anticipates providing quarterly prospective payments for that program.

121. For Non-Residential/Parole Services type Fiduciary (F) would the Department be able to provide the number of checks anticipated to be written annually for the Re-Housing Program? (We understand under the ASIST Program approximately 75 checks are written annually. A range of 0-100 checks are estimated for the Per-diem program annually)

Answer: The Re-Housing program is not a program covered by Fiduciary Services. The Re-Housing program expects to serve between 15 to 20 participants per year. The number of annual checks is to be determined, but should factor eligible expenses for security deposits and monthly rental and utility payments.

122. Is there a current contractor providing fiduciary services to the Department? If so, who is the contractor?

Answer: Community Partners in Action has been providing fiduciary services to the Department.

123. For the budget for fiduciary services is the department expecting a detailed budget (i.e. with staff allocated to the program, office supplies, etc) or just an overall administration rate?

Answer: The Department is expecting a detailed budget.

EMPLOYMENT SERVICES, EDUCATIONAL, VOCATIONAL COORDINATOR

124. Is the Department looking for an identified vendor under the Employment Education Vocational Coordinator component to cover the entire state?

Answer: The Department is seeking creative proposals to meet the need of an individual and/or agency to provide Employment, Educational and/or Vocational guidance, support and linkages to parolees for the entire State.

125. Is the DOC is requiring the bidders for the Employment (Non-residential) service to cover all the cities listed or if we can bid on just one?

126. May an agency bid on only one city or is it expected that all the cities in the RFP are provided by one organization?

Answer Question 125 & 126: DOC is seeking proposals to cover the entire state/all Parole Offices.

127. For the EEV Coordinator solicitation, what percentage of the caseload snapshot provided is active and using services? What level of service is expected for the “employed” caseload?

Answer: The percentage of caseloads receiving/using services in snapshot is not available. Parole Officers are currently coordinating any services. DOC is looking for proposals that address the # of unemployed by models that efficiently provide services to the largest number of parolees. Proposals should indicate how many can be served.

128. The RFP suggests that responses to the EEV Coordinator solicitation provide pricing at multiple service levels. Is it acceptable to provide pricing by location instead of by service level?

Answer: The Department is seeking creative proposals that maximize the budget and services provided to parolees.

129. Is there an expected client/staff ratio for the EEV Coordinator response?

130. Does DOC recommend or suggest a employment specialist to client ratio?

Answer to Question 129 & 130: Proposals should identify the client/staff ratio. The Department is looking for recommendations.

131. How do we determine the number of individuals to be served? Is it by the total PO caseload in the city or the total of unemployed (only) in the city or some other number?

Answer: Proposals should indicate how many can you serve looking at the # of unemployed

132. Does the assessment need to be an approved instrument or are customized tools acceptable?

Answer: The Department is looking for job/education/vocational assessment tool recommendations. Examples of identified tools should be provided. Tools should be evidence based and best practice.

133. What is the anticipated length of time for individuals to be receiving services?

Answer: Services should be provided up to the time the individual has a job/enrolled in educational/vocational programs, or no longer under DOC supervision and/or connected to appropriate entitlements.

134. Is there any guideline for the cost (per slot) for these services?

Answer: Currently there are no guidelines.

135. Is DOC looking to have one provider provide service to the entire state or can a provider just pick one or two areas to provide the service for example just New Haven and Norwich.

Answer: DOC is looking to contract with one Provider to provide services for the entire State. For example, while DOC will only contract with one provider, that provider can partner with other entities to provide services in their proposals. An agreement between the service providers would be required.

136. If the provider is proposing service in one area for example New Haven, in the monthly caseload example given in the proposal would the provider provide pricing for the 352 individuals on the monthly caseload or the 123 individuals of the # unemployed.

Answer: The caseload priority would be for the 123 unemployed individuals. If time permits assistance can be provided to others.

137. Will an agency be penalized if it provides a proposal for delivery of services out of just the providers location instead of both the providers space and Parole District office space.

Answer: No, the Department is seeking the most cost advantageous proposals that provide the required services.

138. Does DOC have a suggested Evidence based practice for employment services?

Answer: Not at this time.

139. For the number served for employment, what percentage of employed/unemployed have traditionally been served with services per area

Answer: Currently any services includes linkages to community services are being coordinated by Parole Officers.

140. If bidding for employment for more than one location, are separate applications required?

Answer: DOC is looking for proposals and wants to contract with a Provider for services that cover the entire State. Providers can partner with other entities to provide services in their proposals.

MENTAL HEALTH

141. What are the specifics for the Mental Health program? (Not listed on pages 22-30 – there is a behavioral health program but that is “BIP” specific. Please advise.

Answer: The Department apologizes for this omission. The service/treatment components for the Residential Mental Health program have been added per this Addendum in Section III.B.2. 2-1i(9).

SUBSTANCE ABUSE

142. If we operate a drug treatment program for CSSD/DMHAS, does that count as experience when applying for drug tax beds or will we need to get letters of reference

Answer: Yes this counts as substance abuse experience and letters of reference are needed.

143. How many drug treatment beds is DOC looking to find and are there specific cities or regions you are targeting?

Answer: To be determined based on the inmate population needs.

144. We are planning to add DOC beds to an existing Drug treatment program. Would this be considered a new program or an expansion?

Answer: If the current drug treatment/substance abuse beds are a DOC contracted program this would be considered a program expansion. If these beds are not DOC contracted beds the proposal would be a new program.

TRANSITIONAL SUPPORTIVE HOUSING PROGRAM

145. For transitional supportive housing programs savings account maintenance is required (page 26 of the RFP), however in section 4.d. Performance Outcome Measures there is no performance outcome measure for this service as there is in the work release programs (where 95% of eligible offenders will maintain savings accounts held in their name, by contractor or by conservator). Does the Department expect transitional supportive housing programs to maintain savings accounts in clients’ names? If so, what is the allowability of collecting “program fees” that are returned to the client (in a bank account in their name) upon discharge?

Answer: DOC allows offenders to work in transitional housing and therefore should establish savings account. Subsistence (offender rent) collection is allowed. Collecting “program fees” that are returned to the client (in a bank account in their name) upon discharge is not allowed.

SCATTERED SITE SUPPORTIVE HOUSING

146. For a scattered site proposal, how specific does site control need to be.

Answer: The Provider should have a network of landlords that it works with for the scattered site apartments. We are not expecting the proposer to own these properties, but should be able to identify the number of apartments they are able to secure for this program.

Form #4A: Proposed Annual Program Budget (with FY2021 Start-up Costs)

Proposer Name: _____

Proposed Program: _____

Served/#of Beds: _____

Budget Year: FY2021: July 1, 2020 - June 30, 2021

Salary Detail:

Direct Client Services Staff:	Number FTE's	Average Annual Salary	Annual Line Total
Program Director		\$ -	\$ -
Counselors		\$ -	\$ -
Staff Supervisor		\$ -	\$ -
Client Supervisor/Monitor		\$ -	\$ -
Job Developer		\$ -	\$ -
Other:		\$ -	
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Client Salaries:			\$ -

Direct Support Staff

Cook		\$ -	\$ -
Dirver		\$ -	\$ -
Security		\$ -	\$ -
Maintenance/Custodian		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Service Support Salaries:			\$ -
Total Direct Salaries:			\$ -

Account Number and Description	Cost
Hyperlink to State Account Definitions Account Definitions	
5000 DIRECT EXPENSES	
5100 SALARIES (As detailed above)	\$ -
5101 Staff Salaries & Wages	\$ -
5102 Overtime	\$ -
5200 FRINGE BENEFITS	\$ -
5400 CONTRACTUAL SERVICES	\$ -
5401 Medical Professional	\$ -
5402 Behavioral Health Professional	\$ -
5403 Contracted Workers - Non-Payroll	\$ -
5404 Contracted Direct Client Care	\$ -
5405 Pass-through Program Funding	\$ -
5406 Audit	\$ -
5407 Legal	\$ -
5408 Accounting	\$ -

5409 Payroll Processing	\$	-
5410 Webinar Tech/Computer Support	\$	-
5411 Translation & Interpretation	\$	-
5412 Drug Testing	\$	-
5440 Other Contractual (narrative)	\$	-
5500 TRANSPORTATION	\$	-
5501 Staff Travel Reimbursement	\$	-
5502 Vehicle Leases	\$	-
5503 Vehicle Maintenance	\$	-
5504 Mileage Reimbursement	\$	-
5550 Other Transport (narrative)	\$	-
5600 MATERIALS AND SUPPLIES	\$	-
5601 Food	\$	-
5602 Lab & Medical Supplies	\$	-
5603 Equipment (Less than \$5,000)	\$	-
5604 Leased Office Equipment	\$	-
5605 Printing, Publication and Reproduction	\$	-
5606 Postage	\$	-
5607 Outreach/Program Supplies	\$	-
5660 Other Materials (specify in narrative)	\$	-
5700 FACILITIES	\$	-
5701 Rent & Real Estate Taxes	\$	-
5702 Security	\$	-
5703 Maint & Repair - Facility/Plan	\$	-
5704 Utilities	\$	-
5705 Janitorial	\$	-
5770 Other Facilities (narrative)	\$	-
	\$	-
5800 CAPITAL EXPENSES (> \$5,000)	\$	-
5801 Capital Equipment	\$	-
5802 Depreciation	\$	-
5803 Office Equipment	\$	-
5880 Other Capital (specify in narrative)	\$	-
5900 OTHER EXPENSES	\$	-
5901 Communications	\$	-
5902 Insurance	\$	-
5903 Housekeeping	\$	-
5904 Conferences	\$	-
5905 Staff Training	\$	-
5906 Provider Employee Drug Testing/Bkgd Checks	\$	-
5907 Lease Office Equipment	\$	-
5908 Office Supplies	\$	-
5909 Telephone-Cellphone	\$	-
5910 Training Materials	\$	-
5911 Printing and Advertising	\$	-
5912 Membership Dues & Subscription	\$	-
5916 Interest Cost-Building and Land Improvements	\$	-

5917 Working Capital Interest	\$	-
5990 Other (specify in narrative)	\$	-
6100 CLIENT SUBSIDIES	\$	-
6101 Transportation	\$	-
6102 Nutrition/Food Vouchers	\$	-
6104 Housing	\$	-
6105 Personal Items	\$	-
6107 Client Activities	\$	-
6150 Other Client Subsidies (specify in narrative)	\$	-
TOTAL DIRECT EXPENSES	\$	-
7000 INDIRECT EXPENSES		
7100 ADMINISTRATIVE & GENERAL	\$	-
7110 Staff Salaries & Wages	\$	-
7120 Fringe Benefits	\$	-
7150 All Other A&G	\$	-
TOTAL EXPENSES	\$	-
4000 INCOME		
4100 CONTRACT FUNDING		
4102 Federal/Other Funds	\$	-
4200 Other State Agency Funding (ld in narrative)	\$	-
4300 OTHER INCOME	\$	-
4301 Direct Federal Funds	\$	-
4302 Direct Private Foundation Grants	\$	-
4304 Investment/Interest Income	\$	-
4305 Client/Participant Fees	\$	-
4307 United Way	\$	-
4313 Fundraising	\$	-
4315 Insurance	\$	-
4316 Other (specify in narrative)	\$	-
4317 Other (specify in narrative)	\$	-
4318 Other (specify in narrative)	\$	-
	\$	-
TOTAL ALL NON-DOC REVENUE	\$	-
ANNUAL REQUESTED DOC FUNDING	\$	-

START UP COSTS FY2021 ONLY - Itemize on the following lines:

	\$	-
	\$	-
	\$	-
	\$	-
TOTAL START UP COSTS:	\$	-

NON DOC START UP FUNDING	\$	-
DOC START UP FUNDING REQUESTED	\$	-

TOTAL DOC FUNDING REQUESTED FOR 2021: ANNUAL & START UP	\$	-
--	-----------	----------

Form #4B: Proposed Annual Program Budget

Proposer Name: _____

Proposed Program: _____

Served/# of Beds: _____

Budget Year: FY _____

Salary Detail:

Direct Client Services Staff:	Number FTE's	Average Annual Salary	Annual Line Total
Program Director		\$ -	\$ -
Counselors		\$ -	\$ -
Staff Supervisor		\$ -	\$ -
Client Supervisor/Monitor		\$ -	\$ -
Job Developer		\$ -	\$ -
Other:		\$ -	
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Client Salaries:			\$ -

Direct Support Staff

Cook		\$ -	\$ -
Dirver		\$ -	\$ -
Security		\$ -	\$ -
Maintenance/Custodian		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Service Support Salaries:			\$ -
Total Direct Salaries:			\$ -

Account Number and Description	Cost
Hyperlink to State Account Definitions Account Definitions	
5000 DIRECT EXPENSES	
5100 SALARIES (As detailed above)	\$ -
5101 Staff Salaries & Wages	\$ -
5102 Overtime	\$ -
5200 FRINGE BENEFITS	\$ -
5400 CONTRACTUAL SERVICES	\$ -
5401 Medical Professional	\$ -
5402 Behavioral Health Professional	\$ -
5403 Contracted Workers - Non-Payroll	\$ -
5404 Contracted Direct Client Care	\$ -
5405 Pass-through Program Funding	\$ -
5406 Audit	\$ -
5407 Legal	\$ -
5408 Accounting	\$ -
5409 Payroll Processing	\$ -

5410 Webinar Tech/Computer Support	\$	-
5411 Translation & Interpretation	\$	-
5412 Drug Testing	\$	-
5440 Other Contractual (narrative)	\$	-
5500 TRANSPORTATION	\$	-
5501 Staff Travel Reimbursement	\$	-
5502 Vehicle Leases	\$	-
5503 Vehicle Maintenance	\$	-
5504 Mileage Reimbursement	\$	-
5550 Other Transport (narrative)	\$	-
5600 MATERIALS AND SUPPLIES	\$	-
5601 Food	\$	-
5602 Lab & Medical Supplies	\$	-
5603 Equipment (Less than \$5,000)	\$	-
5604 Leased Office Equipment	\$	-
5605 Printing, Publication and Reproduction	\$	-
5606 Postage	\$	-
5607 Outreach/Program Supplies	\$	-
5660 Other Materials (specify in narrative)	\$	-
5700 FACILITIES	\$	-
5701 Rent & Real Estate Taxes	\$	-
5702 Security	\$	-
5703 Maint & Repair - Facility/Plan	\$	-
5704 Utilities	\$	-
5705 Janitorial	\$	-
5770 Other Facilities (narrative)	\$	-
	\$	-
5800 CAPITAL EXPENSES (> \$5,000)	\$	-
5801 Capital Equipment	\$	-
5802 Depreciation	\$	-
5803 Office Equipment	\$	-
5880 Other Capital (specify in narrative)	\$	-
5900 OTHER EXPENSES	\$	-
5901 Communications	\$	-
5902 Insurance	\$	-
5903 Housekeeping	\$	-
5904 Conferences	\$	-
5905 Staff Training	\$	-
5906 Provider Employee Drug Testing/Bkgd Checks	\$	-
5907 Lease Office Equipment	\$	-
5908 Office Supplies	\$	-
5909 Telephone-Cellphone	\$	-

5910 Training Materials	\$	-
5911 Printing and Advertising	\$	-
5912 Membership Dues & Subscription	\$	-
5916 Interest Cost-Building and Land Improvements	\$	-
5917 Working Capital Interest	\$	-
5990 Other (specify in narrative)	\$	-
6100 CLIENT SUBSIDIES	\$	-
6101 Transportation	\$	-
6102 Nutrition/Food Vouchers	\$	-
6104 Housing	\$	-
6105 Personal Items	\$	-
6107 Client Activities	\$	-
6150 Other Client Subsidies (specify in narrative)	\$	-
TOTAL DIRECT EXPENSES	\$	-
7000 INDIRECT EXPENSES		
7100 ADMINISTRATIVE & GENERAL	\$	-
7110 Staff Salaries & Wages	\$	-
7120 Fringe Benefits	\$	-
7150 All Other A&G	\$	-
TOTAL EXPENSES	\$	-
4000 INCOME		
4100 CONTRACT FUNDING		
4102 Federal/Other Funds	\$	-
4200 Other State Agency Funding (ld in narrative)	\$	-
4300 OTHER INCOME	\$	-
4301 Direct Federal Funds	\$	-
4302 Direct Private Foundation Grants	\$	-
4304 Investment/Interest Income	\$	-
4305 Client/Participant Fees	\$	-
4307 United Way	\$	-
4313 Fundraising	\$	-
4315 Insurance	\$	-
4316 Other (specify in narrative)	\$	-
4317 Other (specify in narrative)	\$	-
4318 Other (specify in narrative)	\$	-
	\$	-
TOTAL ALL NON-DOC REVENUE	\$	-
TOTAL DOC ANNUAL FUNDING REQUESTED	\$	-

Form #4C: Summary of Total Proposal Costs

This form represents a summary of the DOC funding requested for the number of years a proposer is offering such program.

(Note: Contract offers will be made up to three years with the option of a two-year extension at the discretion of DOC)

Proposer Name: _____

Program Name: _____

Served/# Beds _____

FULL PROGRAM

FY2021	Year 1	\$	-
FY2022	Year 2	\$	-
FY2023	Year 3	\$	-
FY2024	Year 4	\$	-
FY2025	Year 5	\$	-

TOTAL REQUESTED DOC FUNDING:	\$	-
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MINIMUM PROGRAM REQUIRED TO BE SUSTAINABLE

FY2021	Year 1	\$	-
FY2022	Year 2	\$	-
FY2023	Year 3	\$	-
FY2024	Year 4	\$	-
FY2025	Year 5	\$	-

TOTAL REQUESTED DOC FUNDING FOR SUSTAINABILITY:	\$	-
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PROCUREMENT NOTICE

State of Connecticut Department of Correction Legal Notice

Notification of a procurement opportunity for **Community Residential Services/Non Residential Parole Services** required by the Connecticut Department of Correction (hereinafter the "DOC" or "Department") is available for review, download, and printing on the State Contracting Portal at https://biznet.ct.gov/SCP_Search/Default.aspx

Procurement notices may also be accessed on the Department of Correction's web site at <https://portal.ct.gov/DOC/Common-Elements/Common-Elements/RFP>.

The Department of Correction is an Equal Opportunity/Affirmative Action Employer. Questions may be directed to the Contracts Administration Office at (860) 692-7886.

Deaf and hearing-impaired individuals may use a TDD by calling 1-800-842-4524.

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I. GENERAL INFORMATION

■ A. INTRODUCTION

1. RFP Name or Number. DOC-RES/NON-RES/PS-2020-SM

2. **Summary.** The purpose of this request is to seek proposal in order to potentially procure the following residential programs for males and females statewide, based on available funding:

- a. Work release;
- b. Work release -Women and Children Program;
- c. Substance Abuse;
- d. Mental Health;
- e. Transitional Supportive Housing Program;
- f. Scattered-Site Supportive Housing;
- g. Behavioral Intervention Program;
- h. Per Diem Beds;
- i. Re-Housing

This request will also potentially procure the following non-residential services, based on available funding:

- a. Fiduciary services
- b. Employment Services, Educational and Vocational Coordinator

3. **Synopsis (Optional).** Not Available

4. **Commodity Codes.** The services that the Department wishes to procure through this RFP are as follows:

2000: Community and Social Services

■ B. ABBREVIATIONS / ACRONYMS / DEFINITIONS

BFO	Best and Final Offer
C.G.S.	Connecticut General Statutes
CHRO	Commission on Human Rights and Opportunities (CT)
Contractor	A private provider organization, CT State agency, municipality or individual that enters into a contract with the Department as a result of this RFP
CT	Connecticut
DAS	Department of Administrative Services (CT)
Department	Department of Correction (CT)
DMHAS	Department of Mental Health and Addiction Services (CT)
DOC/Department	Department of Correction (CT)
DPH	Department of Public Health (CT)
FOIA	Freedom of Information Act (CT)
IRS	Internal Revenue Service (U.S.)
LOI	Letter of Intent
OAG	Office of the Attorney General (CT)
OPM	Office of Policy and Management (CT)
OSC	Office of the State Comptroller (CT)

P.A.	Public Act (CT)
Proposer	A private provider organization, CT State agency, municipality or individual that has submitted a proposal to the Department in response to this RFP
Prospective Proposer	A private provider organization, CT State agency, municipality or individual that may submit a proposal to the Department in response to this RFP, but has not yet done so
RFP	Request for Proposals
SEEC	State Elections Enforcement Commission (CT)
U.S.	United States

■ C. INSTRUCTIONS

1. **Official Contact.** The Department has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Department. Proposers, prospective proposers, and other interested parties are advised that any communication with any other Department employee(s) (including appointed officials) or personnel under contract to the Department about this RFP is strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: Suzanne Mazzotta, Contracts Administration Office
Address: Connecticut Department of Correction
24 Wolcott Hill Road, Wethersfield, CT 06109
Phone: 860-692-7886
E-Mail: DOC.RFP@ct.gov

Respondents must include the RFP title (DOC-RES/NON-RES/PS-2020-SM) in the subject line of any emails sent to the official contact in order to further assist in properly identifying the RFP to which proposal is being submitted. Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

2. **RFP Information.** The RFP, addenda to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:
 - Department's Web Site
<https://portal.ct.gov/DOC/Common-Elements/Common-Elements/RFP>
 - State Contracting Portal
https://biznet.ct.gov/SCP_Search/

It is strongly recommended that any proposer or prospective proposer interested in this procurement subscribe to receive e-mail alerts from the State Contracting Portal. Subscribers will receive a daily e-mail announcing procurements and addenda that are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFP.

Printed copies of all documents are also available from the Official Contact upon request.

3. **Contract Offers.** Through this RFP process, the Department shall offer of the right to negotiate a contract to one or more selected proposer(s), subject to anticipated total

funding available and program need. Additional proposals may be selected for funding at a later date, subject to availability of additional funding and program need. The Department anticipates the following:

- Total Funding Available: Confidential
- Maximum Contract: To be determined
- Number of Contracts: To be determined
- Contract Cost: Confidential
- Contract Term: Up to three (3) years with the option of a two-year extension at the discretion of the Department

4. Eligibility. Pursuant to C.G.S. § 18-101i, the Department must offer Purchase of Service contracts only to private nonprofit organizations, state agencies or units of local government

The Department reserves the right to reject the submission of any proposer in default of any current or prior contract.

5. Minimum Qualifications of Proposers. To be eligible to submit a response to this Request for Proposals a proposer must have a minimum of three (3) years' demonstrated experience providing the requested services to formerly incarcerated individuals.

6. Procurement Schedule. See below. Dates after the due date for proposals ("Proposals due") are target dates only (*). The Department may amend the schedule, as needed. Any change will be made by means of an addendum to this RFP and will be posted on the State Contracting Portal and the Department's web site.

- RFP Released: Feb 3, 2020
- **MANDATORY** Letter of Intent Due: Feb 24, 2020, 3:00 p.m. Eastern Time
- Deadline for RFP Questions: Mar 2, 2020, 3:00 p.m. Eastern Time
- Answers Released: Mar 9, 2020
- Proposals Due: **Mar 26, 2020**, 3:00 p.m. Eastern Time
- (*) Proposer Selection: April 20, 2020
- (*) Start of Contract Negotiations: April 27, 2020
- (*) Start of Contract(s): July 1, 2020

7. Letter of Intent. A Letter of Intent (LOI) is **required** by this RFP. Proposers must use the LOI form provided by the Department in Section V. Forms. The LOI is non-binding and does not obligate the sender to submit a proposal. The LOI must be submitted to the Official Contact by e-mail (preferred) or U.S. mail by the deadline established in the Procurement Schedule. It is the sender's responsibility to confirm the Department's receipt of the LOI. **Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.**

8. Inquiry Procedures. All questions regarding this RFP or the Department's procurement process must be submitted to the Official Contact by e-mail (preferred) or U.S. mail, before the deadlines specified in the Procurement Schedule. The early submission of questions is encouraged. Questions will not be accepted or answered verbally – neither in person nor over the telephone. All questions received before the deadlines will be answered. However, the Department will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFP or the procurement process will not be answered. At its discretion, the Department may or may not respond to questions received after the deadlines. The Department may

combine similar questions and give only one answer. All questions and answers will be compiled into a written addendum to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the addendum and duly noted as such. The Department will release the answers to questions on the dates established in the Procurement Schedule. The Department will publish any and all amendments and addenda to this RFP on the State Contracting Portal and the Department's web site. At its discretion, the Department may distribute any amendments and addenda to this RFP electronically to prospective proposers who submitted a Letter of Intent. **Proposals must include a signed Addendum Acknowledgement, which will be placed at the end of any and all addenda to this RFP.**

9. Proposal Due Date and Time. The Official Contact is the **only authorized recipient** of proposals submitted in response to this RFP. Proposals must be **received** by the Official Contact on or before the due date and time:

- Due Date: **March 26, 2020**
- Time: 3:00 p.m. Eastern Time

Faxed or e-mailed proposals will not be evaluated. The Department will not accept a postmark date as the basis for meeting the proposal due date and time. The Department suggests the proposer use certified or registered mail, or a delivery service such as United Parcel Service (UPS) to deliver the proposal. When hand-delivering proposals by courier or in person, allow extra time due to building security procedures. Proposals received after the due date and time may be accepted by the Department as a clerical function, but they will not be evaluated.

Proposals shall not be considered received until they are in the hands of the Official Contact or another representative of the Contracts Administration Office designated by the Official Contact. At the discretion of the Department, late proposals may be destroyed or retained for pick-up by the proposers.

An acceptable submission must include the following:

- one (1) original proposal;
- five (5) conforming copies of the original proposal; and
- one (1) conforming electronic copy of the original proposal by e-mail (preferred) or on USB drive.

The original proposal must carry original signatures and be clearly marked on the cover as "Original." Unsigned proposals will not be evaluated. The original proposal and each conforming copy of the proposal must be complete, properly formatted and outlined, and ready for evaluation by the Evaluation Team. **The electronic copy of the proposal must be compatible with Microsoft Office Word 2013 or Microsoft Office Excel 2013.** If any of the required Appendices and Forms identified in Section IV are not compatible with Microsoft Office Word or Microsoft Office Excel, they must be scanned and submitted in Portable Document Format (PDF) or similar file format.

10. Multiple Proposals. The submission of multiple proposals is an option with this procurement. **A proposer may submit for more than one geographic area/or program type. Proposals for more than one geographic area and/or program type may not be combined.** Each proposal must be self-contained and packaged separately.

11. Declaration of Confidential Information. Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information

Act (FOIA), the Privacy Act, and all rules, regulations, and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL. In Section C of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released; and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).

12. Conflict of Interest - Disclosure Statement. Proposers must include a disclosure statement concerning any current business relationships (within the past three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be in the best interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for its personal or corporate benefit. The Department will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement: *"[name of proposer] has no current business relationship (within the past three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

■ D. PROPOSAL FORMAT

1. **Required Outline.** All proposals must follow the required outline presented in Section IV. Proposal Outline. Proposals that fail to follow the required outline will be deemed, at the discretion of the Department, non-responsive and will not be evaluated.
2. **Cover Sheet.** The Cover Sheet is Page 1 of the proposal. Proposers must use the Cover Sheet form provided by the Department in Section V. Forms.
3. **Table of Contents.** All proposals must include a Table of Contents that conforms to the required proposal outline. (See Section IV.)
4. **Executive Summary.** Proposals must include a high-level summary, not exceeding two (2) pages, of the main proposal and cost proposal. The Executive Summary shall include, **but not be limited to include:**
 - a. **proposer's** minimum of three (3) years' demonstrated experience providing the requested services to formerly incarcerated individuals;
 - b. **proposed program type;**
 - c. **program capacity including number of beds and gender; and**
 - d. **location of program.**
5. **Attachments.** Attachments other than the required Appendices and Forms identified in Section IV are not permitted and will not be evaluated. Further, the required Appendices and Forms must not be altered or used to extend, enhance or replace any requirement of this RFP. Failure to abide by these instructions will result in disqualification.

6. **Style Requirements.** The original proposal and each of the five (5) conforming copies of the original proposal must conform to the following specifications:

Binding Type: 3-ring binder or binder clip
Dividers: between all sections, with names
Paper Size: 8½" x 11", "portrait" orientation
Print Style: 2-sided
Font Size: Minimum of 11-point
Font Type: Arial or Tahoma
Margins: One inch (1")
Line Spacing: Single-spaced

7. **Pagination.** The Legal Name of the proposer must be displayed in the header of each page. All pages, from the Cover Sheet through the required Appendices and Forms, must be numbered consecutively in the footer.
8. **Packaging and Labeling Requirements.** All proposals must be submitted in sealed envelopes or packages and be addressed to the Official Contact. The Legal Name and Address of the proposer must appear in the upper left corner of the envelope or package. The RFP Name or Number must be clearly displayed on the envelope or package: **DOC-RES/NONRES/PS-2020-SM.**

Any received proposal that does not conform to these packaging or labeling instructions will be opened as general mail. Such a proposal may be accepted by the Department as a clerical function, but will not be evaluated. At the discretion of the Department, such a proposal may be destroyed or retained for pick-up by the proposer.

■ E. EVALUATION OF PROPOSALS

1. **Evaluation Process.** It is the intent of the Department to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful proposers, and offering the right to negotiate a contract, the Department will conform with its written procedures for POS procurements (pursuant to C.G.S. § 4-217) and to the State's Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85).
2. **Evaluation Team.** The Department will designate an Evaluation Team to evaluate proposals submitted in response to this RFP. The contents of all submitted proposals, including any confidential information, will be shared with the Evaluation Team. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. Attempts by any proposer (or representative of any proposer) to contact or influence any member of the Evaluation Team may result in disqualification of the proposer.
3. **Minimum Submission Requirements.** All proposals must comply with the requirements specified in this RFP. To be eligible for evaluation, proposals must (a) be received on or before the due date and time; (b) meet the Proposal Format requirements; (c) follow the required Proposal Outline; and (d) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. The Department will reject any proposal that deviates significantly from the requirements of this RFP.
4. **Evaluation Criteria.** Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective

standards that the Evaluation Team will use to evaluate the technical merits of the proposals. Only the criteria listed below will be used to evaluate proposals. The criteria are weighted according to their relative importance. The weights are disclosed below.

Criteria	Possible Points
Organizational Profile	20
Scope of Services	30
Staffing Plan	10
Data/Technology/Reporting Requirements	10
Work Plan	20
Financial Requirements	10
Budget Requirements	20
Appendix	10
Total Possible Points	130

Note 1: As part of its evaluation, the Evaluation Team will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

Note 2: If the proposer has provided contracted services to the Department within the past three (3) years, the Evaluation Team will use the proposer's submitted Performance Outcome Measure reports for the past three (3) years to consider the extent to which the proposer's DOC-contracted programs met or exceeded performance outcome measures. The Evaluation Team will also consider whether the proposer has been on enhanced monitoring status at any time during the past three (3) years.

5. **Proposer Selection.** Upon completing its evaluation of proposals, the Evaluation Team will submit the rankings of all proposals to the Department head. The final selection of a successful proposer is at the discretion of the Department head. Any proposer selected will be so notified and offered an opportunity to negotiate a contract with the Department. Such negotiations may, but will not automatically, result in a contract. Pursuant to Governor M. Jodi Rell's Executive Order No. 3, any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at the Department's discretion, about the outcome of the evaluation and proposer selection process.
6. **Debriefing.** Within ten (10) days of receiving notification from the Department, unsuccessful proposers may contact the Official Contact and request information about the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days. If unsuccessful proposers still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Department to discuss the evaluation process and their proposals. If held, the debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. The Department will schedule and hold the debriefing meeting within fifteen (15) days of the request. The Department will not change, alter or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

7. **Appeal Process.** Within ten (10) days of the debriefing meeting, unsuccessful proposers may appeal the Department's procurement process in writing, to the Department head. The proposer must set forth facts or evidence in sufficient and convincing detail for the Department head to determine whether the Department's process failed to comply with the State's statutes, regulations or standards (established in the *State of Connecticut, Office of Policy and Management, Procurement Standards: for Personal Service Agreements and Purchase of Service Contracts*) concerning competitive procurement or the provisions of the RFP. The Department head must issue a decision, in writing, not later than thirty (30) days after receipt of any such appeal. The filing of an appeal shall not constitute sufficient reason for the Department to delay, suspend, cancel or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.

In the event that the Department head determines that a process violation has occurred and that the violation had a substantial effect on the procurement, the Department head shall take corrective action not later than thirty (30) days after the date of such a determination.

In addition, a proposer has the right of appeal, under certain circumstances, to the State Contracting Standards Board, which is statutorily charged with considering and acting upon appeals (see C.G.S. §§ 4e-35, 4e-36, and 4e-37).

8. **Contract Execution.** Any contract developed and executed as a result of this RFP is subject to the Department's contracting procedures, which may include approval by the Office of the Attorney General.

II. MANDATORY PROVISIONS

■ A. STANDARD CONTRACT, PARTS I AND II

By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract":

Part I of the standard contract is maintained by the Department and will include the scope of services, contract performance, quality assurance, reports, terms of payment, budget, and other program-specific provisions of any resulting contract. A sample of Part I is available from the Department's Official Contact upon request.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the contract. Part II is available on OPM's web site at:

http://www.ct.gov/opm/fin/standard_contract.

Note:

Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a proposer is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the proposer must inform the proposer's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected proposer (contractor), and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's office.

■ B. ASSURANCES

By submitting a proposal in response to this RFP, a proposer implicitly gives the following assurances:

- 1. Collusion.** The proposer represents and warrants that it did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the proposal. The proposer also represents and warrants that the proposal is in all respects fair and is made without collusion or fraud.
- 2. State Officials and Employees.** The proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The State may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the proposer, contractor, or its agents or employees.

3. **Competitors.** The proposer assures that the proposal is not made in connection with any competing organization or competitor submitting a separate proposal in response to this RFP. No attempt has been made, or will be made, by the proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the proposer knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.
4. **Validity of Proposal.** The proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments or addenda hereto. The proposal shall remain valid for a period of 180 days after the proposal due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Department may include the proposal, by reference or otherwise, into any contract with the successful proposer.
5. **Press Releases.** The proposer agrees to obtain prior written consent and approval of the Department for press releases that relate in any manner to this RFP or any resulting contract.

■ C. TERMS AND CONDITIONS

By submitting a proposal in response to this RFP, a proposer implicitly agrees to comply with the following terms and conditions:

1. **Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services or activities.
2. **Preparation Expenses.** Neither the State nor the Department shall assume any liability for expenses incurred by a proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
3. **Exclusion of Taxes.** The Department is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.
4. **Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed through the entire term of the contract.
5. **Changes to Proposal.** No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Department may request and authorize proposers to submit written clarification of their proposals, in a manner or format prescribed by the Department, and at the proposer's expense.

6. **Supplemental Information.** Supplemental information will not be considered after the deadline for submission of proposals, unless specifically requested by the Department. The Department may ask a proposer to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by the Department. At its sole discretion, the Department may limit the number of proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per proposer.
7. **Presentation of Supporting Evidence.** If requested by the Department, a proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Department may make on-site visits to an operational facility or facilities of a proposer to further evaluate the proposer's capability to perform the duties required by this RFP. At its sole discretion, the Department may also check or contact any reference provided by the proposer.
8. **RFP Is Not An Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Department or confer any rights on any proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the proposer and the Department and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the proposer or for payment of services under the terms of the contract until the successful proposer is notified that the contract has been accepted and approved by the Department and, if required, by the Attorney General's Office.

■ D. RIGHTS RESERVED TO THE STATE

By submitting a proposal in response to this RFP, a proposer implicitly accepts that the following rights are reserved to the State:

1. **Timing and Sequence.** The timing and sequence of events associated with this RFP shall ultimately be determined by the Department.
2. **Amending or Canceling RFP.** The Department reserves the right to amend or cancel this RFP on any date and at any time, if the Department deems it to be necessary, appropriate, or otherwise in best interests of the State.
3. **No Acceptable Proposals.** In the event that no acceptable proposals are submitted in response to this RFP, the Department may reopen the procurement process, if it is determined to be in the best interests of the State.
4. **Offer and Rejection of Proposals.** The Department reserves the right to offer in part, or to reject any and all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Department may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Department reserves the right to reject any proposal submitted after the proposal due date and time.

5. **Sole Property of the State.** All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract offered as a result of this RFP shall be the sole property of the State, unless stated otherwise in this RFP or subsequent contract. The right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.
6. **Contract Negotiation.** The Department reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Department further reserves the right to contract with one or more proposer(s) for such services. After reviewing the scored criteria, the Department may seek Best and Final Offers (BFOs) on cost from proposers. The Department may set parameters on any BFOs received.
7. **Clerical Errors in Offer.** The Department reserves the right to correct inaccurate offers resulting from its clerical errors. This may include, in extreme circumstances, revoking the offering of the right to negotiate a contract already made to a proposer and subsequently offering the right to negotiate a contract to another proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the proposer.
8. **Key Personnel.** When the Department is the sole funder of a purchased service, the Department reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Department also reserves the right to approve replacements for key personnel who have terminated employment. The Department further reserves the right to require the removal and replacement of any of the proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the Department.

■ E. STATUTORY AND REGULATORY COMPLIANCE

By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:

1. **Freedom of Information, C.G.S. § 1-210(b).** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.

- 2. Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive.** Connecticut statute and regulations impose certain obligations on State agencies (as well as contractors and subcontractors doing business with the State) to ensure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.

IMPORTANT NOTE: The proposer must upload the Workplace Analysis Affirmative Action Report to the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP. More information about uploading standard contract documents is available on the DAS web site under Administrative Services, [State Contracting Portal](#), embedded in this section as a hyperlink.

- 3. Consulting Agreements, C.G.S. § 4a-81.** Proposals for State contracts with a value of \$50,000 or more in a calendar or fiscal year, excluding leases and licensing agreements of any value, shall require a consulting agreement affidavit attesting to whether any consulting agreement has been entered into in connection with the proposal. As used herein "consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information or (C) any other similar activity related to such contract. Consulting agreement does not include any agreements entered into with a consultant who is registered under the provisions of C.G.S. Chapter 10 as of the date such affidavit is submitted in accordance with the provisions of C.G.S. § 4a-81. The Consulting Agreement Affidavit (OPM Ethics Form 5) is available on OPM's web site under [Ethics Affidavits](#), embedded in this section as a hyperlink.

IMPORTANT NOTE: The proposer must upload the Consulting Agreement Affidavit (OPM Ethics Form 5) to the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP.

- 4. Gift and Campaign Contributions, C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8 and No. 7C, Para. 10; C.G.S. § 9-612(g)(2).** If a proposer is offered an opportunity to negotiate a contract with an anticipated value of \$50,000 or more in a calendar or fiscal year, the proposer must fully disclose any gifts or lawful contributions made to campaigns of candidates for statewide public office or the General Assembly. Municipalities and Connecticut State agencies are exempt from this requirement. The gift and campaign contributions certification (OPM Ethics Form 1) is available on OPM's web site under [Ethics Affidavits](#), embedded in this section as a hyperlink.

IMPORTANT NOTE: The selected proposer must upload the Gift and Campaign Contributions Certification (OPM Ethics Form 1) to the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to contract execution.

- 5. Contracts with Entities Making Certain Investments in Iran, C.G.S. § 4-252a.** No State agency or quasi-public agency shall enter into any large state contract, or amend or renew any such contract with any entity who (1) has failed to submit a written certification indicating whether or not such entity has made a direct investment of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010, or has increased or renewed such investment on or after said date, or (2) has submitted a written certification indicating that such entity has made such an investment on or after October 1, 2013, or has increased or renewed such an investment on or after said date. Prior to submitting a bid or proposal for a large state contract, each bidder or proposer who is an entity shall submit a certification that such bidder or proposer has or has not made an investment as described herein. For purposes of this section, "large state contract" has the same meaning as provided in C.G.S. § 4-250. The OPM Iran Certification Form 7 is available on OPM's web site under [Ethics Affidavits](#), embedded in this section as a hyperlink.

IMPORTANT NOTE: The proposer must upload the OPM Iran Certification Form 7 to the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP.

- 6. Nondiscrimination Certification, C.G.S. §§ 4a-60(a)(1) and 4a-60a(a)(1).** If a proposer is offered an opportunity to negotiate a contract, the proposer must provide the Department with *written representation* or *documentation* that certifies the proposer complies with the State's nondiscrimination agreements and warranties. A nondiscrimination certification is required for all State contracts – regardless of type, term, cost, or value. Municipalities and Connecticut State agencies are exempt from this requirement. The nondiscrimination certification forms are available on OPM's web site under [Nondiscrimination Certification](#), embedded in this section as a hyperlink.

IMPORTANT NOTE: The selected proposer must upload the appropriate Nondiscrimination Certification form to the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to contract execution.

III. PROGRAM INFORMATION

■ A. DEPARTMENT OVERVIEW

The Department of Correction's Division of Parole and Community Services (P&CS) supervises and provides support services to approximately 4,580 offenders released to the community under the jurisdiction of both the Commissioner of Correction and the Board of Pardons and Paroles. The Department has operated a broad variety of community residential and non-residential programs to assist with the structured and supervised reintegration of formerly incarcerated individuals into the community through the Community Service Network. The Community Service Network is a comprehensive and integrated system of care provided via residential and non-residential programming to offenders. Department staff work collaboratively with contracted providers to increase the likelihood of an individual's successful reintegration into the community. The Department's network of community services includes the following:

Residential Programs

1. **Residential Work Release Programs (WR):** Programs designed to provide assistance to residents in obtaining meaningful employment. These programs provide 24/7 on-site supervision of residents. The goal upon completion of the program is for each resident to have stable, legal employment, an acceptable place to live, and sufficient savings to live independently.
2. **Residential Women and Children Programs (W&C):** A female work release program with an on-site family reunification component. This includes availability of housing for female residents and their children.
3. **Residential Substance Abuse Programs (SA):** A clinical treatment program that provides individual and group treatment tailored to the individual resident's treatment goals. The average length of stay is 30 to 45 days. The minimum and maximum length of stay are determined in consultation with the Department based on the resident's needs. On-site supervision of residents is required 24 hours per day, seven days per week. The goal upon completion of the program is for each resident to have completed the treatment provided by the contractor, and either obtained stable, legal employment and made suitable living arrangements or be transferred to a Department-contracted work release program for the remainder of the resident's supervision.
4. **Residential Mental Health Programs (MH):** A 4-6 month program with a 30-45 day in-house initial orientation and intensive treatment component for residents with mental health needs. The in-house component is followed by a period of treatment and supervision while residents seek employment. 24/7 on-site supervision of residents is required at all times. The goal upon completion of the program is for each resident to have completed the treatment component provided by the contractor, obtained stable, legal employment and made suitable living arrangements, if able. Program staff are responsible for ensuring that upon release, residents who are unable to work or live independently have established community linkages and relationships with area providers.
5. **Residential Transitional Supportive Housing Programs (TH):** A 30-60 day program designed to provide safe and secure housing for residents awaiting transfer to transitional supervision status, as well as residents with less than 60 days left on their sentences. Transitional Supportive Housing programs should provide on-site supervision and should include a case management and assessment component. After assessment, referrals will be made to non-residential services as needed. Transitional Supportive Housing programs also provide on-site housing and benefit specialists to assist residents with needed services.

6. **Residential Scattered-Site Supportive Housing Programs (SSSH):** Programs designed to enable eligible individuals to transition to independent living. Programs run 3-4 months in length and do not require on-site supervision. These programs generally consist of apartment-style living for 1-2 same gender residents. Each program is responsible for providing an assessment and referral component. After assessment, referrals will be made to non-residential services as needed.
7. **Residential Sex Offender Treatment Programs (SO):** A male residential program running approximately 6 months in length. The program is reserved for individuals convicted of a sexual offense, and is targeted to provide individualized, intensive treatment for the individual's sexual offense in a community setting. The program also offers intensive case management, life-skills, and employment components to assist with the resident's reintegration into the community.

Through this RFP, the Department is seeking to possibly expand its existing network of residential programs and non-residential programs, subject to available funds, as follows:

8. **Behavioral Intervention Program (BIP):** The BIP is a 60 day residential behavioral treatment program for offenders who, in lieu of being returned to prison for a technical parole violation, is offered this alternative program. The program should include an initial orientation including an evidence-based individualized assessment of criminogenic risks, needs, and factors related to the violation behaviors and development of an individualized treatment plan aimed at increasing compliance and addressing the criminogenic risks, needs, and factors related to the violation behavior. The program should utilize the University of Cincinnati's Cognitive Behavioral Intervention-Core Curriculum (CBI-CC) an evidence-based curriculum to address responsivity issues (e.g., motivation), criminal thinking and attitudes, problem solving, emotion-regulation, and other pro-social skills to facilitate resident's compliance and success once released from the program. The program should include discharge planning and referral for appropriate non-residential services upon release.
9. **Per-Diem Bed Price (PD):** This program would be available for providers that have a new and/or existing contract(s) with DOC that may also have available capacity through other non-DOC contracted programs. The program would be utilized to fill unoccupied beds when DOC has a temporary need to place a client. DOC will pay the proposed per diem bed rate for the number of days that the additional bed is utilized. The Contractor will invoice CTDOC for the utilized amount of days that a bed or beds were in service by DOC clients. Payment will be issued separate from the scheduled contract.
10. **Re-Housing (RH):** Re-housing provides housing placement and stabilization services, as necessary, to assist offenders reentering the community who are at risk of homelessness with permanent housing. Program participants will receive case management and time-limited housing supports and strategies with the ultimate goal of housing stability. Referrals to the program will be made by Parole.

Non-Residential/Parole Services:

1. **Fiduciary (F):** Fiduciary services provided to the Department, which require the issuance of time sensitive checks upon the request by DOC for various programs, including the Re-Housing Program and the ASIST Emergency Housing program, which has been funded through the Judicial Branch's Court Support Services Division. Services would also require maintaining monthly reports for fund balance tracking.

2. **Employment Services/ Educational /Vocational Coordinator:** The individual/agency will be responsible for identifying and facilitating local job/career and educational or job training placements for parolees; utilizing best- and evidenced-based practices for assessing parolee educational, career, and vocational interests, job readiness, as well as barriers to employment; developing individualized employment/education/training plans aligned with assessment results including plans to address barriers to employment (e.g., transportation, child-care, etc.); providing employment soft-skills training; assisting parolees with resumes, job applications, and applications for education and/or training programs and/or employment/education related entitlements for justice-involved individuals.

■ B. MAIN PROPOSAL COMPONENTS

1. Organizational Requirements (*Page Limit: 10 pages*)

Pursuant to C.G.S. § 18-101i, the Department must offer Purchase of Service contracts only to private nonprofit organizations, state agencies or units of local government. To be eligible to submit a response to this Request for Proposals a proposer must have a minimum of three (3) years' demonstrated experience providing the requested services to formerly incarcerated individuals.

The Department reserves the right to reject the submission of any proposer in default of any current or prior contract.

A responsive proposal must include the following information about the administrative and operational capabilities of the proposer.

- a. *Purpose/Mission/Philosophy.* Briefly describe the purpose, mission, and philosophy of the organization and the proposed program. Describe how the program and organization will adhere to applicable state and federal laws, regulations, and policies governing alcohol or other drug abuse services.
- b. *Entity Type/Years of Operation.* Provide a brief history of the organization and the proposed program. The proposer must be established as a private, non-profit organization, state agency or unit of local government prior to submission of a proposal, and must provide proof such as a copy of the Internal Revenue Service (IRS) determination letter, in Section IV.H. Appendices.
- c. *Administrative Office Location.* Provide the location of the proposer's administrative offices.
- d. *Qualifications/Certification/Licensure.* Demonstrate the organization's experience providing the requested services to formerly incarcerated individuals. If the proposer or proposed program holds any certifications or licensures, please detail the type and how long it has been held.
- e. *References.* If the proposer has not provided contracted services to the Department within the past three (3) years, provide three (3) letters of reference in Section IV.H. Appendices. Letters must be from individuals or entities familiar with the proposer's experience providing the requested services to formerly incarcerated individuals. Letters cannot be from the proposer's current employees or volunteers. Letters must include the organization name, contact name, mailing address, telephone number and e-mail address of the writer. Letters must also include the nature of the writer's relationship with the proposer and detail the services provided by the proposer to the writer. These are **NOT** Letters of Support.

2. Service Requirements (Page Limit: 20 pages)

A responsive proposal must include the following information about how the respondent shall provide the requested services. The contractor shall be required to adhere to the terms and conditions of the [DOC Parole and Community Services Residential Provider Manual](#).

2-1: Residential Services:

- a. *Referral Process.* Pursuant to C.G.S. Sec. 18-86c, in the absence of exclusionary criteria it is understood that the Contractor shall accept all referrals. Under normal circumstances, the contractor shall have a not to exceed period of three (3) days to review referrals made by DOC. If the Contractor does not respond to the referral within three (3) days, DOC shall consider the referral as accepted. The referral process should not rely on a requirement for face-to-face interviews of prospective residents as an eligibility determination. While the Department will work with contractors to allow pre-release physical/telephonic interviews of prospective residents, this will not routinely be a possibility within the referral timeframe.

Proposals should delineate the maximum time period between referral acceptance and initial intake appointment, as well as the time period between initial intake appointment and first scheduled service.

- b. *Program Capacity.* Detail gender and age of individuals that will be accepted into the program. Proposals should include total number of beds proposed, total number of beds in the program, and who utilizes beds not proposed for purchase by the Department, as well as gender of both. The Department will not allow congregate housing of both males and females. The contractor shall not house DOC and non-DOC residents in the same bedrooms, and shall post signage that clearly identifies the bedrooms occupied by DOC residents. **In the event that DOC does not have the funding available and/or the need for all the beds offered in a program, proposals should also identify the minimum number of beds required in a program for it to be sustainable.**
- c. *Date of Program Availability.* Programs should be available by July 1, 2020.
- d. *Location of Program.* Proposers are not required to obtain possession of physical space, zoning compliance or DPH licensure prior to submission of a proposal, although preference will be given to proposals indicating possession of space, zoning compliance, and DPH licensure. The Department will require retention of space, proof of zoning compliance, and proof of licensure for all programs, in accordance with State and local regulations, prior to contract execution. If space, zoning, and licensure are not secured at the time of proposal submission, the proposer must affirm that they will be obtained by July 1, 2020. The Department reserves the right to terminate any negotiations or subsequent contracts if the proposer fails to obtain space, zoning or licensure. Furthermore, the Department reserves the right to deem a proposed site as unsuitable for the operation of a residential program.
 - i. Does the proposer currently control the site? If no, provide details of how and when the site will be available.

- ii. Has appropriate zoning been secured for the site? If yes, provide proof of zoning compliance in Section IV.H. Appendices. If no, indicate a timeline for obtaining such documentation or justification as to why zoning is not required.
 - iii. Is the site appropriately licensed by DPH? If yes, provide proof of licensure in Section IV.H. Appendices. If no, indicate a timeline for obtaining such documentation or justification as to why licensure is not required.
 - iv. Is the site fully compliant with the 2010 ADA Standards for Accessible Design including, but not limited to accessible to individuals who use wheelchairs? If no, describe the degree to which the site is compliant.
 - v. Does the program site share space with any other program, agency, business, residence, etc.?
- e. *Room and Board.* Proposals should describe the physical living space of residents, number of residents assigned per bedroom, and number of residents sharing a bathroom, as well as food and furnishing arrangements. Provide the average length of stay needed to complete the program. The Department has established an average length of stay of:
- i. 120 days for its work release programs; and
 - ii. 30-45 days for its substance abuse programs.

The proposed program should be structured in such a way as to ensure that all components can be successfully completed within the specified timeframe. The maximum length of stay shall be determined in consultation with the Department based on the resident's needs.

Proposals should also describe how programs will meet the Department's definition of cleanliness and maintenance for residential living space. The Department definition is as follows:

Interior Maintenance - The interior of the facility should be maintained in good repair and in a safe, clean, orderly and sanitary condition, free from all accumulation of dirt, infectious agents, and other impurities.

Structural Maintenance – The foundations, floors, walls, doors, windows, ceilings, roofs, staircases, porches, chimneys, and other structural elements of the facility should be maintained so that the facility excludes wind, rain, and snow, and is rodent-proof, watertight and free from chronic dampness, weather tight, in good repair, and in every way fit for the use intended. Further, every interior structural element should be maintained free from holes, cracks, loose plaster, or other defect which renders the area difficult to keep clean, or which constitutes an accident hazard or provides insect or rodent harborage.

- f. *Accountability.* The Department requires the residential programs requested through this RFP to be supervised by on-site staff on a 24/7 basis. Proposals should describe the extent to which program staff will monitor residents. Include any procedures for facility counts, community access, security policies, employment checks, etc.
- g. *Intake/Orientation.* Describe the process followed for each intake, as well as the topics covered during the orientation period. Orientation periods should not exceed one week, and should focus on initial development of an Individualized Service or Treatment Plan. Orientation must include assessment by a validated needs assessment tool(s). Proposals should indicate the evidence based assessment tool that the proposer uses, which needs to be an approved tool by DOC Parole and Community Services. DOC assessment tool preferences are SCORES (Statewide

Collaborative Offender Risk Evaluation System) and WRNA (Womens Risk Needs Assessment). Providers not currently trained in using SCORES and WRNA should provide a transition plan to using these tools. Proposals should also describe the proposer's quality assurance process to ensure fidelity with the administration of assessment tools.

Proposals for Residential Mental Health programs must also include explanation of use of any validated mental health assessment tool (such as the CAI, SASSI, ASI, T-ASI, TCUDS II, etc.).

- h. *Development of Individual Service/Treatment Plans.* Program staff, in conjunction with the resident, should work together to develop an Individual Service/Treatment Plan that addresses the resident's primary criminogenic needs. The plan should incorporate information obtained from assessments, and should identify needed services and goals.
- i. *Service/Treatment Components.* Proposals must describe services offered to residents and the modality by which they are offered.

1) Residential Work Release Programs

The Department expects programs of this type to function primarily as programs that assist residents with obtaining employment, establishing savings accounts along with an on-site family reunification component while preparing for transition to independent living. Work Release program staff must include a Job Developer. The following components must be addressed.

- a) Job Development. It is expected that the program will include a significant emphasis on development of relationships with local employers willing to hire formerly incarcerated individuals, local workforce development boards, and American Job Centers.
- b) Job Readiness. It is expected that the program will include components to strengthen a resident's likelihood of sustainable employment. These components should include, but not be limited to: Employment Counseling; Job Search Techniques; Resume Assembly; Interviewing Skills; Job Application Preparation; etc. Proposers should identify career and job readiness assessment tools used.
- c) Job Retention. It is expected that the program will include a component designed to encourage employer communication regarding the resident's work ethics, productivity, etc. It is also expected that the program will provide a strong focus on providing residents with the tools necessary to deal with conflict productively, and retaining their employment long-term.
- d) Savings Account Maintenance. All residents will be expected to establish a savings account (in accordance with Offender Monies: Offenders Savings Accounts in the [DOC's Parole and Community Services Residential Provider Manual](#)).
- e) Transportation Assistance. The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should

not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.

- f) Identification Procurement. It is expected that residents will be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
- g) Benefits Assistance. It is expected that residents will be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
- h) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, permanent housing upon completion of the program.
- i) Drug Testing. It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.
- j) Discharge Planning. In conjunction with the resident's Individual Service Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. The Discharge Plan should include permanent housing options upon release, benefits eligibility, linkage to local community services, etc.
- k) Mentoring – Preference will be given to programs that include Mentors for residents. Mentoring is a component that is meant to complement the traditional services of Work Release programs. Resident participation with Mentors is voluntary. Proposals should describe the mentoring program including mentoring selection, roles and responsibilities, mentoring approach, and mentor training and support

2) Residential Work Release Women and Children Program

The Department expects programs of this type to function primarily as programs that assist residents with obtaining employment and establishing savings accounts while preparing for transition to independent living. Work Release program staff must include a Job Developer. The following components must be addressed.

- a) Job Development. It is expected that the program will include a significant emphasis on development of relationships with local employers willing to hire formerly incarcerated individuals, local workforce development boards, and American Job Centers.
- b) Job Readiness. It is expected that the program will include components to strengthen a resident's likelihood of sustainable employment. These components should include, but not be limited to: Employment Counseling; Job Search Techniques; Resume Assembly; Interviewing Skills; Job Application Preparation; etc. Proposers should identify career and job readiness assessment tools used.

- c) Job Retention. It is expected that the program will include a component designed to encourage employer communication regarding the resident's work ethics, productivity, etc. It is also expected that the program will provide a strong focus on providing residents with the tools necessary to deal with conflict productively, and retaining their employment long-term.
- d) Savings Account Maintenance. All residents will be expected to establish a savings account (in accordance with Offender Monies: Offenders Savings Accounts in the [DOC's Parole and Community Services Residential Provider Manual](#)).
- e) Social Reunification. Describe how the proposed program will house children on offenders. Program eligibility should be limited to children from birth to five years of age. Include specific programming for female offenders and their children, availability of day-care services while the mother works, and linkages to the Department of Children and Families, if necessary.
- f) Transportation Assistance. The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.
- g) Identification Procurement. It is expected that residents will be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
- h) Benefits Assistance. It is expected that residents will be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
- i) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, permanent housing upon completion of the program.
- j) Drug Testing. It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.
- k) Discharge Planning. In conjunction with the resident's Individual Service Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. The Discharge Plan should include permanent housing options upon release, benefits eligibility, linkage to local community services, etc.
- l) Mentoring – Preference will be given to programs that include Mentors for residents. Mentoring is a component that is meant to complement the traditional services of Work Release programs. Resident participation with Mentors is voluntary. Proposals should describe the mentoring program

including mentoring selection, roles and responsibilities, mentoring approach, and mentor training and support

All programming provided at these programs should be gender responsive as described in Attachment A.

3). Substance Abuse Programs

The following components must be addressed.

- a) Substance Abuse Treatment. Include specific group and individual counseling session length, duration, and curricula to be utilized, as well as group capacity. Also include the proposer's capability of providing and/or allowing medication assisted treatment (MAT).
- b) Transportation Assistance. The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.
- c) Identification Procurement. It is expected that residents will be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
- d) Benefits Assistance. It is expected that residents will be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
- e) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, permanent housing upon completion of the program.
- f) Drug Testing. It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.
- g) Discharge Planning. In conjunction with the resident's Individual Treatment Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. The Discharge Plan should include permanent housing options upon release, benefits eligibility, linkage to local community services, etc.

4). **Transitional Supportive Housing Programs**

The Department expects programs of this type to function primarily as programs that assist residents with independent living options, benefits eligibility, permanent housing, and referrals for needed services. The following components must be addressed.

- a) Job Development. It is expected that the program will include a significant emphasis on development of relationships with local employers willing to hire formerly incarcerated individuals.
- b) Job Readiness. It is expected that the program will include components to strengthen a resident's likelihood of sustainable employment. These components should include, but not be limited to: Employment Counseling; Job Search Techniques; Resume Assembly; Interviewing Skills; Job Application Preparation; etc. Proposers should identify career and job readiness assessment tools used.
- c) Job Retention. It is expected that the program will include a component designed to encourage employer communication regarding the resident's work ethics, productivity, etc. It is also expected that the program will provide a strong focus on providing residents with the tools necessary to deal with conflict productively, and retaining their employment long-term.
- d) Savings Account Maintenance. All residents will be expected to establish a savings account (in accordance with Offender Monies: Offenders Savings Accounts in the [DOC's Parole and Community Services Residential Provider Manual](#)).
- e) Transportation Assistance. The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.
- f) Identification Procurement. It is expected that residents will be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
- g) Benefits Assistance. It is expected that residents will be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
- h) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, permanent housing upon completion of the program.
- i) Drug Testing. It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.

- j) Discharge Planning. In conjunction with the resident's Individual Service Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. The Discharge Plan should include permanent housing options upon completion of the program, benefits eligibility, linkage to local community services, etc.

5). **Scattered-Site Supportive Housing Programs**

The following components must be addressed.

- a) Life Skills Development. It is expected that the program will address life-skill development for residents (for example, money management, maintaining a bank account, financial management, running a household, etc.).
- b) Basic Needs Assistance. It is expected that residents will be assisted with meeting basic needs such as food, clothing, and toiletries when necessary.
- c) Transportation Assistance. The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.
- d) Identification Procurement. It is expected that residents will be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
- e) Benefits Assistance. It is expected that residents will be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
- f) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, permanent housing upon completion of the program. This may include transition to a similar independent living apartment.
- g) Drug Testing. It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.
- h) Discharge Planning. In conjunction with the resident's Individual Service Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. The Discharge Plan should include permanent housing options upon completion of the program, benefits eligibility, linkage to local community services, etc.

A Job Developer position is not required but employment assistance should be provided with a program of this type:

- i) Job Development. It is expected that the program will include a significant emphasis on development of relationships with local employers willing to hire

formerly incarcerated individuals, local workforce development boards, and American Job Centers.

- j) **Job Readiness.** It is expected that the program will include components to strengthen a resident's likelihood of sustainable employment. These components should include, but not be limited to: Employment Counseling; Job Search Techniques; Resume Assembly; Interviewing Skills; Job Application Preparation; etc. Proposers should identify career and job readiness assessment tools used.
- k) **Job Retention.** It is expected that the program will include a component designed to encourage employer communication regarding the resident's work ethics, productivity, etc. It is also expected that the program will provide a strong focus on providing residents with the tools necessary to deal with conflict productively, and retaining their employment long-term.
- l) **Savings Account Maintenance.** All residents will be expected to establish a savings account (in accordance with *Offender Monies: Offenders Savings Accounts* in the [DOC's Parole and Community Services Residential Provider Manual](#)).

6). **Behavioral Intervention**

Proposals are sought for a 15 bed program Behavioral Intervention program. The following components must be addressed.

- a) **Behavioral Intervention Treatment.** Include specific group and individual counseling session length, duration, and curricula to be utilized, as well as group capacity to address violation behaviors and development of an individualized treatment plan aimed at increasing compliance and addressing the criminogenic risks, needs, and factors related to the violation behavior. Group sessions shall be open to allow for rolling enrollment.
- b) **Medication Management.** It is expected that the program will include the capability to provide medication management to residents in need of such services as a result of their behavioral health needs. Proposals should describe how the program will provide medication management.
- c) **Drug Testing.** It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.
- d) **Transportation Assistance.** The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.

- e) Discharge Planning. In conjunction with the resident's Individual Treatment Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. Unless the individual is returning or will be placed in another DOC residential program, the Discharge Plan should include permanent housing options upon release, benefits eligibility, linkage to local community services, etc.

The primary focus of the BIP program is on behavioral treatment programming, however the following services can be provided while the individual receives programming:

- f) Job Readiness. The program can include components to strengthen a resident's likelihood of sustainable employment. These components should include, but not be limited to: Employment Counseling; Job Search Techniques; Resume Assembly; Interviewing Skills; Job Application Preparation; etc. Proposers should identify career and job readiness assessment tools used.
- g) Identification Procurement. Residents can be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
- h) Benefits Assistance. Residents can be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
- i) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, permanent housing if they will be released to the community upon completion of the program.

7). **Per diem beds**

Proposals for the per-diem beds will be accepted from providers that have a new and/or existing contract(s) with DOC that may also have available capacity through other non-DOC contracted programs. The program would be utilized to fill unoccupied beds when DOC has a temporary need to place a client. DOC will pay the proposed per diem bed rate for the number of days that the additional bed is utilized. The Contractor will invoice CTDOC for the utilized amount of days that a bed or beds were in service by DOC clients. Payment will be issued separate from the scheduled contract payments. Proposals for the per-diem program shall include a Provider's per diem bed rate, as well as, details regarding the potential location(s) of the beds, the type of program(s) that the potential beds are located within, along with the 24/7 program specific details of the other program(s) to determine appropriate oversight and security.

8). **Re-Housing Program (RH)**

Proposals are sought for housing placement and stabilization services in the Hartford area. This program is anticipated to assist approximately 15-20 offenders returning to the Hartford area per year without housing. The program should move as quickly as possible to identify permanent housing and in order to

help the offender achieve housing stability. The Re-Housing Program is a combination of housing location, stabilization services, and financial assistance, if necessary, to help homeless offenders move as quick as possible into permanent housing through the provision of time-limited housing supports and strategies with the ultimate goal of housing stability.

RH program will interconnect Housing strategies, Case Management and Financial Assistance when necessary to DOC Parolees. The RH Program will follow the State of Connecticut Rapid Re-Housing Model Guidelines attached as Appendix B, except for referrals, data collection and the provision of financial assistance, which are addressed below. The RH program strategies are as follows:

- a) Work with DOC Parolee Staff regarding referrals, which will be an individual Parolee;
- b) Housing search, landlord recruitment;
- c) Critical Time Intervention (CTI) and housing stabilization and sustainability supports, including linkages to community services, and;
- d) Access financial assistance through DOC;
- e) Just enough assistance – the minimum assistance (financial and/or supportive services) necessary for the shortest period of time possible. Strengths and barriers are identified at the time of referral. Supports are provided to accentuate strengths and eliminate those barriers in order to improve the participant's ability to reenter the community and sustain housing and employment.
- f) Financial assistance for RH clients when necessary will be provided by a DOC to Providers for direct payment to third parties – landlords, utility companies, etc.
- g) Eligible costs are: staff salaries and fringe benefits (for direct service, supervision and program management); administration costs; and other costs essential to the operation of the RH program, short to medium term rental assistance (anywhere from 3 – 12 months) as well as rental arrears, utility arrears, and security deposits.

Proposals shall be written to address the core components of the RH program, the RH program definitions provided, and the State of Connecticut Rapid Re-Housing Model Guidelines.

The core components of the RH program are Housing Identification, Financial Assistance, and Case Management:

Housing Identification includes: recruitment of landlords and support; Housing Assessment and Support of Individual, ensuring leasing requirements are met including housing inspections and rent reasonableness.

Financial Assistance provides short-term assistance if needed to offenders so they can quickly obtain housing. Allowable financial assistance may include paying for security deposits, move-in expenses, rent, and utilities. Financial assistance is based on the progressive engagement principle of offering the minimum amount of assistance

Providers will make any financial assistance payments to third parties, i.e. landlord, utility company, etc. No financial assistance may be paid directly to an RH recipient.

Case management services are those to help an individual obtain and move into permanent housing, to support households to stabilize housing, and to connect them to community and mainstream services and supports if needed.

Re-Housing Program definitions:

Rehousing program is housing assistance to individuals afford decent, safe, and sanitary housing in the private market for one (1) to five (5) months. Housing assistance beyond five (5) months would be reviewed case by case.

DOC Contracted Service Provider is a private non-profit organization contracted with DOC to provide stabilization services to ensure housing stability.

Stabilization Services encompasses any support services that will assist an individual to resolve their housing crisis.

Homeless households are individuals that maybe in danger of becoming homeless, in a transitional housing facility, or in a place that is not appropriate for their circumstances.

Permanent housing is independent housing that is in the community and is not time limited.

Housing stability is the ability to maintain housing in the community without being evicted and returning to a homeless situation.

Time-limited housing supports and strategies is case management services that are paired with a rehousing program that ends when permanent housing is achieved and sustained.

Program Services is case management that is provided to the rehousing program.

Unstably housed is a living situation that is not permanent.

Supportive Services is assistance that addresses the special need of the individual. It provides appropriate services or assists such person in obtaining appropriate services, including health care, mental health treatment, substance abuse services, child care services, case management services, counseling, supervision, education, job training, and other services essential for achieving and maintaining independent living.

Proposers will work with DOC Parole Officers for coordinated intake, screening, and housing-based assessments. Targeted offenders for the RH program include employed offenders, offenders beginning a job with a short period of time and/or offenders with entitlements but without housing.

The following elements must be addressed:

- a) Location: Identify the Hartford area cities and towns where RH services will be provided.
- b) Location of Office/Hours: Provide the hours of operation and office locations for case management and housing coordination services. Such locations should demonstrate compliance with the Americans with Disabilities Act regarding handicapped access for direct program participant service sites. Note: Program staff must be available at times when critical communication can take place with the program participants including evenings and weekends, and in response to emergency situations. Program staff must be willing to travel throughout the service area.
- c) Service Capacity/Delivery Plan/Process: Describe in detail activities that will be performed to stably house 15-20 individuals annually. Specifically, the proposal shall describe a Service Capacity/Delivery Plan to ensure that services are available no later than July 1, 2020. Said plan shall include, but not be limited to:
 - i. Describe any previous experience with RapidRe-Housing.
 - ii. Describe any previous experience with adopting an evidenced-based practice. If there is no experience, will your proposal commit to utilizing Critical Time Intervention (CTI) as an approach to housing sustainability coordination if statewide technical assistance is provided;
 - iii. Describe how you will create and implement a housing stabilization plan with each program participant;
 - iv. Describe the process in which staff will travel to meet program participants, find housing and complete in home case management;
 - v. Describe how you will assist program participants in locating appropriate permanent housing and how you plan to outreach to landlords;
 - vi. Describe how your program will select housing units in accordance with the "Housing Identification section of the *State of Connecticut Rapid Re-Housing Model Guidelines*.
 - vii. Describe how your program's approach will center on providing homeless people with housing quickly and then providing services as needed using a low barrier approach that emphasizes community integration, stable tenancy, recovery and individual choice.
 - viii. Describe how your program will administer the program and the program funding.
- d) Lease compliance and housing retention: tenants are expected to comply with a standard lease agreement and are provided with services and supports to help maintain housing and prevent eviction.
 - 1. Leases do not include stipulations beyond those that are customary, legal, and enforceable under Connecticut law;
 - 2. No program rules beyond these that are customary, legal, and enforceable through a lease are applied (e.g. visitor policies should be equivalent to those in other types of permanent, lease-based housing in the community);
 - 3. Services are designed to identify and reduce risks to stable tenancy and to overall health and well-being.

- e) Linkages/Program Collaboration/Coordination: Describe in detail the collaborative efforts that are currently in place between the proposer and the community partners and existing housing resources with the service area. Identify leveraged services that will support RH operations and describe any coordinated services between the proposer and proposed community partner(s) that will be beneficial to program participants.
- f) Quality Assurance protocols: Describe the proposer's internal process to ensure the quality and appropriateness of the activities to be performed. If an external quality assurance process is used, describe the process.
- g) All units receiving RH assistance must meet HUD's Housing Quality Standards (HQS) to ensure units are decent, safe, and sanitary.

(9) Residential Mental Health Programs

The Department expects programs of this type to accept individuals with a high level of mental health needs (assessed by the Department as Mental Health Levels 4 and 5). The program should accommodate those individuals who will most often require some level of assistance for the remainder of their lives, and those who may be targeted for DMHAS services upon release. The following components must be addressed.

- a) Mental Health Treatment. How will assessed mental health needs of residents be addressed? Include specific group and individual counseling session length, duration, and curricula to be utilized, as well as group capacity.
- b) Medication Management. It is expected that the program will include the capability to provide medication management to residents in need of such services as a result of their mental health needs. Proposals should describe how the program will provide medication management.
- c) Employment. It is expected that the program will include a component that allows for community access (after completion of intensive mental health treatment components), which may include possible employment for those residents able to sustain such. Proposals should describe the capacity of the program to assist with resident employment.
- d) Community Access. It is expected that the program will include a community access component that will allow residents to begin reintegration in a supervised and structured manner. This may include group activities, employment search, etc.
- e) Service Linkage. It is expected that the program will include the capability to provide linkage to local mental health providers and/or DMHAS providers to ensure continuity of care upon completion of the program.
- f) Transportation Assistance. The contractor shall, at a minimum, provide resident transportation to medical appointments, in emergency situations (not requiring ambulatory services), to court appearances/appointments when mandated, and when transferring to another contracted DOC program. This may be accomplished through public transportation, when viable, but should

not result in any cost to the resident. When alternative transportation is not a viable option, it shall be the responsibility of the contractor to provide direct transport for these appointments.

- g) Identification Procurement. It is expected that residents will be assisted with procuring identification sufficient for U.S. Citizenship and Immigration Services Form I-9, Employment Eligibility Verification. This may include provision of funding to assist with such procurement.
 - h) Benefits Assistance. It is expected that residents will be assisted with securing federal and State entitlements for which they may be eligible including, but not limited to Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI).
 - i) Housing Assistance. It is expected that residents will be assisted with obtaining adequate, non-shelter housing upon completion of the program.
 - j) Drug Testing. It is expected that the program will perform drug testing of residents. The Department requires that drug tests be performed a minimum of once per month for the resident's entire length of stay. Proposals should include the level and type of drug test to be performed.
 - k) Discharge Planning. In conjunction with the resident's Individual Treatment Plan, program staff should work collaboratively with the resident to develop a Discharge Plan. The Discharge Plan should include permanent housing options upon completion of the program, benefits eligibility, linkage to local community services, etc.
- j. *Evidence-Based Programming*. The proposal must describe the extent to which services will be evidence-based and how that determination was made. Describe what evidence-based curricula will be utilized, any evidence-based philosophies utilized (for example, M/I, MET, CBT, etc.), and specific gender-responsive philosophies utilized. Cite specific research, papers, journals, etc. Copies of the cited literature will be requested, if necessary. **Do not** include them with the proposal.
- k. *Internal Security Measures*. The proposal must clearly describe all internal security measures.
- l. *Prison Rape Elimination Act (PREA)*. All contractors providing residential services shall adhere to the federal Prison Rape Elimination Act of 2003, Public Law 108-79. Additionally, all contractors providing residential services shall comply with Department policies and procedures as they relate to PREA standards for contracted residential community programs, as such policies and procedures are delineated and maintained in the Department's Parole and Community Services Residential Provider Manual. **The proposal must indicate whether the proposed program is compliant with PREA standards.**
- m. *Eligibility and Exclusions*. The proposal must clearly define all eligibility criteria and must identify and define any categories of individuals who would be excluded from the program. All exclusions must be fully explained including rationale for exclusion. Release status is not an acceptable criterion for eligibility or exclusion. Individuals

should be accepted into the program regardless of custody status and criminal history. Preference will be given to proposers demonstrating the least restrictive eligibility and exclusionary criteria, especially with regard to individuals convicted of a sexual offense or arson.

2-2: Non-Residential Parole Services:

1) Employment, Educational and Vocational Coordinator (EEV Coordinator)

The Department is seeking proposals to address the Employment, Educational and Vocational needs of Parolees assigned to District Parole Officers and not residing in a DOC residential halfway house programs. Proposals shall be based on the following:

- a) Employment, Educational Vocational Readiness: The individual/agency will be responsible for: identifying and facilitating local job/career and educational or job training placements for parolees; utilizing best- and evidenced-based practices for assessing parolee educational, career, and vocational interests, job readiness, as well as barriers to employment; developing individualized employment/education/ training plans aligned with assessment results including plans to address barriers to employment (e.g., transportation, child-care, etc.); providing employment soft-skills training; assisting parolees with resumes, job applications, and applications for education and/or training programs and/or employment/education related entitlements for justice-involved individuals.
- b) Referral Process: Referrals will be made by District Parole Officers
- c) Capacity: The EEV Coordinator shall work with Parole District Office caseloads including the Specialized Units.

November 2019 data	Bridgeport	Hartford	New Haven	Norwich/ New London	Waterbury	Special Management Unit (SMU) (Hartford Office)	Mental Health Unit (MU) (Hartford Office)	Women's Re-Entry Unit (WRE) (Hartford Office)
Monthly caseload	591	878	352	403	574	547	170	238
# Employed	359	492	229	236	364	322	25	120
# Unemployed	232	386	123	168	210	225	145	118

Proposers shall provide pricing at different service levels: e.g. serving 200 people; 400 people, etc.

- d) Date of Service Availability: July 1, 2020
- e) Location of Delivered Service: Optional proposal pricing is requested for the delivery of services out of a Provider's space vs. Parole District Office Space.

A rotating presence at the various Parole District Offices is an option that will be considered.

Parole District Offices:

Bridgeport District: 1052 North Ave, Bridgeport

Hartford District: 300 Sheldon Street, Hartford

New Haven District: 620 Grand Avenue, New Haven

Norwich/New London District: 2-6 Cliff Street, Norwich

Waterbury District: 2200 Thomaston Avenue, Waterbury

- f) Hours of Operation: Provide the hours of operation and office location for providing Employment, Educational and Vocational services to Parolees when services are provided working out of a Provider's space. Provide the hours of operation and any proposed schedule when services are provided working out of Parole District office space. Note hours of operation within Parole District Office space must be between 8:30 am and 4:30 pm.
- g) Intake: Describe the process followed for each intake, as well as the topics covered an individualized action plan.
- h) Service Components: Proposals must describe services offered to individuals, validated assessment tool(s), and the process by which services are offered.

2) Fiduciary Services:

The Department is seeking proposals for fiduciary services that would require the proposer to issue checks upon request by DOC to entities/providers providing a service for DOC, such as the Per Diem Bed Program, ASIST emergency housing program, Re-Housing Program, etc. Under the ASIST Program approximately 75 checks are written annually. A range of 0-100 checks are estimated for the Per-diem program annually.

The maintenance of monthly reports for fund balance tracking is required.

3. Staffing Requirements (Page Limit: Five pages)

A responsive proposal must include the following information about all staff that the proposer intends to assign to the proposed program.

- a. *Program Staff/Manager.* Include a staffing matrix in Section IV.H. Appendices of the proposal, using the form provided in Section V. Forms of this RFP. Identify each staff position that will be responsible for implementing and providing the requested services, including but not limited to a Program Manager. The Program Manager's responsibilities shall include but not be limited to day-to-day oversight of the program. Indicate whether each position will be newly created or existing. If the staff that will be assigned to the program are currently employed by the organization, include their names and position titles. If the staff that will be assigned to the program are not currently employed by the organization, present a strategy to recruit and hire staff that possess the qualifications specified in the job descriptions requested in Section III.C.3.b below. The staffing matrix does not count toward the page limit of the proposal.
- b. *Job Descriptions.* Provide current job descriptions for each position identified in Section III.C.3.a above, in Section IV.H. Appendices. The job descriptions must outline the specific duties associated with the proposed program, and minimum credential, license, education, training, and experience requirements. Each job description should clearly show how the position supports the proposed program. Job descriptions do not count toward the page limit of the proposal.
- c. *Resumes.* Provide resumes, not exceeding two pages per resume, for all staff identified in Section III.C.3.a above that are currently employed by the organization,

in Section IV.H. Appendices. Resumes must reflect staff qualifications including credentials, licenses, education, training, experience with the proposer, experience with government-funded projects, and other relevant experience. Resumes do not count toward the page limit of the proposal.

- d. *Recruitment, Hiring, and Retention Plan.* Detail the proposer's recruitment, hiring, and retention plan, including any efforts made to recruit and hire people with disabilities.
- e. *Staff Training/Education/Development.* Describe the proposer's staff training, education, and development plan to ensure staff competency in the provision of the requested services.
- f. *Multilingual and Multicultural Competency.* Describe the cultural and linguistic background of staff identified in Section III.C.3.a above in relation to the service population. Since it is unrealistic to maintain staff with cultural and linguistic capabilities for all potential ethnic groups, explain how the program intends to serve those ethnic groups outside the cultural and linguistic capabilities of program staff.

4. Reporting Requirements (*Page Limit: Five pages*)

A responsive proposal must include the following information about the information management and performance measurement systems of the proposer.

- a. *Equipment.* The proposal must describe the proposer's ability to access the Internet, send and receive secure outside e-mail, and view PDF documents. The proposal must also describe the office operating systems currently utilized by the proposer, and the capability of the proposer to maintain electronic health records and electronic case management records/resident files.
- b. *Reports.* The contractor shall be required to file the following reports electronically, on forms provided by the Department, with the Department's Contracts Administration Office unless otherwise noted. The proposal must describe the proposer's ability to comply with these requirements.
 - i. Residential Monthly Progress Report, within five calendar days after the end of each month, with the supervising Parole Officer;
 - ii. Residential Monthly Discharge Report, within 48 hours after the resident's discharge with the supervising Parole Officer;
 - iii. Monthly Residential Utilization Report, within seven calendar days after the end of each month;
 - iv. Performance Outcome Measure Report, by January 7 of each year for the period of July 1 through December 31, and by July 7 of each year for the period of July 1 through June 30;
 - v. Annual Budget, using the Purchase of Services Uniform Chart of Accounts and Electronic Workbook promulgated by OPM, by June 15 of each year for the following State fiscal year (July 1 through June 30);
 - vi. Staffing Matrix, by June 15 of each year; and
 - vii. Expenditure Report, using the Purchase of Services Uniform Chart of Accounts and Electronic Workbook promulgated by OPM, by March 31 of each year for the period of July 1 through the last day of February, and by September 30 of each year for the period of July 1 through June 30.
- c. *Disclosure Policy.* Case file information on program participants including names, Social Security Numbers, and other sensitive information is considered confidential and may not be released. The contractor must protect confidential and private information gained from program participants. Appropriate physical and electronic security policies must be in place to protect sensitive information. The proposal must describe the proposer's ability to comply with this disclosure policy.
- d. *Performance Outcome Measures.* The contractor shall adhere to established Performance Outcome Measures developed and promulgated by DOC as such may be amended from time to time. The proposal must describe: how the program will be monitored to ensure that the performance outcome measures are met; and the data collection methodology to ensure credible documentation of program services. The Department has developed and promulgated the following performance outcome measures.

- i. Work Release Programs
 - a) 95% of admitted offenders will have an Individual Service/Treatment Plan completed within 15 calendar days of admission;
 - b) 50% of offenders will have obtained part-time, full-time or temporary employment or be enrolled in school within 90 days of admission;
 - c) 90% of successfully discharged offenders will have obtained housing;
 - d) 95% of eligible offenders will maintain savings accounts held in their name, by contractor or by conservator;
 - e) 98% of offenders will have at least one random drug screen monthly and 85% of offenders will have no positive drug screens;
 - f) 75% of discharged offenders will have completed the program successfully; and
 - g) 98% of successfully discharged offenders will have a discharge plan/summary.

- ii. Work Release Women and Children Programs
 - a) 95% of admitted offenders will have an Individual Service/Treatment Plan completed within 15 calendar days of admission;
 - b) 50% of offenders will have obtained part-time, full-time or temporary employment or be enrolled in school within 90 days of admission;
 - c) 90% of successfully discharged offenders will have obtained housing;
 - d) 95% of eligible offenders will maintain savings accounts held in their name, by contractor or by conservator;
 - e) 98% of offenders will have at least one random drug screen monthly and 85% of offenders will have no positive drug screens;
 - f) 88% of offenders with children developed a stable, on-going relationship compliant with terms of their release.
 - g) 75% of discharged offenders will have completed the program successfully; and
 - h) 98% of successfully discharged offenders will have a discharge plan/summary.

- iii. Substance Abuse Programs
 - a) 95% of admitted clients will have Individual Service/Treatment Plans within 15 calendar days of admission;
 - b) 98% of clients will have at least one random drug screen monthly and 90% of clients will have no positive drug screens within reporting period;
 - c) 75% of discharged clients will have completed the program successfully; and
 - d) 98% of successfully discharged clients in the program 15 calendar days or longer will have a completed discharge/summary plan.

- iv. Mental Health Programs
 - a) 95% of admitted clients will have Individual Service/Treatment Plans within 15 calendar days of admission;
 - b) 90% of successfully discharged clients will have obtained safe, permanent housing;
 - c) 98% of clients will have at least one random drug screen monthly and 90% of clients will have no positive drug screens within reporting period;
 - d) 70% of discharged clients will have completed the program successfully; and
 - e) 98% of successfully discharged clients in the program 15 calendar days or longer will have a completed discharge/summary plan.

- v. Transitional Supportive Housing Programs
 - a) 95% of admitted clients will have ISP/ITP's within 15 calendar days of admission;
 - b) 90% of successfully discharged clients will have obtained safe, permanent housing;
 - c) 75% of discharged clients will have completed the program successfully; and
 - d) 98% of successfully discharged clients in the program 15 calendar days or longer will have a completed discharge/summary plan.

- vi. Scattered Site Supportive Housing Programs
 - a) 95% of admitted clients will have Individual Service/Treatment Plans within 15 calendar days of admission
 - b) 90% of successfully discharged clients will have obtained safe, permanent housing.
 - c) 98% of clients will have at least one random drug screen monthly and 85% of clients will have no positive drug screens within reporting period;
 - d) 75% of discharged clients will have completed the program successfully; and
 - e) 98% of successfully discharged clients in the program 15 calendar days or longer will have a completed discharge/summary plan.

- vii. Behavioral Intervention

Performance measures for programs of this type shall be collaboratively developed by the Department and the contractor.

- viii. Vocational and Education Program

Performance measures for programs of this type shall be collaboratively developed by the Department and the contractor.

- ix. Re-Housing Program

Performance measures for programs of this type shall be collaboratively developed by the Department and the contractor.

- x. Employment/Education and Vocational Coordinator Service:

Performance measures for programs of this type shall be collaboratively developed by the Department and the contractor.

5. Work Plan

A responsive proposal must include a comprehensive and realistic work plan **for each State fiscal year (July 1 to June 30)**. The work plan must demonstrate the flow of program services in a logical and sequential manner with the second year building upon the first year. The work plan must include the following.

- a. *Tasks and Deliverables.* Describe **what** start-up and implementation activities, actions, tasks, and deliverables the proposer will accomplish to implement the program, as well as the staff **who** will be responsible for accomplishing each task and deliverable.

- b. *Methodologies.* Describe **how** each task and deliverable will be accomplished, providing a detailed explanation of the procedures or processes that will be used to attain the expected outcomes.

- c. *Timetable/Schedule.* Include a proposed timetable indicating **when** each task and deliverable will be accomplished. Identify any significant milestones or deadlines including when the program will be operational.

■ D. COST PROPOSAL COMPONENTS

1. Financial Requirements (*Page Limit: Five pages*)

A responsive proposal must include the following information about the proposer's fiscal stability, accounting and financial reporting systems, and relevant business practices.

- a. *Audited Financial Statements.* Submit a copy of the cover letter from the proposer's auditor for each of the three most recent annual audits and a copy of the most recent audit prepared by an independent Certified Public Accountant, and reviewed or audited in accordance with Generally Accepted Accounting Principles (GAAP) (USA). The copy shall include all applicable financial statements, auditor's reports, management letters, and any corresponding reissued components, including reports on compliance for each major State and federal program and on internal control over compliance. Cover letters and the annual audit do not count toward the page limit of the proposal. One copy only shall be included with the original proposal in Section IV.H. Appendices. If less than three audits have been conducted, detail must be provided as to why, and any supporting documentation assuring the financial efficacy of the proposer should be included (for example, a financial statement prepared by an accountant, a tax return, etc.).

If the 3 most recent audit are available via OPM's Electronic Audit Reporting System (EARS), such may be noted in the proposal and a hard copy of the audit need not be provided.

- b. *Financial Capacity.* Describe the proposer's financial capacity to properly isolate contract-related income and expenditures. Discuss the internal controls used to ensure that a thorough record of expenditures can be provided for purposes of an audit.
- c. *Mixed Funding.* Describe how staff time dedicated to this program will be tracked, if staff assigned to the program will be paid from various funding sources.

2. Budget Requirements

- a. *Cost Standards.* All proposed costs are subject to the federal *Uniform Guidance: Cost Principles, Audit, and Administrative Requirements for Federal Awards*, and OPM *Cost Standards*. In the event of any inconsistency, the federal uniform guidance shall supersede the OPM cost standards. Be advised that the cost proposal is subject to revision prior to contract execution in order to ensure compliance with the OPM cost standards and federal uniform guidance.

More information about the OPM cost standards is available on OPM's web site: [Cost Standards](#).

A portion of the contractor's expenses may be claimed by the State of Connecticut and reimbursed by the federal government through the Temporary Assistance for Needy Families (TANF) Program. Therefore, certain restrictions on a portion of funding received through DOC may apply.

- b. **Budget.** A responsive proposal must include a separate budget form, which is provided in Section V. Forms of this RFP, for each State fiscal year (July 1 to June 30) that a proposer offers the proposed program. (Form 4A Budget Form with Start-Up Costs Section, Form B Budget Form (No Start-up Costs). Since contract offers may be made up to three years with the option of a two-year extension at the discretion of the Department, proposal submissions should include annual program budgets for each fiscal year up to the maximum of 5 years. All start-up costs must be clearly identified and itemized in the budget and are only allowed in year 1 (FY2021) All revenue, including non-DOC revenue must be identified.

In addition to the full program budgets for the period the program is offered, a second set of annual budgets based on the minimal number of beds required for sustainability should be submitted in the event DOC does not have the funding available and/or need for all the beds offered in a program proposal.

Proposers should also complete Form 4C Summary of Total Program Costs, based on the number of years that a program is being offered.

Preference will be given to proposals that have more efficient and economical total costs, as well as those that have more efficient and economical costs per bed.

The cost per bed for current DOC-contracted residential programs is as follows.

Program Type	Low	High	Average
Work Release*	\$20,006	\$39,954	\$29,382
Substance Abuse	\$25,669	\$25,669	\$25,669
Mental Health	\$60,205	\$60,550	\$60,378
Transitional Supportive Housing*	\$23,655	\$23,655	\$23,655
Scattered Site Supportive Housing	\$24,061	\$26,000	\$25,115

*Excludes outliers

- c. **Budget Justification/Narrative.** A responsive proposal shall detail how costs included in the budget were calculated. All start-up costs must be listed separately and clearly detailed in the budget justification/narrative. Either Microsoft Office Word or Excel format is acceptable.

Note 1: The Department reserves the right to fund portions of a proposed budget and/or require adjustments.

Note 2: The Department reserves the right to consider all factors including cost in the final selection of a successful proposer. The opportunity to negotiate a contract with the Department will not be offered based on cost alone.

IV. PROPOSAL OUTLINE

*This section presents the **required** outline that must be followed when submitting a proposal in response to this RFP. Proposals must include a Table of Contents that exactly conforms with the required proposal outline (below). Proposals must include all the sections listed below, in the order specified, using the prescribed lettering and numbering scheme. Incomplete proposals will not be evaluated.*

Residential Program Proposal Outline		Page
A. Cover Sheet		1
B. Table of Contents		2
C. Declaration of Confidential Information		Etc.
D. Conflict of Interest - Disclosure Statement		
E. Executive Summary		
F. Main Proposal Components.		
1. Organizational Requirements		
a. Purpose/Mission/Philosophy		
b. Entity Type/Years in Operation		
c. Administrative Office Location		
d. Qualifications/Certification/Licensure		
2. Service Requirements		
a. Referral Process		
b. Program Capacity		
c. Date of Program Availability		
d. Location of Program		
e. Room and Board		
f. Accountability		
g. Intake/Orientation		
h. Development of Individual Service/Treatment Plans		
i. Service/Treatment Components		
j. Evidence-Based Programming		
k. Internal Security Measures		
l. Prison Rape Elimination Act		
m. Eligibility and Exclusions		
3. Staffing Requirements		
a. Program Staff/Manager		
b. Recruitment, Hiring, and Retention Plan		
c. Staff Training/Education/Development		
d. Multilingual and Multicultural Competency		

- 4. Reporting Requirements**
- a. Equipment
- b. Reports
- c. Disclosure Policy
- d. Performance Outcome Measures

- 5. Work Plan**

- G. Cost Proposal Components**

- 1. Financial Requirements**
- a. Financial Capacity
- b. Financial Controls

- 2. Budget Requirements**
- a. Budget
- b. Budget Justification/Narrative

- H. Appendices**

- 1. Proof of Nonprofit Status
- 2. Reference Letters
- 3. Proof of Zoning
- 4. Proof of Licensure
- 5. Staffing Matrix
- 6. Job Descriptions
- 7. Resumes
- 8. Audited Financial Statements
- 9. Commission on Human Rights and Opportunities, Workplace Analysis
Affirmative Action Report ¹
- 10. Consulting Agreement Affidavit (OPM Ethics Form 5) ²
- 11. OPM Iran Certification Form 7³
- 12. Floor Plan

¹ The proposer must upload this report into the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP. More information is embedded in Section II.E.2 of this RFP as a hyperlink.

² Required when the contract resulting from this RFP has an anticipated value of \$50,000 or more in a calendar or fiscal year. The proposer must upload this certification into the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP. More information is embedded in Section II.E.3 of this RFP as a hyperlink.

³ Required when the contract resulting from this RFP has an anticipated value of \$500,000 or more in a calendar or fiscal year. The proposer must upload this certification into the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP. More information is embedded in Section III.E.5 of this RFP as a hyperlink.

Non-Residential Program Proposal Outline

	Page
A. Cover Sheet	1
B. Table of Contents	2
C. Declaration of Confidential Information	Etc.
D. Conflict of Interest - Disclosure Statement	
E. Executive Summary	
F. Main Proposal Components.	
1. Organizational Requirements	
a. Purpose/Mission/Philosophy	
b. Entity Type/Years in Operation	
c. Administrative Office Location	
d. Qualifications/Certification/Licensure	
2. Service Requirements	
<i>(Note: For the Employment, Educational and Vocational Coordinator this section should include a. – h. as listed below. For Fiduciary Services this section contains the narrative regarding the services to be delivered.)</i>	
a. Employment, Educational and Vocational Readiness.	
b. Referral Process	
c. Capacity	
d. Date of Service Availability	
e. Location of Delivered Services	
f. Hours of Operation	
g. Intake	
h. Service Components	
3. Staffing Requirements	
a. Program Staff/Manager	
b. Recruitment, Hiring, and Retention Plan	
c. Staff Training/Education/Development	
d. Multilingual and Multicultural Competency	
4. Reporting Requirements	
a. Equipment.	
b. Reports	
c. Disclosure Policy	
d. Performance Outcome Measures	
5. Work Plan	
G. Cost Proposal Components	
1. Financial Requirements.	
a. Financial Capacity	

b. Financial Controls

2. Budget Requirements

a. Budget.

b. Budget Justification/Narrative.

H. Appendices

1. Proof of Nonprofit Status

2. Reference Letters

3. Proof of Zoning

4. Proof of Licensure

5. Staffing Matrix

6. Job Descriptions

7. Resumes

8. Audited Financial Statements

9. Commission on Human Rights and Opportunities, Workplace Analysis
Affirmative Action Report ⁴

10. Consulting Agreement Affidavit (OPM Ethics Form 5) ⁵

11. OPM Iran Certification Form 7⁶

⁴ The proposer must upload this report into the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP. More information is embedded in Section II.E.2 of this RFP as a hyperlink.

⁵ Required when the contract resulting from this RFP has an anticipated value of \$50,000 or more in a calendar or fiscal year. The proposer must upload this certification into the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP. More information is embedded in Section II.E.3 of this RFP as a hyperlink.

⁶ Required when the contract resulting from this RFP has an anticipated value of \$500,000 or more in a calendar or fiscal year. The proposer must upload this certification into the Department of Administrative Services (DAS) on-line data vault, called BizNet, prior to submitting a proposal in response to this RFP. More information is embedded in Section III.E.5 of this RFP as a hyperlink.

V. FORMS



REQUEST FOR PROPOSALS
RFP # DOC-RES-NON-RES/PS -2020-SM
Department of Correction
January 2020

FORM #1: Letter of Intent

Return to:

Suzanne Mazzotta
 Department of Correction
 24 Wolcott Hill Road
 Wethersfield, CT 06109
 860-692-7886 (Telephone)
DOC.RFP@ct.gov (Email)

The organization below intends to submit a proposal in response to the above referenced RFP.

Prospective Proposal Program Type:

- Residential** -- Work Release Women & Children Substance Abuse Mental Health
 Transitional Housing Scattered Site Supportive Housing Sex Offender Behavioral Intervention
 Re-Housing Per Diem

Non-Residential -- Fiduciary Services Employment Services/Educational/Vocational Coordinator

Note: This letter is a non-binding expression of interest and does not obligate the sender to submit a proposal.

Prospective Proposer

--	--

Legal Name Telephone Number

--	--	--

Mailing Address Town, State Zip Code

Contact Person

--	--

Name Title

--	--	--

Mailing Address (if different) Town, State Zip Code

--	--	--

Telephone Number Fax Number E-mail Address

Person Authorized to Sign Contract:

--	--

Name Title

--	--

Signature Date



REQUEST FOR PROPOSALS
RFP # DOC-RES/NON-RES-PS-2020-SM
 Department of Correction
 January 2020

FORM #2: Proposal Cover Sheet

Proposer's Legal Name _____ FEIN _____
 _____ (month) to _____ (month)
 Address _____ Proposer's Fiscal Year: _____
 City/Town _____ State _____ Zip Code _____
 Contact Name: _____ Title: _____

Telephone Number _____ E-Mail Address _____

Total Annual Program Cost _____ Total Annual Cost to CTDOC _____ Requested Startup Costs _____
(not including startup) *(not including startup)*

Proposed Program Type:

- Residential** -- Work Release Women & Children Substance Abuse Mental Health
 Transitional Housing Scattered Site Supportive Housing Sex Offender Behavioral Intervention
 Re-Housing Per Diem
Non-Residential -- Fiduciary Services Employment Services/Educational/Vocational Coordinator

Proposed Program Name: _____

Proposed Program Address: _____

Proposed # of Beds: _____ Total Program # of Beds _____ # of DOC Beds _____

Is your organization a non-profit? Yes No Is your organization incorporated? Yes No

Is your organization registered as a: Minority Business Enterprise? Yes No
 Women Business Enterprise? Yes No
 Small Business Enterprise? Yes No

I certify that to the best of my knowledge and belief, the information contained in this proposal is true and correct. The proposal has been duly authorized by the governing body of the proposer, the proposer has the legal authority to apply for this funding, the proposer will comply with applicable state and federal laws and regulations, and that I am a duly authorized signatory for the proposer.

 Signature of Authorizing Official Date

 Typed Name and Title



REQUEST FOR PROPOSALS
RFP # DOC-RES/NON-RES-PS-2020-SM
 Department of Correction
 January 2020

FORM #3: Expansion to Existing Program Cover Sheet

Proposer's Legal Name

FEIN

Contact Name

Title

Telephone Number

Fax Number

E-Mail Address

CURRENT PROGRAM INFORMATION:

Program Name

Program Type

Gender

Program Address

Total Current Beds in Program

Total Current DOC Beds

PROPOSED EXPANSION INFORMATION:

Beds/Slots Proposed for Expansion

Date of Availability to DOC

Requested Startup Costs

Annual DOC Cost of Expansion

Location of Proposed Beds

I certify that to the best of my knowledge and belief, the information contained in this proposal is true and correct. The proposal has been duly authorized by the governing body of the proposer, the proposer has the legal authority to apply for this funding, the proposer will comply with applicable state and federal laws and regulations, and that I am a duly authorized signatory for the proposer.

Signature of Authorizing Official:

Date

Typed Name and Title

FORM #4A: Proposed Annual Program Budget with start-up costs section for FY21 only

Proposer Name: _____

Proposed Program: _____

Served/#of Beds: _____

Budget Year: FY2021: July 1, 2020 - June 30, 2021

Salary Detail:

Direct Client Services Staff:	Number FTE's	Average Annual Salary	Annual Line Total
Program Director		\$ -	\$ -
Counselors		\$ -	\$ -
Staff Supervisor		\$ -	\$ -
Client Supervisor/Monitor		\$ -	\$ -
Job Developer		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Client Salaries:			\$ -

Direct Support Staff

Cook		\$ -	\$ -
Dirver		\$ -	\$ -
Security		\$ -	\$ -
Maintenance/Custodian		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Service Support Salaries:			\$ -
Total Direct Salaries:			\$ -

Account Number and Description	Cost
Hyperlink to State Account Definitions Account Definitions	
5000 DIRECT EXPENSES	
5100 SALARIES (As detailed above)	\$ -
5101 Staff Salaries & Wages	\$ -
5102 Overtime	\$ -
5200 FRINGE BENEFITS	\$ -

5400 CONTRACTUAL SERVICES	\$	-
5401 Medical Professional	\$	-
5402 Behavioral Health Professional	\$	-
5403 Contracted Workers - Non-Payroll	\$	-
5404 Contracted Direct Client Care	\$	-
5405 Pass-through Program Funding	\$	-
5406 Audit	\$	-
5407 Legal	\$	-
5408 Accounting	\$	-
5409 Payroll Processing	\$	-
5410 Webinar Tech/Computer Support	\$	-
5411 Translation & Interpretation	\$	-
5412 Drug Testing	\$	-
5440 Other Contractual (narrative)	\$	-
5500 TRANSPORTATION	\$	-
5501 Staff Travel Reimbursement	\$	-
5502 Vehicle Leases	\$	-
5503 Vehicle Maintenance	\$	-
5504 Mileage Reimbursement	\$	-
5550 Other Transport (narrative)	\$	-
5600 MATERIALS AND SUPPLIES	\$	-
5601 Food	\$	-
5602 Lab & Medical Supplies	\$	-
5603 Equipment (Less than \$5,000)	\$	-
5604 Leased Office Equipment	\$	-
5605 Printing, Publication and Reproduction	\$	-
5606 Postage	\$	-
5607 Outreach/Program Supplies	\$	-
5660 Other Materials (specify in narrative)	\$	-
5700 FACILITIES	\$	-
5701 Rent & Real Estate Taxes	\$	-
5702 Security	\$	-
5703 Maint & Repair - Facility/Plan	\$	-
5704 Utilities	\$	-
5705 Janitorial	\$	-
5770 Other Facilities (narrative)	\$	-
	\$	-
5800 CAPITAL EXPENSES (> \$5,000)	\$	-
5801 Capital Equipment	\$	-
5802 Depreciation	\$	-
5803 Office Equipment	\$	-
5880 Other Capital (specify in narrative)	\$	-

5900 OTHER EXPENSES	\$	-
5901 Communications	\$	-
5902 Insurance	\$	-
5903 Housekeeping	\$	-
5904 Conferences	\$	-
5905 Staff Training	\$	-
5906 Provider Employee Drug Testing/Bkgd Checks	\$	-
5907 Lease Office Equipment	\$	-
5908 Office Supplies	\$	-
5909 Telephone-Cellphone	\$	-
5910 Training Materials	\$	-
5911 Printing and Advertising	\$	-
5912 Membership Dues & Subscription	\$	-
5916 Interest Cost-Building and Land Improvements	\$	-
5917 Working Capital Interest	\$	-
5990 Other (specify in narrative)	\$	-
6100 CLIENT SUBSIDIES	\$	-
6101 Transportation	\$	-
6102 Nutrition/Food Vouchers	\$	-
6104 Housing	\$	-
6105 Personal Items	\$	-
6107 Client Activities	\$	-
6150 Other Client Subsidies (specify in narrative)	\$	-
TOTAL DIRECT EXPENSES	\$	-
7000 INDIRECT EXPENSES		
7100 ADMINISTRATIVE & GENERAL	\$	-
7110 Staff Salaries & Wages	\$	-
7120 Fringe Benefits	\$	-
7150 All Other A&G	\$	-
TOTAL EXPENSES	\$	-
4000 INCOME		
4100 CONTRACT FUNDING		
4102 Federal/Other Funds	\$	-
4200 Other State Agency Funding (ld in narrative)	\$	-
4300 OTHER INCOME	\$	-
4301 Direct Federal Funds	\$	-
4302 Direct Private Foundation Grants	\$	-
4304 Investment/Interest Income	\$	-
4305 Client/Participant Fees	\$	-
4307 United Way	\$	-
4313 Fundraising	\$	-
4315 Insurance	\$	-

4316 Other (specify in narrative)	\$	-
4317 Other (specify in narrative)	\$	-
4318 Other (specify in narrative)	\$	-
	\$	-
TOTAL ALL NON-DOC REVENUE	\$	-
ANNUAL REQUESTED DOC FUNDING	\$	-

START UP COSTS FY2021 ONLY - Itemize on the following lines:		
	\$	-
	\$	-
	\$	-
	\$	-
TOTAL START UP COSTS:	\$	-

NON DOC START UP FUNDING	\$	-
DOC START UP FUNDING REQUESTED	\$	-

TOTAL DOC FUNDING REQUESTED FOR 2021: ANNUAL & START UP	\$	-
--	----	---

FORM #4B: Proposed Annual Program Budget

Proposer Name: _____

Proposed Program: _____

Served/# of Beds: _____

Budget Year: FY _____

Salary Detail:

Direct Client Services Staff:	Number FTE's	Average Annual Salary	Annual Line Total
Program Director		\$ -	\$ -
Counselors		\$ -	\$ -
Staff Supervisor		\$ -	\$ -
Client Supervisor/Monitor		\$ -	\$ -
Job Developer		\$ -	\$ -
Other:		\$ -	
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Client Salaries:			\$ -

Direct Support Staff

Cook		\$ -	\$ -
Dirver		\$ -	\$ -
Security		\$ -	\$ -
Maintenance/Custodian		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Other:		\$ -	\$ -
Subtotal Direct Service Support Salaries:			\$ -
Total Direct Salaries:			\$ -

Account Number and Description	Cost
Hyperlink to State Account Definitions Account Definitions	
5000 DIRECT EXPENSES	
5100 SALARIES (As detailed above)	\$ -
5101 Staff Salaries & Wages	\$ -
5102 Overtime	\$ -
5200 FRINGE BENEFITS	\$ -

5400 CONTRACTUAL SERVICES	\$	-
5401 Medical Professional	\$	-
5402 Behavioral Health Professional	\$	-
5403 Contracted Workers - Non-Payroll	\$	-
5404 Contracted Direct Client Care	\$	-
5405 Pass-through Program Funding	\$	-
5406 Audit	\$	-
5407 Legal	\$	-
5408 Accounting	\$	-
5409 Payroll Processing	\$	-
5410 Webinar Tech/Computer Support	\$	-
5411 Translation & Interpretation	\$	-
5412 Drug Testing	\$	-
5440 Other Contractual (narrative)	\$	-
5500 TRANSPORTATION	\$	-
5501 Staff Travel Reimbursement	\$	-
5502 Vehicle Leases	\$	-
5503 Vehicle Maintenance	\$	-
5504 Mileage Reimbursement	\$	-
5550 Other Transport (narrative)	\$	-
5600 MATERIALS AND SUPPLIES	\$	-
5601 Food	\$	-
5602 Lab & Medical Supplies	\$	-
5603 Equipment (Less than \$5,000)	\$	-
5604 Leased Office Equipment	\$	-
5605 Printing, Publication and Reproduction	\$	-
5606 Postage	\$	-
5607 Outreach/Program Supplies	\$	-
5660 Other Materials (specify in narrative)	\$	-
5700 FACILITIES	\$	-
5701 Rent & Real Estate Taxes	\$	-
5702 Security	\$	-
5703 Maint & Repair - Facility/Plan	\$	-
5704 Utilities	\$	-
5705 Janitorial	\$	-
5770 Other Facilities (narrative)	\$	-
	\$	-
5800 CAPITAL EXPENSES (> \$5,000)	\$	-
5801 Capital Equipment	\$	-
5802 Depreciation	\$	-
5803 Office Equipment	\$	-
5880 Other Capital (specify in narrative)	\$	-

5900 OTHER EXPENSES	\$	-
5901 Communications	\$	-
5902 Insurance	\$	-
5903 Housekeeping	\$	-
5904 Conferences	\$	-
5905 Staff Training	\$	-
5906 Provider Employee Drug Testing/Bkgd Checks	\$	-
5907 Lease Office Equipment	\$	-
5908 Office Supplies	\$	-
5909 Telephone-Cellphone	\$	-
5910 Training Materials	\$	-
5911 Printing and Advertising	\$	-
5912 Membership Dues & Subscription	\$	-
5916 Interest Cost-Building and Land Improvements	\$	-
5917 Working Capital Interest	\$	-
5990 Other (specify in narrative)	\$	-
6100 CLIENT SUBSIDIES	\$	-
6101 Transportation	\$	-
6102 Nutrition/Food Vouchers	\$	-
6104 Housing	\$	-
6105 Personal Items	\$	-
6107 Client Activities	\$	-
6150 Other Client Subsidies (specify in narrative)	\$	-
TOTAL DIRECT EXPENSES	\$	-
7000 INDIRECT EXPENSES		
7100 ADMINISTRATIVE & GENERAL	\$	-
7110 Staff Salaries & Wages	\$	-
7120 Fringe Benefits	\$	-
7150 All Other A&G	\$	-
TOTAL EXPENSES	\$	-
4000 INCOME		
4100 CONTRACT FUNDING		
4102 Federal/Other Funds	\$	-
4200 Other State Agency Funding (ld in narrative)	\$	-

4300 OTHER INCOME	\$	-
4301 Direct Federal Funds	\$	-
4302 Direct Private Foundation Grants	\$	-
4304 Investment/Interest Income	\$	-
4305 Client/Participant Fees	\$	-
4307 United Way	\$	-
4313 Fundraising	\$	-
4315 Insurance	\$	-
4316 Other (specify in narrative)	\$	-
4317 Other (specify in narrative)	\$	-
4318 Other (specify in narrative)	\$	-
	\$	-
TOTAL ALL NON-DOC REVENUE	\$	-

TOTAL DOC ANNUAL FUNDING REQUESTED	\$	-
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Form #4c: Summary of Total Proposal Costs

This form represents a summary of the DOC funding requested for the number of years a proposer is offering such program.

(Note: Contract offers will be made up to three years with the option of a two-year extension at the discretion of DOC)

Proposer Name:

Program Name:

Served/# Beds

FULL PROGRAM

FY2021	Year 1	\$	-
FY2022	Year 2	\$	-
FY2023	Year 3	\$	-
FY2024	Year 4	\$	-
FY2025	Year 5	\$	-

TOTAL REQUESTED DOC FUNDING:	\$	-
-------------------------------------	----	---

MINIMUM PROGRAM REQUIRED TO BE SUSTAINABLE

FY2021	Year 1	\$	-
FY2022	Year 2	\$	-
FY2023	Year 3	\$	-
FY2024	Year 4	\$	-
FY2025	Year 5	\$	-

TOTAL REQUESTED DOC FUNDING FOR SUSTAINABILITY:	\$	-
--	----	---

FORM #5: Community Staffing Schedule

Provider: _____

Program: _____

Fiscal Year: _____

First Shift Staffing Schedule:

Position	Mon	Tues	Wed	Thurs	Friday	Sat	Sun

Second Shift Staffing Schedule:

Position	Mon	Tues	Wed	Thurs	Friday	Sat	Sun

Third Shift Staffing Schedule:

Position	Mon	Tues	Wed	Thurs	Friday	Sat	Sun

APPENDIX A – GENDER RESPONSIVE

APPROACHES FOR DEVELOPING GENDER-RESPONSIVE PROGRAMS AND SERVICES

The National Institute of Corrections has published guiding principles for the development of programming for female offenders. The Connecticut Department of Correction has adopted, and is in the process of implementing, the following gender responsive principles for female offender programming. It is the expectation of CTDOC that its contracted community programs for female offenders will also implement these principles.

- **Gender:** Acknowledge that gender makes a difference.
- **Environment:** Create an environment based on safety, respect, and dignity.
- **Relationships:** Develop policies, practices, and programs that are relational and promote healthy connections to children, family, significant others, and the community.
- **Services and supervision:** Address substance abuse, trauma, and mental health issues through comprehensive, integrated, and culturally relevant services and appropriate supervision.
- **Socioeconomic status:** Provide women with opportunities to improve their socioeconomic conditions.
- **Community:** Establish a system of community supervision and reentry with comprehensive, collaborative services.

A number of issues must be considered for the development of gender-responsive programs and services in the community. A gender-responsive approach would include comprehensive services that take into account the content and context of women's lives. Program design should take into consideration the larger social issues of poverty, abuse, and race/gender inequalities as well as individual factors that affect female offenders released to the community.

Services should also be responsive to the offender's cultural background. Culture may be defined as a framework of values and beliefs and a means of organizing experience. Programs and services that are culturally sensitive take into account differences in ethnicity (e.g., language, customs, values, and beliefs) to create a sense of inclusiveness. Programming that is responsive in terms of both gender and culture emphasizes support.

Service providers need to focus on the offender's strengths, and recognize that a woman cannot be treated successfully in isolation from her social support network (i.e., her relationships with her children, partner, family, and friends). Coordinating systems that link a broad range of services will promote a continuity-of-care model. This comprehensive approach will provide for a sustained continuity of treatment, recovery, and support services, beginning at the start of incarceration and continuing through transition to the community.

When creating a gender responsive program, staff should take into account both structural and content, context and environmental issues.

Structural Issues

- Contemporary theoretical perspectives on the offender's particular pathways into the criminal justice system (relational theory, trauma theory, etc.) fit the psychological and social needs of women and reflect the realities of their lives.
- Treatment and services are based on the offender's competencies and strengths, and promote self-reliance.

- Women-only groups are used, especially for primary treatment (trauma, substance abuse, etc.).
- Staff members reflect the client population in terms of gender, race/ethnicity, sexual orientation, language, and ex-offender and recovery status.
- Female role models and mentors are provided who reflect the racial, ethnic, and cultural backgrounds of the clients.
- Cultural awareness and sensitivity are promoted using the resources and strengths available in various communities.
- Gender-responsive assessment tools and individualized treatment plans are utilized, with appropriate treatment matched to the identified needs and assets of each client.
- Transitional programs are included as part of gender-responsive practices, with a particular focus on building long-term community support networks for women.

Content/Context/Environmental Issues

- To fully address the needs of women, programs use a variety of interventions with behavioral, cognitive, affective/dynamic, and systems perspectives.
- Services/treatment address women's practical needs, such as housing, transportation, child care, and vocational training and job placement.
- Participants develop skills in a range of educational and vocational (including nontraditional) areas.
- Emphasis is placed on parenting education, child development, and relationship/reunification with children.
- The environment is child friendly, with age appropriate activities designed for children.
- Service providers are cross-trained in three primary issues (substance abuse, trauma, and mental health).
- Resources, including skilled personnel, must be allocated.
- The environment in which services are provided must be closely monitored to ensure the emotional and physical safety of the women being served.
- Service providers must receive training in cultural sensitivity so that they can understand and respond effectively.

APPENDIX B
STATE OF CONNECTICUT RAPID RE-HOUSING MODEL GUIDELINES

State of Connecticut
Rapid Re-Housing Model
Guidelines

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I. Rapid Re-Housing Program Model in State of Connecticut

Rapid re-housing (RRH) is a time-limited intervention intended to house families or individuals experiencing homelessness as quickly as possible. The service model includes three core components: **1) housing location, 2) financial assistance, and 3) case management**⁷. RRH is a housing first⁸, no-barrier intervention with no preconditions to enrollment other than homeless status (See HUD Definition of [literal homelessness](#)). The level of case management and financial assistance is based on a progressive engagement model⁹ where the minimum amount of services is provided before increasing support to meet the household's needs. In some cases, households with more severe barriers to housing may require Critical Time Intervention¹⁰ or other more service-intense resources instead of progressive engagement.

A. Purpose of this Document

This document is intended to serve as a guide to service providers and funders engaged in RRH activities in the State of Connecticut. The document defines the local RRH model and promotes a unified understanding of the core elements and expectations of local RRH programs. This model was co-created by the State of Connecticut Department of Housing, Department of Mental Health and Addiction Services, Balance of State (including Housing Innovations) and Opening Doors Fairfield County Continuums of Care and the Connecticut Coalition to End Homelessness and was informed by:

- RRH provider Learning Collaborative;
- local Coordinated Access Network meetings;
- local pilot projects and evaluations;
- system-wide analysis and recommendations provided by [Focus Strategies](#) (SWAP) and
- national best/promising practices as defined by the Department of Housing and Urban Development (HUD), the National Alliance to End Homelessness, and the United States Interagency Council on Homelessness.

As the local homeless response system continues to evolve and strengthen its ability to make homelessness rare, brief, and non-recurring, there is an increased need for system-wide alignment around common goals and outcomes, program models and activities, and performance standards. **RRH programs are expected to adhere to the RRH model outlined in this document.** Fidelity to this model will help ensure that all clients enrolled in RRH have similar experiences and opportunities to attain housing regardless of which service provider they work with. Fidelity to this model will also facilitate system-wide evaluation and comparisons across programs.

B. Role of Rapid Re-Housing within the Homeless Services System

Rapid re-housing has an important role in the homeless services system including:

⁷ See *Definition of Terms* for details.

⁸ See *Definition of Terms* for details.

⁹ See *Definition of Terms* for details.

¹⁰ See *Definition of Terms* for details.

- reducing the amount of time a household experiences homelessness by focusing on quickly resolving the experience of homelessness;
- increasing the number of households exiting from homelessness; and
- ensuring that permanent supportive housing interventions are reserved for households with the greatest service needs who would otherwise be unable to maintain housing.

C. Population-Specific Rapid Re-Housing Projects

Connecticut has recently received HUD Continuum of Care awards to serve youth and survivors of domestic violence and human trafficking. There may be slight variation in the guidelines for these two projects which will be highlighted throughout this document.

1. Youth Homelessness Demonstration Project Rapid Re-Housing (YHDP)

In 2016, the Reaching Home for Youth and Young Adult Homelessness Workgroup, a multi-stakeholder group coordinating the statewide effort to end youth homelessness in Connecticut by the end of 2020, partnered with the Connecticut Balance of State Continuum of Care (CT BOS) to apply for HUD's Youth Homelessness Demonstration Program (YHDP). This is a new HUD initiative, providing technical assistance as well as funding for planning and homeless assistance projects, to learn how communities can successfully approach the goal of preventing and ending youth homelessness by building comprehensive systems of care for young people rather than implementing individual or unconnected projects that serve this population.

In January 2017, HUD awarded the CT BOS CoC \$6,552,903 under the YHDP initiative. A YHDP Grant Management Team was formed, led by DOH to manage the process of developing a coordinated community plan and executing other YHDP requirements. The Youth Action Hub (YAH) serves as a partner and youth advisory board. After an extensive planning process in collaboration with the Youth Action Hub and regional Coordinated Access Networks (CANs)/Youth Engagement Team Initiatives (YETIs), the YHDP Grant Management Team determined that allocating YHDP project funding toward a youth shelter diversion/rapid exit fund, youth navigators, rapid rehousing, and crisis housing will most effectively assist us in achieving our goals in ending youth homelessness. The YHDP projects are part of a coordinated housing continuum that ensures youth experiencing homelessness receive the assistance needed to rapidly obtain permanent housing.

DOH is the YHDP RRH grantee, contracting with seven sub-recipients to provide housing placement and stabilization services as well as contracting separately with a fiduciary to manage the rental assistance funding and payments to the landlords. In addition to the policies and procedures contained with this guidance document, YHDP RRH providers must take a Trauma Informed Care, Harm-Reduction, and Positive Youth Development¹¹ approach to serving youth, building on a youth's strengths and resiliency through individualized case management and connection to services and community supports. Programs should also be collaborating with youth on ongoing program improvement, including offering every youth leaving their program

¹¹ See *Definition of Terms* for details.

the opportunity to complete the YHDP Participant Satisfaction Survey (*See Forms: YHDP Only - 2019YHDP_SurveyLinks*).

2. Connecticut Domestic Violence & Human Trafficking Rapid Re-Housing Program (CT DV/HT RRH)

The Connecticut Domestic Violence & Human Trafficking Rapid Re-Housing Program (CT DV/HT RRH) is designed to meet the specific needs of domestic violence, dating violence, and human trafficking survivors. It establishes a systemic collaboration between domestic violence, human trafficking and housing providers that will enhance survivor access to housing resources and provide on-going trauma-informed, victim-centered support services necessary to achieve financial and housing stability. Similar to traditional rapid re-housing programs, CT DV/HT RRH is an intervention designed to help survivors quickly exit homelessness, return to housing in the community, and not become homeless again in the near term.

The CT Department of Housing will provide direct oversight and administration of the CT DV/HT RRH program. Subrecipient CCADV's Director of Housing Advocacy will supervise and guide the case management and support services provided by the CT DV/HT RRH identified domestic violence and human trafficking providers. The CT DV/HT RRH is a specialized collaboration between domestic violence, human trafficking, and homeless providers that leverages the expertise of homeless providers to quickly identify and secure safe, appropriate housing, while ensuring that domestic violence and human trafficking survivors have the skilled support and case management that will most effectively address their unique needs.

Trauma-informed, Survivor-centered: The use of a trauma-informed approach requires a basic understanding of trauma and designing services to acknowledge the impact of violence and trauma on survivors' lives and behavior. It is sensitive, respectful, and consciously avoids re-traumatization. A survivor-centered approach focuses on the needs and concerns of the survivor while encouraging them to be engaged participants in the process. It empowers them to make their own choices about housing and services.

II. Accessing Rapid Re-Housing Services in State of Connecticut

A. Accessing Rapid Re-Housing

All referrals to RRH must come from the local Coordinated Access Network Housing Solutions Meetings. To receive a referral, a household has to meet the eligibility criteria for RRH (literally homeless) and complete a housing assessment (VI SPDAT/Next Step Tool). Exemptions to the YHDP RRH prioritization may be made with DOH approval (*See Form #21 - RRH Exemption Form*).

Rapid Re-housing providers are required to report vacancies to the CAN as soon as possible, with the goal of reporting within 24 hours of the slot becoming available. If providers know of an impending vacancy, they are required to report the anticipated availability date within 72 hours of being made aware of such availability.

Consumers may decline a referral because of program requirements that are inconsistent with their needs or preferences. There is no limitation on this option to decline. The Receiving Program must document the reason for client rejections.

RRH programs may only decline referrals for individuals and families found eligible for and referred by the Coordinated Access Network under limited circumstances: such as there is no actual vacancy available; the individual or family missed two intake appointments; the household presents with more people than referred by the Coordinated Access Network.

An intake decision notification will include at a minimum:

- First available move-in date, if applicable
- Reason the client cannot enter the program, including reason for rejection by client or program, if applicable.
- Alternative recommendation regarding indicated housing model/exit option for the client with justification, if applicable.
- Instructions for appealing the decision, including the contact information for the person to whom and time frame under which the appeal should be submitted.

If the homeless individual or family is accepted, the Receiving Program must document that acceptance and notify applicant of acceptance within one business day. In all cases, best faith effort for prompt unit turnover should be made.

Once referrals have been made by the CAN, the Receiving Program is required to hold the program opening vacant for a minimum of 7 days in order to locate and inform the individual/household of the availability of housing and arrange the intake. Programs should make a minimum of 3 different contact attempts over the course of the week. See Connecticut Coordinated Access Network Policies and Procedures Manual for additional details on prioritization and referrals, as amended from time to time, available at <http://www.ctcandata.org>.

RRH providers must participate in efforts to improve the efficiency and quality of the referrals.

B. Eligibility for Rapid Re-Housing Services

Local Coordinated Access Networks will assess all households for eligibility to receive homeless housing resources. RRH programs for young adults, single adults and families require the household to be experiencing literal homelessness, which includes the following situations:

- living and sleeping outside;
- sleeping in a place not meant for human habitation;
- staying in a shelter; or
- fleeing or attempting to flee domestic violence.

Note: Families or individuals in transitional housing are **not** eligible for RRH, except for YHDP.

Enrollment in RRH and case management should begin immediately upon RRH referral and should include support in obtaining proof of homelessness documentation. Verification of homelessness is needed prior to receiving financial assistance. Third party documentation is preferred, but self-certification may be used in some cases. For details regarding the best methods to document homelessness, view the [NAEH Homeless Status: Record Keeping](#) presentation. **For YHDP projects**, view the [CT YHDP Determining Homeless Status of Youth Guide](#).

There is no maximum income limit **at entry** as long as household is literally homeless. At the time of annual renewal, the household must have gross household income that is at or below 50% of Area Median Income (AMI) for CoC project and 30% of AMI for ESG projects. See current [income guidelines](#). There are no minimum income requirements. Please see attachment for accepted forms of income verification. Households with zero income should complete the zero income affidavit (*See Form #15 - Zero Income Affidavit*). Rapid Rehousing is a low-barrier intervention that accepts and houses households without preconditions such as income, sobriety, employment, etc.

For **YHDP RRH only**, all members of the household must be under the age of 25 at program entry unless it is a shared housing situation where the subsidy is apportioned out. This includes unaccompanied and parenting young adults, aged 18-24 at program entry, or emancipated minors. Proof of Date of Birth must be attached in the file for all members of the household who are aged 18 or older and who will be included on the subsidized lease. See DMV website for list of legal forms that are acceptable: http://www.ct.gov/dmv/lib/dmv/selectct/selectid_accept_docs3.pdf. In the absence of these forms at program entry, a client may self-certify their date of birth while the provider continues to assist with obtaining vital documents.

Once accepted for the program, the provider must explain the contents of and ask the household to sign the RRH Program Agreement (*See Form #2*), Participant Documents Received form (*See Form #6*), and the HMIS Release of Information (*See Form #0*) as well as complete the applicable RRH intake form in HMIS. Household members will also sign agency specific releases of information to facilitate connection to natural supports, community and clinical providers as needed.

RRH providers must conduct regular re-evaluations, at least every 90 days, from program participant's move-in date. To remain eligible, the program participant must continue to lack sufficient resources and support networks to retain housing without rental assistance (*See Form #20 - Recertification Form*).

CT DV / HT RRH Providers Only:

Domestic violence and human trafficking survivors who are included in the BNL through the CCADV-CCEH protocol to maintain confidentiality of clients will be served in priority order. Clients from the homeless system who self-identify at CAN intake as having experienced recent domestic violence will also be eligible. Clients will meet the Category 4 – HUD Homeless definition.

III. Core Service Components of Rapid Re-Housing

Rapid re-housing is an intervention designed to help households quickly exit homelessness, return to housing in the community, and not become homeless again in the near term. The core components of a RRH program are described below.

A. HOUSING IDENTIFICATION

The goal of housing identification is to quickly locate affordable housing options for the household experiencing homelessness. Activities under this core component are twofold:

1. Housing Option Recruitment and Support
 - Recruitment of landlords, homeowners, or renters with units, rooms or housing options;
 - Negotiation with landlords or homeowners to facilitate household access, including households with rental barriers;
 - Attentiveness to landlords, homeowners or roommates in order to preserve and develop partnerships for current and future housing placements; and
 - Administration of landlord or homeowner incentives and help recuperate losses.

2. Household Housing Search and Support
 - Assessment of tenant needs and barriers to housing placement;
 - Setting family or individual expectations on location, size and/or rent;
 - Conducting a targeted housing search based on informed client choice with housing affordability plan;
 - Supporting households with completing rental applications;
 - Providing tenant counseling (including education on how to speak with landlords, understanding rental applications and leases, securing utilities, and understanding tenant obligations);
 - Supporting households with setting up utilities and making moving arrangements; and
 - Supporting households to create shared housing arrangements as appropriate.

3. **Ensuring Lease and Unit Requirements are met**
 - a. Housing Inspections: When a family or individual identifies a housing option, case managers must conduct a housing inspection prior to move-in and financial assistance. Regardless of funding source, all programs will use [Housing Quality Standards \(See Form #9 – HQS Inspection Form 4.2015\)](#). Rental assistance will not be provided for units that fail to meet the applicable Housing Quality Standards under 24 CFR 982.401 unless the owner corrects any deficiencies within 30 days from the date of the initial inspection and the Contractor verifies that all deficiencies have been corrected (See Form #12 – Failed Inspection Letter). RRH providers shall conduct an annual re-inspection to determine if the housing unit continues to meet the HQS prior to providing additional rental assistance beyond one year.
 - b. Lead Based Paint Requirements: a visual assessment must be completed prior to providing rent assistance for all units constructed prior to 1978 in which a child under the

age of six is or will be living in the unit. A copy of the visual assessment must be documented on the HQS and maintained in the client file (*See Form #10 – Lead-Based Paint Visual Inspection*). This means, at a minimum, that all staff conducting HQS inspections must document completion of the HUD Lead Based Paint Visual Assessment Training available at www.hud.gov/offices/lead/training/visualassessment/h00101.htm. In addition, landlord and client must sign the Lead Disclosure Form (*See Forms #11 – Rental Form Lead Disclosure & #11A – Protect Your Family from Lead in Your Home*).

c. Coastal Barrier Resource Units: If the provider is serving households within a coastal county, the provider shall check unit addresses against the [US Fish and Wildlife Service's Coastal Barrier Resource System Mapper](#) to ensure that no units are rented in Coastal Barrier Resource Units. If a unit is located within a coastal county, the provider should retain a copy of the map documenting that the unit is not within a Coastal Barrier Resource Unit. Rental assistance cannot be provided to units within the Coastal Barrier Resources System.

d. Rent Reasonableness: Rental assistance can only be provided to a household if the rent for the unit is reasonable. The provider must determine whether the rent charged for the unit receiving rental assistance is reasonable in relation to rents being charged for comparable unassisted units, taking into account the location, size, type, quality, amenities, facilities, and management and maintenance of each unit. Reasonable rents for units being provided to clients must not exceed rents currently being charged by the same owner for comparable unassisted units. (*See Form #8 – Rent Reasonableness Checklist*)

e. Lease Requirements: The provider must ensure that a client enters into a lease for a term of at least one year that is renewable and is terminable only for cause. The lease must be renewable for terms that are a minimum of one month long. All clients and their respective landlords must also lease the VAWA lease addendum. (*See Form #16A – VAWA Lease Addendum*)

f. Necessary Landlord Documents: A provider must collect from the landlord proof of property ownership and a completed W-9 form (*See Form #18 – W9*).

B. FINANCIAL ASSISTANCE

Financial assistance is the second core component of RRH. Financial assistance in RRH provides short-term support to households so they can quickly obtain housing. Allowable financial assistance may include paying for security deposits, move-in expenses, rental arrears, rent, and utilities. See [Attachment A: Funding Guidelines](#).

Financial assistance is based on the progressive engagement principle of offering the minimum amount of assistance necessary for households to move out of homelessness and stabilize in permanent housing.¹² The role of the case manager is to prepare households for the end of the financial assistance by leveraging resources or working with them to increase household income.

¹² <http://www.endhomelessness.org/library/entry/rapid-re-housing-performance-benchmarks-and-program-standards>

Programs should begin by assuming that households, even those with zero income or other barriers, will succeed with a minimal subsidy and support rather than a long subsidy, and extend services and support if/when necessary.¹³

1. Rental Financial Assistance Calculation

Service providers shall apply the following rental assistance calculation (*See Form #25A – CoC, ODFC, ESG Calculation Tool*) to determine the rent subsidy amount for each household. Any exceptions to this model are to be handled as described under [Assessment and Re-Assessment](#) or by checking with the funder.

When identifying housing solutions, be sure that the housing search is giving consideration to the household's anticipated ability to pay rent independently within the year based on factors such as income history, employability, ability to live with family/friends/roommates, or other low cost housing options.

- **1st month:** Program pays **up to 100%** of security deposit and first month's rent. Per funding guidelines, move in costs may include utility deposits and moving expenses.
- **2nd month:** Household pay 30% of their **net*** household income towards rent. The program pays for the remaining portion.
- **3rd month and beyond:** Household pays 60% of their **net** household income towards rent* and the program pays the remaining rent.

Once 60% of the **household's net income** is equal to rent or the household reaches 12 months of rental assistance, the subsidy ends. In rare instances, a provider can request an exception to extend rental assistance up to a maximum of 24 months. These exceptions need to be discussed by the Coordinated Access Network. Final approval is granted by the Department of Housing (*See Form #21 – RRH Exemption Form*).

* "Net" is gross income taxes and garnishments.

The provider should provide written notice of the amount of rental assistance a client will receive to the client. (*See Sample Letters that can be adapted. Forms # 17, 17A, 17B*)

YHDP Providers Only:

The rental calculation for youth participants in the YHDP RRH program differs from the standard RRH calculations. Rental assistance is provided for the shortest amount of time necessary to prevent a return to homelessness and as a decreasing percentage of rent as follows:

- Months 1-3 80% of rent
- Months 4-6 60% of rent
- Months 7-9 40% of rent

¹³<http://www.endhomelessness.org/library/entry/rapid-re-housing-performance-benchmarks-and-program-standards>

- Months 10-12 20% of rent

The subsidy amount is adjusted as necessary to cap combined tenant rent and utility allowance contribution at 65% of gross household income. Projects must also document income and recalculate rent monthly for all participants using the 65% cap, including documenting any change in income. Until such time as further guidance becomes available, determinations regarding whether income is sufficient to pay full rent can be made by a project supervisor. A client is eligible for a utility allowance in accordance with the YHDP rental calculation tool if utilities are not included in the rent charge and utility company documentation is provided.

If continued assistance is authorized beyond 12 months, the subsidy will continue to be set at 20% of rent with adjustments to the subsidy amount as necessary to cap combined tenant rent and utility allowance contribution at 65% of gross household income. Under no circumstances can rental assistance and/or case management continue beyond 24 months.

Utility Deposits, rental application fees, eligible client transportation costs and other expenses may be through YHDP support service funding. Providers should consult their agency's fiscal staff to confirm what is eligible costs are within their DOH-approved budget. Expenditures must be documented in the client's file.

(See Form #25B – CT BOS YHDP RRH Rent Calc Tool)

2. Communication with Landlords

To help landlords understand the program and to set expectations, providers should send a letter or document to the landlord outlining the details of the program *(See Sample Letter that can be adapted - Form #17B)*. A letter should also be provided to the household to ensure the household understands their monthly assistance and financial obligations. *(See Sample Letters that can be adapted. Form # 17 and 17A)*.

3. Requesting Funding from state fiduciary

To request funding on behalf of a client for the landlord, a provider must complete a Fund Request Form *(See Form #19)* and upload it in HMIS with the relevant documents along with sending a corresponding email to the state fiduciary. The provider must also submit a Financial Service Request Form within HMIS. See [Section IV. HMIS and Data Collection Requirements](#) for further explanation.

4. Assessment and Re-Assessment of Housing Needs

Each household's needs must be re-assessed regularly to establish continued eligibility for and amount of continued financial assistance. **Rental financial assistance must be calculated monthly.**

Re-assessment of household need is completed within 90 of receiving rental assistance, and every 90 days thereafter. The housing stability plan will be reviewed monthly, at a minimum, (see [Section II. C. Case Management](#)) and address any barriers to achieving the goals. If progress

is not occurring, the case manager should initiate a conversation around expectations and limitations of the RRH program.

Once housed, the re-assessment must include at least the following components:

- documentation of household income. Household income cannot exceed percentage of Area Median Income (AMI) at 12 month re-assessment;
- percent of income being paid toward rent ratio;
- progress on housing stability and income goals;
- any recent changes in circumstance that will impact income or ability to work; and
- any gaps in resources or support networks inhibiting the household's ability to retain housing while paying 60% of income towards rent without financial assistance.

5. Rental Assistance over 12 Months

When households require rental financial assistance exceeding 12 months, RRH provider needs to discuss the household circumstances and receive approval from the Coordinated Access Network. Final approval is granted by the Department of Housing (*See Form #21 – RRH Exemption Form*).

6. Ending Financial Assistance

Providers may cease providing financial assistance for the following reasons:

- the household is no longer in need of or interested in receiving services;
- the household is able to pay 60% or less of their net income toward rent¹⁴;
- there is no (zero) communication in at least 30 days from the household after multiple (documented) provider attempts to contact (see [No Contact](#) procedures); or after re-assessment and attempts to reset expectations of the program by reviewing the housing stability plan, the household is not making progress toward housing goals.¹⁵

A stop payment letter should be sent to the landlord with a copy to the client. If a client is vacating the unit at the time rental assistance has ceased, then an exit inspection should be scheduled (*See Form #22 – Stop Payment Letter*).

C. CASE MANAGEMENT

Case management and services are the third core component of RRH. The goals of RRH case management are to help households obtain and move into permanent housing, to support households to stabilize in housing, and to connect them to community and mainstream services and supports if needed.¹⁶

Before services begin, case managers will explain the scope of RRH, including the role of case management in order to set expectations.

¹⁴ The RRH program model does not have income criteria, but some fund sources have income constraints. Please refer to contract guidelines.

¹⁵ For more information on ending assistance, see [“Procedures Around No Contact”](#)

¹⁶ http://www.endhomelessness.org/page/-/files/Rapid%20Re-Housing%20Performance%20Benchmarks%20and%20Program%20Standards_2016.pdf

Obtain and
move into
permanent
housing

Focused on assisting a household in obtaining and moving into a new housing unit. Case Managers should meet the household in the community and work on developing rapport. Case managers will assist in determining an affordable and realistic housing solution. Case managers should also resolve or mitigate tenant screening barriers like rental and utility arrears or multiple evictions; obtain necessary identification if needed; support other move-in activities such as obtaining furniture; and prepare households for successful tenancy by reviewing lease provisions.

Support
stabilization
in housing

RRH case management should be home-based and help households stabilize in housing. Case managers help households based upon their needs to identify and access supports including: family and friend networks; mainstream and community services; and employment and income. Case managers help identify and resolve issues or conflicts that may lead to tenancy problems, such as disputes with landlords or neighbors while also helping households develop and test skills they will use to retain housing once they are no longer in the program.

Close the
case

Financial assistance should end and the case should be closed when the household is no longer at imminent risk of returning to homelessness. **Case management may continue up to 60 days after financial assistance ends.** Households that require ongoing support after exiting the RRH program, case managers should provide households with warm handoffs to mainstream and community-based services that will continue to assist them in maintaining housing.

1. Housing Stability Plan Components

Case managers are required to work with each household to develop a housing stability plan. A housing stability plan¹⁷ is an individualized housing and service plan that is housing-focused and client-driven (*See Sample Form #7 – Stabilization Plan CTI 2017*). Housing stability plans are individualized based on housing needs as identified by each household, and are used to facilitate housing-focused case management with the goal of obtaining or maintaining housing stability. The provider must maintain a minimum of monthly contact. Services should build on the strengths and resources of each household.

Housing Stability Plan components should include:

- outline of goals pertaining to housing, including moving into housing and maintaining housing;
- outline roles and expectation of household;
- outline roles and expectation of case manager; and
- timelines for each step.

¹⁷ See *Definition of Terms* for details.

Case managers are to review the Housing Stability Plan at a minimum of once per month to assess progress. This tool may be used for progressive engagement to determine if additional supports are needed to attain the housing goals.

2. Case Notes and Client Contact Requirements

All Rapid Re-housing activities will be documented in case notes in HMIS. Case notes will include at minimum:

- Date, location, purpose of the activity
- Progress on housing goals
- Documentation of appointments, meetings, home visits, phone calls, letters with members of the household, landlord and other service providers. For contacts with anyone other than a member of the household, a signed release of information must be included in the case file indicating consent for exchange of information.
- Referrals made, including date of referral, name of referral and reason for referral
- Documentation of minimum monthly contact with the household
- Indication that the housing service plan has been reviewed and updated a minimum of once per month
- Documentation of activities related to program exit.

3. No Contact Procedures

Case managers will check-in with the household **at least once a month** while enrolled in the program. No matter which stage the household is in the program, it is always the **responsibility of the case manager to make contact with the household**. All possible ways or methods to contacting the household must be explored. A final attempt to contact must be in writing, allowing five days to respond.

If there is **no contact after 30 days** of multiple attempts to reach the household, **the case manager should exit the household from the program**. If the household calls after that period and is still experiencing homelessness, the case manager may help them reconnect with the Coordinated Access Network by calling 211.

If the case manager has not been able to have a robust check-in with the household for more than 30 days, but has had contact with the household and they are still in need of services, the case manager should continue to work with the household on their engaging with the household. If a household still needs and wants services, but missed appointments or communication is not regular, the case manager should initiate a discussion to reset the program expectations by reviewing housing stability plan and the expectations for re-assessment.

The goal is to minimize or eliminate any exits for “non-compliance” or “lack of participation” especially if the homeless situation has not yet been resolved. Instead, the goal is to be clear about the scope of RRH and to determine if RRH will meet the needs of the household, then continue to work with the household until they are permanently housed or otherwise resolve the housing crisis. Case Managers should make every effort to creatively engage with the household, meet them in the community at a location of their choosing and be persistent in their efforts to build rapport.

4. Termination of Assistance

RRH providers may terminate assistance to a participant who violates program requirements or for other actionable reasons as outlined in *Termination from RRH Housing (Form 23A)*. A termination letter must promptly be sent to the client (*See Form #23 – Termination Letter*). The client has the right to appeal the termination decision. A copy of the potential reasons for termination and the grievance policy shall be provided to all clients at intake (*See Form # 6 - Participant Documents Received*).

If an individual or family participating in a RRH project is at risk of returning to homelessness or is being discharged without a stable placement, the service provider is required to notify the local CAN at the earliest possible point in the process. The CAN will convene a case conference to evaluate the situation, determine intervention(s) that might help to preserve housing or secure an alternative placement, plan for the best possible outcome and try to prevent a return to homelessness.

5. Facilitating Rapid Re-Housing to Permanent Supportive Housing Transitions

In rare instances, RRH providers may determine that a household will need permanent supportive housing to maintain long-term housing stability. CT RRH operates under the philosophy that households can be better assessed for long-term needs once they are connected to stable housing. When a household is identified as potentially needing to transition from RRH to PSH level of care, CANs will take the following steps to determine a household's need by

1. Case conferencing with the Coordinated Access Network to discuss housing options
2. Completing a full SPDAT assessment

The intent is to assess for long-term supportive services and to ensure that the recommendation to transition to PSH level of care is not solely due to housing affordability.

CT DV / HT RRH Providers Only:

CT DV/HT RRH identified domestic violence and human trafficking providers will provide case management services to survivors. Case management will include trauma-informed, victim-centered approaches to rebuilding self-esteem, develop essential life skills, and establish financial independence by supporting their goals to increase income and self-sufficiency. Additionally, as is required in state standards and best-practice models, domestic violence advocates will provide survivors and their children with counseling, risk assessment, safety planning, goal setting, resources and referrals to other support services.

Supportive Service	Daily	Weekly	Monthly
Assessment of Service Needs	X		
Case Management	X		
Child Care	X		
Employment Assistance/Job Training		X	
Basic Needs	X		
Counseling	X		
Legal Services	X		
Life Skills	X		
Outreach Services	X		
Transportation	X		
Utility Deposits			X

Economic Empowerment Supports and Services

CT DV/HT RRH identified domestic violence and human trafficking providers will utilize Bank of America’s “Better Money Habits” curricula to build the financial capacity of survivors who are receiving rapid re-housing services. The curricula will address budgeting, financial planning, and managing debt. CT DV/HT RRH domestic violence and human trafficking providers will, regionally, receive in-person guidance on the curricula from Bank of America staff and work collectively to develop personal budgeting plans which support survivors’ ability to manage their income and save money.

Safety Planning

There are two options available for a survivor to access CT DV/HT RRH services – 1) waiving confidentiality and having their name publicly added to the BNL or 2) utilizing the CCADV-CCEH protocol (see appendix for complete protocol) to maintain their confidentiality when being entered into the BNL. Through an informed consent process, the subcontracted domestic violence and human trafficking providers should ensure the survivor understands the related risks and potential benefits of having their name publicly listed on the BNL and how this may impact their safety plan. It also allows people to safety plan for the risks that may follow being entered publicly into a database. Providers must be clear about information needed to determine eligibility and about any information-sharing needed as part of their program participation.

Knowing that each survivor’s situation is different and by collaborating and making careful assessments around entering publicly into the BNL, providers can more effectively advocate for appropriate interventions when necessary. Safety planning needs to be continuous, flexible and reflective of the possibility of rapid changes.

IV. HMIS and Data Collection Requirements

Rapid re-housing providers are required to enter data into the Homeless Management Information System (HMIS). Prompt and accurate data collection assists the homeless system to determine which services and programs clients are utilizing, evaluating the impact of RRH services, and make system improvements.

Providers must enter all HUD required data elements for each household enrolled in RRH. Please refer to the [RRH HMIS Quick Guide for more details](#).

The following are key pieces of information to record in HMIS for RRH programs.

- HMIS RRH Intake
- Initial and Monthly Financial Service Request (FSR)
- Case notes completed at a minimum of once per month
- HMIS RRH Discharge Form
- For those who are enrolled for more than 12 months, a completed annual assessment

Data Element	Definition
Program Entry Date	This is the date the case manager and household first meet and complete an intake.
Date of Move-In	This is the date the household moves into housing and begins receiving rent assistance. This date should fall after the Program Entry Date.* In Clarity, click the box “In Permanent Housing” on the entry or exit screen to enter the Date of Move-In.**
Program Exit Date	This is the date the household stopped receiving financial and case management services. This date should fall after the Date of Move-In (or on the Date of Move-In if the household is only receiving move-in assistance and no ongoing rental assistance).**
Exit Destination	This should reflect where the household is staying immediately after they finish participating in the program. So if the client is staying in the unit with no other subsidy, exit destination should be “Rental by client, no ongoing subsidy.”
Transaction Date	When completing a Financial Service Request (in HMIS), the transaction date refers to the month to which the payment applies. For example, if you are paying April rental assistance, enter 4/1/2019. If the tenant is moving into a new apartment mid-month, please use the start date of the lease (i.e. 4/15/2019). If you are requesting assistance for security deposit, please enter the start date of the lease.
Reference Date	When completing a Financial Service Request (in HMIS), the reference date is the date on which you are entering the Financial Service Request (FSR) into HMIS.

* If the household self-resolves their homeless situation or moves into housing without receiving assistance through RRH, do NOT enter a Date of Move-In. The Date of Move-In should only be used for clients who find and move into a unit and receive assistance (financial and/or case management) through the RRH program.

** If circumstances arise that require further case management or financial assistance, providers may keep a household enrolled for up to 60 days after their last financial assistance payment. Providers may keep the household enrolled and, if the household does not contact the provider for 60 days after the last payment, may back-date the Exit Date to the date of the last payment or case management meeting. Refer to [Section II.C](#) for instructions on when to close the case.

Completing Financial Service Requests in HMIS

The statewide RRH fiduciary will process landlord payments based on the data entered into the HMIS Financial Service Request. Please see the charge below for allowable expenses based on funding source and associated HMIS category.

Program Type	HMIS Name	Allowable Cost	Transaction Date
ESG, CoC, YHDP, CT DV/HT	Rental/Security Deposit	Security Deposit	Enter the start date of the lease
ESG, CoC, YHDP, CT DV/HT	Rental Assistance	Rental Assistance	Enter the beginning date of the month to which payment is applied – either the 1 st of the month OR if a new lease, start date of the lease.
ESG and YHDP only	Utility Assistance	Utility Payments (ESG & YHDP) or Utility Arrears Payment (ESG Only)	Enter the beginning date of the month to which payment is applied
ESG only	Application Fees	Rental Application Fees	Date of the payment
ESG only	Moving Costs	Moving Costs	Date of the payment
ESG only	Utility Deposit	Utility Deposit	Date of the payment
CoC, CT DV/HT	Home Repair	Property Damage	Date of the payment

Data Quality Assurance

It is the responsibility of the program staff to have accurate and complete data. To ensure compliance, refer to CTHMIS.com or [Rapid Rehousing in HMIS](#). Providers should direct any questions about entering data in HMIS to NutmegIT by submitting a help ticket here: Help@nutmegit.com. For clients who are remaining enrolled at least 12 months, providers must submit an annual assessment in HMIS no more than 30 days before or after the client’s anniversary date (one year from entry date).

Completing the HUD Annual Performance Report (APR)

For DOH contracted providers APR data will be submitted to DOH within 60 days of operating year end date. DOH will then submit APR to HUD.

CT DV / HT RRH Providers Only:

Given the unique circumstances experienced by domestic violence and human trafficking survivors and the associated dangers with fleeing such violence, it is critical that all CT DV/HT RRH contractors and subcontractors, barring the receipt of an appropriate “Release of

Information” from a survivor, abide by a strict and clear confidentiality policy. This must be done to minimize the ability of abusers to locate survivors as they access services.

V. Performance Standards

The State Department of Housing, Balance of State, Opening Doors Fairfield County and the Department of Mental Health and Addiction Services have agreed to adopt the following performance standards. These standards are subject to change. See your funder’s contract for specific measurements. Additional measures that will be reviewed, include but are not limited to: utilization rate, meeting/exceeding annual minimums, rental assistance expenditure, increase in earned income, and increase in other (non-earned) income. In addition, every effort should be made to secure housing within 30 days for clients. RRH specific dashboards can be found on CTCANData.org or CCEH.org.

Each RRH provider must have an ongoing program quality improvement process that includes evaluation of household outcomes and input from participant households and staff.

Program Targets:

Project Type	Core Outcomes			Entries from By Name List
	Exit Rate to Permanent Housing	Length of Stay	Return Rate to Homelessness	
Rapid Re-Housing	90%	Less than 180 days (less than 270 days for YHDP only)	Less than 10%	100%

VI. Ongoing Training and Learning Opportunities

Monthly Rapid Rehousing Learning Collaborative meetings are offered to support on-going learning and improvement for both adults, youth, and domestic violence RRH providers. These spaces are an opportunity for RRH staff to come together to problem-solve, share best practices, learn from peers, and connect with funders or evaluators. Additional resources on how other communities are using RRH services can be found at the [National Alliance to End Homelessness](#).

YHDP Rapid Rehousing programs should refer to the CT BOS website for additional training materials on HUD YHDP compliance, such as project administration and recordkeeping requirements, available at <http://www.ctbos.org/youth/>.

Questions

For promising practices, skill building, and Communities of Practice ideas, contact the Department of Housing Coordinated Access Network Managers, Kara Capobianco (Kara.Capobianco@ct.gov) or (Leigh.Shields-Church@ct.gov). If you have questions

regarding the YHDP Rapid Rehousing program, please contact Katie Durand at Kathleen.durand@ct.gov. If you have specific questions regarding allowable expenses or procedures under your contracts, contact your contract funder.

CT DV / HT RRH Providers Only:

Contractor Skills Training and Ongoing Learning Collaborative

The CT DV/HT RRH Director of Housing Advocacy will coordinate (1) the delivery of rapid rehousing core skills training, including the statewide *Housing First* approach, and (2) a RRH learning collaborative specific to domestic violence and human trafficking providers. The training and learning collaborative will include two (2) full days of training at the onset to domestic violence and human trafficking staff responsible for case management and support services under this contract. The Director of Housing Advocacy will execute a Memorandum of Understanding (MOU) with CT Coalition to End Homeless (CCEH) to participate in skills training and the RRH learning collaborative.

The learning collaborative will convene six (6) times per year, including an initial training at the launch of the CT DV/HT RRH program. Five (5) additional two-hour sessions will be attended by DV/HT providers, housing navigators, and, as needed, housing provider direct services staff and will provide peer monitoring, client feedback/evaluations, rules, harm reduction, and other training topics related to case review as designated by CCADV and CCEH. The Director of Housing Advocacy will be responsible for organizing all trainings, including location, content, and training materials.

VII. Required Policies

Confidentiality. All RRH providers must have an agency confidentiality policy. The Confidentiality Policy shall adhere to Departmental requirements, as set forth in executed contracts. Lead agencies shall have a copy of its subcontractor's confidentiality policies on file.

Grievance and Appeal Processes. All RRH programs must have a Grievance and Appeal Process that is written and documented (*Form Sample Form #24 - RRH Grievance Policy and Procedures*).

Maintenance of Records. RRH providers shall maintain program participant case files for all households referred to the program. All documentation related to program participant services shall be maintained in files as described above, in a secure location. Whenever possible, scan and upload documents to HMIS. HMIS files may be monitored as a substitute for paper records and case notes. (*See Form #1 – CT RRH File Checklist*). See contract and applicable CoC and YHDP trainings for additional program recordkeeping and reporting requirements.

Educational Rights. All RRH programs must inform homeless families and youth of their rights under the Every Student Succeeds Act (formerly McKinney-Vento Education Services). *See Form #4 – Education Rights – ESSA*.

Violence Against Women Act (VAWA). All RRH programs must provide notice of occupancy rights to the head of household and each adult tenant living in the household. An emergency transfer plan must be adopted based on HUD requirements. Records for all emergency transfer requests and outcomes must be maintained. Notice of Occupancy Rights (HUD-5380) & Certification Forms (HUD-5382) are to be given to adult tenants at the time of move-in and termination from the program. Landlords also need to sign the VAWA Lease Addendum (*See Forms #16A – VAWA Lease Addendum; #5 - VAWA 5382; #5A - Notice of Occupancy Rights under VAWA*).

CT DV / HT RRH Providers Only:

CCADV/CCEH Protocol

The protocol requires that a domestic violence (DV) or human trafficking (HT) survivor complete the VI-SPDAT with the domestic violence or human trafficking advocate. The DV/HT advocate will also work with the survivor to determine whether they should be marked on the appropriate CAN housing registry as a “high risk priority.” Domestic violence providers may obtain risk detail and interpret lethality using one or multiple factors, including risk assessment, arrest history, the presence of a restraining order and safety plan. If a survivor is marked as a high risk priority, that survivor moves to the top of the list for the appropriate housing resource, and will be the next served when that resource is available. Drawing from this information, the DV/HT advocate fills out a de-identified HMIS referral form which includes the following data entry fields:

Data Entry Field	Description of Field
Referral Date	Date the client’s unidentified information was sent to CCADV / CIRI
CAN which client seeks placement	Please enter the CAN name in which the client is seeking housing. This may not necessarily be the CAN in your catchment area.
VI-SPDAT Score	The score the client receives from the VI-SPDAT that was conducted by CCADV provider / CIRI in house.
Household Type	The number of bedrooms the client will need given their family size.
Chronically Homeless	Is the client chronically homeless by HUD’s definition? Please visit CCEH or HUD’s website for the complete definition.
High Risk	Is the client identified as high risk due to their LAP screen, danger assessment, SRI or through safety planning?
Point of Contact at CCADV/CIRI	Please allow the person processing your client to CCEH to fill this section out along with their email and phone number.
Unique Client ID#	This number will be assigned by the CCADV / CIRI point of contact and sent back to you on the PDF fillable form.

Once this referral form is complete, it is emailed by the DV/HT advocate to an established point of contact at CCADV/CIRI. The point of contact then codes the survivor depending on which

DV/HT provider the survivor is being referred from. The referral form is then emailed to the point of contact at CCEH who then enters the information into HMIS and provides the CAN with the HMIS code.

The point of contact at CCADV/CIRI also sends the coded HMIS referral form back to the DV/HT provider for their records, so the DV/HT provider can advocate appropriately for the domestic violence survivor at the CAN meetings in their region. For organizational purposes, a live excel document (which does not include client identifying information) is kept between the two points of contact to ensure a referral is not missed. Below is an example of the live excel document. It is the responsibility of the point of contact to fill in all fields except the CCEH acceptance Date, which is filled in by the point of contact at CCEH once the referral is entered into HMIS.

Client Unique ID#	CCEH Submission Date	CCEH Acceptance Date	Coordinated Access Network	Notes
CCADV1	12/21/2016	12/21/16	New London	Score: 7 Household type:2 High Risk
CCADV2	01/03/2017	1/5/17	Torrington, Winstead	Score: 10 Household Type:2 or 3 High Risk
CCADV3	01/03/2017	1/5/17	Waterbury	

XIII. Required Documentation

Required Documentation must be in client files for anyone receiving financial assistance and documents must be submitted with financial assistance request as outlined on the fund request form. All documents should be signed and dated by appropriate parties.

IX. Definition of Terms

Case Management: Housing-focused case management focuses on immediate efforts to attain housing, using the minimum assistance needed to address each household’s immediate housing crisis. Staff works with each household to identify and refer households to other resources in the community (e.g., mainstream services, benefit services, food assistance programs, childcare resources, etc.) to support ongoing housing stability. Services are voluntary, housing-focused, person-centered and are provided at the level needed by each household. See also: Progressive Engagement.

Critical Time Intervention (CTI): “Critical Time Intervention is a time-limited evidence-based practice that mobilizes support for society’s most vulnerable individuals during periods of transition. It facilitates community integration and continuity of care by ensuring that a person has enduring ties to their community and support systems during these critical periods. CTI has been applied in many communities with veterans, people with mental illness, people who have been homeless or in prison, and many other groups. The model has been widely used on four continents. CTI typically lasts for nine months. Services are divided in to three, three-month phases.”¹⁸

Entries from Homelessness: Measures the degree to which programs are serving people who are literally homeless, including a place not meant for human habitation, or in an emergency shelter. The measure is calculated in HMIS based on responses to ‘immediate prior living situation.’

Exits to Permanent Housing: Measures the percentage of households who exit the program into a form of permanent housing (including supportive housing, stable/long term rental housing, subsidized housing, or market rate housing). The exit destination reflects whether a household is stably housed after leaving the RRH program; self-resolving will still be considered an exit to permanent housing.

Harm Reduction: A “harm reduction philosophy” will be implemented for Clients who have relapsed from substance abuse or continue to abuse substances, so that health care, support and housing continue to be provided to program participants.

Housing First: “A Housing First orientation means that the program is organized around helping people secure a place to live, without preconditions. While gaining income, self-sufficiency, and improved health are all desirable goals, they are not prerequisites to people being housed. In a system organized around Housing First principles, shelter and housing programs have minimal entry barriers and do not require clients to participate in services or gain skills/income as a condition of receiving housing assistance.”¹⁹

Housing Location: Activities related to engaging with and recruiting landlords, property management companies, and housing developers to increase access to permanent housing for

¹⁸ <https://www.criticaltime.org/cti-model/>

¹⁹ NAEH Fact Sheet: <http://endhomelessness.org/wp-content/uploads/2016/04/housing-first-fact-sheet.pdf>

homeless and other vulnerable individuals and families. This may include incentives and supports made available to participating landlords and property managers who agree to reduce screening criteria for households with barriers to permanent housing.

Lengths of Stay: Measured as the number of days from program enrollment to program exit. For RRH programs, this is defined as the time from initial intake to the end of all RRH services (financial subsidy and case management).

Positive Youth Development: A Positive Youth Development (PYD) Framework shall be incorporated into the Contractor's service delivery. Defined by the Federal Interagency Working Group on Youth Programs, the PYD Framework is an intentional, pro-social approach that engages youth in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships and furnishing the support needed to build on their leadership strengths. PYD programs are focus on the following six youth outcomes: Confidence; Character; Connection; Competence; Caring; and Contribution. See the page entitled "Positive Youth Development" at: <http://youth.gov/youth-topics/positive-youth-development>.

Progressive Engagement: "Services start with the least intensive service and amount of subsidy i.e. a "light touch", and progress to greater service intensity only when necessary. The need for additional support is determined by an assessment of the individual or family's experience, self-reporting, and the impact of the initial intervention. Client choice, to the extent feasible, drives the housing options and services offered. Participation in services is voluntary."²⁰ Progressive engagement fundamentals include:

- Voluntary and flexible participation by household
- Critical thinking and problem solving shared between the family and provider
- Starts with a little bit of support, based on what the household identifies they need
- Connections made to community resources
- Builds on family resiliency and strengths
- Focused goal: to quickly resolve the immediate crisis of homelessness²¹

Return to Homelessness: Measures the percentage of households who have exited the program to a permanent housing situation and are subsequently served by another homeless intervention (i.e., emergency shelter, transitional housing, or rapid re-housing) in HMIS.

Trauma Informed Care: A Trauma Informed Care (TIC) Model shall be incorporated into the Contractor's service delivery. TIC is an approach that recognizes the widespread impact of trauma and understands potential paths for recovery, recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system, responds by fully integrating knowledge about trauma into policies, procedures, and practices and seeks to actively resist re-traumatization. TIC models generally include a focus on the following: Safety; Trustworthiness and Transparency; Peer Support; Collaboration and Mutuality; Empowerment; Voice and Choice; and Cultural, Historical, and Gender Issues.

²⁰ <http://www.buildingchanges.org/images/documents/library/2013RRHTenets.pdf>

²¹ http://www.buildingchanges.org/images/documents/library/2015_WhatIsProgressiveEngagement.pdf

Attachment A: Funding Guidelines

		CT-ESG	HUD CoC* / YHDP**** / DV-HT RRH
Eligibility for assistance****	Income Eligibility At Enrollment	No income eligibility upon entry into the program	
	Income Eligibility at Annual Recertification (12 months)	The gross household income must not exceed 30% of Area Median Income (AMI) as determined by HUD	The gross household income must not exceed 50% of Area Median Income (AMI) as determined by HUD
	Homeless (HUD Definition)	Literally homeless, fleeing domestic violence, not in transitional housing unless YHDP program	
	Identification Requirements (photo ID, etc.)	Not required upon entry into the program except for YHDP where Proof of Date of Birth must be attached in the file for all members of the household who are aged 18 or older and who will be included on the subsidized lease.	
	Legal Status	No status requirements	
		CT-ESG	HUD CoC* / YHDP**** / DV-HT RRH
Program Costs***	Monthly Rental assistance	Up to 100%. Maximum term of rental assistance is 24 months.	
	Security Deposits	100% up to 2X monthly rent	100% up to 2X monthly rent
	Utility deposits & payments	Up to 100%	Allowable under YHDP only, up to 100% deposit with additional payments within utility allowance
	Moving cost assistance	Up to 100%	Not allowable
	ID, birth certificates, etc.	Not allowable	Not allowable

	Utility arrears	One-time payment of up to 6 months of arrearages per services.	Not allowable
	Rental application fees	Allowable	Not allowable
	Rental arrears	One-time payment of up to 6 months including late fees.	Not allowable
	Property Damage Payment	Not Allowable	Up to 1 month of additional rent if damages exceed security deposit. Participant must be currently enrolled in RRH program. For YHDP: Not an allowable expense.
Additional Requirements		CT-ESG	HUD CoC* / YHDP**** / DV-HT RRH
	Habitability Standard inspection	HQS Checklist	
	Lead Based Paint Inspection	Visual assessment**	
	Rent Reasonableness	Rent reasonable form and certification	
	Existing Subsidized Housing	Can pay deposits, not ongoing rent	
	Lease Requirements	Between tenant and landlord	Between tenant and landlord - Must be a 12 mo. lease

*HUD CoC (Continuum of Care) – May change depending on the given year award restrictions.

Please verify any specific requirements, limits, or exclusions based on a given fund source with your funder.

** Visual assessment must be completed prior to providing rent assistance for all units constructed prior to 1978 in which a child under the age of six is or will be living in the unit. Visual assessments must be conducted by a HUD-Certified Visual Assessor, and must be documented on the HQS or HSS and maintained in the client file.

*** Additional support services expenditures are allowable under the YHDP program, including eligible transportation costs. Providers should consult their agency's fiscal staff to confirm what is eligible costs are within their DOH-approved budget. Expenditures must be documented in the client's file.

**** Under YHDP, all members of the household must be under the age of 25 at program entry unless it is a shared housing situation where the subsidy is apportioned out. This includes unaccompanied and parenting young adults, aged 18-24 at program entry, or emancipated minors.

