

REQUEST FOR PROPOSALS

CCDOH-2025-10

FOR

Recovery Community Center Services

Issued By:

**Charles County Department of Health
Local Behavioral Health Authority
10480 Theodore Green Blvd.
P.O. Box 1050
White Plains, MD 20695
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November 6, 2024

WARNING: To ensure proper processing of your submission, place the Tracking Number: CCDOH-2025-10 on your proposal bid submission. This tracking number is essential for efficiently evaluating and handling all submissions.

Prospective bidders who have received this document from a source other than the Issuing Office should immediately contact the Issuing Office and provide their name and mailing address so that amendments to the RFP or other communications can be sent to them. Any prospective bidder who fails to notify the Issuing Office of this information assumes complete responsibility if they do not receive communications from the Issuing Office prior to the closing date.

Minority businesses are encouraged to participate in this procurement process.

REQUEST FOR PROPOSALS

Recovery Community Center Services

A. PURPOSE OF REQUEST FOR PROPOSALS

The Charles County Department of Health Local Behavioral Health Authority (CCLBHA) is requesting proposals to acquire a vendor to implement and provide services for a Recovery Community Center (RCC) in Charles County. This RFP seeks proposals to address the need for a voluntary peer program that aims to reach persons with substance-related disorders.

SAMHSA identifies the types of services found in a Recovery Community Center as: Activities and supports are provided on a regular or episodic basis to individuals who are in recovery from mental and/or substance use disorders. Activities are designed to meet some of the social, educational, health, individual, and group peer support and other non-clinical needs of individuals required to sustain recovery. The activities conducted in a Peer Operated Recovery Community Center will include, but are not limited to the following:

- a. Vocational/educational training.
- b. Connection with needed services and resources, case advocacy, development of skills for self-care and recovery self-management.
- c. Development of social skills needed for successful recovery, wellness, and community living.

Consistent with other Recovery Oriented System of Care initiatives, the Recovery Community Centers recognize that addiction is a chronic illness whose appropriate antidote cannot be addressed with a one-time intervention. The RCC model meets the needs of those in early, mid-, and late-term recovery by providing a community resource for individuals to partake in a range of activities and becoming a part of a supportive milieu with recovering individuals, family members, and staff.

For purposes of the RFP, the Charles County Department of Health Local Behavioral Health Authority (CCLBHA) shall be the grantor of record for the funding award from the Maryland Department of Health (MDH).

B. ELIGIBILITY

Any 501.C.3 non-profit human service agency may apply for funding under this request for proposal. The contracted agency must agree to create an advisory board for the Recovery Community Center that is comprised of representatives of local communities of recovery.

C. TIMELINE

Milestone	Completion Date
RFP Published	November 6, 2024
Pre-Proposal Conference	November 12, 2024
Last Day for Questions	November 15, 2024
Answers to Questions Posted	November 19, 2024
Proposal Submission Deadline Delivered to: Charles County LBHA Attn: Linda Deano 4545 Crain Hwy, P.O Box 1050 White Plains, MD 20695	November 22, 2024 (No later than 5:00 pm)
Review Committee	November 26, 2024
Contract Award Announcement	November 27, 2024
Services are Expected to Begin	January 1, 2025

D. FUNDING AVAILABILITY & TERM OF CONTRACT

CCLBHA has received conditional funding approval for **\$60,749.50** annually for the Recovery Community Center grant for the first contract year, and conditional funding approval for **\$121,499** annually for the remainder of the contract. Offerors should submit a single budget covering the period from January 1, 2025, through June 30, 2025, including start-up costs. Offerors should plan to implement the program effective January 1, 2025. The term of this agreement shall be for the period commencing on January 1, 2025, and ending on June 30, 2027. After the initial (Base Contract Term) of three (3) years, the Contract will be renewable for an additional two (2) years on a year-to-year basis for a total of five (5) years, provided the contract deliverables are met and there is continued funding from MDH-BHA.

E. PRE-PROPOSAL MEETING

A Pre-Proposal conference will take place on November 12, 2024, at 1:00 p.m. via video/teleconference. Bidders interested in participating should notify the CCDH-LBHA at least 24 hours in advance of the Pre-Proposal conference. Bidders should email a statement of interest to MDH.CharlesCountyCSA@Maryland.gov. A conference link will be emailed to interested parties no later than 10:00 a.m. on November 12, 2024.

F. ADDITIONAL INFORMATION

Inquiries concerning the procurement process or bid documents should be submitted in writing, via email. Questions of a technical nature should be directed, in writing only (via e-mail) to

Linda Deanoo
 Agency Grants Specialist
 Local Behavioral Health Authority
 Charles County Department of Health
 E-mail: MDH.CharlesCountyCSA@Maryland.gov

All questions must be received prior to the close of business **seven (7) calendar days** prior to the deadline for submission of bids. A response to the inquiries will be provided within a minimum of three (3) calendar days prior to the submission deadline.

G. PROPOSAL SUBMISSION PROCEDURES

All proposals must be received before 5:00 P.M. on November 22, 2024.

By mail:

Local Behavioral Health Authority
 Charles County Department of Health
 P.O. Box 1050
 White Plains, Maryland 20695
 Subject: CCDOH-2025-10/RCC

Hand-delivery

Local Behavioral Health Authority
 Charles County Department of Health
 10480 Theodore Green Blvd.
 White Plains, Maryland 20695
 Subject: CCDOH-2025-10/RCC

By Email:

MDH.CharlesCountyCSA@Maryland.gov
 Subject: CCDOH-2025-10/RCC

To be considered, the proposal must be received by the time/date above. Proposals postmarked by but not received by 5:00 P.M. on November 22, 2024, will not be considered. E-mail submissions and proposals received after the deadline will not be considered.

One unbound original proposal bearing the original signature(s) in BLUE ink by an authorized principal(s) of the agency/organization. One electronic copy and one unbound copy are to be submitted. Proposals failing to comply with this request will be rejected.

H. PUBLIC INFORMATION ACT NOTICE

Offerors shall identify those portions of their proposal that they deem to contain confidential and/or proprietary information. Such information must be individually and specifically noted, either at the location in the proposal or in a separate listing contained within the proposal. Justification must also be provided, explaining why the material should not be subject to disclosure by the CCDH-LBHA upon request under the Maryland Public Information Act. Offerors may not declare their entire proposal to be confidential or proprietary. Failure to provide specific identification and justification may result in the release of the information if CCDH-LBHA is requested to do so under the Act.

I. PROPOSAL/BID/AWARD PROTESTS

All protests made pursuant to this solicitation must be in writing and delivered to the CCDH-LBHA: (a) within ten (10) calendar days after the CCDH-LBHA has publicly posted the proposed contract award if the bidder seeks as a remedy the award of the contract, or (b) before the submission date for bids if the bidder seeks as a remedy the cancellation or amendment of the solicitation.

Only an offeror who is “aggrieved” is eligible to file a protest. Aggrieved means that the offeror who is filing the protest is susceptible to an award of the contract if the protest is sustained (e.g., a fourth-ranked bidder is not aggrieved unless the grounds for a protest, if sustained, would disqualify the top three ranked offerors or would require that the solicitation be reissued). Each protest must contain the following: identification of the solicitation; the name, address, and telephone number of the protesting offeror/bidder; a statement supporting that the offeror/bidder is aggrieved; and specification of all grounds for the protest, including submission of detailed facts and all relevant documents, citation to relevant language in the solicitation, regulations, or law relied upon; and, all other matters which the offeror/bidder contends supports the protest. The burden of production of all relevant evidence, data, and documents, and the burden of persuasive argument to support the protest is on the offeror/bidder making the protest.

J. REJECTION OF BIDS

The CCLBHA reserves the right to reject any or all bids.

K. AWARD OF CONTRACT

Award will be to the most qualified responsive and responsible offeror that complies with all provisions of the RFP, providing that it is in the best interest of the CCDH-LBHA to accept the proposal. The Contract entered with the successful offeror shall meet all standard provisions required by the CCDH-LBHA and by any involved government agencies. Award of the Contract will be by formal contract. The Contract documents will consist of the Contract, RFP, the offeror’s proposal, MDH-BHA Conditions of Award, and any addenda or other modifications to the RFP.

L. TERMINATION OF CONTRACT FOR CONVENIENCE

The CCDH-LBHA may, by 90-day written notice to the Contractor, terminate this contract in whole or in part at any time, either for the CCDH-LBHA 'S convenience or because of the failure of the Contractor to fulfill his obligations under this contract. Upon receipt of such notice, the Contractor shall:

1. Immediately discontinue any part or all services as directed by the CCDH-L BHA's authorized representative, and
2. Deliver to the CCDH-LBHA the originals of all data, records, reports, and such other information and materials as may have been accumulated by the Contractor in performing

under this contract, whether completed or in process.

3. If the termination is for the convenience of the CCDH-LBHA, an equitable adjustment in the contract price shall be made but no amount shall be allowed for anticipated profit on unperformed services.

4. If the termination is due to the failure of the Contractor to fulfill his obligations under this contract, the CCDH-LBHA may take over the work and prosecute the same to completion by contract or otherwise. In such case, the Contractor shall be liable to the CCDH-LBHA for any additional cost occasioned to the CCDH-LBHA.

5. If, after notice of termination for failure to fulfill obligations, it is determined that the Contractor had not so failed, the termination shall be deemed to have been effected for the convenience of the CCDH-LBHA. In such an event, an adjustment in the contract price shall be made as determined to be equitable by the CCDH-LBHA.

6. The rights and remedies of the CCDH-LBHA provided in this clause are in addition to any other rights and remedies provided by law or under this contract.

M. TERMINATIONS FOR DEFAULT

If the Contractor refuses or fails to prosecute the work, or any separable part thereof, with such diligence as will ensure its completion in accordance with the Contract, or any extension thereof, the CCDH-LBHA may, by written notice to the Contractor, terminate the Contract. In such event, the Contractor shall have the right to be compensated for work performed up until the time of termination. The CCDH-LBHA shall be the sole authority in determining the amount of equitable payment to the Contractor.

N. ACCEPTANCE OF PROPOSAL CONTENT

Applicants are strongly encouraged to review the feasibility of their proposals prior to submission. The content of this RFP and the proposal of the successful vendor/provider will be included in any resulting contract. Non-compliance with that contract (failure to provide services as contracted and/or achieve expected results) may lead to termination by the CCDH-LBHA.

O. POPULATION TO BE SERVED

Qualified participants for this program are people with substance use disorders, who would establish and maintain recovery more readily with such services. The individuals involved in a Recovery Community Center program are striving to achieve positive outcomes for their futures and for those around them through the variety of services that should be made available to this consumer base.

P. SCOPE OF SERVICES

Activities:

1. Are individualized and person-centered;
2. Support personal empowerment;
3. Entail a holistic approach to recovery;
4. Embody respect for the individual, his/her cultural diversity and the various pathways to recovery that the individual may choose.
5. Engender personal responsibility;
6. Support the development of a sense of hope that recovery is achievable;
7. Function as a hub for peer recovery support services and other recovery supports (such as self-help and mutual aid groups);
8. Connect the recovery community with mental health, addiction treatment, dental, primary health, and other systems of care and support;
9. Offer a safe haven to acclimate vulnerable newcomers reentering the community post-treatment or incarceration;
10. When necessary, provide interventions for individuals who may need professional, clinical treatment, or other health services.

The vendor, at a minimum, must adhere to the following structure in delivering Recovery Community Center Services:

1. Understanding of wellness and recovery;
2. Ability to assist participants in making informed choices and decisions, otherwise active in managing their own recovery;
3. Ability to provide emotional support to individuals who are disabled by their mental illness or addiction disorder as well as their families and significant others;
4. Ability to use a strength-based approach to develop and apply strategies to promote/support recovery;
5. Ability to help individuals embrace a pathway to recovery that is based on their needs and preferences.
6. Ability to promote self-determination, hope, and empowerment;
7. Ability to engage participants in the Recovery Support Center Program and its activities;
8. Ability to connect individuals with their natural communities, including the recovery community;
9. Ability to assist in determining the recovery goals and in identifying recovery resources.

Program expectations in addition to the above, the successful bidder must:

- a. Promote culturally competent services to meet the consumers' needs;
- b. Assure services are support focused, and build upon the person's strengths; and
- c. Assure participants are provided services in an effort to meet required goals as determined through the contracts' Conditions of Award (COA)

Q. RESULTS TO BE ACHIEVED

1. A site that allows persons to meet in a safe drug-free environment.
2. Performance of an Education/Training needs assessment of program participants.
3. Provision of:
 - a. monthly education forums for members addressing needs assessment outcomes (outside speakers who present information on a specific community resource or behavioral health recovery topic).
 - b. activities designed to promote the development of natural support networks to help reduce isolation i.e. pro-social activities, board games, community meetings within the program, etc.
 - c. activities designed to promote wellness & recovery
4. Allow peer support services: Peer support services can consist of either group or one-to-one contact with peer staff members and/or volunteers. Peer support groups involving three (3) or more individuals with a facilitated conversation focused on a specific topic, i.e. depression, gender-specific topics, and 12-step groups. Individual peer support sessions consist of one-to-one contact with peer staff members and/or volunteers lasting at least 15 minutes.
5. Provision of support to an unduplicated count of 40 individuals per fiscal year;
6. Maintain a relationship with a Registered Peer Supervisor (RPS) (as evidenced by an RPS certificate on file) who will provide supervision hours to staff and/or volunteers seeking or maintaining their Certified Peer Recovery Specialist credential.
7. Publish and distribute monthly newsletter and/or calendar of center events.
8. Track the total number of 1 on 1 Peer Contacts, Peer Support Groups, Social Activities, Outreach Presentations, Informational Presentations, and the total number of Individuals who Obtained Recovery Support services in the following categories: housing, funded benefits, resource assistance, employment, enrolled in a formal education program, vital documents, accompanied to a court or medical appointment, and enrolled in a treatment program.
9. Maintain a "warm line" for telephone support and referral during open hours (Document the number of calls and topics discussed)

R. DELIVERABLES

1. The offeror must submit a quarterly narrative and fiscal reports to the CCLBHA by October 15th, January 15th, April 15th, and July 15th with the following information:
 - a. A detailed narrative describing the program's achievements and challenges over the previous quarter;
 - b. Submit the Excel Quarterly Reporting, "Recovery Community Center Quarterly Report" on a quarterly basis. This report should contain demographic information for the Recovery Community Center, positions funded through this award, reporting on contract deliverables for the quarter, and reporting on additional recovery support services facilitated by the Recovery Community Center.
 - c. A fiscal report of the previous quarter prepared on budget DHMH forms 437 and 438;
2. The offeror will be expected to meet with the CCLBHA for a minimum of one monitoring visit per fiscal year and at a minimum provide the following information:
 - a. Policy and Procedure Manual
 - b. Supporting documentation of expenditures as requested;
 - c. Attendance/sign-in sheet for program and all program activities;
 - d. Documentation of Education/Training needs assessment of program participants.
 - e. Documentation of "warm line" for telephone support and referral during normal business hours including the number of calls and topics discussed;
 - f. Documentation of individual and group peer support sessions.
3. An Annual Report summarizing the Recovery Community Center, including highlights and challenges, performance measures, and fiscal information is due to the CCLBHA by July 15th.

S. STAFFING REQUIREMENTS

The provider shall ensure the availability of qualified peer personnel to carry out the duties required of this program. Personnel assigned to work in this program shall have the necessary qualifications to perform the work required as delineated in the above Scope of Services.

Proposal submissions shall include a statement describing the recruitment, training, and supervision of peer personnel proposed to work in this program. All employment practices shall comply with Equal Employment Opportunity guidelines and the Americans with Disabilities Act.

T. PROPOSAL CONTENT

Proposal narratives submitted in response to this request shall not exceed 15 typed, single-sided, single-spaced pages and should address the criteria specified below. Use 12-point font and 1-inch margins. Budget pages DHMH Forms 432A through 432H and attachments, such as letters of reference, are not included in the 15-page maximum. It shall contain a one-page executive summary.

At a minimum, each proposal shall include the following items in the stated order; all pages shall be numbered; and all the listed components must be included. Proposals that do not include all components will be considered non-responsive and therefore not reviewed or considered for funding.

1. **Transmission letter:** Formal letter stating your intent to provide the services you are proposing and that you have the authority to do so. Provide name or organization, address, and all contact information, including primary contact person.
2. **Approval of Governing Body:** Letter or memo which states that you have the approval and support of your governing body to submit such proposal.
3. **Program budget:** The cost proposal is responsive to the objectives of the project and provides a logical and understandable breakdown of the program budget clearly delineating an estimate of all associated costs. The budget corresponds with the program description and reflects reasonable costs. Use DHMH Forms 432A through 432H, (Appendix A - Is published as a separate document). The budget should specify costs including salaries and fringe, rent, supplies, mileage, etc. The Bidder describes and demonstrates sound financial practices and fiscal accountability.

Attach copies of the most recent financial audit and any other reports which demonstrate the organization's fiscal soundness.

4. **Proposed program:**

Project Summary: Bidders will prepare a narrative summary, providing an overview of how the organization will meet the standards and goals set forth above; and implement the plans of the proposal. There must be a demonstrated willingness to work closely with the staff of CCLBHA to execute this project with the timeliness required and to accept and benefit from CCLBHA oversight and guidance.

The proposal must be responsive to terms, conditions, and time of performance. The proposal must be complete and thorough. A full understanding of the need, purpose, expectations, and complexities of the work to be performed is demonstrated.

The approach, methodology, techniques, and manpower to be used are clearly defined and sound. Each should be sufficient to meet proposal requirements and should be logical and well organized.

Describe the plan for transitioning existing consumers.

Capacity: Describe Bidder's organization's history, nature and scope of business activities, and organizational structure. Demonstrate organizational capacity to participate in the fee-for-service reimbursement system.

Demonstrate that the bidder has satisfactory experience working with persons with mental illnesses and has experience providing individualized and flexible care/services.

Demonstrate that the bidder has the ability to manage effectively and to be fiscally sound. When applicable, the bidder has staff knowledgeable in the administration of government grant awards.

Staffing: Clearly identify the proposed project team, the assignment of work activities, and the experience, qualifications, and education of the staff to be assigned. Identify the availability for and frequency at which clinical supervision will occur. Describe the policy for initial and ongoing staff training, including cultural competency. It is essential that the Bidder identify to what extent backup professional personnel are available to substitute for loss of professional personnel identified as necessary in the proposal.

Timeline for Implementation: Include a timeline showing when all major tasks associated with program start-up and implementation will be accomplished, including obtaining office space, hiring and training staff, transitioning current consumers, marketing, supervision, evaluation, etc.

- 5. Organizational Capacity Statement:** If incorporated, attach a copy of the most current articles of incorporation. Additionally, submit a roster of all members of the organization's Board of Directors, including addresses and telephone numbers. Where applicable, the role of the governing board is described.

Attach an organizational chart depicting the relationship of the project to the current organization. Describe experience and relevant current or former activities of the organization that demonstrate an ability to attain the specific goals of the proposed project.

Provide the date of the applicant's last MDH licensing visit and briefly describe the findings and recommendations, if applicable. This should include program approval status and any program improvement plans.

Include a statement describing recruitment (in compliance with the Equal Employment Opportunity (EEO) guidelines and the Americans with Disabilities Act (ADA), training, and supervision of personnel to work in this program.

The Bidder is an independent contractor and shall submit documentation to the LBHA that it maintains adequate general and professional liability insurance coverage for all of its personnel, as well as, appropriate fire, casualty, premise, and workers' compensation insurance coverage.

6. **Service System Integration:** Applicants are strongly encouraged to offer a comprehensive description of their Management Information Systems (MIS) planning and implementation process, including support for improving consumer outcomes by tracking individual and program-level performance, increasing viability through increased billing efficacy and employee productivity, and effective prescription management (where applicable).

The proposal describes working with various community organizations, local government, private/public agencies, and citizen groups.

The proposed program is well integrated with other service provisions.

The bidder demonstrates the ability to establish and maintain relationships with local health, mental health, and social service providers for the purpose of service delivery and/or enhancement.

7. **Letters of Support:** Please include at least two letters of reference. References and descriptions of previous similar engagements should be provided (all references should include a contact person familiar with the offeror's work and the appropriate telephone number) as well as demonstrate the ability of the offeror to successfully provide sufficient qualified backup staff.
8. **Freedom of Information:** Offerors should give specific attention to the identification of those portions of their proposals that they deem to be confidential proprietary information or trade secrets, and provide any justification why such material, upon request, should not be disclosed by the CSA/LBHA under the Maryland Public Information Act, State Government Article, Sections 10-611 et seq. annotated code of Maryland. Offerors are advised that the mere assertion of confidentiality is not sufficient to make matters confidential under the act. Information is confidential only if it is customarily so regarded in the trade and/or the withholding of the data would serve an objectively recognized private interest sufficiently compelling as overriding the general disclosure policy of the act. In determining whether information designated as such is proprietary, the CSA/LBHA will follow the direction provided by its attorney when responding to

requests for information contained in proposals. It may be necessary that the entire contents of the proposal of the selected offeror be made available and reproduced for the purpose of examination and discussion by a broad range of interested parties.

U. EVALUATION CRITERIA

1. ***Understanding of the population:*** The applicant has experience working with the identified population. The applicant demonstrates knowledge of the population to be served and an understanding of the benefits and challenges of the Drug Treatment Court Program. (20 points)
2. ***Plan/Services to be provided:*** The applicant has experience in providing similar services. The applicant demonstrates up-to-date knowledge of best practices in the areas of services and applies this knowledge to the proposed program. The applicant integrates the scope of services (section P) into the program description and adequately addresses all requirements. (25 points)
3. ***Organizational Capacity/Staffing:*** The applicant demonstrates the capacity to employ staff knowledgeable in the implementation of new programs. The organization has the appropriate infrastructure to administer services. Clinical staffing is appropriate for the service. (15 points)
4. ***Quality Assurance/Results:*** The program described is likely to achieve the results listed in Section Q, Results to be Achieved. Methods of outcome assessment and quality assurance procedures are evident. (15 points)
5. ***Budget:*** The budget corresponds to the program description and reflects reasonable costs. MDH-BHA Forms 432A through 432H (Appendix A) are utilized and completed. The applicant describes sound fiscal practices, demonstrates fiscal accountability, and includes the most recent annual financial audit report to affirm the organization's fiscal ability to adequately support the program. (15 points)
6. ***Appendices/Documentation:*** (10 points)
 - a. Organization Chart
 - b. MDH Licensure/Proof of Accreditation
 - c. Copies of the two most recent annual fiscal audits
 - d. Proof of good standing with the Maryland Department of Assessments and Taxation

- e. Proof of good standing with the Maryland Department of Charitable Organizations (if applicable)
- f. Letters of Support/Recommendation
- g. Reports of outcomes from other grants
- h. Copy of liability insurance
- i. Key staff position descriptions/resumes

APPENDIX A: Form DHMH 432
APPENDIX B: Proposal Timeline
Appendices Published As Separate Documents

***** END OF REQUEST FOR PROPOSALS *****