

MEMORANDUM

TO: Consolidated Homeless Fund Vendors
FROM: Maryrose Mensah, Director of Homelessness and Housing Stability
Ana Novais, Acting Secretary, Executive Office of Health and Human Services
RE: 24/7 Warming Stations and Overnight Shelter Capacity
DATE: February 10, 2023

The State desires to expand full-time (24 hours a day, 7 days per week) warming stations and overnight shelter capacity to accommodate the current and projected needs of persons experiencing homelessness (living in a place that is not meant for habitation; for example, on the street, in a car, or in an abandoned building). Therefore, the State, through its Department of Housing (“Housing”), and in partnership with the Executive Office of Health and Human Services (“EOHHS”), is soliciting Letters of Interest (“LOIs”) from one or more Consolidated Homeless Fund (“CHF”) vendors to develop or expand full-time warming stations or overnight shelters to serve an unmet need for emergency shelter across the state. The State is seeking vendors to open and operate additional warming stations or overnight shelters from approximately March 1, 2023 through approximately April 30, 2023 (with potential options to extend).

While this solicitation applies statewide, the Pawtucket Housing Authority (“PHA”) owns the real property and structures located at 1139 Main Street (“PHA Facility”), and has indicated a willingness to provide that location for warming center purposes on the following terms:

- The lease for the PHA Facility will be limited to a memorandum of understanding for nominal or no monetary consideration.
- Hazard and liability insurance policies must be obtained in amounts determined by the PHA. All insurances must name the PHA as an additional insured.
- The use of the PHA Facility will end on April 30, 2023; any other uses prohibited,
- Use of the PHA Facility is limited to the first floor only.
- Snow removal for the PHA Facility shall be the responsibility of the vendor.
- The parking lot of the PHA must be used appropriately and within guidelines as determined by the PHA.
- The PHA will provide a housing navigator and resident service coordinator staff to assist with permanent housing opportunities and other needs, including providing State emergency voucher access.

The vendor(s) selected to operate 24/7 warming stations or overnight shelters will be responsible for all costs of operation. Vendor(s) are encouraged to seek and pursue multiple funding sources, in addition to funds sought through this opportunity. Examples of eligible activities for funding may include, but are not limited to, the following:

- Purchase of equipment, including furniture or mobile air filters.

- Daily maintenance and upkeep of the property location (including the PHA Facility).
- As-needed property maintenance upon acceptance by the vendor. Any damage will be the responsibility of the vendor to repair within a timely manner, but in no instance more than 30 days, and immediately for any health/safety repairs.
- Renovations to existing buildings to permit expansion of and/or use as a warming center/shelter. Renovations are defined as cleaning, repairing, or rebuilding a new building to revive the property for shelter use. Such renovations may include, but are not limited to, fire code or ventilation improvements that allow an unutilized space in a building to be used as warming center/shelter.
- Expanded warming center/shelter services.
- Leasing of equipment, such as portable showers, portable toilets, and hygiene products.
- Rent, utilities, maintenance, and security.
- Storage needs and supplies for personal items.
- Technology for the warming center/shelter, such as phones, laptops/tablets, Wi-Fi, and charging stations, upon written, approved justification.
- Supplies and food (it is recommended that vendors partner with local organizations to provide meals and other services to clients).
- Administration fee of no more than 5%.
- Transportation to the warming station/shelter.
- Staffing, including the hiring of additional staff to expand warming center/shelter and serve more clients.
- HMIS or a comparable database license.
- Case management to support new clients at the warming station/shelter.
- Client supports (transportation, birth certificate fees, etc.).
- Supportive services meeting the approved opioid mitigation and abatement activities agreed to in the terms of the opioid settlement. Below is a summary chart of the opioid mitigation-related activities that are allowable for funding with Settlement dollars to utilize these specific opioid funds. Vendors must be able to justify connections with at least one of these allowable uses:

Per the Settlement agreement, priority shall be given to the following core abatement strategies:

| Strategies |
|---|
| <ul style="list-style-type: none"> • Naloxone Or Other FDA-approved Drug To Reverse Opioid Overdoses • Medication-assisted Treatment ("MAT") • Distribution And Other Opioid-related Treatment • Pregnant & Postpartum Women • Expanding Treatment For Neonatal Abstinence Syndrome ("NAS") • Expansion Of Warm Hand-off Programs And Recovery Services • Treatment For Incarcerated Population • Prevention Programs • Expanding Syringe Service Programs • Evidence-based Data Collection And Research Analyzing The Effectiveness Of The Abatement Strategies Within The State |

Per the Settlement agreement, Support treatment of Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health (SUD/MH) conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

| Priority 2: Allowable Uses |
|---|
| <p>Treatment:</p> <ul style="list-style-type: none"> • Treat Opioid Use Disorder (OUD) • Support People In Treatment And Recovery • Connect People Who Need Help To The Help They Need (Connections To Care) • Address The Needs Of Criminal Justice-involved Persons • Address The Needs Of Pregnant Or Parenting Women And Their Families, Including Babies With Neonatal Abstinence Syndrome <p>Prevention:</p> <ul style="list-style-type: none"> • Prevent Overprescribing and Ensure Appropriate Prescribing And Dispensing of Opioids • Prevent Misuse Of Opioids • Prevent Overdose Deaths And Other Harms (Harm Reduction) <p>Other Strategies:</p> <ul style="list-style-type: none"> • First Responders • Leadership, Planning And Coordination • Training • Research |

Example costs would be: NaloxBoxes, harm reduction education, tools, and services, behavioral health services, and other services as approved and noted in the table above

and the Opioid Settlement Agreement. Please note, these should only be requested if an identified service provider cannot provide the necessary supports with existing resources.

The State acknowledges that interested parties may require technical assistance and expertise in developing proposals. In acknowledgment of this and to accelerate the process, Housing is requesting LOIs from existing CHF vendors rather than accepting new proposals. **While this solicitation applies only to existing CHF vendors, such agencies are encouraged to collaborate with non-CHF vendors in developing and submitting LOIs.**

The State is requiring the selected vendor(s) to provide the supportive services listed below and may partner with non-CHF organizations to do so to ensure individuals being served by the full-time warming station/shelter are connected with the services they need.

SCOPE OF SERVICES

LOIs from any vendor responding to this solicitation must include a detailed description on how the vendor will perform the following tasks:

Task: Expand full-time (24 hours a day, 7 days per week) warming stations or overnight shelter capacity to accommodate the current and projected needs of persons experiencing homelessness.

Vendors should be prepared to open and operate warming stations or overnight shelters from approximately March 1, 2023, through approximately April 30, 2023 (with potential options to extend).

Task: Continuous Quality Improvement and Wraparound Service Capacity.

As part of continuous quality improvements with proposed full-time warming stations, the vendor(s), in partnership with Housing and EOHHS, will coordinate weekly lessons learned meetings, collaboratively develop new partnerships to assure wraparound supports are available for clients, and identify and support additional capacity needs for Tier 1 and Tier 2 services (see chart below).

Task: Collaborative Planning and Case Management.

All parties will engage in case management activities coordinated by Housing and collaborative planning calls held in conjunction with EOHHS, as applicable. In addition, the vendor(s) will develop eligibility criteria for warming stations, partner referral processes to the warming stations, and coordinated discharge protocols from the warming stations to the next most appropriate level of care (e.g., medical respite, emergency care) or housing resource (e.g., Coordinated Entry System (“CES”), non-CES shelter, reunification with family, etc.) to be reviewed and approved by the Department of Housing and EOHHS.

Task: Timely uploading of HMIS data into the Clarity HMIS iteration.

The selected vendor(s) must timely upload HMIS data into the Clarity HMIS iteration, authorized by the Continuum of Care and run by the Coalition to End Homelessness. This will ensure that people seeking services at warming stations and/or overnight shelters can be connected quickly with CES and system resources.

Support Services and Suggested Partners

Tier 1 indicates priority services that are accepted as general precautionary standards.

Tier 2 indicates priority services that are dependent on client-specific needs.

| TIER | SERVICE NEED | EXAMPLE PARTNER |
|-------------|--|-----------------------------------|
| 1 | Translational Services and Multi-Lingual Supports (including American Sign Language) | Community-Based Organizations |
| 1 | Medical Care and Infectious Disease Supports | Federally-Qualified Health Center |
| 1 | Medicated Assisted Treatment | Substance Use Provider |
| 1 | Behavioral Health / Trauma-Informed Services | Community Mental Health Center |
| 1 | Harm Reduction, Mobile Outreach, and Peer Recovery Supports | Harm Reduction Organizations |
| 1 | Criminogenic Supports | Justice-Serving Organization |
| 1 | Hospital Coordination and Assistance | Local Hospital System |
| 1 | Emergency Medical Services (EMS) – Local EMS | Local Public Safety Organization |
| 1 | Place-Based Community Supports | Health Equity Zones |
| 2 | Veterans Supports | Veterans-Focused Organization |
| 2 | Benefits Enrollment | SNAP Outreach Providers |
| 2 | Medicaid Home Stabilization Services | Home Stabilization Providers |
| 2 | Employment Assistance Providers | Job Coaching Agencies |
| 2 | Nutritional Services | WIC Centers |
| 2 | Healthy Aging Supports | Community-Based Organizations |
| 2 | Transportation Services | Ride Share or Public Transit |
| 2 | Family and Child Supports, If Needed | Family Care Community Partnership |
| 2 | Pet Care and Service Animal Supports | Local Veterinarian |

Insurance Requirements

In addition to any insurances required by the PHA for the PHA Facility, vendors shall comply with the insurance requirements of this solicitation, which incorporate the requirements outlined in Section 13.19 of the General Conditions of Purchase, found at <https://rules.sos.ri.gov/regulations/part/220-30-00-13> and **General Conditions - Addendum A** found at <https://www.ridop.ri.gov/documents/general-conditions-addendum-a.pdf>, which include:

General Requirements:

- a) ☒ Liability - combined single limit of \$1,000,000 per occurrence, \$1,000,000 general aggregate and \$1,000,000 products/completed operations

aggregate. The State should be an additional insured on a primary and non-contributory basis with a waiver of subrogation in favor of the State.

- b) ☒ Workers' compensation - \$100,000 each accident, \$100,000 disease or policy limit and \$100,000 each employee. There is to be a waiver of subrogation in favor of the State.
- c) ☒ Automobile liability - \$1,000,000 each occurrence combined single limit. The State should be an additional insured on a primary and non-contributory basis with a waiver of subrogation in favor of the State.

Professional Services:

- d) ☒ Working with Children, Elderly or Disabled Persons –Physical Abuse and Molestation Liability Insurance - \$1 Million per occurrence. A waiver of subrogation in favor of the State. The State should be an additional insured for work performed by Contract Party for the State to the extent that coverage is not subject to an insured versus insured exclusion. The additional insured status for the State is to be on a primary and non-contributory basis.
- e) ☒ Professional liability (“errors and omissions”) - \$1,000,000 per occurrence, \$1,000,000 annual aggregate.

Reporting

The vendor(s) will be required to provide Housing monthly performance measurements reports so long as there remains unexpended/undrawn funds as this is a requirement of the federal funding tied to this project. Additional details may be needed for state and/or federal compliance requirements.

Submissions:

Any party interested in applying should submit an LOI to Maryrose.Mensah@doa.ri.gov and Maryrose.Mensah@housing.ri.gov to ensure applications are received, as the Department of Housing is currently undergoing an email update.

LOIs should provide a narrative and must include at a minimum:

- A detailed description of the activities to be undertaken, including how the Scope of Services above will be fulfilled, and all the information requested in the attached LOI form.
- A detailed description of how the building space will be used and how many clients will be served.
- Population to be served (individuals, families, couples, etc.).
- Staffing detail.

- General requested budget (as available). Housing acknowledges any budget provided may be preliminary and require refinement/adjustments as the details of the warming station/center are finalized.

The deadline to submit Letters of Interest is Friday, February 17th at 2:00pm EST. **The State intends to review LOIs and make an award decision expeditiously so the chosen vendor(s) can begin operating as soon as possible.**

An optional information session will be held virtually via Zoom on **Tuesday, February 14, at 11:30-12:30pm** for interested applicants.

Housing reserves the right to request additional information from applicants on submitted LOIs. Applicants are required to respond to questions within 2 business days.

LOI FORM

LOI DUE: Friday, February 17th at 2:00pm EST

Application Instructions:

1. Please read the entire application before filling it out. Answer all questions concisely and clearly, addressing all inquiries in the prompt.
2. Applicants must submit one electronic copy (via email) by Friday, February 17th at 2:00pm EST.
3. Applicants are encouraged, but not required, to submit a hardcopy.
4. Please direct applications to:

| Original Hardcopy Submitted to (optional): | Required Electronic Copy Submitted to: |
|---|--|
| 24/7 Warming Station Maryrose Mensah Rhode Island Department of Housing 315 Iron Horse Way, Suite 101 Providence RI 02908 | Maryrose Mensah Maryrose.Mensah@doa.ri.gov and Maryrose.Mensah@housing.ri.gov Subject Line: <i>24/7 Warming Station</i> |

APPLICATION DUE: Friday, February 17th at 2:00pm EST
24/7 Warming Stations and Overnight Shelter Capacity

1. Proposed Program Information

| | |
|-------------------------|----------------|
| Name of Program: | |
| Lead Agency: | |
| Collaborating Agencies: | |
| Program Address: | |
| Current HMIS Provider: | ___ YES ___ NO |
| Funds Requested: | |

2. Lead Agency Information

| | |
|---------------------------|--|
| Agency's Federal ID #: | |
| Agency's DUNS #: | |
| Agency's Mailing Address: | |
| Main Phone Number: | |
| Main Fax Number: | |

| Position | Name | Direct Line | Email |
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- a. What is the per person cost of individuals being served?

3. Agency Capacity

Describe your agency's capacity to carry out this activity:

4. Detailed Budget Worksheet

| | |
|-------------------|--|
| Applicant: | |
| Program: | |
| Amount Requested: | |

Please detail your program's projected budget for the grant period.

| 1. Warming Station Personnel (e.g., staff, security) Include fringe in rate per hour | Estimated Hours | Rate per hour | Estimated cost |
|--|-----------------|---------------|----------------|
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| Total Personnel & Fringe Benefits Cost: | | | |

| 2. Client Assistance Costs (e.g., meals, birth certificates, RIPTA products) | Quantity | Unit Cost | Estimated Cost |
|--|----------|-----------|----------------|
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| Total Cost: | | | |

| 3. Warming Station Operating Costs | Estimated Cost |
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| Total Operating Costs: | |

| Administrative Costs | Estimated Costs |
|-----------------------------|-----------------|
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| | |
| Total Administrative Costs: | |

Total Estimated Cost:

Narrative describing cost reasonableness:

5. Additional Information

Please provide information on any discrepancies, changes in program services, target population, or staffing, how you will help connect clients to permanent housing, or any other issues you consider relevant to the evaluation of your program.