



Grays Harbor County Public Health

PEARSALL BUILDING
2109 SUMNER AVENUE, ABERDEEN, WA 98520

PHONE: (360) 532-8631

ADMINISTRATION FAX: (360) 533-1983

CLINIC FAX: (360) 533-6272

HealthyGH.org

Facebook.com/GHPublicHealth

March 15, 2023

Request for Proposals to Increase Access to Mental Health services in Grays Harbor County

Introduction

Grays Harbor County has issued a request for proposals (“RFP”) to interested and qualified agencies to increase access to mental health services in Grays Harbor County. A maximum budget of \$1,000,000 is available to fund successful proposal(s) via allocated funding from the County’s 1/10th of 1% Sales Tax (a.k.a. “Treatment Sales Tax”). All contracts for reimbursable expenses must be eligible and have appropriate documentation to substantiate the expense as relevant to [RCW 82.14.460](#).

The County is seeking proposals that can demonstrably increase access to mental health services and substance use disorders for all residents of Grays Harbor County in a way that addresses considerations and needs identified in the [Community Health Assessment and Improvement Plan](#) and the [Behavioral Health Gap Analysis](#). These services should be designed and implemented as part of an intentional and coordinated system of care for all residents of Grays Harbor County. *These funds shall be one-time expenses and demonstrate how services will be sustained following the initial investment period. The funds available through this opportunity **cannot be used for capital expenditures.***

This RFP is intended for agencies with the necessary capacity and experience to successfully design and implement a plan to increase access to mental health services for Grays Harbor County residents. This RFP opens **March 15, 2023, and all proposals are due no later than April 28, 2023, at 4:30 p.m.**

The County expects contracts with apparently successful bidder(s) to be executed by July 1, 2023. The County reserves the right to withdraw from contracting with a named apparently successful bidder if a contract is not able to be completed and/or making meaningful progress as of October 1, 2023.

Grays Harbor County reserves the right to reject any and all submittals and to waive irregularities and informalities in the submittal and evaluation process. This RFP does not obligate the County to pay any costs incurred by the applicant in the preparation and submission of the applicant’s

proposal. Furthermore, the RFP does not obligate the County to accept or contract for any expressed or implied services.

As part of the rating and ranking, all eligible applicants will be subject to a Subrecipient Risk Assessment prior to recommendation for Board of County Commissioners (BOCC) approval. Please see the **threshold criteria** for more information.

Successful applicants will work with Grays Harbor County staff to negotiate formal agreements with specific deliverables, timelines, and outcomes. The County will be responsible for monitoring all recipients of local funds to ensure alignment with fund requirements and contract deliverables.

Completed applications may be submitted via e-mail, mail, or in person at:

Grays Harbor County Public Health and Social Services
Attn: Cassie Lentz
2109 Sumner Avenue
Aberdeen, WA 98520
clentz@graysharbor.us

Applications and related materials must be received no later than **April 28, 2023, at 4:30 p.m.** to be considered. The applicant assumes full responsibility for the delivery method chosen. Applications must be clearly marked with MENTAL HEALTH SERVICE ACCESS APPLICATION.

Questions related to this application may be directed to:

Cassie Lentz, Healthy Places Manager
E-mail: clentz@graysharbor.us

Calendar/Timeline

Application Process	Date*
Issue RFP	March 15, 2023
Questions due	April 19, 2023
Proposals Due	April 28, 2023, at 4:30 p.m.
Proposal review	May 2023
Recommendations provided to BOCC	May 2023
Agency contract development	June 2023
Contract execution date	July 1, 2023

**All dates are estimates and are subject to change*

The following are the required documents for proposals to be submitted to Healthy Places Division Manager, Cassie Lentz.

1. A cover letter attesting to/documenting compliance with stated Threshold Criteria
2. A written document including narrative response that speaks to identified prompts under “Scoring Criteria”
3. Project Budget with expenses clearly categorized and clear time period of budget

Part 1: Threshold Criteria

Please attest and provide documentation (as appropriate) to support the following:

Any falsely attested information will render application ineligible.

- I certify that our agency is in good standing with all of our granters/funders and demonstrates sound financial practices. *If you have an active corrective action plan related to a current granter/funder, please submit a copy.*
- I certify that our organization is an eligible entity, including a Registered Non-profit organization, Behavioral Health Provider, Medical provider, Government Entity, and/or Federally Recognized Tribe. *(Documentation Required)*
- Our organization has the capacity to operate the program(s) on a cost-reimbursement basis. *(Reimbursement payments will be made for verified expenses within thirty days from invoice approval.)*
- Our organization’s fiscal management system is compliant with government accounting systems. *(Documentation Required)*
- Our organization can comply with the below minimum insurance requirements at our organization’s expense. The County may renegotiate such requirements based on the nature and scope of our proposed project. *(Documentation Required)*
 - Contractor shall carry sufficient insurance coverage to protect contract assets from loss due to theft, fraud, and/or undue physical damage.
 - General liability insurance in an amount not less than \$1,000,000 per occurrence, \$2,000,000 general aggregate.
 - Automobile liability insurance in an amount not less than \$1,000,000 combined single limit for each accident.
 - Workers Compensation for employees performing work associated with the resulting contract.
- Our organization has reviewed the Grays Harbor CHIP/CHA and Behavioral Health Gap Analysis. We feel confident in our ability to design and implement programs that do not duplicate existing resources and augment/expand available resources.
- Our organization has reviewed [RCW 82.14.460](#) that governs the eligible uses and required documentation for projects funded with 1/10th of 1% Sales Tax (a.k.a. Treatment Sales Tax) and feels confident in our ability to comply.

Agency Name

Print Name/Title

Signature

Date

Part 2: Scoring Criteria

Please include the following components in your proposal:

- Describe your agency and its capabilities, highlighting key relevant programming or projects. Identify similar projects that your organization has overseen. Describe the proposed staff assigned to this project, their background and their availability.
- Submit a Statement of Work for the proposed project which will identify the potential goals and expectations of the project.
- Submit a narrative response for any scoring criteria/questions below not explicitly addressed in the agency description and history, scope of work, timeline, and/or budget. *Information missing from your proposal related to the scoring criteria below may negatively impact your proposal evaluation and/or result in disqualification.*
- Provide a proposed timeframe needed to complete this assessment. Timeline must be based upon the deadlines included in Project Goals (above). Please include detailed steps and roles of responsible staff.
- Provide a detailed budget for the project including what would be billed to the County and what would be covered by other fund sources.

Your proposal will be evaluated based on the clarity and detail provided related to each of the following scoring criteria. A maximum of 100 points will be awarded to each proposal and will be used as part of the recommendation process.

Agency readiness/capacity (0-15 points)

- Overall clarity and detail of agency experience with similar and/or related projects
- Overall clarity and detail of proposed timeline and staff roles/responsibilities

Deliverables/measures of success (0-20 points)

- Overall clarity and detail of proposed project model
- What will be the deliverables of this contract if successful?
- How we will measure/demonstrate success?

Connection to the CHIP/CHA and Gap Analysis (0-30 points)

- Overall demonstrable knowledge of existing community assessments and resources and clear description of how the proposed project avoids duplication and augments services.
- How will this project expand/augment services and avoid duplication of existing services? What work has your agency done to review available resources and outline gaps/barriers?
- How will this project meet the goals/recommendations of the gap analysis? What is the problem or challenge it attempts to solve?
- If your project does not directly connect to recommendations from the Behavioral Health gap analysis, please provide an explanation.
- How will you be successful in this project given documented challenges identified in the gap analysis? (Workforce, transportation, low Medicaid-reimbursement rates, acuity of client need, etc.)

- What other stakeholders need to be involved in this project in order for it to be successful and how have they been included in its design and will be included in its implementation/evaluation?

Budget, Leverage, and Financial Sustainability (0-20 points)

- Overall clarity and detail of project budget
- What expenses will be included in your contract for County reimbursement? (i.e., staff, supplies, equipment, services, etc.)
- How will proposed expenses and/or services be sustained after the initial County investment?
- What other fund sources has the agency reviewed, applied for, vetted, etc. *Please provide documentation.*

Coordination/support of Continuum of Care Approach (0-15 points)

- Overall clarity and detail of proposed project's connection to a larger continuum of care approach
- How will this project work with/augment existing publicly-funded services (i.e. insurance reimbursements) and/or why/how is it outside of that system (i.e. incarcerated individuals)?
- How will you facilitate transitions of care – step down from crisis services and/or need for increased supports identified by community referrals?
- How will you facilitate connection to other community resources – medical, substance use, housing, employment, financial assistance/benefits, education, insurance coverage, etc.?
- How will you design and implement culturally and linguistically appropriate services for a wide array of local needs?